

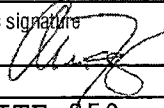
Form **990**  
(Rev. January 2020)  
Department of the Treasury  
Internal Revenue Service

**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)  
▶ Do not enter social security numbers on this form as it may be made public.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047  
**2019**  
Open to Public  
Inspection

<b>A</b> For the 2019 calendar year, or tax year beginning and ending																																		
<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2"><b>C</b> Name of organization <b>LEAGUE OF CONSERVATION VOTERS, INC.</b></td> <td><b>D</b> Employer identification number <b>52-1733698</b></td> </tr> <tr> <td colspan="2">Doing business as</td> <td></td> </tr> <tr> <td>Number and street (or P.O. box if mail is not delivered to street address)</td> <td>Room/suite</td> <td><b>E</b> Telephone number</td> </tr> <tr> <td><b>740 15TH STREET, NW</b></td> <td><b>700</b></td> <td><b>(202) 785-8683</b></td> </tr> <tr> <td colspan="2">City or town, state or province, country, and ZIP or foreign postal code</td> <td><b>G</b> Gross receipts \$ <b>34,413,856.</b></td> </tr> <tr> <td colspan="2"><b>WASHINGTON, DC 20005</b></td> <td><b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</td> </tr> <tr> <td colspan="2"><b>F</b> Name and address of principal officer: <b>GENE KARPINSKI</b></td> <td><b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No</td> </tr> <tr> <td colspan="2"><b>SAME AS C ABOVE</b></td> <td>If "No," attach a list. (see instructions)</td> </tr> <tr> <td colspan="2"><b>I</b> Tax-exempt status: <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) ( <b>4</b> ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527</td> <td><b>H(c)</b> Group exemption number ▶</td> </tr> <tr> <td colspan="2"><b>J</b> Website: ▶ <b>WWW.LCV.ORG</b></td> <td></td> </tr> <tr> <td colspan="2"><b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶</td> <td><b>L</b> Year of formation: <b>1970</b> <b>M</b> State of legal domicile: <b>MD</b></td> </tr> </table>	<b>C</b> Name of organization <b>LEAGUE OF CONSERVATION VOTERS, INC.</b>		<b>D</b> Employer identification number <b>52-1733698</b>	Doing business as			Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	<b>E</b> Telephone number	<b>740 15TH STREET, NW</b>	<b>700</b>	<b>(202) 785-8683</b>	City or town, state or province, country, and ZIP or foreign postal code		<b>G</b> Gross receipts \$ <b>34,413,856.</b>	<b>WASHINGTON, DC 20005</b>		<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>F</b> Name and address of principal officer: <b>GENE KARPINSKI</b>		<b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>SAME AS C ABOVE</b>		If "No," attach a list. (see instructions)	<b>I</b> Tax-exempt status: <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) ( <b>4</b> ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>H(c)</b> Group exemption number ▶	<b>J</b> Website: ▶ <b>WWW.LCV.ORG</b>			<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation: <b>1970</b> <b>M</b> State of legal domicile: <b>MD</b>
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<b>Part I Summary</b>			
<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>SEE PART III, LINE 1</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>24</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>24</b>
	<b>5</b> Total number of individuals employed in calendar year 2019 (Part V, line 2a)	<b>5</b>	<b>196</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>7337</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0.</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, line 39	<b>7b</b>	<b>0.</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b> <b>65,259,075.</b>	<b>Current Year</b> <b>34,098,045.</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	<b>66,696.</b>	<b>54,865.</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>30,683.</b>	<b>47,677.</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>-171,773.</b>	<b>-229,725.</b>
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>65,184,681.</b>	<b>33,970,862.</b>
	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<b>46,282,440.</b>	<b>17,770,615.</b>
<b>Expenses</b>	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	<b>0.</b>	<b>0.</b>
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<b>6,702,655.</b>	<b>7,740,305.</b>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	<b>654,358.</b>	<b>202,038.</b>
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>2,323,275.</b>		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<b>12,835,667.</b>	<b>11,201,878.</b>
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>66,475,120.</b>	<b>36,914,836.</b>
	<b>19</b> Revenue less expenses. Subtract line 18 from line 12	<b>-1,290,439.</b>	<b>-2,943,974.</b>
	<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b> <b>14,154,507.</b>
<b>21</b> Total liabilities (Part X, line 26)		<b>1,902,661.</b>	<b>1,392,594.</b>
<b>22</b> Net assets or fund balances. Subtract line 21 from line 20		<b>12,251,846.</b>	<b>10,409,632.</b>

<b>Part II Signature Block</b>			
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.			
<b>Sign Here</b>	Signature of officer		Date
	<b>PATRICK COLLINS, ASSISTANT TREASURER</b> Type or print name and title		
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>AARON M. FOX</b>	Preparer's signature 	Date <b>11/16/20</b>
	Firm's name ▶ <b>MARCUM LLP</b>	Firm's EIN ▶ <b>11-1986323</b>	Check if self-employed <input type="checkbox"/> PTIN <b>[REDACTED]</b>
	Firm's address ▶ <b>1899 L STREET, NW, SUITE 850</b> <b>WASHINGTON, DC 20036</b>		Phone no. (202) <b>227-4000</b>

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

Form **8879-EO****IRS e-file Signature Authorization  
for an Exempt Organization**

OMB No. 1545-1878

Department of the Treasury  
Internal Revenue Service

For calendar year 2019, or fiscal year beginning \_\_\_\_\_, 2019, and ending \_\_\_\_\_, 20\_\_\_\_

▶ Do not send to the IRS. Keep for your records.  
▶ Go to [www.irs.gov/Form8879EO](http://www.irs.gov/Form8879EO) for the latest information.**2019**

Name of exempt organization

Employer identification number

**LEAGUE OF CONSERVATION VOTERS, INC.****52-1733698**

Name and title of officer

**PATRICK COLLINS  
ASSISTANT TREASURER****Part I** Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here	▶ <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	<b>33,970,862.</b>
2a Form 990-EZ check here	▶ <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here	▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here	▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a Form 8868 check here	▶ <input type="checkbox"/>	b Balance Due (Form 8868, line 3c)	5b	

**Part II** Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2019 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

☒ I authorize **MARCUM LLP**

ERO firm name

to enter my PIN

Enter five numbers, but  
do not enter all zeros

as my signature on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☐ As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature

Date

**11/14/2020****Part III** Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2019 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature

Date

**11/14/20**

**ERO Must Retain This Form - See Instructions**  
**Do Not Submit This Form to the IRS Unless Requested To Do So**

LHA For Paperwork Reduction Act Notice, see instructions.

Form **8879-EO** (2019)

923051 10-03-19

19241114 150872 LCV

2019.05000 LEAGUE OF CONSERVATION VO LCV\_\_\_\_1

**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
- ☒
- 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
- ☒
- 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 \$ 16,080,130. including grants of \$ 7,621,615. ) (Revenue \$ 54,865. )  
**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.**

4b (Code: ) (Expenses \$ 9,612,562. including grants of \$ 7,655,500. ) (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.**

4c (Code: ) (Expenses \$ 7,496,193. including grants of \$ 2,493,500. ) (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.**

- 4d Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses **33,188,885.**

Form 990 (2019)

**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)? If "Yes," complete Schedule A		X
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	X	
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		
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 Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	X	
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 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? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		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? If "Yes," complete Schedule D, Part IV		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V		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? If "Yes," complete Schedule D, Part VI	X	
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		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? If "Yes," complete Schedule D, Part VIII		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? If "Yes," complete Schedule D, Part IX		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	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)? If "Yes," complete Schedule D, Part X	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		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? If "Yes," complete Schedule F, Parts I and IV		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? If "Yes," complete Schedule F, Parts II and IV		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? If "Yes," complete Schedule F, Parts III and IV		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? If "Yes," complete Schedule G, Part I	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? If "Yes," complete Schedule G, Part II	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		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? If "Yes," complete Schedule I, Parts I and II	X	

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	X	
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
<b>26</b> Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II		X
<b>27</b> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV		X
<b>b</b> A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV		X
<b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	X	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
<b>b</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)? If "Yes," complete Schedule R, Part V, line 2	X	
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		
<b>37</b> 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? If "Yes," complete Schedule R, Part VI		X
<b>38</b> Did the organization complete Schedule O and provide explanations in 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
<b>1a</b> Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
<b>c</b> 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)

	Yes	No
<b>2a</b> Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2a 196		
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	<input checked="" type="checkbox"/>	
<b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year?		<input checked="" type="checkbox"/>
<b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		
<b>4a</b> At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		<input checked="" type="checkbox"/>
<b>b</b> If "Yes," enter the name of the foreign country		
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		<input checked="" type="checkbox"/>
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		<input checked="" type="checkbox"/>
<b>c</b> If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
<b>6a</b> Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	<input checked="" type="checkbox"/>	
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<input checked="" type="checkbox"/>	
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b> Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	<input checked="" type="checkbox"/>	
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided?	<input checked="" type="checkbox"/>	
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8822?		<input checked="" type="checkbox"/>
<b>d</b> If "Yes," indicate the number of Forms 8822 filed during the year	7d	
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		<input checked="" type="checkbox"/>
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		<input checked="" type="checkbox"/>
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
<b>8 Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
<b>9 Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b> Did the sponsoring organization make any taxable distributions under section 4966?		
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
<b>10 Section 501(c)(7) organizations.</b> Enter:		
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12	10a	
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
<b>11 Section 501(c)(12) organizations.</b> Enter:		
<b>a</b> Gross income from members or shareholders	11a	
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b> Is the organization licensed to issue qualified health plans in more than one state?		
<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.		
<b>b</b> Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
<b>c</b> Enter the amount of reserves on hand	13c	
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year?		<input checked="" type="checkbox"/>
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O		
<b>15</b> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?		<input checked="" type="checkbox"/>
If "Yes," see instructions and file Form 4720, Schedule N.		
<b>16</b> Is the organization an educational institution subject to the section 4968 excise tax on net investment income?		<input checked="" type="checkbox"/>
If "Yes," complete Form 4720, Schedule O.		

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**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

☒**Section A. Governing Body and Management**

	1a	1b	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	24			
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		24		
b Enter the number of voting members included on line 1a, above, who are independent				
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3			X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6 Did the organization have members or stockholders?	6	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?	7a	X		
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?	8a	X		
b Each committee with authority to act on behalf of the governing body?	8b	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	9			X

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

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?		X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in 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?		
a The organization's CEO, Executive Director, or top management official	X	
b Other officers or key employees of the organization		X
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

**Section C. Disclosure**

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 ☒ 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, NO. 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 instructions for definition of "key employee."
  - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
  - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
  - List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See instructions for the order in which to list the persons above.

☐ 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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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	28.00 2.00			X				203,174.	0.	18,540.
(2) TIERNAN SITTENFELD SENIOR VICE PRESIDENT	37.00 0.00				X			169,056.	0.	25,254.
(3) VINCENT WISHRAD SENIOR VICE PRESIDENT	38.00 0.00				X			154,796.	0.	20,499.
(4) ROBERT MAYSMITH SENIOR VICE PRESIDENT	34.00 0.00				X			151,819.	0.	23,064.
(5) RICHARD THOMAS SENIOR VICE PRESIDENT	22.00 0.00				X			124,384.	0.	16,401.
(6) MICHAEL PALAMUSO SENIOR VICE PRESIDENT	38.00 0.00				X			119,164.	0.	13,947.
(7) CAROL BROWNER CHAIR	2.00 2.00	X		X				0.	0.	0.
(8) SHERWOOD L. BOEHLERT 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) BRIAN DEESE 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) STEVE HOLTZMAN DIRECTOR	2.00 2.00	X						0.	0.	0.
(17) MICHAEL KIESCHNICK 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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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) ROGER KIM DIRECTOR	2.00 2.00	X						0.	0.	0.
(19) MARK MAGANA DIRECTOR	2.00 2.00	X						0.	0.	0.
(20) MOLLY MCUSIC DIRECTOR	2.00 2.00	X						0.	0.	0.
(21) GREG MOGA DIRECTOR	2.00 2.00	X						0.	0.	0.
(22) REUBEN MUNGER DIRECTOR	2.00 2.00	X						0.	0.	0.
(23) SCOTT NATHAN DIRECTOR	2.00 2.00	X						0.	0.	0.
(24) WILLIAM J. ROBERTS DIRECTOR	2.00 2.00	X						0.	0.	0.
(25) LARRY ROCKEFELLER DIRECTOR	2.00 2.00	X						0.	0.	0.
(26) KERRY SCHUMANN DIRECTOR	2.00 2.00	X						0.	0.	0.
<b>1b Subtotal</b>								922,393.	0.	117,705.
<b>c Total from continuation sheets to Part VII, Section A</b>								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>								922,393.	0.	117,705.

**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
<b>3</b> Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

**Section B. Independent Contractors**

**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
RIVERSIDE ORGANIZATION LLC 10 FIDDLER POND LOOP, BEAUFORT, SC 22907	DATA ANALYTICS	392,525.
CHONG KOSTER LLC, 1640 RHODE ISLAND AVENUE, NW, SUITE 600, WASHINGTON, DC 2003	DIGITAL MEDIA COMMUNICATIONS	273,757.
CATALIST LLC, 1090 VERMONT AVENUE, NW, SUITE 300, WASHINGTON, DC 20005	DATA ANALYTICS	253,177.
GROUP NINE MEDIA INC 568 BROADWAY, FLOOR 10, NEW YORK, NY 10012	DIGITAL MEDIA COMMUNICATIONS	250,000.
FM DIRECT LLC, 7311 GROVE ROAD, UNIT C, FREDERICK, MD 21704	DIRECT MAIL MARKETING	247,355.

**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 **15**

SEE PART VII, SECTION A CONTINUATION SHEETS

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[illegible]

**Part VIII Statement of Revenue**Check if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns	<b>1a</b>					
	<b>b</b> Membership dues	<b>1b</b>	45,140.				
	<b>c</b> Fundraising events	<b>1c</b>	434,446.				
	<b>d</b> Related organizations	<b>1d</b>					
	<b>e</b> Government grants (contributions)	<b>1e</b>					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	33,618,459.				
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$				
	<b>h Total.</b> Add lines 1a-1f			34,098,045.			
<b>Program Service Revenue</b>	<b>2 a</b> PROGRAM REVENUE	<b>Business Code</b>					
	<b>b</b>	900099		54,865.	54,865.		
	<b>c</b>						
	<b>d</b>						
	<b>e</b>						
	<b>f</b> All other program service revenue						
	<b>g Total.</b> Add lines 2a-2f			54,865.			
	<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)			1,533.		
<b>4</b> Income from investment of tax-exempt bond proceeds							
<b>5</b> Royalties				41,563.			41,563.
<b>6 a</b> Gross rents		<b>6a</b>	(i) Real (ii) Personal				
<b>b</b> Less: rental expenses		<b>6b</b>					
<b>c</b> Rental income or (loss)		<b>6c</b>					
<b>d</b> Net rental income or (loss)							
<b>7 a</b> Gross amount from sales of assets other than inventory		<b>7a</b>	(i) Securities (ii) Other				
<b>b</b> Less: cost or other basis and sales expenses		<b>7b</b>					
<b>c</b> Gain or (loss)		<b>7c</b>					
<b>d</b> Net gain or (loss)				46,144.			46,144.
<b>8 a</b> Gross income from fundraising events (not including \$ 434,446. of contributions reported on line 1c). See Part IV, line 18		<b>8a</b>		116,279.			
<b>b</b> Less: direct expenses		<b>8b</b>		395,335.			
<b>c</b> Net income or (loss) from fundraising events				-279,056.			-279,056.
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19		<b>9a</b>					
<b>b</b> Less: direct expenses		<b>9b</b>					
<b>c</b> Net income or (loss) from gaming activities							
<b>10 a</b> Gross sales of inventory, less returns and allowances		<b>10a</b>					
<b>b</b> Less: cost of goods sold	<b>10b</b>						
<b>c</b> Net income or (loss) from sales of inventory							
<b>Miscellaneous Revenue</b>	<b>11 a</b> MISCELLANEOUS REVENUE	<b>Business Code</b>					
	<b>b</b>	900099		7,768.			7,768.
	<b>c</b>						
	<b>d</b> All other revenue						
	<b>e Total.</b> Add lines 11a-11d			7,768.			
	<b>12 Total revenue.</b> See instructions			33,970,862.	54,865.	0.	-182,048.

**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	17,770,615.	17,770,615.		
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	221,714.	79,861.	126,444.	15,409.
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	6,122,356.	5,297,482.	530,104.	294,770.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	174,911.	152,092.	14,258.	8,561.
9 Other employee benefits	771,725.	658,295.	75,143.	38,287.
10 Payroll taxes	449,599.	380,606.	46,571.	22,422.
11 Fees for services (nonemployees):				
a Management				
b Legal	209,590.		209,590.	
c Accounting	98,388.	25,850.	71,399.	1,139.
d Lobbying				
e Professional fundraising services. See Part IV, line 17	202,038.			202,038.
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.)	2,899,089.	2,862,732.	36,357.	
12 Advertising and promotion	1,802,599.	1,749,283.	6,337.	46,979.
13 Office expenses	2,437,160.	1,258,899.	30,250.	1,148,011.
14 Information technology	1,533,956.	1,008,636.	17,186.	508,134.
15 Royalties				
16 Occupancy	569,889.	513,157.	44,525.	12,207.
17 Travel	883,873.	803,202.	73,666.	7,005.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	296,980.	296,980.		
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	160,415.	135,977.	16,439.	7,999.
23 Insurance	13,411.	11,367.	1,375.	669.
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 <b>STAFF TRAINING</b>	274,100.	175,023.	91,006.	8,071.
b <b>LICENSES AND FEES</b>	22,428.	8,828.	12,026.	1,574.
c				
d				
e All other expenses				
25 <b>Total functional expenses.</b> Add lines 1 through 24e	36,914,836.	33,188,885.	1,402,676.	2,323,275.
26 <b>Joint costs.</b> 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)	7,739,868.	3,433,783.	1,659,656.	2,646,429.

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	8,627,930.	<b>1</b>	5,597,836.
	<b>2</b> Savings and temporary cash investments .....	2,835,728.	<b>2</b>	2,873,357.
	<b>3</b> Pledges and grants receivable, net .....	1,628,100.	<b>3</b>	1,253,171.
	<b>4</b> Accounts receivable, net .....	570,877.	<b>4</b>	827,070.
	<b>5</b> 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 .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....	27,815.	<b>8</b>	15,505.
	<b>9</b> Prepaid expenses and deferred charges .....	227,819.	<b>9</b>	257,022.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 1,275,167.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 359,298.	<b>10c</b>	915,869.
	<b>11</b> Investments - publicly traded securities .....		<b>11</b>	
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	44,150.	<b>15</b>	62,396.
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	14,154,507.	<b>16</b>	11,802,226.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	1,327,688.	<b>17</b>	378,502.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> 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 .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> 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 .....	574,973.	<b>25</b>	1,014,092.
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 .....	1,902,661.	<b>26</b>	1,392,594.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	5,799,611.	<b>27</b>	10,199,494.
	<b>28</b> Net assets with donor restrictions .....	6,452,235.	<b>28</b>	210,138.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> <b>Total net assets or fund balances</b> .....	12,251,846.	<b>32</b>	10,409,632.
<b>33</b> <b>Total liabilities and net assets/fund balances</b> .....	14,154,507.	<b>33</b>	11,802,226.	

Form 990 (2019)

**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	33,970,862.
2	Total expenses (must equal Part IX, column (A), line 25)	2	36,914,836.
3	Revenue less expenses. Subtract line 2 from line 1	3	-2,943,974.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	12,251,846.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	1,101,760.
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	10,409,632.

**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 in 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 (2019)

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

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2019**

**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](http://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**

**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 ..... ▶ \$ **9,195,003.**  
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 ..... ▶ \$ **2,473,003.**  
2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... ▶ \$ **6,722,000.**  
3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ..... ▶ \$ **9,195,003.**  
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-
CHISPA AZ PAC	PHOENIX, AZ 85009	82-4798899	185,000.	0.
CONSERVATION COLORADO VICTORY FUND	DENVER, CO 80202	81-0903344	80,000.	0.
CONSERVATION VOTERS OF PENNSYLVANIA	PHILADELPHIA, PA 19102	27-0800179	110,000.	0.
LCV VICTORY FUND	WASHINGTON, DC 20005	27-3145176	5,000,000.	0.
NEW JERSEY LEAGUE OF CONSERVATION P	TRENTON, NJ 08540	45-3503652	7,200.	0.
NEW JERSEY LEAGUE OF CONSERVATION V	TRENTON, NJ 08540	46-3733241	12,800.	0.

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

Schedule C (Form 990 or 990-EZ) 2019

LHA

**SEE PART IV FOR CONTINUATION**

932041 11-26-19

**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.			
<b>If the amount on line 1e, column (a) or (b) is:</b>	<b>The lobbying nontaxable amount is:</b>		
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? <input type="checkbox"/> Yes <input type="checkbox"/> 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) 2016	(b) 2017	(c) 2018	(d) 2019	(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 or 990-EZ) 2019



**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
<b>1</b> 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:			
<b>a</b> Volunteers?			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
<b>c</b> Media advertisements?			
<b>d</b> Mailings to members, legislators, or the public?			
<b>e</b> Publications, or published or broadcast statements?			
<b>f</b> Grants to other organizations for lobbying purposes?			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body?			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
<b>i</b> Other activities?			
<b>j</b> Total. Add lines 1c through 1i			
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
<b>d</b> 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
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members?	X	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?		X
<b>3</b> 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."

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

**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

Schedule C (Form 990 or 990-EZ) 2019

**Part IV** Supplemental Information (continued)

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

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

CHISPA AZ PAC

1943 W ADAMS STREET PHOENIX, AZ 85009

CONSERVATION COLORADO VICTORY FUND

1536 WYNKOOP STREET, SUITE 4C DENVER, CO 80202

CONSERVATION VOTERS OF PENNSYLVANIA VICTORY FUND

1429 WALNUT STREET, SUITE 400 PHILADELPHIA, PA 19102

LCV VICTORY FUND

740 15TH STREET, NW, SUITE 700 WASHINGTON, DC 20005

NEW JERSEY LEAGUE OF CONSERVATION PAC

707 STATE ROAD, SUITE 223 TRENTON, NJ 08540

NEW JERSEY LEAGUE OF CONSERVATION VOTERS VICTORY FUND

707 STATE ROAD, SUITE 223 TRENTON, NJ 08540

## PART I-C CONTINUATION:

THE OREGON LEAGUE OF CONSERVATION VOTERS PAC

133 SW 2ND AVE, SUITE 200 PORTLAND, OR 97204

EIN: 93-0961667 COL (D) AMOUNT: 25000. COL (E) AMOUNT: 0.

VIRGINIA LCV PAC

**Part IV** Supplemental Information (continued)

100 WEST FRANKLIN, SUITE 102 RICHMOND, VA 23220

EIN: 54-1973929 COL (D) AMOUNT: 1252000. COL (E) AMOUNT: 0.

WISCONSIN LEAGUE OF CONSERVATION VOTERS INC

133 S BUTLER STREET, SUITE 320 MADISON, WI 53703

EIN: 39-2018854 COL (D) AMOUNT: 50000. COL (E) AMOUNT: 0.

**SCHEDULE D**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

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

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2019**  
Open to Public  
Inspection

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.

	(a) Donor advised funds	(b) Funds and other accounts
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?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (for example, recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

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.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization 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? ☐ Yes ☐ No

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)? ☐ Yes ☐ No

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.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

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

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$

(ii) Assets included in Form 990, Part X ▶ \$

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 ▶ \$

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Schedule D (Form 990) 2019

932051 10-02-19

**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 d ☐ Loan or exchange program
- b ☐ Scholarly research e ☐ Other \_\_\_\_\_
- c ☐ Preservation for future generations
- 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? | 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		755,566.		755,566.
d Equipment		384,746.	266,939.	117,807.
e Other		134,855.	92,359.	42,496.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				915,869.

Schedule D (Form 990) 2019

**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	1,014,092.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ 1,014,092.

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 ☒

Schedule D (Form 990) 2019

**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	45,639,502.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	11,668,640.
e	Add lines 2a through 2d	2e	11,668,640.
3	Subtract line 2e from line 1	3	33,970,862.
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	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	33,970,862.

**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	34,567,193.
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	2,852,357.
e	Add lines 2a through 2d	2e	2,852,357.
3	Subtract line 2e from line 1	3	31,714,836.
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	5,200,000.
c	Add lines 4a and 4b	4c	5,200,000.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	36,914,836.

**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, 2019, 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 16,473,305.

SPECIAL EVENT EXPENSES NETTED AGAINST INCOME ON PART VIII,

LINE 8B 395,335.

GRANTS TO AFFILIATED ORGANIZATIONS -5,200,000.

TOTAL TO SCHEDULE D, PART XI, LINE 2D 11,668,640.

**Part XIII** Supplemental Information (continued)

## PART XII, LINE 2D - OTHER ADJUSTMENTS:

EXPENSES OF AFFILIATED ORGANIZATIONS 2,457,022.

SPECIAL EVENT EXPENSES NETTED AGAINST INCOME ON PART VIII,

LINE 8B 395,335.

TOTAL TO SCHEDULE D, PART XII, LINE 2D 2,852,357.

## PART XII, LINE 4B - OTHER ADJUSTMENTS:

GRANTS TO AFFILIATED ORGANIZATIONS 5,200,000.



Department of the Treasury  
Internal Revenue Service

### Supplemental Information Regarding Fundraising or Gaming Activities

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

▶ **Attach to Form 990 or Form 990-EZ.**

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

# 2019

## Open to Public Inspection

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	ONLINE ADVOCACY		X	0.	220,987.	-220,987.
GSI INC. TELEMARKETING - 300 N SEPULVEDA, EL SEGUNDO, CA	TELE-ADVOCACY		X	0.	132,341.	-132,341.
CHAPMAN, CUBINE, ADAMS AND HUSSEY - 1600 WILSON	MAIL CONSULTING		X	0.	415,163.	-415,163.
TELEFUND - P.O. BOX 2366, DENVER, CO 80201	TELE-ADVOCACY		X	0.	269,819.	-269,819.
FM DIRECT LLC - 7311 GROVE ROAD, SUITE V, FREDERICK, MD	MAIL CONSULTING		X	0.	247,355.	-247,355.
GRASSROOTS CAMPAIGNS INC - 1888 N. SHERMAN STREET, SUITE	CANVASSING		X	0.	35,862.	-35,862.
<b>Total</b>					1,321,527.	-1,321,527.

- 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

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

Schedule G (Form 990 or 990-EZ) 2019

SEE PART IV FOR CONTINUATIONS

932081 09-11-19

51

18211117 150872 LCV

2019.05000 LEAGUE OF CONSERVATION VO LCV 1

**COPY**

**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 (add col. (a) through col. (c))
	DC DINNER (event type)	NY DINNER (event type)	NONE (total number)	
<b>Revenue</b>				
1 Gross receipts .....	383,725.	167,000.		550,725.
2 Less: Contributions .....	301,653.	132,793.		434,446.
3 Gross income (line 1 minus line 2) .....	82,072.	34,207.		116,279.
<b>Direct Expenses</b>				
4 Cash prizes .....				
5 Noncash prizes .....				
6 Rent/facility costs .....	234,770.	115,550.		350,320.
7 Food and beverages .....				
8 Entertainment .....				
9 Other direct expenses .....	38,360.	6,656.		45,016.
10 Direct expense summary. Add lines 4 through 9 in column (d) .....				395,336.
11 Net income summary. Subtract line 10 from line 3, column (d) .....				-279,057.

**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))
<b>Revenue</b>				
1 Gross revenue .....				
<b>Direct Expenses</b>				
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&amp;R STRATEGIC SERVICES

(I) ADDRESS OF FUNDRAISER:

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

(I) NAME OF FUNDRAISER: GSI INC. TELEMARKETING

(I) ADDRESS OF FUNDRAISER: 300 N SEPULVEDA, EL SEGUNDO, CA 90245

**Part IV** Supplemental Information *(continued)*

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

(I) ADDRESS OF FUNDRAISER:

1600 WILSON BOULEVARD, SUITE 300, ARLINGTON, VA 22209

(I) NAME OF FUNDRAISER: FM DIRECT LLC

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

(I) NAME OF FUNDRAISER: GRASSROOTS CAMPAIGNS INC

(I) ADDRESS OF FUNDRAISER:

1888 N. SHERMAN STREET, SUITE 210, DENVER, CO 80203, DENVER, CO 80203

**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](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2019**

**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.

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section (if applicable)	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of noncash assistance	<b>(h)</b> Purpose of grant or assistance
CALIFORNIA LEAGUE OF CONSERVATION VOTERS - 350 FRANK H OGAWA PLAZA #100 - OAKLAND, CA 94612	94-3169564	501(C)(4)	108,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
CENTER FOR VOTER INFORMATION 1707 L STREET, NW, SUITE 300 WASHINGTON, DC 20036	03-0554750	501(C)(4)	25,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
CHISPA AZ PAC 1943 W ADAMS STREET PHOENIX, AZ 85009	82-4798899	527	185,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
CONNECTICUT LEAGUE OF CONSERVATION VOTERS INC - 535 FARMINGTON AVENUE SUITE 201 - HARTFORD, CT 06105	06-1582273	501(C)(4)	14,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
CONSERVATION ALABAMA 853 DAUPHIN STREET SUITE C MOBILE, AL 36602	63-1221685	501(C)(4)	19,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
CONSERVATION COLORADO 1536 WYNKOOP STREET SUITE 4C DENVER, CO 80202	30-0037131	501(C)(4)	630,500.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION

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

**3.**

**3** Enter total number of other organizations listed in the line 1 table .....

**40.**

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

Schedule I (Form 990) (2019)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONSERVATION COLORADO VICTORY FUND 1536 WYNKOOP STREET SUITE 4C DENVER, CO 80202	81-0903344	527	80,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
CONSERVATION MINNESOTA VOTER CENTER INC - 1101 WEST RIVER PARKWAY SUITE 250 - MINNEAPOLIS, MN 55415	41-1949625	501(C)(4)	230,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
CONSERVATION VOTERS FOR IDAHO INC 413 WEST IDAHO STREET SUITE 100 BOISE, ID 83702	72-1599019	501(C)(4)	74,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
CONSERVATION VOTERS NEW MEXICO 200 WEST DEVARGAS STREET #1 SANTA FE, NM 87501	20-0016255	501(C)(4)	108,375.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
CONSERVATION VOTERS OF PENNSYLVANIA - 1429 WALNUT STREET SUITE 400 - PHILADELPHIA, PA 19102	27-0800179	501(C)(4)	37,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
CONSERVATION VOTERS OF PENNSYLVANIA VICTORY FUND - 1429 WALNUT STREET SUITE 400 - PHILADELPHIA, PA 19102	27-0800179	501(C)(4)	110,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
CONSERVATION VOTERS OF SOUTH CAROLINA - 701 WHALEY STREETSUITE 207 - COLUMBIA, SC 29201	58-2420153	501(C)(4)	394,500.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
ENVIRONMENTAL LEAGUE OF MASSACHUSETTS ACTION FUND - 15 COURT SQUARE SUITE 1000 - BOSTON, MA 02108	04-2024004	501(C)(4)	77,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
FLORIDA CONSERVATION VOTERS 1700 N MONROE ST 11-286 TALLAHASSEE, FL 32303	46-0560492	501(C)(4)	114,750.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GEORGIA CONSERVATION VOTERS 1530 DEKALB AVE NE SUITE A ATLANTA, GA 30307	58-2525235	501(C)(4)	69,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
ILLINOIS ENVIRONMENTAL COUNCIL 520 E CAPITOL AVE AVE SPRINGFIELD, IL 62701	37-0989990	501(C)(4)	219,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
LCV VICTORY FUND 740 15TH STREET, NW, SUITE 700 WASHINGTON, DC 20005	27-3145176	527	5,000,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
MAINE CONSERVATION VOTERS OLD FEDERAL BLDG 295 WATER ST #9 AUGUSTA, ME 04330	01-0536637	501(C)(4)	200,315.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
MARYLAND LEAGUE OF CONSERVATION 30 WEST ST SUITE C ANNAPOLIS, MD 21401	52-2122715	501(C)(4)	35,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
MICHIGAN LEAGUE OF CONSERVATION VOTERS INC - 3029 MILLER ROAD - ANN ARBOR, MI 48103	38-3481677	501(C)(4)	753,970.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
MONTANA CONSERVATION VOTERS INC 3318 3RD AVE N SUITE 208 BILLINGS, MT 59101	81-0521030	501(C)(4)	108,955.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
NEBRASKA LEAGUE OF CONSERVATION VOTERS - 2436 N 48TH STREET - LINCOLN, NE 68504	03-0402828	501(C)(4)	310,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
NEVADA CONSERVATION LEAGUE 817 SOUTH MAIN STREET LAS VEGAS, NV 89101	88-0497866	501(C)(4)	371,500.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW JERSEY CONSERVATION VOTERS VF 707 STATE ROAD SUITE 223 TRENTON, NJ 08540	46-3733241	527	12,800.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
NEW JERSEY LEAGUE OF CONSERVATION VOTERS INC - 707 STATE ROAD SUITE 223 - TRENTON, NJ 08540	27-2577440	501(C)(4)	109,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
NEW JERSEY LEAGUE OF CONSERVATION VOTERS PAC - 707 STATE ROAD SUITE 223 - TRENTON, NJ 08540	45-3503652	527	7,200.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
NORTH CAROLINA LEAGUE OF CONSERVATION VOTERS INC - P.O.BOX 12671 - RALEIGH, NC 27605	56-0991894	501(C)(4)	303,500.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
NRDC ACTION FUND 1152 15TH ST NW SUITE 300 WASHINGTON, DC 20005	13-3976062	501(C)(4)	1,150,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
OHIO ENVIRONMENTAL COUNCIL 1145 CHESAPEAKE AVE SUITE I COLUMBUS, OH 43212	31-0805578	501(C)(3)	50,500.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
OHIO ENVIRONMENTAL COUNCIL ACTION FUND - 1145 CHESAPEAKE AVE SUITE I - COLUMBUS, OH 43212	47-4903967	501(C)(4)	219,250.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
SUSTAINABLE MARKETS FOUNDATION 45 WEST 36TH STREET NEW YORK, NY 10018	13-4188834	501(C)(3)	300,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
THE ALASKA CENTER 921 W. 6TH AVENUE, SUITE 200 ANCHORAGE, AK 99501	92-0090065	501(C)(4)	52,500.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION

Schedule I (Form 990)



**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE NEVADA INDEPENDENT C/O NEVADA NEWS BUREAU - 7455 ARROYO CROSSING PARKWAY, SUITE 220 - LAS VEGAS, NV 89113	27-3192716	501(C)(3)	25,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
THE NEW YORK LEAGUE OF CONSERVATION VOTERS INC - 30 BROAD STREET 30TH FLOOR - NEW YORK, NY 10004	11-3095033	501(C)(4)	164,875.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
THE OREGON LEAGUE OF CONSERVATION VOTERS - 321 SW 4TH AVE SUITE 600 - PORTLAND, OR 97204	93-1176721	501(C)(4)	127,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
THE OREGON LEAGUE OF CONSERVATION VOTERS PAC - 133 SW 2ND AVE SUITE 200 - PORTLAND, OR 97204	93-0961667	527	25,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
THE PARTNERSHIP PROJECT ACTION FUND - P.O.BOX 65826 - WASHINGTON, DC 20035	81-0606786	501(C)(4)	3,000,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
VERMONT CONSERVATION VOTERS INC 9 BAILEY AVENUE MONTPELIER, VT 05602	22-2543128	501(C)(4)	14,000.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
VIRGINIA LCV PAC 100 WEST FRANKLIN SUITE 102 RICHMOND, VA 23220	54-1973929	527	1,252,500.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
VIRGINIA LEAGUE OF CONSERVATION VOTERS - 100 W. FRANKLIN ST SUITE 102 - RICHMOND, VA 23220	54-1973929	501(C)(4)	671,250.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION
WASHINGTON CONSERVATION VOTERS 1402 THIRD AVE SUITE 1400 SEATTLE, WA 98101	91-1548791	501(C)(4)	447,375.	0.			ENVIRONMENTAL EDUCATION, CAPACITY BUILDING, AND EDUCATION

Schedule I (Form 990)



**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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2019**

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
1b		
2		
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) 2019

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.

[illegible]

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Blank lined paper with horizontal ruling lines.

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2019**

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 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  
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

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

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

932211 09-06-19

Name of the organization

LEAGUE OF CONSERVATION VOTERS, INC.

Employer identification number

52-1733698

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 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 APRIL 2018.



Name of the organization

LEAGUE OF CONSERVATION VOTERS, INC.

Employer identification number

52-1733698

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 XII, LINE 2C:

THE LEAGUE OF CONSERVATION VOTERS IS AUDITED ON A CONSOLIDATED BASIS BY  
 AN INDEPENDENT AUDITOR ALONG WITH ITS FOUR SEGREGATED FUNDS: LCV  
 POLITICAL ENGAGEMENT FUND, LCV VICTORY FUND, THE LEAGUE OF CONSERVATION  
 VOTERS ACTION FUND, AND THE NEW AMERICAN JOBS FUND, 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.

FORM 990, PART VII, SECTION A:

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:

Name of the organization

LEAGUE OF CONSERVATION VOTERS, INC.

Employer identification number

52-1733698

GENE KARPINSKI: 12 HOURS PER WEEK; \$88,964 COMPENSATION; \$8,119 OTHER

## COMPENSATION

TIERNAN SITTENFELD: 3 HOURS PER WEEK; \$15,639 COMPENSATION; \$2,296

## OTHER COMPENSATION

RICHARD THOMAS: 18 HOURS PER WEEK; \$97,556 COMPENSATION; \$12,863 OTHER

## COMPENSATION

VINCENT WISHRAD: 2 HOURS PER WEEK; \$8,960 COMPENSATION; \$1,187 OTHER

## COMPENSATION

ROBERT MAYSMITH: 6 HOURS PER WEEK; \$27,296 COMPENSATION; \$4,147 OTHER

## COMPENSATION

MICHAEL PALAMUSO: 2 HOURS PER WEEK; \$6,651 COMPENSATION; \$778 OTHER

## COMPENSATION

**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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2019**

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Name of the organization

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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) 2019

932222  
04-01-19

### 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.

[illegible]

## 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.

[illegible]

**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?**a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity**b** Gift, grant, or capital contribution to related organization(s)**c** Gift, grant, or capital contribution from related organization(s)**d** Loans or loan guarantees to or for related organization(s)**e** Loans or loan guarantees by related organization(s)**f** Dividends from related organization(s)**g** Sale of assets to related organization(s)**h** Purchase of assets from related organization(s)**i** Exchange of assets with related organization(s)**j** Lease of facilities, equipment, or other assets to related organization(s)**k** Lease of facilities, equipment, or other assets from related organization(s)**l** Performance of services or membership or fundraising solicitations for related organization(s)**m** Performance of services or membership or fundraising solicitations by related organization(s)**n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)**o** Sharing of paid employees with related organization(s)**p** Reimbursement paid to related organization(s) for expenses**q** Reimbursement paid by related organization(s) for expenses**r** Other transfer of cash or property to related organization(s)**s** Other transfer of cash or property from related organization(s)

	Yes	No
<b>1a</b>		X
<b>1b</b>	X	
<b>1c</b>		X
<b>1d</b>		X
<b>1e</b>		X
<b>1f</b>		X
<b>1g</b>		X
<b>1h</b>		X
<b>1i</b>		X
<b>1j</b>		X
<b>1k</b>		X
<b>1l</b>		X
<b>1m</b>		X
<b>1n</b>		X
<b>1o</b>		X
<b>1p</b>		X
<b>1q</b>	X	
<b>1r</b>		X
<b>1s</b>		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) CHISPA ARIZONA PAC	B	185,000.	ACTUAL
(2) LCV VICTORY FUND	B	5,000,000.	ACTUAL
(3)			
(4)			
(5)			
(6)			

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

[illegible]

**Part VII** Supplemental Information

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

Lined area for supplemental information.