** PUBLIC DISCLOSURE COPY **

Form **990**

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047

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

Open to Public Inspection

A	For th	e 2018 calendar year, or tax year beginning an	d ending		<u> </u>						
В	Check if applicab	C Name of organization INTERNATIONAL CENTER FOR NOT-FOR-PROFIT		D Employer iden	tification number						
	Addre	59									
F	Name chang			52-1	.818273						
F	Initial return	N. J.	Room/suite	E Telephone num	nber						
F	Final	1126 16TH GTREFT N W	400	1	1)452-8600						
	— return termir ated			G Gross receipts \$	16,208,581.						
Г	Amen	ded systemation DC 20026		H(a) Is this a grou	p return						
F	Appli			for subordina							
	pendi	SAME AS C ABOVE			res included? Yes No						
$\overline{\Gamma}$	Tax-ex	empt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527	4	h a list. (see instructions)						
		te: Www.ICNL.ORG	•	H(c) Group exemp	otion number						
		organization: X Corporation Trust Association Other	L Year	of formation: 1992	M State of legal domicile: DE						
		Summary									
_ _	1	Briefly describe the organization's mission or most significant activities: RESEA	RCH ORGANI	ZATION ON THE							
Activities & Governance		LEGAL FRAMEWORK FOR CIVIL SOCIETY, PHILANTHROPY, AND PARTIC									
rne	2	Check this box if the organization discontinued its operations or disp	osed of more	than 25% of its ne	t assets.						
Š	3	Number of voting members of the governing body (Part VI, line 1a)	,,,,		3 8 4 8						
জ	4	Number of independent voting members of the governing body (Part VI, line 1b)	independent voting members of the governing body (Part VI, line 1b)								
8	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)		5 34							
差	6	Total number of volunteers (estimate if necessary)			6 0						
Ş	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			7a 0.						
_	b	Net unrelated business taxable income from Form 990-T, line 38	<u></u>		7b 18,133.						
				Prior Year	Current Year						
ē	8	Contributions and grants (Part VIII, line 1h)		10,017,61							
ell	9	Program service revenue (Part VIII, line 2g)		229,61							
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		36,01							
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,70							
_		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		10,284,94	<u> </u>						
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	829,50								
		Benefits paid to or for members (Part IX, column (A), line 4)		0. 0.							
Š	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10		2,924,83							
Expenses	1 6 a	Professional fundraising fees (Part IX, column (A), line 11e)			0. 0.						
꼾	_b	Total fundraising expenses (Part IX, column (D), line 25)		3,408,74	2. 4.288.349.						
_	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		7,163,07							
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		3,121,87							
		Revenue less expenses. Subtract line 18 from line 12		ginning of Current Ye							
Its or	3 00	Total access (Dest V. Ban 40)	De	14,156,96							
let Assets	20	Total assets (Part X, line 16)		438,99							
et l	21	Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20		13,717,97							
Ē	22 art II			,,							
		alties of perjury, I declare that I have examined this return, including accompanying schedu	les and statem	ents, and to the best o	f my knowledge and belief, it is						
		et, and complete. Declaration of preparer (other than officer) is based on all information of			,, .						
		Roeslas Alta		9/2	7/10						
Sig	ın	Signature of officer		Date	7-1						
He		DOUGLAS RUTZEN, PRESIDENT									
110	••	Type or print name and title			· · · · · · · · · · · · · · · · · · ·						
		Print/Type preparer's name Preparer's signature		Date Check	PTIN						
Pai	d	STEVEN C. DARR, CPA, CMA	レー	9/25/19 self-em	ployed P01324904						
	parer	Firm's name CALIBRE CPA GROUP PLLC		Firm's EIN							
	Only	Firm's address 7501 WISCONSIN AVENUE, SUITE 1200 WEST									
	•	BETHESDA, MD 20814		Phone no.2	02-331-9880						
Ma	y the I	RS discuss this return with the preparer shown above? (see instructions)			X Yes No_						
	001 12-		tions	•	Form 990 (2018)						

THE INTERNATIONAL CENTER FOR NOT-FOR-PROFIT LAW IS AN INTERNATIONAL RESEARCH ORGANIZATION THAT PROMOTES AN ENABLING LEGAL ENVIRONMENT FOR CIVIL SOCIETY, FREEDOMS OF ASSOCIATION, ASSEMBLY, AND EXPRESSION; AND

Briefly describe the organization's mission:

	2	
83200	002 12-31-18	Form 990 (2018
4e	C 05C 505	
4d	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$	
4b) (Code:) (Expenses \$) (Revenue \$)	
	MATERIALS, IN MULTIPLE LANGUAGES.	
	INITIATIVES, AND A PUBLICLY AVAILABLE ON-LINE LIBRARY OF NGO LEGAL	
	ACTIVITIES INCLUDE TECHNICAL ASSISTANCE ON THE ENABLING ENVIRONMENT FOR CIVIL SOCIETY, CONFERENCES, RESEARCH AND PUBLICATIONS, UNIVERSITY	···
	PHILANTHROPY, AND CIVIC PARTICIPATION. IN 2018, ICNL UNDERTOOK PROJECTS IN ASIA, AFRICA, THE AMERICAS, THE MIDDLE EAST, EUROPE AND EURASIA.	
4a	revenue, if any, for each program service reported. a (Code:) (Expenses \$6,956,505. including grants of \$1,359,237.) (Revenue \$	6,700.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measure Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the	total expenses, and
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.	Yes X No
2	PUBLIC PARTICIPATION AROUND THE WORLD. Did the organization undertake any significant program services during the year which were not listed on the	
	PUBLIC PARTICIPATION AROUND THE WORLD	

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

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22_		Х
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	23	x	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	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		Х
	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		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24α		
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	25a		х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	ZUA		
D	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Outcode L. Book	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	1.00		
20	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		x
27	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		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			· _
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
¢	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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?	ا ما		x
	If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? # "Yes," complete Schedule N, Part !!	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	X.	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	х	-
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	_		x
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	ا ۵٫	x	
07	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
00		38	x	
Par				
	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>		X
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		:	. ,
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0]		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
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		INIBIARIZONAD CENTER FOR NOT-FOR-FROFIT				
Form	990 ((2018) LAW, INC.	52-1818273		Р	age 5
Pa	rt V	Statements Regarding Other IRS Filings and Tax Compliance (continued)				
					Yes	No
2a	Ente	r 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 34			
b	If at	least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	2b	Х	<u> </u>
	Note	e. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) .,,,		· ;	
За	Did t	he organization have unrelated business gross income of \$1,000 or more during the year?		За	Х	
		es," has it filed a Form 990 T for this year? If "No" to line 3b, provide an explanation in Schedule C)	3ъ	X	
		ny time during the calendar year, did the organization have an interest in, or a signature or other a				
		ncial account in a foreign country (such as a bank account, securities account, or other financial a		4a	х	
b		es," enter the name of the foreign country: > SEE SCHEDULE O	,			
~		instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac	counts (FBAR).			
5a		the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		х
b		any taxable party notify the organization that it was or is a party to a prohibited tax shelter transac		5b		x
		es" to line 5a or 5b, did the organization file Form 8886-T?		5c		
		s the organization have annual gross receipts that are normally greater than \$100,000, and did th				
UM		contributions that were not tax deductible as charitable contributions?		62		х
h		es," did the organization include with every solicitation an express statement that such contributi				
				6b		
,		enot tax deductible? anizations that may receive deductible contributions under section 170(c).	•,,,	٣		
7		ne organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and sen	ices provided to the payor?	7a		x
a				7b		
b		, ,	a required	۳	-	\vdash
C		he organization sell, exchange, or otherwise dispose of tangible personal property for which it was		7c		x
		e Form 8282?	7d	٠.		
d		es," indicate the number of Forms 8282 filed during the year		7e		x
0		he organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or		71		х
1		he organization, during the year, pay premiums, directly or indirectly, on a personal benefit control		7g		<u> </u>
g		e organization received a contribution of qualified intellectual property, did the organization file Fo		7h		
h		e organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiza				
8	-	nsoring organizations maintaining donor advised funds. Did a donor advised fund maintained		١,		
_	-			8_		
9	-	nsoring organizations maintaining donor advised funds.			:	
a				9a		_
b		he sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10		ion 501(c)(7) organizations. Enter:	1	١.		
а		, , , , , , , , , , , , , , , , , , , ,	10a	1		
b		- to the first the second of t	10b			
11		ion 501(c)(12) organizations. Enter:	اید	l [.]		ı
а			11a	ŀ · ·	1 .1	l
b		s income from other sources (Do not net amounts due or paid to other sources against	441			ı
			11b			
		ion 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		—
b			12b	·		
13		ion 501(c)(29) qualified nonprofit health insurance issuers.				-
а		e organization licensed to issue qualified health plans in more than one state?		13a		
		a. See the instructions for additional information the organization must report on Schedule O.				
þ		r the amount of reserves the organization is required to maintain by the states in which the	. 1		4	ı
	-		13b			ı
C		r the amount of reserves on hand	13c			
14a		,,,,	,,,,	14a		Х
b		es," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule		14b		
15	Is the	e organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune	ation or			
	ехсе	ss parachute payment(s) during the year?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	15		Х
		es," see instructions and file Form 4720, Schedule N.		<u> </u>		
16	Is the	e organization an educational institution subject to the section 4968 excise tax on net investment	income?	16		Х

Form **990** (2018)

If "Yes," complete Form 4720, Schedule O.

LAW, INC.

52-1818273

Pa	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule C	_		a "No" i	respor	ıse
	Check if Schedule O contains a response or note to any line in this Part VI					х
Sec	tion 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	1a		8		
	If there are material differences in voting rights among members of the governing body, or if the governing			1		
	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	1b		8		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi				ĺ	
	officer, director, trustee, or key employee?			. 2		Х
3	Did the organization delegate control over management duties customarily performed by or under the		•			۱
	of officers, directors, or trustees, or key employees to a management company or other person?					X
4	Did the organization make any significant changes to its governing documents since the prior Form S					X
5	Did the organization become aware during the year of a significant diversion of the organization's as					X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a more members of the governing body?			7a		х
d	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	stockh	olders, or			
	persons other than the governing body?			7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year					
а	The governing body?			. 8a	x	
b	Each committee with authority to act on behalf of the governing body?				х	
9	is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	iched a	it the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenus	Code.)			
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a	X	<u> </u>
b	If "Yes," did the organization have written policies and procedures governing the activities of such cl	hapter	s, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes? \Box			10b	х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	y befo	re filing the form?	11a	х	
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	<u> </u>
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to conf	licts?	12b	Х	<u>L</u>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y in Schedule O how this was done			12c	х	
13	Did the organization have a written whistleblower policy?			_	x	
14	Did the organization have a written document retention and destruction policy?				X	
15	Did the process for determining compensation of the following persons include a review and approve			1		
10	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	-	dependent			
а	The organization's CEO, Executive Director, or top management official			15a	х	
	Other officers or key employees of the organization			15b	X	
_	if "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	•••••				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	nent w	ith a			
	taxable entity during the year?			16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ					
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ▶IL,NY,NM,MI,WA		-			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, an	id 990-	T (Section 501(c)	3)s only	availa	able
	for public inspection, Indicate how you made these available. Check all that apply.			,		
	X Own website Another's website X Upon request Other (explain	in Sch	edule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, con			nd finan	cial	
	statements available to the public during the tax year.		F			
20	State the name, address, and telephone number of the person who possesses the organization's bo	oks an	d records 🕨			
	DARLA MECHAM - (202)452-8600 1126 16TH STREET, N.W., NO.400, WASHINGTON, DC 20036					
	, , , , , , , , , , , , , , , , , , , ,			Form	000	(2010)
832006	12-31-18			FULL	20U	(2018)

Form 990 (2018)

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

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

х

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.

1) OONAGH BREEN	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee			ated		the organization	organizations (W-2/1099-MISC)	compensation
1) CONAGH BREEN	4.00	_	_ ≝	ОЩсег	Кеу етрюуве	Highest compensated employee	Former	(W-2/1099-MISC)	(44-5) (1099-IAII20)	from the organization and related organizations
]								
HAIR		Х		х				1,000,	0.	0
2) BARBARA IBRAHIM	4.00									
TICE CHAIR		х		Х				0.	0.	0
3) SUNBETA KAIMAL	4.00	[
REASURER		Х		Х				0.	0.	0
4) EMILE VAN DER DOES DE WILLEBOIS	4.00									
ECRETARY		X		X				0.	0.	0
5) FELICIANO REYNA GANTEAUME	4.00									_
IRECTOR		X				<u> </u>		0.	0.	0
6) BINDU SHARMA	4.00								_	_
IRECTOR		Х				Ļ		0.	0,	0
7) MARY BETH GOODMAN	4.00								_	_
IRECTOR		Х						0.	0.	0
8) W. AUBREY WEBSON	4.00							_	_	_
IRECTOR		Х					_	0.	0.	
9) DOUGLAS RUTZEN	40.00									24 04
RESIDENT				х				185,217.	0,	31,363
10) DARLA MECHAM	40.00			 						34 255
ICE PRESIDENT, FINANCE				х	<u> </u>	<u> </u>	<u> </u>	129,606.	0,	31,375
11) CATHERINE SHEA	40.00								_	
ICE PRESIDENT, PROGRAMS					Х			157,112.	0.	29,442
12) DAVID MOORE	40.00					l				20 54
ICE PRESIDENT, LEGAL AFFA		_				Х	<u> </u>	149,169.	0,	22,716
13) NATALIA BOURJAILY	40,00	l				l		4.5 450	0	10.66
ICE PRESIDENT, EURASIA	10.00				_	Х		147,158.	0.	19,663
14) A. NILDA BULLAIN	40,00	l						*	0.	06.035
ICE PRESIDENT, OPERATIONS		_	<u> </u>		_	Х	H	144,317.	0.	26,037
15) JOCELYN NIEVA	40,00	ł				,		400 044		25 25
R. LEGAL ADVISOR, LATIN A	40.00	_			<u> </u>	X	\vdash	129,011.	0.	25,364
16) CLAUDIA GUADAMUZ	40.00	ł				,		100 000	_	10 040
EGAL ADVISOR - LATIN AMERICA		\vdash		\vdash	\vdash	х		109,899.	0.	19,049
			'							Form 990 (201

d Total (add lines 1b and 1c) 1,152,489 0. 205,009 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable	Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	/005	, an	αH	ighe	st (Compensated Employe	es (continued)				
## Complete Schedule 1 1 1 1 1 1 1 1 1	• •	Average		not c	Pos heck	itior more	than		Reportable	Reportable			stimat	
1b Sub-total		week (list any	offi			lirecto	or/trus	tee)	from the	from related organization:	l s	com	other opensa	ation
1b Sub-total		related organizations	ral trustee or I	ional trustee		ployee	t compensate ee			(17 Z) 1000 IIIIC	,	org an	janizat d relat	tion ted
C Total from continuation sheets to Part VII, Section A		I	Individa	Instituti	Officer	Key em	Highest employ	Former				orga	arıızatı	
C Total from continuation sheets to Part VII, Section A														
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C Total from continuation sheets to Part VII, Section A							 				_			
C Total from continuation sheets to Part VII, Section A											\dashv			
C Total from continuation sheets to Part VII, Section A										<u>-</u>				
C Total from continuation sheets to Part VII, Section A	1b Sub-total						<u></u>	_	1,152,489.		0.		205	009
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 1 Yes No Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a' if "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? if "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? if "Yes," complete Schedule J for such person Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (C) Name and business address Description of services Compensation LEGAL TEAM CO LTD, MALY SNAMENSKAY PER, OFFICE 1 BLD 6 3/5, MOSCOW, RUSSIA FO SUPPORT NGO LAW REFORM 287, 115 MG CONSULTINE SAT PLAZA, 4TH FLOOR, BAKU, AZERBAIJAN CAPACITY BUILDING OF NGOS 105, 890 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization									0.					0,
The compensation from the organization 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (C) Name and business address Description of services Compensation LEGAL TEAM CO LTD, MALY SNAMENSKAY PER, OFFICE 1 BLD 6 3/5, MOSCOW, RUSSIA TO SUPPORT NGO LAW REFORM 287, 115 MG CONSULTING SAT PLAZA, 4TH FLOOR, BAKU, AZERBAIJAN CAPACITY BUILDING OF NGOS 105, 890 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization. 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization. 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization. 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization.									<u> </u>		- •		205,	,009
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4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) Name and business address Description of services Compensation LEGAL TEAM CO LTD, MALY SNAMENSKAY PER, OFFICE 1 BLD 6 3/5, MOSCOW, RUSSIA FO SUPPORT NGO LAW REFORM 287,115 MG CONSULTING SAT PLAZA, 4TH FLOOR, BAKU, AZERBAIJAN CAPACITY BUILDING OF NGOS 105,890 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization. 2												,	100	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) Name and business address Compensation LEGAL TEAM CO LTD, MALY SNAMENSKAY PER, OFFICE 1 BLD 6 3/5, MOSCOW, RUSSIA FO SUPPORT NGO LAW REFORM 287, 115 MG CONSULTING SAT PLAZA, 4TH FLOOR, BAKU, AZERBAIJAN CAPACITY BUILDING OF NGOS 105,890 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization. 2	4 For any individual listed on line 1a, is the su	m of reportabl	e co	mpe	ensa	ition	and	ot	her compensation from t	he organization				
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OFFICE 1 BLD 6 3/5, MOSCOW, RUSSIA FO SUPPORT NGO LAW REFORM 287,115 MG CONSULTING SAT PLAZA, 4TH FLOOR, BAKU, AZERBAIJAN CAPACITY BUILDING OF NGOS 105,890 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 2		address								ervices	С			n
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2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization > 2								4	TO SUPPORT NGO LAW	REFORM			287,	115.
\$100,000 of compensation from the organization 2		N						_	CAPACITY BUILDING	F NGOS			105,	890.
\$100,000 of compensation from the organization 2									• • • • • • • • • • • • • • • • • • • •					
\$100,000 of compensation from the organization 2								+						
4 Toda of a strip a total of the strain and a strain and a strain	2 Total number of independent contractors (in	ncluding but no	ot lin	nited	l to	thos	se lis	ted	above) who received m	ore than				
	\$100,000 of compensation from the organiz	ation 🕨				- 2	2				<u> </u>	Form!	990 /	2018\

LAW, INC

Pa	rt V	Ш	<u>l</u>							
•			Check if Schedule O cont	ains a re	sponse	or note to any lin	e in this Part VIII (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
돧돧	1 :	а	Federated campaigns		1a					
g j	1	b	Membership dues		1b					
Α̈́,		С	Fundraising events		1c					
			Related organizations		1d					
in,		е	Government grants (contribut	ions)	1e	12,606,699.				
ΪŠ	1	f	All other contributions, gifts, gran	ts, and						
ğğ.			similar amounts not included abo	ve	1f	2,420,626.				
Contributions, Gifts, Grants and Other Similar Amounts	ţ	g	Noncash contributions included in lines	1a-1f: \$						
<u> </u>		h	Total. Add lines 1a-1f				15,027,325.			
						Business Code				
8	2 8	а	CONTRACT INCOME			900099	6,700.	6,700.		
Σē	ı	b								
S a	•	Ç								
Program Service Revenue		d	1.44							
90	•	е								
Œ.	1	f	All other program service reve	nue			···			
			Total. Add lines 2a-2f				6,700.			
	3		Investment income (including			I				
			other similar amounts)				31,579.			31,579.
	4		Income from investment of ta							<u> </u>
	5		Royalties							
				(i) F	ieal _	(ii) Personal				
			Gross rents							j
			Less: rental expenses						• •	
			Rental income or (loss)			L				
			Net rental income or (loss)							
	7 :		Gross amount from sales of		urities	(ii) Other				
			assets other than inventory	96	9,984				•	· .
			Less: cost or other basis					·		
			and sales expenses	-	5,914					
			Gain or (loss)		4,070		4 070			4.070.
			Net gain or (loss)			······	4,070.			4,0,0,
enne	8:		Gross income from fundraisin including \$	c	of					
Other Rev			contributions reported on line							· ·
ĕ	_		Part IV, line 18				·			
5			Less: direct expenses							
			Net income or (loss) from fund							<u> </u>
	9 :		Gross income from gaming ac							
			Part IV, line 19					:		
			Less: direct expenses							1
			Net income or (loss) from gam		nues					
	10 8		Gross sales of inventory, less		_					
			and allowances							
			Less: cost of goods sold							
i	- (C	Net income or (loss) from sale		ntory	Business Code			·	
	44	_	Miscellaneous Revenu	e		900099	172,993.			172,993.
	ĺ					-			. <u>.</u>	=:=,=,=,=
		b				-	<u> </u>			
		۳ C	All athor rough:				. ·		·	
			All other revenue				172,993.			
		U	Total Add lines 11a-11d Total revenue. See instructions				15,242,667.		0.	208,642.
	12	31-			***		,,,	3,754	·	Form 990 (2018)

Form 990 (2018) Part IX Statement of Functional Expenses

	Check if Schedule O contains a respons				<u>X</u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	25,000.	25,000.		
2	Grants and other assistance to domestic		,		
	individuals. See Part IV, line 22	2,500.	2,500.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	1,331,737.	1,331,737.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	565,115.	415,653.	78,836.	70,62
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(t)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	2,204,711.	1,436,945.	705,535.	62,23
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	161,714.	104,511.	53,503.	3,70
9	Other employee benefits	375,772.	250,578.	107,741.	17,45
0	Payroll taxes	199,226.	131,045.	59,395.	8,78
1	Fees for services (non-employees):				
а	Management				
b	Legal	50,302.	3,429.	46,873.	
c	Accounting	61,651,	38,573.	23,078.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0.)	1,888,464.	1,778,531.	98,017.	11,_91
2	Advertising and promotion				
3	Office expenses	230,289.	119,652.	110,614.	2
4	Information technology	455,957.	25,155.	430,802.	
5	Royalties	"			
6	Occupancy	418,086.	238,992.	168,911.	10,18
7	Travel	831,347.	794,459.	34,765.	2,12
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	203,952.	170,507.	33,445.	<u></u>
0	Interest	221.	221.		
1	Payments to affiliates				
2	Depreciation, depletion, and amortization	14,503.		14,503.	
3	Insurance	44,083.		44,083.	_
4	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)	<u>:</u>		and the second of	
_	amount, list line 24e expenses on Schedule 0.) TRANSLATIONS	89,494.	89,017.	477.	<u></u>
a	TRANSLATIONS	09,494.	69,017,	4//*	·
b					
C					
d	All (1				
_	All other expenses	0.452.404		D 010 550	400.00
5	Total functional expenses. Add lines 1 through 24e	9,154,124.	6,956,505.	2,010,578.	187,04
ô	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)				Form 990 (20

Form 990 (2018)
Part X Balance Sheet

Part X	Check if Schedule O contains a response or note to any line in this Part X	 		
	Onder Toolisadis Coolitano a response si risto te da y milio a response si risto te da risto te da y milio a response si risto te da risto te da risto te da risto te da risto t	(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	137,443.	1	229,334
2	Savings and temporary cash investments		2	6,172,381
3	Pledges and grants receivable, net		3	6,698,208
4	Accounts receivable, net		4	13,552
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete		·	
	Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under		: .	
*	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary		·	
_ω	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
ASSetts	Notes and loans receivable, net		7	"
8 8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges		9	96,980
L	Land, buildings, and equipment: cost or other	* · · · · · · · · · · · · · · · · · · ·	_	
108	basis. Complete Part VI of Schedule D 102, 517			
,	Less: accumulated depreciation 10b 102,517	-	10c	0
	Investments - publicly traded securities	-	11	1,009,035
11	Investments - other securities. See Part IV, line 11	-	12	, , , <u></u>
	Investments - program-related. See Part IV, line 11		13	<u></u>
13	Intangible assets	"	14	-
14			-	119,216
15	Other assets. See Part IV, line 11		 +	14,338,706
16	Total assets. Add lines 1 through 15 (must equal line 34)	110,550	17	568,466
17	Accounts payable and accrued expenses		18	
18	Grants payable		19	•
19	Deferred revenue		20	 -
20	Tax-exempt bond liabilities		21	
21	Escrow or custodial account liability. Complete Part IV of Schedule D			
<u>r</u> 22	Loans and other payables to current and former officers, directors, trustees,			
Ĭ l	key employees, highest compensated employees, and disqualified persons.		22	
Ciabilities 22	Complete Part II of Schedule L	-	23	
23	Secured mortgages and notes payable to unrelated third parties			4,00
24	Unsecured notes and loans payable to unrelated third parties	- -	24	40
25	Other liabilities (including federal income tax, payables to related third			
- }	parties, and other liabilities not included on lines 17-24). Complete Part X of	19 442	. E	795,855
	Schedule D	438,995.	25 26	1,364,321
26	Total liabilities. Add lines 17 through 25	100,2201	20	<u> </u>
	Organizations that follow SFAS 117 (ASC 958), check here			
8	complete lines 27 through 29, and lines 33 and 34.	2,131,790.	27	2,301,541
27	Unrestricted net assets	44 504 400	28	10,672,844
28	Temporarily restricted net assets	11,500,152.	-	10,0,2,011
g 29	Permanently restricted net assets		29	
2	Organizations that do not follow SFAS 117 (ASC 958), check here	•		
5	and complete lines 30 through 34.	•		
30	Capital stock or trust principal, or current funds		30	<u> </u>
31	Paid-in or capital surplus, or land, building, or equipment fund		31	-
27 28 29 30 31 32 31 31 32 31 31 31 31 31 31 31 31 31 31 31 31 31	Retained earnings, endowment, accumulated income, or other funds	12 717 070	32	12,974,385
33	Total net assets or fund balances	13,717,972.	33	
34	Total liabilities and net assets/fund balances	14,156,967.	34	14,338,706 Form 990 (2018

Form 990 (2018)

Form 990 (2018)

SCHEDULE A

Department of the Treesury

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.

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

OMB No. 1545-0047

Open to Public Inspection

Employer Identification number INTERNATIONAL CENTER FOR NOT-FOR-PROFIT Name of the organization 52-1818273 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from 10 activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. ☐ Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (iv) is the organization listed in your governing document? (vi) Amount of other (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (described on lines 1.10 support (see instructions) support (see instructions) organization Yes No

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Schedule A (Form 990 or 990-EZ) 2018

Total

Schedule A (Form 990 or 990 EZ) 2018 LAW, INC. 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 tests listed below, please complete Part III.)

Se	ction A. Public Support				•		
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	10,800,074.	8,206,763.	7,299,578.	10,017,617.	15,027,325.	51,351,357.
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	10,800,074.	8,206,763.	7,299,578.	10,017,617.	15,027,325.	51,351,357.
5	The portion of total contributions		٠.				
	by each person (other than a		1			ļ	
	governmental unit or publicly		İ				
	supported organization) included	i					
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						3,545,799.
	Public support. Subtract line 5 from line 4.						47,805,558.
Se	ction B. Total Support						
Cale	endar year (or fiscal year beginning in) 📂	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	10,800,074.	8,206,763.	7,299,578.	10,017,617.	15,027,325.	51,351,357.
8	Gross income from interest,			i			
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	5,323.	14,841.	26,024.	23,222.	31,579.	100,989.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						_
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	7,746.	16,553.	1,569.	1,702.	172,993.	200,563.
11	Total support. Add lines 7 through 10			<u></u>		·	51,652,909.
12	Gross receipts from related activities,	•				12	1,182,995.
13	First five years. If the Form 990 is for	the organization's	first, second, third	, fourth, or fifth ta	x year as a section	n 501(c)(3)	
_	organization, check this box and stop	here					<u></u>
_	ction C. Computation of Publ						
	Public support percentage for 2018 (I					14	92.55 %
	Public support percentage from 2017					15	94.56 %
16a	33 1/3% support test - 2018. If the o	•		•		•	
	stop here. The organization qualifies						
b	b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box						
	and stop here. The organization quali						
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fac		•	-	•	_	
	meets the "facts-and-circumstances"	-		-	-		
b	10% -facts-and-circumstances test	ū					0% or
	more, and if the organization meets the		•		-		. \square
	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 :	or 990-E Z) 2018

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Schedule A (Form 990 or 990 EZ) 2018 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 I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	Section A. Public Support						
Cal	endar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 201 <u>6</u>	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")					_	
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						ı
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7:	a Amounts included on lines 1, 2, and						
	3 received from disqualified persons	<u></u>			<u> </u>		
ı	3 Amounte included on lines 2 and 3 received from other then disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support. (Subtract line 7g from line 6.)						
	ction B. Total Support						
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
	a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
ı	Unrelated business taxable income						
	(less section 511 taxes) from businesses				ļ		
	acquired after June 30, 1975			_			
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on		.,				<u> </u>
12	Other income, Do not include gain						
	or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth t	ax year as a sectio	n 501(c)(3) organiz	ation,
	check this box and stop here						
Se	ction C. Computation of Publ				<u> </u>		
15	Public support percentage for 2018 (I	ine 8, column (f), d	livided by line 13,	column (f))	,	15	%
16	Public support percentage from 2017	Schedule A, Part	III, line 15	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		16	%
Se	ction D. Computation of Inves	stment Incom	e Percentage			, ,	
17	Investment income percentage for 20	18 (line 10c, colun	nn (f), divided by li	ne 13, column (f))	.,,,,	17	%
	111000000000000000000000000000000000000					%	
19	a 33 1/3% support tests - 2018. If the	organization did n	ot check the box	on line 14, and line	e 15 is more than 3	33 1/3%, and line 1	17 is not
	more than 33 1/3%, check this box a	ndstop here. The	organization quali	fies as a publicly s	supported organiza	ation	▶∟
1	b 33 1/3% support tests - 2017. If the						
	line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization						
20	Private foundation. If the organization				his box and see in:	structions	<u></u>
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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.)

	and b. if you checked 12b of Farth, complete Sections A and G. if you checked 12c of Farth, complete			
	Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)			
Sec	tion A. All Supporting Organizations			
			Yes	No
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.	1		
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).	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below.	3a		
þ	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and	1		
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the	1	l i	
	organization made the determination.	3b		
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.	3c		
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.	4a		
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	l	·	
	despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination	1	.	
	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.	4c		
ъa	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).	5a		
L	Type I or Type II only. Was any added or substituted supported organization part of a class already	34		
U	designated in the organization's organizing document?	5b	.	
_	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
۰	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		l.]	
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in			
	Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with	1 .	· .	
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7]]	
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).	8		
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.	9a	$oxed{oxed}$	
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which		J	
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
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.	9c	$\sqcup \sqcup$	
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section	1	.	
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated	1		
	supporting organizations)? If "Yes," answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	· .		

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determine whether the organization had excess business holdings.)

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Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	1 :.		i
	below, the governing body of a supported organization?	<u>11a</u>	-	
	A family member of a person described in (a) above?	11b	-	<u> </u>
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations		Tv	
	POST the affirmation and the second control of the second control		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			·
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or		l ·,	
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	1		ĺ
^	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
2	Did the organization operate for the benefit of any supported organization other than the supported		·	
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	• • • • • • • • • • • • • • • • • • • •	2		
Soc	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations			
360	tion o. Type it supporting organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		163	140
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	i	Ĭ .	
	or management of the supporting organization was vested in the same persons that controlled or managed		l . i	
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
	tion 5.7% Type in eappering erganizatione		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		1.00	110
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior ta	x .		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	· ·		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
_	organization(s) or (ii) serving on the governing body of a supported organization? If *No, " explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
_	significant voice in the organization's investment policies and in directing the use of the organization's	ļ		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yeatsee in	structions).		
а	The organization satisfied the Activities Test. Complete line 2 below.	•		
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a government en	tity (see instruction:	s).	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,		.	
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	Į		
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
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Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportir	ng Org	anizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyir	ng trust o	on Nov. 20, 1970 (explain in Pa	art VI.) See instructions. A
	other Type III non-functionally integrated supporting organizations must co	omplete	Sections A through E.	
Sec	tion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		· · · -
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or	İ		
	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		
Sec	tion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			•
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	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		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6	·	
7	Check here if the current year is the organization's first as a non-functional	ly integra	ated Type III supporting organ	ization (see
	instructions)			

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Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations _(continued)	
Sect	on D - Distributions		<u> </u>	Current Year
1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	n <u>s</u>		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)		<u> </u>	
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	ne organization is responsive	e	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2018 from Section C, line 6		"	
10	Line 8 amount divided by line 9 amount			
		(i)	(ii)	(iii)
Secti	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2018	Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required- explain in Part VI). See instructions.		<u> </u>	
3	Excess distributions carryover, if any, to 2018			
а	From 2013		<u> </u>	
b	From 2014			<u>.</u>
	From 2015			
d	From 2016			
e	From 2017			<u>.</u>
f	Total of lines 3a through e			<u>.</u>
g	Applied to underdistributions of prior years			<u> </u>
h	Applied to 2018 distributable amount			
ī	Carryover from 2013 not applied (see instructions)			·
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D,			
	line 7: \$		****	<u> </u>
a	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
	Remainder, Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result greater	•		
	than zero, explain in Part VI. See instructions.			<u> </u>
6	Remaining underdistributions for 2018. Subtract lines 3h			
-	and 4b from line 1. For result greater than zero, explain in	•		
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j			
-	and 4c.			
-8	Breakdown of line 7:	• •	· · · · · · · · · · · · · · · · · · ·	
a				
b				
	Excess from 2016	· -		
	Excess from 2017			
	Excess from 2018			

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INTERNATIONAL CENTER FOR NOT-FOR-PROFIT

Schedule A	(Form 990 or 990-EZ) 2018 LAW, INC.	52-1818273	Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 10; Part II, line 10; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section 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 Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any	le 17a or 17b; Part III, line 12; B, lines 1 and 2; Part IV, Section 1; Part V, Section B, line 1e; F V additional information.	
•	(See instructions.)	,	
	The state of the s		
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			<u>.</u>
			
			
			<u>-</u>
2028 10-11-18		chedule A (Form 990 or 990-	EZ) 201
	20		

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.

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

OMB No. 1545-0047

2018

Employer identification number

	INTERNATIONAL CENTER FOR NOT-FOR-PROFIT	52-1818273			
Organization type (chec	LAW, INC.	32-1010273			
Organization type (chec	is one).				
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				
	on is covered by the General Rule o r a Special Rule. I (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special F	lule. See instructions.			
General Rule					
_	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totalinary one contributor. Complete Parts I and II. See instructions for determining a contributor				
Special Rules					
sections 509(a) any one contrib	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 18a utor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amo EZ, line 1. Complete Parts I and II.	a, or 16b, and that received from			
year, total conti	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.				
year, contribution is checked, ento purpose. Don't	tion described in section 501(c)(7), (8), or (10) filling Form 990 or 990-EZ that received from ons exclusively for religious, charitable, etc., purposes, but no such contributions totaled in er here the total contributions that were received during the year for an exclusively religious complete any of the parts unless the General Rule applies to this organization because it able, etc., contributions totaling \$5,000 or more during the year	more than \$1,000. If this box is, charitable, etc., t received <i>nonexclusively</i>			
but it must answer "No"	n that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its let the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).				
LIA For Panarwork Pode	untion Act Notice see the instructions for Form 990, 990-F7, or 990-PF. Schedule	B (Form 990, 990-FZ, or 990-PF) (2018)			

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

Employer identification number

LAW, INC		52-	-18182 <u>7</u> 3
Part !	Contributors (see instructions). Use duplicate copies of Part I if add	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$1,692,820.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Туре of contribution
3		\$ 566,286.	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		\$5,000,000.	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		\$ 2,494,835.	Person X Payroli
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$\$.	Person X Payroll

829452 11-08-18

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization
INTERNATIONAL CENTER FOR NOT-FOR-PROFIT

LAW, INC.

Employer identification number

52-1818273

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$641,975.	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
8		\$1,525,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Туре of contributioл
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>.</u>		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occash (Complete Part II for noncash contributions.)
823452 11-08	3-18	Schedule B (Form	990, 990-EZ, or 990-PF) (2018)

Name of organization
INTERNATIONAL CENTER FOR NOT-FOR-PROFIT

Employer Identification number

52-1818273

Part II	Noncash Property (see instructions). Use duplicate copies of Par	t 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
		<u> </u>	
(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
		 \$	

Page 4 Schedule B (Form 990, 990 EZ, or 990 PF) (2018) Employer identification number Name of organization INTERNATIONAL CENTER FOR NOT-FOR-PROFIT LAW, INC. 52-1818273 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year Part III from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (d) Description of how gift is held (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (d) Description of how gift is held (b) Purpose of gift (c) Use of gift (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from (c) Use of gift (d) Description of how gift is held (b) Purpose of gift Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from Part I (d) Description of how gift is held (c) Use of gift (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

823454 11-08-18

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.

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

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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 	itions: Complete Part III.			
Name of organization INTERNATION	NAL CENTER FOR NOT-FOR-PR	OFIT	Emp	loyer identification number
LAW, INC.				52-1818273
Part I-A Complete if the org	ganization is exempt und	er section 501(c)	or is a section 527 of	organization.
 Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campa 	tures		>	
Part I-B Complete if the org	ganization is exempt unde	er section 501(c)	(3).	
1 Enter the amount of any excise tax				3
2 Enter the amount of any excise tax	incurred by organization manage	rs under section 4955	5 > 5	S
3 If the organization incurred a section				
4a Was a correction made?	,			Yes L No
h If "Yes " describe in Part IV				
Part I-C Complete if the org	-		•	
1 Enter the amount directly expended				š
2 Enter the amount of the filing organ		-		
exempt function activities				<u> </u>
3 Total exempt function expenditures				
line 17b				5
4 Did the filing organization file Form				
5 Enter the names, addresses and er made payments. For each organiza				
contributions received that were pr				
political action committee (PAC). If				
(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
(o) Name	(b) redices	(C) LIN	filing organization's	contributions received and
			funds. If none, enter -0	promptly and directly
				delivered to a separate political organization.
				If none, enter -0
				<u> </u>
				<u> </u>
	 	1		1

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

Schedule C (Form 990 or 990-EZ) 2018

LHA

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Schedule C (Form 990 or 990-EZ) 2018		NTER FOR NOT-FOR-	PROFIT	52-181	8273 Page 2
Part II-A Complete if the or	ganization is exe	mpt under sectio	n 501(c)(3) and file	ed Form 5768 (el	ection under
section 501(h)).					
			Part IV each affiliated	group member's nam	e, address, EIN,
, , , ,	are of excess lobbying				
B Check 🕨 📖 if the filing organiz	ation checked box A a	nd "limited control" pro	ovisions apply.		
	iits on Lobbying Expe iditures" means amoર	nditures unts paid or incurred.])	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to inf	luence public opinion (grass roots lobbying)			
b Total lobbying expenditures to inf	luence a legislative bo	dy (direct lobbying)		8,752.	
c Total lobbying expenditures (add				8,752.	
d Other exempt purpose expenditu				9,145,372.	
e Total exempt purpose expenditur				9,154,124.	
f Lobbying nontaxable amount. En				607,706.	
If the amount on line 1e, column (a)		bying nontaxable ame			
Not over \$500,000		the amount on line 1e.			
Over \$500,000 but not over \$1,00		\$100,000 plus 15% of the excess over \$500,000.			
Over \$1,000,000 but not over \$1,		00 plus 10% of the exc			
Over \$1,500,000 but not over \$17		00 plus 5% of the exce			
Over \$17,000,000	\$1,000.	•			
	, ,,,,,,,,,				
g Grassroots nontaxable amount (e	nter 25% of line 1f)			151,927.	
h Subtract line 1g from line 1a. If ze				0.	 :
i Subtract line 1f from line 1c. If zer		••••••••••••		0.	
j If there is an amount other than ze					
reporting section 4911 tax for this					Yes No
Toponing obbiton -to 11 test for the		eraging Period Under			
(Some organizatioлs t				f the five columns b	elow.
		ate instructions for lir			
	Lobbying Expe	nditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount	742,244.	629,157.	507,704.	607,706.	2,486,811
b Lobbying ceiling amount (150% of line 2a, column(e))					3,730,217
c Total lobbying expenditures	49,628.	21,700.	2,785.	8,752.	82,865

932,555. Schedule C (Form 990 or 990-EZ) 2018

621,703.

151,927.

157,289.

185,561.

126,926.

c Total lobbying expenditures

d Grassroots nontaxable amount e Grassroots ceiling amount

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

f Grassroots lobbying expenditures

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)).

1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements?	(a)		(b)	
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)?	Yes	No	An	ount
or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	<u>-</u> _			
 a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? 				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			_	
o Media adverticemente?			<u></u>	
C Niedla advertisente its i			<u> </u>	
d Mailings to members, legislators, or the public?				
Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
I Other activities?				
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912	1			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912		<u> </u>		
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organization is exempt under section 501(c)(4), section	ın 501(c)((5), or se	ection	
501(c)(6).				
			Yes	No
Were substantially all (90% or more) dues received nondeductible by members?		<u>1</u>		
2 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				<u> </u>
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	"No," OF	R (b) Par	t III-A, Ii	ne 3, is
answered "Yes."			,	
1 Dues, assessments and similar amounts from members		1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	al			
expenses for which the section 527(f) tax was paid).				
a Current year		2a		
b Carryover from last year		2b	ļ	
c Total		2c	.,,-	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	ess			
	olitical	}		
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p		4		
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p expenditure next year?		5		
The second secon				

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SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

Go to www.irs.gov/Form990 for Instructions and the latest Information.

OMB No. 1545-0047 18 Open to Public Inspection

Name of the organization

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

Employer identification number 52-1818273

	organization answered "Yes" on Form 990, Part IV, line 6					
		(a) Donor advised funds	((b) Fun	ds and other accoเ	ınts
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 wri	ting that the assets held in donor advi	sed fur	ıds		
	are the organization's property, subject to the organization's ex	clusive legal control?	. 		Yes	L_J No
6	Did the organization inform all grantees, donors, and donor adv	isors in writing that grant funds can be	e used :	only		
	for charitable purposes and not for the benefit of the donor or o					
	impermissible private benefit?					No L
Pa	rt II Conservation Easements. Complete if the organ	nization answered "Yes" on Form 990,	Part IV	, line 7	·	
1	Purpose(s) of conservation easements held by the organization	(check all that apply).				
	Preservation of land for public use (e.g., recreation or edu	ication) Preservation of a his	torically	/ impor	tant land area	
	Protection of natural habitat	Preservation of a cer	tified h	storic :	structure	
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualified	i conservation contribution in the form	oface	onse <u>rva</u>	ation easement o <u>n t</u>	the last
	day of the tax year.				Held at the End of th	
а	Total number of conservation easements			2a		
b	Total acreage restricted by conservation easements			2b		
С	Number of conservation easements on a certified historic struc			2c		
d	and the second s				-	
	listed in the National Register			2d		
3	Number of conservation easements modified, transferred, relea	sed, extinguished, or terminated by th	e organ	nization	during the tax	
	year▶		•		-	
4	Number of states where property subject to conservation ease	ment is located				
5	Does the organization have a written policy regarding the period					
-	violations, and enforcement of the conservation easements it h				Yes	☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting, ha					year
	•	-				
7	Amount of expenses incurred in monitoring, inspecting, handlin	g of violations, and enforcing conserva	ation ea	asemer	nts during the year	
	▶\$					
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section 170	D(h)(4)(E	3)(i)		
	and section 170(h)(4)(B)(ii)?				Yes Yes	└─ No
9	In Part XIII, describe how the organization reports conservation	easements in its revenue and expens	e state	ment, a	and balance sheet,	and
	include, if applicable, the text of the footnote to the organization	n's financial statements that describes	the or	ganizat	tion's accounting fo	r
	conservation easements.					
Pa	rt III Organizations Maintaining Collections of A	Art, Historical Treasures, or C	Other	Simil	ar Assets.	
	Complete if the organization answered "Yes" on Form 99	90, Part IV, line 8.				
1a	If the organization elected, as permitted under SFAS 116 (ASC	958), not to report in its revenue state	ment a	nd bala	ance sheet works of	f art,
	historical treasures, or other similar assets held for public exhib	ition, education, or research in further	ance of	public	service, provide, in	Part XIII,
	the text of the footnote to its financial statements that describe					
b	If the organization elected, as permitted under SFAS 116 (ASC		nt and b	alance	sheet works of art	, historica
-	treasures, or other similar assets held for public exhibition, educ					
	relating to these items:	,			·	-
	(i) Revenue included on Form 990, Part VIII, line 1				\$ <u></u>	
	(ii) Assets included in Form 990, Part X				\$ \$	<u></u>
2	If the organization received or held works of art, historical treasures					
_	the following amounts required to be reported under SFAS 116			,	-	
				•	\$	
a	Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X					

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Schedule D (Form 990) 2018

INTERNATIONAL CENTER FOR NOT-FOR-PROFIT		
LAW, INC.	52-1818273	Page 3
Other Securities.	-	
anization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, I	Part X, line 12.	

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

Part VIII Investments - Program Related.

	Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)	•	=	
(6)			
(7)			
(8)			
(9)			
Total. (Col	. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1.	(a) Description of liability	(b) Book value
(1) Federal	income taxes	
(2) REFUND	ABLE ADVANCES	795,855.
(3)		
(4)		
(5)		
(6)	-	
(7)		
(8)		
(9)		
Total. (Column ((b) must equal Form 990, Part X, col. (B) line 25.)	795,855.

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

Schedule D (Form 990) 2018

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Schedule D (Form 990) 2018 LAW, INC.			52-1818273	Page 4
Part XI Reconciliation of Revenue per Audited Financial S		Revenue per F	leturn.	<u> </u>
Complete if the organization answered "Yes" on Form 990, Part IV			F 1	
1 Total revenue, gains, and other support per audited financial statements			1	15,569,668.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 - 1	62 200		
a Net unrealized gains (losses) on investments		-63,308.	4	
b Donated services and use of facilities			·	
c Recoveries of prior year grants		300 300	-	
d Other (Describe in Part XIII.)		390,309.	4 _ 1	327,001.
e Add lines 2a through 2d			2e	15,242,667.
 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: 			3	13,242,007.
a Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b Other (Describe in Part XIII.)			†	
c Add lines 4a and 4b			4 _C	0.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	121	***************************************	5	15,242,667.
Part XII Reconciliation of Expenses per Audited Financial				
Complete if the organization answered "Yes" on Form 990, Part IV,		•		
Total expenses and losses per audited financial statements			1	9,536,932.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		•••		
a Donated services and use of facilities	2a			
b Prior year adjustments			1 .	
c Other losses]	
d Other (Describe in Part XIII.)		382,808.]	
e Add lines 2a through 2d			2e	382,808.
3 Subtract line 2e from line 1			3	9,154,124.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a Investment expenses not included on Form 990, Part VIII, line 7b	·····		<u>.</u>	
b Other (Describe in Part XIII.)	4b			_
c Add lines 4a and 4b			4c	0.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	18.)		5	9,154,124.
Part XIII Supplemental Information.				
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a an	•	•	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 informa	tion.		
				
PART X, LINE 2;				
THE CENTER HAS ADOPTED THE ACCOUNTING STANDARD ON ACCOUNTING	FOR			
INCORMATNEY IN THEOMO MAYOR MUTCU ADDROCOC MUT DOMEDMINAMI	ON OB MUMMUSS			
UNCERTAINTY IN INCOME TAXES, WHICH ADDRESSES THE DETERMINATION	Name of William			
TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETU	RN SHOULD BE			
REPORTED IN THE CONSOLIDATED FINANCIAL STATEMENTS. UNDER TH	IIS POLICY, THE			
CENTER MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX P	OSITION ONLY			•
				
IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITION WOULD BE	SUSTAINED ON			
EXAMINATION BY TAXING AUTHORITIES, BASED ON THE TECHNICAL ME	RITS OF THE			
POSITION. MANAGEMENT HAS EVALUATED THE CENTER'S TAX POSITION	NS AND HAS			·
CONCLUDED THAT THE CENTER HAS TAKEN NO UNCERTAIN TAX POSITIO	NS THAT			
REQUIRE ADJUSTMENT TO OR DISCLOSURE IN THE CONSOLIDATED FINA	NCIAL			
STATEMENTS TO COMPLY WITH PROVISIONS OF THIS GUIDELINE.	· · · · · · · · · · · · · · · · · · ·			
832054 10-29-18	·		Schedule D (orm 990) 2018
UVEDOT 10-20-10			Concuent D II	UI III 230] 40 IO

INTERNATIONAL CENTER FOR NOT-FOR-PROFIT

	52-1818273	Page 5
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896,173.		
390,309.	<u> </u>	·-
888 672.		
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382,808.		<u>-</u>
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	Schedule D (Forn	n 990) 2018
	896,173. -505,864. 390,309. 888,672. -505,864. 382,808.	896,173. -505,864. 390,309. 888,672. -505,864. 392,808.

832055 10-29-18

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.

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990.

Go to www.lrs.gov/Form990 for instructions and the latest Information.

Employer identification number

INTERNATIONAL CENTER FOR NOT-FOR-PROFIT LAW, INC. Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. 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 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (c) Number of (d) Activities conducted in the region (a) Region (b) Number of (e) If activity listed in (d) (f) Total employees, agents, and expenditures offices (by type) (such as, fundraising, prois a program service, for and in the region gram services, investments, grants to describe specific type investments contractors recipients located in the region) of service(s) in the region in the region in the region CENTRAL AMERICA AND NGO LEGAL ENABLING ENVIRONNMENT INITIATIVES THE CARIBBEAN PROGRAM SERVICES 34,548. CENTRAL AMERICA AND GRANTS TO RECIPIENTS THE CARIBBEAN LOCATED IN THE REGION 29,628. EAST ASIA AND THE NGO LEGAL ENABLING ENVIRONNMENT INITIATIVES PACIFIC 7 PROGRAM SERVICES 104,891. EAST ASIA AND THE GRANTS TO RECIPIENTS PACIFIC 0 LOCATED IN THE REGION 140,520. EUROPE (INCLUDING ICELAND AND NGO LEGAL ENABLING GREENLAND) PROGRAM SERVICES ENVIRONNMENT INITIATIVES 156,449, 22 EUROPE (INCLUDING ICELAND AND GREENLAND) 0 GRANTS TO RECIPIENTS 462,755. MIDDLE EAST AND NGO LEGAL ENABLING NORTH AFRICA 23 PROGRAM SERVICES ENVIRONNMENT INITIATIVES 719,690. MIDDLE EAST AND GRANTS TO RECIPIENTS NORTH AFRICA 0 COCATED IN THE REGION 117,366. 2 57 1,765,847. 3 a Subtotal **b** Total from continuation sheets to Part I 2,317,775. 53 c Totals (add lines 3a 110 4,083,622. and 3b)

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

Schedule F (Form 990) 2018

Schedule F (Form 990)	LAW, INC.			52-1818273	Page 1
Part I Continuati	on of Activitie	s per Regio	n. (Schedule F (Form 990), Part I, line	3)	
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(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
				ngo legal enabling	
NORTH AMERICA	0	3	PROGRAM SERVICES	ENVIRONNMENT INITIATIVES	7,060.
RUSSIA AND				NGO LEGAL ENABLING	
NEIGHBORING STATES	5	26	PROGRAM SERVICES	ENVIRONNMENT INITIATIVES	1,289,278.
RUSSIA AND			grants to recipients		
NEIGHBORING STATES	0	0	LOCATED IN THE REGION		25,174.
				ngo legal enabling	
SOUTH AMERICA	0	8	PROGRAM SERVICES	BNVIRONNMENT INITIATIVES	39,215.
			GRANTS TO RECIPIENTS		
SOUTH AMERICA	0	0	LOCATED IN THE REGION		220,568.
SOUTH ASIA	0	4	PROGRAM SERVICES	NGO LEGAL ENABLING ENVIRONNMENT INITIATIVES	80,537.
• /			GRANTS TO RECIPIENTS		
SOUTH ASIA	0	0	LOCATED IN THE REGION		26,369.
				ngo legal enabling	
SUB-SAHARAN AFRICA	0	12	PROGRAM SERVICES	ENVIRONNMENT INITIATIVES	320,217.
			GRANTS TO RECIPIENTS		
SUB-SAHARAN AFRICA	0,	O O	LOCATED IN THE REGION		309,357.
				:	
					0 24 2 22 -
Totals	▶ 5	53	· ·	l·	2,317,775.

Page 2

Schedule F (Form 990) 2018

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 52-1818273 recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

(i) Method of valuation (book, FMV, appraisal, other) (h) Description of noncash assistance ٥. ٥. 0 ö ö ö ď ö (g) Amount of noncash assistance cash disbursement 7,842, WIRE TRANSFER 11,407. WIRE TRANSFER 7,018, WIRE TRANSFER 51,993, WIRE TRANSFER 79,001, WIRE TRANSFER WIRE TRANSFER 15,515, WIRE TRANSFER 6,400, WIRE TRANSFER (f) Manner of (e) Amount of cash grant 424,037, TO SUPPORT NGO LAW FO SUPPORT NGO LAW TO SUPPORT NGO LAW PO SUPPORT NGO LAW TO SUPPORT NGO LAW TO SUPPORT NGO LAW TO SUPPORT NGO LAW TO SUPPORT NGO LAW (d) Purpose of grant REFORM REFORM REFORM REFORM REFORM REFORM REFORM REFORM AND THE CARIBBEAN AND THE CARIBBEAN AND THE CARIBBEAN EAST ASIA AND THE EAST ASIA AND THE ZAST ASIA AND THE SUROPE (INCLUDING EUROPE (INCLUDING CENTRAL AMERICA CENTRAL AMERICA CENTRAL AMERICA (c) Region SREENLAND) GREENLAND) CELAND & CELAND & PACIFIC PACIFIC PACIFIC (b) IRS code section and EIN (if applicable) (a) Name of organization

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt 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

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Schedule F (Form 990) 2018

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(i) Method of valuation (book, FMV, appraísal, other) Page 2 (h) Description of non-cash assistance Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1) 0 o o ٥. o. oʻ (g) Amount of Ö Ö o. non-cash assistance 52-1818273 cash disbursement 6,247. WIRE TRANSFER WIRE TRANSFER 49,583. WIRE TRANSFER 9,375. WIRE TRANSFER 15,940. WIRE TRANSFER 35,449. WIRE TRANSFER 12,000, WIRE TRANSFER 6,050, WIRE TRANSFER 17,000 MIRE TRANSFER (f) Manner of (e) Amount of cash grant 19,991. TO SUPPORT NGO LAW TO SUPPORT NGO LAW TO SUPPORT NGO LAW TO SUPPORT NGO LAW TO SUPPORT NGO LAW TO SUPPORT NGO LAW TO SUPPORT NGO LAW TO SUPPORT NGO LAW TO SUPPORT NGO LAW (d) Purpose of grant REFORM REFORM REPORM REFORM REFORM REFORM REFORM REFORM REFORM UROPE (INCLUDING MIDDLE EAST AND AIDDLE EAST AND MIDDLE BAST AND CIDDLE EAST AND CIDDLE EAST AND (c) Region SOUTH AMERICA NORTH AFRICA WORTH AFRICA TORTH AFRICA NORTH AFRICA TORTH AFRICA NEIGHBORING MEIGHBORING USSIA AND RUSSIA AND REENLAND) CELAND & STATES STATES LAW, INC. (b) IRS code section and EIN (if applicable) (a) Name of organization Schedule F (Form 990) PartII

INTERNATIONAL CENTER FOR NOT-FOR-PROFIT LAW, INC. Schedule F (Form 990)

Page 2		(g) Amount of (h) Description (i) Method of non-cash of non-cash assistance appraisal, other)	0		.0	0.	.0	.0	0.	0.	*0	c
52-1818273	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)	(f) Manner of cash disbursement	WIRE TRANSFER	;	MIRE TRANSFER	15,000,WIRE TRANSFER	17,000 WIRE TRANSFER	20,000 WIRE TRANSFER	10,060, WIRE TRANSFER	19,841.WIRE TRANSFER	MIRE TRANSFER	000
	side the United States	f (e) Amount of cash grant	AW 98,656.	AW	35,172.			 			aw 6,527.	
NOT-FOR-PROFIT	zations or Entities Out	(d) Purpose of grant	TO SUPPORT MGO LAW	TO SUPPORT NGO LAW	REFORM	TO SUPPORT NGO LAW REFORM	TO SUPPORT NGO LAW REFORM	TO SUPPORT NGO LAW	TO SUPPORT NGO LAW	TO SUPPORT NGO LAW	IO SUPPORT NGO LAW REFORM	TO SUPPORT NGO LAW
INTERNATIONAL CENTER FOR NOT-FOR-PROFIT LAW, INC.	Assistance to Organi	(c) Region	SOUTH AMERICA		SOUTH AMERICA	SOUTH AMERICA	SOUTH AMERICA	SOUTH AMERICA	SOUTE AMERICA	SOUTH ASIA	SOUTH ASIA	SUB-SAHARAN Ardica
INTERNATI LAW, INC.	Grants and Other	(b) IRS code section and EIN (if applicable)										
	ation o	1 (a) Name of organization	· · ·									

832182 04-01-18

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

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Schedule F (Form 990)	rm 990)	LAW, INC.	LAW, INC.			52-1818273	73		Page 2
Part II Co	ntinuation o	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)	United States.	(Schedule F (Form 9	90), Part II, line 1		
(a) Name of organization	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	14,990,	14,990. WIRE TRANSFER	.0		
			SUB-SAHARAN AFRICA	TO SUPPORT NGO LAW REFORM	10,900	10,900.WIRE TRANSFER	.0		
	:		SUB-SAHARAN AFRICA	TO SUPPORT NGO LAW REFORM	8,537,	8,537, WIRE TRANSFER	•0		
· :			SUB-SAHARAN AFRICA	TO SUPPORT NGO LAW REFORM	12,409.WIRE	WIRE TRANSFER	0.		
			SUB-SAHARAN AFRICA	TO SUPPORT MGO LAW REFORM	16,804.	16,804,WIRE TRANSFER	0.		
		·	SUB-SAHARAN AFRICA	TO SUPPORT NGO LAW REFORM	24,301.	WIRE TRANSFER	0.		
		:	SUB-SAHARAN AFRICA	IO SUPPORT NGO LAW REFORM	10,758.	10,758 WIRE TRANSFER	0		
			SUB-SAHARAN AFRICA	TO SUPPORT NGO LAW	22,026.	WIRE TRANSFER	°o		
	:		SUB-SAHARAN AFRICA	TO SUPPORT NGO LAW	66,687.	66,687.WIRE TRANSFER	0.		

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

Page 2		(i) Method of valuation (book, FMV, appraisal, other)							
	((h) Description of non-cash assistance							
173	90), Part II, line	(g) Amount of non-cash assistance	0	0	0	. 0			
52-1818273	Schedule F (Form 9	(f) Manner of cash disbursement	WIRE TRANSFER	WIRE TRANSFER	WIRE TRANSFER	14,014,MIRE TRANSFER			
	United States.	(e) Amount of cash grant	36,973,6	18,998,	19,251,	14,014.9			
	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)	(d) Purpose of grant	to support ngo law Reform	IO SUPPORT NGO LAW REFORM	IO SUPPORT NGO LAW REFORM	IO SUPPORT NGO LAW REFORM			:
TOWN CENTER FOR I	Assistance to Organiza	(c) Region	SUB-SAHARAN AFRICA	SUB-SAHARAN APRICA	SUB-SAHARAN AFRICA	SUB-SAEARAN AFRICA			
LAW, INC.	Grants and Other	(b) IRS code section and EIN (if applicable)							
띡	Part II Continuation of	1 (a) Name of organization							

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LAW, INC.

Schedule F (Form 990) 2018 LAW, INC. 52–1818273
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.

Page 3

Schedule F (Form 990) 2018 (h) Method of valuation (book, FMV, appraisal, other) (g) Description of noncash assistance (f) Amount of noncash assistance 0. ٥. (e) Manner of cash disbursement 10,000 MIRE TRANSFER 8,800, WIRE TRANSFER (c) Number of (d) Amount of recipients cash grant -Part III can be duplicated if additional space is needed. (b) Region SOUTH AMERICA SUB-SAHARAN AFRICA (a) Type of grant or assistance TO SUPPORT NGO LAW REFORM TO SUPPORT NGO LAW REFORM

"Yes," the organization may be required to separately file Form 5713, International Boycott Report (see

Instructions for Form 5713; don't file with Form 990)

Schedule F (Form 990) 2018

Schedule F (Form 990) 2018 LAW, INC. 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.

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:
FOR COST REIMBURSEMENT GRANTS, 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. GENERALLY, GRANTEES SUBMIT MONTHLY REPORTS, GRANTEES
WITH SUCCESSFUL HISTORY OF SUBMITTING REPORTS ON DEADLINE REPORT ON A
QUARTERLY BASIS. THE LIQUIDATION REPORT INCLUDES A COMPARISON OF ACTUAL
COSTS TO THE APPROVED BUDGET, AND MAY ALSO INCLUDE COPIES OF SUPPORTING
DOCUMENTATION, RECEIPTS, ETC.
FOR FIXED AMOUNT AWARDS (FAA), PAYMENT CORRESPONDS TO SUCCESSFUL
COMPLETION OF MILESTONES, I.E. APPROVED TASKS, GOALS OR PRODUCTS. EACH
MILESTONE IS LISTED IN THE FAA AGREEMENT, AND GENERALLY HAS THREE PARTS:
(1) A DESCRIPTION OF THE PRODUCT, TASK OR GOAL TO BE ACCOMPLISHED; (2) A
DESCRIPTION OF HOW THE RECIPIENT WILL DOCUMENT COMPLETION OF THE PRODUCT,
TASK OR GOAL; AND (3) THE AMOUNT ICNL WILL PAY WHEN THE MILESTONE IS
SUCCESSFULLY COMPLETED. AFTER COMPLETING A MILESTONE, THE GRANTEE
SUBMITS A VOUCHER REQUESTING PAYMENT. THE VOUCHER LISTS THE MILESTONE
AND THE AMOUNT DUE AND IS ACCOMPANIED BY DOCUMENTATION AS REQUIRED WITHIN
THE FAA AGREEMENT. ONCE ICNL CONFIRMS THAT THE MILESTONE WAS SUCCESSFULLY
COMPLETED, PAYMENT IS RELEASED.
PART IV, LINE 6:
IN 2018, ICNL PROGRAM 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 TRAQ, KUWAIT, LEBANON, QATAR, SAUDI ARABIA, UNITED ARAB
832075 10-31-18 Schedule F (Form 990) 2018

Schedule F	(Form 990) 2018	LAW, INC			·		52-1818273	Page 8
Part V	Supplementa							
							inting method; amounts of	
							hod); and Part III, column (c)
· · ·	(estimated number	er of recipier	its), as applicab	ole. Also complet	e this part to pro	vide any additional info	ormation. See instructions.	
MIRATES,	AND YEMEN.							
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32075 10-31-1	3						Schedule F (Form 9	90) 201

SCHEDULE I (Form 990)

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

:

Open to Public

Inspection

OMB No. 1545-0047

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Employer identification number 52-1818273 X Yes 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 ▶ Go to www.irs.gov/Form990 for the latest information. 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 General Information on Grants and Assistance criteria used to award the grants or assistance? Name of the organization Department of the Treasury Internal Revenue Service Part

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

Part 11

Schedule I (Form 990) (2018) APPORTEUR WORK ON CIVIC IMPLEMENTING PART OF THE RESEARCH COMPONENT OF SUPPORTING UN SPECIAL (h) Purpose of grant ENVIRONMENT PROGRAM or assistance LEGAL ENABLING SPACE ISSUES (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) 0 °. (e) Amount of assistance non-cash recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (d) Amount of 5,000 20,000 cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section (if applicable) LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 501(C)(3) 501(C)(3) Enter total number of other organizations listed in the line 1 table 54-1563619 41-6007513 (p) EIN SULTE 450 - MINNEAPOLIS, MN 55455 1 (a) Name and address of organization MINNESOTA - 200 OAK STREET SE, 6066 LEESBURG PIKE, SUITE 100 REGENTS OF THE UNIVERSITY OF or government FALLS CHURCH, VA 22041 BOAT PEOPLE SOS ო

832101 11-02-18

Schedule I (Form 990) (2018)

Page 2

52-1818273

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Schedule 1 (Form 990) (2018) (f) Description of noncash assistance (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 (c) Amount of cash grant 46 FINAL REPORT IS THE FINISHED RESEARCH PAPER, FOR GRANTS WHICH SUPPORT OTHER REPORT HAS BEEN FILED, THE FORMAT OF THE FINAL REPORT IS DETERMINED BY THE PAYMENTS FOR FIXED AMOUNT AWARDS IS GENERALLY MADE ACCORDING TO ASSIGNED TYPES OF PROGRAM ACTIVITIES, SUCH AS WORKSHOPS, THE FINAL REPORT DETAILS DISBURSEMENT SCEEDULE; WITH THE FINAL DISBURSEMENT ISSUED ONCE THE FINAL APPROVED ACTIVITY TO BE SUPPORTED BY THE GRANT, FOR RESEARCH GRANTS, THE (b) Number of recipients (a) Type of grant or assistance THE ACCOMPLISHMENTS. PART I, LINE 2: 832102 11-02-18 Part⊞

Schedule I (Form 990) LAW, INC.	52-1818273	Page 2
Part IV Supplemental Information	·	
FOR COST REIMBURSEMENT GRANTS, THE GRANTEE TYPICALLY 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 CAN		
REQUEST THE NEXT ADVANCEMENT OF GRANT FUNDS. THE LIQUIDATION REPORTS	<u> </u>	·
INCLUDE A COMPARISON OF ACTUAL COSTS TO THE APPROVED BUDGET, AND MAY ALSO	÷.,	
INCLUDE COPIES OF SUPPORTING DOCUMENTATION, RECEIPTS, ETC.		
	<u></u>	
<u> </u>	-7"	
	····	

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832291 04-01-18	Schedule	(Form 990)

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SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

► Go to www.irs.gov/Form990 for Instructions and the latest Information

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

INTERNATIONAL CENTER FOR NOT-FOR-PROFIT

Employer identification number 52-1818273 LAW, INC. **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,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.	!		
	First-class or charter travel Housing allowance or residence for personal use	ĺ		
	Travel for companions — Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	i	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.	ĺĺ		
	Compensation committee Written employment contract			
	Independent compensation consultant Independent compensation consultant Independent compensation consultant			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:	.		
а	Receive a severance payment or change-of-control payment?	4a	- 1	_X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		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.			
		Ì		
	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:			
а	The organization?	5a		x
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		. 1	
	contingent on the net earnings of:		ļ	
а	The organization?	6a	i	X
	Any related organization?	6b		x
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	-		
	not described on lines 5 and 6? If "Yes," describe in Part III	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		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in		\Box	
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2018

Page 2

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Schedule J (Form 990) 2018 LAW, INC.
Part II | Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

52-1818273

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.

		(B) Breakdown of \	(B) Breakdown of W2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(g)-(j)(g)	in column (B) reported as deferred on prior Form 990
(1) DOUGLAS RUTZEN	Ξ	185,217.	0	0	19,007	12,356.	216,580,	0
PRESIDENT	€	0	0	0.	0	0	0	0
(2) DARLA MECHAM	(;)	129,606,	0	0	13,992.	17,383,	160,981.	0
VICE PRESIDENT, FINANCE	(<u>ii</u>)	• 0	0	0	0	0	0	0
(3) CATHERINE SHEA	=	157,112.	0	0	15,863.	13,579.	186,554,	
VICE PRESIDENT, PROGRAMS	<u>(ii)</u>	0.	0	0	0	0	0.	:
2	Ξ	149,169,	0	0	14,878,	7,838.	171,885.	0
VICE PRESIDENT, LEGAL AFFA	(ii)	0	.0	0	0	0	0.	
JRJAILY	(1)	147,158.	0	0	14,888.	4,775.	166,821.	0
VICE PRESIDENT, EURASIA	€	0	0	0	0	0	0	0
	Ξ	144,317.	0	0	14,721.	11,316.	170,354.	•0
VICE PRESIDENT, OPERATIONS	Ξ	0	0	0	0	0	0	0
(7) JOCELYN NIEVA	(i)	.110,621	0	0	13,011.	12,353.	154,375.	0
SR. LEGAL ADVISOR, LATIN A	€	o	0	0	0	0	0	0
	€							
	(ii)							
	(i)							
	(11)			i				
	(i)							
	(ii)							
	(3)							
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832112 10-26-18				49			Sched	Schedule J (Form 990) 2018

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

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Schedule J (Form 990) 2018 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. 52-1818273 50 Schedule J (Form 990) 2018 L Part III | Supplemental Information

SCHEDULE 0

(Form 990 or 990-EZ)

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

Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

INTERNATIONAL CENTER FOR NOT-FOR-PROFIT

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 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.	
FORM 990, PART VI, SECTION B, LINE 12C:	
ON AN ANNUAL BASIS, ICNL STAFF SENDS THE CONFLICT OF INTEREST AND	
DISCLOSURE POLICY FORM TO EACH BOARD MEMBER AND EACH STAFF MEMBER,	
DIRECTOR, AND ADVISORY COUNCIL MEMBER, ALL OF WHOM ARE REQUIRED TO COMPLETE	
AND RETURN THE FORM, ON AN ONGOING BASIS, RECIPIENTS ARE REQUIRED TO FILE	
AN UPDATED DISCLOSURE FORM, SHOULD RELEVANT CIRCUMSTANCES CHANGE. CONFLICTS	
INVOLVING A DIRECTOR, ADVISORY COUNCIL MEMBER, OR KEY EMPLOYEE ARE	
ADDRESSED BY ICNL'S BOARD OF DIRECTORS FOLLOWING THE PROCEDURES OUTLINED IN	
ICNL'S CONFLICTS POLICY, CONFLICTS INVOLVING A STAFF MEMBER WHO IS NOT A	
'KEY EMPLOYEE' FOR THE PURPOSES OF FORM 990 ARE ADDRESSED BY ICNL'S	
PRESIDENT.	
FORM 990, PART VI, SECTION B, LINE 15:	
ICNL PURCHASED COMPARABILITY DATA FROM FIRMS SPECIALIZING IN THIS	
INFORMATION, COMPARABILITY DATA WAS THEN PRESENTED TO THE BOARD OF	
DIRECTORS ALONG WITH PROPOSED SALARY LEVELS AT A MEETING OF THE BOARD OF	
DIRECTORS. THE DIRECTORS DELIBERATED AND DECIDED ON COMPENSATION, AND THERE	
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.	Schedule O (Form 990 or 990-EZ) (2018)

Schedule O (Form 990 or 990-EZ) (2018) Name of the organization INTERNATIONAL CENTER FOR NOT-FOR-PROFI	r	Employer identification number 52-1818273
LAW, INC.		32-1010273
AS CONTEMPORANEOUS SUBSTANTIATION OF THE PROCESS. THE LAST		
REVIEW TOOK PLACE IN DECEMBER 2018 FOR ICNL'S PRESIDNET, AND	D SEPTEMBER 2018	
FOR ALL OTHER KEY EMPLOYEES.		
FORM 990, PART VI, SECTION C, LINE 19:		
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF	INTEREST POLICY	
ND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUE	ST, THE	
INANCIAL STATEMENTS ARE ALSO INCLUDED IN THE ORGANIZATION'S	S ANNUAL REPORT,	
WHICH IS PUBLISHED ON WWW.ICNL.ORG.		
PART VII, SECTION A	J-V	
ONE BOARD MEMBER RECEIVED COMPENSATION FOR PROVIDING PROGRAM	4 SERVICES	,
O THE ORGANIZATION AND NOT FOR SERVICES AS A BOARD MEMBER.		
O THE OMORREMITOR HAS NOT YOU SERVICED IN IT SOURCE MANAGEMENT		
ORM 990, PART IX, LINE 11G, OTHER FEES:		
OCAL HIRES AND LOCAL PARTNERS:		
PROGRAM SERVICE EXPENSES	722,229.	.
ANAGEMENT AND GENERAL EXPENSES	98.	· •
UNDRAISING EXPENSES	10,316,	
OTAL EXPENSES	732,643.	4.4 km/47
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
NDEPENDENT CONTRACTORS:		
PROGRAM SERVICE EXPENSES	1,056,302.	
ANAGEMENT AND GENERAL EXPENSES	97,919.	
UNDRAISING EXPENSES	1,600.	
OTAL EXPENSES	1,155,821.	
OTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A		
	_,,	

Schedule O (Form 990 or 9	90-EZ) (2018)	Page 2
Name of the organization	INTERNATIONAL CENTER FOR NOT-FOR-PROFIT	Employer identification number
	LAW, INC.	52-1818273
·		
FORM 990, PART XII,	LINE 2C:	
PER ICNL BYLAWS, "TH	E BOARD SHALL APPOINT AUDIT COMMITTEE, TWO OF	·
WHOM MUST BE THE CHA	IR AND TREASURERTHE AUDIT COMMITTEE SHALL ASSIST	1
THE BOARDIN CHOOS	ING AN INDEPENDENT AUDITOR," THE AUDIT COMMITTEE	
11		
DETERMINES WHETHER	TO ACCEPT OR REJECT THE AUDIT." HOWEVER, THE AUDIT	
COMMITTEE IS NOT RES	PONSIBLE FOR COMPILATION OF ICNL'S FINANCIAL	
STATEMENTS, THIS IS	THE RESPONSIBILITY OF ICNL'S VP-FINANCE AND	
5.1.	THE THE TANK DEVICE THE TANK T	
CONTROLLER, THE STAT	EMENTS ARE REVIEWED BY AUDITORS, AND THE AUDIT	<u></u>
REVIEW IS SUBMITTED	TO THE AUDIT COMMITTEE.	
	, ,	,,
PART IX, LINE 17		
TRAVEL CONSISTS OF A	IRFARES, LODGING AND, IN SOME CASES, PER DIEM	
ALLOWANICES ASSOCIATE	D WITH BRINGING PROGRAM PARTICIPANTS TO TRAININGS	
AUDOWANCES ASSOCIATE.	7 WITH DELIGING PROJECT PROJEC	#1·*
WITHIN THEIR COUNTRY	, TO REGIONAL MEETINGS, AND TO INTERNATIONAL	
	· · · · · · · · · · · · · · · · · · ·	
EVENTS. THIS CATEGOR	Y ALSO INCLUDES TRAVEL COSTS FOR ICNL'S FELLOWSHIP	
DROGRAMS WHICH BRIM	G LOCAL CSO LEADERS TO A HOST CSO IN ANOTHER	
TROOTESTO, MITCH ENTER	1 DOUBLE GOO MAINTAIN TO IT HAVE GOO IT THE THE	
COUNTRY, OR TO AN IC	NL OFFICE, IN ADDITION TO THESE ACTIVITIES, THIS	4
CATEGORY COVERS COST	S OF SENDING ICNL EMPLOYEES TO A COUNTRY TO PROVIDE	
TECHNICAL ASSISTANCE	, TO MEET WITH PARTNERS, TO CONDUCT TRAININGS AND	
· · · · · · · · · · · · · · · · · · ·		
WORKSHOPS, AND TO CA	RRY OUT PROGRAMMATIC ACTIVITIES.	
,		
		 _

Employer identification number Open to Public Inspection OMB No. 1545-0047 2018 52-1818273 Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships ► Go to www.irs.gov/Form990 for instructions and the latest information.

INTERNATIONAL CENTER FOR NOT-FOR-PROFIT ▶ Attach to Form 990. LAW, INC. Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

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

Part

Schedule R (Form 990) 2018 (g) Section 512(b)(13) controlled OR NOT-FOR-PROFIT LAW, ž 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. Ξ Direct controlling 841,594. HNC. CML, INC. End-of-year assets T status (if section Public charity 501(c)(3)) 1,503,924 Total income Exempt Code ᢓ section POREIGN ENTITY Legal domicile (state or Legal domicile (state or foreign country) foreign country) DELAWARE HUNGARY PROMOTES STRENGTHENING OF ENABLING ENVIRONMENT FOR SUPPORTIVE LEGAL ENV. INTERNATIONAL CENTER FOR NOT-FOR-PROFIT LAW, SERVICES TO PROMOTE AN LLC - 20-5736798, 1126 16TH STREET, SUITE KNAELING ENVIRONMENT FO Primary activity Primary activity FOR CIVIL SOCIETY 3 CIVIL SOCIETY For Paperwork Reduction Act Notice, see the Instructions for Form 990. EUROPEAN CENTER FOR NON-FOR-PROFIT LAW Name, address, and EIN (if applicable) APACZAI SCERE JANOS U. 17, 1ST FLOOR Name, address, and EIN of related organization of disregarded entity 400, WASHINGTON, DC 20036 BUDAPEST, HUNGARY 1052 Part

LAW, INC. Schedule R (Form 990) 2018

Page 2

52-1818273

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

(a) (d) (a)	(q)	[G]		9		(£)	(6)	£	(9)		3
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)		Share of total income	Share of end-of-year assets	Dispropo	tionate Code V-UBI amount in box 20 of Schedule No. K-1 (Form 1065)	JBI General or box managing partner?	General or Percentage managing ownership partner?
		:						3			
Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.	ganizations Taxable a orporation or trust durin	is a Corporting the tax	oration or Trust. Co	omplete if the	e organization	answered "Yes	" on Form 99(), Part IV, lin	e 34, because it	had one or	more related
(a) Name, address, and EIN of related organization	NIE NIE	Prim	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or frust)		(f) Share of total income	(g) Share of end-of-year assets	(n) Percentage ownership	Section Section (i) Section (ii) Section (iii) Section (ii
							1			:	
									_		
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52-1818273

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

 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Paris II-IV? a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity b Gift, grant, or capital contribution to related organization(s) c Gift, grant, or capital contribution from related organization(s) d Loans or loan guarantees to or for related organization(s) e Loans or loan guarantees by related organization(s) f Dividends from related organization(s) 	with one or more re	ated organizations listed			LES NO
Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a o Gift, grant, or capital contribution to related organization(s) Gift, grant, or capital contribution from related organization(s) Loans or loan guarantees to or for related organization(s) Loans or loan guarantees by related organization(s) Dividends from related organization(s)			in Parts II-IV?		
Gift, grant, or capital contribution to related organization(s) Gift, grant, or capital contribution from related organization(s) Loans or loan guarantees to or for related organization(s) Loans or loan guarantees by related organization(s) Dividends from related organization(s)				13	×
Giff, grant, or capital contribution from related organization(s) Loans or loan guarantees to or for related organization(s) Loans or loan guarantees by related organization(s) Dividends from related organization(s)				4	_
Loans or loan guarantees to or for related organization(s) Loans or loan guarantees by related organization(s) Dividends from related organization(s)				۲	×
Loans or loan guarantees by related organization(s) Dividends from related organization(s)					×
Codes of Doors guarantees by Totaleou Organization(s)				2 .	\dagger
				<u>a</u>	+
				#	
				1_	t
Durchase of assets from related onsociation(s)					†
				=	†
Exchange of assets with related organization(s)				ij.	
Lease of facilities, equipment, or other assets to related organization(s)				ij	\top
k Lease of facilities, equipment, or other assets from related organization(s)				¥	
Performance of services or membership or fundraising solicitations for related organization(s)	zation(s)			_	
m Performance of services or membership or fundraising solicitations by related organization(s)	zation(s)			Ľ	T
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	(s)			_	T
 Sharing of paid employees with related organization(s) 				<u> </u>	
 Peimbursement paid to related organization(s) for expenses 				5	
q Reimbursement paid by related organization(s) for expenses				- <u>-</u>	1
				+	
s Other transfer of cash or property from related organization(s)				- 1s	
If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	o must complete th	is 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	noved	
(1) EUROPEAN CENTER FOR NOT-FOR-PROFIT LAW	ф	505,864.	ACTUAL GRANT AMOUNT AWARDED		
(4)					İ
(9)					
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Schedule R (Form 990) 2018

LAW, INC.

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

Page 4

52-1818273

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

Name, address, and EN Primary activity (Legal countries) Problement income primary activities and entity of entity (State of Chapter (Stat	Primary activity Legal domicile Predominant income lates at (state or foreign excluded from tax under antix) sections 512-514) Yes No		Disprapar- Code V-UBI Area Internations Of Schedule K Ves No (Form 1065)	General or Paraging partner? Yes No Yes No	ownership
sections 512-514) Yes No income assets Yes No	Sections 512-514) Yes No		Yes No (Form 1065	N Yes No	
				<u>.</u>	
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Schedule R	(Form 990) 2018	LAW, INC.	52-1818273	Page 5
Part VII	(Form 990) 2018 Supplemental Info	rmation.		
	Provide additional inform	nation for responses to questions on Schedule R. See instructions.		
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100 10-02-14	3 ************************************	го	Schedule H (FOI)	. 3301 2010