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PUBLIC DISCLOSURE COPY

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Form	23	
(Rev.	Janua	ry 2020)

Department of the Treasury Internal Revenue Service

** PUBLIC DISCLOSURE COPY **

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

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

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



AI	or τη	and a calendar year, or tax year beginning and a	enaing	_	
B	Check if applicat	C Name of organization INTERNATIONAL LEAGUE OF		D Employer identific	cation number
	Addr				
	Name	Doing business as	27-14559	99	
	Initial returr	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	·
	Final returr	4600 N. FAIRFAX DRIVE, 2ND FLOOR		571-354-	
	termi ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	374,813.
	Amer	ARDINGION, VA 22205		H(a) Is this a group re	
		F Name and address of principal officer: SOSAN NOR ION		for subordinates	? Yes X No
	pend	SAME AS C ABOVE		H(b) Are all subordinates in	Icluded? Yes No
		empt status: 🗴 501(c)(3) 🛄 501(c) ()◀ (insert no.) 🛄 4947(a)(1) c	or 🛄 527		list. (see instructions)
		te: WWW.CONSERVATIONPHOTOGRAPHERS.ORG		H(c) Group exemption	
	_	f organization: 🔀 Corporation 🔄 Trust 🔄 Association 🔄 Other 🕨	L Year (of formation: 2009 N	State of legal domicile: DC
Pa	art I	Summary			
ė	1	Briefly describe the organization's mission or most significant activities:	JRTHER	ENVIRONMEN	TAL AND
Activities & Governance		CULTURAL CONSERVATION THROUGH ETHICAL PHO			
ern	2	Check this box 🕨 🛄 if the organization discontinued its operations or dispos			
20	3	Number of voting members of the governing body (Part VI, line 1a)		11	
<u>ه</u>	4	Number of independent voting members of the governing body (Part VI, line 1b) $\ _{.}$		11	
ies	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)		3	
ivit	6	Total number of volunteers (estimate if necessary)		6	11
Act		Total unrelated business revenue from Part VIII, column (C), line 12		0.	
	b	Net unrelated business taxable income from Form 990-T, line 39	·····		0.
			Prior Year	Current Year	
ne	8	Contributions and grants (Part VIII, line 1h)		194,143.	361,818.
Revenue	9	Program service revenue (Part VIII, line 2g)		6,140.	9,106.
Be	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		291.	3,889.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		200,574.	374,813.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		200,574.	0.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		114,037.	122,199.
ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	······	0.	0.
Expenses	10a	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25)	21	••	•
Ä		5 1 () () 1		99,438.	233,659.
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		213,475.	355,858.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		-12,901.	18,955.
l SS	19	Revenue less expenses. Subtract line 18 from line 12		ginning of Current Year	End of Year
Net Assets or Fund Balances		Total access (Dout V. Jing 16)		32,643.	115,720.
Asse Bala	20	Total assets (Part X, line 16)		36,265.	100,162.
let ⊭	21	Total liabilities (Part X, line 26)		-3,622.	15,558.
	22	Net assets or fund balances. Subtract line 21 from line 20		-3,044.	T0,000.

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.

Sign Here	Signature of officer SUSAN NORTON, EXECUTIN Type or print name and title	/E DIRECTOR		Date
	Print/Type preparer's name	Preparer's signature	Date	
Paid	DAVID JONES			self-employed P01361002
Preparer	Firm's name 🕞 JONES, MARESCA 8			Firm's EIN 52-1853933
Use Only	Firm's address 10500 LITTLE PAT	TUXENT PARKWAY, SUITE	770	
	COLUMBIA, MD 210	Phone no. $410 - 884 - 0220$		
May the IF	RS discuss this return with the preparer shown at	oove? (see instructions)		X Yes No
932001 01-2	0-20 LHA For Paperwork Reduction Act Not	ice, see the separate instructions.		Form 990 (2019)

	INTERNATIONAL LEAGUE OF		
Form	1 990 (2019) CONSERVATION PHOTOGRAPHERS	27-1455999	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission:		
	TO FURTHER ENVIRONMENTAL AND CULTURAL CONSERVATION T	HROUGH ETHICAL	1
	PHOTOGRAPHY AND FILM.		
2	Did the organization undertake any significant program services during the year which were not listed on		
	prior Form 990 or 990-EZ?	Ye	es 🚺 No
	If "Yes," describe these new services on Schedule O.		37
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service	vices?Ye	es 🚺 No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program service		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations	to others, the total expenses	s, and
	revenue, if any, for each program service reported.	0	100
4a		· ·	,106.)
	CONSERVATION PHOTOGRAPHY EXPEDITIONS & EDUCATION: ED		
	ABOUT CRITICAL CONSERVATION ISSUES ALL OVER THE GLOB		
	OF VISUAL COMMUNICATIONS, WHICH ARE THE PRODUCT OF T		
	CONSERVATION PHOTOGRAPHY EXPEDITIONS. THE OBJECTIVE		TONS
	IS TO INTENSELY DOCUMENT AND PRODUCE A BODY OF IMAGE		
	CAPTURES THE THREATS AND OPPORTUNITIES FACED BY COMM		.
	PHYSICAL ENVIRONMENTS, ANIMAL OR PLANT POPULATIONS,		
	TRADITIONS ARE BEING IMPACTED, BOTH POSITIVELY AND N	EGATIVELY, BY	HUMAN
	ACTIVITY.		
4b	(Code:) (Expenses \$ including grants of \$)	(Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$)	(Revenue \$)
4 -1	Other program convision (Describe on Sala - 1.1. 0.)		
4d	Other program services (Describe on Schedule O.)		
-	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses ► 230,550.)	
<u>4e</u>	Total program service expenses ► 230,550.		9 90 (2019)
00000		⊢orm	2019)
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Form 990 (2019)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</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		х
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		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in 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			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			v
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11e		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			v
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	10		x
17	or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		
17	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			x
00000	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	gan	(2019)
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Pa	t IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			v
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			x
04.0	Schedule J	23		
24 a	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	5		
		24a		x
h	Schedule K. If "No," go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
Ŭ	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?			
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II			X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% contro	olled		
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III.	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	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	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," complete			v
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			x
05 -	Part V, line 1			X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	<u>35a</u>		
a	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	056		
26	within the meaning of section 512(b)(13)? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i> Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization			
36				x
37	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
00	• • • • • • • • • • • • • • • • • • • •	38	x	
Pa				<u> </u>
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a	5		
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	0		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
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Par	t 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 3								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х						
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)								
3a	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 on Schedule O								
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a								
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x					
b	If "Yes," enter the name of the foreign country								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).								
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х					
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х					
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c							
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit								
	any contributions that were not tax deductible as charitable contributions?	6a		X					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts								
	were not tax deductible?	6b							
7	Organizations that may receive deductible contributions under section 170(c).								
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b							
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required								
	to file Form 8282?	7c		Х					
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d								
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х					
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g							
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the								
	sponsoring organization have excess business holdings at any time during the year?	8							
9	Sponsoring organizations maintaining donor advised funds.								
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a							
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b							
10	Section 501(c)(7) organizations. Enter:								
а	Initiation fees and capital contributions included on Part VIII, line 12 10a								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b								
11	Section 501(c)(12) organizations. Enter:								
	Gross income from members or shareholders 11a								
b	Gross income from other sources (Do not net amounts due or paid to other sources against								
	amounts due or received from them.)								
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 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								
	Enter the amount of reserves on hand 13c			37					
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X					
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b							
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or								
	excess parachute payment(s) during the year?	15		X					
	If "Yes," see instructions and file Form 4720, Schedule N.								
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X					
	If "Yes," complete Form 4720, Schedule O.								

Form **990** (2019)

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Form 990 (2019)

Form 990 (2019)

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

	Check if Schedule O contains a response or note to any line in this Part VI				X							
Sec	tion A. Governing Body and Management											
				Yes	No							
1a	Enter the number of voting members of the governing body at the end of the tax year	1 a 11										
	If there are material differences in voting rights among members of the governing body, or if the governing											
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.											
b	Enter the number of voting members included on line 1a, above, who are independent	1b 11	L									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	p with any other										
	officer, director, trustee, or key employee?											
3	3 Did the organization delegate control over management duties customarily performed by or under the direct supervision											
	of officers, directors, trustees, or key employees to a management company or other person?											
4												
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?	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 a	ppoint one or										
	more members of the governing body?		7a		X							
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	stockholders, or										
	persons other than the governing body?		7b		X							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year											
а	The governing body?		8a	X								
b	Each committee with authority to act on behalf of the governing body?		8b	X								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea											
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O		9		X							
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenue Code.)										
				Yes	No X							
	Did the organization have local chapters, branches, or affiliates?		10a									
D	If "Yes," did the organization have written policies and procedures governing the activities of such c		104									
110	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b 11a		x							
	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	before ming the form?	Па									
	Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If</i> " <i>No</i> ," <i>go to line 13</i>		12a	x								
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise		12a	X								
	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "V		12.0									
Ū	in Schedule O how this was done		12c	x								
13	Did the organization have a written whistleblower policy?		13	X								
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 approv											
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?											
а	The organization's CEO, Executive Director, or top management official		15a	X								
	Other officers or key employees of the organization		15b		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 arrange	ment 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	te its participation										
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	nization'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, a	nd 990-T (Section 501(c)(3)s only	/) avail	able							
	for public inspection. Indicate how you made these available. Check all that apply.											
10		n on Schedule O)	ad first	noial								
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, c statements available to the public during the tax year.	ormict of interest policy, a	nu nna	ncial								
20	State the name, address, and telephone number of the person who possesses the organization's bo	ooks and records										
20	SUSAN NORTON, EXECUTIVE DIRECTOR - 571-354-0248											
		2203										
93200	\$ 01-20-20		Form	1 990	(2019)							
	б				,							

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^{2019.04030} INTERNATIONAL LEAGUE OF CON 17480_1

Form 990 (201	9) CONSERVATION PHOTOGRAPHERS	27-1
Part VII Co	ompensation of Officers, Directors, Trustees, Key Employees, Highest (Compensated
Er	nployees, 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.

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

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

(A) Name and title	(B) Average hours per	(do box	(C) Position to not check more than one by, unless person is both an fficer and a director/trustee)					(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) BUFFY REDSECKER CHAIR	5.00	x		x				0.	0.	0.
(2) DR. JEFF DORMAN	2.00			11						<u></u>
VICE CHAIR		x		x				0.	0.	0.
(3) JOHN HARRINGTON	2.00									
SECRETARY		x		x				0.	0.	0.
(4) JIM DOUGHERTY	2.00									
TREASURER		x		x				0.	0.	0.
(5) CONNIE BRANSILVER	2.00									
BOARD MEMBER		X						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		X						0.	0.	0.
(10) ROB LEE	2.00									0
BOARD MEMBER		X			<u> </u>			0.	0.	0.
(11) DECLAN MOORE	2.00							0		0
BOARD MEMBER	40.00	X			<u> </u>			0.	0.	0.
(12) SUSAN NORTON EXECUTIVE DIRECTOR	40.00			x				75,000.	0.	2,535.
					⊢					
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2019.04030 INTERNATIONAL LEAGUE OF CON 17480_1

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r ai	t VII Section A. Officers, Directors, True (A) Name and title	(B) Average hours per	(do	not c	(C Posi	C) ition		one	(D) Reportable compensation	es (continued) (E) Reportable compensatio		Est	(F) imate	
		week (list any hours for related organizations below line)	tee or director			irecto	Highest compensated		from the organization (W-2/1099-MISC)	from related organization (W-2/1099-MIS	t s	c comp fro orga and	ther	tion e on ed
									75 000		0			<u></u>
с	Subtotal Total from continuation sheets to Part V	II, Section A							75,000. 0. 75,000.		0.0.0.			35. 0. 35.
2	Total (add lines 1b and 1c) Total number of individuals (including but in compensation from the organization							no r	•	,000 of reportab	-		,,,,	0
3	Did the organization list any former officer	director, trust	ee. I	(ev e	empl	love	e. or	hic	phest compensated emr	olovee on		· · · · · · · · · · · · · · · · · · ·	Yes	No
4	line 1a? <i>If</i> "Yes," <i>complete Schedule J for</i> For any individual listed on line 1a, is the s	such individual	, 			·····	, 					3	_	X
5	and related organizations greater than \$15 Did any person listed on line 1a receive or	0,000? If "Yes,	" co	mple	ete S	Sche	edule	e J f	for such individual			4	_	X
	rendered to the organization? If "Yes," con tion B. Independent Contractors					-						5		Х
1	Complete this table for your five highest co										npens	ation fr	om	
	the organization. Report compensation for (A) Name and business			endi DNI		vith	or w	ithir	n the organization's tax (B) Description of s		С	(C) ompen		 ו
								_						
2	Total number of independent contractors (. e	iot li	mite	d to		•	stec	d above) who received n	nore than				
	\$100,000 of compensation from the organ	ization 🕨)					Form 9	90 (2	2019)

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INTERNATIONAL LEAGUE OF Form 990 (2019) CONSERV. CONSERVATION PHOTOGRAPHERS

Check if Schedule C contains a response or note to any line in this Part VII. (0) <th col<="" th=""><th></th><th></th><th>Check if Schedule O contains a response or n</th><th>note to any line</th><th>e in this Part VIII</th><th></th><th></th><th></th></th>	<th></th> <th></th> <th>Check if Schedule O contains a response or n</th> <th>note to any line</th> <th>e in this Part VIII</th> <th></th> <th></th> <th></th>			Check if Schedule O contains a response or n	note to any line	e in this Part VIII			
gas Dusines Dusines Column b DFROGRAM EVENTS 59PAKERS BUREAU REFERR 500039 2,563. 2,343. d					(A)	(B) Related or exempt	(C) Unrelated	Revenuè excluded from tax under	
gas Dusines Dusines Column b DFROGRAM EVENTS 59PAKERS BUREAU REFERR 500039 2,563. 2,343. d	ibutions, Gifts, Grants Other Similar Amounts		b Membership dues 1b 2 c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and						
gas Dusines Dusines Column b DFROGRAM EVENTS 59PAKERS BUREAU REFERR 500039 2,563. 2,343. d	ontr of O	9	g Noncash contributions included in lines 1a-1f		261 010				
generation 2 a LICENSING FEE PROGRAM EVENTS SPRARES BUREAU REFERN G SPRARES BUREAU REFERN G (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	σō			····· •	361,818.				
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Bit Less: rental expenses 6b c Rental income or (loss) 6c d Net rental income or (loss) 7a gross amount from sales of assets other than inventory 7a b Less: cost or other basis 7b c Gain or (loss) 7c c Gain or (loss) 7c d Net gain or (loss) 7c a Gross income from fundraising events (not including \$of contributions reported on line 1c). See 9a Part IV, line 18 8a b Less: circle expenses 9b c Rorss income from gaming activities. See 9a pat IV, line 19 9a b Less: circle expenses 9b c Rorss sales of inventory, less returns and allowances 10a c Net income or (loss) from gaming activities > b Less: cost of goods sold 10b c Net income or (loss) from sales of inventory > d All other revenue 10b c All other revenue 10b c All other revenue 3, 889. d All other revenue 374 , 813. 9, 106. 0.				i) Personal					
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Part IX Statement of Functional Expenses

Form 990 (2019)

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 respons not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
1	Grants and other assistance to domestic organizations		expenses	general expenses	expenses
•	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
2	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,				
	trustees, and key employees	77,535.	17,046.	60,489.	
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	34,996.	7,954.	27,042.	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	1,588.		1,588.	
0	Payroll taxes	8,080.		8,080.	
1	Fees for services (nonemployees):				
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 0.)	5,061.	2,739.	2,322.	
12	Advertising and promotion	0 050	0.001	4 200	1 01 -
3	Office expenses	8,958.	2,821.	4,320.	1,817
4	Information technology	900.			900
5	Royalties	11 007		11 000	
6	Occupancy	11,027.	10 002	11,027.	4 104
7	Travel	15,337.	10,883.	350.	4,104
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	12 020	10 007	1.0	
9	Conferences, conventions, and meetings	13,036.	12,867.	169.	
20					
21	Payments to affiliates	E 7 0		E 70	
2	Depreciation, depletion, and amortization	570.		570.	
3		1,030.		1,030.	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	FISCAL SPONSORSHIP	174,980.	174,980.		
a b	PHOTO LICENSING	1,260.	1,260.		
c		_,,			
d	-				
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	355,858.	230,550.	118,487.	6,821
. <u>5</u> 26	Joint costs. Complete this line only if the organization	,	,		- / • = =
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

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Balance Sheet

Part X

INTERNATIONAL LEAGUE OF CONSERVATION PHOTOGRAPHERS

Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 113,416. 29,468. Cash - non-interest-bearing 1 1 180. 119. 2 2 Savings and temporary cash investments Pledges and grants receivable, net 3 3 1,150. 1,050. 4 4 Accounts receivable, net 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 5 controlled entity or family member of any of these persons 6 Loans and other receivables from other disgualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 Notes and loans receivable, net 7 Assets 7 8 Inventories for sale or use 8 800. Prepaid expenses and deferred charges 9 9 **10a** Land, buildings, and equipment: cost or other 13,411. basis. Complete Part VI of Schedule D _____ 10a 13,176. 1,945. 235. b Less: accumulated depreciation _____ 10b 10c Investments - publicly traded securities 11 11 Investments - other securities. See Part IV, line 11 12 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 Other assets. See Part IV, line 11 15 15 115,720. 32,643. 16 16 Total assets. Add lines 1 through 15 (must equal line 33) 35,715. 99,862. 17 Accounts payable and accrued expenses 17 18 Grants payable 18 550. 300. 19 19 Deferred revenue Tax-exempt bond liabilities 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to any current or former officer, director, _iabilities trustee, key employee, creator or founder, substantial contributor, or 35% 22 controlled entity or family member of any of these persons 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 36,265. 100,162. 26 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here 🕨 🔀 Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. -3,622. 15,558. Net assets without donor restrictions 27 27 Net assets with donor restrictions 28 28 Organizations that do not follow FASB ASC 958, check here 🕨 🗌 and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29 Paid-in or capital surplus, or land, building, or equipment fund 30 30 31 Retained earnings, endowment, accumulated income, or other funds 31 -3,622. 15,558. Total net assets or fund balances 32 32 32,643. 115,720. 33 33 Total liabilities and net assets/fund balances ...

Form 990 (2019)

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	INTERNATIONAL LEAGUE OF				
Form	990 (2019) CONSERVATION PHOTOGRAPHERS	27-145	5999	Pa	ige 12
Par	t 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			13.
2	Total expenses (must equal Part IX, column (A), line 25)	2			358.
3	Revenue less expenses. Subtract line 2 from line 1	3			55.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	-	3,6	522.
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		2	225.
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	1	5,5	58.
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	e O.			
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 reviewe	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		. 2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	te 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	ie 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 on Sc	hedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		. 3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		. 3b		
			Form	aan	(2010)

Form **990** (2019)

Department of the Treasury	Complete if the orgar 494 ►	rity Status an hization is a section 50 47(a)(1) nonexempt cha Attach to Form 990 or F	1(c)(3) org ritable tru Form 990-	anization ust. EZ.	or a section		OMB No. 1545-0047
		/Form990 for instruction	ons and tl	he latest i	nformation.	Employee	Inspection
	ERNATIONAL	HOTOGRAPHERS					identification number 7-1455999
		All organizations must co		is part.) Se	e instruction		/ 1433333
The organization is not a private four			-				
1 A church, convention of c		•		,			
2 A school described in sec							
3 A hospital or a cooperativ	e hospital service org	anization described in s e	ection 170)(b)(1)(A)(i	ii).		
4 A medical research organ	ization operated in co	njunction with a hospita	l described	d in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,
city, and state:							
5 An organization operated		llege or university owned	d or opera	ted by a g	overnmental	unit describ	ed in
section 170(b)(1)(A)(iv).							
 6 A federal, state, or local g 7 X An organization that norm 	•				.,	ha gaparal	nublic deceribed in
7 X An organization that norm section 170(b)(1)(A)(vi).		initial part of its support i	rom a gov	ennenia		ille gellerai	public described in
8 A community trust describ		(1)(A)(vi). (Complete Par	t II.)				
9 An agricultural research o				ed in conju	inction with a	land-grant	college
or university or a non-land							
university:							
10 An organization that norm							
activities related to its exe							
income and unrelated bus		e (less section 511 tax) fr	om busine	esses acqu	lired by the o	rganization	after June 30, 1975.
See section 509(a)(2). (Control 11 An organization organi		ively to test for public sa	fety See	section 50)9(a)(4)		
12 An organization organized	-		•			arrv out the	purposes of one or
more publicly supported of		-				-	
lines 12a through 12d tha							
a Type I. A supporting or	ganization operated, s	supervised, or controlled	by its sup	ported or	ganization(s),	typically by	giving
the supported organiza	tion(s) the power to re	gularly appoint or elect a	a majority	of the dire	ctors or trust	ees of the s	upporting
organization. You must	-						
		d or controlled in connec			-		-
control or management organization(s). You mu		anization vested in the s	ame perso	ons that co	ontrol or mana	age the sup	ported
- ° · · ·	• •	g organization operated	in connec	tion with	and functiona	llv integrate	ed with
		s). You must complete I					
		oorting organization oper				rted organi	zation(s)
that is not functionally i	ntegrated. The organiz	zation generally must sa	tisfy a dist	ribution re	quirement an	d an attenti	veness
requirement (see instruc	ctions). You must cor	nplete Part IV, Sections	s A and D,	, and Part	V .		
	-	written determination fro			а Туре I, Туре	II, Type III	
		nally integrated support					
f Enter the number of supportedg Provide the following information	-	d organization(s)					
(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	anization listed ing document?	(v) Amount o	fmonetary	(vi) Amount of other
organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see i	nstructions)	support (see instructions)
	+						
Total							
LHA For Paperwork Reduction Act	Notice, see the Instr	ructions for Form 990 o	r 990-EZ.	932021 09-	25-19 Sche	dule A (For	m 990 or 990-EZ) 2019

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INTERNATIONAL LEAGUE OF

Schedule A (Form 990 or 990 EZ) 2019 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.)

See	ction A. Public Support									
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total			
1	Gifts, grants, contributions, and									
	membership fees received. (Do not									
	include any "unusual grants.")	248,694.	359,037.	433,310.	194,143.	361,818.	1597002.			
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	248,694.	359,037.	433,310.	194,143.	361,818.	1597002.			
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)						373,334.			
6	Public support. Subtract line 5 from line 4.						1223668.			
	ction B. Total Support									
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total			
	Amounts from line 4	248,694.	359,037.	433,310.	194,143.	361,818.	1597002.			
8	Gross income from interest,									
	dividends, payments received on									
	securities loans, rents, royalties,									
	and income from similar sources	6.	12.	22.			40.			
9	Net income from unrelated business									
	activities, whether or not the									
	business is regularly carried on									
10	Other income. Do not include gain									
	or loss from the sale of capital									
	assets (Explain in Part VI.)			4,305.	291.	3,889.	8,485.			
11	Total support. Add lines 7 through 10			-			1605527.			
	Gross receipts from related activities,	etc. (see instruction	ons)			12	162,831.			
	First five years. If the Form 990 is for		,							
	organization, check this box and stor									
See	ction C. Computation of Publ	ic Support Pe								
14	Public support percentage for 2019 (line 6, column (f) d	ivided by line 11, c	olumn (f))		14	76.22 %			
	Public support percentage from 2018					15	73.08 %			
	33 1/3% support test - 2019. If the o					nore, check this bo	ox and			
	stop here. The organization qualifies									
b	33 1/3% support test - 2018. If the o									
	and stop here. The organization qual	•								
1 7a										
	a 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization									
	meets the "facts-and-circumstances"			-	-	-				
h	10% -facts-and-circumstances tes									
	more, and if the organization meets the									
	organization meets the "facts-and-cire									
18	Private foundation. If the organization									
-10	i mate roundation. If the organizatio			a, 100, 17a, 01 17k		dule A (Form 990				

Schedule A (Form 990 or 990-EZ) 2019

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Schedule A (Form 990 or 990 EZ) 2019 CONSERVATION PHOTOGRAPHERS Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Calei	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 20	019 (f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")							
	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							
	Gross receipts from activities that							
	are not an unrelated trade or bus-							
	income under continue 510							
	Tax revenues levied for the organ-							
	ization's benefit and either paid to or expended on its behalf							
	The value of services or facilities furnished by a governmental unit to							
	the organization without charge							
	Total. Add lines 1 through 5							
	Amounts included on lines 1, 2, and							
	3 received from disqualified persons							
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
	Add lines 7a and 7b							
	Public support. (Subtract line 7c from line 6.)							
	tion B. Total Support		•	•	•			
aleı	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 20	019 (f) Total	
9	Amounts from line 6							
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources							
b	Unrelated business taxable income							
	(less section 511 taxes) from businesses acquired after June 30, 1975							
с	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							
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)							
13	Total support. (Add lines 9, 10c, 11, and 12.)							
14	First five years. If the Form 990 is for	the organization	s first, second, thi	rd, fourth, or fifth t	ax year as a sectio	on 501(c)(3)) organization,	
					-	<u></u>)	
Sec	tion C. Computation of Publ							
15	Public support percentage for 2019 (ine 8, column (f).	divided by line 13,	column (f))		15		%
	Public support percentage from 2018					16		%
	tion D. Computation of Invest							
	Investment income percentage for 20					17		%
	Investment income percentage from 2					18		%
	33 1/3% support tests - 2019. If the						nd line 17 is not	/0
	more than 33 1/3%, check this box a							
	33 1/3% support tests - 2018. If the						1/30/4 and	
	line 18 is not more than 33 1/3%, che							
								\exists
	Private foundation. If the organization	in alla hot check a		a, ur 190, check t				
3202	3 09-25-19			15	Sch	euule A (F	orm 990 or 990-EZ) 20	19
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INTERNATIONAL LEAGUE OF Schedule A (Form 990 or 990-EZ) 2019 CONSERVATION PHOTOGRAPHERS

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes

No

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

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Schedule A (Form 990 or 990-EZ) 2019

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INTERNATIONAL LEAGUE OF

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Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
-	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			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			
			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	-		
0	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
~	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
~	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			
Sec	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3		
-	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yeafsee ins	twy otions)		
1		tructions).		
a b	The organization satisfied the Activities Test. <i>Complete</i> line 2 <i>below.</i> The organization is the parent of each of its supported organizations. <i>Complete</i> line 3 <i>below.</i>			
b	The organization supported a governmental entity. Describe in Part VI how you supported a government entit	ty (soo instruction	.)	
с 2	Activities Test. Answer (a) and (b) below.	ly (see instructions	y. Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		165	NO
а	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
h	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	2a		
D	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.	20		
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
a	trustees of each of the supported organizations? <i>Provide details in</i> Part VI.	3a		
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
D	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	Зb		
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INTERNATIONAL LEAGUE OF Schedule A (Form 990 or 990-EZ) 2019 CONSERVATION PHOTOGRAPHERS

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) Net short-term capital gain 1 1 Recoveries of prior-year distributions 2 2 Other gross income (see instructions) 3 3 4 4 Add lines 1 through 3. 5 5 Depreciation and depletion Portion of operating expenses paid or incurred for production or 6 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) 7 8 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): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d. 3 3 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, 4 see instructions). 4 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) 8 Section C - Distributable Amount Current Year Adjusted net income for prior year (from Section A, line 8, Column A) 1 1 2 Enter 85% of line 1. 2 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 4 Enter greater of line 2 or line 3. 4 5 5 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to 6 emergency temporary reduction (see instructions). 6

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

Schedule A (Form 990 or 990-EZ) 2019

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INTERNATIONAL LEAGUE OF

	dule A (Form 990 or 990 EZ) 2019 CONSERVATION	PHOTOGRAPHERS	:	27-1455999 Page 7
Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations _(continued)	i
Secti	on 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			
	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	ne organization is responsive	e	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
с	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, 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 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			
-	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

932027 09-25-19

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Part VI Supplemen	0-EZ) 2019 CONSERVATIO	xplanations required by Part	II, line 10; Part II, line 17a o	27-1455999 Pag 17b; Part III, line 12;
line 1; Part IV,	n A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6 Section D, lines 2 and 3; Part IV, Se s 5, 6, and 8; and Part V, Section E ns.)	ection E, lines 1c, 2a, 2b, 3a, a	and 3b; Part V, line 1; Part \	/, Section B, line 1e; Part V,
SCHEDULE A, PA	RT II, LINE 10, E	XPLANATION FOR	OTHER INCOME:	
REIMBURSED PRO	GRAM EXPENSES AND	OTHER		
2017 AMOUNT: S	4,305.			
2018 AMOUNT: S	291.			
2019 AMOUNT: \$	3,889.			
932028 09-25-19			Schedul	e A (Form 990 or 990-EZ)
61027 793927	17480 2019	20 0.04030 INTERNA	TIONAL LEAGUE	OF CON 17480

Schedule B

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

Name	of the	organ	ization

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

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

OMB No. 1545-0047

2019

Employer identification number

	INTERNATIONAL	LEAGUE	OF
	CONSERVATION	PHOTOGRA	PHERS
Organization type (che	ck one):		

27	-1	۱	55	9	9	9
41	- -	÷.	ງງ	2	2	2

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

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

General Rule

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

Special Rules

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

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

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

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

Name of organization

INTERNATIONAL LEAGUE OF CONSERVATION PHOTOGRAPHERS

27-1455999

Part I	Contributors (see instructions). Use duplicate copies of Part I if ac	ditional space is needed.	
(a)	(b)	(c)	(d)
<u>No.</u>	Name, address, and ZIP + 4	Total contributions	Type of contribution Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$15,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>35,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$11,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$12,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
923452 11-06	5-19 	Schedule B (Form	990, 990-EZ, or 990-PF) (2019)

Page **2**

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Schedule B	(Form 990,	990-EZ, o	or 990-PF)	(2019)
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Name of organization

INTERNATIONAL LEAGUE OF CONSERVATION PHOTOGRAPHERS

Page 3 Employer identification number

27-1455999

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I \$ (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I \$ (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I \$ (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I \$ (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I \$ (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I \$ 923453 11-06-19 Schedule B (Form 990, 990-EZ, or 990-PF) (2019) 23 2019.04030 INTERNATIONAL LEAGUE OF CON 17480_1

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ONSERVA	IONAL LEAGUE OF TION PHOTOGRAPHERS			27-1455999			
froi	clusively religious, charitable, etc., contrib m any one contributor. Complete columns (apleting Part III, enter the total of exclusively religious e duplicate copies of Part III if additiona	a) through (e) and the following line e s, charitable, etc., contributions of \$1,000 o	ntry For organizations				
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) [Description of how gift is held			
		(e) Transfer of g	ift				
	Transferee's name, address,	and ZIP + 4	Relationship o	f 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 g	ift				
	Transferee's name, address,	and ZIP + 4	Relationship o	f 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,	and ZIP + 4	Relationship o	f transferor to transferee			
a) No							
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) [Description of how gift is held			
		(e) Transfer of g	 ift				
	Transferee's name, address,	and ZIP + 4	Relationship o	f transferor to transferee			
454 11-06-19		24	Sche	dule B (Form 990, 990-EZ, or 990-P			

	SCHEDULE D Supplemental Financial Statements OMB No. 1545-0047 2010						47				
(Forr	n 990)	► 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.								to Pub	lic
	ment of the Treasury I Revenue Service	Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.							Inspec		inc.
Nam	e of the organizati	•	ERNATION						r identificat		
					GRAPHERS				27-1455		
Pa			-			her Similar Fund	ds or A	ccounts.	Complete if	the	
	organizatio	n answered	"Yes" on Form	990, Part IV, Iir		dvised funds	1 (h) Funds ar	nd other acc	ounts	
1	Total number at er	nd of year								ounto	
2	Aggregate value o										
3	Aggregate value o										
4	Aggregate value a										
5						ets held in donor ad	vised fun	ds			
	are the organizatio	on's propert	y, subject to the	organization's	exclusive legal cor	ntrol?			Yes		No
6	Did the organization	on inform all	l grantees, dono	rs, and donor a	advisors in writing t	hat grant funds can b	be used o	only			
					,	for any other purpos		0			-
Pa	impermissible prive								. Ves		<u>No</u>
						d "Yes" on Form 990	, Part IV,	line 7.			
1					ion (check all that a ation or education)	Preservation	of a histo	vrically impo	utant land a	202	
	Protection o			stample, recrea		Preservation		• •		ca	
	Preservation										
2		• •		on held a quali	fied conservation c	ontribution in the for	m of a co	nservation	easement or	n the la	ast
	day of the tax year	r.	C C					Held	at the End of	the Ta>	x Year
а	Total number of co	onservation	easements					2a			
b	Total acreage rest	ricted by co	onservation ease	ments				2b			
С	Number of conser	vation ease	ments on a certi	fied historic st	ructure included in	(a)		2c			
d						not on a historic stru					
_								2d			
3		vation ease	ments modified,	transferred, re	eleased, extinguishe	ed, or terminated by t	the organ	ization duri	ng the tax		
4	year	whore prop	ortu cubicat ta a	onconvotion on	sement is located						
4 5						nspection, handling of	– of				
5	violations, and enf			• • •		ispection, nandling c			Yes		No
6						ons, and enforcing co				e vear	
				5, 1 5,	5	, 3			5	,	
7	Amount of expens	ses incurred	in monitoring, ir	nspecting, hand	dling of violations, a	and enforcing conser	vation ea	sements du	uring the yea	ar	
	▶\$										
8	Does each conser	vation ease	ment reported o	n line 2(d) abo	ve satisfy the requi	rements of section 1	70(h)(4)(E	3)(i)			_
									L Yes		_ No
9			•			s revenue and expen					
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the										
Pa	organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.										
1 41			-		n 990, Part IV, line 8	-	other				
1 a		-				ts revenue statemen	t and bal	ance sheet	works		
	0	,	•		, ,	cation, or research in					
	-			•		at describes these it					
b	If the organization	elected, as	permitted unde	r FASB ASC 98	58, to report in its re	evenue statement an	d balanc	e sheet woi	rks of		
	b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service,										
	provide the following amounts relating to these items:										
	(i) Revenue inclu	ded on Forr	m 990, Part VIII,	line 1							
	(ii) Assets included in Form 990, Part X										
2						nilar assets for financ	cial gain,	provide			
	-	-	-		ASC 958 relating to						
											0.0040
	For Paperwork Ro		ci notice, see t	ne instruction	101 FUTIH 990.			Sche	edule D (For	iii 990)	j 20 19
99709	10-02-19				25						

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		TIONAL LE							
		ATION PHO						1455999	
Par	t III Organizations Maintaining C	Collections of	Art, His	torical Tr	easures, o	or Other	Similar As	sets(continu	ied)
3	Using the organization's acquisition, access	ion, and other reco	ords, chec	k any of the	following that	at make sig	nificant use o	f its	
	collection items (check all that apply):								
а	Public exhibition		d 🗌	Loan or exc	hange progra	am			
b	Scholarly research		е 🗌	Other					
с	c Preservation for future generations								
4	Provide a description of the organization's c	ollections and exp	lain how t	hey further t	he organizati	ion's exem	pt purpose in	Part XIII.	
5	During the year, did the organization solicit of								
	to be sold to raise funds rather than to be m	aintained as part o	of the orga	nization's c	ollection?			Yes	No No
Par	t IV Escrow and Custodial Arran							IV, line 9, or	
	reported an amount on Form 990, Pa			•			,		
1a	Is the organization an agent, trustee, custod	lian or other interm	nediary for	contribution	ns or other as	ssets not ir	ncluded		
	on Form 990, Part X?							Yes	🗌 No
b	If "Yes," explain the arrangement in Part XIII								
		·	U U					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								
	t V Endowment Funds. Complete								
	· · · ·	(a) Current year		Prior year) Three years b	ack (e) Four y	/ears back
1a	Beginning of year balance			,			, ,		·
	Contributions							_	
	Net investment earnings, gains, and losses								
	Grants or scholarships								
	Other expenditures for facilities								
•	and programs								
f	Administrative expenses								
	End of year balance								
2	Provide the estimated percentage of the cur	rent vear end hala	Ince (line 1	a column (a)) held as:			I	
	Board designated or quasi-endowment	fort your one bala	%	ig, oolaniin (
	Permanent endowment	%	/0						
		%							
Ŭ	The percentages on lines 2a, 2b, and 2c sho	· ·							
32	Are there endowment funds not in the posse		nization th	at are held a	and administe	ared for the	organization		
ou	by:	coston of the organ					organization	5	res No
	-							3a(i)	
h	(ii) Related organizations 3a(ii) b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b								
4									
	t VI Land, Buildings, and Equipn	¥	luowineni	iunus.					
1 41	Complete if the organization answere		000 Part I	V line 112 9	See Form 99() Part X li	ne 10		
	Description of property	(a) Cost o			t or other		cumulated	(d) Book	value
	Description of property	basis (inve			(other)		eciation	(u) BOOK	value
19	Land				(3	Gopi			
	Land								
	Buildings Leasehold improvements								
				1	3,411.	· · · · · · · · · · · · · · · · · · ·	13,176.		235.
	EquipmentOther						,_,_,		
	Add lines 1a through 1e. (Column (d) must e		art X colu	nn (R) line '	10c)				235.
TOLA	\mathbf{A} Aud miles ta through the (Column (d) must e	quai i 0111 990, Pa	ai i A, COIUI	יייי, <i>וווופ</i> ו, וווופ			····· 🔽		255.

Schedule D (Form 990) 2019

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INTERNATIONAL	LEAGUE OF
CONSERVATION	PHOTOGRAPHERS

	(Form 990) 2019	CONSERVAT
Part VII	Investments -	Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(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 end-of-year market value
(1)		
(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" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

	(a) Description	(b) Book value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Cold	umn (b) must equal Form 990, Part X, col. (B) line 15.)	
Part X	Other Liabilities.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25	
1	(a) Description of liability	(b) Book value

(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII...

932053 10-02-19

INTERNATIONAL LEAGUE OF								
Sche	dule D (Form 990) 2019 CONSERVATION PHOTOGRAPHERS	27-1455999 Page 4						
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue 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 statements							
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:							
а	Net unrealized gains (losses) on investments	2a						
b	Donated services and use of facilities	2b						
с	Recoveries of prior year grants							
d								
е	Add lines 2a through 2d		2e					
3	Subtract line 2e from line 1							
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:							
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a						
b	Other (Describe in Part XIII.)	4b						
с	Add lines 4a and 4b							
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)							
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem	ents With Exp	enses per Return.					
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a							
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:							
а	Donated services and use of facilities	2a						
b	Prior year adjustments	2b						
с	Other losses	2c						
d	Other (Describe in Part XIII.)	2d						
е	Add lines 2a through 2d							
3 Subtract line 2e from line 1								
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:								
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a						
b	Other (Describe in Part XIII.)	. 4b						
С	Add lines 4a and 4b							
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)								
Part XIII Supplemental Information.								

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

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ Go to www.irs.gov/Form990 for the latest information.

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 ALTERED OR REPEALED BY SUCH COMMITTEE. AMENDED,

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

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

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

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

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

THE ORGANIZATION UTILIZES A COMPENSATION SURVEY OR STUDY TO DETERMINE THE LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2019) 932211 09-06-19 29

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	Schedule O (Form 990 or 990-EZ) (2019)					
Name of the organization INTERNATIONAL LEAGUE OF CONSERVATION PHOTOGRAPHERS					Employer identification number 27-1455999	
EXECUTIVE DIR	ECTOR'S COMPEN	ISATION. THE	E COMPENSATI	ION IS TH	EN APPROVED	BY THE
BOARD OF DIRE	CTORS. THE MOS	ST RECENT CO	MPENSATION	REVIEW W	AS IN JANUAR	RY OF

2020.

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

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FORM 990 AVAILABLE TO

THE PUBLIC UPON WRITTEN REQUEST.

932212 09-06-19