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.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

~	I OI U	e 2010 calendar year, or tax year beginning and endin	<u>9</u>			
В	Check i	No.	DE	Employer ide	ntificati	ion number
		INTERNATIONAL CENTER FOR NOT-FOR-PROFIT				
Ļ	Addi					
L	Nam chan	ge I Doing business as		52-	181827	'3
L	Initia		suite E 7	Telephone nu	mber	
L.	Final retur	/ 1126 16TH STREET, N.W. 400		(20	2)452-	
	term		G	iross receipts \$		8,365,523.
L	Amer	WASHINGTON, DC 20030	H(a)	ls this a gro	•	
L	Appl tion pend	F Name and address of principal officer:DOUGLAS RUTZEN	ŀ	for subordir	ates?	Yes X No
		SAME AS C ABOVE	H(b)			ed? Yes No
1	Tax-ex	empt status: 🗶 501(c)(3) 🔲 501(c) ()◀ (insert no.) 🔲 4947(a)(1) or 📗	527			(see instructions)
		te: WWW.ICNL.ORG		Group exem		
			Year of form	nation: 1992	M Sta	ate of legal domicile: DE
LP	art I				-	
ø	1	Briefly describe the organization's mission or most significant activities: ENABLING A	LEGAL EN	VIRONMENT	FOR	
Activities & Governance	1	CIVIL SOCIETY, FREEDOM OF ASSOCIATION & PUBLIC PARTICIPATION.				
Ę	2	Check this box if the organization discontinued its operations or disposed of				s.
Š	3	Number of voting members of the governing body (Part VI, line 1a)			3	8
শ্ব	4	Number of independent voting members of the governing body (Part VI, line 1b)			4	8
ēs	5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)			5	. 30
ξ	6	Total number of volunteers (estimate if necessary)			6	0
젛		Total unrelated business revenue from Part VIII, column (C), line 12			7a	0.
_	b	Net unrelated business taxable income from Form 990-T, line 34			7b	0.
				rior Year		Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)		8,206,7	_	7,299,578.
	9	Program service revenue (Part VIII, line 2g)		339,2		297,013.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		16,5		30,953.
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		16,5		1,569.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		8,579,1		7,629,113.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		5,149,6		3,092,646.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	<u></u>		0.	0.
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		2,603,7		2,741,108.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)			0.	0,
Ř	b	Total fundraising expenses (Part IX, column (D), line 25)	TO STATE	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		
ш	177	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		4,091,5		3,749,380.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		11,844,8	_	9,583,134.
	19	Revenue less expenses. Subtract line 18 from line 12		-3,265,7		-1,954,021.
Assets or Balances			Beginnin	g of Current Y		End of Year
55 0	20	Total assets (Part X, line 16)	<u> </u>	13,592,5		10,918,661.
est Ger	21	Total liabilities (Part X, line 26)		1,131,9		384,123.
<u> </u>		Net assets or fund balances. Subtract line 21 from line 20		12,460,5	83.	10,534,538.
		Signature Block				
		ities of perjury, I declare that I have examined this return, including accompanying schedules and sta			or my kno	wieage and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which preparer	oarer nas an	- 77		- (6)
		Signature of officer party		Date	22	12017
Sig		V V		Outo		
Her	е	DOUGLAS RUTZEN, PRESIDENT Type or print name and title				
			Date	1		PTIN
Ď.		Print/Type preparer's name Preparer's signature	1	Check		
Paid		SUBRINA WOOD, CPA Subrina L Wood	6/20/	1	p.07.20	200365899
	parer	Firm's name CALIBRE CPA GROUP PLLC		Firm's EIN	47	-0900880
Use	Only	Firm's address > 7501 WISCONSIN AVENUE, SUITE 1200 WEST				
		BETHESDA, MD 20814		Phone no.	202-331	
May	the li	RS discuss this return with the preparer shown above? (see instructions)				X Yes No

INTERNATIONAL CENTER FOR NOT-FOR-PROFIT

For	m 990 (2016) LAW, INC.	52-18182/3 Page 2
P	art III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	L_
1	Briefly describe the organization's mission: THE INTERNATIONAL CENTER FOR NOT-FOR-PROFIT LAW (ICNL) IS AN	
	INTERNATIONAL NOT-FOR-PROFIT ORGANIZATION THAT PROMOTES AN ENABLING	
	LEGAL ENVIRONMENT FOR CIVIL SOCIETY, FREEDOMS OF ASSOCIATION AND	
	ASSEMBLY, AND PUBLIC PARTICIPATION AROUND THE WORLD.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
_	prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as	measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	rs, the total expenses, and
	revenue, if any, for each program service reported.	
4a		1e\$ 297,013.
	ICNL IS A RESOURCE ON LEGAL ISSUES AFFECTING CIVIL SOCIETY,	
	PHILANTHROPY, AND CIVIC PARTICIPATION, IN 2016, ICNL UNDERTOOK PROJECTS	
	IN ASIA, AFRICA, THE AMERICAS, THE MIDDLE EAST, EUROPE AND EURASIA.	
	ACTIVITIES INCLUDE TECHNICAL ASSISTANCE ON THE ENABLING ENVIRONMENT FOR	
	CIVIL SOCIETY, CONFERENCES, RESEARCH AND PUBLICATIONS, UNIVERSITY INITIATIVES, AND A PUBLICLY AVAILABLE ON-LINE LIBRARY OF NGO LEGAL	
	MATERIALS, IN MULTIPLE LANGUAGES.	
	MAISTING, IN MUDITING DANGUNGES,	
		-
4b	(Code:) (Expenses \$	e\$)
	· · · · · · · · · · · · · · · · · · ·	
4c	(Code:) (Expenses \$ Including grants of \$) (Revenue	
40	(Code: \(\frac{1}{2}\) (Expenses \$\frac{1}{2}\) (Nevertee)	,,,
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)
<u>4e</u>	Total program service expenses ▶ 7,869,889.	Form 990 (2016)

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Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A х Is the organization required to complete Schedule B, Schedule of Contributors 2 X Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect X during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III X 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to х provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 Х the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete x 8 Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 9 10 Did the organization, directly or through a related organization, hold assets In temporarily restricted endowments, permanent Х endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, IX, or X a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, X 11a Part VI b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b X c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total Х assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 110 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 11d X X e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Х Schedule D, Parts XI and XII 12a 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 12b 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? 14a X b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 Х or more? If "Yes," complete Schedule F, Parts I and IV 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 Х Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 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 Х 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18 X 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 Form 990 (2016)

LAW, INC. 52-1818273 orm 990 (2016) Page 4 Part IV | Checklist of Required Schedules (continued) Yes No 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a Х b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 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 17 If "Yes," complete Schedule I, Parts I and II Х 21 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on X Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J X 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I X 25a 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 X Schedule L, Part I 25b 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II 26 Х Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV х b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation X contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I х Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?//f "Yes," complete x Schedule N, Part II 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 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 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Form 990 (2016)

X

35b

36

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

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2

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

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

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Pa	Irt 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			x
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter ·0· if not applicable	1		7
b		ō		
C] .	4	
	(gambling) winnings to prize winners?	1c	х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	***		
	filed for the calendar year ending with or within the year covered by this return 2a 3	o i		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			İ
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		х
b	If "Yes," has it filed a Form 990 T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Х	
b	If "Yes," enter the name of the foreign country: ► SEE SCHEDULE O			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	Ш	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a	igsquare	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c),	7		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		х
		7b		
¢	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		Х
	If "Yes," indicate the number of Forms 8282 filed during the year			
0	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	1.		
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	2 5 S - 2	
	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12	334		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	100		Aleria I Sur de
11	Section 501(c)(12) organizations. Enter:			Àr.
	Gross income from members or shareholders	4-5		
	Gross Income from other sources (Do not net amounts due or paid to other sources against			
40.	amounts due or received from them.)	6.377	\$158 g 4	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	Service Co.	, , , ,
	If "Yes," enter the amount of tax exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	<i>७ कार्स</i>	3655	56 (11)
	Is the organization licensed to issue qualified health plans in more than one state?	13a	\$4,201	
	Note. See the instructions for additional information the organization must report on Schedule O.			
	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	× 7.23	205,3% 9	X
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
Q	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	990 (2	20161
		1 (1111)	UUU (2)

INTERNATIONAL CENTER FOR NOT-FOR-PROFIT LAW, INC. 52-1818273 Page 6 Form 990 (2016) 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 in Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent 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? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or х more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or х persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a b Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b 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? 11a 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 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 12c in Schedule O how this was done Did the organization have a written whistleblower policy? 13 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a 15b b Other officers or key employees of the organization 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 16<u>a</u> taxable entity during the year? 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? List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available

Section C. Disclosure

1126 16TH STREET, N.W., NO.400, WASHINGTON, DC 20036

for public inspection. Indicate how you made these available. Check all that apply.

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

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records: DARLA MECHAM - (202)452-8600

Form 990 (2016)

LAW, INC. Form 990 (2016)

52-1818273

Part VIII 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

X

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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

	A	ł			C) itior	1		(D)	(E)	(F)
Name and Title	Average hours per	(do	not o	heck	more	than	one	Reportable compensation	Reportable compensation	Estimated amount of
	week	box, unless person is both an officer and a director/trustee)					tee)	from	from related	other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) OONAGH BREEN	4.00									
CHAIR		x		х				1,000.	0.	0
(2) NATASHA GABER-DAMJANOVSKA	4.00									
VICE CHAIR	*	х		Х				0.	0.	0
(3) ADAM KOLKER	4,00						Г			
SECRETARY/TREASURER		x		х				0.	0.	0
(4) NOSHIR DADRAWALA	4.00									
DIRECTOR		х						1,600.	0.	0
(5) SUNEETA KAIMAL	4.00									
DIRECTOR		x						0.	0.	0
(6) BARBARA IBRAHIM	4.00	Г								
DIRECTOR		Х.						0.	0.	0
(7) EMILE VAN DER DOES DE WILLEBOIS	4.00									
DIRECTOR		X						0.	0.	. 0
(8) W. AUBREY WEBSON	4.00									
DIRECTOR		Х						0.	0.	0
(9) DOUGLAS RUTZEN	40.00								•	
PRESIDENT				X				177,066.	0.	24,813
(10) DARLA MECHAM	40.00									
VICE PRESIDENT, FINANCE				х				112,886.	0.	35,602
(11) CATHERINE SHEA	40.00							,		
/ICE PRESIDENT, PROGRAMS						X		146,120.	0.	26,902
(12) NATALIA BOURJAILY	40.00									
VICE PRESIDENT, EURASIA						x		141,518.	0.	19,870
(13) DAVID MOORE	40.00									
/P, LEGAL AFFAIRS						x		137,199.	0.	22,825
(14) A. NILDA BULLAIN	40.00									
/ICE PRESIDENT, OPERATIONS]		х		133,531.	0.	10,101
(15) JOCELYN NIEVA	40.00									
ER. LEGAL ADVISOR, LATIN A					_	х		120,354.	0.	23,846
				- 1				L		

632007 11-11-16

Form 990 (2016)

	n 990 (2016) LAW, INC.									52-1818	273		F	Page
Pa	rt VII Section A. Officers, Directors, Tru		plo	yees			ighe	est (Compensated Employe	es (continued)		<u>,</u>		
	(A) Name and title	(B) Average hours per week (list any	off	k, uni		erson	than is bo	th an	compensation	(E) Reportable compensation from related		a	(F) stimat mount othe	t of
		hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	1	organizations (W-2/1099-MIS		org ar	npens rom ti ganiza id rela anizat	ne ition ited
-			-				\vdash							
				_	<u> </u>			<u> </u>						
			_											
	•													
		,												
1b	Sub-total							>	971,274.		0.		163	,959,
	Total from continuation sheets to Part VI Total (add lines 1b and 1c)								0. 971,274.		0.		163	0. 959,
2	Total number of individuals (including but n compensation from the organization	ot limited to th	ose	liste	ed at	ove) wh	o re	eceived more than \$100	,000 of reportable				8
3	Did the organization list any former officer,	director, or tru	stee	, ke	y en	ploy	yee,	or h	nighest compensated er	nployee on	ſ	, 14th	Yes	No
4	line 1a? If "Yes," complete Schedule J for so For any individual listed on line 1a, is the su											3		Х
5	and related organizations greater than \$150 Did any person listed on line 1a receive or a											4	X	tv.
Sec	rendered to the organization? If "Yes," comp tion B. Independent Contractors	olete Schedule	Jf	or su	ıch p	ers	on .				<u> </u>	5		х
1	Complete this table for your five highest conthe organization. Report compensation for t										ensa	ation f	rom	
	(A) Name and business		NON		<u> </u>	•			(B) Description of se		C	(C ompe) nsatio	n
									100					
2	Total number of independent contractors (ir \$100,000 of compensation from the organiz		ot lim	nited	l to t	hos 0		ted	above) who received me	ore than				
											•	Form 9	990 c	2016)

52-1818273

LAW, INC.

			Check if Schedule O con			(A) Total revenue	(B) Related or exempt function	(C) Unrelated business	Revenue excluded from tax under sections 512 - 514
				11.			revenue	revenue	512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1	а	Federated campaigns	1a					****
N O		þ	Membership dues	1b					
Ş.Ş.		c	Fundraising events	1c		·			No. of the second
# E			Related organizations			•			
ý E		е	Government grants (contribu		6,391,139.	1.	Ì		
Š	1	f	All other contributions, gifts, gran	nts, and		:			1.0
ag ag			similar amounts not included abo		908,439.				
Ęő		g							
Sã	l	h	Total. Add lines 1a-1f			7,299,578.	The section of the section of	la de la compania	
	1				Business Code		4		
ø	2	а	CONTRACT INCOME		900099	297,013.	297,013.	·	
۳Ę.	l .	b		3		· · · · · · · · · · · · · · · · · · ·			
SS	١.	С							
e a	1	d							
Program Service Revenue		e							
Ĕ		f	All other program service reve	enue					
		a	Total. Add lines 2a-2f			297,013.			
	3	<u> </u>	Investment income (including						
			other similar amounts)			26,024.			26,024
	4		Income from investment of ta			,			
	5		Royalties						
	ľ		noyames	(i) Real	(ii) Personal				
	6 4	•	Gross rents		(ii) 1 Ci Soriai	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3		1	an da
			Gross rents Less: rental expenses						
			Rental income or (loss)						
				L			and the second		
			• •	6) Consulting		the second of the second	yer's a contract	paratri para 1	1.7 - 1
	/ 2	a	Gross amount from sales of	(i) Securities 741,339.	(ii) Other				
			assets other than inventory	741,339,					
	K		Less: cost or other basis	725 410					
			and sales expenses						
			Gain or (loss)	L					
			Net gain or (loss)		>	4,929.			4,929.
e le	8 8		Gross income from fundraising						
Revenue			including \$						Edge Byst :
ا چ			contributions reported on line				a aledebijskod		
8			Part IV, line 18	a					
₹			Less: direct expenses						
			Net income or (loss) from fund				d falosty) virus		
	9 a		Gross income from gaming ac						
			Part IV, line 19						
			Less: direct expenses						Michael (A
	C	C	Net income or (loss) from gam	ing activities					
1	10 a	a	Gross sales of inventory, less	returns					er transport
			and allowances						
	b		Less: cost of goods sold						
			Net income or (loss) from sales				<u> </u>		
•			Miscellaneous Revenue		Business Code				
Ì	11 a	3	MISCELLANEOUS INCOME		900099	1,569.			1,569.
	b	•							<u> </u>
	~	3							
l	d	- 1	All other revenue	· · · · · · · · · · · · · · · · · · ·			1		
I	-		Total. Add lines 11a-11d		>	1,569.		to the state of	Carlot Sue New York
- 1	12		Total revenue. See instructions.			7,629,113.	297,013.	0.	32,522.

52-1818273

Form 990 (2016) Part IX | Statement of Functional Expenses

Sec	tion 501(c)(3) and 501(c)(4) organizations must con				x
	Check if Schedule O contains a respo			(C)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	405,034	. 405,034		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	126,000	. 126,000		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	1			
	individuals. See Part IV, lines 15 and 16	2,561,612.	2,561,612.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	352,967.	147,596.	173,069.	32,302
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	1,835,479.	1,155,022.	560,111.	120,346
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	115,861.	74,999.	33,537.	7,325
9	Other employee benefits	286,550.	171,858.	94,704.	19,988
10	Payroll taxes	150,251.	95,623.	43,581.	11,047
11	Fees for services (non-employees):				
а	Management				
	Legal	33,558.	6,391.	27,167.	
	Accounting	59,613.	9,629.	49,984.	
				· · · · · · · · · · · · · · · · · · ·	
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	9,000.		9,000.	
g g	Other, (If line 11g amount exceeds 10% of line 25,			•	
9	column (A) amount, list line 11g expenses on Sch O.)	2,134,571.	2,094,936.	29,315.	10,320.
12	Advertising and promotion	-,,		,	,
13	Office expenses	192,062,	76,921.	115,141.	
14	Information technology	112,413.	29,988.	82,298.	127.
				,	
15	Royalties	394,393.	224,242.	157,620.	12,531.
16	Occupancy	593,852.	557,292,	34,944.	1,616.
17	Travel	373,032.	331,232.	34,544.	1,010.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	117,504.	06 083	20 313	208.
19	Conferences, conventions, and meetings	117,504.	96,983.	20,313.	200.
20	Interest	118.	118.		
21	Payments to affiliates	18 000		17 000	
22	Depreciation, depletion, and amortization	17,069.		17,069.	
23	Insurance	49,582.		49,582.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line				
	24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)				
а	TRANSLATIONS	35,645.	35,645.		· · · · · · · · · · · · · · · · · · ·
b					
C					
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	9,583,134.	7,869,889.	1,497,435.	215,810.
26	Joint costs. Complete this line only if the organization		-		
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
32010	11-11-16				Form 990 (2016)

Part /	_	Charle if Canadula Countains a regnerous or no	.	nu line in this Dark V	· .		Т
		Check if Schedule O contains a response or no	te to a	ny line in triis Part X ,	(A) Beginning of year	T	(B) End of year
1 4	1	Cash - non-interest-bearing			225,151	. 1	167,635,
2	2	Savings and temporary cash investments			3,353,021	. 2	1,465,357.
- 1	3	Pledges and grants receivable, net			8,267,452	. 3	8,073,712.
4		Accounts receivable, net	••••••	***************************************	18,557	4	2,505.
6	5	Loans and other receivables from current and for			*		
- 1		trustees, key employees, and highest compens			·	l	
		Part II of Schedule L				5	
6	3	Loans and other receivables from other disqual				1.0	
		section 4958(f)(1)), persons described in section	-	•			
		employers and sponsoring organizations of sec	tion 50	1(c)(9) voluntary			
ध		employees' beneficiary organizations (see instr)				6	
Assets	7	Notes and loans receivable, net				7	
ĕ 8		Inventories for sale or use			./	8	
9	•	Prepaid expenses and deferred charges		,	34,564.	9	47,975.
10		Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	102,517.			
	b	Less: accumulated depreciation		70,944.	48,642.	10c	31,573.
11		Investments - publicly traded securities			980,561.	11	1,028,843.
12	?	Investments - other securities. See Part IV, line 1	11	,		12	
13		Investments - program-related. See Part IV, line				13	
14		Intangible assets		14			
15		Other assets. See Part IV, line 11	664,567.	15	101,061.		
16	<u> </u>	Total assets. Add lines 1 through 15 (must equa	al line :	34)	13,592,515.	16	10,918,661.
17	•	Accounts payable and accrued expenses			1,090,687.	17	352,277.
18	}	Grants payable				18	
19)	Deferred revenue				19	
20)	Tax-exempt bond liabilities			·	20	
21		Escrow or custodial account liability. Complete I	Part IV	of Schedule D		21	
ဖ္ထ 22	!	Loans and other payables to current and former	office	s, directors, trustees,			
		key employees, highest compensated employee					
Liabilities N		Complete Part II of Schedule L				22	
23	i	Secured mortgages and notes payable to unrela	ted th	rd parties		23	
24		Unsecured notes and loans payable to unrelated	l third	parties		24	
25		Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines					
		Schedule D			41,245.		31,846.
26		Total liabilities, Add lines 17 through 25			1,131,932.	26	384,123.
		Organizations that follow SFAS 117 (ASC 958)		k here ▶ LX_I and			
%		complete lines 27 through 29, and lines 33 an				145	
E 27		Unrestricted net assets			1,856,332.	27	1,999,505.
<u>R</u> 28		Temporarily restricted net assets			10,604,251.	28	8,535,033.
29						29	1 15 ASS 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
2		Organizations that do not follow SFAS 117 (A	SC 958	3), check here			
5		and complete lines 30 through 34.		. 4			
30		Capital stock or trust principal, or current funds				30	
[31		Paid in or capital surplus, or land, building, or eq				31	
27 28 29 30 31 32 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3		Retained earnings, endowment, accumulated inc			10 460 500	32	10 504 500
33		Total net assets or fund balances			12,460,583.	33	10,534,538.
34		Total liabilities and net assets/fund balances			13,592,515.	34	10,918,661.

Form 990 (2016)

INTERNATIONAL CENTER FOR NOT-FOR-PROFIT

For	n 990 (2016) LAW, INC.	52-181827	5	Pa	ige 12
Pε	rt 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			<u>,113.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2			,134.
3	Revenue less expenses. Subtract line 2 from line 1	3	-:	L,954	,021.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	12	2,460	,583.
5	Net unrealized gains (losses) on investments	5		27	,976.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,	1			
	column (B))	10	10	,534	,538.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				`
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O,		10.0	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				l
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			(1 · · · · · · · · · · · · · · · · · · ·
	consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis			11.1	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,	250		7 1
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		3a	х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	X	
			Form	990	(2016)

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
➤ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Man	ie oi	the organization INTE	RNATIONAL CENTER	FOR NOT-FOR-PROFI	.T			Employe	a ruentincation number						
		LAW,							52-1818273						
Pa	rt I	Reason for Public	Charity Status	(All organizations must	complete t	his part.) S	See instruction	s.							
The	orgar	nization is not a private four	ndation because it is:	(For lines 1 through 12,	check on	ly one box	:.)								
1	Ш	A church, convention of	churches, or associat	ion of churches describ	ed in <mark>sect</mark> i	on 170(b)	(1)(A)(i).								
2															
3	\Box	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).													
4		A medical research organ	nization operated in c	- onjunction with a hospit	al describe	ed in secti	on 170(b)(1)(A)(iii). Ente	r the hospital's name,						
		city, and state:													
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in													
		section 170(b)(1)(A)(iv). (Complete Part II.)													
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).													
7	x														
•	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)														
8		A community trust descri		\(1\(A\(vi), (Complete Pa	rt ILY		•								
9	\Box	An agricultural research o				ted in coni	iunction with a	land-oran	t college						
•		or university or a non-land													
		university:	. g.a.n. conogo o, agn		<i>y.</i> 	o mamo, or	.,,	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	y• ••						
10		An organization that norm	ally receives: (1) mor	e than 33 1/3% of its su	nnort from	contribut	ions members	hin fees	and gross receipts from						
10		activities related to its exe	-					-							
		income and unrelated bus													
		See section 509(a)(2), (C		e (less section of intax) i	IOIII DUSIII	esses acq	anea by the or	garnzauoi	raiter durie 50, 1975.						
11		An organization organized		sively to test for public s	ofatu Saa	cootion F	(00/21/4)								
12		An organization organized	•	•	-			rne out th	e nurnoses of one or						
12		more publicly supported of													
		lines 12a through 12d tha	•	* * * * *					Officer the box in						
_		Type I. A supporting org	• • •	., .		•		~	. alulna						
а															
		the supported organizat			a majority	or the aire	ectors or truste	es or the s	supporting						
		organization. You must	-					. 7.3 1 1							
b	Ь	J Type II. A supporting or	•				=		=						
		control or management			same pers	ons that c	ontrol or mana	ge the su	эропеа						
		organization(s). You mu	•												
С	L	Type III functionally int						y integrat	ea with,						
_	_	its supported organization		•											
d	L	Type III non-functional						-							
		that is not functionally in	•	• •	-		•	an attent	tiveness						
		requirement (see instruc	•	•											
е	L	J Check this box if the org					a Type I, Type I	II, Type III							
		functionally integrated, o	• •	onally integrated suppor	ting organi	zation.									
		r the number of supported	•			•••••									
g	Prov	ide the following information	on about the supporte	ed organization(s).	Thirt is the orga	anizalion heled	L (u) Amount of		(vi) Amount of other						
	Ç1,) Name of supported organization	(II) CIIN	(described on lines 1-10			support (see ins	tructions)	(vi) Amount of other support (see instructions)						
		organization,		above (see Instructions))	Yes	No	COPPORT (COS III		cupper (coo menurum)						
					<u> </u>										
						ŀ									
					ļ										
						l			,						
	w														
Total						5	1								

Schedule A (Form 990 or 990-EZ) 2016 LAW, INC. 52-1818273

[Part II] Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization

	fails to qualify under the test	ts listed below, ple	ase complete Part	III.)			
Se	ection A. Public Support				······································		
Cal	endar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	7,656,600.	15,549,092.	10,800,074.	8,206,763	7,299,578.	49,512,107.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities			·			
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	7,656,600.	15,549,092.	10,800,074.	8,206,763.	7,299,578.	49,512,107.
5	The portion of total contributions						
	by each person (other than a	1			\$		
	governmental unit or publicly					and the second	
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						541,332.
	Public support. Subtract line 5 from line 4.	Haran San San San San San San San San San S	antalia sa a er e			10 10 10 10 10 10 10 10 10 10 10 10 10 1	48,970,775.
	ction B. Total Support		410040	41004			40.55
	endar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015 8,206,763.	(e) 2016 7,299,578.	(f) Total
	Amounts from line 4	7,656,600.	15,549,092.	10,800,074.	8,208,783.	1,299,570.	49,512,107.
8	Gross income from interest,				;		
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources	2,213.	3,807.	5,323,	14,841.	26,024.	52,208.
۵	Net income from unrelated business	2,213.	3,007.	3,323.	14,041.	20,021.	32,200.
Ð	activities, whether or not the					Í	
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital	l				ľ	
	assets (Explain in Part VI.)	1,516.		7,746.	16,553.	1,569.	27,384.
11	Total support. Add lines 7 through 10	Arma Jaya	5.28 × 20 × 20 ×				49,591,699.
	Gross receipts from related activities,	etc. (see instruction	ons)			12	1,258,686.
13	First five years. If the Form 990 is for	the organization's				1 501(c)(3)	
	organization, check this box and stop			· · · · · · · · · · · · · · · · · · ·	-		▶□
Sec	tion C. Computation of Publ	c Support Per	centage				
14	Public support percentage for 2016 (I	ine 6, column (f) di	vided by line 11, co	olumn (f))		14	98.75 %
15	Public support percentage from 2015	Schedule A, Part	II, line 14			15	97.84 %
16a	33 1/3% support test - 2016. If the o						
	stop here. The organization qualifies	as a publicly supp	orted organization	***************************************		***************************************	 ▶ x
b	33 1/3% support test - 2015. If the o						
	and stop here. The organization quali						
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fact		-	•	•	_	
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances test	•				•	0% or
	more, and if the organization meets th				• •		, —
	organization meets the "facts-and-circ						
18	Private foundation. If the organization	n did not check a b	oox on line 13, 16a	, 16b, 17a, or 17b,			
					Sche	dule A (Form 990 d	r 990-EZ) 2016

Schedule A (Form 990 or 990-EZ) 2016 LAW, INC. Part III | Support Schedule for Organizations Described in Section 509(a)(2)

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

	quality under the tests listed t	below, please con	npiete Part II.)				
Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						ł
	include any "unusual grants.")						
2	Gross receipts from admissions.						
_	merchandise sold or services per-					Í	
	formed, or facilities furnished in	İ	[· ·			
	any activity that is related to the						1
	organization's tax-exempt purpose						
3	Gross receipts from activities that				}	ŀ	
	are not an unrelated trade or bus-		İ		İ		
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to		İ		l		ł
	or expended on its behalf					ļ	
5	The value of services or facilities						
	furnished by a governmental unit to				İ		
	the organization without charge					_	
	Total. Add lines 1 through 5			· · · · · · · · · · · · · · · · · ·			
7a	Amounts included on lines 1, 2, and					'	}
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that) }	· ·				
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	Į					
	Add lines 7a and 7b						
		Tarrett te	1, 11 10 10 10 10		1.31 ()		
	Public support. (Subtractline 7c from line 6.)				of depart of the second	A CONTRACT OF STREET	<u> </u>
	tion B. Total Support						T
	ndar year (or fiscal year beginning in) 🖊	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 6						
	Gross income from interest,	1					
	dividends, payments received on securities loans, rents, royalties						
	and income from similar sources						
	Unrelated business taxable income					· · · · · · · · · · · · · · · · · · ·	
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b					<u> </u>	<u> </u>
	Net income from unrelated business activities not included in line 10b.						
	whether or not the business is						
	regularly carried on						
	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	1					
			divet cocond this				
	First five years. If the Form 990 is for	•	•		•		alion,
				***************************************	•••••	***************************************	PU
	tion C. Computation of Publi					· · · · · · · · · · · · · · · · · · ·	
	Public support percentage for 2016 (li		•	*** ***********************************		15	<u>%</u>
16	Public support percentage from 2015	Schedule A, Part	III, line 15			16	%
	tion D. Computation of Inves						
17	Investment income percentage for 20	16 (line 10c, colun	nn (f) divided by line	e 13. column (f))		17	%
	Investment income percentage from 2					18	%
	33 1/3% support tests - 2016. If the						
		_					
	more than 33 1/3%, check this box an	-	-	· -			
	33 1/3% support tests - 2015. If the o	•					
	line 18 is not more than 33 1/3%, ched	ck this box and st	op here. The organ	nization qualifies a	s a publicly supp	orted organization	▶∐
20	Private foundation. If the organization	ı did not check a l	<u>box on line 14, 19a</u>	, or 19b, check th	is box and see in	structions	<u></u> ▶∐_
3202	3 09-21-16				Sch	edule A (Form 990	or 990-EZ) 2016

52-1818273

Part IV | Supporting Organizations

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

Section A.			

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filling organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
,		
2	10.72	<u> </u>
3a		
	$\mathcal{D}_{\chi_{(x,y)}}$	
3b		
3c		
10 j 1 s	3.7	
4a	20.00	
		41 5
4b	٠	
	5 1841 3	
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1 . 1		-
4c	\$ 07.5°	ye., en
-		
5a	9 e e	
5b	1 44.1	
5c		
10-52 NA 14-51 34 N		
6	253,543	
3373		
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8	ริเอสกร	
8		 }
9a		7
1.5		
9b	3792.1	5.25
9c	· Ats	. W
		lene.
10a	6111725	
10b	671 (A.B.) 2	
990 or 990	0-EZ)	2016
	•	

Schedule A (Form 990 or 990-EZ) 2016 LAW, INC.

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Schedule A (Form 990 or 990-EZ) 2016

52-1818273

Page 5

	INTERNATIONAL CENTER FOR NOT-FOR-P	ROFIT		50 1010072	_
	edule A (Form 990 or 990-EZ) 2016 LAW, INC.			52-1818273	Page
L	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting			n Danit VII \ Can time!	
1	Check here if the organization satisfied the Integral Part Test as a qualifyir	-		n Part VI.) See Inst	ructions.
	other Type III non-functionally integrated supporting organizations must co	ompiete	Sections A through E.	(B) Curren	1 Voor
Sec	tion A - Adjusted Net Income		(A) Prior Year	(b) Curren	
_1	Net short-term capital gain	1			
2	Recoveries of prior-year distributions	2			
3	Other gross income (see instructions)	3			
4	Add lines 1 through 3	4			
5	Depreciation and depletion	5			
6	Portion of operating expenses paid or incurred for production or				
	collection of gross income or for management, conservation, or	- [
	maintenance of property held for production of income (see instructions)	6			
7	Other expenses (see instructions)	7			
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8			
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Curren (option	
1	Aggregate fair market value of all non-exempt-use assets (see				
	instructions for short tax year or assets held for part of year):				
a	Average monthly value of securities	1a			
	Average monthly cash balances	1b			
	Fair market value of other non-exempt-use assets	1c			
	Total (add lines 1a, 1b, and 1c)	1d			
	Discount claimed for blockage or other				4 .
	factors (explain in detail in Part VI):				
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
3	Subtract line 2 from line 1d	3			
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,				
•	see instructions)	4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by .035	6			·····
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
	ion C - Distributable Amount			Current \	ear
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		5	
2	Enter 85% of line 1	2			
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	arting (1888年1995年)	a	
4	Enter greater of line 2 or line 3	4			

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedule A (Form 990 or 990-EZ) 2016

Income tax imposed in prior year

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions)

	irt V Type III Non-Functionally Integrated 50	9(a)(3) Supporting Or		52-1010275 Page /
L	tion D - Distributions	o(a)(a) outporting or	gamzationo (conunuea)	Current Year
1	Amounts paid to supported organizations to accomplish ex	cempt purposes		047.07.04.
2	Amounts paid to perform activity that directly furthers exer			
	organizations, in excess of income from activity	прирадения славрение		
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organization	ons	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)		····	
6	Other distributions (describe in Part VI). See instructions	· · · · · · · · · · · · · · · · · · ·		
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which	the organization is responsi	ve	
	(provide details in Part VI). See instructions			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Sec	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reason-			
_	able cause required explain in Part VI). See instructions			e Maria de la composición della composición della composición della composición della composición della composición della composición della composición della composición della composición della composición della composición della composición della composición della composición della composición della composición della composición della composición dell
3	Excess distributions carryover, if any, to 2016:			
a				
b				The state of the s
С	From 2013			
d	From 2014			
е	From 2015			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
<u> </u>	Carryover from 2011 not applied (see instructions)			
丁	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
<u> </u>	Remainder, Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2016. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions			
7	Excess distributions carryover to 2017. Add lines 3j			
	and 4c			Product Color Color
8	Breakdown of line 7:			
a				
b	Excess from 2013			
С	Excess from 2014		共产的扩展的	
d	Excess from 2015	[시일시:12] 11 12 12 12 12 12 12 12 12 12 12 12 12		

Schedule A (Form 990 or 990-EZ) 2016

e Excess from 2016

INTERNATIONAL CENTER FOR NOT-FOR-PROFIT

Schedule A	Form 990 or 990-EZ) 2016 LAW, INC.	52-1818273	Page 8
Part VI	Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, I line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any an (See instructions.)	17a or 17b; Part III, line 12; ines 1 and 2; Part IV, Sectic Part V, Section B, line 1e; P dditional information.	on C, art V,
<u> </u>			
			
<u>.</u>			
	·	•	
······································			
	·		
	· · · · · · · · · · · · · · · · · · ·		

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.lrs.gov/form990.

OMB No. 1545-0047

Employer identification number

2016

	TERNATIONAL CENTER FOR NOT-FOR-PROFIT					
Organization type (check o		52-1818273				
Organization type (check c	ле,					
Filers of:	Section:					
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
• •	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rul	e. See instructions.				
General Rule						
•	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor's					
Special Rules						
sections 509(a)(1) a any one contributo	described in section 501(c)(3) filing Form 990 or 990·EZ that met the 33 1/3% support to and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990·EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount line 1. Complete Parts I and II.	or 16b, and that received from				
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization
INTERNATIONAL CENTER FOR NOT-FOR-PROFIT
LAW, INC.

Employer identification number

LAW, INC			52-1818273
Part I	Contributors (See instructions). Use duplicate copies of Part I if addi	itional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$2,302,7	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 418,30	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$2,331,19	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$747,42 	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ 400,00	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

Contributors (See instructions). Use duplicate copies of Part I if addit	ional anges is needed	
	ional space is needed.	
(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
	\$450,(Person X Payroll Noncash (Complete Part II for noncash contributions.)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) s Type of contribution
	\$216,3	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(b) Name, address, and ZIP + 4	(c) . Total contributions	(d) Type of contribution
	- - - -	Person Payroll Oncash (Complete Part II for noncash contributions.)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	- _ \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	- \$	Person Payroll Moncash (Complete Part II for noncash contributions.)
	Name, address, and ZIP + 4 (b) Name, address, and ZIP + 4 (b) Name, address, and ZIP + 4 (b) Name, address, and ZIP + 4	Name, address, and ZIP + 4 (b) Name, address, and ZIP + 4 (c) Total contributions (b) Name, address, and ZIP + 4 (c) Total contributions (b) Name, address, and ZIP + 4 (c) Total contributions (c) Total contributions (d) Total contributions (e) Total contributions (f) Name, address, and ZIP + 4 (g) Total contributions (h) Name, address, and ZIP + 4 Total contributions

Employer identification number

AW, INC	•	52	-1818273
Part II	Noncash Property (See instructions). Use duplicate copies of F	Part II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		*	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		s	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
453 10-18-1		\$Schedule B /Form 6	990, 990-EZ, or 990-PF) (

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ, OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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) organiza	ations: Complete Part III.			
Name of org	anization INTERNATIO	NAL CENTER FOR NOT-FOR-I	PROFIT	Emp	loyer identification numbe
	LAW, INC.				52-1818273
Part I-A	Complete if the or	ganization is exempt un	der section 501(c)	or is a section 527 o	rganization.
2 Political 3 Volunte	campaign activity expendi er hours for political campa	zation's direct and indirect politi tures lign activities		►\$	
Part I-B		ganization is exempt un			
1 Enter th	e amount of any excise tax	incurred by the organization un	der section 4955	> \$	
		incurred by organization manag			
		on 4955 tax, did it file Form 4720			
					Yes No
b If "Yes,"	describe in Part IV.	ganization is exempt und	day coation 501/a)	event costion 501/	(a)(2)
4.1					
		d by the filing organization for se			
		nization's funds contributed to o			
exempt	runction activities	s. Add lines 1 and 2. Enter here	and an Farm 1100 BOL	······································	
		s, Add lines 1 and 2. Linter here			•
4 Did that	iling organization file Form	1120-POL for this year?			Yes No
made pa contribu	ayments. For each organiza tions received that were pr	nployer identification number (E tion listed, enter the amount pa omptly and directly delivered to additional space is needed, pro	id from the filing organiz a separate political orga	ation's funds. Also enter thanization, such as a separa	e amount of political
	(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·.

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

Schedule C (Form 990 or 990-EZ) 2016

LHA

632041 11-10-16

165,410

Schedule C (Form 990 or 990-EZ) 2016

71,328.

683,258.

1,024,887.

21,700

157,289

174,998

49,628

185,561

c Total lobbying expenditures

e Grassroots ceiling amount

d Grassroots nontaxable amount

(150% of line 2d, column (e))

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2016 LAW, INC. 52-1818273

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)).

ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)	
of the lobbying activity.	Yes	No	An	nount	
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers?	. :				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?					
d Mailings to members, legislators, or the public?		<u> </u>	 	/_/	
e Publications, or published or broadcast statements?			 		
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?				·	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
J Total. Add lines 1c through 1i				·	
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b If "Yes," enter the amount of any tax incurred under section 4912	1.				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			100		
Part III-A Complete if the organization is exempt under section 501(c)(4), secti 501(c)(6).	on 501(c)	(5), or se	ection		
	***************************************		Yes	No	
1 Were substantially all (90% or more) dues received nondeductible by members?		1			
Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2			
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	on 501(c)	(5), or se		 ne 3, is	
answered "Yes."		<u> </u>			
1 Dues, assessments and similar amounts from members					
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politiex expenses for which the section 527(f) tax was paid).	cai	\$1,000			
a Current year		2a			
b Carryover from last year					
c Total					
Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	cess				
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and perpenditure next year?		4			
5 Taxable amount of lobbying and political expenditures (see instructions)		5		-	
5 Taxable amount of lobbying and political expenditures (see instructions) art IV Supplemental Information ovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group structions); and Part II-B, line 1. Also, complete this part for any additional information.		5	nd 2 (see		
		•			

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.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

INTERNATIONAL CENTER FOR NOT-FOR-PROFIT Emplo

2016 Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Employer Identification number

,	LAW, INC.		52-18102/3
Pa	organizations Maintaining Donor Advis		or Accounts.Complete if the
	organization answered "Yes" on Form 990, Part IV, li	ne 6. (a) Donor advised funds	(b) Funds and other accounts
	Total accept as at and afternoon	 	(b) Turius 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		
_	are the organization's property, subject to the organization's		
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor		
Da	impermissible private benefit? rt II Conservation Easements. Complete if the or	register annual West on Form 000 Bar	Yes No
L			tiv, line 7.
1	Purpose(s) of conservation easements held by the organizat		ally in a set out to a dame
	Preservation of land for public use (e.g., recreation or		
	Protection of natural habitat	Preservation of a certified	a nistone structure
_	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a	
	day of the tax year.		Held at the End of the Tax Year
а	***************************************		
b	Total acreage restricted by conservation easements		
C	Number of conservation easements on a certified historic str		
d	Number of conservation easements included in (c) acquired		1 1
	listed in the National Register		
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the or	ganization during the tax
	year >		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements i	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conserv	ation easements during the year
			•
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservation	n easements during the year
	> \$		
8	Does each conservation easement reported on line 2(d) above		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservati	on easements in its revenue and expense sta	atement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes the	organization's accounting for
	conservation easements.		
Pai	t III Organizations Maintaining Collections o		er Similar Assets.
,	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue statemen	t and balance sheet works of art,
	historical treasures, or other similar assets held for public ext	· · · · · · · · · · · · · · · · · · ·	of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri		
b	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, ed	ducation, 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		
2	If the organization received or held works of art, historical treatment	asures, or other similar assets for financial ga	in, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		> \$
b_	Assets included in Form 990, Part X		
	For Paperwork Reduction Act Notice, see the Instructions		Schedule D (Form 990) 2016
	08-29-16		

Schedule D (Form 990) 2016

0.

31,573.

31,573.

51,309

19,635,

e Other

51,309.

51,208

b Buildings

c Leasehold improvements

d Equipment

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

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII [X] Schedule D (Form 990) 2016

632053 08-29-16

(7) (8)

31,846.

SCD	edule D (Form 990) 2016 DAW, INC.		25-10105	y Page -
	rt XI Reconciliation of Revenue per Audited Financial Statements With Reven	ue per F	Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			7 649 099
1		••••••	1	7,648,089
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	27,976		
a		21,370	1	
			1	
C			-	
	Other (Describe in Part XIII.)			27,976
_	Add lines 2a through 2d		2e	7,620,113
3	Subtract line 2e from line 1	•••••	3	7,020,110,
	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	9,000.		
	Investment expenses not included on Form 990, Part VIII, line 7b	3,000.	1	
	Other (Describe in Part XIII.)			9,000
	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c, (This must equal Form 990, Part I, line 12.)		Doturn	7,629,113
Pai	rt XII Reconciliation of Expenses per Audited Financial Statements With Exper	ises per	Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		T 4 T	9,574,134.
1	Total expenses and losses per audited financial statements		1	9,374,134,
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	Donated services and use of facilities		1.0	
b	Prior year adjustments			
C	Other losses 2c			
			<u> </u>	•
	Add lines 2a through 2d		2e	0.
	Subtract line 2e from line 1		3	9,574,134.
	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	Investment expenses not included on Form 990, Part VIII, line 7b	9,000.		
	Other (Describe in Part XIII.)			0 000
	Add lines 4a and 4b		4c	9,000.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	9,583,134.
	t XIII Supplemental Information.			0 D 134
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; P	art 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 (CENTER HAS ADOPTED THE ACCOUNTING STANDARD ON ACCOUNTING FOR			
UNCE	RTAINTY IN INCOME TAXES, WHICH ADDRESSES THE DETERMINATION OF WHETHER			
				
TAX I	BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE			
REPO	RTED IN THE CONSOLIDATED FINANCIAL STATEMENTS. UNDER THIS POLICY, THE			
CENT	ER MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY			
IF I	I IS MORE LIKELY THAN NOT THAT THE TAX POSITION WOULD BE SUSTAINED ON			
EXAM:	INATION BY TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE			
	* LOURTHUP UNITED LA JANSANIA			
POSI	TION. MANAGEMENT HAS EVALUATED THE CENTER'S TAX POSITIONS AND HAS			
CONC	LUDED THAT THE CENTER HAS TAKEN NO UNCERTAIN TAX POSITIONS THAT			
REQUI	IRE ADJUSTMENT TO OR DISCLOSURE IN THE CONSOLIDATED FINANCIAL			
STATE	MENTS TO COMPLY WITH PROVISIONS OF THIS GUIDELINE.			
	08-29-16		Schedule D	(Form 990) 2016

INTERNATIONAL CENTER FOR NOT-FOR-PROFIT 52-1818273 Schedule D (Form 990) 2016 LAW, INC. Part XIII Supplemental Information (continued) Page 5

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Attach to Form 990.

Open to Public Inspection

▶ Information about Schedule F (Form 990) and its Instructions is at www.irs.gov/form990. Name of the organization **Employer Identification number** INTERNATIONAL CENTER FOR NOT-FOR-PROFIT LAW. INC. General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes No 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (b) Number of (c) Number of (d) Activities conducted in the region (e) If activity listed in (d) (f) Total employees, agents, and independent contractors expenditures (by type) (such as, fundraising, prooffices is a program service, for and in the region gram services, investments, grants to describe specific type investments recipients located in the region) of service(s) in the region in the region in the region CENTRAL AMERICA AND NGO LEGAL ENABLING THE CARIBBEAN PROGRAM SERVICES ENVIRONNMENT INITIATIVES 49,554. CENTRAL AMERICA AND GRANTS TO RECIPIENTS THE CARIBBEAN LOCATED IN THE REGION 81,431. EAST ASIA AND THE NGO LEGAL ENABLING PROGRAM SERVICES ENVIRONNMENT INITIATIVES 65,069. PACIFIC GRANTS TO RECIPIENTS EAST ASIA AND THE PACIFIC LOCATED IN THE REGION 48,889. EUROPE (INCLUDING ICELAND AND BOARD MEETINGS 17,387. GREENLAND) EUROPE (INCLUDING ICELAND AND NGO LEGAL ENABLING GREENLAND) PROGRAM SERVICES ENVIRONNMENT INITIATIVES 247,918. EUROPE (INCLUDING TCELAND AND GREENLAND) GRANTS TO RECIPIENTS 726,847. MIDDLE EAST AND NGO LEGAL ENABLING ENVIRONNMENT INITIATIVES NORTH AFRICA PROGRAM SERVICES 485,493. 1,722,588. 137 3 a Sub-total

and 3b) LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

479

Schedule F (Form 990) 2016

3,518,089.

5,240,677.

b Total from continuation sheets to Part I

c Totals (add lines 3a

Schedule F (Form 990) Part I Continuation	LAW, INC.	o nor Bogio	n.(Schedule F (Form 990), Part I, line	52-18182	73 Page 1
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
MIDDLE EAST AND NORTH AFRICA	. 0	130	GRANTS TO RECIPIENTS LOCATED IN THE REGION		513,930.
NORTH AMERICA	0	0	PROGRAM SERVICES	NGO LEGAL ENABLING ENVIRONNMENT INITIATIVES	2,490.
NORTH AMERICA	0	3	GRANTS TO RECIPIENTS LOCATED IN THE REGION		5,400.
RUSSIA AND NEIGHBORING STATES	5	25	PROGRAM SERVICES	NGO LEGAL ENABLING ENVIRONNMENT INITIATIVES	1,282,801.
RUSSIA AND NEIGHBORING STATES	0		GRANTS TO RECIPIENTS LOCATED IN THE REGION		123,460.
SOUTH AMERICA	0	0		NGO LEGAL ENABLING ENVIRONNMENT INITIATIVES	45,834.
SOUTH AMERICA	0		GRANTS TO RECIPIENTS LOCATED IN THE REGION		86,131.
SOUTH ASIA	. 0	2		NGO LEGAL ENABLING ENVIRONNMENT INITIATIVES	162,140.
SOUTH ASIA	0		GRANTS TO RECIPIENTS LOCATED IN THE REGION		13,633.
SUB-SAHARAN AFRICA	0	0 1		NGO LEGAL ENABLING ENVIRONNMENT INITIATIVES	322,897.

Schedule F (Form 990)	LAW, INC.		C NOT-FOR-PROFIT	52-181827	3 Page 1
Part I Continuation (a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	n. (Schedule F (Form 990), Part I, line 3 (d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)) (e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SUB-SAHARAN AFRICA	0		GRANTS TO RECIPIENTS LOCATED IN THE REGION	,	959,373.
	·				
			·		,
entered to the second s					
Totals	5	479			3,518,089.

Page 2

Schedule F (Form 990) 2016 LAW, INC. 52-1818273

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL, AMERICA	TO SUPPORT NGO LAW					
			REFORM	10,000.	10,000.WIRE TRANSFER	ó		
		CENTRAL AMERICA AND CARIBBEAN	TO SUPPORT NGO LAW REFORM	15,000.	15,000.WIRE TRANSFER	0		
		CENTRAL AMERICA AND CARIBBEAN	TO SUPPORT NGO LAW REFORM	17,584.	WIRE TRANSFER	0		3.96
		CENTRAL AMERICA AND CARIBBEAN	to support ngo law reform	15,373.	WIRE TRANSFER	o	,	
								-
		CENTRAL AMERICA	TO SUPPORT NGO LAW			•		
製造の 1. (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		AND CAKIBBEAN	KBFOKM	8,475.	WIRE TRANSFER	o		
		CENTRAL AMERICA AND CARIBBEAN	TO SUPPORT NGO LAW REFORM	5,000.	5,000.WIRE TRANSFER	o		
を受け、100年ののできませんが、100年のできません。 100年の日本のでは、100年の日本のできません。 100年の日本のできません。これでは、100年の日本のできません。								
		EAST ASIA AND THE	TO SUPPORT NGO LAW			•		
の第二人は1月1日の1月1日は1日では、1日では1日への1日では、1日では1日では1日では1日では1日では1日では1日では1日では1日では1日では		FACIFIC	KEFOKE	3XTM-//5/6	WIKE TRANSFER	o		
		EAST ASIA AND THE	TO SUPPORT NGO LAW	<u>.:</u>				
		PACIFIC	REFORM	39,412.	39,412,WIRE TRANSFER	0		
2 Enter total number of recipient organizations listed above	recipient organizatio		that are recognized as charities by the foreign country, recognized as tax-exempt by	foreign country,	recognized as tax-e	xempt by		

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

Enter total number of other organizations or entities

29 16 Schedule F (Form 990) 2016

INTERNATIONAL CENTER FOR NOT-FOR-PROFIT LAW INC.

ᄔ	LAW, INC.	:			52-1818273	73		Page 2
= t	Continuation of Grants and Other Assistance to Or	Assistance to Organiza	ganizations or Entities Outside the United States, (Schedule F (Form 990), Part II, line 1)	United States.	(Schedule F (Form 9	90), Part II, line 1	(
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA AND NEIGHBORING STATES	IO SUPPORT NGO LAW REFORM	7,400.	7,400.WIRE TRANSFER	0		
		RUSSIA AND NEIGHBORING STATES	IO SUPPORT NGO LAW REFORM	.096,960	WIRE TRANSFER	0		
		RUSSIA AND NEIGHBORING STATES	TO SUPPORT NGO LAW REFORM	26,700.	26,700.WIRE TRANSFER	.0		
		RUSSIA AND NEIGHBORING STATES	TO SUPPORT NGO LAW REFORM	10,000.	10,000,WIRE TRANSFER	.0		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	TO SUPPORT NGO LAW REFORM	726,847.	726,847.WIRE TRANSFER	.0		
		MIDDLE EAST AND NORTH AFRICA	TO SUPPORT NGO LAW REFORM	5,893.	5,893.WIRE TRANSFER	0		Ψ.
		MIDDLE EAST AND NORTH AFRICA	TO SUPPORT NGO LAW REFORM	25,175.	WIRE TRANSFER	0		
		MIDDLE EAST AND NORTH AFRICA	IO SUPPORI NGO LAW REFORM	12,138.	12,138.WIRE TRANSFER	0.		
		MIDDLE EAST AND NORTH AFRICA	IO SUPPORT NGO LAW REFORM	169,885.	169,885.WIRE TRANSFER	0.		

INTERNATIONAL CENTER FOR NOT-FOR-PROFIT LAW, INC.

Щ.	LAW, INC.				52-1818273	73		Page 2
Part II Continuation o	of Grants and Other	Assistance to Organiza	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)	United States.	Schedule F (Form 99)	30), Part II, line 1		
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST AND NORTH AFRICA	TO SUPPORT NGO LAW REFORM	125,232.	125,232.WIRE TRANSFER	0		
		MIDDLE EAST AND NORTH AFRICA	to support ngo law Reform	71,567.	71,567.WIRE TRANSFER	0		
		MIDDLE EAST AND NORTH AFRICA	TO SUPPORT NGO LAW REFORM	104,039,	104,039.WIRE TRANSFER	0		
		NORTH AMERICA	IO SUPPORT NGO LAW REFORM	5,400.	5,400.WIRE TRANSFER	0		
		SOUTH AMERICA	TO SUPPORT NGO LAW REFORM	10,000	10,000.WIRE TRANSFER	0		
		SOUTH AMERICA	TO SUPPORT NGO LAW REFORM	24,787.	24,787.WIRE TRANSFER	0		·
		SOUTH AMERICA	TO SUPPORT NGO LAW REFORM	10,000.	10,000.WIRE TRANSFER	0		
		SOUTH AMERICA	TO SUPPORT NGO LAW REFORM	7,990.	7,990,WIRE TRANSFER	0		
		SOUTH AMERICA	TO SUPPORT NGO LAW REFORM	19,580.	19,580.WIRE TRANSFER	0		

INC.	
LAW,	

╙	LAW, INC.				52-1818273	73		Page
Part II Continuation of	Continuation of Grants and Other Assistance to Or	Assistance to Organiza	ganizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)	United States.	(Schedule F (Form 9)	30), Part II, line 1)		
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	TO SUPPORT NGO LAW REFORM	.000,8	8,000.WIRE TRANSFER	O		
		SOUTH AMERICA	TO SUPPORT NGO LAW REFORM	.006,8	9,900.WIRE TRANSFER	O		
		SOUTH ASIA	TO SUPPORT NGO LAW REFORM	13,633.	13,633.WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	TO SUPPORT NGO LAW REFORM	10,000.	10,000.WIRE TRANSFER	.0		
		SUB-SAHARAN AFRICA	TO SUPPORT NGO LAW REFORM	20,450.	WIRE TRANSFER	á		
		SUB-SAHARAN AFRICA	TO SUPPORT NGO LAW REFORM	10,000.	10,000.WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	TO SUPPORT NGO LAW REFORM	10,000.	10,000.WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	TO SUPPORT NGO LAW REFORM	29,900.	29,900.WIRE TRANSFER	.0		
		SUB-SAHARAN AFRICA	TO SUPPORT NGO LAW REFORM	19,825.	19,825.WIRE TRANSFER	0		

INTERNATIONAL CENTER FOR NOT-FOR-PROFIT LAW. INC.

u.	LAW, INC.				52-1818273	273		Page
T T	of Grants and Other	Assistance to Organiza	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)	United States.	(Schedule F (Form 9	90), Part II, line 1		
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	TO SUPPORT NGO LAW REFORM	10,000,	10,000.WIRE TRANSFER	Ó		
		SUB-SAHARAN AFRICA	IO SUPPORT NGO LAW REFORM	14,436,	14,436,WIRE TRANSFER	o		
		SUB-SAHARAN AFRICA	IO SUPPORT NGO LAW REFORM	15,000,0	15,000.WIRE TRANSFER	0		
		SUB-SAHARAN APRICA	TO SUPPORT NGO LAW REFORM	10,000,	10,000,WIRE TRANSFER	0	·	
		SUB-SAHARAN AFRICA	TO SUPPORT NGO LAW REFORM	15,668.	15,668 MIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	to support ngo law reform	14,266.	14,266,WIRE TRANSFER	.0		
		SUB-SAEARAN AFRICA	IO SUPPORT NGO LAW REFORM	15,000.	15,000 WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	IO SUPPORT NGO LAW REFORM	10,000.	10,000 WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	FO SUPPORT NGO LAW REFORM	732,828.	732,828.MIRE TRANSFER			

INTERNATIONAL CENTER FOR NOT-FOR-PROFIT LAW, INC.

监	LAW, INC.				52-1818273	73		Page 2
=	Grants and Other	Assistance to Organiz	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States, (Schedule F (Form 990), Part II, line 1)	e United States.	(Schedule F (Form 9	90), Part II, line	()	
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	TO SUPPORT NGO LAW REFORM	10,000.	10,000.WIRE TRANSFER	0		
					·			

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. 52-1818273 LAW, INC. Schedule F (Form 990) 2016

Page 3

Schedule F (Form 990) 2016 (h) Method of valuation (book, FMV, appraisal, other) (g) Description of noncash assistance (f) Amount of noncash assistance • (e) Manner of cash disbursement 11,400 WIRE TRANSFER (c) Number of (d) Amount of recipients cash grant Part III can be duplicated if additional space is needed. BOLIVIA, BRAZIL, CHILE, COLUMBIA, SOUTH AMERICA -(b) Region ARGENTINA, (a) Type of grant or assistance TO SUPPORT NGO LAW REFORM

Par	t IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X Yes	□ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	☐ Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	x Yes	□ No
	Schu	adule F (For	m 990\ 2016

Page 5

Part V | Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2: PAYMENT FOR SMALL GRANTS IS GENERALLY MADE IN TWO, OR MORE, DISBURSEMENTS, WITH THE FINAL DISBURSEMENT ISSUED ONCE THE FINAL REPORT HAS BEEN FILED. THE FORMAT OF THE FINAL REPORT IS DETERMINED BY THE APPROVED ACTIVITY TO BE SUPPORTED BY THE SMALL GRANT. FOR RESEARCH GRANTS, THE FINAL REPORT IS THE FINISHED RESEARCH PAPER, FOR GRANTS WHICH SUPPORT OTHER TYPES OF PROGRAM ACTIVITIES, SUCH AS WORKSHOPS, THE FINAL REPORT DETAILS THE ACCOMPLISHMENTS AND INCLUDES A FINANCE REPORT COMPARING ACTUAL COSTS TO THE APPROVED BUDGET. FOR GRANTS THAT EXCEED THE SMALL GRANT THRESHOLD, THE GRANTEE RECEIVES AN INITIAL ADVANCE, BASED ON THEIR CALCULATED NEEDS FOR THE ADVANCE PERIOD. THE GRANTEE MUST THEN SUBMIT A REPORT WHICH LIQUIDATES THE ADVANCE AND A REQUEST FOR THE NEXT DISBURSEMENT, FOR SUBSTANTIAL GRANTS, GRANTEES SUBMIT MONTHLY REPORTS; OTHER GRANTEES SUMIT QUARTERLY REPORTS. THE LIQUIDATION REPORT INCLUDES A COMPARISON OF ACTUAL COSTS TO THE APPROVED BUDGET, AND MAY ALSO INCLUDE COPIES OF SUPPORTING DOCUMENTATION, RECEIPTS, ETC. PART IV, LINE 6: IN 2016, ICNL PROGRAMS INCLUDED ACTIVITIES IN, OR WITH NATIONALS OF, COUNTRIES IDENTIFIED BY THE U.S. TREASURY AS PARTICIPATING IN INTERNATIONAL BOYCOTTS NOT SANCTIONED BY THE U.S. GOVERNMENT. THIS INCLUDES IRAQ, LEBANON, LIBYA, SAUDI ARABIA AND YEMEN.

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 ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ▶ Attach to Form 990. INTERNATIONAL CENTER FOR NOT-FOR-PROFIT criteria used to award the grants or assistance? General Information on Grants and Assistance Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE (Form 990) Part

Part II

Employer identification number Open to Public 2016 OMB No. 1545-0047 Inspection 52-1818273

x Yes 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 dublicated if additional space is needed	\$5,000. Part II car	n be duplicated if addit	ional space is need	- Per			6 m 15 1 1 2 m 1 1
1 (a) Name and address of organization or government	(p) 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 noncash assistance	(h) Purpose of grant or assistance
DUE PROCESS OF LAW FOUNDATION							
NW, SUITE 710 - WASHINGTON, DC							
20036	52-1973930	501(C)(3)	165,323,	0			STRENGTHEN INTER-AMERICAN HIMAN PICTUS SYSMEY
ARTICLE 19 US							Marcie Cillotty among
C/O CHAPEL AND YORK,1000 NORTH				•			
WEST STREET, SUITE 1200 -							IMPLEMENTING THE CIVIC
WILMINGTON, DE 1980	27-1337098	501(C)(3)	43,688.	0.			SPACE INITIATIVE
NATIONAL ENDOWMENT FOR DEMOCRACY							
1025 F STREET NW, SUITE 800							TABLE ENTRYMENT PROFES
WASHINGTON, DC 20004	52-1344831	501(C)(3)	196,023.	0			SPACE INTELLEDING THE CIVIC
							GATTUTTE CALL
							
,							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	ind government o	rganizations listed in th	ne line 1 table				6
	eni est ei beteil e	4 4444		•	***************************************		
S Little total littline of outer organization	s isted in the line	l table		***************************************			0
LHA For Paperwork Keduction Act Notice, see the instructions for Form 990,	, see the instruc	tions for Form 990.					Schedule I (Form 990) (2016)

Schedule I (Form 990) (2016)

Page 2 (f) Description of noncash assistance 52-1818273 (e) Method of valuation (book, FMV, appraisal, other) Part IV | Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. 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. (d) Amount of non-cash assistance 126,000. (c) Amount of cash grant 47 IN TWO, OR MORE, DISBURSEMENTS, WITH THE FINAL DISBURSEMENT ISSUED ONCE THE PAYMENT FOR SMALL GRANTS, WEICH ARE FIXED AMOUNT AWARDS, IS GENERALLY MADE THE FORMAT OF THE FINAL REPORT IS DETERMINED BY THE APPROVED ACTIVITY TO BE SUPPORTED BY THE SMALL GRANT. FOR RESEARCH REPORT DETAILS THE ACCOMPLISHMENTS AND INCLUDES A FINANCE REPORT COMPARING GRANTS, THE FINAL REPORT IS THE FINISHED RESEARCH PAPER, FOR GRANTS WHICH SUPPORT OTHER TYPES OF PROGRAM ACTIVITIES, SUCH AS WORKSHOPS, THE FINAL (b) Number of recipients (a) Type of grant or assistance ACTUAL COSTS TO THE APPROVED BUDGET. FINAL REPORT HAS BEEN FILED. RESEARCH FELLOWSHIP GRANT Schedule I (Form 990) (2016) PART I, LINE 2: 632102 11-01-16 Part III

Schedule I (Form 990) LAW, INC.	52-1818273	Page 2
Part IV Supplemental Information		
FOR GRANTS THAT EXCEED THE SMALL GRANT THRESHOLD, THE GRANTEE RECEIVES AN		
INITIAL ADVANCE, BASED ON THEIR CALCULATED NEEDS FOR THE ADVANCE PERIOD.		
THE GRANTEE MUST THEN SUBMIT A REPORT WHICH LIQUIDATES THE ADVANCE AND A		
REQUEST FOR THE NEXT DISBURSEMENT. FOR SUBSTANTIAL GRANTS, GRANTEES MAY BE		
REQUEST FOR THE MEAT DISDONSEMENT. FOR SUBSTRUITED GRANTS, GRANTEDS MAT BE		
REQUIRED TO SUBMIT MONTHLY REPORTS; OTHER GRANTEES SUBMIT QUARTERLY		
REPORTS. THE LIQUIDATION REPORTS INCLUDES A COMPARISON OF ACTUAL COSTS TO		
THE CONTROL OF THE WAY AND ANY AND THE THE THE THE THE THE THE THE THE THE		
THE APPROVED BUDGET, AND MAY ALSO INCLUDE COPIES OF SUPPORTING		
DOCUMENTATION, RECEIPTS, ETC.		
THE RESERVE OF THE PROPERTY OF		

SCHEDULE J (Form 990)

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.
Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

INTERNATIONAL CENTER FOR NOT-FOR-PROFIT LAW, INC.

52-1818273

P	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,		'	1
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		ł	1
	First-class or charter travel Housing allowance or residence for personal use		1	
	Travel for companions Payments for business use of personal residence	1		
	Tax indemnification and gross-up payments Health or social club dues or initiation fees	İ		
	Discretionary spending account Personal services (such as, maid, chauffeur, chef)			
				ł
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	1b		
2		-		
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		ļ
				Ι.
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's	1		
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to	1 .		
	establish compensation of the CEO/Executive Director, but explain in Part III.	1.		
	Compensation committee Written employment contract			
	Independent compensation consultant			ľ
	Form 990 of other organizations Approval by the board or compensation committee			
				l
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			1
	organization or a related organization:			
	Receive a severance payment or change-of-control payment?			Х
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?		$oxed{oxed}$	х
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a.c, list the persons and provide the applicable amounts for each item in Part III.			
				1
	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:			
	The organization?	5a		<u> </u>
b	Any related organization?	5b		X
	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:			
а	The organization?	6a		X
b	Any related organization?	6b	S. 1853	Х
_	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			97
_	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
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	8	77.7	Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2016

Schedule J (Form 990) 2016

LAW, INC.

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

52-1818273

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

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

	Ī						;	
		(B) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	ple	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benefits	(a)-(v)(a)	in column (B) reported as deferred on prior Form 990
(1) DOUGLAS RUTZEN	Ξ	177,066.	0	0.	18,046.	6,767.	201 879	
DENT	€	0	0	0	0	0	0	
SHEA	(3)	146,120.	0	0	14,780.	12,122.	173,022,	0
MS	(ii)	0	0	0.	0	0	0	c
URJAILY	ω	141,518.	0	0	14,404.	5,466.	161,388,	0
PRESIDENT, EURASIA	⊞		0.	0.	0	0	0	0
DAVID MOORE	Ξ	137,199.	.0	0	13,775.	9,050.	160,02	0
VP, LEGAL AFFAIRS	Ξ	.0	0.	0	0	0		0
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01 CO CO COLUMN				ני			Schedu	Schedule J (Form 990) 2016

Schedule J (Form 990) 2016 Schedule J (Form 990) 2016 LAW, INC.

Part III | Supplemental Information

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.

SCHEDULE 0

(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.

2016
Open to Public Inspection

Name of the organization

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.lrs.gov/form990.

INTERNATIONAL CENTER FOR NOT-FOR-PROFIT Emplo

LAW, INC.

Employer Identification number 52-1818273

FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES: JORDAN, HUNGARY, KAZAKHSTAN, KYRGYZSTAN TAJIKISTAN, TURKMENISTAN, RUSSIA, UKRAINE FORM 990, PART VI, SECTION A, LINE 4: IN 2016, ICNL'S BOARD OF DIRECTORS AMENDED AND RESTATED THE BYLAWS. MAJOR CHANGES ARE (A) SETTING TERM LIMITS FOR ADVISORY COUNCIL MEMBERS AND (B) SETTING A REQUIREMENT THAT DIRECTORS SERVING ON THE AUDIT COMMITTEE OBTAIN APPROVAL FROM A MAJORITY OF THE DISINTERESTED MEMBERS OF THE BOARD FOR THE RECEIPT OF COMPENSATORY FEES ABOVE \$3,500 PER ANNUM, FOR SERVICES RENDERED TO ICNL. PRIOR BYLAWS PROHIBITED DIRECTORS FROM SERVING ON THE AUDIT COMMITTEE IF THEY RECEIVED CONSULTING FEES FROM ICNL. COMMITTEE MEMBERS DO NOT RECEIVE COMPENSATION FOR THEIR SERVICE ON THE AUDIT COMMITTEE, NOR DO DIRECTORS RECEIVE COMPENSATION FOR THEIR SERVICE ON THE BOARD OF DIRECTORS. AT TIMES, HOWEVER, IT MAY BE IN THE BEST INTEREST OF ICNL TO UTILIZE SKILLS OF INDIVIDUALS AS PAID CONSULTANTS, IN LINE WITH ICNL'S CONFLICT OF INTEREST POLICY AND WITHOUT PREVENTING SAID PERSON FROM SERVING ON ICNL'S BOARD OF DIRECTORS OR AUDIT COMMITTEE. THE REVISED BYLAWS ADDRESS POTENTIAL CONFLICTS OF INTEREST, WHILE AT THE SAME TIME ADVANCING ICNL'S INTEREST IN BENEFITTING FROM THE PROFESSIONAL EXPERTISE OF THOSE INDIVIDUALS, FORM 990, PART VI, SECTION B, LINE 11B: THE 990 WAS PREPARED BY THE OUTSIDE ACCOUNTANTS AND REVIEWED BY SENIOR MANAGEMENT. THE DRAFT 990 WAS SUBMITTED TO THE AUDIT COMMITTEE AND THEN TO THE ENTIRE BOARD OF DIRECTORS FOR REVIEW BEFORE FILING. Schedule O (Form 990 or 990-EZ) (2016) LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

632211 08-25-16

632212 08-25-16

Schedule O (Form 990 or 990-EZ) (2016)	Page
Name of the organization INTERNATIONAL CENTER FOR NOT-FOR-PROFIT LAW, INC.	Employer Identification number 52–1818273
TWO BOARD MEMBERS RECEIVED COMPENSATION FOR PROVIDING PROGRAM SERV	ICES
TO THE ORGANIZATION AND NOT FOR SERVICE AS A BOARD MEMBER.	
RADY OOO DARM TY I THE 114 AMILE BERG.	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
LOCAL HIRES AND LOCAL PARTNERS:	
PROGRAM SERVICE EXPENSES	933,933.
MANAGEMENT AND GENERAL EXPENSES	351.
FUNDRAISING EXPENSES	6,508.
TOTAL EXPENSES	940,792.
INDEPENDENT CONTRACTORS:	
PROGRAM SERVICE EXPENSES 1,	161,003.
IANAGEMENT AND GENERAL EXPENSES	28,964.
PUNDRAISING EXPENSES	3,812.
	193,779.
OTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A 2,	134,571.
ART IX, LINE 11G:	
EES FOR SERVICES, OTHER: THIS PRIMARILY CONSISTS OF FEES PAID TO	
ONSULTANTS, IN -COUNTRY PARTNERS, AND CERTAIN FIELD STAFF WHO ASSI	ST
TH PROGRAM IMPLEMENTATION.	
ART IX, LINE 17:	
RAVEL CONSISTS OF AIRFARES , LODGING AND, IN SOME CASES, PER DIEM	
LLOWANCES ASSOCIATED WITH BRINGING PROGRAM PARTICIPANTS TO TRAINING	· ·
ITHIN THEIR COUNTRY, TO REGIONAL MEETINGS, AND TO INTERNATIONAL 32212 08-25-16	Schedule O (Form 990 or 990-EZ) (2016
54	

Name of the organization INTERNATIONAL CENTER FOR NOT-FOR-PROFIT LAW, INC.	Employer identification number 52-1818273
EVENTS. THIS CATEGORY ALSO INCLUDES TRAVEL COSTS FOR ICNL'S FELLOWSHIP	
PROGRAMS, WHICH BRING LOCAL CSO LEADERS TO A HOST CSO IN ANOTHER	
COUNTRY, OR TO AN ICUL OFFICE. IN ADDITION TO THESE ACTIVITIES, THIS	
CATEGORY COVERS COSTS OF SENDING ICNL EMPLOYEES TO A COUNTRY TO PROVIDE	
TECHNICAL ASSISTANCE , TO MEET WITH PARTNERS, TO CONDUCT TRAININGS AND	
WORKSHOPS, AND TO CARRY OUT PROGRAMMATIC ACTIVITIES.	
	William Control of the Control of th
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· ·	

(g) Section 512(b)(13) controlled Š 'OR NOT-FOR-PROFIT LAW, Employer identification number Open to Public Inspection OMB No. 1545-0047 × 2016 entity? INTERNATIONAL CENTER Direct controlling Yes 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. entity Ξ 52-1818273 Direct controlling entity 481,251.HNC. CNL, INC. End-of-year assets Public charity status (if section 501(c)(3)) **e** Related Organizations and Unrelated Partnerships Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. 1,551,343. ► Information about Schedule R (Form 990) and its instructions is at www.is.gov/form990. INTERNATIONAL CENTER FOR NOT-FOR-PROFIT Total income Exempt Code section Ē OREIGN ENTITY Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Legal domicile (state or Legal domicile (state or foreign country) foreign country) ► Attach to Form 990. ELAWARE TUNGARY PROMOTES STRENGTHENING OF ENABLING ENVIRONMENT FOR SUPPORTIVE LEGAL ENV. SERVICES TO PROMOTE AN Primary activity Primary activity FOR CIVIL SOCIETY Ô CIVIL SOCIETY INTERNATIONAL CENTER FOR NOT-FOR-PROFIT LAW, LLC - 20-5736798, 1126 16TH STREET, SUITE EUROPEAN CENTER FOR NON-FOR-PROFIT LAW Name, address, and EIN (if applicable) APACZAI SCERE JANOS U. 17, 1ST FLOOR LAW, INC. Name, address, and EIN of related organization of disregarded entity WASHINGTON, DC 20036 BUDAPEST 1052, HUNGARY Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990) Part II Part 400,

Schedule R (Form 990) 2016

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

Schedule R (Form 990) 2016 LAW, INC.

Schedule R (Form 990) 2016 LAW, INC.

Form 990, 2016 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.

Page 2

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(a) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	•	1 1	Code V4UBI amount in box 20 of Schedule		General or Percentage managing ownership
							<u> </u>	1		No.	·
Part IV Identification of Related Organizations Taxable as a organizations treated as a corporation or trust during the	janizations Taxable apporation or trust durin	as a Corporation of the tax year.	oration or Trust. Co year.	Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax year.	ion answered "Y	es" on Form 9	90, Part IV, I	ine 34 bec	cause it had o	one or m	ore related
(a) Name, address, and EIN of related organization	<u>N</u> c	Prim	(b) Primary activity	(c) (d) (d) (este or controlling feate or feate or feate or feath)		(e) Type of entity (C corp., S corp., or trust)	(f) Share of total income	Sha end-c	(g) Share of Perend-of-year ow	(h) Percentage ownership	Section 512(b)(13) controlled entity?
		·									
		į									
632162 09-06-16				57					Schedul	e R (For	Schedule R (Form 990) 2016

schedule R (Form 990) 2016 LAW, INC.			52-1818273	18273	Page 3
Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.	wered "Yes" on Fon	n 990, Part IV, line 34, 35b	, or 36.		
粪				<u>´</u>	Vec
1 During the tax year, did the organization engage in any of the following transaction	s with one or more r	to following transactions with one or more related organizations listed in Parts II-IV?	in Parts II-IV?		_
				-	×
 b Gift, grant, or capital contribution to related organization(s) 				;	
c Giff grant or canital contribution from related oxygnization(s)			***************************************	<u></u>	4
ייין פוריין כי כקריים כי ייייסליטו ווסווו ויסווויס טפשוובמנוטווןס)				1	×
: ou(s)				7	×
e Loans or loan guarantees by related organization(s)					×
			***************************************	<u>a</u>	4
f Dividends from related organization(s)					
	***************************************			¥ 	×
				- 1g	×
				L	×
Exchange of assets with related organization(s)				 	
<u>e</u>				= -	4
				=	×
k lease of facilities equipment or other sesate from related accomings (a)					
				¥	×
i enclinance di services di inembership di fundialsing solicitations for related organization(s)	ınızation(s)			=	×
m Performance of services or membership or fundraising solicitations by related organization(s)	nization(s)			<u>=</u>	×
	on(s)			÷	×
 Sharing of paid employees with related organization(s) 					
			***************************************	2	4
b Beimbursement baid to related oxnanization(s) for expenses					
	***************************************		***************************************	4	×
4 nembusement paro by related organization(s) for expenses		•••••••••••••••••••••••••••••••••••••••		10	×
r Other transfer of cash or property to related organization(s)	•			<u></u>	×
s Other transfer of cash or property from related organization(s)					,
2 If the answer to any of the above is "Yes " see the instructions for information on "	totoleanor to me och	the first state of the state of	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	SL	×
in times income in	and must complete	nis 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	unt involved	
1) EUROPEAN CENTER FOR NOT-FOR-PROFIT LAW	Ā	308,726.	INVOICES FOR ACTUAL EXPENSES		
3			-		
6					
4)					
(2)					
(9)					
32163 09-06-16	58		Sche	Schedule R (Form 990) 2016	990) 2016
				•	•

Schedule R (Form 990) 2016 LAW, INC.

2-1818273

Page 4

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

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

urat was not a related ofganization. See instructions regarding exclusion for certain investment partnerships,	structions regarding exclu	sion for certain inve	stment partnerships.					+	•
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Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	Predominant income parters se. (related, unrelated, 501(6)(3) excluded from tax under onts.	Share of total	Share of end-of-year	Dispropor- tionate allocations?	Code V-UBI General or Percentage amount in box 20 managing ownership of Schedule K-1	General o managing partner?	Percentage ownership
		1	Secucins 3 (2-3 14) Yes No	9100	assets	Yes No	(Form 1065)	Yes No	
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Schedule R (Form 990) 2016

Form **8868** (Rev. January 2017)

Application for Automatic Extension of Time To File an **Exempt Organization Return**

Department of the Treasury Internal Revenue Service

File a separate application for each return. Information about Form 8868 and its instructions is at www.lrs.gov/form8868. OMB No. 1545-1709

Electronic filling (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit

Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990 T (including 1120 C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number Employer identification number (EIN) or Name of exempt organization or other filer, see instructions. Type or INTERNATIONAL CENTER FOR NOT-FOR-PROFIT print 52-1818273 Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN) due date for filing your 1126 16TH STREET, N.W., NO. 400 return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. WASHINGTON, DC 20036 Enter the Return Code for the return that this application is for (file a separate application for each return) Return **Application** Return Application Is For Code Is For Code Form 990 or Form 990-EZ Form 990-T (corporation) 07 01 Form 990-BL Form 1041-A 08 Form 4720 (other than individual) Form 4720 (individual) 03 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 The books are in the care of DARLA MECHAM Telephone No. (202) 452-8600 Fax No. If the organization does not have an office or place of business in the United States, check this box ______ > \[\] If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for. NOVEMBER 15, 2017 I request an automatic 6-month extension of time until , to file the exempt organization return for the organization named above. The extension is for the organization's return for: X calendar year 2016 or tax year beginning , and ending If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Change in accounting period 3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. За b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 0. estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due, Subtract line 3b from line 3a, Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2017)