For the 2018 calendar year, or tax year beginning

C Name of organization

Doing business as

PrintType greparers name

HARVEY JUDKOWITZ

Firm s name

Paid

Preparer

Use Only

Department of the Treasury Internal Revenue Service

Check if applicable

Address change

Namo change

2018

Open to Public

Inspection

D Employer identification number

58-2385869

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.

THE INTERNATIONAL SEAKEEPERS

SOCIETY INC

and ending

Number and street (or P O box if mail is not delivered to street address) 305-448-7089 255 ARAGON AVE 3RD FLOOR Initial return Final return City or town, state or province, country, and ZIP or toroign postal code term nated CORAL GABLES PL 33134 20,740,675 G Gross receipts \$ Amended return Name and address of principal officer M(a) is this a group return for subordinates? Yes X No Application pending RICHARD SNOW Yes No 255 ARAGON AVE H(b) Are all subordinates included? If 'No." attach a list (see instructions) CORAL GABLES FL 33134 X 501(c)(3) 501(c) (www.seakeepers.org H(c) Group exemption number X Corporation Trust Year of formation 1998 M State of legal domicile Form of organization Association Other D Part I Summarv 1 Briefly describe the organization's mission or most significant activities: See Schedule O Activities & Governance 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed % of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 4 Number of independent voting members of the governing body (Part VI) line 1b)RECEIVED 2 4 5 Total number of individuals employed in calendar year 2018 (Part V. line 2a 40 6 Total number of volunteers (estimate if necessary) 6 AUG 1 4 2020 7a 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 0 SCANNED DEC 1 4 2021 **Current Year** OGDEN 433. 313 19,202,198 8 Contributions and grants (Part VIII, line 1h) 852,620 1,538,477 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 5,285,933 20,740,675 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 0 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 140,624 217,914 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 7,465 16a Professional fundraising fees (Part IX, column (A), line 11e) 21,138 b Total fundraising expenses (Part IX, column (D), line 25) ▶ 680,100 9,594,191 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 820,724 9,819,570 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 4,465,209 10,921,105 19 Revenue less expenses. Subtract line 18 from line 12 End of Year Beginning of Current Year <u>22,530,676</u> 33,239,119 20 Total assets (Part X, line 16) 26,631 270 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20 22,504,045 33,238,849 Signature Block Under penalties of penury, I declare that I have examined this return, including accompanying schodules and statements, and to the best of my knowledge and belief, it is Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge true correct, and complete Sign Snow Here

HARVEY JUDKOWITZ

33176-7121

HARVEY JUDKOWITZ,

14241 SW 92ND AVE

MIAMI, FL

May the IRS discuss this return with the preparer shown above? (see instructions)

For Paperwork Reduction Act Notice, see the separate instructions.

91 138

Firm's EIN

Check

povolamo flor

X II PTIN

P00576177

65-0214942

305-378-1948

X Yes No

Form 990 (2018)

Date

03/07/19



Form 990 (20	18) THE	INTERNATIO	NAL SEAKEEP	ERS	58-2385869)	Page 2
Part III			ervice Accompli		in this Don't III		[x]
1 Buefly		organization's mission	tains a response o	or note to any line	in this Part III	· · · · · · · · · · · · · · · · · · ·	[vi
-	chedul	_	•				
	organization orm 990 or 99		cant program services	during the year which	were not listed on th	e	Yes X No
II "Yes.	" describe the	se new services on S	Schedule O.				-
3 Did the service:	-	cease conducting, or	make significant chan	ges in how it conducts	, any program		Yes X No
If "Yes,	" describe the	se changes on Sche	dule O.				
			ice accomplishments fo	_	_	•	
) organizations are req	•	ount of grants and all	locations to others.	
the tota	i expenses. a	no revenue. Il any, ic	or each program servic	е геропеа.			
IMMED SEAKE OVER. KEEPI WORLD DURIN	L CHAR! LATELY EPERS (THE CI NG DON! 'S OCE! G 2018	DELIVERED OVER THREE HARTERING I ATED VESSEI ANS AND OFI , SEAKEEPEI	799,082 incl 1 - A YACHT TO A CHARTI YEARS, WITI PROGRAM EASI LS AND FACII FERS RESEARC RS TRANSFERI CHARTERING	OR TENDER I ERING AGENT H A PURCHAS: ES THE BURDI LITATES SEAI CH PLATFORMS RED OWNERSH:	. CHARTER ING OPTION EN OF SIGN KEEPERS' M S TO THE S	REVENUE IS AFTER THE IFICANT COS ISSION TO P CIENTIFIC C	PAID TO TERM IS TS OF RESERVE THE OMMUNITY.
WHICH SCIEN HOSTI SCIEN ENABL	VERY YATER TO THE TOTAL TO THE TOTAL	ITATE PROGI DISCOVERY, RNING EXCUI RESEARCH FO MPLISHMENTS	14,236 incl AM - DISCOVI RAMMING BY I COMMUNITY (RSIONS FOR I OR GENOME SI B. PROGRAMMI TIONS, INSTI	ERY YACHTS A PROVIDING AC DUTREACH AND UNDERPRIVILING EQUENCING, T ING IS COMPI	CCESS TO T D ARTISTIC EGED KIDS ' YACHTS ARE RISED OF T	HE OCEAN FO INSPIRATIO TO FACILITA THE PLATFO HREE CATEGO	R RESEARCH, N. FROM TING RM TO RIES:
4c (Code SPECI		Expenses \$ NT EXPENSES		uding grants of \$) (Revenue \$	73,206)
4d Other p	rogram servic	es (Describe in Sche	edule O.)	······································			
(Expens			including grants of S) (Revenue \$		
4e Total pr	ogram servic	e expenses 🕨	895,60	<u>/</u>			

Page 3

	1 990 (2018) THE INTERNATIONAL BEAKEEPERS 58-2385869 /			age :
P	rt 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."		108	NO
	complete Schedule A		X	
2	Is the organization required to complete Schedule B. Schedule of Contributors (see instructions)?	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	<u> </u>	X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,		۱.,	
	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	6		x
7	"Yes." complete Schedule D. Part I Did the organization receive or hold a conservation easement, including easements to preserve open space.	<u> </u>		<u> </u>
•	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, time 21, for eacrow 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. Pert IV	9		X
0	Old 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
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D. Parts VI.	3	,C.	
	VII, VIII, IX, or X as applicable		1	ļ. ·
8	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D. Part VI	11a	X	<u> </u>
þ	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	<u>115</u>	 	X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more		1	x
	of its total assets reported in Part X. line 16? If "Yes," complete Schedule D. Part VIII	11c	├	
d		118		x
e	reported in Part X. line 167 if "Yes." complete Schedule D. Part IX Did the organization report an amount for other liabilities in Part X, line 257 if "Yes," complete Schedule D. Part X	110	_	X
f		1.,0	<u> </u>	
٠	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D. Pert X	111		x
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes." complete			
	Schedule D. Peris 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	L	X
3	is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
4a	Did the organization maintain an office, employees, or agents outside of the United States?	148	<u> </u>	X
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking.			1
	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
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	1 45		٠,
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	16		x
7	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 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 (see instructions)	17	x	
8	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	L
9	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
:0a	Did the organization operate one or more hospital facilities? If "Yes." complete Schedule H	20a		X
h	If 'Ves' to line 20s, did the organization attach a copy of its guidited financial statements to this return?	20b	ı	1

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II

	art IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX. column (A), line 27 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	1		
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes." complete Schedule J	23		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			l
	through 24d and complete Schedule K. If "No." go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		ـــــ
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		<u> </u>
d	and the second s	24d	L	<u> </u>
25a	The state of the s			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
þ	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, 6, or 22 for receivables from or payables to any			1
	current or former officers, directors, trustees, key employees, highest compensated employees, or			1
	disqualified persons? If "Yes." complete Schedule L. Part II	26		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			ĺ
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L.	,		
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):		, 7	ļ
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L. Part IV	28b		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	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	30		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? If "Yes,"			
	complete Schedule N. Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	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 Part V. line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
þ	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	į į		
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	36b		L
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes." complete Schedule R. Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	1 1		
	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			
	197 Note. All Form 990 filers are required to complete Schedule O.	38		X
Pε	rt V Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V			<u> </u>
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 10			ŀ
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	<u>'</u>	}	
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			l
•			X	4

Pa	int v Statements Regarding Other IRS Filings and Tax Compliance (conlin	ueo)	······································		_	
20	Enter the number of employees expected as Form M. 2. Transmitted of Micro and Toy	1	1		Yes	No
28	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			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax return			2ь	x	
·	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions			1.5	-	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	,		За	1	x
b	If "Yes." has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule	0		3b		+**
			th over	1 30		\vdash
70	a financial account in a foreign country (such as a bank account, securities account, or other financial		-	4a		x
b	If "Yes." enter the name of the foreign country:	4000	J. (7)	7.0		
-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	CCOUR	is (FRAR)	1	İ	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		x
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction.	tion?		5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e		1		
	organization solicit any contributions that were not tax deductible as charitable contributions?	•		6a		x
ь	If "Yes." did the organization include with every solicitation an express statement that such contribute	ns or				
_	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).				7	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for g	oods		ľ	′	1
_	and services provided to the payor?	,		7a		x
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	s				
_	required to file Form 8282?	•		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
8	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or		?	76		x
1	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control			7f		X
а	If the organization received a contribution of qualified intellectual property, did the organization file Fo		99 as required?	79		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h	X	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintaine					
	sponsoring organization have excess business holdings at any time during the year?	•		8		X
9	Sponsoring organizations maintaining donor advised funds.				•	
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a_		x
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			d 8		X
10	Section 501(c)(7) organizations. Enter:				,	Ι
a	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:				ľ	
а	Gross income from members or shareholders	11a			١,	ŀ
b	Gross income from other sources (Do not net amounts due or paid to other sources				,	
	against amounts due or received from them.)	11b			ľ	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041	?	12a	L	
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.			L	L	<u> </u>
a	Is the organization licensed to issue qualified health plans in more than one state?			13a		ــــــ
	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		•		١.	l
	the organization is licensed to issue qualified health plans	13b			Ι΄,	
C	Enter the amount of reserves on hand	13c				<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a	<u> </u>	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule	0		14b		↓
15	is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune	ration	or			
	excess parachute payment(s) during the year?			15	<u> </u>	X
	If "Yes." see instructions and file Form 4720, Schedule N				1	
16	is the organization an educational institution subject to the section 4968 excise tax on net investment	incom	10?	16_	 	X
	If "Yes," complete Form 4720, Schedule O.				بيا	<u></u>
				For	m 991	0 (2018)

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and

255 ARAGON AVE

State the name, address, and telephone number of the person who possesses the organization's books and records >

305-448-7089 Form 990 (2018)

RICHARD SNOW

CORAL GABLES

financial statements available to the public during the tax year

DAA

Form 990 (2018)

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.

K 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 week (hist any hours for	(C) Position (do not check mor, box, unless persor officer and a direct				on nore then one son is both an ector/trustee)		(O) Reportable compensation from the	(E) Reportable componsation from related organizations (W-2/1099 MISC)	(F) Estimated amount of other compensation from the	
	rolated organizations below detted tine)	Individual trustee or director	Instantional oustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099 MISC)	(W.Z. IOSS IMSC)	organization and related organizations	
(1)MICHAEL MOORE	0.00										
GUNTRWAN	8.00			x	•			0	o	o	
CHAIRMAN (2) JAY WADE	0.00	┢	┝	1	⊢	-	-	0	<u> </u>		
(2)ORI WADE	8.00			1	l						
VICE CHAIRMAN	0.00	·		x				0	o	0	
(3) JULIEN CHANG	0.00	1		<u> </u>	┢	-	┢	· · · · · · · · · · · · · · · · · · ·			
(0,000000000000000000000000000000000000	4.00	l		ļ			l				
OFFICER	0.00	1		x	l		ŀ	o	0	0	
(4) CHARLES PORTER					┢					 	
• •	0.00										
OFFICER	0.00			X				0	0	0	
(5) FRANK WLASEK				Г							
	0.00						İ				
OFFICER	0.00			X				0	0	0	
(6) RICHARD SNOW											
PRESIDENT	40.00			x				114,470			
(7) GLENN ALLEN											
	8.00				ĺ	l					
OFFICER				X						_	
(8) MARK LUTHER	2 22										
OFFI CED	2.00						ŀ				
OFFICER	 	-	_	X	├	├	—				
(9)	1										
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1117											
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Farm 990 (2018)

SEAKEEPERS 03/07/2019 1 43 PM Form 990 (2018) THE INTERNATIONAL SEAKEEPERS 58-2385869 Page 8 Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) Part VII (F) Name and title Averago Position Reportable Renortable Estimated componsation from amount of hours per (do not chack more than one componention related othar box, unless person is both an from week (list any officer and a director/trustee) erganizations componsation organization (W-2/1099 MISC) from the hours for Institutional busine (W-2/1099-MISC) related organization and related Organizations employee organizations below dolled lino) 1b Sub-total Total from continuation sheets to Part VII, Section A 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 compensation from the organization > 0 Yes No Old the organization list any former officer, director, or trustee, key employee, or highest compensated 3 X employee on line 1a? If "Yes," complete Schedule J for such individual 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 X 4 individual Did any person listed on tine 1a receive or accrue compensation from any unrelated organization or individual for services 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)

Name and business address	Description of services	Compensation
Total number of independent contractors (including but not limited to received more than \$100,000 of compensation from the organization.)	o those listed above) who	

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (A) Total revenue (C) (D) Revenue (B) Related or Unrelated exempt function excluded from tax under sections 512-514 revenue revenue Grants mounts 2,866 1a Federated campaigns 1a 3,332 b Membership dues 16 c Fundraising events 10 d Related organizations 1d @ Government grants (contributions) 1e f All other contributions, gifts, grants. and similar amounts not included above 16 19,196,000 19,126,000 9 Noncash contributions included in lines 1a-1f h Total. Add lines 1a-1f 19,202,198 Program Service Revenue Busn. Code 2a YACHT CHARTER 1,435,192 1,435,192 73,206 73,206 ь SPECIAL EVENTS 19,579 19,579 VENDOR REPINOS C 10,500 10,500 đ CUBA E3 EXPERIENCE f All other program service revenue g Total. Add lines 2a-2f 1,538,477 3 Investment income (including dividends, interest. and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Roat (ii) Personal 6a Gross rents b Less regial exps C Rental no or (loss) Net rental income or (loss) Þ 78 Gross amount from (i) Securities (ii) Other sales of assets other than inventor b Less cost or other basis & sales exps c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events Revenue (not including \$ of contributions reported on line 1c). See Part IV. line 18 b Less direct expenses c Net income or (loss) from fundraising events \triangleright 9a Gross income from gaming activities See Part IV. line 19 b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold b c Net income or (loss) from sales of inventory Miscollangous Rovenuo Busn Code 11a b All other revenue Total. Add lines 11a-11d 0 0 20,740,675 1,538,477 Total revenue. See instructions

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX Do not include amounts reported on lines 6b, (A) Total expenses (B) Program service (D) Management and Fundra sino 7b, 8b, 9b, and 10b of Part VIII. exponses general expenses epensos Grants and other assistance to domestic organizations and domestic governments. See Part IV line 21 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 Benefits paid to or for members Compensation of current officers, directors, 114,470 114,470 trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(8) 103,444 103,444 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits Payroll taxes 11 Fees for services (non-employees) 68,365 22,500 a Management 32,132 13,673 b Legal 5,050 5,050 Accounting d Lobbying e Professional fundraising services. See Part IV, line 17 7,465 7,465 f Investment management fees g. Other (If line 11g amount exceeds 10% of line 25 column 9,465,796 9,465,796 (A) amount list line 11g expenses on Schedu'e O) 794 794 12 Advertising and promotion 2,019 2,019 13 Office expenses 5,671 Information technology 5,671 Royalties 15 17,348 17,348 16 Occupancy 17 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings Interest 20 Payments to affiliates 21 22 Depreciation, depletion, and amortization Insurance 23 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 O) WEBSITE 5,671 5,671 EMPLOYEE PARKING 4,995 4,995 BANK FEES 4,215 4,215 PRESIDENT EXPENSES 3,236 3,236 11,031 11,031 e All other expenses 9,591,740 21,138 9,819,570 206,632 Total functional expenses. Add lines 1 through 24e 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)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) **(B)** Beginning of year End of year Cash-non-interest bearing 206,515 216,819 2 Savings and temporary cash investments 760 2 760 3 Pledges and grants receivable, net 1,140,935 Accounts receivable, net 4 1,344,074 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or 31,677,466 other basis. Complete Part VI of Schedule D. 10a 10b 21,182,466 31,677,466 b Less: accumulated depreciation 10c 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 16 22,530,676 33,239,119 Total assets. Add lines 1 through 15 (must equal line 34) 18 16 17 26,631 17 Accounts payable and accrued expenses 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors. trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 25 Other habilities (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 26,631 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here X and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 22,504,045 33,238,849 27 27 Unrestricted net assets 28 Temporarily restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 32 32 33,238,849 22,504,045 Total net assets or fund balances 33 33,239,119 22,530,676 Total trabilities and net assets/fund balances

Form 990 (2018)

om	1 990 (2018) THE INTERNATIONAL SEAKEEPERS 58-2385869			Pag	_{1e} 12
Pa	irt 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	20,74		
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,81	9,	<u>570</u>
3	Revenue less expenses Subtract line 2 from line 1	3	10,92	1,:	105
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	22,50	4,	045
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	10,52	9,3	286
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X. line				
	33, column (B))	10	43,95	4,4	436
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		[, ,	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			, ,	. 1
	Schedule O.			•	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		20		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or		1	١ ا	,
	reviewed on a separate basis, consolidated basis, or both:		I, I	٠	
	Separate basis Consolidated basis Both consolidated and separate basis			.	
b	Were the organization's financial statements audited by an independent accountant?		2ь		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			,	
	separate basis, consolidated basis, or both		1	, ,	• •
	Separate basis Consolidated basis Both consolidated and separate basis			. '	``
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight			I	
	of the 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				`
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		
þ	If "Yes" did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b		
			Form	990	(2018)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 601(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust

• Attach to Form 990 or Form 990-EZ.

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

THE INTERNATIONAL SEAKEEPERS

Employer Identification number 58 - 2385869

			SOCIETY	INC				58-238	35869	
P	art l	Reas	on for Public	Charity	Status (All organizations	must c	omplete	e this part.) See instructi	ons.	
The	orga	nization is not	a private foundati	on becaus	se it is: (For lines 1 through 12,	check onl	y one box	(.)	40	
1		A church, co	nvention of church	es, or ass	ociation of churches described	in section	n 170(b)(1)(A)(i).	$g \setminus (x)$	
2		A school des	school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 980 or 990-EZ))							
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).								
4		A medical re	search organizatio	n operate	d in conjunction with a hospital	described	in sectio	on 170(b)(1)(A)(iii). Enter the I	hospital's name.	
		city, and stat	e:		•					
5		An organizat	on operated for th	e benefit	of a college or university owned	or operat	ed by a g	overnmental unit described in		
			(b)(1)(A)(iv). (Com							
6		A federal, ste	ate, or local govern	ment or g	overnmental unit described in s	section 17	70(b)(1)(A	\)(v).		
7			ion that normally resection 170(b)(1)		substantial part of its support fromplete Part II)	om a gov	ernmenta	I unit or from the general publi	c	
8		A community	trust described in	section	170(b)(1)(A)(vi). (Complete Par	t II.)				
9		An agricultur	al research organi	zation des	scribed in section 170(b)(1)(A)((x) operat	ed in con	junction with a land-grant colle	ege .	
					of agriculture (see instructions).					
10	X	An organizat	on that normally re	eceives: (1) more than 33 1/3% of its sup	port from	contributi	ons, membership fees, and gr	088	
					npt functions—subject to certain	•		•	1	
					nd unrelated business taxable ii					
44	\Box				0, 1975. See section 509(a)(2)					
11 12	H	=	-	-	exclusively to test for public saf exclusively for the benefit of, to	•			2000	
12		•	•	•	exclusively for the benefit of, to zations described in section 50	•		•		
				_	hat describes the type of suppo				• •	
	а	····		-	erated, supervised, or controlle				_	
					wer to regularly appoint or elect					
		supportin	ng organization. Yo	u must c	omplete Part IV, Sections A a	ind B.				
	b				pervised or controlled in conne					
					rting organization vested in the	same per	sons that	control or manage the support	ted	
			• •	•	Part IV, Sections A and C.					
	С				supporting organization operate structions). You must complete				vith.	
	d		•	-	A supporting organization operation					
					e organization generally must s	-		•	1855	
	e	$\overline{}$	•	•	must complete Part IV, Section served a written determination fr					
	•				n-functionally integrated suppor			s a Type I, Type II, Type III		
	f		nber of supported		• •					
	g	Provide the f	ollowing informatio	n about th	ne supported organization(s).					
(I	Name	o of supported	(II) EIN		(iii) Type of organization		nganization	(v) Amount of monotory	(vi) Amount of	
	org	anization			(described on lines 1–10	1		600a) hoqqua	other support (see	
]		above (see instructions))	Yes	No	instructions)	instructions)	
747						 '''	- NO			
(A)						1				
(B)						 	<u> </u>		· · · · · · · · · · · · · · · · · · ·	
νω,						1				
(C)						 	<u> </u>		†	
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(E)										
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Tota	<u> </u>		<u> </u>			l	L		1	

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

supported organization

instructions

Schedule A (Form 990 or 990-EZ) 2018

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.)

	if the organization falls to	quality under tr	ne tests listed	below, please	complete Part	II.)	
	tion 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				,-,	1,7,22.2	(1)
	fees received. (Do not include any "unusual grants.")	49,114	9,435,273	8,794,178	4,433,313	19,202,198	41,914,076
2	Gross receipts from admissions, merchandise				· ·		<u> </u>
	sold or services performed, or facilities						
	furnished in any activity that is related to the organization's tax-exempt purpose	234,375	4,769	1,084,087	852,620	1.538,477	3,714,328
3	Gross receipts from activities that are not an						
•	unrelated trade or business under section 513	698,591					698,591
4	Tax revenues levied for the			· · · · · · · · · · · · · · · · · · ·			
	organization'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			i			
	organization without charge						
6	Total. Add lines 1 through 5	982,080	9,440,042	9,878,265	5,285,933	20,740,675	46,326,995
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3					Ì	
	received from other than disqualified			Í	İ		
	persons that exceed the greater of \$5,000			1			
	or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from	ľ	اھي . اور		:		
	line 6.)	<u> </u>	<u>, </u>	<u> </u>	1		46,326,995
200	tion B. Total Support			····		· · · · · · · · · · · · · · · · · · ·	
	idar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6	982,080	9,440,042	9,878,265	5,285,933	20,740,675	46,326,995
10a	Gross income from interest, dividends.						
	payments received on securities loans, rents.						
	royalties, and income from similar sources						
þ	Unrelated business taxable income (less						
	section 511 taxes) from businesses acquired after June 30, 1975					ļ	
	acquired after June 30, 1975						· · · · · · · · · · · · · · · · · · ·
C	Add lines 10a and 10b						
11	Net income from unrelated business			· ·			
• •	activities not included in line 10b, whether				ŀ		
	or not the business is regularly carned on						
12	Other income. Do not include gain or				1		
	loss from the sale of capital assets (Explain in Part VI.)						
13							
	Total support. (Add lines 9, 10c, 11, and 12)						
14		982,080	9,440,042	9,878,265	5,285,933	20,740,675	46,326,995
14	First five years. If the Form 990 is for the organization, check this box and stop here		secona, inira, iol	inn, or tinn tax year	ras a section 501(C)(3) .	_ [7]
Sac	tion C. Computation of Public Su		\ <u></u>	·			<u> </u>
				- (0)		Lat T	
15	Public support percentage for 2018 (line 8.			ın (1))		16	100.00%
16	Public support percentage from 2017 Sche					[16]	100.00%
	tion D. Computation of Investme					14-1	
17	Investment income percentage for 2018 (II		•	, column (f))		17	<u>%</u>
18	Investment income percentage from 2017					18	
19a	33 1/3% support tests—2018. If the organ					•	. (▽)
	17 is not more than 33 1/3%, check this bo	•	•	•			▶ [X]
Ь	33 1/3% support tests—2017. If the organ						
	line 18 is not more than 33 1/3%, check thi	•	-	•		-	
20	Private foundation. If the organization did	i not check a box on	iline 14, 198, or '	19b. check this box	and see instruction	กร	▶

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

- 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
- 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)? // "Yes." answer
- 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 end 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
- 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
- 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)
- 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, (a) 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?
- 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.
- 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)
- 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.
- 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.
- 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.
- 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
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DAA

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

2 Enter 85% of line 1.

Enter greater of line 2 or line 3.

Income tax imposed in prior year

Minimum asset amount for prior year (from Section B, line 8, Column A)

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

Schedule A (Form 990 or 990-EZ) 2018 THE INTERNATIONAL SEAKEEPERS 58-2385869 Page 6 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) 1 Net short-term capital gain 1 2 2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 3 4 Add lines 1 through 3 4 5 Depreciation and depletion 5 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 6 7 Other expenses (see instructions) 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 16 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 Subtract line 2 from line 1d. 3 4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). 5 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 6 Multiply line 5 by .035. 7 Recoveries of prior-year distributions 8 Minimum Asset Amount (add line 7 to line 6) Section C - Distributable Amount **Current Year** 1 Adjusted net income for prior year (from Section A, line 8, Column A)

emergency temporary reduction (see instructions).

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

2

<u>3</u>

5

Schedule A (Form 990 or 990-EZ) 2018

	ule A (Form 990 or 990-EZ) 2018 THE INTERNATIONA		58-2385	869 Page
Pai	t V Type III Non-Functionally Integrated 509(a)(3)	Supporting Organiza	itions (continued)	T
Sec	tion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purp	poses		
2	Amounts paid to perform activity that directly furthers exempt purpos	ses of supported		
	organizations, in excess of income from activity			<u> </u>
3	Administrative expenses paid to accomplish exempt purposes of sup	oported organizations		
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			
	Total annual distributions, Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the organ	ization is responsive		
	(provide details in Part VI). See instructions	······································		
9	Distributable amount for 2018 from Section C, line 6	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
_10	Line 8 amount divided by line 9 amount	· . · · · · · · · · · · · · · · · · · ·	,	
		(4)	(ii)	(iii)
	Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable
			Pre-2018	Amount for 2018
	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required-explain in Part VI). See	,		
	instructions.			, ,
3				
	From 2013		 	
	From 2014		· · · · · · · · · · · · · · · · · · ·	<u> </u>
	From 2015			,
	From 2016		· · · · · · · · · · · · · · · · · · ·	
	From 2017			,
	Total of lines 3a through e		<u> </u>	
	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
	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 \$			
a	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount		•	
c	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	1		
	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	ľ		
	Part VI. See instructions			
7	Excess distributions carryover to 2019. Add lines 3j		ĺ	, '
	and 4c			
8	Breakdown of line 7			
	Excess from 2014		<u></u>	
	Excess from 2015		 	
	Excess from 2016	 	<u> </u>	
	Excess from 2017			
0	Excess from 2018		<u> </u>	I

Schedule A (Form 990 or 990-EZ) 2018

Schedule A (Form 990 or 990-EZ) 2018 THE INTERNATIONAL SEAKEEPERS

58-2385869

Page 8

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 C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047 **Open to Public** : inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

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

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B
- Section 527 organizations. Complete Part I-A only.

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

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

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

• 5	Section 501(c)(4), (5), or (6) organizations: Complete Part III	l			
Nam	e of organization THE INTERNATIONAL S.	EAKEEPERS		Employer iden	tification number
	SOCIETY INC			58-23858	
Pa	rt I-A Complete if the organization is exen	npt under section 501(c) or is a secti	<u>on 527 organizati</u>	on.
1	Provide a description of the organization's direct and indirect definition of "political campaign activities")	ect political campaign activities	in Part IV. (see in	nstructions for	
2	Political campaign activity expenditures (see instructions)			▶ s	
3	Volunteer hours for political campaign activities (see instru	uctions)			
Pa	rt I-B Complete if the organization is exen	npt under section 501(c)(3).		
1	Enter the amount of any excise tax incurred by the organiz	tation under section 4955		▶ \$	
2	Enter the amount of any excise tax incurred by organization	n managers under section 495	i5	▶ \$	
3	If the organization incurred a section 4955 tax, did it file Fo	orm 4720 for this year?			Yes No
	Was a correction made?				Yes No
	If "Yes," describe in Part IV			5047-1401	· · · · · · · · · · · · · · · · · · ·
	rt I-C Complete if the organization is exen			tion 501(c)(3).	
1	Enter the amount directly expended by the filing organization	ion for section 527 exempt fund	ction		
_	activities			≯ S	
2	Enter the amount of the filing organization's funds contribu	ited to other organizations for s	ection	. .	
1	527 exempt function activities Total exempt function expenditures Add lines 1 and 2. En	lor here and an Earm 1120 DO		▶ \$	
•	line 17b	let note and on rotti 1120-ro	· - .	▶ s	
4	Did the filing organization file Form 1120-POL for this year	n			Yes No
5	Enter the names, addresses and employer identification no		political organizati	ions to which the filing	٠٠٠ (١) ١٠٠
	organization made payments. For each organization listed			•	
	the amount of political contributions received that were pro	•			
	as a separate segregated fund or a political action commit	tee (PAC) If additional space	s needed, provide	information in Part IV	
	(a) Nome	(b) Addross	(c) CIN	(d) Amount paid from filing argonization's funds if name anter -0-	(a) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter 4-
(1)					
(2)					
(3)					
(4)					
(5)					
					
(6)					

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

Schedule C (Form 990 or 990-EZ) 2018

		orm 990 or 990-EZ) 2018 THE				<u> 58-238586</u>	
Pa	irt II-A	Complete if the orga	nization is exem	pt under section	501(c)(3) and	filed Form 5768 (e	lection under
	Check		ion belongs to an af	filiated group (and li	et in Part IV ea	ch affiliated group men	sher's same
•		address, EIN, exper	sees and share of a	rcess Johhving eves	inditurae)	cu animated group men	inei s name,
В	Check	▶ ☐ if the filing organizat				lv	
			obbying Expend		provisions app	(a) Filing	(b) Affiliated
		(The term "expenditure:	obbying Expendi	paid or incurred.)		organization's totals	group tainis
18	Totalic	obbying expenditures to influence					
		obbying expenditures to influence			•		
		obbying expenditures (add lines		,··· ·· ,	ľ		
c	Other e	exempt purpose expenditures	•		r		· · · · · · · · · · · · · · · · ·
e	Total e	xempt purpose expenditures (ad	ld lines 1c and 1d)		ľ		
1	Lobby	ng nontaxable amount. Enter the	amount from the follow	wing table in both	Γ		
	column						
	If the a	mount on line 1e, column (e) or (b) is: The lobbying no	ontaxable amount is:	٦r		,
	Not ove	r \$500.000	20% of the amou	int on line 1e			
	Over \$5	00.000 but not over \$1,000,000	\$100,000 plus 15	% of the excess over S5	00,000		,
ı	Over \$1	,000 000 but not over \$1,500,000	\$175,000 plus 10	% of the excess over \$1	,000,000		
ļ	Over \$1	.500 000 but not over \$17,000 000	\$225,000 plus 5%	6 of the excess over \$1.5	500.000	`	* * * *
	Over \$1	7.000,000	\$1,000,000.				
8	Grassr	oots nontaxable amount (enter 2	15% of line 1f)		· [_		
h	Subtrac	ct line 1g from line 1a. If zero or	less, enter -0-				
1	Subtrac	ct line 1f from line 1c. If zero or I	ess, enter -0-				
j	If there	is an amount other than zero or	n either line 1h or line 1	i, did the organization	file Form 4720		
	reportir	ng section 4911 tax for this year	·				Yes No
			4-Year Averag	ing Period Under	Section 501(h)		
	(Some organizations that m	ade a section 501(n) election do not l	nave to comple	ete all of the five colu	mns below.
			See the separate	instructions for lin	es 2a through	2f.)	
			Lobbying Expendit	ures During 4-Yea	r Averaging P	eriod	
	Cale	endar year (or fiscal year	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
		beginning in)	(4) 2013	(8) 2010	(6) 2017	(4) 2010	(6) (0)
2a	Lobbyir	ng nontaxable amount					
		-	ļ		ļ		
b	•	ng ceiling amount		`	<u>.</u> -		
	(150%	of line 2a, column (e))					
C	Total lo	bbying expenditures					
d	Grassro	pots nontaxable amount					
6	Grassro	oots ceiling amount			· -		
	(150%	of line 2d, column (e))				·	
f	Grassro	oots lobbying expenditures					

Schodule C (Form 990 or 990-EZ) 2018

Part IV Supplemental Information

and political expenditure next year?

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated group list); Part II-A, lines 1 and

2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information

Taxable amount of tobbying and political expenditures (see instructions)

excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying

5

Schedule C (Form 990 or 990-EZ) 2018 THE INTERNATIONAL SEAKEEPERS

58-2385869

Page 4

Part IV Supplemental Information (continued)

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 1845-0047 2018 Open to Public Inspection

	organization INTERNATIONAL SEAKEEPERS		Employer Identification number
	ETY INC		58-2385869
Part I	Organizations Maintaining Donor Advised Complete if the organization answered "Yes"		
		(a) Donor advised funds	(b) Funds and other accounts
1 Total	I number at end of year		
2 Aggr	regate value of contributions to (during year)		
3 Aggr	regate value of grants from (during year)		
4 Aggr	regate value at end of year		
5 Did ti	the organization inform all donors and donor advisors in writing	g that the assets held in donor advised	
funds	s are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6 Did t	the organization inform all grantees, donors, and donor adviso	rs 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 impermissible private benefit?		Yos No
Part II	Conservation Easements. Complete if the organization answered "Yes"	on Form 990, Part IV, line 7.	
1 Purp	ose(s) of conservation easements held by the organization (c	heck all that apply).	
F	Preservation of land for public use (e.g., recreation or education	on) Preservation of a historically i	mportant land area
_ [] F	Protection of natural habitat	Preservation of a certified his	toric structure
F	Preservation of open space		
2 Com	plete lines 2s through 2d if the organization held a qualified co	enservation contribution in the form of a co	nservation
ease	ement on the last day of the tax year.		. Held at the End of the Tax Yes
a Total	I number of conservation easements		2a
b Total	l acreage restricted by conservation easements		2b
c Numi	ber of conservation easements on a certified historic structure	e included in (a)	2c
d Numi	ber of conservation easements included in (c) acquired after f	7/25/06, and not on a	
histo	ric structure listed in the National Register		2d
3 Numi	ber of conservation easements modified, transferred, release	d, extinguished, or terminated by the organ	ization during the
tax y	ear ▶		
4 Numi	ber of states where property subject to conservation easemer	nt is located ▶	
Does	s the organization have a written policy regarding the periodic	monitoring, inspection, handling of	
violat	tions, and enforcement of the conservation easements it hold	9?	Yes No
Staff	and volunteer hours devoted to monitoring, inspecting, handl	ing of violations, and enforcing conservatio	n easements during the year
>			
	unt of expenses incurred in monitoring, inspecting, handling o	f violations, and enforcing conservation ea	sements during the year
▶ \$			
3 Does	s each conservation easement reported on line 2(d) above sat	isfy the requirements of section 170(h)(4)(l	
and s	section 170(h)(4)(B)(ii)?		Yes No
n Pa	art XIII. describe how the organization reports conservation ea	sements in its revenue and expense stater	ment, and
	nce sheet, and include, if applicable, the text of the footnote to	the organization's financial statements tha	at describes the
	nization's accounting for conservation easements.		
Part III	Organizations Maintaining Collections of A Complete if the organization answered "Yes"		er Similar Assets.
a If the	organization elected, as permitted under SFAS 116 (ASC 95	8), not to report in its revenue statement ai	nd balance sheet
works	s of art, historical treasures, or other similar assets held for pu	ublic exhibition, education, or research in fu	ertherance of
public	c service, provide, in Part XIII, the text of the footnote to its fin	ancial statements that describes these iter	ms.
b If the	organization elected, as permitted under SFAS 116 (ASC 95	8), to report in its revenue statement and b	alance sheet
	s of art, historical treasures, or other similar assets held for pu		
	c service, provide the following amounts relating to these item		
	Revenue included on Form 990, Part VIII, line 1		▶ \$
(II) A	Assets included in Form 990, Part X		▶ \$
If the	organization received or held works of art, historical treasure	s, or other similar assets for financial gain,	provide the
	ving amounts required to be reported under SFAS 116 (ASC 9	-	
_	nue included on Form 990, Part VIII, line 1	. •	▶ \$
	ts included in Form 900. Part Y		> \$

	ERNATIONAL			<u> 2385869</u>	Page 2
Part III Organizations Maintain					sets (continued)
3 Using the organization's acquisition, accelection items (check all that apply):	ssion, and other record	is, check any of the fol	llowing that are a sign	ificant use of its	
a Public exhibition	d 🔲	Loan or exchange pro	grams		
b Scholarly research	e 📙	Other			
c Preservation for future generations					
4 Provide a description of the organization's	s collections and explai	n how they further the	organization's exemp	t purpose in Part	
XIII.					
5 During the year, did the organization solid					ra m
assets to be sold to raise funds rather the		part of the organization	n's collection?		Yes No
Part IV. Escrow and Custodial A Complete if the organiza		o" on Form 000 B	last IV. Jina O. as s		ount on Form
990, Part X, line 21	ion answered Te	5 On Folin 990, F	art IV, line 9, or n	eporteo an am	lount on Form
1a Is the organization an agent, trustee, cust	odlan or other intermed	hary for contributions	or other assets not		
included on Form 980. Part X?		olary to continuous to	or other pascis not		Yes No
b If "Yes," explain the arrangement in Part 3	KIII and complete the fo	ollowing table.			12, 100 [2] 100
					Amount
c Beginning balance				1c	
d Additions during the year				1d	
e Distributions during the year				1e	
f Ending balance				1f	
2a Did the organization include an amount of	n Form 990, Part X, line	e 21, for escrow or cus	todial account liability	?	Yes No
b If "Yes," explain the arrangement in Part)	(III. Check here if the e	xplanation has been p	rovided on Part XIII		
Part V Endowment Funds.					
Complete if the organizate	tion answered "Ye	s" on Form 990, P	art IV, line 10.	- 	
	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years t	ack (e) Four years back
1a Beginning of year balance		ļ		 	
b Contributions			<u> </u>		
c Net investment earnings, gains, and	1		}		
losses				 	
d Grants or scholarships				 	
e Other expenditures for facilities and					
programs				 	
f Administrative expenses g End of year balance				 	
2 Provide the estimated percentage of the c	L	o (lloo to column (c))	hold oo:	.L	
a Board designated or quasi-endowment ▶	%	a (iiia 19, coloitiii (a))	11010 85.		
	/o				
c Temporarily restricted endowment	%				
The percentages on lines 28, 2b, and 2c					
3a Are there endowment funds not in the pos	·	ation that are held and	administered for the		
organization by	•				Yes No
(i) unrelated organizations					3a(i)
(ii) related organizations					3a(ii)
b If "Yes" on line 3a(ii), are the related organ	nizations listed as requ	ired on Schedule R?			3b
4 Describe in Part XIII the intended uses of		owment funds			
Part VI Land, Buildings, and Eq					
Complete if the organizat			<u>art IV, line 11a S</u>	<u>ee Form 990,</u>	
Description of property	(a) Cost or other	I		Accumulated	(d) Book value
	(investment)	(other	UT) C	teprociation	
1a Land	 			•	
b Buildings	 		 -		
c Leasehold improvements					
d Equipment	31,677	456			31,677,466
e Other Total. Add lines 1a through 1e. (Column (d) mus			De 1	•	31,677,466
	n vyuun viili 93V, Fal	, oviviiii (U), iiii0 /\	· · · · ·	~ 1	<u> </u>

	Form 990) 2018 THE INTERNATIONAL	SEAKEEPERS	58-2385869	Page
Part VII	Investments—Other Securities.			
	Complete if the organization answered "Ye	es" on Form 990, Part IV	line 11b. See Form 990, Part	X, line 12
	(a) Description of socurity or collegory	(b) Book value	(c) Method of valuat	
	(including name of security)		Cost or end-of-year mark	ol value
1) Financial				
•	eld equity interests			
3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
otal. (Colum	n (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII	Investments—Program Related.			
	Complete if the organization answered "Ye	s" on Form 990, Part IV,	line 11c. See Form 990, Part	X, line 13
	(a) Cascription of investment	(b) Book value	(c) Method of valuat	
			Cost or end of-year mark	et value
(1)				
(2)				
(3)				
(4)				
(5)				· · · · · · · · · · · · · · · · · · ·
(6)				
(7)				
(8)				
(9)	<u> </u>			
	n (b) must equal Form 990, Part X, col. (B) line 13 } ▶			······································
Part IX	Other Assets.			······································
	Complete if the organization answered "Ye	s" 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)				
1-1				
(7) (8)				
(8) (9)				
	n (b) must equal Form 990, Part X, col. (B) line 15.)		>	
Part X	Other Liabilities.			
7 411 7	Complete if the organization answered "Ye line 25.	es" on Form 990, Part IV,	line 11e or 11f. See Form 99	0, Part X,
	(a) Description of Fability	(b) Book value		
		Ent Door As no	<mark>-</mark> -	
	income taxes			-
(2)			⊣	
(3)				
(4)				
(5)			- 	
(6)				

(1) Federal income taxes		
(2)	•	
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		-
Total. (Column (b) must equal Form 990. Part X. col. (8) 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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2018 THE INTERNATIONAL SE	AKEEPERS 58-	2385869	Page 4
Part XI Reconciliation of Revenue per Audited Final	ncial Statements With Reven	ue per Return.	
Complete if the organization answered "Yes" or	n Form 990, Part IV, line 12a.	·	
1 Total revenue, gains, and other support per audited financial stateme		1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		- 1	
a Net unrealized gains (losses) on investments	2a	<u> </u>	
b Donated services and use of facilities	2b	; ·	
c Recoveries of prior year grants	2c	, ``*y	
d Other (Describe in Part XIII.)	2d		
Add lines 2a through 2d	\ <u>\</u>	20	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1.	1 1	8°53	
a Investment expenses not included on Form 990. Part VIII, line 7b	4a	3 14	
b Other (Describe in Part XIII.)	4b		
c Add lines 4a and 4b	\	4c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part i	!, line 12)	5	
Part XII Reconciliation of Expenses per Audited Fina	encial Statements With Expen	nses per Return.	
Complete if the organization answered "Yes" or	n 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		, · ,	
a Donated services and use of facilities	2 <u>a</u>		
b Prior year adjustments	2b		
c Other losses	2c		
d Other (Describe in Part XIII)	2d	. * ا	
e Add lines 2a through 2d		20	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1		, ,	
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	<u>†</u> -	
b Other (Describe in Part XIII.)	4b		
c Add lines 4a and 4b		4c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Par	l i, line 18)	5	
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 D (Form 990) 2018 THE INTERNATIONAL SEAKEEPERS
Part XIII Supplemental Information (continued)

58-2385869

Page 5

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization enswered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 8a

Attach to Form 990 or Form 990-EZ.

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

2018

Open to Public

SOCIETY INC	SEAREEPER	.5			58-23858	
Part I. Fundraising Activities. Complete it	f the organization	n an	swe	red "Yes" on Form 9		
Form 990-EZ filers are not required						<u> </u>
1 Indicate whether the organization raised funds through	L3					
a X Mail sollcitations	f1		-	rernment grants		
b X Internet and email solicitations	_	-		nent grants		
c X Phone solicitations	g X Special fun	draisi	ng ev	rents		
d X In-person solicitations						
2a Did the organization have a written or oral agreement v or key employees listed in Form 990, Part VII) or entity b If "Yes." list the 10 highest paid individuals or entities (f	in connection with	profes	sion	al fundraising services?		Yes No
compensated at least \$5,000 by the organization	1	Tomera	d fund-	,		
(i) Name and address of individual	Ţ	reiser	have	(Iv) Gross receipts	(v) Amount paid to (or retained by)	(vi) Amount paid to (or retained by)
or ontity (fundralsor)	(II) Activity	custo	rol of	from activity	fundraiser listed in	organization
CAYO MARKETING	<u> </u>	-	utlans?		φ) (i)	
1		Yes	סא			
•		1		60,877	7,465	60,877
2 AMP-T6						
		i l				
	-	1		73,206	13,673	73,206
3						
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	<u> </u>					
Total						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

STATE OF FLORIDA

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?

b If "Yes," explain.

Scho	hedule G (Form 990 or 990-EZ) 2018 THE INTERNATIONAL SEAKE	EPERS5	8-2385869 Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnersh	ip or other entity	
	formed to administer charitable gaming?	•	Yes No
13	indicate the percentage of gaming activity conducted in		
а	The organization's facility		13a %
b	An outside facility	•	13b %
14	Enter the name and address of the person who prepares the organization's gaming/spec	ial events books and	
	records:		
	•		
	Name ▶		
	·		
	Address ▶		
15a	Does the organization have a contract with a third party from whom the organization rece	ives gaming	
	revenue?		Yes No
b	If "Yes," enter the amount of gaming revenue received by the organization > \$	and the	
	amount of gaming revenue retained by the third party > \$		
C	If "Yes." enter name and address of the third party:		
	Name ▶		
	Address ▶		
	Address		
16	Gaming manager information;		
••	Coming manager information,		
	Name ▶		
	Gaming manager compensation ▶ \$		
	Description of services provided ▶		
	Director/officer Employee Independent contractor		
17	Mandatory distributions		
a	is the organization required under state law to make charitable distributions from the gan	ing proceeds to	(<u>1</u>
	retain the state gaming license?	•	Yos No
b	Enter the amount of distributions required under state law to be distributed to other exem	pt organizations or	
-	spent in the organization's own exempt activities during the tax year > \$	L. D. Al E. al	
28	art IV Supplemental Information. Provide the explanations required		
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. A See instructions.	iso provide any addition	al information.
	See instructions.		
	•		
			•
	·		
		Schedi	ule G (Form 990 or 990-EZ) 2018

SEAKEEPERS 03/12/2019 4 47 PM

SCHEDULE G (Form 990 or	Supplemental Info	ormation	2018
990-EZ)	For calendar year 2018, or tax year beginning	, and ending	2010
	THE INTERNATIONAL SEAKEEPERS		Employer identification number
Name of the organization	SOCIETY INC		58-2385869

SCHEDULE M (Form 990)

Noncash Contributions

Employer Identification number

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

OMB No 1545-0047 2018

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest Information.

THE INTERNATIONAL SEAKEEPERS

SOCIETY INC

Open To Public Inspection'

58-2385869 Part I Types of Property (c) (a) (b) (d) Noncash contribution Check if Number of contributions or Mothod of determining amounts reported on app! cable items contributed noncash contabuliga amounts Form 990, Part VIII, tina 1g Art - Works of art Art - Historical treasures Art - Fractional interests Books and publications Clothing and household 5 goods Cars and other vehicles X 4 19,126,000 Boats and planes 8 Intellectual property Я Securities — Publicly traded 10 Securities — Closely held stock 11 Securities - Partnership, LLC. or trust interests 12 Securities - Miscellaneous 13 Qualified conservation contribution — Historic structures 14 Qualified conservation contribution -- Other 15 Real estate - Residential Real estate - Commercial 16 Real estate - Other 17 18 Collectibles 19 Food inventory 20 Drugs and medical supplies 21 Taxidermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Other ▶ (26 Other >(27 Other ▶ (28 Other ▶ (Number of Forms 8283 received by the organization during the tax year for contributions for 29 which the organization completed Form 8283, Part IV. Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required X to be used for exempt purposes for the entire holding period? 30a b If "Yes." describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard X 31 contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or self noncesh X contributions?

If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked.

b If "Yes," describe in Part II.

describe in Part II.

Schedule M (Form 990) 2018 THE INTERNATIONAL SEAKEEPERS

58-2385869

Page 2

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE O (Form 990 or 990-EZ)

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 inspection:

Department of the Treasury Internal Revenue Service Name of the organization

THE INTERNATIONAL SEAKEEPERS

Employer identification number

SOCIETY INC 58-2385869

Form 990 - Organization's Mission

THE INTERNATIONAL SEAKEEPERS SOCIETY PROMOTES OCEANOGRAPHOC RESEARCH,

CONSERVATION AND EDUCATION THROUGH DIRECT INVOLVEMENT WITH THE YACHTING

COMMUNITY. SEAKEEPERS ENABLES THE YACHTING COMMUNITY TO TAKE FULL ADVANTAGE

OF THEIR UNIQUE POTENTIAL TO ADVANCE MARINE SCIENCES AND TO RAISE AWARENESS

ABOUT GLOBAL OCEAN ISSUES.

Form 990, Part III, Line 4d - All Other Accomplishments PROGRAMMING EXPENSES

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

Form 990, Part IX, Line 11g - Other Fees for Services
Description

Tot	Prog Service	Mgt &	General	Fund	raising
YACHT RELATED					
\$	799,082	\$	32,132	\$	21,138
TRANSFER TO CHAP	RTER AGENTS				
\$	8,666,714	\$	0	\$	0
Total					
\$	9,465,796	\$	0	\$. 0

Schedule O (Form 990 or 990-EZ) (2018)	Page 2
Name of the organization	Employer identification number
THE INTERNATIONAL SEAKEEPERS	58-2385869

Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation \$ 10,529,286