Department of the Treasury Internal Revenue Service

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

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

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

Α	For th	e 2019 calendar year, or tax year beginning and	ending							
B Check if C Name of organization D Employer identification num										
	applicab	* <u>IZAA</u> K WALTON LEAGUE OF AMERICA								
Г	Addre	MOUNTAINEER CHAPTER								
Ē	Name chang			55-064059	99					
Ē	Initial		Room/suite							
Ē	Final	PO BOY 1891	1100m, oako	304-636-6						
١	lreturn termir ated			G Gross receipts \$	297,158.					
Г	Amen	ded FIKING WAY 26241		H(a) Is this a group re						
F	Applica-									
_	ltion pendi	, ELKINS, WV 26241	\(\frac{1}{2}\)	H(b) Are all subordinates in						
_		empt status	or (1) 527	-	list (see instructions)					
		te: NWW.IWLA.ORG/MOUNTAINEER	JI LE ZINEI	H(c) Group exemption	•					
		organization: X Corporation	I Vaar		State of legal domicile: WV					
	art(I)	Summary	L TEAL	or formation. 1550 19	State of legal doffliche.					
10.3	1		ERVATI	ON						
٩	₃ '	bliefly describe the organization's mission of most significant activities	<u> </u>	.011						
Governance	2	Check this box If the organization discontinued its operations or dispos	ed of more	than 25% of its not ass	ets -					
Į,	3	Number of voting members of the governing body (Part VI, line 1a)	ied of filore	3	14					
Ş	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	14					
		Total number of individuals employed in calendar year 2019 (Part V, line 2a)		5	1					
i	3	Total number of volunteers (estimate if necessary)		6	0					
Activities &	6	•		- 1	0.					
٥	? / a	Total unrelated business revenue from Part VIII, column (C), line 12		7a						
_	<u> </u>	Net unrelated business taxable income from Form 990-T, line 39		7b						
		Contributions and grants (Part VIII line 1h)	-	Prior Year 18,497.	Current Year 27,720.					
9	8	Contributions and grants (Part VIII, line 1h)	}-	0.	0.					
Revenue	9	Program service revenue (Part VIII, line 2g)	<u> </u>	40,153.	32,299.					
٥	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		-48,830.	56,506.					
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-	9,820.	116,525.					
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		6,300.	3,300.					
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0,300.	<u> </u>					
	14	Benefits paid to or for members (Part IX, column (A), line 4)	 	6,370.	6,252.					
ď	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	 	0,370.	0,232.					
Fxnenses	10a	Professional fundraising fees (Part IX, column (A), line 11e)		V.						
Ž,	1 5	Total fundraising expenses (Part IX, column (D), line 25)		56,825.	50,203.					
•	' 17	Other expenses (Part IX, column (A), lines 11a·11d, 11f·24e)		69,495.	59,755.					
	18	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 MAY 0 4 20	ာမ္							
_		Revenue less expenses Subtract line 18 from line 12 10 MAY 0 4 20	20 Š	-59,675.	56,770.					
t Assets or	g	Total country (D. A.V. Lou 40)	<u> #</u>	ginning of Current Year 649,306.	End of Year 706,060.					
SSE	20 20	Total assets (Part X, line 16) Total liabilities (Part X, line 26)	JT TH							
Net A	21	Total liabilities (Fart X, III o 20)		905.	889. 705,171.					
듑	22 2rt/III	Net assets or fund balances Subtract line 21 from line 20 Signature Block		040,401.	703,171.					
	_			ante and to the best of mu	Ironuladas and balish it is					
		lities of perjury, I declare that I have examined this return, including accompanying schedules			knowledge and bellet, it is					
true	e, corre	t, and complete. Declaration of preparer (other than officer) is based on all information of wh	ich preparer	nas any knowledge.						
<u>.</u>	_	Signature of officer								
$H/2c/D_{co}$										
He	re	CLYDE THOMPSON, TREASURER Type or print name and title		1/00/00						
_										
USE	Use Only Firm's address 122B 3RD STREET Phonon 304-637-2929									
	ELKINS, WV 26241 Phone no. 304-637-2929									
		RS discuss this return with the preparer shown above? (see instructions)			X Yes No Form 990 (2019)					
932	001-01-2	0-20 LHA For Paperwork Reduction Act Notice, see the separate instruction	IIS.		FORM 330 (2019)					

IZAAK WALTON LEAGUE OF AMERICA MOUNTAINEER CHAPTER

orn	990 (2019) MOUNTAI	NEER CHAPTER	55-	0640599 Page 2
Ŗа	tilli Statement of Program Sei			
1 '	Briefly describe the organization's mission	sponse or note to any line in this Part on	. III	
	CONSERVATION	· · · · · · · · · · · · · · · · · · ·		
2	Did the organization undertake only each	front program on your during the yo	ar which ware not listed on the	
_	Did the organization undertake any signi prior Form 990 or 990-EZ? If "Yes," describe these new services on		ar which were not listed on the	Yes X No
3	Did the organization cease conducting, of "Yes," describe these changes on Sch	or make significant changes in how it	conducts, any program services?	Yes X No
4	Describe the organization's program sen	vice accomplishments for each of its anounced are required to report the amoun	three largest program services, as measure nt of grants and allocations to others, the to	
4a	(Code) (Expenses \$CONSERVATION AND COM	59,755. Including grants of \$	3 , 300 •) (Revenue \$)
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
		· · · · · · · · · · · · · · · · · · ·		
4d	Other program services (Describe on Sch	nedule O)) (Revenue \$)
4e	Total program service expenses	59,755.		Form 990 (2019)

MOUNTAINEER CHAPTER

55-0640599

Form 990 (2019) Rartily Checklist of Required Schedules

			res	NO
1,	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	İ		,,
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	_		_v
5	during the tax year? If "Yes," complete Schedule C, Part II	4		X
3	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	_		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	_5_		
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	۰		**
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X,	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			v
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
u	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	444		х
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d 11e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	ı ie	-	
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
I4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u>_x</u> _
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	<u>. </u>		v
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			v
17	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
• •	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	47		Х
18	column (A), lines 6 and 11e ² If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17	\rightarrow	
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	10		
-	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u> </u>
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
	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	21		Х
32003	01-20-20	Form	990 ₍	2019)

Form 990 (2019) MOUNTAINEER CHAPTE
| Part | V | 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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	1		
	Schedule J	23		X
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	1		
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			7.7
L	Schedule K. If "No," go to line 25a	24a		<u> </u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?			
А	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24u		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		_
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		_X_
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	5		
	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		ı	7.7
	"Yes," complete Schedule L, Part IV	28a	_	X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	_28b		
·	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? ##Yos " complete School/de L. Port IV.	200		Y
29	"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c 29		$\frac{x}{x}$
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		
	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		$\frac{x}{x}$
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32	1	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		<u>X</u>
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
26	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			v
37	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		<u> </u>
3,	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	31		
_	Note: All Form 990 filers are required to complete Schedule O	38	x	
<u>P</u> ai				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			5.
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
02000	(gambling) winnings to prize winners?	1c	990 c	2010

Form 990 (2019)

Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return X b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Х 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) X 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Х b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit Х any contributions that were not tax deductible as charitable contributions? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). Х a 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 b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required Х to file Form 8282? 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 7f f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? 9a b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 10a 10b b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders 11a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13: Note: See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 If "Yes," see instructions and file Form 4720, Schedule N X Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 If "Yes," complete Form 4720, Schedule O Form **990** (2019)

55-0640599

Page 6

MOUNTAINEER CHAPTER Form 990 (2019) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions

Check if Schedule O contains a response or note to any line in this Part VI X Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. b Enter the number of voting members included on line 1a, above, who are independent 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? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors, trustees, or key employees to a management company or other person? X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Х Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X Did the organization have members or stockholders? 6 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or Х persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 a The governing body? X X b Each committee with authority to act on behalf of the governing body? 8b 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? If "Yes," provide the names and addresses on Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a X b 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 X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. X 12a Did the organization have a written conflict of interest policy? If "No." go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X Did the organization have a written whistleblower policy? 13 13 X 14 Did the organization have a written document retention and destruction policy? 14 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? Х a The organization's CEO, Executive Director, or top management official 15a X b Other officers or key employees of the organization 15b 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 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? **Section C. Disclosure** List the states with which a copy of this Form 990 is required to be filed ▶WV 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Upon request Own website Another's website Other (explain on Schedule O) Describe on 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 20 State the name, address, and telephone number of the person who possesses the organization's books and records CLYDE THOMPSON - 304-636-6044 1301 S HENRY, ELKINS,

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

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

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

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

X Check this box if neither the organization in	nor any related organization	n compensated any current of	ficer, director, or trustee
-------------------------------------------------	------------------------------	------------------------------	-----------------------------

(A)	(B)			(((D)	(E)	(F)
Name and title	Average	, do		Posi	ition			Reportable	Reportable	Estimated
	hours per	pox	, unle	ss per	son :	s both	n an	compensation	compensation	amount of
	week	<u> </u>	cer ar	nd a di	recto	r/trus	tee)	from	from related	other
	(list any	Individual trustee or director						the	organizations	compensation
	hours for related	or d	8			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the
	organizations	rustee	Institutional trustee		99,	Highest compensated employee		(VV-2/1099-IVIISC)		organization and related
	below	dualt	rtiona	ارا	Key emptoyee	st cor	<u></u>			organizations
	line)	indin'	ustit	Officer	key eı	불물	Former			
(1) BRUCE EVANS	3.00		<u> </u>					-		
PRESIDENT		1						0.	0.	0.
(2) STEVE WILSON	3.00									
VICE PRESIDENT		1						0.	0.	0.
(3) TRISH THOMASON	3.00									
SECRETARY		1						0.	0.	0.
(4) CLYDE THOMPSON	3.00									
TREASURER								0.	0.	0.
(5) GARY MEADE	3.00									
ASST TREASURER								0.	0.	0.
(6) TOM DITTY	1.00									
PAST PRESIDENT								0.	0.	0.
(7) DON THOMASON	1.00							-		
DIRECTOR								0.	0.	0.
(8) CHRIS THOMPSON	1.00									-
DIRECTOR								0.	0.	0.
(9) GEORGE COLLETT	1.00									
DIRECTOR								0.	0.	0.
(10) DICK HAMRICK	1.00									
DIRECTOR								0.	0.	0.
(11) RAY MEARNS	1.00									
DIRECTOR				Ш				0.	0.	0.
(12) TOM ROAT	1.00									
DIRECTOR								0.	0.	0.
(13) MIKE LUDDLE	1.00	ļ								
DIRECTOR		_		Ш				0.	0.	0.
(14) ROCKY SIMMONS	1.00									
DIRECTOR	ļ	L		Ш		_		0.	0.	0.
	<u></u>									
		_	lacksquare	Ш						
		1								
		<u> </u>	\vdash	Ы		<u> </u>				
	L	<u> </u>				L				5000 (2010)

Form **990** (2019)

Form 990 (2019) MOUNTAINE									55-0	<u>640</u>	<u> 599 Pa</u>	ige 🕻
Part VII Section A. Officers, Directors, Trus	tees, Key Em	oloy	ees,	and	i Hig	ghes	st C	ompensated Employee	s (continued)			
. (A) Name and title	(B) Average hours per week	(do box offi	not c	Pos heck i ss per id a d	C) ItION more rson i	1 than is boti	one h an	(D) Reportable compensation from	(E) Reportable compensate from relate	on	(F) Estimate amount o	-
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-MI		compensati from the organizati and relate organizatio	e on ed
		_										
<u> </u>												
											<u></u>	
		_										
								_				
Subtotal Total from continuation sheets to Part VI Total (add lines 1b and 1c)	I, Section A						>	0.		0.		0.
Total number of individuals (including but n compensation from the organization	ot limited to th	ose	liste	d ab	ove) wh	o re		000 of reportabl			
3 Did the organization list any former officer,		ee, k	кеу с	empl	oye	e, or	hig	hest compensated emp	oyee on			No X
 line 1a? If "Yes," complete Schedule J for si For any individual listed on line 1a, is the su and related organizations greater than \$150 	ım of reportabl								ne organization			X
Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com-	ccrue comper	ısatı	on fi	om :	any	unre			lual for services	ļ	5	<u>ж</u>
Section B. Independent Contractors	olete Scheduli	<u> </u>	OF SI	ich t	ers	on					3	<u> </u>
Complete this table for your five highest counties the organization. Report compensation for the organization.										pensat	ion from	
(A) Name and business	address	NO	ONE	3				(B) Description of s	ervices	С	(C) ompensation	ì
									_			
							İ					
	-											
2 Total number of independent contractors (in	ncluding but no	ot lın	nited	to t	thos	e lis	ted	above) who received mo	ore than		ar.	

Page 9

Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII (C) Related or exempt Unrelated Revenuè excluded Total revenue from tax under function revenue business revenue sections 512 - 514 1 a Federated campaigns 15,704 **b** Membership dues 1b c Fundraising events 10 1d d Related organizations e Government grants (contributions) 1e f All other contributions, gifts, grants, and 12,016 similar amounts not included above 1f g Noncash contributions included in lines 1a-1f h Total. Add lines 1a 1f **Business Code** 2 a f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 13,072. 13,072. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (ı) Real (II) Personal 750 6 a Gross rents 0. b Less rental expenses 750. c Rental income or (loss) d Net rental income or (loss) (i) Securities (II) Other 7 a Gross amount from sales of _{7a}195,318. assets other than inventory b Less cost or other basis 176,091 and sales expenses 19,227 c Gain or (loss) 19,227. ,227 d Net gain or (loss) Other I 8 a Gross income from fundraising events (not including \$ contributions reported on line 1c) See 6,458 Part IV, line 18 2,682 b Less direct expenses 776. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See 7,609 Part IV, line 19 9a 1,860. 9ь b Less direct expenses 5,749 c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns 81 and allowances 10a 10b b Less cost of goods sold c Net income or (loss) from sales of inventory 81 **Business Code** 900099 11 a UNREALIZED GAIN ON INV 43,537 WAYS AND MEANS 900099 2,613. 2,613 b d All other revenue e Total. Add lines 11a 11d 116,525 79,612 Total revenue See instructions

IZAAK WALTON LEAGUE OF AMERICA 55-0640599 Page 10 MOUNTAINEER CHAPTER Form 990 (2019) Part X 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 (D) Fundraising (A) Total expenses (B) Do not include amounts reported on lines 6b. Program service expenses Management and 7b, 8b, 9b, and 10b of Part VIII general expenses expenses Grants and other assistance to domestic organizations 300. 300 and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 3,000. 3,000. individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 5,808. 5,808. Other salaries and wages Pension plan accruals and contributions (include R section 401(k) and 403(b) employer contributions) Other employee benefits 9 444. 444. 10 Payroll taxes 11 Fees for services (nonemployees) Management а **b** Legal 1,167. 1,167. c Accounting Lobbying Professional fundraising services. See Part IV, line 17 3,480. 3,480. Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) Advertising and promotion 12 308. 308. 13 Office expenses Information technology 14 15 Royalties 9,395. 9,395. Occupancy 16 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 1,067. 1,067. 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 5,867 5,867 22

Depreciation, depletion, and amortization

23

Other expenses. Itemize expenses not covered 24 above (List miscellaneous expenses on line 24e. If line 24è amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.1

NATIONAL MEMBERSHIP DUE

YOUTH ACTIVITY

WAYS AND MEANS C

d e All other expenses

Total functional expenses Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization

reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. if following SOP 98-2 (ASC 958-720)

Form **990** (2019)

0.

8,234

13,114.

4,078.

3,493.

59,755.

0

8,234

13,114

4,078.

3,493.

59,755

Form 990 (2019)
Part X Balance Sheet

		Check if Schedule O contains a response or note	e to any	line in this Part X			
•					(A) Beginning of year		(B) End of year
	•	Cook populatorest begins			8,297.	-	18,258.
	1	Cash - non-interest-bearing			95,433.	1	80,728.
	2	Savings and temporary cash investments			33,433.	2	00,720.
	3	Pledges and grants receivable, net			· ·	3	<u> </u>
	.4	Accounts receivable, net	fa	officer discount	**************************************	4	Company Constanting 1 1 1 100 100 100 100 100 100 100 100
	5	Loans and other receivables from any current or trustee, key employee, creator or founder, substa					
		controlled entity or family member of any of thes		•	<u> </u>	<i>37;"•2//</i>	COMBANIA CONTROL CONTROL ST
	6	Loans and other receivables from other disqualifi	•				
	"	under section 4958(f)(1)), and persons described		·	\$55.840 Ad Milathiakiir XX F27 Addithia F87 T29-SAllah.	<i>3//////////</i> 6	**************************************
	7	Notes and loans receivable, net	111 36011	011 4930(0)(3)(B)		7	· · · · · · · · · · · · · · · · · · ·
ets	8	Inventories for sale or use				8	
Assets	9	Prepaid expenses and deferred charges			·-··	9	
-	l	Land, buildings, and equipment cost or other	1 1		(63.3× 55.65 (1) (1) (1.17 + 4) (1) (1) (4.4 + 1) (5.57)		
	loa	basis Complete Part VI of Schedule D	10a	283,339.	aniinii karaan karaan karaan karaan karaan karaan karaan karaan karaan karaan karaan karaan karaan karaan kara Karaan karaan		
	ь		10b	130,141.	159,065.	10c	153,198.
	11	Investments - publicly traded securities	100	150,141.	271,339.	11	369,672.
	12	Investments - other securities See Part IV, line 1	1		115,172.	12	84,204.
	13	Investments - program-related See Part IV, line 1			113/1/20	13	01,201.
	14	Intangible assets	•			14	
	15	Other assets See Part IV, line 11				15	-
	16	Total assets. Add lines 1 through 15 (must equa	al line 33	1)	649,306.	16	706,060.
	17	Accounts payable and accrued expenses			905.	17	889.
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete F	Part IV o	f Schedule D		21	
w	22	Loans and other payables to any current or form					
Liabilities		trustee, key employee, creator or founder, substa	antial co	entributor, or 35%			
ā		controlled entity or family member of any of these	e persor	ns		22	
Ĩ	23	Secured mortgages and notes payable to unrelate	ted third	parties		23	
	24	Unsecured notes and loans payable to unrelated	third pa	arties		24	
i	25	Other liabilities (including federal income tax, pay	yables to	related third			
		parties, and other liabilities not included on lines	17-24)	Complete Part X			
		of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			905.	26	889.
		Organizations that follow FASB ASC 958, chec	ck here	► X		BASTA	
Ses		and complete lines 27, 28, 32, and 33.					
ğ	27	Net assets without donor restrictions			648,401.	27	705,171.
g	28	Net assets with donor restrictions				28	
פ		Organizations that do not follow FASB ASC 95	58, chec	k here 🕨 🗌		aggy, 200 Maria	3544400 (1773956)
ב		and complete lines 29 through 33.				Man / 182	
õ	29	Capital stock or trust principal, or current funds				29	
Set	30	Paid-in or capital surplus, or land, building, or equ	uipment	fund		30	"
As	31	Retained earnings, endowment, accumulated inc	come, or	other funds		31	
Net Assets or Fund Balances	32	Total net assets or fund balances			648,401.	32	705,171.
	33	Total liabilities and net assets/fund balances			649,306.	33	706,060.
							Form 990 (2019

	990 (2019) MOUNTAINEER CHAPTER	55-	0640599	Pag	<u>е</u> 12
Pa	Reconciliation of Net Assets	_			
	Check if Schedule O contains a response or note to any line in this Part XI				
•					
1	Total revenue (must equal Part VIII, column (A), line 12)	1 1	116	, 52	25.
2	Total expenses (must equal Part IX, column (A), line 25)	2		,75	
3	Revenue less expenses Subtract line 2 from line 1	3	56	,77	70.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	_4	- 648	,40	1.
5	Net unrealized gains (losses) on investments	5	_		
6	Donated services and use of facilities	6			
7	Investment expenses	7	-		
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	705	,17	<u>'1.</u>
Pa	TEXII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII			[
				/es	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both				被劈
	Separate basis Consolidated basis Both consolidated and separate basis				
þ	Were the organization's financial statements audited by an independent accountant?		2b	200 cast 100	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basıs,			
	consolidated basis, or both		22		
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audıt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	404+74% A	*vukatan 1
_	If the organization changed either its oversight process or selection process during the tax year, explain on Scho				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audi	1 1		
	Act and OMB Circular A-133?		3a	-+	<u>X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?	ed audit	1 1		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	-	
	· ·		Form 9	9U (2	(019

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization IZAAK WALTON LEAGUE OF AMERICA Employer identification number MOUNTAINEER CHAPTER 55-0640599 Part Reason for Public Charity Status (All organizations must complete this part) See instructions. The organization is not a private foundation because it is (For lines 1 through 12, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions) Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g J Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. ☐ Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with. its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) Is the organization listed (i) Name of supported (ii) EIN (III) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document (described on lines 1-10 organization support (see instructions) support (see instructions) above (see instructions))

Total

Schedule A (Form 990 or 990-EZ) 2019 MOUNTAINEER CHAPTER 55-0640

Part III Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) 55-0640599 Page 2

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Sec	tion A. Public Support		<u> </u>				
Calé	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Gifts, grants, contributions, and				.	•	
	membership fees received (Do not						
	include any "unusual grants.")	142,388.	36,615.	39,235.	33,998.	44,481.	296,717.
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	142,388.	36,615.	39,235.	33,998.	44,481.	296,717.
5	The portion of total contributions	h					
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included	The All					
	on line 1 that exceeds 2% of the						
	amount shown on line 11,		fire to the last			****	
	column (f)	Simple of the state живиния держиний и Ст. Ст. Ст. Ст. Ст. Ст. Ст. Ст. Ст. Ст.	authummunummunumminumitseaseeten				
	Public support. Subtract line 5 from line 4	indication in the second second				Andread Anna Anna Anna Anna Anna Anna Anna An	296,717.
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2015 142, 388.	(b) 2016	(c) 2017 39, 235.	(d) 2018 33, 998.	(e) 2019	(f) Total
	Amounts from line 4	142,300.	36,615.	39,433.	33,998.	44,481.	296,717.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties, and income from similar sources	11,716.	23,309.	11,510.	11,831.	13,822.	72,188.
۵	Net income from unrelated business	11,/10.	23,309.	11,510.	11,031.	13,022.	12,100.
9	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)						
11	Total support. Add lines 7 through 10	is for the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of the construction of	และเกมนัก ปีใช้ส ามและสาสสีสีสีสี	ป็นคราบทางเร าเล้าส ับสายครั้งเกาได้เลื่อเกา	ng the little account of the second of the	าร์มสาเมนที่ปฏิที่สำหันและเลยเป็นได้เก็บกลับเลยเ	368,905.
	Gross receipts from related activities,		ns)			12	
	First five years. If the Form 990 is for		•	, fourth, or fifth ta	x year as a section		
	organization, check this box and stop	here		·	·		▶ □
Sec	tion C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2019 (li	ne 6, column (f) di	vided by line 11, co	olumn (f))		14	80.43 %
15	Public support percentage from 2018	Schedule A, Part I	II, line 14			15	80.87 %
16a	33 1/3% support test - 2019. If the o	rganization did no	t check the box on	line 13, and line 1	14 is 33 1/3% or m	ore, check this box	
	stop here. The organization qualifies	as a publicly suppo	orted organization				\triangleright [X]
b	33 1/3% support test - 2018. If the o	rganization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization quali		•				▶∟
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fact			•	•	t VI how the organ	ızatıon
_	meets the "facts-and-circumstances" i	-			•		▶∟
b	10% -facts-and-circumstances test						
	more, and if the organization meets th						. —
40	organization meets the "facts-and-circ				-		▶⊣
18	Private foundation. If the organization	n did not check a b	oox on line 13, 16a	, 16b, 17a, or 17b	, check this box ar	na see instructions	

Schedule A (Form 990 or 990-EZ) 2019

IZAAK WALTON LEAGUE OF AMERICA
Schedule A (Form 990 or 990-EZ) 2019 MOUNTAINEER CHAP(TER
Part III) Support Schedule for Organizations Described in Section 509(a)(2)

qualify under		the box on line to	or Part I or Intine c	organization failed	to qualify under Pa	art II If the organiz	zation fails to
quality under	the tests listed be	low, please comp	lete Part II)				
Section A. Public S	upport						
Calendar year (or fiscal yea	r beginning in) ►	(a) 2015	(b) 2016 \	(c) 2017	(d) 2018	(e) 2019	(f) Total
 Gifts, grants, contrib 		ı	1			ŀ	
 membership fees re 			· - \				
include any "unusua	ıl grants ")						
2 Gross receipts from merchandise sold or formed, or facilities any activity that is re organization's tax-ex	r services per- furnished in elated to the						
3 Gross receipts from	activities that			\			
are not an unrelated iness under section				\			
4 Tax revenues levied	for the organ-						
ızatıon's benefit and	· · ·			\			
or expended on its t	pehalf			\			•
5 The value of service	s or facilities						-
furnished by a gover	rnmental unit to			\			
the organization with	nout charge			1	•		
6 Total. Add lines 1 th	rough 5			\ \ \			
7a Amounts included o	n lines 1, 2, and						
3 received from disc	ualified persons						
b Amounts included on lines from other than disqualified exceed the greater of \$5,00 amount on line 13 for the year	persons that 0 or 1% of the						
c Add lines 7a and 7b							
8 Public support. (Sub			minumumika karangan da karanga	ng dalaliti ringga adag hillitila ingga a	the Manustral Miller St. Little St.	luli a	
Section B. Total Su				<u> </u>	manipulan de , mao ja	Tala a 2 11 Semmalanda 1 11 Semalan Si	<u>''</u>
	I - I			1			
Calendar year (or fiscal yea		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	r beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
Calendar year (or fiscal yea	interest, s received on ts, royalties,	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
Calendar year (or fiscal yea 9 Amounts from line 6 10a Gross income from individends, payments securities loans, ren	interest, s received on ts, royalties, nilar sources	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
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Schedule A (Form 990 or 990-EZ) 2019 MOUNTAINEER CHAPTER

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and *If you checked 12a or 12b in Part I, answer (b) and (c) below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document)
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?

 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

<u> </u>	Yes	No
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3b		1982
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minimu	tationals, capporting 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)	1 4 1/19 2 1/12 1/15	175 - Unit 1821 1/18	
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	Selle Seller		
	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	Williams	1352/4	
	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			W/X
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			100
	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			263//
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (II) a copy of the Form 990 that was most recently filed as of the date of notification, and (III) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how		La Chi	11.80
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a	1877	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
	significant voice in the organization's investment policies and in directing the use of the organization's	11/1/2		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	Sugar Sugar	marinti	1/1/200
	supported organizations played in this regard.	3		L
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions))-		
а	The organization satisfied the Activities Test Complete line 2 below			
b	The organization is the parent of each of its supported organizations Complete line 3 below			
С	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see insti	ructions)		
2	Activities Test Answer (a) and (b) below.	0 5 4 6//3 4	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	72/14		
	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		30 MM	
	that these activities constituted substantially all of its activities.	2a	3/8/11/4/11/25	11,00000 601114
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more		1	7
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
_	activities but for the organization's involvement	2b	4/1///1928 2020	V. Shahhadi
3	Parent of Supported Organizations Answer (a) and (b) below.			See See
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	MINE.		
	trustees of each of the supported organizations? Provide details in Part VI.	3a	25 X 111/11/12	26/16076248
b		2337/100	FORTAL	
	of its supported organizations? If "Ves " describe in Part VI the role played by the organization in this regard	l 35 l		l

IZAAK WALTON LEAGUE OF AMERICA

Schedule A (Form 990 or 990-EZ) 2019 MOUNTAINEER CHAPTER 55-0640599 Page 6 Part 1 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) Net short-term capital gain 1 2. 2 Recoveries of prior-year distributions Other gross income (see instructions) 3 4 Add lines 1 through 3 4 5 Depreciation and depletion 5 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 Other expenses (see instructions) 7 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year) a Average monthly value of securities b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) <u>1</u>d e Discount claimed for blockage or other factors (explain in detail in Part VI) Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d. 3 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions) 4 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Multiply line 5 by 035 6 Recoveries of prior-year distributions 7 7 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount Current Year Adjusted net income for pnor year (from Section A, line 8, Column A) 1 Enter 85% of line 1 2 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 Enter greater of line 2 or line 3 4 5 5 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedule A (Form 990 or 990-EZ) 2019

instructions)

Schedule A (Form 990 or 990-EZ) 2019 MOUNTAINEER CHAPTER 55-0640599 Page 7 Part Val. Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI) See instructions. 6 7 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 10 Line 8 amount divided by line 9 amount (ii) (iii) Underdistributions Distributable Section E - Distribution Allocations (see instructions) **Excess Distributions** Pre-2019 Amount for 2019 3-34 6-34 686 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 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 Carryover from 2014 not applied (see instructions) Remainder Subtract lines 3g, 3h, and 3i from 3f Distributions for 2019 from Section D. a Applied to underdistributions of prior years b Applied to 2019 distributable amount c Remainder Subtract lines 4a and 4b from 4 Remaining underdistributions for years prior to 2019, if any Subtract lines 3g and 4a from line 2 For result greater than zero, explain in Part VI. See instructions Remaining underdistributions for 2019 Subtract lines 3h and 4b from line 1 For result greater than zero, explain in Part VI See instructions Excess distributions carryover to 2020. Add lines 3j and 4c Breakdown of line 7 a Excess from 2015 b Excess from 2016

Schedule A (Form 990 or 990-EZ) 2019

c Excess from 2017

d Excess from 2018

e Excess from 2019

IZAAK WALTON LEAGUE OF AMERICA

Schedule A	(Form 990 or 990-EZ) 2019 MOUNTAINEER CHAPTER	<u>55-0640599 Page</u>
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a	or 17h Part III line 12
remainer" St	Part IV Control A lines 1.0.25 20 45 45 45 5 5 0 00 00 00 10 10 10 10 10 10 10 10 10 1	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	s I 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 IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1c, 2a, 2b, 3a, and 3b, Part V, line 1c, 2a, 2b, 3a, 3a, 3b, 3a, 3a, 3b, 3a, 3b, 3a, 3a, 3a, 3a, 3a, 3a, 3a, 3a, 3a, 3a	t 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 addit	ional information
	(See instructions)	
		<u> </u>
	•	

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SCHEDULE D

(Form 990)⁵

Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
➤ Attach to Form 990.

OMB No 1545-0047

Name of the organization

Department of the Treasury Go to www.irs.gov/Form990 for instructions and the latest information. IZAAK WALTON LEAGUE OF AMERICA Employer identification number MOUNTAINEER CHAPTER 55-0640599 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the |Partil organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (duning year) Aggregate value at end of year 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? 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? Partill 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 (for example, recreation or education) Preservation of a 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 Tax Year

а	Total number of conservation easements	_2a	
b	Total acreage restricted by conservation easements	2b	
С	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure		
	listed in the National Register	2d	
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization	zation	during the tax
	.		

3 Number of states where property subject to conservation easement is located

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7

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)?

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. ||Part||||| Complete if the organization answered "Yes" on Form 990, Part IV, line 8

1a If the organization elected, as permitted under FASB 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

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue 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 FASB ASC 958 relating to these items

a Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

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

Schedule D (Form 990) 2019

Yes

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		ALTON LEAG		' AMER	ICA					
		NEER_CHAPT					_	<u>55-06</u>	40599	Page 2
Pa	rt III Organizations Maintaining C	ollections of Ar	t, Histo	rical Tre	asures, o	r Other S	<u>Simila</u>	r Assets	(continue	ed)
3	Using the organization's acquisition, accessi	on, and other record	is, check	any of the f	following that	t make sign	ııficant ı	use of its		
	collection items (check all that apply)									
а	Public exhibition d Loan or exchange program									
þ	Scholarly research	•	e [(Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	•		-	_	•		se in Part I	XIII	
5	During the year, did the organization solicit of					er sımılar as	sets	_	7	
D-	to be sold to raise funds rather than to be ma								Yes	No
Pai	t IV Escrow and Custodial Arran	gements. Compl	lete if the	organizatio	n answered	"Yes" on Fo	orm 990), Part IV, I	ine 9, or	
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for c	ontributions	s or other as:	sets not inc	luded	_	7	
	on Form 990, Part X?								」Yes	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	illowing ta	able						
	_						\vdash		Amount	
C	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						<u>1f</u> _		1.,	
2a	Did the organization include an amount on F					-	7		Yes	⊢ No
Pai	If "Yes," explain the arrangement in Part XIII									
Га	T V Endowment Funds. Complete	_			1	T T	» TL			
	Decrease of wear belows	(a) Current year	(b) Pi	rior year	(c) Two yea	rs dack (d) Inree	ears back	(e) Four ye	ars back
1a	Beginning of year balance									
b	Contributions									
C	Net investment earnings, gains, and losses		-							
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs Administrative expenses		 							
'	End of year balance		1				-			
g 2	Provide the estimated percentage of the curr	ent year and balanc	e (line 1a	column (a)	l held as					
a	Board designated or quasi-endowment	ent year end balanc	.e (iii.e i g %	, column (a)	II Held as					
h	Permanent endowment		— ″							
C										
·	The percentages on lines 2a, 2b, and 2c sho	· -								
3a	Are there endowment funds not in the posse	•	ation that	are held ar	nd administer	ed for the	าเดลกเร	ation		
-	by:	oolon or the organiza	anon ma	aro mora ar	10 4011111110101	00 101 1110 1	organic.	20011	[v	es No
	by: (i) Unrelated organizations Yes No 3a(i)									
	(ii) Related organizations								3a(ii)	+-
b	b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b									
4	Describe in Part XIII the intended uses of the	· ·							<u> </u>	
Pai										
	Complete if the organization answere		0, Part IV.	line 11a S	ee Form 990	, Part X, lin	e 10.			
	Description of property (a) Cost or other (b) Cost or other (c) Accumulated (d) Book value									
		basis (investi			(other)		eciation		(-) = (
1a	Land				2,342.				102	,342.
b					0,357.	11	6,7	42.		,615.
c	Leasehold improvements				5,756.		2,3	99.		,357.
	Equipment		-		4,884.	1	1,0	00.		,884.

Schedule D (Form 990) 2019

153,198.

d Equipment e Other

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

(5)	l .
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	
Part X Other Liabilities.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f See Form 990, Part X, line 25	
1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	_
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	
2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements the	nat reports the

932053 10-02-19

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

Schedule D (Form 990) 2019

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	IZAAK WALTON LEAGUE OF A	MERICA	55 0640500	
	dule D (Form 990) 2019 MOUNTAINEER CHAPTER	manta With Davanu	<u>55-0640599</u>	Page 4
Ϊď	Reconciliation of Revenue per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line		ie per Heturn.	
1	Total revenue, gains, and other support per audited financial statements	124		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
		ا مو ا		
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
- · °.		2c	-	-
	Other (Describe in Part XIII)	2d	32.000	
е	· ·			
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b	3433/h	
С	Add lines 4a and 4b	•	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)		5	
(Pa	Reconciliation of Expenses per Audited Financial Stat	· ·	ses per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 1	Militar Maria	
а	Donated services and use of facilities	_2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII)	2d_		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	in an in	
b	Other (Describe in Part XIII)	4b		
С	Add lines 4a and 4b	•	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.))	5	
Pa	MAXIII Supplemental Information.		•	
Prov	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part IV, lines 1b and 2b, P	Part V, line 4, Part X, line 2, Part XI	١,
lines	2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any	additional information		
	<u> </u>			
	<u> </u>			

Schedule D (Form 990) 2019

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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

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

IZAAK WALTON LEAGUE OF AMERICA

Employer identification number

OMB No 1545-0047

Open to Public

MOUNTAINEER CHAPTER	55-0640599
REVIEWED BY BOARD PRIOR TO SUBMISSION	
REVIEWED BI BOARD PRIOR TO BODMIDSION	
FORM 000 PARK UT GEGETON G. LINE 10.	
FORM 990, PART VI, SECTION C, LINE 19:	
AVAILABLE UPON REQUEST	
·	