

Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

A For the **2021** calendar year, or tax year beginning and ending

B Check if applicable:	C Name of organization LEAGUE OF CONSERVATION VOTERS, INC.	D Employer identification number 52-1733698
<input type="checkbox"/> Address change	Doing business as	E Telephone number (202) 785-8683
<input type="checkbox"/> Name change	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 740 15TH STREET, NW 700	
<input type="checkbox"/> Initial return	City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20005	G Gross receipts \$ 116,815,860.
<input type="checkbox"/> Final return/terminated	F Name and address of principal officer: GENE KARPINSKI SAME AS C ABOVE	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Amended return		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Application pending	I Tax-exempt status: <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) (4) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	If "No," attach a list. See instructions
J Website: ▶ WWW.LCV.ORG		H(c) Group exemption number ▶
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1970 M State of legal domicile: MD

Part I Summary

	1 Briefly describe the organization's mission or most significant activities: SEE PART III, LINE 1		
Activities & Governance	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	24
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	24
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	225
	6 Total number of volunteers (estimate if necessary)	6	5000
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 77,700,598.	Current Year 114,651,263.
	9 Program service revenue (Part VIII, line 2g)	31,944.	32,805.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	35,041.	-771.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	314,458.	113,365.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	78,082,041.	114,796,662.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	39,760,411.
14 Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		9,452,349.	11,451,425.
16a Professional fundraising fees (Part IX, column (A), line 11e)		449,999.	768,505.
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 4,578,851.			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		21,946,003.	46,493,872.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		71,608,762.	94,107,993.
19 Revenue less expenses. Subtract line 18 from line 12	6,473,279.	20,688,669.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 20,456,614.	End of Year 40,217,616.
	21 Total liabilities (Part X, line 26)	4,714,316.	3,748,121.
	22 Net assets or fund balances. Subtract line 21 from line 20	15,742,298.	36,469,495.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	▶ Signature of officer PATRICK COLLINS, ASSISTANT TREASURER	Date
	Type or print name and title	
Paid Preparer Use Only	Print/Type preparer's name AARON M. FOX	Preparer's signature AARON M. FOX
	Firm's name ▶ MARCUM LLP	Date 11/15/22
	Firm's address ▶ 1899 L STREET, NW, SUITE 850 WASHINGTON, DC 20036	Check if self-employed <input type="checkbox"/> PTIN P01365820
		Firm's EIN ▶ 11-1986323
		Phone no. (202) 227-4000

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: THE LEAGUE OF CONSERVATION VOTERS, INC. (LCV) WORKS TO TURN ENVIRONMENTAL VALUES INTO NATIONAL, STATE & LOCAL PRIORITIES. LCV, IN COLLABORATION WITH OUR STATE LCV PARTNERS, ADVOCATES FOR SOUND ENVIRONMENTAL LAWS AND POLICIES, HOLDS ELECTED OFFICIALS ACCOUNTABLE

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 29,995,683. including grants of \$ 1,536,500.) (Revenue \$) EDUCATED AND LOBBIED UNITED STATES CONGRESS AND THE EXECUTIVE BRANCH ON ENVIRONMENTAL AND PUBLIC HEALTH ISSUES, HELD PUBLIC OFFICIALS ACCOUNTABLE FOR THEIR POSITIONS ON ENVIRONMENTAL ISSUES THROUGH VARIOUS EFFORTS INCLUDING PUBLICATION OF THE NATIONAL ENVIRONMENTAL SCORECARD.

4b (Code:) (Expenses \$ 22,535,228. including grants of \$ 5,162,938.) (Revenue \$) THE CLIMATE AND ORGANIZING PROGRAM ENLISTS THE ENTIRE LEAGUE OF CONSERVATION MOVEMENT (STATE LEAGUE AND SELECT PARTNERS) TO EDUCATE THE PUBLIC AND MEDIA ABOUT THE IMPORTANCE OF ADDRESSING CLIMATE CHANGE. THE GOAL OF THE PROGRAM IS TO EDUCATE AND ENGAGE ENOUGH THE HEAT IS ON PROGRAM ENLISTS THE ENTIRE LEAGUE OF CONSERVATION MOVEMENT (STATE LEAGUE AND SELECT PARTNERS) TO EDUCATE THE PUBLIC AND MEDIA ABOUT THE IMPORTANCE OF ADDRESSING CLIMATE CHANGE. THE GOAL OF THE PROGRAM IS TO EDUCATE AND ENGAGE ENOUGH PEOPLE TO INSIST THAT THE UNITED STATES BECOME A WORLD LEADER IN HELPING TO TACKLE CLIMATE CHANGE.

4c (Code:) (Expenses \$ 18,020,954. including grants of \$ 15,633,750.) (Revenue \$) EDUCATED THE PUBLIC ON ISSUES GERMANE TO THE LEGISLATIVE PROCESS; CONSERVATION, ENVIRONMENTAL PROTECTION AND PUBLIC HEALTH; INFLUENCED PUBLIC HEALTH OPINION ON A NON-PARTISAN BASIS; SERVED OUR MEMBERS THROUGH FULFILLING REQUESTS FOR INFORMATION, WRITING LETTERS, SENDING IN NEW INFORMATION AND FACT SHEETS, AND INFORMING THEM ABOUT LEGISLATIVE ENVIRONMENTAL AGENDAS.

4d Other program services (Describe on Schedule O.) (Expenses \$ 16,800,268. including grants of \$ 13,061,003.) (Revenue \$ 32,805.)

4e Total program service expenses 87,352,133.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		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? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see the 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? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		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? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	X	

Note: All Form 990 filers are required to complete Schedule O

Part 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

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 17 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

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

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 24; 1b Enter the number of voting members included... 24; 2 Did any officer, director, trustee, or key employee have a family relationship... X; 3 Did the organization delegate control over management duties... X; 4 Did the organization make any significant changes to its governing documents... X; 5 Did the organization become aware during the year of a significant diversion of the organization's assets... X; 6 Did the organization have members or stockholders? X; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? X; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a The governing body? X; 8b Each committee with authority to act on behalf of the governing body? X; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? X; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X; 11b Describe on Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done X; 13 Did the organization have a written whistleblower policy? X; 14 Did the organization have a written document retention and destruction policy? X; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a The organization's CEO, Executive Director, or top management official X; 15b Other officers or key employees of the organization X; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed AL, AR, CA, CT, FL, GA, HI, IL, KS, KY, LA, MA
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [] Own website [] Another's website [X] Upon request [] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records GENE KARPINSKI - (202) 785-8683 740 15TH STREET, NW, 700, WASHINGTON, DC 20005

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 the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) GENE KARPINSKI PRESIDENT	27.00 2.00			X			201,659.	0.	19,535.	
(2) TIERNAN SITTENFELD SR. VP, POLICY AND LOBBYING	37.00				X		184,073.	0.	26,997.	
(3) ROBERT MAYSMITH SR. VP, CAMPAIGNS	34.00				X		166,801.	0.	21,089.	
(4) RICHARD THOMAS SR. VP, STRATEGIC INITIATIVES	21.00				X		155,045.	0.	20,048.	
(5) KIMBERLY GRANTHAM SR. VP, HUMAN RESOURCES	38.00				X		123,921.	0.	10,101.	
(6) STACEY FOLSOM SR. VP, DEVELOPMENT	24.00				X		127,756.	0.	5,275.	
(7) CAROL BROWNER CHAIR	2.00 2.00	X		X			0.	0.	0.	
(8) ROGER KIM VICE CHAIR	2.00 2.00	X		X			0.	0.	0.	
(9) TRIP VAN NOPPEN TREASURER	2.00 2.00	X		X			0.	0.	0.	
(10) CARRIE CLARK SECRETARY	2.00 2.00	X		X			0.	0.	0.	
(11) ROXANNE BROWN DIRECTOR	2.00 2.00	X					0.	0.	0.	
(12) DONNA EDWARDS DIRECTOR	2.00 2.00	X					0.	0.	0.	
(13) MICHAEL C. FOX DIRECTOR	2.00 2.00	X					0.	0.	0.	
(14) ELAINE FRENCH DIRECTOR	2.00 2.00	X					0.	0.	0.	
(15) MARIA HANDLEY DIRECTOR	2.00 2.00	X					0.	0.	0.	
(16) MICHAEL KIESCHNICK DIRECTOR	2.00 2.00	X					0.	0.	0.	
(17) MARK MAGANA DIRECTOR	2.00 2.00	X					0.	0.	0.	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) BRIONTE MCCORKLE DIRECTOR	2.00 2.00	X						0.	0.	0.
(19) MOLLY MCUSIC DIRECTOR	2.00 2.00	X						0.	0.	0.
(20) LISA MINSKY-PRIMUS DIRECTOR	2.00 2.00	X						0.	0.	0.
(21) GREG MOGA DIRECTOR	2.00 2.00	X						0.	0.	0.
(22) NING MOSBERGER-TANG DIRECTOR	2.00 2.00	X						0.	0.	0.
(23) REUBEN MUNGER DIRECTOR	2.00 2.00	X						0.	0.	0.
(24) SCOTT NATHAN DIRECTOR - UNTIL 12/21	2.00 2.00	X						0.	0.	0.
(25) POLLY O'BRIEN DIRECTOR	2.00 2.00	X						0.	0.	0.
(26) WILLIAM J. ROBERTS DIRECTOR	2.00 2.00	X						0.	0.	0.
1b Subtotal								959,255.	0.	103,045.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								959,255.	0.	103,045.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **9**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	X
4 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? <i>If "Yes," complete Schedule J for such individual</i>	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	X

Section B. Independent Contractors

1 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.

(A) Name and business address	(B) Description of services	(C) Compensation
SKDKNICKERBOCKER, LLC, 1818 N. STREET, SUITE 450, WASHINGTON, DC 20036	MEDIA AND CONSULTING	14,949,344.
OTG STRATEGIES, 10130 PERIMETER PKWY., SUITE 200, CHARLOTTE, NC 28216	CONSULTING SERVICES	8,823,352.
BULLY PULPIT INTERACTIVE LLC 1445 NEW YORK AVE NW, WASHINGTON, DC 20005	MEDIA AND CONSULTING	7,694,444.
M&R STRATEGIC SERVICES, 1101 CONNECTICUT AVE NW, 7TH FL, WASHINGTON, DC 20036	CONSULTING SERVICES	1,149,667.
RIVERSIDE ORGANIZING, LLC 10 FIDDLER POND LOOP, BEAUFORT, SC 29907	DATA ANALYTICS	911,118.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **22**

SEE PART VII, SECTION A CONTINUATION SHEETS

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b	52,940.				
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	114,598,323.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 512,897.				
	h Total. Add lines 1a-1f			114651263.			
Program Service Revenue	2 a PROGRAM REVENUE	Business Code	900099	32,805.	32,805.		
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			32,805.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			26,427.		26,427.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties			32,185.		32,185.	
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities				
			(ii) Other				
				1,992,000.			
	b Less: cost or other basis and sales expenses	7b		2,019,198.			
	c Gain or (loss)	7c		-27,198.			
d Net gain or (loss)			-27,198.		-27,198.		
8 a Gross income from fundraising events (not including \$ _____ 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							
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a 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							
Miscellaneous Revenue	11 a MISCELLANEOUS REVENUE	Business Code	900099	81,180.		81,180.	
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d			81,180.			
12 Total revenue. See instructions			114796662.	32,805.	0.	112,594.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total 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	35,394,191.	35,394,191.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	221,194.	79,121.	126,257.	15,816.
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	9,019,059.	6,645,419.	1,120,654.	1,252,986.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	278,608.	205,168.	34,755.	38,685.
9 Other employee benefits	1,047,358.	768,080.	134,419.	144,859.
10 Payroll taxes	885,206.	644,898.	118,635.	121,673.
11 Fees for services (nonemployees):				
a Management				
b Legal	29,404.	10,898.	18,506.	
c Accounting	88,677.	33,204.	50,040.	5,433.
d Lobbying				
e Professional fundraising services. See Part IV, line 17	768,505.			768,505.
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	3,388,784.	3,179,891.	208,442.	451.
12 Advertising and promotion	25,157,358.	24,829,587.	39,208.	288,563.
13 Office expenses	2,526,703.	1,554,497.	43,829.	928,377.
14 Information technology	1,990,225.	1,142,546.	49,165.	798,514.
15 Royalties				
16 Occupancy	744,028.	624,008.	26,500.	93,520.
17 Travel	70,195.	48,579.	11,591.	10,025.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	210,506.	136,117.	19,024.	55,365.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	137,504.	99,997.	18,656.	18,851.
23 Insurance	132,155.	96,045.	17,961.	18,149.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a FIELD CAMPAIGNS	11,648,895.	11,648,895.		
b TAXES AND LICENSES	177,388.	110,577.	66,445.	366.
c STATE REGISTRATION FEES	98,399.	36,468.	61,931.	
d STAFF TRAINING	93,651.	63,947.	10,991.	18,713.
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	94,107,993.	87,352,133.	2,177,009.	4,578,851.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720)	7,858,657.	2,342,410.	840,809.	4,675,438.

Part X Balance Sheet

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

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash - non-interest-bearing	9,641,674.	1	23,262,602.
	2 Savings and temporary cash investments	5,524,896.	2	4,412,451.
	3 Pledges and grants receivable, net	1,553,764.	3	9,004,011.
	4 Accounts receivable, net	717,789.	4	304,484.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	15,505.	8	1,030.
	9 Prepaid expenses and deferred charges	436,066.	9	215,853.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,549,965.		
	b Less: accumulated depreciation	10b 787,510.	823,500.	10c 762,455.
	11 Investments - publicly traded securities	0.	11	2,035,169.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	1,743,420.	15	219,561.
16 Total assets. Add lines 1 through 15 (must equal line 33)	20,456,614.	16	40,217,616.	
Liabilities	17 Accounts payable and accrued expenses	1,993,071.	17	1,984,547.
	18 Grants payable	1,297,695.	18	400,000.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	1,423,550.	25	1,363,574.
	26 Total liabilities. Add lines 17 through 25	4,714,316.	26	3,748,121.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	15,327,451.	27	36,364,095.
	28 Net assets with donor restrictions	414,847.	28	105,400.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	15,742,298.	32	36,469,495.
33 Total liabilities and net assets/fund balances	20,456,614.	33	40,217,616.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	114,796,662.
2	Total expenses (must equal Part IX, column (A), line 25)	2	94,107,993.
3	Revenue less expenses. Subtract line 2 from line 1	3	20,688,669.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	15,742,298.
5	Net unrealized gains (losses) on investments	5	11,309.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	27,219.
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	36,469,495.

Part 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: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? _____ 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b	Were the organization's financial statements audited by an independent accountant? _____ 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: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
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? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
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? _____		X
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 _____		

Form 990 (2021)

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2021

Name of the organization

LEAGUE OF CONSERVATION VOTERS, INC.

Employer identification number

52-1733698

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(4) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

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

General Rule

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

Special Rules

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

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

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

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

Name of organization LEAGUE OF CONSERVATION VOTERS, INC.	Employer identification number 52-1733698
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	 <hr/> <hr/> <hr/>	\$ <u>50,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>	 <hr/> <hr/> <hr/>	\$ <u>400,475.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>	 <hr/> <hr/> <hr/>	\$ <u>7,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>	 <hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>5</u>	 <hr/> <hr/> <hr/>	\$ <u>10,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>6</u>	 <hr/> <hr/> <hr/>	\$ <u>5,300.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization LEAGUE OF CONSERVATION VOTERS, INC.	Employer identification number 52-1733698
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	 <hr/> <hr/> <hr/>	\$ <u>10,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	 <hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	 <hr/> <hr/> <hr/>	\$ <u>40,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	 <hr/> <hr/> <hr/>	\$ <u>77,991.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
11	 <hr/> <hr/> <hr/>	\$ <u>10,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	 <hr/> <hr/> <hr/>	\$ <u>25,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization LEAGUE OF CONSERVATION VOTERS, INC.	Employer identification number 52-1733698
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	<hr/> <hr/> <hr/>	\$ <u>2,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14	<hr/> <hr/> <hr/>	\$ <u>6,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
15	<hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
16	<hr/> <hr/> <hr/>	\$ <u>4,120,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
17	<hr/> <hr/> <hr/>	\$ <u>10,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
18	<hr/> <hr/> <hr/>	\$ <u>100,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization LEAGUE OF CONSERVATION VOTERS, INC.	Employer identification number 52-1733698
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	_____ _____ _____	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
20	_____ _____ _____	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
21	_____ _____ _____	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
22	_____ _____ _____	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
23	_____ _____ _____	\$ 5,750.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
24	_____ _____ _____	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization LEAGUE OF CONSERVATION VOTERS, INC.	Employer identification number 52-1733698
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	<hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
26	<hr/> <hr/> <hr/>	\$ <u>33,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
27	<hr/> <hr/> <hr/>	\$ <u>15,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
28	<hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
29	<hr/> <hr/> <hr/>	\$ <u>10,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
30	<hr/> <hr/> <hr/>	\$ <u>119,373.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization LEAGUE OF CONSERVATION VOTERS, INC.	Employer identification number 52-1733698
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
31		\$ <u>75,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
32		\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
33		\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
34		\$ <u>10,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
35		\$ <u>15,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
36		\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization LEAGUE OF CONSERVATION VOTERS, INC.	Employer identification number 52-1733698
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
37	_____ _____ _____	\$ <u>200,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
38	_____ _____ _____	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
39	_____ _____ _____	\$ <u>60,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
40	_____ _____ _____	\$ <u>300,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
41	_____ _____ _____	\$ <u>100,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
42	_____ _____ _____	\$ <u>182,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization LEAGUE OF CONSERVATION VOTERS, INC.	Employer identification number 52-1733698
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
43	<hr/> <hr/> <hr/>	\$ 400,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
44	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
45	<hr/> <hr/> <hr/>	\$ 500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
46	<hr/> <hr/> <hr/>	\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
47	<hr/> <hr/> <hr/>	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
48	<hr/> <hr/> <hr/>	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization LEAGUE OF CONSERVATION VOTERS, INC.	Employer identification number 52-1733698
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
49	<hr/> <hr/> <hr/>	\$ <u>10,675,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
50	<hr/> <hr/> <hr/>	\$ <u>10,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
51	<hr/> <hr/> <hr/>	\$ <u>10,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
52	<hr/> <hr/> <hr/>	\$ <u>5,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
53	<hr/> <hr/> <hr/>	\$ <u>6,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
54	<hr/> <hr/> <hr/>	\$ <u>9,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization LEAGUE OF CONSERVATION VOTERS, INC.	Employer identification number 52-1733698
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
55	<hr/> <hr/> <hr/>	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
56	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
57	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
58	<hr/> <hr/> <hr/>	\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
59	<hr/> <hr/> <hr/>	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
60	<hr/> <hr/> <hr/>	\$ 15,207.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization LEAGUE OF CONSERVATION VOTERS, INC.	Employer identification number 52-1733698
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
61	 <hr/> <hr/> <hr/>	\$ <u>190,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
62	 <hr/> <hr/> <hr/>	\$ <u>5,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
63	 <hr/> <hr/> <hr/>	\$ <u>10,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
64	 <hr/> <hr/> <hr/>	\$ <u>50,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
65	 <hr/> <hr/> <hr/>	\$ <u>12,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
66	 <hr/> <hr/> <hr/>	\$ <u>30,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization LEAGUE OF CONSERVATION VOTERS, INC.	Employer identification number 52-1733698
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
67	_____ _____ _____	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
68	_____ _____ _____	\$ <u>10,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
69	_____ _____ _____	\$ <u>5,100.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
70	_____ _____ _____	\$ <u>100,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
71	_____ _____ _____	\$ <u>150,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
72	_____ _____ _____	\$ <u>10,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization LEAGUE OF CONSERVATION VOTERS, INC.	Employer identification number 52-1733698
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
73	_____ _____ _____	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
74	_____ _____ _____	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
75	_____ _____ _____	\$ <u>100,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
76	_____ _____ _____	\$ <u>2,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
77	_____ _____ _____	\$ <u>20,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
78	_____ _____ _____	\$ <u>9,250.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization LEAGUE OF CONSERVATION VOTERS, INC.	Employer identification number 52-1733698
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
79	 <hr/> <hr/> <hr/>	\$ <u>65,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
80	 <hr/> <hr/> <hr/>	\$ <u>50,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
81	 <hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
82	 <hr/> <hr/> <hr/>	\$ <u>34,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
83	 <hr/> <hr/> <hr/>	\$ <u>20,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
84	 <hr/> <hr/> <hr/>	\$ <u>300,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization LEAGUE OF CONSERVATION VOTERS, INC.	Employer identification number 52-1733698
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
85	<hr/> <hr/> <hr/>	\$ <u>12,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
86	<hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
87	<hr/> <hr/> <hr/>	\$ <u>20,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
88	<hr/> <hr/> <hr/>	\$ <u>30,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
89	<hr/> <hr/> <hr/>	\$ <u>6,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
90	<hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization LEAGUE OF CONSERVATION VOTERS, INC.	Employer identification number 52-1733698
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
91	_____ _____ _____	\$ 20,035.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
92	_____ _____ _____	\$ 5,022.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
93	_____ _____ _____	\$ 8,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
94	_____ _____ _____	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
95	_____ _____ _____	\$ 7,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
96	_____ _____ _____	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization LEAGUE OF CONSERVATION VOTERS, INC.	Employer identification number 52-1733698
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
97	_____ _____ _____	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
98	_____ _____ _____	\$ <u>30,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
99	_____ _____ _____	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
100	_____ _____ _____	\$ <u>10,170.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
101	_____ _____ _____	\$ <u>250,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
102	_____ _____ _____	\$ <u>7,350,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization LEAGUE OF CONSERVATION VOTERS, INC.	Employer identification number 52-1733698
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
103	_____ _____ _____	\$ <u>25,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
104	_____ _____ _____	\$ <u>1,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
105	_____ _____ _____	\$ <u>100,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
106	_____ _____ _____	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
107	_____ _____ _____	\$ <u>291,496.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
108	_____ _____ _____	\$ <u>21,032.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization LEAGUE OF CONSERVATION VOTERS, INC.	Employer identification number 52-1733698
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
109	_____ _____ _____	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
110	_____ _____ _____	\$ <u>10,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
111	_____ _____ _____	\$ <u>7,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
112	_____ _____ _____	\$ <u>19,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
113	_____ _____ _____	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
114	_____ _____ _____	\$ <u>50,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization LEAGUE OF CONSERVATION VOTERS, INC.	Employer identification number 52-1733698
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
115	_____ _____ _____	\$ <u>500,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
116	_____ _____ _____	\$ <u>25,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
117	_____ _____ _____	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
118	_____ _____ _____	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
119	_____ _____ _____	\$ <u>8,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
120	_____ _____ _____	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization LEAGUE OF CONSERVATION VOTERS, INC.	Employer identification number 52-1733698
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
121	_____ _____ _____	\$ <u>12,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
122	_____ _____ _____	\$ <u>100,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
123	_____ _____ _____	\$ <u>50,030.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
124	_____ _____ _____	\$ <u>150,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
125	_____ _____ _____	\$ <u>25,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
126	_____ _____ _____	\$ <u>18,840,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization LEAGUE OF CONSERVATION VOTERS, INC.	Employer identification number 52-1733698
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
127		\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
128		\$ <u>10,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
129		\$ <u>20,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
130		\$ <u>311,626.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
131		\$ <u>150,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
132		\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization LEAGUE OF CONSERVATION VOTERS, INC.	Employer identification number 52-1733698
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
133	_____ _____ _____	\$ <u>12,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
134	_____ _____ _____	\$ <u>8,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
135	_____ _____ _____	\$ <u>12,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
136	_____ _____ _____	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
137	_____ _____ _____	\$ <u>50,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
138	_____ _____ _____	\$ <u>173,700.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization LEAGUE OF CONSERVATION VOTERS, INC.	Employer identification number 52-1733698
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
139	_____ _____ _____	\$ <u>6,886.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
140	_____ _____ _____	\$ <u>15,204.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization LEAGUE OF CONSERVATION VOTERS, INC.	Employer identification number 52-1733698
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	3,220 SHARES, APPLE INC _____ _____ _____	\$ 400,475.	06/07/21
10	100 SHARES, TESLA INC _____ _____ _____	\$ 77,991.	02/18/21
100	57 SHARES, APPLE INC _____ _____ _____	\$ 10,170.	12/29/21
140	285 SHARES, KRANESHARES GLOBAL _____ _____ _____	\$ 5,902.	12/29/21
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization LEAGUE OF CONSERVATION VOTERS, INC.	Employer identification number 52-1733698
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE C
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527
 ▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
 ▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

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

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

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

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

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

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization LEAGUE OF CONSERVATION VOTERS, INC.	Employer identification number 52-1733698
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political campaign activity expenditures ▶ \$ 18,147,620.
- 3 Volunteer hours for political campaign activities 10,000.

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ 2,583,870.
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ 15,563,750.
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ 18,147,620.
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
CALIFORNIA LEAGUE OF CONSERVATION V	OAKLAND, CA 94612	68-0448503	10,000.	0.
CONSERVATION COLORADO GRASSROOTS	DENVER, CO 80202	82-2471091	16,500.	0.
CONSERVATION COLORADO VICTORY FUN	DENVER, CO 80202	81-0903344	43,500.	0.
CONSERVATION ILLINOIS PAC	SPRINGFIELD, IL 62701	80-0801428	20,000.	0.
CONSERVATION OHIO	COLUMBUS, OH 43212	47-4903967	140,000.	0.
CONSERVATION VOTERS OF PA VICTORY F	PO BOX 2125 PHILADELPHIA, PA	27-0800179	50,000.	0.

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

Schedule C (Form 990) 2021

LHA SEE PART IV FOR CONTINUATION

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grassroots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a. If zero or less, enter -0-														
i	Subtract line 1f from line 1c. If zero or less, enter -0-														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?														

Yes No

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990) 2021

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	X	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		X
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?		X

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	
a Current year	2a
b Carryover from last year	2b
c Total	2c
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3
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 lobbying and political expenditure next year?	4
5 Taxable amount of lobbying and political expenditures. See instructions	5

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.

PART I-A, LINE 1:

AS PART OF ITS EFFORTS TO SECURE SOUND ENVIRONMENTAL POLICIES AND HELP
 SECURE THE ENVIRONMENTAL FUTURE OF THE PLANET, THE LEAGUE OF
 CONSERVATION VOTERS SEEKS TO ELECT PRO-ENVIRONMENTAL CANDIDATES
 SUPPORTIVE OF SUCH POLICIES AND DEFEAT THOSE WHO STAND IN THE WAY OF
 THEM. THESE EFFORTS ARE CONDUCTED THROUGH COMMUNICATIONS TO THE PUBLIC

Part IV Supplemental Information (continued)

INCLUDING MAIL, EMAIL, PHONE, DOOR-TO-DOOR AND ADVERTISEMENTS.

PART I-C CONTINUATION FOR INCOMPLETE NAME/ADDRESS INFORMATION:

CALIFORNIA LEAGUE OF CONSERVATION VOTERS STATE COMMITTEE

350 FRANK H OGAWA PLAZA, SUITE 1100 OAKLAND, CA 94612

CONSERVATION COLORADO GRASSROOTS ACTION FUND

1536 WYNKOOP STREET, SUITE 510 DENVER, CO 80202

CONSERVATION COLORADO VICTORY FUND

1536 WYNKOOP STREET, SUITE 510 DENVER, CO 80202

CONSERVATION ILLINOIS PAC

520 EAST CAPITOL SPRINGFIELD, IL 62701

CONSERVATION OHIO

1145 CHESAPEAKE AVE. SUITE I COLUMBUS, OH 43212

PART I-C CONTINUATION:

ELM ACTION FUND INDEPENDENT EXPENDITURE POLITICAL ACTION COMMITTEE

15 COURT SQUARE, SUITE 1000 BOSTON, MA 02108

EIN: 47-5496457 COL (D) AMOUNT: 50000. COL (E) AMOUNT: 0.

LCV VICTORY FUND

740 15TH ST NW WASHINGTON, DC 20005

EIN: 27-3145176 COL (D) AMOUNT: 12750000. COL (E) AMOUNT: 0.

Part IV Supplemental Information *(continued)*

MAINE CONSERVATIONS VOTERS ACTION FUND

295 WATER STREET, SUITE 9 AUGUSTA, ME 04330

EIN: 01-0536637 COL (D) AMOUNT: 3750. COL (E) AMOUNT: 0.

NEW JERSEY LEAGUE OF CONSERVATION VOTERS PAC

1 N. JOHNSTON AVE, SUITE A250 HAMILTON, NJ 08609

EIN: 45-3503652 COL (D) AMOUNT: 7200. COL (E) AMOUNT: 0.

NEW JERSEY LEAGUE OF CONSERVATION VOTERS VICTORY FUND

1 N. JOHNSTON AVE, SUITE A250 HAMILTON, NJ 08609

EIN: 46-3733241 COL (D) AMOUNT: 112800. COL (E) AMOUNT: 0.

VIRGINIA LCV PAC

100 WEST FRANKLIN STREET, SUITE 102 RICHMOND, VA 23220

EIN: 54-1973929 COL (D) AMOUNT: 2360000. COL (E) AMOUNT: 0.

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

Name of the organization LEAGUE OF CONSERVATION VOTERS, INC. Employer identification number 52-1733698

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Revenue, Assets. Rows include: 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. 1b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1, (ii) Assets included in Form 990, Part X. 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1, b Assets included in Form 990, Part X.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2021

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____%
 - b Permanent endowment _____%
 - c Term endowment _____%
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|--------|----|
| (i) Unrelated organizations | 3a(i) | |
| (ii) Related organizations | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		906,679.	302,226.	604,453.
d Equipment		493,247.	357,805.	135,442.
e Other		150,039.	127,479.	22,560.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				762,455.

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED RENT AND LEASE INCENTIVE	1,363,574.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	1,363,574.

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

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

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

1	Total revenue, gains, and other support per audited financial statements	1	117,357,507.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	11,309.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	15,309,536.
e	Add lines 2a through 2d	2e	15,320,845.
3	Subtract line 2e from line 1	3	102,036,662.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	12,760,000.
c	Add lines 4a and 4b	4c	12,760,000.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	114,796,662.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

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

1	Total expenses and losses per audited financial statements	1	83,173,416.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	1,825,423.
e	Add lines 2a through 2d	2e	1,825,423.
3	Subtract line 2e from line 1	3	81,347,993.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	12,760,000.
c	Add lines 4a and 4b	4c	12,760,000.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	94,107,993.

Part XIII Supplemental Information.

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

PART X, LINE 2:

THE ORGANIZATION PERFORMED AN EVALUATION OF UNCERTAIN TAX POSITIONS FOR THE YEAR ENDED DECEMBER 31, 2021, AND DETERMINED THAT THERE ARE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS OR THAT MAY HAVE ANY EFFECT ON ITS TAX-EXEMPT STATUS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

REVENUE OF AFFILIATED ORGANIZATIONS 15,309,536.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

GRANTS TO AFFILIATED ORGANIZATIONS 12,760,000.

Part XIII Supplemental Information *(continued)*

PART XII, LINE 2D - OTHER ADJUSTMENTS:

EXPENSES OF AFFILIATED ORGANIZATIONS 1,825,423.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

GRANTS TO AFFILIATED ORGANIZATIONS 12,760,000.

**SCHEDULE G
(Form 990)**

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

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.

2021

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

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

Name of the organization **LEAGUE OF CONSERVATION VOTERS, INC.** Employer identification number **52-1733698**

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a Mail solicitations
 - b Internet and email solicitations
 - c Phone solicitations
 - d In-person solicitations
 - e Solicitation of non-government grants
 - f Solicitation of government grants
 - g Special fundraising events
- 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
M&R STRATEGIC SERVICES - 1101 CONNECTICUT AVE, NW, SUITE CHAPMAN, CUBINE, ADAMS AND HUSSEY - 200 15TH STREET N	ONLINE ADVOCACY		X	2,988,323.	871,293.	2,117,030.
GSI INC. TELEMARKETING - 20300 S. VERMONT AVE., SUITE	MAIL CONSULTING		X	1,035,532.	427,285.	608,247.
FM DIRECT LLC - 7311 GROVE ROAD, SUITE V, FREDERICK, MD	TELE-ADVOCACY		X	363,956.	92,434.	271,522.
CP DIRECT, INC - P.O. BOX 64814, BALTIMORE, MD 21264	MAIL CONSULTING		X	34,209.	7,499.	26,711.
PACIFIC EAST - 8625 SW CASCADE AVE., SUITE 250, BULLETPROOF, INC - 1840 41ST AVENUE, #102-333, CAPITOLA,	MAIL CONSULTANT		X	34,209.	18,977.	15,232.
	TELE-ADVOCACY		X	11,711.	2,974.	8,736.
	MAIL CONSULTANT		X	7,175.	2,940.	4,235.
Total				4,475,115.	1,423,402.	3,051,713.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.
AK, AL, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, LA, MA, MD, ME, MI, MN, MO, MS, NC, ND, NH, NJ, NM, NY, OH, OK, OR, PA, RI, SC, TN, UT, VA, WI, WV

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		(event type)	(event type)	(total number)	(add col. (a) through col. (c))
Revenue	1	Gross receipts			
	2	Less: Contributions			
	3	Gross income (line 1 minus line 2)			
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses			
	10	Direct expense summary. Add lines 4 through 9 in column (d)			
	11	Net income summary. Subtract line 10 from line 3, column (d)			

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1	Gross revenue		
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
7	Direct expense summary. Add lines 2 through 5 in column (d)				
8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____
 a Is the organization licensed to conduct gaming activities in each of these states? Yes No
 b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No
 b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: M&R STRATEGIC SERVICES

(I) ADDRESS OF FUNDRAISER:

1101 CONNECTICUT AVE, NW, SUITE 700, WASHINGTON, DC 20036

(I) NAME OF FUNDRAISER: CHAPMAN, CUBINE, ADAMS AND HUSSEY

(I) ADDRESS OF FUNDRAISER: 200 15TH STREET N #550, ARLINGTON, VA 22209

Part IV Supplemental Information (continued)

(I) NAME OF FUNDRAISER: GSI INC. TELEMARKETING

(I) ADDRESS OF FUNDRAISER:

20300 S. VERMONT AVE., SUITE 210, TORRANCE, CA 90502

(I) NAME OF FUNDRAISER: FM DIRECT LLC

(I) ADDRESS OF FUNDRAISER: 7311 GROVE ROAD, SUITE V, FREDERICK, MD 21704

(I) NAME OF FUNDRAISER: PACIFIC EAST

(I) ADDRESS OF FUNDRAISER:

8625 SW CASCADE AVE., SUITE 250, BEAVERTON, OR 97008

(I) NAME OF FUNDRAISER: BULLETPROOF, INC

(I) ADDRESS OF FUNDRAISER: 1840 41ST AVENUE, #102-333, CAPITOLA, CA 95010

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Name of the organization **LEAGUE OF CONSERVATION VOTERS, INC.** Employer identification number **52-1733698**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
BUILDING BACK TOGETHER 901 NEW YORK AVE NW, SUITE 530 WASHINGTON, DC 20001	86-2447747	501(C)(4)	1,000,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
CALIFORNIA LEAGUE OF CONSERVATION VOTERS - 350 FRANK H. OGAWA PLAZA, SUITE 1100 - OAKLAND, CA 94612	94-3169564	501(C)(4)	823,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
CALIFORNIA LEAGUE OF CONSERVATION VOTERS EDUCATION FUND - 350 FRANK H. OGAWA PLAZA, SUITE 1100 - OAKLAND, CA 94612	94-3232552	501(C)(3)	35,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
CALIFORNIA LEAGUE OF CONSERVATION VOTERS STATE COMMITTEE - 350 FRANK H OGAWA PLAZA, SUITE 1100 - OAKLAND, CA 94612	68-0448503	527	10,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
CENTER FOR EMPOWERED POLITICS 1042 GRANT AVE #5 SAN FRANCISCO, CA 94133	45-3084134	501(C)(4)	10,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
CONNECTICUT LEAGUE OF CONSERVATION VOTERS, INC - 553 FARMINGTON AVENUE, SUITE 201 - HARTFORD, CT 06105	06-1525526	501(C)(4)	98,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **▶ 15.**
- 3** Enter total number of other organizations listed in the line 1 table **▶ 51.**

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

Schedule I (Form 990) 2021

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONSERVATION ALABAMA 853 DAUPHIN STREET, SUITE C MOBILE, AL 36602	63-1221685	501(C)(4)	63,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
CONSERVATION COLORADO 1536 WYNKOOP STREET, SUITE 510 DENVER, CO 80202	30-0037131	501(C)(4)	913,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
CONSERVATION COLORADO GRASSROOTS ACTION FUND - 1536 WYNKOOP STREET, SUITE 510 - DENVER, CO 80202	82-2471091	527	16,500.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
CONSERVATION COLORADO VICTORY FUND 1536 WYNKOOP STREET, SUITE 510 DENVER, CO 80202	81-0903344	527	43,500.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
CONSERVATION ILLINOIS PAC 520 EAST CAPITOL SPRINGFIELD, IL 62701	83-0733317	527	20,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
CONSERVATION MINNESOTA 1101 WEST RIVER PARKWAY, SUITE 250 MINNEAPOLIS, MN 55415	41-2017329	501(C)(3)	25,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
CONSERVATION MINNESOTA VOTER CENTER, INC - 1101 WEST RIVER PARKWAY, SUITE 250 - MINNEAPOLIS, MN 55415	41-1949625	501(C)(4)	567,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
CONSERVATION OHIO 1145 CHESAPEAKE AVE. SUITE I COLUMBUS, OH 43212	82-4638940	527	140,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
CONSERVATION VOTERS FOR IDAHO, INC. - 413 WEST IDAHO STREET, SUITE 100 - BOISE, ID 83702	72-1599019	501(C)(4)	271,500.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONSERVATION VOTERS NEW MEXICO 200 W. DE VARGAS STREET, SUITE 1 SANTA FE, NM 87501	20-0016255	501(C)(4)	647,500.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
CONSERVATION VOTERS NEW MEXICO EDUCATION FUND - 200 W. DE VARGAS STREET, SUITE 1 - SANTA FE, NM 87501	91-1982332	501(C)(3)	35,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
CONSERVATION VOTERS OF PA VICTORY FUND - PO BOX 2125 - PHILADELPHIA, PA 19103	83-1360331	527	50,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
CONSERVATION VOTERS OF PENNSYLVANIA - PO BOX 2125 - PHILADELPHIA, PA 19103	27-0800179	501(C)(4)	813,370.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
CONSERVATION VOTERS OF SOUTH CAROLINA - 712 RICHLAND ST, SUITE A - COLUMBIA, SC 29201	58-2420153	501(C)(4)	428,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
EARTHJUSTICE 1001 G ST. NW, SUITE 1000 WASHINGTON, DC 20001	82-1981944	501(C)(4)	50,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
ELM ACTION FUND INDEPENDENT EXPENDITURE POLITICAL ACTION COMMITTEE - 15 COURT SQUARE, SUITE 1000 - BOSTON, MA 02108	47-5496457	527	50,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
ENVIRONMENTAL LEAGUE OF MASSACHUSETTS - 15 COURT SQUARE, SUITE 1000 - BOSTON, MA 02108	04-2760271	501(C)(3)	35,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
ENVIRONMENTAL LEAGUE OF MASSACHUSETTS ACTION FUND, INC. - 15 COURT SQUARE, SUITE 1000 - BOSTON, MA 02108	04-2024004	501(C)(4)	440,800.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FLAVA CATERING 1516 JARVIS ST WINSTON-SALEM, NC 27101	85-0712778	N/A	10,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
FLORIDA CONSERVATION VOTERS, INC. 1700 NORTH MONROE STREET #11-286 TALLAHASSEE, FL 32303	46-0560492	501(C)(4)	577,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
FUND FOR A BETTER FUTURE 555 CAPITOL MALL, SUITE 1095 SACRAMENTO, CA 95814	81-2319758	501(C)(4)	1,250,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
FUTURE FORWARD USA PAC 3458 KENNETH DR PALO ALTO, CA 94303	82-4170762	501(C)(4)	350,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
GEORGIA CONSERVATION VOTERS EDUCATION FUND - 1530 DEKALB AVENUE NE, SUITE A - ATLANTA, GA 30307	58-2525235	501(C)(4)	401,500.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
HIP HOP CAUCUS EDUCATION FUND 1638 R ST NW STE 120 WASHINGTON, DC 20009	27-1165010	501(C)(3)	100,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
ILLINOIS ENVIRONMENTAL COUNCIL 520 EAST CAPITOL SPRINGFIELD, IL 62701	37-0989990	501(C)(4)	738,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
ILLINOIS ENVIRONMENTAL COUNCIL EDUCATION FUND - 520 EAST CAPITOL - SPRINGFIELD, IL 62701	51-0211835	501(C)(3)	55,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
INSTITUTE FOR ASIAN PACIFIC AMERICAN LEADERSHIP & ADVANCEMENT - 815 16TH ST. NW 2ND FLOOR - WASHINGTON, DC 20006	27-4284628	501(C)(3)	15,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LCV VICTORY FUND 740 15TH ST NW WASHINGTON, DC 20005	27-3145176	527	12,750,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
MAINE CONSERVATION VOTERS 295 WATER STREET, SUITE 9 AUGUSTA, ME 04330	01-0536008	501(C)(4)	600,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
MARYLAND LEAGUE OF CONSERVATION VOTERS EDUCATION FUND - 30 WEST STREET, SUITE C - ANNAPOLIS, MD 21401	52-2210858	501(C)(3)	35,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
MARYLAND LEAGUE OF CONSERVATION VOTERS, INC. - 30 WEST STREET, SUITE C - ANNAPOLIS, MD 21401	52-2122715	501(C)(4)	447,703.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
MICHIGAN LEAGUE OF CONSERVATION VOTERS EDUCATION FUND - 3029 MILLER ROAD - ANN ARBOR, MI 48103	37-1430158	501(C)(3)	35,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
MICHIGAN LEAGUE OF CONSERVATION VOTERS, INC. - 3029 MILLER ROAD - ANN ARBOR, MI 48103	38-3481677	501(C)(4)	1,184,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
MONTANA CONSERVATION VOTERS 2822 3RD AVE N. SUITE 203 BILLINGS, MT 59101	81-0521030	501(C)(4)	338,500.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
NEBRASKA CONSERVATION VOTERS 6030 SOUTH 57TH STREET SUITE B LINCOLN, NE 68516	03-0402828	501(C)(4)	458,500.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
NEVADA CONSERVATION LEAGUE 8540 S EASTERN AVE SUITE 200 LAS VEGAS, NV 89123	88-0497866	501(C)(4)	540,643.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW JERSEY LEAGUE OF CONSERVATION VOTERS PAC - 1 N. JOHNSTON AVE, SUITE A250 - HAMILTON, NJ 08609	45-3503652	527	7,200.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
NEW JERSEY LEAGUE OF CONSERVATION VOTERS VICTORY FUND - 1 N. JOHNSTON AVE, SUITE A250 - HAMILTON, NJ 08609	46-3733241	527	112,800.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
NEW JERSEY LEAGUE OF CONSERVATION VOTERS, INC. - 1 N. JOHNSTON AVE, SUITE A250 - HAMILTON, NJ 08609	25-2577440	501(C)(4)	591,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
NEW YORK LEAGUE OF CONSERVATION VOTERS, INC. - 30 BROAD STREET, 30TH FLOOR - NEW YORK, NY 10004	11-3095033	501(C)(4)	496,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
NORTH CAROLINA LEAGUE OF CONSERVATION VOTERS, INC - 127 WEST HARGETT STREET, SUITE 406 - RALEIGH, NC 27601	56-0991894	501(C)(4)	1,077,095.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
OHIO ENVIRONMENTAL COUNCIL 1145 CHESAPEAKE AVENUE, SUITE 1 COLUMBUS, OH 43212	31-0805578	501(C)(3)	102,800.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
OHIO ENVIRONMENTAL COUNCIL ACTION FUND - 1145 CHESAPEAKE AVENUE, SUITE 1 - COLUMBUS, OH 43212	47-4903967	501(C)(4)	345,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
ONE AIPA NEVADA 6675 S TENAYA WAY, SUITE #200 LAS VEGAS, NV 89113	83-0846881	501(C)(4)	10,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
OREGON LEAGUE OF CONSERVATION VOTERS - 321 SOUTHWEST 4TH AVENUE, SUITE 600 - PORTLAND, OR 97204	93-1176721	501(C)(4)	254,500.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PENNFUTURE 610 N. 3RD STREET HARRISBURG, PA 17101	31-1607866	501(C)(3)	25,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
PODER IN ACTION 4415 N. MARYVALE PARKWAY, PO BOX 23 PHOENIX, AZ 85063	46-2284158	501(C)(3)	10,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
RAPID RESIST ACTION 902 EVERETT AVENUE OAKLAND, CA 94602	82-2476207	501(C)(4)	10,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
RURAL UTAH PROJECT 323 S 600 E, SUITE 130 SALT LAKE CITY, UT 84102	82-1603888	501(C)(4)	12,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
THE ALASKA CENTER 808 E STREET, SUITE 100 ANCHORAGE, AK 99501	92-0090065	501(C)(4)	72,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
THE ALASKA CENTER EDUCATION FUND 808 E STREET, SUITE 100 ANCHORAGE, AK 99501	23-7380065	501(C)(3)	152,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
TIDES ADVOCACY 1014 TORNEY AVE SAN FRANCISCO, CA 94129	94-3153687	501(C)(4)	10,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
VERMONT LEAGUE OF CONSERVATION VOTERS, INC. - 11 BALDWIN STREET - MONTPELIER, VT 05602	22-2543128	501(C)(4)	139,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
VIRGINIA LCV PAC 100 WEST FRANKLIN STREET, SUITE 102 RICHMOND, VA 23220	31-1721823	527	2,360,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VIRGINIA LEAGUE OF CONSERVATION VOTERS - 100 WEST FRANKLIN STREET, SUITE 102 - RICHMOND, VA 23220	54-1973929	501(C)(4)	1,145,330.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
WABANAKI ALLIANCE 84 MARGINAL WAY, SUITE 600 PORTLAND, ME 04101	85-1408286	501(C)(4)	10,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
WASHINGTON CONSERVATION VOTERS 1402 3RD AVENUE, SUITE 1400 SEATTLE, WA 98101	91-1548791	501(C)(4)	568,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
WASHINGTON ENVIRONMENTAL COUNCIL 1402 3RD AVENUE, SUITE 1400 SEATTLE, WA 98101	91-1816228	501(C)(3)	35,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
WINDWARD FUND 1828 L STREET NW SUITE 300-C WASHINGTON, DC 20036	47-3522162	501(C)(3)	500,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY
WISCONSIN LEAGUE OF CONSERVATION VOTERS, INC. - 133 SOUTH BUTLER STREET, SUITE 320 - MADISON, WI 53703	73-1628891	501(C)(4)	540,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND ADVOCACY

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

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

PART I, LINE 2:

THE ORGANIZATION PROVIDES A SERIES OF GRANTS TO STATE CONSERVATION VOTER ORGANIZATIONS AND OTHER STRATEGIC PARTNERS, INCLUDING FUNDING FOR CLIMATE CHANGE AND CLEAN AIR DEFENSE CAMPAIGNS, SCORECARD ROLLOUT, STATE CAPACITY BUILDING AND ADVOCACY. GRANT AGREEMENTS DESCRIBE APPROPRIATE PROGRAMMATIC USES OF THE FUNDS AND ANY NECESSARY RESTRICTIONS. GRANT FUNDS ARE MONITORED DIRECTLY BY STAFF WHEN WORKING IN PARTNERSHIP WITH A GRANTEE AND/OR THROUGH FINANCIAL AND NARRATIVE REPORTING REQUIREMENTS DUE FROM THE GRANTEE WITHIN A CERTAIN TIMEFRAME.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization

LEAGUE OF CONSERVATION VOTERS, INC.

Employer identification number

52-1733698

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|---|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1a		
1b		
2		
3		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2021

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) GENE KARPINSKI PRESIDENT	(i)	201,659.	0.	0.	5,916.	13,619.	221,194.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) TIERNAN SITTENFELD SR. VP, POLICY AND LOBBYING	(i)	184,073.	0.	0.	7,631.	19,366.	211,070.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) ROBERT MAYSMITH SR. VP, CAMPAIGNS	(i)	166,801.	0.	0.	6,769.	14,320.	187,890.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) RICHARD THOMAS SR. VP, STRATEGIC INITIATIVES	(i)	155,045.	0.	0.	6,358.	13,690.	175,093.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization **LEAGUE OF CONSERVATION VOTERS, INC.** Employer identification number **52-1733698**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	11	512,897.	FMV
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ()				
26 Other ()				
27 Other ()				
28 Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29**

	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 to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

**SCHEDULE O
(Form 990)**

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 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public
Inspection

Name of the organization

LEAGUE OF CONSERVATION VOTERS, INC.

Employer identification number

52-1733698

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

FOR THEIR VOTES AND ACTIONS, AND ELECTS PRO-ENVIRONMENTAL CANDIDATES
WHO WILL CHAMPION OUR PRIORITY ISSUES.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

PROVIDED TRAINING, GUIDANCE AND FINANCIAL ASSISTANCE TO STATE LEAGUE
CONSERVATION ORGANIZATIONS FOR SUPPORT OF THEIR PROGRAMS, INCLUDING
BOARD DEVELOPMENT, LIST ENHANCEMENT, FUNDRAISING, PROGRAMMATIC SUPPORT
SUCH AS GLOBAL WARMING, AND GENERAL OPERATING SUPPORT
EXPENSES \$ 16,800,268. INCL GRANTS OF \$ 13,061,003. REVENUE \$ 32,805.

FORM 990, PART VI, SECTION A, LINE 6:

THE LEAGUE OF CONSERVATION VOTERS HAS INDIVIDUAL MEMBERS

FORM 990, PART VI, SECTION A, LINE 7A:

THE LEAGUE OF CONSERVATION VOTERS HAS INDIVIDUAL MEMBERS WHO ANNUALLY ELECT
ONE MEMBER OF THE BOARD OF DIRECTORS

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

THE FEDERAL FORM 990 IS PREPARED BY OUR OUTSIDE ACCOUNTANTS AND REVIEWED BY
THE CFO, COUNSEL AND PROVIDED TO THE BOARD OF DIRECTORS FOR THEIR REVIEW
PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE.

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

TO IDENTIFY POSSIBLE CONFLICTS OF INTEREST ALL DIRECTORS, OFFICERS AND
MEMBERS OF ANY COMMITTEE EXERCISING BOARD-DESIGNATED POWERS MUST DISCLOSE

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

Schedule O (Form 990) 2021

Name of the organization LEAGUE OF CONSERVATION VOTERS, INC.	Employer identification number 52-1733698
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ANY FINANCIAL INTEREST IN ANY ENTITY WITH WHICH THE CORPORATION OR ANY LEGALLY RELATED ORGANIZATION HAS OR IS NEGOTIATING A TRANSACTION OR AGREEMENT, AND ALL MATERIAL FACTS RELATED TO THAT INTEREST FINANCIAL INTERESTS INCLUDE ANY DIRECT OR INDIRECT RELATIONSHIP THROUGH BUSINESS, INVESTMENT, OR FAMILY, SUCH AS ACTUAL OR POTENTIAL OWNERSHIP OR INVESTMENT INTERESTS OR COMPENSATION ARRANGEMENTS. DIRECTORS SHALL ALSO DISCLOSE ANY FIDUCIARY DUTY TO A PERSON OR ENTITY OTHER THAN THE CORPORATION THAT MIGHT JEOPARDIZE THE DIRECTOR'S ABILITY TO EXERCISE INDEPENDENT JUDGEMENT AND ACT IN THE BEST INTERESTS OF THE CORPORATION. AFTER DISCUSSION WITH THE INTERESTED PERSON, THE REMAINING BOARD MEMBERS SHALL DECIDE IF A CONFLICT OF INTEREST EXISTS AFTER EXERCISING DUE DILIGENCE, THE BOARD SHALL DETERMINE BY A MAJORITY VOTE OF THE DISINTERESTED DIRECTORS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE ORGANIZATION'S BEST INTEREST ALL OFFICERS, DIRECTORS AND MEMBERS OF THE COMMITTEES WITH BOARD-DELEGATED POWER SHALL RECEIVE A COPY OF THE CONFLICT OF INTEREST POLICY, AS IT APPEARS IN THE BYLAWS ALL OFFICERS, DIRECTORS AND MEMBERS OF COMMITTEES WITH BOARD-DELEGATED POWERS SHALL SIGN AN ANNUAL STATEMENT DECLARING THAT THE PERSON RECEIVED A COPY OF THE POLICY, UNDERSTANDS THAT THE POLICY APPLIES TO ALL COMMITTEES AND SUB-COMMITTEES HAVING BOARD-DELEGATED POWERS, AND UNDERSTANDS THAT THE CORPORATION IS A SOCIAL WELFARE ORGANIZATION AND THAT IN ORDER TO MAINTAIN ITS TAX EXEMPT STATUS, IT MUST CONTINUOUSLY ENGAGE PRIMARILY IN ACTIVITIES WHICH ACCOMPLISH ONE OR MORE OF ITS TAX EXEMPT PURPOSES.

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

THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS CONDUCTS AN ANNUAL WRITTEN REVIEW OF PERFORMANCE AND APPROVES COMPENSATION OF THE PRESIDENT AND THE FULL BOARD IS APPRISED OF THIS REVIEW DATA FROM COMPENSATION

Name of the organization LEAGUE OF CONSERVATION VOTERS, INC.	Employer identification number 52-1733698
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SURVEYS, REVIEWS OF OTHER 990S AND/OR SERVICES OF AN INDEPENDENT CONSULTANTS ARE UTILIZED AS APPROPRIATE AS PART OF THE REVIEW WHEN APPLICABLE. THE PRESIDENT CONDUCTS ANNUAL REVIEW OF PERFORMANCE AND ADJUSTMENTS TO COMPENSATION OF OTHER KEY EMPLOYEES. THIS COMPENSATION ADJUSTMENT IS SUPPORTED BY A REVIEW PERFORMED BY A THIRD PARTY COMPENSATION CONSULTANT. THE LAST COMPENSATION REVIEW TOOK PLACE IN DECEMBER 2020.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:
AL, AR, CA, CT, FL, GA, HI, IL, KS, KY, LA, MA, MD, MN, MS, NC, NH, NJ, NY, OK, OR, PA, RI, SC, TN
UT, VA, WI, WV

FORM 990, PART VI, SECTION C, LINE 19:
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST, SUBJECT TO REVIEW OF THE REQUEST BY ITS GENERAL COUNSEL.

FORM 990, PART VII, SECTION A:
THE LEAGUE OF CONSERVATION VOTERS, INC. (LCV) AND LCV EDUCATION FUND HAVE ENTERED INTO A COST SHARING ARRANGEMENT UNDER WHICH LCV EDUCATION FUND REIMBURSES LCV FOR LCV EDUCATION FUND'S ALLOCABLE SHARE OF THE COMPENSATION OF CERTAIN EMPLOYEES FOR SERVICES PROVIDED TO LCV EDUCATION FUND. LCV EDUCATION FUND AND LCV ARE NOT "RELATED ORGANIZATIONS" AS THAT TERM IS DEFINED IN THE FORM 990 GLOSSARY. PURSUANT TO THEIR AGREEMENT, THE ADDITIONAL COMPENSATION PAID BY THE LCV EDUCATION FUND TO THE FOLLOWING INDIVIDUALS LISTED ON PART VII IS AS FOLLOWS:

GENE KARPINSKI: 11 HOURS PER WEEK; \$108,586 REPORTABLE COMPENSATION;

Name of the organization LEAGUE OF CONSERVATION VOTERS, INC.	Employer identification number 52-1733698
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\$10,519 OTHER COMPENSATION

TIERNAN SITTFELD: 3 HOURS PER WEEK; \$16,006 REPORTABLE COMPENSATION;

\$2,348 OTHER COMPENSATION

ROBERT MAYSMITH: 6 HOURS PER WEEK; \$29,435 REPORTABLE COMPENSATION;

\$3,721 OTHER COMPENSATION

STACEY FOLSOM: 15 HOURS PER WEEK; \$85,171 REPORTABLE COMPENSATION;

\$3,518 OTHER COMPENSATION

RICHARD THOMAS: 20 HOURS PER WEEK; \$83,485 REPORTABLE COMPENSATION;

\$10,795 OTHER COMPENSATION

FORM 990, PART XII, LINE 2C:

THE LEAGUE OF CONSERVATION VOTERS, INC. IS AUDITED ON A CONSOLIDATED BASIS BY AN INDEPENDENT AUDITOR ALONG WITH ITS FIVE SEGREGATED FUNDS: LCV POLITICAL ENGAGEMENT FUND, LCV VICTORY FUND, THE LEAGUE OF CONSERVATION VOTERS ACTION FUND, THE NEW AMERICAN JOBS FUND, AND THE CHISPA ARIZONA PAC, ALL OF WHICH ARE EXEMPT UNDER SECTION 527. THE LEAGUE OF CONSERVATION VOTERS, INC. HAS AN AUDIT COMMITTEE WHICH REVIEWS THE AUDIT AND OVERSEES SELECTION OF AN INDEPENDENT AUDITOR.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization **LEAGUE OF CONSERVATION VOTERS, INC.** Employer identification number **52-1733698**

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
LEAGUE OF CONSERVATION VOTERS ACTION FUND - 46-0480489, 740 15TH STREET NW SUITE 700, WASHINGTON, DC 20005	FEDERAL ELECTORAL ACTIVITY	DISTRICT OF COLUMBIA	527		LEAGUE OF CONSERVATION VOTERS	X	
LCV POLITICAL ENGAGEMENT FUND - 91-2084140 740 15TH STREET NW SUITE 700 WASHINGTON, DC 20005	NON-FEDERAL ELECTORAL ACTIVITY	DISTRICT OF COLUMBIA	527		LEAGUE OF CONSERVATION VOTERS	X	
LCV VICTORY FUND - 27-3145176 740 15TH STREET NW SUITE 700 WASHINGTON, DC 20005	FEDERAL ELECTORAL ACTIVITY	DISTRICT OF COLUMBIA	527		LEAGUE OF CONSERVATION VOTERS	X	
NEW AMERICAN JOBS FUND - 81-3567453 740 15TH STREET NW SUITE 700 WASHINGTON, DC 20005	FEDERAL ELECTORAL ACTIVITY	DISTRICT OF COLUMBIA	527		LEAGUE OF CONSERVATION VOTERS	X	

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

Schedule R (Form 990) 2021

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)	X	
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) LCV VICTORY FUND	B	12,750,000.	FMV
(2)			
(3)			
(4)			
(5)			
(6)			

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

Multiple horizontal lines for supplemental information.