2940305118808

Form 990 (Rev January 2020)

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

ОМВ No. 1545-0047 2019

Depa	iriment of the	e Treasury Service			o not enter s Go to www.	iociai security i Irs.gov/Form9:	numbers on thi 80 for instructi	s form as it may ons and the lates	be made public.		Open to Public.
		2019 calendar y	ear, or ta				, and endin				1.10000001
	Check if appl		organization			NATIONAL	SEAKEEPI		<del></del>	D Employer	identification number
	Address cha				CIETY I					1	
$\equiv$	Name chang	Doing by	siness as							58-23	385869
$\equiv$	_	Number		nd street (or P O box if mail is not delivered to street address) Room/suite							number
	nillat return		ARAGO			PLOOR			<u> </u>	786-9	24-6209
	Final return/ terminated				intry, and ZIP or	foreign postal code				ľ	
	Amended ret		L GAB	LBB principal offi		FL 3313	4		<del></del>	Q Gross rece	pts 3,890,178
$\overline{\Box}$	Application p	. F			CH				H(a) is this a gr	oup return for su	bordinates? Yes X No
. ت	ubbiiransi b	, 7770	HARD		750	•					ā. ā.
		1	AL GA	ON A	V E.	127	33134	_	H(b) Are all sut		seo watunchous)
	•	[22]		1				$-\Delta 2$	⊢ "‴	ander a mar to	is with deports
	Tax-exempt Website.		01(c)(3)	501(c)		(insert no )	4947(a)(1) or	\$27	식		_
	Form of orga		poration	Trust	Association	Other >		1 VY.	Year of formation: 1	222	
	art I	Summary	porason	(11051_)	ASSOCIATION	Outer	<del></del>	1	Tear of formation: 4	330	M State of legal dorrucile FL
		efly describe the	organiza	tion's mus	sion or most	significant act	tivities		<del></del>		······································
6		See Schedu	_		J. J	organicant ac		•		••	
ğ											•
٤											
Governance	2 Ch	eck this box 🕨	if the	organizatio	nn discontinu	ed its operation	one or districts	d-of-more-thon-2	5%-of-its-net, as:	enta	
		mber of voting n					A)	RECEIV	FD	3	5
2 8		mber of Indepen		_	• •	-	·			4	2
IVIAI 1 4 C	l .	tal number of inc		•	•		1W1	•		5	4
ר לַ		tal number of vo			•		ω,	JUL 01 2	020	6	200
₹ `		tal unrelated bus			*-		12			7a	0
<b>≥</b>	b Ne	t unrelated busir	lexel eees	ole income	e from Form	990-T, line 39	(	OGDEN.	UT	76	0
SCANNED							Prior Ye		Current Year		
및 e	B Co	ntributions and g			-				19,20		2,832,572
多引	9 Pro	ogram service re	venue (P	art VIII, lin	e 2g)				1,53	8,477	1,057,606
<b>4</b> 0	10 Inv	estment income	(Part VIII	, column (		0					
5	11 Oll		art VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)								2 222 172
<b>~</b>			d lines 8 through 11 (must equal Part VIII, column (A), tine 12) 20,74								3,890,178
1			milar amounts paid (Part IX, column (A), lines 1-3) to or for members (Part IX, column (A), line 4)								0
									219	7,914	234,303
Expenses		laries, other com	•		-		n (A), iines 5-	10)		7,465	234,303
뜋		ofessional fundra	-				15	,450		7,303	<del></del>
ă		tal fundraising ex her expenses (Pi						, 150	9,59	1,191	7,747,307
ļ		lai expenses. Ad					line 25\			9,570	7,981,610
ŀ		venue less expe		-			, mic 23)		10,92		-4,091,432
ठड़ा	.5 110	- Single House Gape	uut			· <del>-</del>	······································		Beginning of Cur		End of Year
Net Assets or Fund Balances	20 Tot	lai assets (Part )	(, line 16)						33,23		29,154,983
28	21 Tot	tal habilities (Par	X, line 2	6)						270	5,718
울	22 Ne	t assets or fund	palances.	Subtract	line 21 from	line 20			33,23	3,849	29,149,265
	art II	Signature	Block								<del></del>
											wledge and belief, it is
tru	e. correct.	and complete. De	claration o	f preparer (	other than off	icer) is based or	n all information	of which preparer	has any knowledg	θ.	<u>-</u>
	[ ]		114								
Sig		Signature of of	icar	<b>'</b>	~ ~ ~	Paris	ent &	CED	6	1500/2	<b>)</b>
Her	'e	Kicl	14101		DW, 1	18,9	ent q			11/10	
		Type or print no				December 2			18-1-		X II PTIN
Paid	, 1	nnVType preparers n				Preparer's signa			Dato		
Prep		ARVEY JUDKOW:		37532 -	TIDE CLIE	HARVEY JUI				/20 solf-empl	
-	Only	rm a name			ODKOWI 7 92ND	TZ, CPA	<u>.                                    </u>			rm's EIN 🕨	65-0214942
-55	- T					AVE .76-7121	Ì		[.		305-378-1948
Man		um's address		MI, F						hone no	X Yes No
-		discuss this retu k Reduction Act I					C((U)13)				Form 990 (2019)
DAA	-aperwor	- vearctiou WCf i	-ouco, 80	9 <b>4</b> 08 911 0	เลเล เกลเรนต์!!!	und.					Form & & U (2019)

	9) THE INTERNATION		58-2385869	<del></del>	Page 2
Part III	Statement of Program Se	rvice Accomplishments ins a response or note to a	ny line in this Part III		$[\widetilde{\mathbf{X}}]$
1 Briefly de	scribe the organization's mission	ins a response or note to an	ly line in this Fact in		
See Sc	hedule O				
	•	ant program services during the ye	ar which were not listed on the		
	n 990 or 990-EZ? describe these new services on Sc	hedule O			Yes X No
services?		nake significant changes in how it	conducts, any program		Yes X No
	describe these changes on Sched the organization's program service		hree largest program services, as	measured by	
expenses		organizations are required to repor	t the amount of grants and allocation	•	
IMMEDI SEAKEE OVER. KEEPIN	ATELY DELIVERED PERS OVER THREE THE CHARTERING PERSONATED VESSEL	TO A CHARTERING A YEARS, WITH A PUR ROGRAM EASES THE B AND FACILITATES	DER DONATED TO SE	VENUE IS TER THE T CANT COST ION TO PR	ERM IS S OF ESERVE THE
WHICH SCIENT HOSTIN SCIENT ENABLE	FACILITATE PROGRATIFIC DISCOVERY, OF THE PROGRATION OF THE PROGRAMMENTS OF THE PROGRAM	AMMING BY PROVIDI COMMUNITY OUTREAC SIONS FOR UNDERPR R GENOME SEQUENCI PROGRAMMING IS	ofs )(  HTS ARE PRIVATELY  NG ACCESS TO THE  H AND ARTISTIC IN  IVILEGED KIDS TO  NG, YACHTS ARE TH  COMPRISED OF THRE  DEPLOYMENTS AND E	OCEAN FOR SPIRATION FACILITATE PLATFORE CATEGOR	RESEARCH, . FROM ING M TO IES:
c (Code: SPECIA	) (Expenses \$ L EVENT EXPENSES	67,813 including grants of	of S ) (I	Revenue \$	57,441)
	gram services (Describe on Sche	•	) (Revenue S		
(Expense: le Total prog	s \$ II	scluding grants of \$ 535,300	) luesquie s		-4
					Form <b>990</b> (2019

ABCDGMO

# Form 990 (2019) THE INTERNATIONAL SEAKEEPERS

58-2385869

Page 3

P	art IV: Checklist of Required Schedules			•
			Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			, ·
	complete Schedule A	1 1	X	l
2	is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Pert II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	<u> </u>		
•	assessments, or similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C. Part III	5	x	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	<u> </u>		
•	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	}		
	"Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space.			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	<del>-'</del>		-
•	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			
9				
	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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI.	10		-
• •	VII, VIII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? // "Yes."	1 1		
•	complete Schedule D. Pert VI	11a	x	
h	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
_	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more	110		
•	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
а	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			<u> </u>
•	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	110		X
í	Did the organization's soparate 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	111	Ì	X
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D. Parts XI and XII	12a		x
ь	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization enswered "No" to line 12s, then completing Schedule D, Parts XI and XII is optional	12b		X
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking.			
	fundraising, business, investment, and program service activities outside the United States, or aggregate		- 1	
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F. Parts I and IV	14b		X
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G. Part I (see instructions)	17	Х	
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		1	
	If "Yes," complete Schedule G, Part III	19		X
0a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20ь		
1	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u> </u>

Form 990 (2019)

_P	art IV Checklist of Required Schedules (continued)			raye
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22	ŀ	X
23	Did the organization enswer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the		1	1
	organization's current and former officers, directors, trustees, key employees, and highest compensated	ŀ	]	
	employees? If "Yes," complete Schedule J	23	1	X
248	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			ŀ
	through 24d and complete Schedule K If "No," go to line 25a	248	1	x
b	and the state of the second of the second by bottom a temporary period axeability	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			Т
	to defease any tax-exempt bonds?	24c		L
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
26a	A TO THE STATE OF			T
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
þ	is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			Т
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?		i	
	If "Yes," complete Schedule L, Part I	25b	ľ	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%	1		
	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. Pert III	27	L	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L. Part	-		·
	IV instructions, for applicable filing thresholds, conditions, and exceptions):	,		
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			ſ
	"Yes," complete Schedule L. Part IV	28a		x
þ	A family member of any individual described in line 28a? If "Yes," complete Schedule L. Part IV	28b		X
C	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	<u> </u>	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? // "Yes," complete Schedule M ,	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N. Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			ĺ
	or IV, and Part V. line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
Ь	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			ĺ
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		L
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			l
	related organization? If "Yes." complete Schedule R, Pert V, line 2	38		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		٠, ا	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Pert VI	37		X
8	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	1 1		ĺ
	19? Note: All Form 990 filers are required to complete Schedule O.	38		X
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			·,
	Check if Schedule O contains a response or note to any line in this Part V	<del></del>		
	1 1 <del>-</del>	ا	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable  1a 7	<u>-</u>		ĺ
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  1b			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and	1 1		i

reportable gaming (gambling) winnings to prize winners?

Form	1 990 (2019) THE INTERNATIONAL SEAKEEPERS 58-2385869		Р	age 5
_ <u>P</u> e	irt:V Statements Regarding Other IRS Filings and Tax Compliance (continued)			<del>,</del>
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1		1
	Statements, filed for the calendar year ending with or within the year covered by this return  2a 4	┨┈	x	
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	_2b		
20	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	38		х
3a 6	Did the organization have unrelated business gross income of \$1,000 or more during the year?  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.	30	_	
70	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	1	ж
ь	If "Yes," enter the name of the foreign country	1 30		-
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	1		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
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 any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	ł		
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	1		
8	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		X
Ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	<u>76</u>	<b> </b>	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	1_		v
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 6282 filed during the year	7e		х
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71	$\vdash$	X
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		$\frac{\hat{\mathbf{x}}}{\mathbf{x}}$
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	x	-
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	<b></b>		$\vdash$
•	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
ь	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter.	•		<b>2</b>
8	Initiation fees and capital contributions included on Part VIII, line 12	<u> </u>  .		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>」</b> ``	` "	
11	Section 501(c)(12) organizations. Enter.			
a	Gross income from members or shareholders	4 .	!	
Ъ	Gross income from other sources (Do not net amounts due or paid to other sources		٠,	
40-	against amounts due or received from them.)	-l-a-		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year  Section 501(c)(29) qualified nonprofit health insurance issuers.	-	,	
13	Is the organization licensed to issue qualified health plans in more than one state?	13a		
а	Note: See the instructions for additional information the organization must report on Schedule O.	150		
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			
С	Enter the amount of reserves on hand	1		
148	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachule payment(s) during the year?	15		<u> </u>
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O	لـــــا	لينسيا	
		For	m 990	(2019)

FL 33134

RICHARD SNOW

CORAL GABLES

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

255 ARAGON AVE

Form 990 /2019\	THE	INTERNATIONAL SEAKEE	PERS

58-2385869

Page 7

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 componented employees (other than an officer, director, trustee, or key employee)
  who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the
  organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

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

Name and title	Average hours per week (list eny hours for	(C) Position (do not check more than one box unless person is both an officer and a director/inusteo)					an from the o) organization		(E) Reportable componsation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other componsation from the organization and	
	related organizations below dolled line)	Individual pusited or director	Instataonal trustee	Officer	Key employee	Highest compensated employee	Former	(M·2) 1033-MI3C)	(W-211000-m13C)	rolated organizations	
(1) MICHAEL MOORE	8.00										
CHAIRMAN EMERITUS	0.00			X	1			o	o	0	
(2) JAY WADE				Г							
	8.00		1		İ						
CHAIRMAN	0.00			X			į	0	O	0	
(3) JULIEN CHANG		П									
	8.00	1		i							
OFFICER	0.00			X				0	0	0	
(4) GLEN ALLEN											
	8.00	ļ l		ļ							
OFFICER	0.00	<u> </u>		X	L			0	0	0	
(5) MARK LUTHER											
	2.00	1				1 1			_	_	
OFFICER	0.00	$ldsymbol{\sqcup}$		X	L.,		_	0	0	0	
(6) RICHARD SNOW									į		
	40.00					11		400 707			
PRESIDENT		Н		X		╀		109,597			
(7)											
(8)											
(9)							_				
(10)											
(11)							-			<del></del>	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (C) (A) (E) (F) Position Name and title Average Reportable Reportable Estimated amount (do not check more than one box, unless person is both an compensation hours compensation of other per week from the from related compensation officer and a director/trustee) (fist ony organization organizations from the hours for (W-2/1099 MISC) (W-2/1099 MISC) organization and related related organizations organizations dotted line) 1b Subtotal Total from continuation sheets to Part VII, Section A ▶ Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization > 1 Yes No Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such X Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person X Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (C) Compensation (A) Name and business address (8) Description of services Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization Form 990 (2019) Form 990 (2019) THE INTERNATIONAL SEAKEEPERS Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII (B) Related or exempt (C) Unrelated (O) function revenue from tax under sections 512-514 Gifts, Grants 1a Federated campaigns 27,672 1a b Membership dues 1b 1,900 c Fundraising events 1c d Related organizations 1d Government grants (contributions) 10 f All other contributions, gifts, grants, and similar amounts not included above 2,803,000 2,803,000 g Noncash contributions included in lines 1a-1f 10 h Total. Add lines 1a-1f 2,832,572 Business Code 2a YACHT CHARTER 960,758 960,758 Program Service SPECIAL EVENTS 57,441 57,441 MISC REFUNDS/CREDITS 23,087 23,087 CUBA 83 EXPERIENCE 12,971 12,971 SARAH NET KIT 3,000 3,000 349 f All other program service revenue 349 g Total. Add lines 2a-2f 1,057,606 3 Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Rosi (iii) Porsonal 6a Gross rents b Less rentat expenses 6b C Rentating or (loss) 6c d Net rental income or (loss) 7a Gross amount from (I) Securities (n) Other sales of assets other than inventory 7a b Less cost or other Other Revenue basis and sales exps 7b c Gain or (loss) 7c d Net gain or (loss) 8a Gross income from fundraising events (not including S of contributions reported on line 1c) See Part IV, line 18 8a b Less direct expenses 8b c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19 9a b Less: direct expenses 9b ▶ c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances 10a b Less. cost of goods sold 10b c Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 118 b d All other revenue Total. Add lines 11a-11d Total revenue. See instructions 3,890,178 1,057,606 O 0 Part IX Statement of Functional Expenses

Sec	tion 501(c)(3) and 501(c)(4) organizations must c Check if Schedule O contains a resp			mplete column (A).	( <u>x</u> )
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Pert VIII.	(A) Tatal expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				- `
	and domestic governments. See Part IV. line 21				*
2	Grants and other assistance to domestic			•	
	individuals See Part IV, tine 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				,
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	109,597		109,597	
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	124,746		124,746	<del> </del>
8	Pension plan accruals and contributions (include	Ţ			
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				<del></del>
11	Fees for services (nonemployees).				
a	Management	75,637	25,492	34,695	15,450
Ъ	Legal	20,127		20,127	
Ç	Accounting	5,500		5,500	
d	Lobbying		,		
0	Professional fundraising services See Part IV, line 17			<del></del>	
Ţ	Investment management fees				
8	Other (If line 11g amount exceeds 10% of line 25, column	7,494,911	7 404 011	i	
12	(A) amount, list line 11g expenses on Schedule (O) Advertising and promotion	1,839	7,494,911	1,839	
13	Office expenses	2,775		2,775	
14	Information technology	4,639		4,639	
15	Royalties				
16	Occupancy	13,404		13,404	
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	19,671		19,671	<u></u>
24	Other expenses. Itemize expenses not covered	1			
	above (List miscellaneous expenses on line 24e. If		•		
	line 24e amount exceeds 10% of line 25, column	,	,		
	(A) amount, list line 24e expenses on Schedule O)	40.022	·	40 033	
a	FLORIDA TAXES	48,933		48,933 26,536	
b	PRINTING AND MAILING	26,536 9,727		9,727	
C	TRAVEL & LODGING PROGRAM INTERNS	6,078		6,078	
d	ř	17,530		17,530	
25	All other expenses Tetal functional expenses, Add lines 1 through 24e	7,981,650	7,520,403	445,797	15,450
28	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)				
DAA			<del></del>		Form 990 (2019)

Part						· · · · · · · · · · · · · · · · · · ·			
	Check if Schedule O contains a response or note	to any	line in this Part X	(A)	<u>_</u> _	(B)			
				Beginning of year		End of year			
1	Cash—non-interest-bearing			216,819	1	152,309			
2	Savings and temporary cash investments			760	2	76			
3	Pledges and grants receivable, net				3				
4	Accounts receivable, net			1,344,074	4	1,093,18			
5	Loans and other receivables from any current or former	officer,	director,	, ,		,			
	trustee, key employee, creator or founder, substantial co	ntribul	or, or 35%	•					
	controlled entity or family member of any of these person	ns			5				
6	Loans and other receivables from other disqualified pers	ons (a	s defined						
3	under section 4958(f)(1)), and persons described in sect	ion 49:	58(c)(3)(B)		6				
7	Notes and loans receivable, net				7				
۲   8	Inventories for sale or use				8				
9	Prepaid expenses and deferred charges				9				
10	Land, buildings, and equipment cost or other								
	basis Complete Part VI of Schedule D	10a	27,908,726						
t	Less: accumulated depreciation	10b		31,677,466	10c	27,908,726			
11	Investments—publicly traded securities				11				
12	Investments—other securities See Part IV, line 11				12				
13	Investments—program-related. See Part IV, line 11				13				
14	Intangible assets	<del>-</del>							
15	Other assets. See Part IV, line 11			15					
16	Total assets. Add lines 1 through 15 (must equal line 33		33,239,119	16	29,154,983				
17	Accounts payable and accrued expenses	270	17	5,718					
18	Grants payable		18						
19	Deferred revenue				19				
20	Tax-exempt bond liabilities				20				
21	Escrow or custodial account liability. Complete Part IV of	f Sche	dule D		21	~,			
22	Loans and other payables to any current or former office	r. direc	tor,						
	trustee, key employee, creator or founder, substantial co		or, or 35%		i				
22	controlled entity or family member of any of these person				22				
23	Secured mortgages and notes payable to unrelated third	partie	s		23				
24	Unsecured notes and loans payable to unrelated third pa	rties			24				
25	Other liabilities (including federal income tax, payables to		3						
1	parties, and other liabilities not included on lines 17-24).	Compl	ete Part X						
1	of Schedule D				25				
26	Total liabilities. Add lines 17 through 25	. lest		270	26	5,718			
,	Organizations that follow FASB ASC 958, check here	► X							
	and complete lines 27, 28, 32, and 33.			22 222 242		00 140 065			
27 28 29 30 31 32	Net assets without donor restrictions		ļ.	33,238,849	27	29,149,265			
28	Net assets with donor restrictions		. ~		28	······································			
	Organizations that do not follow FASB ASC 958, che	₽► ∐		1					
	and complete lines 29 through 33.		l		•				
29	Capital stock or trust principal, or current funds		}		29				
30	Pald-in or capital surplus, or land, building, or equipment		<u>,</u> ,		30				
31	Retained earnings, endowment, accumulated income, or	tunds	22 220 040	31	20 140 265				
32	Total net assets or fund balances		}	33,238,849	32	29,149,265			
33	Total liabilities and net assets/fund balances			33,239,119	33	29,154,983 Form 990 (2019			

Form	1 990 (2019) THE INTERNATIONAL SEAKEEPERS 58-2385869			Pag	ge 12
-	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				$\Box$
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,8	90,	178
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,9	81,	610
3	Revenue less expenses. Subtract line 2 from line 1	3	-4,0	91,4	432
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	33,2	38,	849
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			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	_ 10	29,1	47,4	417
Pa	rt XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		[:]		,
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		1 7,1	; ; `	۲٠;
	Schedule O			1.3	
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.		- "	:	•
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both		. 8	.	
	Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	Schedule O				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Single Audit Act and OMB Circular A-133?		3a		
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 on Schedule O and describe any steps taken to undergo such audits		3b	لبيا	<u> </u>
_			e	- 99C	2000

### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

# **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.

2019

Open to Public

Inspection

► Attach to Form 990 or Form 990-EZ.

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

THE INTERNATIONAL SEAKEEPERS En

Employer identification number 58-2385869

SOCIETY INC Part I 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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 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 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). 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.) 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 X 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). 11 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. 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. 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. d 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 II. Type III. Type III. functionally integrated, or Type III non-functionally integrated supporting organization Enter the number of supported organizations Provide the following information about the supported organization(s). (II) EIN (III) Type of organization (Iv) is the organization (v) Amount of monetary (vi) Amount of (I) Name of supported (described on lines 1-10 isted in your governing support (eec other support (see organization above (see instructions)) document? instructions -nstructions) Yes No (A) (B) (C) (D) (E)

		orm 990 or 990-EZ) 2019				SEAKEEPERS		8-2385869	Page 2
P	art (i	Support Sched	lule for C	rganizations l	Described i	n Sections 170	(b)(1)(A)(iv) an	d 170(b)(1)(A)(v	1)/
		(Complete only	if you che	cked the box o	n line 5, 7, d	or 8 of Part I or i	if the organization	on failed to qualif	ý under
		Part III If the or	ganizatio	i\fails to qualify	under the to	ests listed below	v, please compl	ete Part III.) /	
		Public Support		\	<b></b>			/	<u> </u>
Cale	ndar year	(or fiscal year beginnin	ig in)	\(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	membe	rants, contributions, an rship fees received. (D any "unusual grants")	o not						
2	organiz	enues levied for the zation's benefit and eith spended on its behalf	her paid						
3	furnishe	ue of services or faciliti id by a governmental u stion without charge							
4	Total. A	dd lines 1 through 3			\				
5	each pe governn supporte line 1 th	tion of total contributions of total contributions of the than a mental unit or publicly ad organization) including exceeds 2% of the abouting 11, column (f)	led on	,					
6	Public s	upport. Subtract line 5 fro	om line 4		\	/			
		Total Support							
Cale	ndar year	(or fiscal year beginning	g in)	(a) 2015	(b) 2016\	(c)/2017	(d) 2018	(e) 2019	(f) Total
7		s from line 4		·		\			
8	paymen	ncome from interest, di its received on securition oyalties, and income fro cources	es loans,						
9	activities	ome from unrelated bus s, whether or not the bus arly carried on							
10 11	loss from (Explain	come Do not include on the sale of capital as in Part VI) apport. Add lines 7 thr	isets						**************************************
12		ceipts from related ac	•	(see instructions)	/	<del>\</del>	l	12	
13		e years. If the Form 9	-	•	/	. fourth, or fifth tax	vear as a section 50		· · · ·
		ation, check this box ar		,			(	(0)(0)	▶ []
Sec		Computation of			tage		\		
14	Public s	upport percentage for	2019 (line 6	, column (f) divide	d by line 11, co	lumn (f))	\	14	%_
15	Public s	upport percentage from	n 2018 Sch	edule A. Part II, lin	e 14		\	15	%_
16a	33 1/3%	support test—2019.	If the organ	ızation djá not che	ck the box on I	ne 13, and line 14 i	ıs 33 1)3% or more,	check this	
	box and	stop here. The organ	ızation qual	ifies as/a publicly s	supported orga	nization	\		▶ [_]
þ		support test—2018.	_	,			e 15 is 33 <b>\1/3% o</b> r r	nore, check	. —
		and stop here. The or	•	· /	• • •	-			
17a		ts-and-circumstance		,					
		more, and if the organi		<i>(</i>					
	organiza	now the organization m	lears (ua )	icis-and-circumsta	nces test. The	organization quain	ies as a buolicia/ani	pported	▶ []
b	-	its-and-circumstance	s test—201	R. If the organizati	ion did not chei	ck a box on line 13.	16a. 16b. or 17a. a	nd line	- ()
•		% or more, and if the o	,	-				\	
		in Part VI how the orga	- /					<b>\</b>	
	-	ed organization				J	·	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	▶ 🗍
18		foundation. If the orga	aŋization di	d not check a box	on line 13, 16a	16b, 17a, or 17b, o	check this box and s	see \	
	instruction		/					\	▶ □
		/	·					Schedule A (Form	80 or 890-EZ) 2019
		/						\	
		/						\	
		/						\	

Schedule A (Form 990 or 990-EZ) 2019
Part III Support Schodu

Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.

	If the organization fails to	qualify under the	e tests listed be	low, please co	mplete Part II.		
Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Giffs, grants, contributions, and membership fees						
	received (Do not include any "unusual grants")	9,435,273	8,794,178	4,433,313	19,202,198	2,832,572	44,697,534
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	4,769	1,084,087	852,620	1,538,477	1,057,606	4,537,559
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	9,440,042	9,878,265	5,285,933	20,740,675	3,890,178	49,235,093
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from					, ,	
_	line 6.)	<u> </u>	·	<u> </u>	l		49,235,093
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6	9,440,042	9,878,265	5,285,933	20,740,675	3,890,178	49,235,093
l0a	Gross income from interest, dividends, payments received on secunties loans, rents, royalties, and income from similar sources	•					
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on			•			
2	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
3	Total support. (Add lines 9, 10c, 11,						
	and 12.)	9,440,042	9,878,265	5,285,933	20,740,675	3,890,178	49,235,093
4	First five years. If the Form 990 is for the	-	second, third, four	th, or fifth tax year	as a section 501(	c)(3)	. □
<del></del>	organization, check this box and stop her						<u> </u>
	tion C. Computation of Public Su				<del></del>		
5	Public support percentage for 2019 (line 8		-	i (f))		15	100.00%
6	Public support percentage from 2018 Sch			<del></del>		16	100.00%
	tion D. Computation of Investme			actions (A)		12.1	%
7	Investment income percentage for 2019 (I			column (1))		17	<del></del>
8	investment income percentage from 2018			IA and line 15 is a	than 22 1/20/	18	
9a	33 1/3% support tests—2019. If the orga 17 is not more than 33 1/3%, check this bit						×
b	33 1/3% support tests—2018. If the orga						. —
	tine 18 is not more than 33 1/3%, check the Private foundation. If the organization did						►□
0							

# Schedule A (Form 980 or 990-EZ) 2019

### 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	Organi	izations

- 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 of historic and continuing relationship, explain.
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes." answer
- 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.
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes." explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 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).
- 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?
- Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes." complete Part I of Schedule L (Form 990 or 990-EZ).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Was the organization controlled directly or indirectly at any time during the tax year by one or more 9a 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.
- Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes." answer 10b below.
- Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	2		
	3a		
			·
	3b		
	3c	1 .	
	4a		
	4b		
	4c		
Ì			
	5a		
ł	5b 5c		
	30		
	6		
		100	,
Į	7		
	8		
	9a		
	9Ъ		<del></del>
	9c		
Į	10a	ļ	
	10b		
A (Fo		0 or 990.	EZ) 2019

Schedule

Sched	ule A (Form 990 or 990-EZ) 2019 THE INTERNATIONAL SEAKEEPERS 58	<u>1-2385869</u>		Page 5
<u>Pa</u>	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			ţ
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	<b>'</b> ·	1	l
	below, the governing body of a supported organization?	11a	<u> </u>	
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		
Sect	ion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		İ	
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the		1	
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			i
	controlled the organization's activities. If the organization had more than one supported organization,	١ ،	ŀ	1
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported		٠.	1
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1	1	}
2	Did the organization operate for the benefit of any supported organization other than the supported	-		<u> </u>
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part	1	]	]
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	į		ļ
	supervised, or controlled the supporting organization.	2	i	1
Sect	ion C. Type II Supporting Organizations		<u> </u>	<del></del>
		·····	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		1.00	
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	į		ļ
	or management of the supporting organization was vested in the same persons that controlled or managed	<b>!</b> ,	l	1
	the supported organization(s).		1	1
Sect	ion D. All Type III Supporting Organizations		L	L
	ion of An Type in our porting of guinations		Yes	No
1	Did the executable equile to each of its executed executables, but he feet day of the fifth weath of the	<u></u>	168	NO
•	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		ľ	
	organization's tax year. (i) a written notice describing the type and amount of support provided during the prior tax	·	ì	i
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		1	1
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?	<u> </u>		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	1		
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
_	the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's		•	Ī
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			ļ
C4	supported organizations played in this regard	3		L
	ion 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.			
Ь	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity	y (see instructions).		
				<del>,</del>
2 /	Activities Test. <i>Answer (a) and (b) below.</i>		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			1
	the supported organization(s) to which the organization was responsive? If "Yes." then in Part VI Identify	,	-	<u> </u> `
	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	) '	′	1
	that those activities constituted substantially all of its activities.	20		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	]		1
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			٠,
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement	2b	L	
3	Parent of Supported Organizations. Answer (a) and (b) below.			
a	Old the organization have the power to regularly appoint or elect a majority of the officers, directors, or			l
	trustees of each of the supported organizations? Provide details in Part VI.	_3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		l

Schedu	ule A (Form 990 or 990-EZ) 2019 THE INTERNATIONAL SEAKEEPER	<u> </u>	<u> 58-2385</u>	869 Page 6
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	niza	tions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on No	v. 20,	1970 (explain in Part VI). S	66
	instructions. All other Type III non-functionally integrated supporting organizations mus	t com	plete Sections A through E	
Sect	ion 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			
col	lection of gross income or for management, conservation, or			
ma	intenance 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		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
เกร	tructions for short tax year or assets held for part of year)			··· / ···· / ···· · · · · · · · · · · ·
	a Average monthly value of securities	18		
	b Average monthly cash balances	1b		
	c Fair market value of other non-exempt-use assets	1c		
	d Total (add lines 1e, 1b, and 1c)	1d		
	e Discount claimed for blockage or other	\$	,	
	factors (explain in detail in Part VI):		·	
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
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,			
se	nstructions).	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	·	· · · · · · · · · · · · · · · · · · ·
Sect	on C - Distributable Amount		,	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	ś	
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 6, Column A)	3		
4	Enter greater of line 2 or line 3.	4		<u> </u>
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
em	ergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally integrated T	ype li	I supporting organization (s	ee

instructions).

THE INTERNATIONAL SEAKEEPERS 58-2385869 Schedule A (Form 990 or 990-EZ) 2019 Page 7 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. 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 (111) (ii) Section E - Distribution Allocations (see instructions) **Excess Distributions** Underdistributions Distributable Pre-2019 Amount for 2019 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 i Carryover from 2014 not applied (see instructions) Remainder. Subtract lines 3g, 3h, and 3i from 3f. Distributions for 2019 from Section D, line 7: 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 c Excess from 2017 d Excess from 2018

e Excess from 2019

Schedule A (Form 990 or 990-EZ) 2019

THE INTERNATIONAL SEAKEEPERS

58-2385869

Page 8

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

### SCHEDULE C (Form 990 or 990-EZ)

## **Political Campaign and Lobbying Activities**

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

2019

Department of the Treasury Internal Revenue Service

➤ Complete if the organization is described below. 
➤ Attach to Form 990 or Form 990-E2.

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

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 48 (Political Campaign Activities), then

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

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

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

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

•	(see separate instructions), then				
	Section 501(c)(4), (5), or (6) organizations Complete Part III e of organization THE INTERNATIONAL SI			Employer ident	Ification number
	SOCIETY INC			58-23858	
Pa	rt I-A Complete if the organization is exem	pt under section 501(c	) or is a sectio		
1	Provide a description of the organization's direct and indire				
	definition of "political campaign activities")				
2	Political campaign activity expenditures (see instructions)			<b>▶</b> \$	
3_	Volunteer hours for political campaign activities (see instru				
Pa	rt I-B Complete if the organization is exem	pt under section 501(c	)(3).		
1	Enter the amount of any excise tax incurred by the organiz	ation under section 4955		▶ \$	
2	Enter the amount of any excise tax incurred by organization	n managers under section 495	5	▶ \$	
3	If the organization incurred a section 4955 tax, did it file Fo	rm 4720 for this year?			Yes No
	Was a correction made?				Yes No
	If "Yes," describe in Part IV.	ant under continu FO4/a	\	an E04/a\/2\	<del></del>
	rt I-C Complete if the organization is exem			on sur(c)(s).	
1	Enter the amount directly expended by the filing organizate	on for section 527 exempt fund	aton .	<b>.</b>	
_	activities			<b>▶</b> \$	
2	Enter the amount of the filing organization's funds contribu	ted to other organizations for a	ection	<b>▶</b> \$	
3	527 exempt function activities  Total exempt function expanditures. Add lines 1 and 2. Ent	er here and on Form 1120-PO	4		
3	line 17b	er nere and on rollin 1720-7 O	<b>-</b> ,	<b>▶</b> s	
A	Did the filing organization file Form 1120-POL for this year	7		• •	Yes No
5	Enter the names, addresses and employer identification nu		political organizatio	ons to which the filing	(
•	organization made payments. For each organization listed,		_	-	
	the amount of political contributions received that were pro				
	as a separate segregated fund or a political action committee				
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	<b>,-,</b>	<b>, , , , , , , , , , , , , , , , , , , </b>		filing organization s	contributions received and
				funds if none enter -0-	promptly and directly delivered to a separate
			1		political organization
					If none, enter -0-
(1)					
(2)					
(3)					
			<u> </u>		
(4)					
(5)					
(6)					

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

Schedule C (Form 980 or 990-EZ) 2019

Schedule C (Form 990 or 990-EZ) 2019 THE INTERNATIONAL SEAKEEPERS

Pà	irt II-A Complete if the orga section 501(h)).	nization is exem	pt under section 5	01(c)(3) and filed	Form 5768 (elec	tion under
A		on belongs to an a	ffiliated group (and list	in Part IV each affi	listed group membe	r's name
			excess lobbying expen		nated group membe	st a frame,
В			and "limited control" p			
	Limits on L	obbying Expend	litures		(a) Filing panization's totals	(b) Affiliated
-	(The term "expenditures				Buisaliou a (01912	group totals
	Total lobbying expenditures to influence					
	Total lobbying expenditures to influence	•	rect lappying)			
C		a and 10)				· · · · · · · · · · · · · · · · · · ·
d	Other exempt purpose expenditures     Total exempt purpose expenditures (ad-	t tipes to and tall				
•	Lobbying nontaxable amount. Enter the	•	wing table in both	<u></u>		
'	columns	amount nom the lond	wing table in both			
[	If the amount on line 1e, column (a) or (b)	is: The lobbying n	ontexable amount is:		,	······································
ļ	Not over \$500,000	20% of the amo	unt on line 1e			
ļ	Over \$500,000 but not over \$1,000,000	\$100,000 plus 1	5% of the excess over \$500	,000		
ł	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 1	0% of the excess over \$1,0	00,000	-	
-	Over \$1,500,000 but not over \$17,000,000		% of the excess over \$1,50	0,000.		•
	Over \$17,000,000	\$1,000,000				
_	Grassroots nontaxable amount (enter 2	•		-		
h	Subtract line 1g from line 1a If zero or l	•				
	Subtract line 1f from line 1c If zero or le					
j	If there is an amount other than zero on		i, did the organization fil	e Form 4720		Пу П.
	reporting section 4911 tax for this year?					Yes No
	(Some organizations that ma	ide a section 501	ging Period Under So h) election do not ha instructions for line	ve to complete all	of the five column	s below.
		obbying Expend	tures During 4-Year	Averaging Period		
	Calendar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying cailing amount					
	(150% of line 2a, column (e))	`	_ -	·		
c	Total lobbying expenditures					
đ	Grassroots nontaxable amount					
0	Grassroots ceiling amount		, ,	•	,	
	(150% of line 2d, column (e))		<u> </u>	· · · · · · · · · · · · · · · · · · ·		
f	Grassroots lobbying expenditures	:				

58-2385869

Page 2

## 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues

4 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 tobbying and political expenditure next year?

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

2c

3

5

Schedule C (Form 990 or 990-EZ) 2019 THE INTERNATIONAL SEAKEEPERS

58-2385869

Page 4

Part-IV -> Supplemental Information (continued)

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

OMB No 1545-0047

	Department of the Treasury Internal Revenue Service Go to when			Attach to Form 990.  Www.irs.gov/Form990 for instructions and the latest information.						to Public
	of the organization			DE HISHOU	MVIII PI	NA THE PARENT HISTORY		r identifica	ation number	
			ONAL SEAKEEPERS							
_8	OCIETY	INC					58-2	385	869	
P			ions Maintaining Donor Advised Full fithe organization answered "Yes" on				Accoun	ts.		
		ompiete	in the organization answered fes on	TOITH 98			T	<b></b>		
	<b>-</b>			<b></b>	(a) Donoi	r advised funds	<del>}</del>	b) Funds	and other accor	inis
1	Total numbe		•			······································	<del> </del>			
2			tributions to (during year)	<del> </del>			╁┈┈			·
3							<del> </del>	_		
				t the seed	a hold a	- donor odwood	<u> </u>			
5 Oid the organization inform all donors and donor advisors in writ funds are the organization's property, subject to the organization			· · · · · · · · · · · · · · · · · · ·						[ ] v.	B No
6		-	orm all grantees, donors, and donor advisors in	_					יי ניי	15 NO
•			oses and not for the benefit of the donor or don	_	_					
	•		e private benefit?	0. 607.301,	0. 10. 6.	ny other purpose			☐ Ye	s No
P:			tion Easements.			<del></del>				
•			if the organization answered "Yes" on	Form 991	0, Part	IV, line 7.				
1			tion easements hold by the organization (check							
			for public use (for example, recreation or edu	-نيبر	i "'	rvation of a historicall	y importan	t land a	rea	
	Protection	on of natura	il habitat	· }_	Prese	rvation of a certified h	istoric stru	cture		
	Preserva	ation of ope	n space	<b></b>	•					
2	Complete lin	es 2a throu	igh 2d if the organization held a qualified conse	rvation cor	ntribution	n in the form of a cons	ervation			
	easement or	n the last da	By of the tax year.					Held at	the End of t	he Tax Yea
a	Total number	r of conser	vation easements				2a			
b	Total acreag	e restricted	by conservation easements				2b			
C	Number of co	onservation	n easements on a certified historic structure inc	luded in (a)	)		2c			
đ	Number of co	onservation	n easements included in (c) acquired after 7/25	06, and no	t on a		ļ	[		
	historic struc	cture listed i	in the National Register				2d	<u> </u>		
3	Number of co	onservation	n easements modified, transferred, released, ex	tinguished	, or term	unated by the organiz	ation durin	g the		
	tax year 🟲									
4			property subject to conservation easement is							
5	-	-	ave a written policy regarding the periodic mon	itoring, insi	paction,	handling of			<u></u>	С
_			nent of the conservation easements it holds?						Ye	s [] No
8	Staff and vol	lunteer hou	rs devoted to monitoring, inspecting, handling o	f violations	i, and er	officing conservation	easemente	guring	the year	
_	<b>A</b>			at .						
7	Amount of ex	xpenses inc	curred in monitoring, inspecting, handling of vio	ations, and	3 entorci	ing conservation ease	ments aur	ing the y	/ear	
			a annument reported on type 2/d) above entirity	<b></b>		f control 170/b)(4)/B)	<i>(</i> .)			
8	and section 1		n easement reported on line 2(d) above satisfy:	me require	ments o	1 380000 170(11)(4)(6)	17		□ Ya	s No
9			איי). w the organization reports conservation easem	ente in ita i	AVANUA	and evnence stateme	nt and			٠ ( ا
•			ude, if applicable, the text of the footnote to the			-		the		
	_		ng for conservation easements.	<b>g</b>						
Pa	art III O	rganizati	ons Maintaining Collections of Art,				Similar	Asset	S.	
		ompiete i	f the organization answered "Yes" on t	-orm 990	J, Part	IV, line 8.	<del></del>		_	
18			ed, as permitted under FASB ASC 958, not to a	•				rorks		
			as, or other similar assets held for public exhibit				e or public			
			XIII the text of the footnote to its financial state				-baat	1		
D	•		ed, as permitted under FASB ASC 958, to repo							
art, historical treasures, or other similar assets held for public exhibit			·	1, 6QUC8110	n, of res	earch in tuttherance (	o brong se	ir VICIP,		
	•	•	nounts relating to these items.					. •		
	• •		n Form 990, Part VIII, line 1					• \$ • s		
3	• •		Form 990, Part X	other aim!	lar geent	le for financial care a	rovide the	•		
2			ved or held works of art, historical treasures, or			is ioi imenciai gain, pi	CAIGG HIG			
_			red to be reported under FASB ASC 958 relatin	A in mese	461113;			s		
8 h	Assets includ		orm 990, Part Vill, line 1					· \$		
	M33613 IIICIUU	SUC III F QIII	1 444, 1 41171					Y		

	edule D (Form 990) 2019 THE INTE					<u> 385869</u>			Page 2
P	art III Organizations Maintaini	ng Collections o	f Art, Historical T	reasures,	or Other	Similar A	ssets	(continue	ed)
3	Using the organization's acquisition, access collection items (check all that apply):	sion, and other recor	ds, check any of the fo	llowing that n	nake signifi	cant use of it	\$		
а	Public exhibition	d 🗌	Loan or exchange pro	ogram					
b	Scholarly research	e [_]	Other						
C	Preservation for future generations								
4	Provide a description of the organization's XIII.					urpose in Pai	rt		
5	During the year, did the organization solicit								_
	assets to be sold to raise funds rather than		part of the organization	n's collection?	<u> </u>			Yes	No
Pa	irt IV Escrow and Custodial A				_			_	
	Complete if the organization	<del></del>			•	nted an an	ount o	on Form	
1a	Is the organization an agent, trustee, custo	dian or other interme	diary for contributions	or other asset	s not				(-)
	included on Form 990, Part X?	III aad assessats to 4	allandar A.A.					Yes	∐ No
Ð	If "Yes," explain the arrangement in Part Xi	iii and complete the to	ollowing table					Amount	<del></del>
c	Beginning balance					40		Amount	
	Additions during the year					1c 1d			
	Distributions during the year					10			
	Ending balance					11			
	Did the organization include an amount on	Form 990, Part X, lin	e 21, for escrow or cus	itodial accoun	t liability?			Yes	No
	if "Yes," explain the arrangement in Part XI				•			-	П
Pa	rt V Endowment Funds.								
	Complete if the organization	on answered "Yes	<u>" on Form 990, Pa</u>	art IV, line 1	0.				
	_	(a) Current year	(b) Prior year	(c) Two yea	rs back	(d) Three year	s back	(e) Four yo	ars back
	Beginning of year balance							ļ	
	Contributions		<del> </del>	<del> </del>				<del> </del>	
	Net investment earnings, gains, and losses								
	Grants or scholarships							ļ	
6	Other expenditures for facilities and		}		- 1			ł	
	programs			<del> </del>				<del> </del>	
•	Administrative expenses		ļ	<u> </u>				<del></del>	
9	End of year balance	wast wast and belong	\	L				<u> </u>	
2	Provide the estimated percentage of the cu Board designated or quasi-endowment	rrent year end balanc %	e (line 19, column (8))	neio as:					
ь	Permanent endowment ▶ %								
c	Term endowment ▶ %								
	The percentages on lines 2a, 2b, and 2c sh	ould equal 100%.							
3a	Are there endowment funds not in the poss	ession of the organiz	ation that are held and	administered	for the				
	organization by:							Y6	s No
	(i) Unrelated organizations							3a(i)	
	(II) Related organizations							3a(II)	
ь	If "Yes" on line 3a(ii), are the related organi							3b	
4	Describe in Part XIII the intended uses of the		owment funds						
Га	rt VI. Land, Buildings, and Equ	•	" on Form 000 Pa	ot IV line 1	10 500	Form 000	Dart Y	line 10	
	Complete if the organization  Description of property	(a) Cost or other				cumulated		(d) Book vak	ля
	, , , , , , , , , , , , , , , , , , ,	(investment)		i		eciation		,-,-	
1a	Land	1							
	Buildings								
c	Leasehold improvements								
d	Equipment						1		
	Other	27,908						<u>27,908</u>	
Total	. Add lines 1a through 1e (Column (d) must	equal Form 990, Par	t X, column (B), line 10	)c )			1	27,908	, 126

(8) (9)

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

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

DAA

Schedule D (Form 990) 2019

Schi	edule D (Form 990) 2019 THE INTERNATIONAL SEAKEEPERS	58-2385	869	Page 4
P	art-XI Reconciliation of Revenue per Audited Financial Statem	ents With Revenue per	Return.	
	Complete if the organization answered "Yes" on Form 990, I			
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
C	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	_2d		
е	Add lines 2a through 2d		20	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	
₽ŧ	rt XII , Reconciliation of Expenses per Audited Financial Stater		r Return.	
	Complete if the organization answered "Yes" on Form 990, F	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	
8	Donated services and use of facilities	2a	_  1	
þ	Prior year adjustments	2b	_  .	
C	Other losses	2c	<b></b> ,_ ·	
d	Other (Describe in Part XIII.)	2d	_	
0	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:			
8	Investment expenses not included on Form 980, Part VIII, line 7b	48	<b>⊣</b>	
b	Other (Describe in Part XIII )	4b	<b>⊣</b>	
C	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	
.Pg	et XIII * Sunniemental Information			

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b; Part V, line 4; Part X, line

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

## **SCHEDULE G** (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities
Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the
organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Name of the organization THE INTERNATIONAL SOCIETY INC	SEAKEEPER	S			Employer identification 58 - 23858	
Part 1 Fundraising Activities. Complete if t Form 990-EZ filers are not required to	the organization complete this	n an par	swei	red "Yes" on Form 99	90, Part IV, line	17.
1 Indicate whether the organization raised funds through a	ny of the following	activ	ities.	Check all that apply		
a X Mail solicitations	Solicitation	of no	n-gov	emment grants		
b X Internet and email solicitations	Solicitation	of go	vernn	nent grants		
c X Phone solicitations	X Special fun	draisı	ng ev	ents		
d X In-person solicitations						
2a Did the organization have a written or oral agreement wit or key employees listed in Form 990, Part VII) or entity in	h any individual (i r connection with	ncludi profes	ing of	ficers, directors, trustees, al fundraising services?		X Yes No
b If 'Yes," list the 10 highest paid individuals or entities (fur compensated at least \$5,000 by the organization.	ndraisers) pursuar			ments under which the fur	ndraiser is to be	
(i) Name and address of individual or entity (fundraisor)	(II) Activity	raser custo contrib	have dy or ol of	(Iv) Gross roco pts from activity	(v) Amount paid to (or rotained by) fundraiser listed in cot (t)	(vi) Amount paid to (or retained by) organization
AMP T6 CONSULTING		Yes	No			
1	FOUNDERS		x	53,091	15,450	53,091
2	;					
3						
4				<u> </u>		
5						
6						
7						
8						
9						
0						
Catal						<u> </u>

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

		le G (Form 990 or 990-EZ)		THE	INTERN	ATIC	NAL SE	AKEEPEI	<u> </u>		58-23	85869 P	'age 2
F	art		vents	. Complet	e if the orga	nizatio	on answer	ed "Yes" on	For	m 990, Par	t IV, line 1	18, or reported r	nore
		than \$15,000 of gross receipts of				ions a	ına gross ı	ncome on i	-orm	1 990-EZ, II	nes 1 and	l 6b. List events	with
_	Т	group receipts s	1	(a) Event			(b) Evan	#2	1	(c) Other over	nis		
							<b>,</b> , ,			<b>(.,</b>	]	(d) Talai avants	
			FO	UNDERS			·	····	.   _			(add col (a) throug	h
单	1		<u> </u>	(event typ	e)	<b> </b>	(ovent typ	<u> </u>		(total numbe	35)	cal (c))	
Revenue	١.	Cross recounts	ŀ		53,091								
8	Ι'	Gross receipts	<del> </del>						╁╌				
	2	Less. Contributions									-		
	3	Gross income (line 1 minus											
	Ļ	line 2)			53,091				<del>-</del>				
	١.	Cook manne				Į.					ļ		
	•	Cash prizes			<del></del>				╁╌	······································			
	5	Noncash prizes							1				
		•							1				
Şe	6	Rent/lacility costs										·	
Expenses	\ _				25 626	1			1		İ		
ŭ	7	Food and beverages			35,626		·						
Died Died	B	Entertainment			6,752								
0	-					<b></b>			+			<del></del>	
	9	Other direct expenses	L		13,949	L							
	ı	Direct expense summary.		-	•	•					<b>.</b> .	56, -3,	$\frac{327}{236}$
P	11 art	Net income summary Su III Gaming. Comp					"Yes" on	Form 990	Part	IV line 19	or reports		230
•								0			o opo. t.		
		\$15,000 on Foi	<u>rm 99</u>	<u>0-EZ, line</u>	6a				_				
e e		\$15,000 on Fo	rm 99				(b) Pu4 18bs		Τ	(c) Other and	mma	(d) Total gaming (od	
venue		\$15,000 on Fo	rm 99	(a) Bing			(b) Pull tabs scorgorq/ognid			(c) Other gan	ning	(d) Total gaming (ad co) (a) through coi (d	
Revenue			rm 99							(c) Other gan	ming		
Revenue	1	\$15,000 On FO	rm 99							(c) Other gan	ning		
_			rm 99							(c) Other gan	ming		
_		Gross revenue	rm 99							(c) Other gan	ning		
_	2	Gross revenue	rm 99							(c) Other gan	mmg		
ect Expenses Revenue	2	Gross revenue  Cash prizes  Noncash prizes	rm 99							(c) Other gan	mmg)		
Expenses	2	Gross revenue  Cash prizes	rm 99							(c) Other gan	mmg		
rect Expenses	3	Gross revenue  Cash prizes  Noncash prizes	rm 99							(c) Other gan	nag		
rect Expenses	3	Gross revenue  Cash prizes  Noncash prizes  Rent/faclity costs	rm 99							(c) Other gan	mmg %		
rect Expenses	2 3 4 5	Gross revenue  Cash prizes  Noncash prizes  Rent/faclity costs	rm 99	(a) Bing	jo		bingo/prograss	ve bingo					
rect Expenses	2 3 4 5	Gross revenue  Cash prizes  Noncash prizes  Rent/facliity costs  Other direct expenses		(a) Bing Yes	%		bingo/prograss	ve bingo		Yes	%		
red Expenses	2 3 4 5	Gross revenue  Cash prizes  Noncash prizes  Rent/facliity costs  Other direct expenses		(a) Bing Yes	%	3)	bingo/prograss	ve bingo		Yes			
rect Expenses	2 3 4 5	Gross revenue  Cash prizes  Noncash prizes  Rent/facliity costs  Other direct expenses	Add fir	Yes No	% h 5 in column (i		tingo/prograss Yes No	ve bingo		Yes	%		
rect Expenses	2 3 4 5	Gross revenue  Cash prizes  Noncash prizes  Rent/facliity costs  Other direct expenses  Volunteer labor  Direct expense summary	Add fir	Yes No	% h 5 in column (i		tingo/prograss Yes No	ve bingo		Yes	%		
e Direct Expenses	2 3 4 5 6 7 8	Gross revenue  Cash prizes  Noncash prizes  Rent/facility costs  Other direct expenses  Volunteer labor  Direct expense summary  Net gaming income summer the state(s) in which the	Add fir	Yes No nes 2 through	% h 5 in column (i	olumn (	Yes No	ve bingo		Yes	%	col (a) through col (s	
B 6	2 3 4 5 6 7 8 Entited	Gross revenue  Cash prizes  Noncash prizes  Rent/facility costs  Other direct expenses  Volunteer labor  Direct expense summary  Net gaming income summer the state(s) in which the de organization licensed to	Add fir	Yes No nes 2 through	% h 5 in column (i	olumn (	Yes No	ve bingo		Yes	%		
B 6	2 3 4 5 6 7 8 Entited	Gross revenue  Cash prizes  Noncash prizes  Rent/facility costs  Other direct expenses  Volunteer labor  Direct expense summary  Net gaming income summer the state(s) in which the	Add fir	Yes No nes 2 through	% h 5 in column (i	olumn (	Yes No	ve bingo		Yes	%	col (a) through col (s	
B 6	2 3 4 5 6 7 8 Entited	Gross revenue  Cash prizes  Noncash prizes  Rent/facility costs  Other direct expenses  Volunteer labor  Direct expense summary  Net gaming income summer the state(s) in which the de organization licensed to	Add fir	Yes No nes 2 through	% h 5 in column (i	olumn (	Yes No	ve bingo		Yes	%	col (a) through col (s	
d a c	2 3 4 5 6 7 8 Enilst	Gross revenue  Cash prizes  Noncash prizes  Rent/facility costs  Other direct expenses  Volunteer labor  Direct expense summary  Net gaming income summer the state(s) in which the de organization licensed to	Add tir	Yes No nes 2 through ubtract line 7 ization conduct gaming ac	% h 5 in column (i from line 1 co	tivities.	Yes No	%	year	Yes No	%	col (a) through col (s	
d a c	2 3 4 5 6 7 8 Enti	Gross revenue  Cash prizes  Noncash prizes  Rent/facility costs  Other direct expenses  Volunteer labor  Direct expense summary  Net gaming income summer the state(s) in which the ne organization licensed to No," explain	Add tir	Yes No nes 2 through ubtract line 7 ization conduct gaming ac	% h 5 in column (i from line 1 co	tivities.	Yes No	%	year	Yes No	%	col (a) through col (s	

SCHEDULE M (Fòrm 990)

**Noncash Contributions** 

OMB No 1545-0047 2019

Department of the Treasury

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 980.

Open To Public Inspection

Internal Revenue Service Name of the organization

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

SOCIETY INC

Employer identification num 58-2385869

Part I Types of Property (c) Noncash contribution Check d Number of contributions or Method of determining amounts reported on applicable tems contributed noncesh contribution amounts Form 990 Part VIII line 1g Art -- Works of art Art - Historical treasures Art - Fractional interests Books and publications 5 Clothing and household goods Cars and other vehicles 2,803,000 X 4 Boats and planes 8 Intellectual property 9 Securities --- Publicly traded 10 Securities - Closely held stock Securities - Partnership, LLC, or trust interests 12 Securities — Miscellaneous 13 Qualified conservation contribution — Historic structures Qualified conservation contribution -- Other Real estate — Residential 15 Real estate - Commercial 16 17 Real estate - Other 18 Collectibles 19 Food inventory Drugs and medical supplies 20 21 Taxidemy Historical artifacts 22 23 Scientific specimens Archeological artifacts 24 25 Other ► ( 26 Other ▶ ( 27 Other ► ( 28 Other ▶ ( Number of Forms 8283 received by the organization during the tax year for contributions for 29 which the organization completed Form 8283, Part IV. Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required X 30a to be used for exempt purposes for the entire holding period? b If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard 31 X 31 contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32a

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

b If "Yes," describe in Part II.

describe in Part II.

Schedule M (Form 990) 2019 THE INTERNATIONAL SEAKEEPERS

58-2385869

Page 2

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

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 980 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.

OMB No 1545-0047

Openito Public Inspection

Name of the organization THE INTERNATIONAL SEAKEEPERS SOCIETY INC

Employer identification number 58-2385869

Form 990 - Organization's Mission

THE INTERNATIONAL SEAKEEPERS SOCIETY PROMOTES OCEANOGRAPHIC RESEARCH, CONSERVATION AND EDUCATION THROUGH DIRECT INVOLVEMENT WITH THE YACHTING COMMUNITY. SEAKEEPERS ENABLES THE YACHTING COMMUNITY TO TAKE FULL ADVANTAGE OF THEIR UNIQUE POTENTIAL TO ADVANCE MARINE SCIENCES AND TO RAISE AWARENESS ABOUT GLOBAL OCEAN ISSUES.

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

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

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation FORM 990 documents available to the public

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

Description

Tot	/Prog Service	Mgt 8	General	Fund	raising
YACHT RELATED					
\$	424,687	<b>\$</b> .	0	\$	0
TRANSFER TO PUR	CHASERS				
\$	6,571,740	\$	0	\$	0
PROGRAMMING					
\$	42,800	\$	0	\$	0

Schedule O (Form 990 or 990-EZ) (2019) Page 2					
THE INTERNATIONAL SEAKEEPERS				Employer identification number 58 - 2385869	
\$	67,813	\$	0	\$	0
MEMBERSHIP	•				
\$	831	<b>\$</b> .	0	\$	0
BOAT SHOWS					•
\$	1,820	\$	0	\$	0
Tota					
Ś	7.494.911	Ś	0	Ś	0