DLN: 93493176012230 OMB No 1545-0047 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 Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2019 , and ending 12-31-2019 C Name of organization D Employer identification number B Check if applicable INTERNATIONAL CENTER FOR NOT-FOR-PROFIT □ Address change LAW INC 52-1818273 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite 1126 16TH STREET NW STE 400 NO ☐ Amended return ☐ Application pending (202) 452-8600 City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC $\,$ 20036 G Gross receipts \$ 8,877,900 Name and address of principal officer H(a) Is this a group return for DOUGLAS RUTZEN ☐Yes **☑**No subordinates? 1126 16TH STREET NW STE 400 NO 400 H(b) Are all subordinates WASHINGTON, DC 20036 ☐ Yes ☐No ıncluded? □ 527 **✓** 501(c)(3) 501(c)() **◄** (insert no) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW ICNLORG L Year of formation 1992 M State of legal domicile DE K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities RESEARCH ORGANIZATION ON THE LEGAL FRAMEWORK FOR CIVIL SOCIETY, PHILANTHROPY, AND PARTICIPATION Activities & Governance 2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 9 4 4 Number of independent voting members of the governing body (Part VI, line 1b) . Total number of individuals employed in calendar year 2019 (Part V, line 2a) 5 0 **6** Total number of volunteers (estimate if necessary) 6 Total unrelated business revenue from Part VIII, column (C), line 12 0 **b** Net unrelated business taxable income from Form 990-T, line 39 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 15,027,325 7,378,771 Ravenua 9 Program service revenue (Part VIII, line 2g) . 6,700 54,095 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 35,649 54,735 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 172,993 5,984 15,242,667 7,493,585 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 1,359,237 1,434,296 **14** Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 3,506,538 4,552,261 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶136,376 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 4,288,349 4,376,982 9,154,124 10,363,539 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 . 6,088,543 -2,869,954 Net Assets or Fund Balances Beginning of Current Year End of Year 11,357,178 20 Total assets (Part X, line 16) . 14,338,706 21 Total liabilities (Part X, line 26) . 1,364,321 1,157,637 22 Net assets or fund balances Subtract line 21 from line 20 . 12,974,385 10,199,541 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 2020-06-24 Signature of officer Sign Here DOUGLAS RUTZEN PRESIDENT Type or print name and title Print/Type preparer's name Preparer's signature Check 🔲 ıf P01324904 Paid self-employed Firm's name ► CALIBRE CPA GROUP PLLC Firm's EIN ► 47-0900880 Preparer Use Only Firm's address ► 7501 WISCONSIN AVENUE SUITE 1200 Phone no (202) 331-9880 BETHESDA, MD 20814 ✓ Yes □ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2019)

Form	990 (2019)					Page 2
Pa	rt III Statem	ent of Program Service	e Accomplis	hments		
	Check if S	Schedule O contains a respo	nse or note to	any line in this Part III .		🗆
1	Briefly describe t	the organization's mission				
		CENTER FOR NOT-FOR-PROF VIL SOCIETY, PHILANTHROF			RCH ORGANIZATION THAT PROMOT ND THE WORLD	ES AN ENABLING LEGAL
2	Did the organiza	tion undertake any significal	nt program ser	vices during the year wh	uch were not listed on	
	the prior Form 9	90 or 990-EZ?				🗌 Yes 🗹 No
	If "Yes," describe	e these new services on Sch	edule O			
3	Did the organiza	tion cease conducting, or ma	ake significant	changes in how it condu	cts, any program	
		• • • • • • • • • • • • • • • • • • •				☐ Yes ☑ No
4	Describe the org Section 501(c)(3	janization's program service	accomplishmer	to report the amount of	argest program services, as measu f grants and allocations to others, ti	
4a	(Code) (Expenses \$	8,074,180	including grants of \$	1,434,296) (Revenue \$	54,095)
	See Additional Date					, ,
4b	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4d		services (Describe in Schedu		ф.	\/Devenue t	
	(Expenses \$		iding grants of	·) (Revenue \$)
4e	i otal program	service expenses ▶	8,074,1	ชบ		

Form 990 (2019) Page 3 Part IV Checklist of Required Schedules Yes Nο Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Yes 1 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏 . . . Yes Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates No 3 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 Yes 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 98-197 If "Yes," complete Schedule C, Part III 🛸 . Nο 5 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 No 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, Nο 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D. Part II 🛸 🔒 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 Nο 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 No 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 Nο permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Yes 11a

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total No 11b assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸

Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its No 11c total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 😼 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 Nο 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏 11e Yes

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸 11f Yes 12a Nο

12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete

b Was the organization included in consolidated, independent audited financial statements for the tax year? 12b Nο If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🥦

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a

No 14a Did the organization maintain an office, employees, or agents outside of the United States? . . . Yes **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 14b Yes valued at \$100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*

Yes

Yes

Yes

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20h

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Nο

Nο

Nο

Νo

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any 15 foreign organization? If "Yes," complete Schedule F, Parts II and IV 🛸 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to 16

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII.

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

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 1? If "Yes," complete Schedule I, Parts I and II

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)

20a Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H* . . .

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Form	m 990 (2019) Page 4								
Pa	Checklist of Required Schedules (continued)								
			Yes	No					
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No					
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? <i>If "Yes," complete Schedule J</i>	23	Yes						
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No					
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b							
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c							
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d							
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No					
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		No					
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No					
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L,</i> Part III	27		No					
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		No					
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No					
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		No					
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No					
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No					
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No					
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		No					
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	Yes						
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	Yes						
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes						

h.	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV		
	A family member of any individual described in line 20a / 11 Tes, complete Schedule L, Part IV	28b	No
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c	No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		

35b

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1a 1b Yes

Yes

Yes

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Nο

Nο

 \checkmark

No

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 🔧

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🔧

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

Statements Regarding Other IRS Filings and Tax Compliance

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

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Part V

Pa	tV Statements Regarding Other IRS Filings and Tax Compliance (continued)			rage 3
	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			
ь.	this return	2b	Yes	
U	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		103	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country >JO , HU , KZ , KG , TI , RS , UP			
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	_		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a		No No
		5b		
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c 6a		No No
	solicit any contributions that were not tax deductible as charitable contributions?	ба		
Ь	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		No
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		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g		
n	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 organization have excess business holdings at any time during the year?	-		
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	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			
Ь	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			
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		
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			_
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in 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		No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O	16		No

Section C. Disclosure

20

List the states with which a copy of this Form 990 is required to be filed▶

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Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below, and for a "No" response or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O. contains a response or note to any line in this Part VI								
Se	ction 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 1a	9							
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O								
b	Enter the number of voting members included in line 1a, above, who are independent 1b	9							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? •	n 3		No					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No					
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No					
6	Did the organization have members or stockholders?	6		No					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		No					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			_					
а	The governing body?	8a	Yes						
Ь	Each committee with authority to act on behalf of the governing body?	8b	Yes						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No					
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Reven	ie Code	∍.)						
			Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes						
Ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes						
Ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990								
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes						
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes						
13	Did the organization have a written whistleblower policy?	13	Yes						
14	Did the organization have a written document retention and destruction policy?	14	Yes						
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
а	The organization's CEO, Executive Director, or top management official	15a	Yes						
b	Other officers or key employees of the organization	15b	Yes						
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?								

IL, NY, NM, MI, WA

Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records DARLA MECHAM 1126 16TH STREET NW NO400 WASHINGTON, DC 20036 (202) 452-8600

☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

Part VII

 $\overline{\mathbf{V}}$

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

- 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, or 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 co	ompensation fro	m the	organ	ızatı	ion	and ar	ny re	elated organization:	s		
See instructions for the order in which to list the	persons above										
Check this box if neither the organization no	r any related or	ganızat	ion c	omp	ens	ated a	any	current officer, dire	ctor, or trustee		
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	pers	an on on is	e bo both	t cho x, u n an or/tr	inless office ustee	er)	(D) Reportable compensation from the organization (W-2/1099- MISC)	(E) Reportable compensation from related organizations (W-2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations	
(1) EMILE VAN DER DOES DE WILLEBOIS CHAIR	4 00	×		x				0	0	0	
(2) BARBARA IBRAHIM VICE CHAIR	4 00	x		х				0	0	0	
(3) SUNEETA KAIMAL SECRETARY/TREASURER	4 00	х		х				0	0	0	
(4) MARY BETH GOODMAN DIRECTOR	4 00	x						0	0	0	
(5) FELICIANO REYNA GANTEAUME DIRECTOR	4 00	×						0	0	0	
(6) BINDU SHARMA DIRECTOR	4 00	х						0	0	0	
(7) W AUBREY WEBSON DIRECTOR	4 00	х						0	0	0	
(8) RUTH MADRIGAL DIRECTOR	4 00	х						0	0	0	

	×		X				0	0	0
4 00	×		x				0	0	0
4 00	×		х				0	0	0
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4 00	×						0	0	0
4 00	×						0	0	0
4 00	×		x				1,000	0	0
40 00			×				187,765	0	33,906
40 00			х				137,667	0	32,932
	4 00 4 00 4 00 4 00 4 00 4 00 4 00 4 00 4 00	4 00 X 4 00 X	4 00 X 4 00 0 X 4 0 0 X 4 0 0 X 4 0 0 X 4 0 0 X 4 0 0 X 4 0 0 X 4 0 0 X 4 0 0 X 4 0 0 X 4 0 0 X 4 0 0 X 4 0 0 X 4 0 0 X 4 0 0 X 4 0 0 X 4 0 0 X 4 0 0 X 4 0 X 4 0 0 X 4 0 X	4 00	4 00	4 00	400 X X X X X X X X X X X X X X X X X X	A 00	4 00 X X 0 0 4 00 X X 0 0 4 00 X 0 0 0 4 00 X 1,000 0 40 00 X 187,765 0

0 16 40 00 (13) CATHERINE SHEA Х 173,658 0 32,255 VICE PRESIDENT, PROGRAMS 40 00 (14) DAVID MOORE Χ 169,638 0 24,911 VICE PRESIDENT, LEGAL AFFAIRS 40 00 (15) A NILDA BULLAIN Х 163,494 0 31.401 VICE PRESIDENT, OPERATIONS 40 00 (16) NATALIA BOURJAILY Χ 152,879 0 21,029 VICE PRESIDENT, EURASIA 40 00 (17) JOCELYN NIEVA 140,410 27,914 SR LEGAL ADVISOR, LATIN AMERICA

compensation from the organization ▶ 3

Page 8

Part VII Section A. Officers, Director	rs, Trustees, K	ey Em	ploy	ees	, an	d Hig	<u>jhe</u> s	st Compensated	Employees (con	tınued)	
	(B)	l					-				
(A) Name and title	Average hours per week (list any hours for related		ne b	ox, un of tor/t	t che unles ficer rust	s pers and a ee)	son	(D) Reportable compensation from the organization (W-2/1099-	(E) Reportable compensation from related organizations (W-2/1099-	(F) Estimated amount of other compensation from the organization and	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	sey employee	Highest compensated employee	Former	Misc)	Misc)	relai organiz	ted
(18) CLAUDIA GUADAMUZ	40 00	l				Х		127,062	С		23,789
SENIOR LEGAL ADVISOR - LATIN AMERICA (19) NOSHIR H DADRAWALA											
FORMER DIRECTOR	4 00						X	16,200	C		0
1b Sub-Total				<u> </u>	•	.				<u> </u>	
c Total from continuation sheets to Part	•				•	-					
d Total (add lines 1b and 1c)					•	•		1,269,773	0		228,137
Total number of individuals (including be of reportable compensation from the org		those li	sted a	abov	/e) w	ho re	ceive	ed more than \$100	,000		
2 Did the supplied by let any fewers as aff			leave.							Yes	No
3 Did the organization list any former off line 1a? <i>If "Yes," complete Schedule J fo</i>	or such individual	•	•	•	٠		•		3	Yes	
For any individual listed on line 1a, is the organization and related organizations of individual	reater than \$150	0,000?.	Ι΄ "Ye	s," c	comp	lete S	che	dule J for such		Yes	
5 Did any person listed on line 1a receive services rendered to the organization? <i>If</i>				,			_	ganization or individ	dual for 5		No
Section B. Independent Contractor	'S										
Complete this table for your five highest from the organization Report compensation.	tion for the cale								tax year		
	(A) business address								(B) tion of services	Comper	sation
LEGAL TEAM CO LTD								TO SUPPORT N	GO LAW REFORM		232,000
MALY ZNAMENSKAY PER OFFICE 1 BLD 6 MOSCOW RS											
MG CONSULTING SAT PLAZA 4TH FLOOR BAKU								TO SUPPORT N	GO LAW REFORM		150,241
AJ MAINSPRING								TO SUPPORT N	GO LAW REFORM		124,425
8 E SECOND STREET SUITE 205 FREDERICK, MD 21701											
2 Total number of independent contractors (compensation from the organization ▶ 3	including but not	t limited	d to t	hose	list	ed abo	ove)	who received more	e than \$100,000 of	:	

Form 9 Part		(2019) Statement	of F	Pavanus						Page 9
гап	VIII				a respo	onse or note to any	line in this Part VIII			🗆
							(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
(A	1 a	Federated campa	aigns	S	1a			revenue		512 - 514
ants	ı	b Membership due:	s.		1 b					
Gra		c Fundraising even	its .		1c					
ifts, ar A	(d Related organiza	tions	s	1d					
m ij.	•	e Government grants	(con	tributions)	1e	6,415,572				
ions I Si	1	 All other contribution and similar amounts 	ns, g s not	gifts, grants, included	1f	963,199				
but	١,	above g Noncash contribution	ns in	icluded in	<u> </u>	300,233				
Contributions, Gifts, Grants and Other Similar Amounts		lines 1a - 1f \$			1g	_				
<u>ة</u> ك	י	h Total. Add lines	1a-1	.f		•	7,378,771			
		CONTRACT INCOME				Business Code	54,095	54,095		
ı	2a	CONTRACT INCOME				900099	34,093	34,093		
Program Service Revenue	ь									
ą	_									
rwce	C									
₹.	d	I								
gran	e									
Ą	_									
		All other program								
		Total. Add lines 2 Investment income				54,095	1			
	s	similar amounts) .				•	34,415	5		34,415
		Income from invest Royalties		nt of tax-exe		ond proceeds >	-			
		Noyanies I I I	Ċ	(ı) Re		(II) Personal				
	62	Gross rents	6a							
		Less rental					-			
	_	expenses Rental income	6b				_			
	_	or (loss)	6с							
	d	Net rental income	or			(1) (1)				
	(1) Securities			(II) Other	_					
	<i>,</i> a	from sales of assets other	7a	1,	404,635	5				
		than inventory Less cost or					_			
	D	other basis and sales expenses	7b	1,	384,315	5				
		·	7c		20.220					
		Gain or (loss) Net gain or (loss)			20,320					20,320
au		Gross income from fu		ising events						
Other Revenue		(not including \$								
3e√		See Part IV, line 18			8a		_			
er l		Less direct expen : Net income or (los			8b sing ev	ents 🏲	_			
		_				•				
	9a	Gross income from See Part IV, line 19			9a					
	b	Less direct expen	ses		9b]			
	С	: Net income or (los	s) fr	rom gamıng	activit	les >	1			
	10a	aGross sales of inve								
	L	returns and allowa			10a 10b		_			
		Less cost of good Net income or (los					J			
		Miscellaneo	us R	levenue		Business Code				
	11	a MISCELLANEOUS	INC	OME		900099	5,984	1		5,984
	h					•				
	b	•								
	c	:								
	d	All other revenue	•							
	е	Total. Add lines 1	1a-1	11d		•	5,984	1		
	12	Total revenue. S	ee ır	nstructions			7,493,585	54,095	5	0 60,719
										Form 990 (2019)

1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21 . . . 2 Grants and other assistance to domestic individuals. See

3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15

5 Compensation of current officers, directors, trustees, and 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

8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions) . . . **9** Other employee benefits

g Other (If line 11g amount exceeds 10% of line 25, column

(A) amount, list line 11g expenses on Schedule O)

18 Payments of travel or entertainment expenses for any federal, state, or local public officials .

24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e

25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

4 Benefits paid to or for members

e Professional fundraising services See Part IV, line 17

f Investment management fees . . .

12 Advertising and promotion . . .

13 Office expenses

15 Royalties . .

23 Insurance . .

a TRANSLATIONS

e All other expenses

b C d

14 Information technology . .

16 Occupancy

20 Interest **21** Payments to affiliates 22 Depreciation, depletion, and amortization .

expenses on Schedule O)

19 Conferences, conventions, and meetings .

11 Fees for services (non-employees) a Management

c Accounting

b Legal

35,182

62,501

3,627

13,763

7,276

8,221

53

5,078

56

98

521

136,376

Form 990 (2019)

Form 990 ((2019)	
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	•

(B) (C) (D)

Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. Total expenses expenses general expenses expenses

15,421

1,418,875

599,185

2,964,182

196,157

512,084

280,653

47,644

63,411

1,850,300

230,725

308,761

387,462

188,004

6,705

41,585

39,654

89,807

10,363,539

1,122,924

15,421

1,418,875

320,470

2,226,242

150,634

367,908

205,323

1,200

9,400

1,738,237

94,837

34,859

242,503

145,115

6,705

89,286

8,074,180

1,007,165

243,533

675,439

41,896

130,413

68,054

46,444

54,011

103,842

135,835

273,902

139,881

115,703

42,791

41,585

39,654

2,152,983

10a Land, buildings, and equipment cost or other

Investments—publicly traded securities .

Other assets See Part IV, line 11 . . .

Accounts payable and accrued expenses .

Investments—other securities See Part IV, line 11 .

Investments-program-related See Part IV, line 11 .

Total assets. Add lines 1 through 15 (must equal line 34) .

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties .

Organizations that follow FASB ASC 958, check here ▶

Organizations that do not follow FASB ASC 958, check here ▶

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

and other liabilities not included on lines 17 - 24)

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

Other liabilities (including federal income tax, payables to related third parties,

basis Complete Part VI of Schedule D

b Less accumulated depreciation

Intangible assets .

Grants payable .

Deferred revenue . .

Tax-exempt bond liabilities .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

Form 990 (2019)

11

12

13

14

15

16

17

18

19

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21

23

24

25

26

27

28

31

32

33

Liabilities 22

Fund Balances

ō 29

Assets 30

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

Page **11**

187,131

1,163,770

235,166

697,992

459.645

1.157.637

2,417,273

7,782,268

10,199,541

11,357,178

Form 990 (2019)

11,357,178

		Beginning or year		End of year
1	Cash-non-interest-bearing	229,334	1	114,721
2	Savings and temporary cash investments	6,172,381	2	4,970,741
3	Pledges and grants receivable, net	6,698,208	3	4,494,157

0,741 4.157 13.552 4 Accounts receivable, net . Loans and other payables to any current or former officer, director, trustee,

2,206 key employee, creator or founder, substantial contributor, or 35% controlled 5 entity or family member of any of these persons Loans and other receivables from other disqualified 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 8 Inventories for sale or use . . Prepaid expenses and deferred charges . 96,980 9 189,286

331,232

144,101

10c

11

12 13

14

15

16

17

18

19

20 21

22 23

24

25

26

27

28

29

30

31

32

33

1,009,035

119,216

568,466

795.855

1.364.321

2,301,541

10.672.844

12,974,385

14,338,706

14,338,706

10a

10b

b 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

3a

3b

Yes

Yes (2019)

Audit Act and OMB Circular A-133?

Additional Data

Software ID:

Software Version: **EIN:** 52-1818273

Name: INTERNATIONAL CENTER FOR NOT-FOR-PROFIT

LAW INC

Form 990 (2019)

Form 990, Part III, Line 4a:

ICNL IS A RESOURCE ON LEGAL ISSUES AFFECTING CIVIL SOCIETY, PHILANTHROPY, AND CIVIC PARTICIPATION IN 2019, ICNL UNDERTOOK PROJECTS IN ASIA, AFRICA. THE AMERICAS, THE MIDDLE EAST, EUROPE, AND EURASIA ACTIVITIES INCLUDE TECHNICAL ASSISTANCE ON THE ENABLING ENVIRONMENT FOR CIVIL SOCIETY, CONFERENCES, RESEARCH AND PUBLICATIONS, UNIVERSITY INITIATIVES, AND A PUBLICLY AVAILABLE ON-LINE LIBRARY OF NGO LEGAL MATERIALS, IN MULTIPLE LANGUAGES

efile	e GRA	APHIC prin	nt - DO NOT PROCESS	As Filed Data -			DLN: 9	3493176012230
SCI	1FD	ULE A	Bublic	Charity Statu	c and Dul	olic Supp	ort	OMB No 1545-0047
	m 990			Charity Statu rganization is a sect			1	2019
990E	EZ)		,	4947(a)(1) nonexe	mpt charitable	trust.		2019
		the Treasury	► Go to <u>www.irs</u>	Attach to Form 9 5.gov/Form990 for in			ormation.	Open to Public Inspection
Nam	e of th	ne organiza	tion PR NOT-FOR-PROFIT				Employer identific	ation number
_AW II	_		r. n. bir. ob. ir. o	- / Δ 11 1	11-	1 - 1 1 > 6	52-1818273	
	rt I raanız		for Public Charity Stat a private foundation because				see instructions.	
1			onvention of churches, or as	•	-		(A)(i).	
2		,	scribed in section 170(b)(
3			or a cooperative hospital ser		,	. ,		
4		•	esearch organization operat	-			•	nter the hospital's
•	П	name, city,		ed in conjunction with	a nospital descri	bed in Section .	170(b)(1)(A)(III). L	nter the hospital's
5			ation operated for the benefi	t of a college or univer	rsity owned or op	perated by a gov	ernmental unit descri	bed in section 170
6	П		(iv). (Complete Part II) tate, or local government or	governmental unit de	scribed in sectio	on 170(b)(1)(A	۱)(v).	
7	$ \mathbf{V} $		ation that normally receives		s support from a	governmental u	init or from the gener	al public described in
8	П		' 0(b)(1)(A)(vi). (Complete ty trust described in sectio i	<u>-</u>	(Complete Part I	I)		
9		An agrıcultı	ıral research organization de	escribed in 170(b)(1)	(A)(ix) operate	d in conjunction	with a land-grant coll	ege or university or a
10	П	_	ant college of agriculture Sation that normally receives				-	and gross receipts
	ш	from activit	ies related to its exempt fur income and unrelated busings section 509(a)(2).	nctions—subject to cert less taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its si	upport from gross
11		An organiza	ation organized and operated	d exclusively to test for	r public safety S	ee section 509	(a)(4).	
12		more public	ation organized and operated ly supported organizations of through 12d that describes	described in section 5	09(a)(1) or sec	ction 509(a)(2). See section 509(a	
a		organizatio	supporting organization oper n(s) the power to regularly a Part IV, Sections A and B.	appoint or elect a majo				
b		manageme	supporting organization sup nt of the supporting organiz plete Part IV, Sections A	ation vested in the san				
c		Type III f	unctionally integrated. A sorganization(s) (see instruct	supporting organization				ited with, its
d		Type III n functionally	on-functionally integrate integrated The organization You must complete Pair	d. A supporting organi n generally must satis	zation operated fy a distribution	in connection wi requirement and	th its supported organ	
e		Check this	box if the organization recei or Type III non-functionally	ved a written determir	ation from the I		pe I, Type II, Type II	I functionally
f	Enter		of supported organizations	egratea supporting	o. gamzation			
g	Provid	de the follow	ing information about the su	pported organization(s)			
	(i) N	lame of supp organizatior		(iii) Type of organization (described on lines 1- 10 above (see instructions))		anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
			1					
Tota			tion Act Notice, see the I		Cat No 11285		 Schedule A (Form 9	

Sch	edule A (Form 990 or 990-EZ) 2019						Page 2
P	Support Schedule for (Complete only if you ch	ecked the box o	on line 5, 7, or 8	of Part I or if the	e organization fa	alled to qualify u	
	If the organization failed	to qualify unde	r the tests listed	below, please c	omplete Part III	.)	
	Section A. Public Support						
1	Calendar year (or fiscal year beginning in) ► Gifts, grants, contributions, and	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	membership fees received (Do not include any "unusual grant")	8,206,763	7,299,578	10,017,617	15,027,325	7,378,771	47,930,054
2	Tax revenues levied for the organization'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	9 206 762	7 200 E70	10.017.617	15 027 225	7 279 771	47.020.054
4 5	Total. Add lines 1 through 3 The portion of total contributions by	8,206,763	7,299,578	10,017,617	15,027,325	7,378,771	47,930,054
3	each person (other than a governmental unit or publicly supported organization) included on						3,243,399
	line 1 that exceeds 2% of the amount shown on line 11, column (f)						-,,
6	Public support. Subtract line 5 from line 4						44,686,655
	Section B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) ⊤otal
7	Amounts from line 4	8,206,763	7,299,578	10,017,617	15,027,325	7,378,771	47,930,054
8	Gross income from interest,	, ,	, ,	' '	, ,	, ,	· · ·
	dividends, payments received on securities loans, rents, royalties and income from similar sources	14,841	26,024	23,222	31,579	34,415	130,081
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)	16,553	1,569	1,702	172,993	5,984	198,801
11	Total support. Add lines 7 through 10						48,258,936
12	Gross receipts from related activities,	etc (see instruction	ons)			12	926,694
13	First five years. If the Form 990 is fo	or the organization	's first, second, thi	rd, fourth, or fifth	tax year as a secti	on 501(c)(3) orga	nızatıon,
	check this box and stop here					▶□	
S	ection C. Computation of Public						
14	Public support percentage for 2019 (lii	ne 6, column (f) di	vided by line 11, co	olumn (f))		14	92 600 %
15	Public support percentage for 2018 Sc	hedule A, Part II,	line 14			15	92 550 %
16 a	33 1/3% support test—2019. If the	e organization did r	not check the box o	on line 13, and line	14 is 33 1/3% or	more, check this b	ox
Ŀ	and stop here. The organization qual 33 1/3% support test—2018. If th				nd line 15 is 33 1/3	3% or more, check	this
17a	box and stop here. The organization 10%-facts-and-circumstances test is 10% or more, and if the organization in Part VI how the organization meets	t— 2019. If the order in meets the "facts	ganization did not d -and-circumstance	check a box on line s" test, check this	box and stop her	e. Explain	▶□
		the racts-and-Cife	cumplances lest	rne organización q	uamies as a public	ry supported	►□
b	organization 10%-facts-and-circumstances tes 15 is 10% or more, and if the organiz Explain in Part VI how the organization	zation meets the "1	facts-and-circumsta	ances" test, check	this box and stop	here.	₽ ⊔
18	supported organization Private foundation. If the organizati			_			▶□
	instructions		,				ightharpoons
_					Schodula	A (Form 990 or	990-E7\ 2019

P		upport Schedule for						
		Complete only if you cl						der Part II. If
		ne organization fails to	qualify under t	ne tests listed i	pelow, please co	omplete Part II.)	
56	ection A. Pub	ndar year			1			T
		r beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1		contributions, and						
		ees received (Do not						
_		nusual grants ")						
2		from admissions, sold or services						
		facilities furnished in						
		at is related to the						
	organization's	tax-exempt purpose						
3		from activities that are						
		ed trade or business						
4	under section Tax revenues	F						
-		benefit and either paid						
		d on its behalf						
5		ervices or facilities						
		governmental unit to						
		on without charge						
6	Total. Add line	-						
/a		ded on lines 1, 2, and m disqualified persons						
b		ded on lines 2 and 3						
_		other than disqualified						
		exceed the greater of						
		of the amount on line						
_	13 for the yea Add lines 7a a							
8		rt. (Subtract line 7c						
0	from line 6)	it. (Subtract line / c						
Se	ection B. Tota	al Support				•		
		ıdar year	(-) 201E	(h) 2016	(=) 2017	(4) 2010	(-) 2010	(f) Tatal
		r beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts fron	n line 6						
L0a		from interest,						
		yments received on						
		ns, rents, royalties and similar sources						
b		siness taxable income						
_		511 taxes) from						
		equired after June 30,						
	1975							
_	Add lines 10a							
11		rom unrelated business						
		included in line 10b, ot the business is						
	regularly carr							
12		Do not include gain or						
		sale of capital assets						
	(Explain in Pa							+
13	11, and 12)	rt. (Add lines 9, 10c,						
14	First five yea	a rs. If the Form 990 is foi	r the organization	's fırst, second, th	nird, fourth, or fift	th tax year as a se	ction 501(c)(3)	organization,
•		and stop here		, ,	, ,	•	()()	▶ □
Se		nputation of Public S	Support Perce	ntage				
15		percentage for 2019 (lin			column (f))		15	
16	• •	: percentage from 2018 S		•	(//		16	
		nputation of Investr					1 -0	
17		come percentage for 201			line 13. column (f	f))	17	
		come percentage from 20	,		25, 201411111 (1	• / /		
18				·	on line 14	aa 1 E ja waana 41	18 22 1/20/ and l	na 17 ia
		ort tests—2019. If the						_
		/3%, check this box and s	-					▶□
b	33 1/3% sup	pport tests—2018. If the	e organization did	not check a box	on line 14 or line	19a, and line 16 is	more than 33 i	_
	not more than	n 33 1/3%, check this box	and stop here.	The organization (qualifies as a publ	licly supported org	anızatıon	▶□
20	Private found	dation. If the organization	n did not check a	box on line 14, 1	19a, or 19b, check	this box and see	instructions	ightharpoons

Schedule A (Form 990 or 990-EZ) 2019

6

7

8

10a

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

			Yes	No
•	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			
	ın section 509(a)(1) or (2)	2		

	describe the designation If historic and continuing relationship, explain	1	Γ
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		
	ın section 509(a)(1) or (2)	2	
la	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)		Γ
	below	3a	Γ
1.	Did the appropriate and the cook appropriate appropriate and propriate and appropriate and app		Т

		_	
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		
	ın section 509(a)(1) or (2)	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	3a	
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		
ı	determination		

3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a		
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			

	the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the			
	determination	3b	1	
С	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	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections			

	checked 12a or 12b in Part 1, answer (b) and (c) below			
	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	4b		
С	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	4c		
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)	5a	<u> </u>	
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the		<u> </u>	
	organization's organizing document?	5b	1	

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

Was the organization controlled directly or indirectly at any time during the tax year by one or more disgualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

than (1) its supported organizations. (11) 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

Substitutions only. Was the substitution the result of an event beyond the organization's control?

organization's supported organizations? If "Yes," provide detail in Part VI.

complete Part I of Schedule L (Form 990 or 990-EZ)

the organization had excess business holdings)

organization had an interest? If "Yes," provide detail in Part VI.

provide detail in Part VI.

answer line 10b below

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

5c

6

7

8

9a

9b

9с

10a

	dule A (Form 990 of 990-E2) 2019		۲	age :
Pai	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		
	ection 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	-		
•	rganization operate for the benefit of any supported organization other than the supported organization(s) that supported or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit at the purposes of the supported organization(s) that operated, supervised or controlled the supporting			
	organization	2		
S	ection C. Type II Supporting Organizations		1	
	., 11 2 2		Yes	No
	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of			
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
S	ection D. All Type III Supporting Organizations			
			Yes	No
•	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)			
	D	2		
	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		
<u> </u>	ection E. Type III Functionally-Integrated Supporting Organizations			
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions)		
	The organization satisfied the Activities Test Complete line 2 below	,		
	The organization is the parent of each of its supported organizations. Complete line 3 below			
	_		_L \	
(instru	ctions)	
	Activities Test Answer (a) and (b) below.		Yes	No
ā	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted			
	substantially all of its activities	2a		
ŀ	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2 h		
}	Parent of Supported Organizations Answer (a) and (b) below.	2b		
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
ŀ	Did the organizations? Provide details in Part VI. 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	3h		

3b

Page **6**

Schedule A (Form 990 or 990-F7) 2019

1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		

3	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)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
	Section C - Distributable Amount		Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	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	Enter greater of line 2 or line 3 Income tax imposed in prior year	4 5	
		<u> </u>	

instructions)

Total annual distributions. Add lines 1 through 6	
Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
Distributable amount for 2019 from Section C, line 6	

8	Distributions to attentive supported organizations to who	nich the organization is respon	sive (provide	
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	Section 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 (reasonable cause required explain in Part VI)			

details in Part VI) See instructions	ilcii tile organization is respon	sive (provide	
9 Distributable amount for 2019 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section 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			
Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			

(see instructions)	Excess Distributions	Pre-2019	Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			

f Total of lines 3a through e		
g Applied to underdistributions of prior years		
h Applied to 2019 distributable amount		
 Carryover from 2014 not applied (see instructions) 		
j Remainder Subtract lines 3g, 3h, and 3i from 3f		
4 Distributions for 2019 from Section D, line 7		
<u> \$ </u>		
Applied to underdistributions of prior years		
b Applied to 2019 distributable amount		
c Remainder Subtract lines 4a and 4b from 4		

j Remainder Subtract lines 3g, 3h, and 3i from 3f		
4 Distributions for 2019 from Section D, line 7		
\$		
Applied to underdistributions of prior years		
b Applied to 2019 distributable amount		
c 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 If the amount is greater than zero, explain in Part VI See instructions		
6 Remaining underdistributions for 2019 Subtract		

c 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 If the amount is greater than zero, explain in Part VI See instructions		
6 Remaining underdistributions for 2019 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions		
7 Excess distributions carryover to 2020. Add lines 3 ₁ and 4c		
8 Breakdown of line 7		

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

a Excess from 2015. **b** Excess from 2016. **c** Excess from 2017.

d Excess from 2018. e Excess from 2019.

Additional Data

Software ID: Software Version:

EIN: 52-1818273

Name: INTERNATIONAL CENTER FOR NOT-FOR-PROFIT

LAW INC Schedule A (Form 990 or 990-EZ) 2019

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)
	Facts And Circumstances Test
1	

SCHEDULE C

• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

Political Campaign and Lobbying Activities

OMB No 1545-0047

DLN: 93493176012230

Open to Public

Department of the Treasury Internal Revenue Service If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

EZ)

(Form 990 or 990-

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

▶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.

Inspection

•	Section 527 organizations Complete	01(c)(3)) organizations Complete Parts e Part I-A only n Form 990, Part IV, Line 4, or Form 9 9		·	
• • f the Pro	Section 501(c)(3) organizations that Section 501(c)(3) organizations that	have filed Form 5768 (election under so have NOT filed Form 5768 (election un a Form 990, Part IV, Line 5 (Proxy Tax s), then	ection 501(h)) Co der section 501(h)	mplete Part II-A Do not ()) Complete Part II-B Do	complete Part II-B o not complete Part II-A
INT	me of the organization TERNATIONAL CENTER FOR NOT-FOR-PRO W INC	FIT		Employer ide 52-1818273	entification number
Pai	rt I-A Complete if the organ	nization is exempt under sectio	n 501(c) or is		nization.
1	Provide a description of the organ "political campaign activities")	ization's direct and indirect political cam	npaign activities in	Part IV (see instructions	for definition of
2	Political campaign activity expend	itures (see instructions)		>	\$
3	Volunteer hours for political camp	aign activities (see instructions)			
Par	rt I-B Complete if the organ	nization is exempt under sectio	n 501(c)(3).		
1	Enter the amount of any excise ta	x incurred by the organization under se	ction 4955	>	\$
2	Enter the amount of any excise ta	x incurred by organization managers ur	nder section 4955	>	\$
3	If the organization incurred a sect	ion 4955 tax, did it file Form 4720 for t	hıs year?		🗌 Yes 🔲 No
4a	Was a correction made?				☐ Yes ☐ No
b			- 504(-)		
		nization is exempt under sectio			-
1		ed by the filing organization for section	•		\$
2	Enter the amount of the filing organization activities	anızatıon's funds contributed to other or	rganizations for se	ction 527 exempt	\$
3	Total exempt function expenditure	es Add lines 1 and 2 Enter here and on	Form 1120-POL,	line 17b ►	\$
4	Did the filing organization file For	m 1120-POL for this year?			Yes No
5	organization made payments For of political contributions received	employer identification number (EIN) of each organization listed, enter the amo that were promptly and directly delivere ee (PAC) If additional space is needed,	ount paid from the ed to a separate po	filing organization's fund olitical organization, such	ls Also enter the amount
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
1					
2					
3					
1					
5					
5					
or F	Paperwork Reduction Act Notice, see t	he instructions for Form 990 or 990-EZ.	Cat	No 50084S Schedule C	(Form 990 or 990-EZ) 2019

Schedule C (Form 990 or 990-EZ) 2019

activity

Volunteers?

Media advertisements?

Return Reference

1

(b)

Amount

(a)

Yes | No

Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 1 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members 1 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year 2b Carryover from last year C Total 2c 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information 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

Explanation

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?

During the year, did the filing organization attempt to influence foreign, national, state or local legislation,

including any attempt to influence public opinion on a legislative matter or referendum, through the use of

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -SCHEDULE D

DLN: 93493176012230

OMB No 1545-0047

(Form 990)

Supplemental Financial Statements

Inspection

Internal Revenue Service

▶ 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.

Open to Public Department of the Treasury ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization **Employer identification number** INTERNATIONAL CENTER FOR NOT-FOR-PROFIT LAW INC 52-1818273 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No 6 Did the organization inform all grantees, donors, and donor advisors 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 conferring impermissible private benefit? ☐ Yes ☐ No Part II **Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 20 Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year 🕨 Number of states where property subject to conservation easement is located > 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? ☐ Yes In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not 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, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (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 included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

d Equipment .

Par	t III	Organizations Ma	aintaining Col	ections of Ar	t, Histori	ical Tr	easure	es, or Other	Similar As	ssets (continued)	rage =
3	Using	the organization's acq (check all that apply)										
а		Public exhibition			d		Loan or	exchange prog	ırams			
b		Scholarly research			е		Other					
c		Preservation for future	e generations									
4	Provid Part X	de a description of the KIII	organızatıon's coll	ections and expla	ain how the	ey furth	er the o	rganızatıon's ex	kempt purpo	se in		
5		g the year, did the orga s to be sold to raise fur							ıılar	☐ Ye	es 🗆 N	0
Pa	rt IV	Escrow and Cust Complete if the ord X, line 21.			Form 990), Part	IV, line	9, or reporte	ed an amou			
1a		e organization an agent led on Form 990, Part X		an or other interr	nediary for	contrib	utions o	or other assets	not	☐ Ye	es 🗆 N	o
b	If "Ye	es," explain the arrange	ement in Part XIII	and complete the	e followina	table			Α	mount		_
c		ning balance						1c				_
d		ions during the year						1d		-		_
e		butions during the year	r					1e				_
f		g balance						1f				_
2a		ne organization include	an amount on Fo	rm 990 Bart V II	ına 21 for	occrow	or custo	dial account lis	shilitu2		es 🗆 N	_
		es," explain the arrange								_	:S 🗀 N	O
	irt V	Endowment Fund		Check here if th	e explanat	ion nas	been pr	ovided in Part 2	X111	Ш		
- 6	IL V	Complete if the org		ered "Yes" on	Form 990), Part	IV, line	10.				
			-	(a) Current year		rior yeai		Two years back	(d) Three ye	ars back	(e) Four year	rs back_
1 a	Beginn	ing of year balance .										
b	Contrib	outions										
С	Net inv	estment earnings, gair	ns, and losses									
d	Grants	or scholarships	•									
е		expenditures for facilitie ograms	es									
f	Admını	strative expenses .										
g	End of	year balance										
2	Provid	de the estimated perce	ntage of the curre	nt year end bala	nce (line 1	g, colur	nn (a)) l	held as				
а	Board	d designated or quasi-e	ndowment 🟲									
b	Perma	anent endowment 🟲										
С	Temp	orarily restricted endov	wment ►									
	The p	ercentages on lines 2a	, 2b, and 2c shou	d equal 100%								
3a		nere endowment funds nization by	not in the posses	sion of the organ	ızatıon tha	t are he	ld and a	administered fo	r the	_	Yes	No
	(i) ur	related organizations				•					a(i)	
	` '	elated organizations .						•			a(ii)	
b ⊿		s" on 3a(II), are the rel	-				• • •				3b	
4		the in Part XIII the inte			iuowinent '	iunas						
Ρa	rt VI	Land, Buildings, Complete if the org			Form 990). Part	IV. line	11a. See For	m 990. Pa	ırt X. lır	ne 10.	
	Descri	ption of property	(a) Cost or oth	er basis (b) (Cost or other			(c) Accumulated o			(d) Book value	e
			(ınvestme	nt)								
1a	Land											
b	Buildin	gs										
С	Leaseh	old improvements				28	0,024		92,893			187,131

51,208

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) .

187,131

51,208

Part VII	Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, (a) Description of security or category	Part IV, lıı	ne 11l		Part X, line 12.
	(including name of security)	Book value			f-year market value
	l derivatives				
	held equity interests				
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
	n (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, I	Part IV, lıı	ne 110	c. See Form 990,	Part X, line 13.
	(a) Description of investment			(b) Book value	(c) Method of valuation Cost or end-of-year market
(1)					value
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	n (b) must equal Form 990, Part X, col (B) line 13)				
Part IX	Other Assets.		<u> </u>	•	
	Complete if the organization answered 'Yes' on Form 990, P (a) Description	art IV, lin	e 11a	. See Form 990, Pa	(b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Part X	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P		 e 11e		• 990, Part X, line 25.
1.	(a) Description of liability	,			(b) Book value
(1) Federal (3)	income taxes				
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	n (b) must equal Form 990, Part X, col (B) line 25)		_	•	<u>'</u>
•	or uncertain tax positions. In Part XIII, provide the text of the footnot		-		·

2c

2a 2b

2c

2d

4a

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total revenue, gains, and other support per audited financial statements

d 2d 618.538 713,648 e 2e 3 7,493,585 Amounts included on Form 990, Part VIII, line 12, but not on line 1

3 4 Investment expenses not included on Form 990, Part VIII, line 7b . 4a 4b b Add lines **4a** and **4b** 4c c

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 5 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1

2 Amounts included on line 1 but not on Form 990, Part IX, line 25

3 4 Amounts included on Form 990, Part IX, line 25, but not on line 1:

Donated services and use of facilities . . .

Other (Describe in Part XIII)

Add lines 2a through 2d

Return Reference

See Additional Data Table

Schedule D (Form 990) 2019

Part XI

1

c

c

d

Investment expenses not included on Form 990, Part VIII, line 7b . .

b

Add lines **4a** and **4b** Supplemental Information

5 Part XIII

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

4b

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

Explanation

4c 5

2e

3

616,926

Page 4

8,207,233

n

7,493,585

10,980,465

616,926

10,363,539

10.363.539

Schedule D (Form 990) 2019

Page 5		chedule D (Form 990) 2019	Schedule D (F
	ormation (continued)	Part XIII Supplemental Info	Part XIII
	Explanation	Return Reference	Re

Schedule D (Form 990) 2019

Additional Data

Software ID: Software Version:

EIN: 52-1818273

Name: INTERNATIONAL CENTER FOR NOT-FOR-PROFIT

THE CENTER HAS ADOPTED THE ACCOUNTING STANDARD ON ACCOUNTING FOR UNCERTAINTY IN INCOME

LAW INC

Supplemental Information

Return Reference

TAX

PART X, LINE 2

Explanation

TO COMPLY WITH PROVISIONS OF THIS GUIDELINE

ES, WHICH ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CL AIMED ON A TAX RETURN SHOULD BE REPORTED IN THE CONSOLIDATED FINANCIAL STATEMENTS UNDER THIS POLICY, THE CENTER MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITION WOULD BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION MANAGEMENT HAS EVALUATED THE CENTER'S TAX POSITIONS AND HAS CONCLUDED THAT THE CENTER HAS TAKEN NO UNCERTAIN TAX POSITIONS THAT REOUIRE ADJUSTMENT TO OR DISCLOSURE IN THE CONSOLIDATED FINANCIAL STATEMENTS

upplemental Information								
Return Reference	Explanation							
PART XI, LINE 2D - OTHER ADJUSTMENTS	REVENUE OF CONSOLIDATED AFFILIATE 752,205 REVENUE ELIMINATED IN CONSOLIDATION -133,667							

È

upplemental Information								
Return Reference	Explanation							
PART XII, LINE 2D - OTHER ADJUSTMENTS	EXPENSES OF CONSOLIDATED AFFILIATE 750,593 EXPENSES ELIMINATED IN CONSOLIDATION -133,667							

efile GRAPHIC print -	DO NOT	PROCESS	As Filed Data	-	DL	N: 93493176012230
SCHEDULE F Form 990)	State	ement of	Activities (Outside the Un	ited States	OMB No 1545-0047
1 01111 990)	► Comp	lete if the organi	zation answered " ► Attach t	ıne 14b, 15, or 16.	2019	
Department of the Treasury	,	► Go to www.irs.	gov/Form990 for ı	nstructions and the latest i	nformation.	Open to Public Inspection
lame of the organization					Employer id	dentification number
NTERNATIONAL CENTER FO AW INC	OR NOT-FOR	-PROFIT			52-1818273	
General Inf Form 990, Po			o Outside the U	Jnited States. Comple	te if the organization	n answered "Yes" on
1 For grantmakers.	Does the o	rganızatıon ma	ıntaın records to	substantiate the amoun	of its grants and	
other assistance, the	e grantees'	eligibility for th	ne grants or assi	stance, and the selection	criteria used	
to award the grants	or assistan	ice?				🗹 Yes 🗌 No
2 For grantmakers. outside the United S		Part V the org	anızatıon's proce	edures for monitoring the	use of its grants and	other assistance
3 Activites per Region	(The followii	ng Part I, line 3	table can be dupli	icated if additional space is	needed)	
(a) Region		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	fundraising, program	(e) If activity listed in (d) program service, describ specific type of service(s) in the region	for and investments in the region
See Add'l Data						
3a Sub-total			2 6			1,635,983
b Total from continuation	n sheets to					_,,
Part I	4	1 16			2,714,402	
c Totals (add lines 3a a			5l 22	11		4,350,385

Page 2

Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.								
(a) Name of organization	(b) IRS code section	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash	(g) Amount of noncash	(h) Description of noncash	(i) Method of valuation

- Grantzacion	and EIN (if applicable)	grant	cash grant	disbursement	assistance	assistance	(book, FMV, appraisal, other)
See Add'l Data							

exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 26 12

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-Schedule F (Form 990) 2019

Schedule F (Form 990) 2019							Page 3
Part IIII Grants and C				ed States. Complete i	f the organization ar	swered "Yes" on Form	990, Part IV, line 16.
Part III can be	e duplicated if addition	<u>onal space is r</u>	needed.		T		
(a) Type of grant or assistance	e (b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
TO SUPPORT NGO LAW REFORM	SOUTH AMERICA	2	34,189	WIRE TRANSFER			
TO SUPPORT NGO LAW REFORM	SUB-SAHARAN AFRICA	1	6,000	WIRE TRANSFER			
						Sche	dule F (Form 990) 2019

Sche	dule F (Form 990) 2019		Page 4
Par	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	✓ Yes	□No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A, don't file with Form 990)	□Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)	Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	✓ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, don't file with Form 990)	✓ Yes	□No

Schedule F (Form 990) 2019 Page 5										
•	Part V Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.									
990 Schedu	ule F, Supplemental Information									
Return Reference	Explanation									
PART I, LINE 2	FOR COST REIMBURSEMENT GRANTS, THE GRANTEE RECEIVES AN INITIAL ADVANCE, BASED ON THEIR CALCULATED NEEDS FOR THE ADVANCE PERIOD THE GRANTEE MUST THEN SUBMIT A REPORT WHICH LIQUIDATES THE ADVANCE AND A REQUEST FOR THE NEXT DISBURSEMENT GENERALLY, GRANTEES SUBMIT MONTHLY REPORTS, GRANTEES WITH SUCCESSFUL HISTORY OF SUBMITTING REPORTS ON DEADLINE REPORT ON A QUARTERLY BASIS THE LIQUIDATION REPORT INCLUDES A COMPARISON OF ACTUAL COSTS TO THE APPROVED BUDGET, AND MAY ALSO INCLUDE COPIES OF SUPPORTING DOCUMENTATION, RECEIPTS, ETC FOR FIXED AMOUNT AWARDS (FAA), PAYMENT CORRESPONDS TO SUCCESSFUL COMPLETION OF MILESTONES, I E APPROVED TASKS, GOALS OR PRODUCTS EACH MILESTONE IS LISTED IN THE FAA AGREEMENT, AND GENERALLY HAS THREE PARTS (1) A DESCRIPTION OF THE PRODUCT, TASK OR GOAL TO BE ACCOMPLISHED, (2) A DESCRIPTION OF HOW THE RECIPIENT WILL DOCUMENT COMPLETION OF THE PRODUCT, TASK OR GOAL, AND (3) THE AMOUNT ICNL WILL PAY WHEN THE MILESTONE IS SUCCESSFULLY COMPLETED AFTER COMPLETING A MILESTONE, THE GRANTEE SUBMITS A VOUCHER REQUESTING PAYMENT THE VOUCHER LISTS THE MILESTONE AND THE AMOUNT DUE AND IS ACCOMPANIED BY DOCUMENTATION AS REQUIRED WITHIN THE FAA AGREEMENT ONCE ICNL CONFIRMS THAT THE MILESTONE WAS SUCCESSFULLY COMPLETED, PAYMENT IS RELEASED									

990 Schedule F, Supplemental Information	90 Schedule F, Supplemental Information				
Return Reference	Explanation				

PART III ACCOUNTING METHOD

990 Schedule F, Supplemental Information

Return

	Reference	
	•	IN 2019, ICNL PROGRAM INCLUDED ACTIVITIES IN, OR WITH NATIONALS OF, COUNTRIES IDENTIFIED BY THE U S
I∟	INE 6	TREASURY AS PARTICIPATING IN INTERNATIONAL BOYCOTTS NOT SANCTIONED BY THE U.S. GOVERNMENT. THIS
ı		I INCLUDES IRAQ. LEBANON. SAUDI ARABIA. LIBYA AND YEMEN

Explanation

Additional Data

(a) Region

CENTRAL AMERICA AND THE

CARIBBEAN

Software ID: Software Version:

EIN: 52-1818273

Name: INTERNATIONAL CENTER FOR NOT-FOR-PROFIT

LAW INC

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Hairiber of	(c) Hallibel of	(a) / teci / tices contacted	(c) in activity horea in (a)
	offices in the	employees or	ın region (by type) (ı e ,	is a program service,
	region	agents in	fundraising, program	describe specific type of
		region	services, grants to	service(s) in region
			recipients located in the	

(b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures

for region

region) 0 PROGRAM SERVICES

CENTRAL AMERICA AND THE CARIBBEAN

NGO LEGAL ENABLING IENVIRONNMENT INITIATIVES

65,904

91,640

GRANTS TO RECIPIENTS

LOCATED IN THE REGION

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) EAST ASIA AND THE PACIFIC 0 PROGRAM SERVICES NGO LEGAL ENABLING 122,239 IENVIRONNMENT INITIATIVES EAST ASIA AND THE PACIFIC 0 IGRANTS TO RECIPIENTS 110,033 LOCATED IN THE REGION.

Form 990 Schedule F Par	form 990 Schedule F Part I - Activities Outside The United States											
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region							
EUROPE (INCLUDING ICELAND AND GREENLAND)	1	3	PROGRAM SERVICES	NGO LEGAL ENABLING ENVIRONNMENT INITIATIVES	298,038							
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	BOARD MEETING		22,523							

Form 990 Schedule F Par	t I - Activities	Outside The U	Jnited States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	GRANTS TO RECIPIENTS		501,458
MIDDLE EAST AND NORTH AFRICA	1	3	PROGRAM SERVICES	NGO LEGAL ENABLING ENVIRONNMENT INITIATIVES	424,148

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) MIDDLE EAST AND NORTH 0 IGRANTS TO RECIPIENTS 133,487 AFRICA LOCATED IN THE REGION 0 PROGRAM SERVICES NGO LEGAL ENABLING 127.385 NORTH AMERICA IENVIRONNMENT INITIATIVES

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) RUSSIA AND THE NEWLY 14 PROGRAM SERVICES NGO LEGAL ENABLING 1.257.378 INDEPENDENT STATES IENVIRONNMENT INITIATIVES RUSSIA AND THE NEWLY 0 IGRANTS TO RECIPIENTS 39,043 LOCATED IN THE REGION. INDEPENDENT STATES

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) SOUTH AMERICA 0 PROGRAM SERVICES NGO LEGAL ENABLING 84,268 IENVIRONNMENT INITIATIVES SOUTH AMERICA 0 IGRANTS TO RECIPIENTS 149,163 LOCATED IN THE REGION.

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) SOUTH ASIA 2 PROGRAM SERVICES NGO LEGAL ENABLING 161.983 IENVIRONNMENT INITIATIVES SOUTH ASIA 0 IGRANTS TO RECIPIENTS 47.716 LOCATED IN THE REGION.

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) SUB-SAHARAN AFRICA 0 PROGRAM SERVICES NGO LEGAL ENABLING 367.645 IENVIRONNMENT INITIATIVES SUB-SAHARAN AFRICA 0 IGRANTS TO RECIPIENTS 346.334 LOCATED IN THE REGION.

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) CENTRAL ITO SUPPORT 15,500 WIRE TRANSFER IAMERICA AND INGO LAW ICARIBBEAN | IREFORM CENTRAL ITO SUPPORT 17.000 WIRE TRANSFER IAMERICA AND INGO LAW CARIBBEAN REFORM

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) CENTRAL ITO SUPPORT 21,281 WIRE TRANSFER IAMERICA AND INGO LAW ICARIBBEAN | IREFORM CENTRAL ITO SUPPORT 37.859 WIRE TRANSFER IAMERICA AND INGO LAW CARIBBEAN REFORM

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(If cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) EAST ASIA ITO SUPPORT 33,660 WIRE TRANSFER IAND THE INGO LAW lpacific IREFORM **LEAST ASIA** ITO SUPPORT 15.842 WIRE TRANSFER IAND THE INGO LAW PACIFIC IREFORM

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(If cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) EAST ASIA ITO SUPPORT 15,000 WIRE TRANSFER IAND THE INGO LAW lpacific IREFORM **LEAST ASIA** ITO SUPPORT 6.784 WIRE TRANSFER IAND THE INGO LAW PACIFIC IREFORM

Form 990 Schedule F Part II - Grants or Entities Outside The United States (I) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(If cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) EAST ASIA ITO SUPPORT 10,000 WIRE TRANSFER IAND THE INGO LAW lpacific IREFORM **LEAST ASIA** ITO SUPPORT 15.131 WIRE TRANSFER IAND THE INGO LAW

PACIFIC

IREFORM

Form 990 Schedule F Part II - Grants or Entities Outside The United States (ı) Method of l(b) IRS codel (h) Description (q) Amount of (f) Manner of valuation (a) Name of (d) Purpose of (e) Amount of section (c) Region (book, FMV, cash non-cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) LEAST ASIA AND ITO SUPPORT 13.615 WIRE TRANSFER THE PACIFIC INGO LAW IREFORM **IEUROPE** ITO SUPPORT 501.459 WIRE TRANSFER (INCLUDING INGO LAW ICELAND AND IREFORM IGREENLAND)

Form 990 Schedule F Part II - Grants or Entities Outside The United States (ı) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant arant non-cash disbursement assistance appraisal. applicable) assistance other) MIDDLE EAST TO SUPPORT 61,576 WIRE TRANSFER IAND NORTH NGO LAW IAFRICA IREFORM MIDDLE EAST TO SUPPORT 43.878 WIRE TRANSFER IAND NORTH NGO LAW IAFRICA REFORM

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(if cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) MIDDLE EAST TO SUPPORT 23.772 WIRE TRANSFER IAND NORTH INGO LAW IAFRICA REFORM RUSSIA AND THE ITO SUPPORT 11.530 WIRE TRANSFER INEWLY INGO LAW ITNDEPENDENT REFORM

ISTATES

(i) Method of l(b) IRS codel (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) RUSSIA AND THE ITO SUPPORT WIRE TRANSFER INFWLY INGO LAW INDEPENDENT IREFORM ISTATES RUSSIA AND THE ITO SUPPORT 11.572 WIRE TRANSFER INEWLY INGO LAW

Form 990 Schedule F Part II - Grants or Entities Outside The United States

REFORM

INDEPENDENT

ISTATES

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) RUSSIA AND THE TO SUPPORT 8,245 WIRE TRANSFER INFWLY INGO LAW INDEPENDENT IREFORM ISTATES ISOUTH AMERICA TO SUPPORT 19,187 WIRE TRANSFER INGO LAW IREFORM

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Isouth ITO SUPPORT 15,000 WIRE TRANSFER IAMERICA INGO LAW IREFORM ISOUTH ITO SUPPORT 14,398 WIRE TRANSFER AMERICA INGO LAW IREFORM

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Isouth ITO SUPPORT 16,426 WIRE TRANSFER IAMERICA INGO LAW IREFORM SOUTH ITO SUPPORT 19,998 WIRE TRANSFER AMERICA INGO LAW IREFORM

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Isouth ITO SUPPORT 20,000 WIRE TRANSFER IAMERICA INGO LAW IREFORM ISOUTH ASIA ITO SUPPORT 42,716 WIRE TRANSFER INGO LAW IREFORM

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (a) Name of (d) Purpose of (e) Amount of (section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) SOUTH ASIA ITO SUPPORT 5,000 WIRE TRANSFER INGO LAW IREFORM SUB-SAHARAN ITO SUPPORT 16.000 WIRE TRANSFER IAFRICA INGO LAW IREFORM

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of ((a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ISUB-SAHARAN ITO SUPPORT 51,474 WIRE TRANSFER IAFRICA INGO LAW IREFORM SUB-SAHARAN ITO SUPPORT 6.836 WIRE TRANSFER IAFRICA INGO LAW IREFORM

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of ((a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) SUB-SAHARAN ITO SUPPORT 46,017 WIRE TRANSFER IAFRICA INGO LAW IREFORM SUB-SAHARAN ITO SUPPORT 27.320 WIRE TRANSFER IAFRICA INGO LAW IREFORM

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of ((a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ISUB-SAHARAN ITO SUPPORT 7.704 WIRE TRANSFER IAFRICA INGO LAW IREFORM SUB-SAHARAN ITO SUPPORT 16.208 WIRE TRANSFER IAFRICA INGO LAW IREFORM

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of ((a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) SUB-SAHARAN ITO SUPPORT 47,418 WIRE TRANSFER IAFRICA INGO LAW IREFORM SUB-SAHARAN ITO SUPPORT 17.260 WIRE TRANSFER IAFRICA INGO LAW IREFORM

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of ((a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) SUB-SAHARAN ITO SUPPORT 69,676 WIRE TRANSFER IAFRICA INGO LAW IREFORM SUB-SAHARAN ITO SUPPORT 26.205 WIRE TRANSFER IAFRICA INGO LAW IREFORM

efile GRAPHIC pri	nt - DO NOT PROCES	S As Filed Data -					DLN	N: 93493176012230
Note: To capture to Schedule I (Form 990) Department of the Treasury Internal Revenue Service		2019 Open to Public Inspection						
LAW INC	ER FOR NOT-FOR-PROFIT					Employ 52-181		tion number
 Does the organize the selection critical part II Describe in Part I Part III Grants and Grants and Gra	ation maintain records to seria used to award the grail IV the organization's proce Id Other Assistance to D	ubstantiate the amount of other or assistance? dures for monitoring the us	e of grant funds in the Un	ited States	for the grants or assistance rganization answered "Yes" (•	art IV, line	Yes No 21, for any recipient
(a) Name and addr organization or governmen	','	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Descrip noncash ass		(h) Purpose of grant or assistance
(1) REGENTS OF THE UNITOR MINNESOTA 200 OAK STREET SE 9 450 MINNEAPOLIS, MN 59	SUITE	501(C)(3)	15,421					SUPPORTING UN SPECIAL RAPPORTEUR WORK ON CIVIC SPACE ISSUES
3 Enter total number	. , , ,	government organizations					▶ ▶	1 0

(5) (6)

MAY ALSO INCLUDE COPIES OF SUPPORTING DOCUMENTATION, RECEIPTS, ETC.

Schedule I (Form 990) 2019

(7)

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Explanation PAYMENT FOR FIXED AMOUNT AWARDS IS GENERALLY MADE ACCORDING TO ASSIGNED DISBURSEMENT SCHEDULE, WITH THE FINAL DISBURSEMENT ISSUED ONCE THE FINAL REPORT HAS BEEN FILED. THE FORMAT OF THE FINAL REPORT IS DETERMINED BY THE APPROVED ACTIVITY TO BE SUPPORTED BY THE GRANT. FOR

Return Reference PART I, LINE 2 RESEARCH GRANTS, THE FINAL REPORT IS THE FINISHED RESEARCH PAPER, FOR GRANTS WHICH SUPPORT OTHER TYPES OF PROGRAM ACTIVITIES, SUCH AS WORKSHOPS, THE FINAL REPORT DETAILS THE ACCOMPLISHMENTS FOR COST REIMBURSEMENT GRANTS, THE GRANTEE TYPICALLY RECEIVES AN INITIAL ADVANCE, BASED ON THEIR CALCULATED NEEDS FOR THE ADVANCE PERIOD. THE GRANTEE MUST THEN SUBMIT A REPORT WHICH LIOUIDATES THE ADVANCE AND CAN

Page **2**

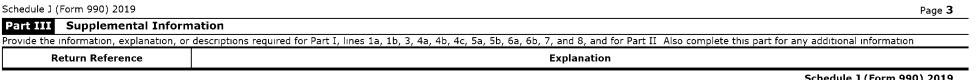
efil	e GRAPHIC pr	int - DO NOT PROCESS	As Filed Dat	a -	DLN: 93	49317	76012	230
Sch	edule J	С	ompensat	ion Information	OI	ИВ No	1545-0	0047
(For	n 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest						
		➤ Complete if the or		ated Employees vered "Yes" on Form 990, Part IV	, line 23.	20		•
Б		•	▶ Attach	n to Form 990. · instructions and the latest infor	<u> </u>)pen i		
•	tment of the Treasury al Revenue Service	₽ do to <u>www.irs.g</u>	<i>00/ F01111990</i> 101	instructions and the latest infor	mation.		ectio	
	ne of the organiza	ation R FOR NOT-FOR-PROFIT			Employer identifica	tion nu	ımber	
	/ INC	KTOK NOT-LOK-FROITI			52-1818273			
Pa	rt I Questio	ons Regarding Compens	ation					
							Yes	No
1a				f the following to or for a person liste by relevant information regarding the				
		or charter travel		Housing allowance or residence for	•			
	_	companions		Payments for business use of perso				
		nification and gross-up paymen	ts 🗀	Health or social club dues or initiati Personal services (e.g., maid, chau				
	□ Discretion	ary spending account	Ш	Personal services (e g , maid, chau	rreur, cher)			
b				follow a written policy regarding pay ve? If "No," complete Part III to exp		1b		
2				or allowing expenses incurred by all	mo 1 a 3	2		
	directors, truste	es, officers, including the CEO/	executive Directo	r, regarding the items checked on Lii	ne lar			
3				ed to establish the compensation of t not check any boxes for methods	he			
	_	•		CEO/Executive Director, but explain	ın Part III			
	П с			Mustbar amala, mant antende				
	· ·	ation committee ent compensation consultant	✓	Written employment contract Compensation survey or study				
		of other organizations	☑	Approval by the board or compensation	ation committee			
		-	_	,				
4	During the year, related organiza		990, Part VII, Se	ection A, line 1a, with respect to the f	filing organization or a			
а	_	ance payment or change-of-cor	atrol navment?			4a		No
ь		r receive payment from, a supp		lified retirement plan?		4b		No
c	•	r receive payment from, an equ	•	•		4c		No
	If "Yes" to any o	of lines 4a-c, list the persons ar	nd provide the app	olicable amounts for each item in Par	t III			
	- 1/ \/-	. ==-/ \/.						
5), 501(c)(4), and 501(c)(29		the organization pay or accrue any				
,		ontingent on the revenues of		the organization pay or accrue any				
а	The organization	17				5a		No
b	Any related orga	anization?				5b		No
	If "Yes," on line	5a or 5b, describe in Part III						
6		ed on Form 990, Part VII, Secti ontingent on the net earnings o		the organization pay or accrue any				
а	The organization	۱۶				6a		No
b	Any related orga					6b		No
	•	6a or 6b, describe in Part III						
7		ed on Form 990, Part VII, Secti escribed in lines 5 and 6? If "Ye		the organization provide any nonfixe art III	ed	7		No
8	subject to the in			red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," d	escribe			
	ın Part III					8		No
9	If "Yes" on line 8 53 4958-6(c)?	3, did the organization also foll	ow the rebuttable	presumption procedure described in	Regulations section	9		
For F		ction Act Notice, see the In	structions for E	orm 990 Cat No	50053T Schedule 1		. 000)	2019

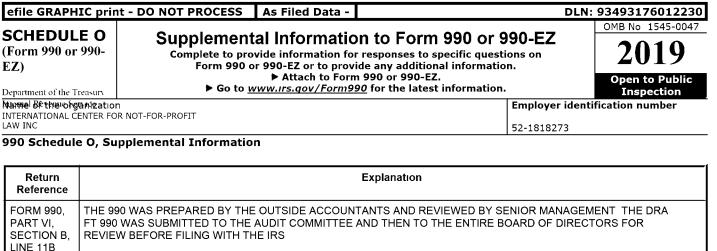
Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

Instructions, on row (II) Do not list any individuals that are not listed on Form 990, Part VII. Section A. June 12. applicable column (D) and (E) amounts for that individuals.

(A) Name and Title			dividual must equal the tol of W-2 and/or 1099-MISC		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990	
1 DOUGLAS RUTZEN PRESIDENT	(i)	187,765	0	0	19,245	14,661	221,671	0	
	(ii)		0	0	0	0	0	0	
2 DARLA MECHAM VICE PRESIDENT, FINANCE	(i)	137,667	0	0	15,000	17,932	170,599	0	
· 	(ii)		0	0	0	0	0	0	
3 CATHERINE SHEA VICE PRESIDENT,	(i)	173,658	0	0	17,534	14,721	205,913	0	
PROGRAMS	(ii)	0	0	0	0	0	0	0	
4 DAVID MOORE VICE PRESIDENT, LEGAL	(i)	169,638	0	0	16,909	8,002	194,549	0	
AFFAIRS	(ii)	0	0	0	0	0	0	0	
5 A NILDA BULLAIN VICE PRESIDENT,	(i)	163,494	0	0	16,909	14,492	194,895	0	
OPERATIONS	(ii)	0	0	0	0	0	0	0	
6 NATALIA BOURJAILY VICE PRESIDENT, EURASIA	(i)	152,879	0	0	15,511	5,518	173,908	0	
	(ii)	0	0	0	0	0	0	0	
7 JOCELYN NIEVA SR LEGAL ADVISOR, LATIN	(i)	140,410	0	0	14,159	13,755	168,324	0	
AMERICA	(ii)	0	0	0	0	0	0	0	
8 CLAUDIA GUADAMUZ SENIOR LEGAL ADVISOR -	(i)	127,062	0	0	12,770	11,019	150,851	0	
LATIN AMERICA	(ii)	0	0	0	0	0	0	0	
9 NOSHIR H DADRAWALA FORMER DIRECTOR	(i)	16,200	0	0	0	0	16,200	0	
	(ii)	0	0	0	0	0	0	0	
_									
	\Box								
	\vdash	 	-	·	 				
				1	[1			
Schedule J (For						J (Form 990) 2019			





Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	ON AN ANNUAL BASIS, ICNL STAFF SENDS THE CONFLICT OF INTEREST AND DISCLOSURE POLICY FORM TO EACH BOARD MEMBER AND EACH STAFF MEMBER, DIRECTOR, AND ADVISORY COUNCIL MEMBER, ALL OF WHOM ARE REQUIRED TO COMPLETE AND RETURN THE FORM ON AN ONGOING BASIS, RECIPIENTS ARE REQUIRED TO FILE AN UPDATED DISCLOSURE FORM, SHOULD RELEVANT CIRCUMSTANCES CHANGE CONFLICTS INVOLVING A DIRECTOR, ADVISORY COUNCIL MEMBER, OR KEY EMPLOYEE ARE ADDRESSED BY ICNL'S BOARD OF DIRECTORS FOLLOWING THE PROCEDURES OUTLINED IN ICNL'S CONFLICTS POLICY CONFLICTS INVOLVING A STAFF MEMBER WHO IS NOT A 'KEY EMPLOYEE' FOR THE PURPOSES OF FORM 990 ARE ADDRESSED BY ICNL'S PRESIDENT

Return Explanation Reference

990 Schedule O, Supplemental Information

FORM 990. ICNI, PURCHASED COMPARABILITY DATA FROM A FIRM SPECIALIZING IN THIS INFORMATION, COMPARABIL PART VI. ITY DATA WAS THEN PRESENTED TO THE BOARD OF DIRECTORS ALONG WITH PROPOSED SALARY LEVELS AT SECTION B. A MEETING OF THE BOARD OF DIRECTORS THE DIRECTORS DELIBERATED AND DECIDED ON COMPENSATION

LINE 15 N. AND THERE WAS CONTEMPORANEOUS SUBSTANTIATION OF THE PROCESS. THE LAST COMPENSATION REVI FW TOOK PLACE IN DECEMBER 2019 FOR ICNL'S PRESIDENT AND ALL OTHER KEY EMPLOYEES.

Return Explanation
Reference

FORM 990, PART VI, STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST THE AUDITED FINANCIAL STATEMENTS AND PUBL SECTION C, LIC DISCLOSURE COPY OF IRS FORM 990 ARE PUBLISHED ON WWW ICNL ORG

LINE 19

Return Explanation

Reference	
PART VII,	TWO BOARD MEMBERS RECEIVED COMPENSATION FOR PROVIDING PROGRAM SERVICES TO THE ORGANIZATION
SECTION A	AND NOT FOR SERVICES AS A BOARD MEMBER

Return Explanation
Reference

FORM 990, LOCAL HIRES AND LOCAL PARTNERS PROGRAM SERVICE EXPENSES 675,231 MANAGEMENT AND GENERAL E XPENSES 17,150 FUNDRAISING EXPENSES 8,132 TOTAL EXPENSES 700,513 INDEPENDENT CONTRACTOR S PROGRAM SERVICE EXPENSES 1,063,006 MANAGEMENT AND GENERAL EXPENSES 86,692 FUNDRAISING EXPENSES 89 TOTAL EXPENSES 1,149,787

Return Explanation

ALIDIT COMMITTEE TWO OF WILLOW MILET DE THE CHAID

990 Schedule O, Supplemental Information

DED JONE DVI AVAC STLIE DOADD CHALL ADDOINT

DADT VII

PART XII,	PER ICNL BYLAWS, THE BOARD SHALL APPOINT AUDIT COMMITTEE, TWO OF WHOM MUST BE THE CHAIR
LINE 2C	AND TREASURER THE AUDIT COMMITTEE SHALL ASSIST THE BOARD IN CHOOSING AN INDEPENDENT A
	UDITOR " THE AUDIT COMMITTEE "DETERMINES WHETHER TO ACCEPT OR REJECT THE AUDIT " HOWEVER,
	THE AUDIT COMMITTEE IS NOT RESPONSIBLE FOR COMPILATION OF ICNL'S FINANCIAL STATEMENTS, THI
	S IS THE RESPONSIBILITY OF ICNL'S VP-FINANCE AND CONTROLLER THE STATEMENTS ARE REVIEWED B
	Y AUDITORS. AND THE AUDIT REVIEW IS SUBMITTED TO THE AUDIT COMMITTEE

Return Reference	Explanation
PART IX, LINE 17	TRAVEL CONSISTS OF AIRFARES, LODGING AND, IN SOME CASES, PER DIEM ALLOWANCES ASSOCIATED WI TH BRINGING PROGRAM PARTICIPANTS TO TRAININGS WITHIN THEIR COUNTRY, TO REGIONAL MEETINGS, AND TO INTERNATIONAL EVENTS THIS CATEGORY ALSO INCLUDES TRAVEL COSTS FOR ICNL'S FELLOWSHI P PROGRAMS, WHICH BRING LOCAL CSO LEADERS TO A HOST CSO IN ANOTHER COUNTRY, OR TO AN ICNL OFFICE IN ADDITION TO THESE ACTIVITIES, THIS CATEGORY COVERS COSTS OF SENDING ICNL EMPLOY EES TO A COUNTRY TO PROVIDE TECHNICAL ASSISTANCE, TO MEET WITH PARTNERS, TO CONDUCT TRAINI NGS AND WORKSHOPS, AND TO CARRY OUT PROGRAMMATIC ACTIVITIES

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE R**

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

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information. 2019

Schedule R (Form 990) 2019

Employer identification number

Open to Public Inspection

DLN: 93493176012230 OMB No 1545-0047

Internal Revenue Service Name of the organization INTERNATIONAL CENTER FOR NOT-FOR-PROFIT

LAW INC

Department of the Treasury

(Form 990)

AW INC				52-1818273			
Part I Identification of Disregarded Entities. Complete	if the organization answer	ed "Yes" on Form 9	990, Part IV, line	33.			
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity		
(1) INTERNATIONAL CENTER FOR NOT-FOR-PROFIT LAW LLC 1126 16TH STREET SUITE 400 WASHINGTON, DC 20036 20-5736798	SERVICES TO PROMOTE AN ENABLING ENVIRONMENT FOR CIVIL SOCIETY	DE	1,377,383	496,202	INTERNATIONAL CENTER FOR PROFIT LAW INC	NOT-FOR-	-
							-
							-
							-
Part II Identification of Related Tax-Exempt Organization related tax-exempt organizations during the tax year.	ons. Complete if the organ	 zation answered "	Yes" on Form 99	0, Part IV, line 3	4 because it had one o	r more	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity sta (if section 501(c))		Section (13) con entil	512(b) ntrolled
(1)EUROPEAN CENTER FOR NON-FOR-PROFIT LAW APACZAI CSERE JANOS U 17 1ST FLOO BUDAPEST 1052 HU	PROMOTES STRENGTHENING OF A SUPPORTIVE LEGAL ENV FOR CIVIL SOCIETY	HU	FOREIGN ENTITY		ICNL INC	Yes	

Cat No 50135Y

	1 763	1 (-> 1	(4)	1 7-5	100	1 (=)			(:)	1 4	. 1	(1.5
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant Income(relate unrelated, excluded fror tax under sections 512	d, total income	(g) Share of end-of-year assets	Disprop alloca	h) rtionate tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	part	ral or laging	(k) Percenta <u>c</u> ownershi
				514)			V			\ <u>\</u>		
							Yes	No		Yes	NO	
						<u> </u>						
						1						
J Identification of Related Organiza because it had one or more related or (a) Name, address, and EIN of related organization	a corporation		st during th	(d) controlling Ty	(e)	(f) Share of total	Share	(g) of end-o	(I of- Perce	/, line 1) ntage	Sec	(ı) ction 512
related organization	(state	or foreign untry)		endry	or trust)	income		assets	OWITE	эшр	Ĺ	entity?
		.,,									┤,	<u>es 111</u>
											+	-
	l										- 1	
											_	_

Schedule R (Form 990) 2019					
Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.					
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No		
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		T			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		No		
b Gift, grant, or capital contribution to related organization(s)	1 b	Yes			
c Gift, grant, or capital contribution from related organization(s)	1c		No		
d Loans or loan guarantees to or for related organization(s)	1d		No		
e Loans or loan guarantees by related organization(s)	1e		No		
f Dividends from related organization(s)	1 f		No		
g Sale of assets to related organization(s)	1 g		No		
h Purchase of assets from related organization(s)	1h		No		
i Exchange of assets with related organization(s)	1 i		No		
	4.5	-	NI.		

d	Loans or loan guarantees to or for related organization(s)	1 d	No
е	Loans or loan guarantees by related organization(s)	1e	No
f	Dividends from related organization(s)	1f	No
g	Sale of assets to related organization(s)	1 g	No
h	Purchase of assets from related organization(s)	1h	No
i	Exchange of assets with related organization(s)	1 i	No
j	Lease of facilities, equipment, or other assets to related organization(s)	1j	No
k	Lease of facilities, equipment, or other assets from related organization(s)	1k	No
ı	Performance of services or membership or fundraising solicitations for related organization(s)	11	No

f Dividends from related organization(s)					I NO
g Sale of assets to related organization(s)				1 g	No
h Purchase of assets from related organization(s)				1h	No
i Exchange of assets with related organization(s)				1i	No
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)				1j	No
f k Lease of facilities, equipment, or other assets from related organization(s)				1k	No
l Performance of services or membership or fundraising solicitations for related organization(s)				11	No
$m{m}$ Performance of services or membership or fundraising solicitations by related organization(s)				1m	No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	No
o Sharing of paid employees with related organization(s)				10	No
p Reimbursement paid to related organization(s) for expenses				1 p	No
q Reimbursement paid by related organization(s) for expenses				1q	No
f r Other transfer of cash or property to related organization(s)				1r	No
f s Other transfer of cash or property from related organization(s)				1s	No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line	e, including covered r	elationships and tra	nsaction thresholds		
(a)	(b)	(c)	(d)		
Name of related organization	Transaction type (a-s)	Amount involved	Method of determining ar	mount involve	;u

j l	ease of facilities, equipment, or other assets to related organization(s)				123	110
k	_ease of facilities, equipment, or other assets from related organization(s)				1k	No
I F	erformance of services or membership or fundraising solicitations for related organization(s)				11	No
m	Performance of services or membership or fundraising solicitations by related organization(s)				1m	No
n S	haring of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	No
0	Sharing of paid employees with related organization(s)				10	No
р	Reimbursement paid to related organization(s) for expenses				1p	No
q	Reimbursement paid by related organization(s) for expenses				1 q	No
r	Other transfer of cash or property to related organization(s)				1r	No
s	Other transfer of cash or property from related organization(s)				1s	No
2	f the answer to any of the above is "Yes," see the instructions for information on who must complete this line	e, including covered r	elationships and tra	nsaction thresholds		
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining a	mount invol	ved
1)EUR	DPEAN CENTER FOR NOT-FOR-PROFIT LAW	В	133,667	ACTUAL GRANT AMOUNT AWAF	RDED	
		+	-	 		

•	Sharing of paid employees that related organization(s).				\vdash	
	Reimbursement paid to related organization(s) for expenses				1p 1q	No No
	Other transfer of cash or property to related organization(s)				1r 1s	No No
	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line				[]	
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining a	amount involv	ved
(1)EU	(a) Name of related organization ROPEAN CENTER FOR NOT-FOR-PROFIT LAW	Transaction	(c) Amount involved 133,667			ved
(1) EU	Name of related organization	Transaction type (a-s)	Amount involved	Method of determining a		ved
(1)EU	Name of related organization	Transaction type (a-s)	Amount involved	Method of determining a		ved
(1)EU	Name of related organization	Transaction type (a-s)	Amount involved	Method of determining a		ved

Schedule R (Form 990) 2019

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

was not a related organization. See instructions regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) re all partners section 501(c)(3) rganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)			(k) Percentage ownership
			514)	Yes	No	<u> </u>		Yes	No		Yes	No	
				_					_	Schedul	e R (Form	1 990)) 2019

