### DLN: 93493301011330

OMB No. 1545-0047

2019

Department of the Treasury

**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.

 $\blacktriangleright$  Go to  $\underline{\textit{www.irs.gov/Form990}}$  for instructions and the latest information.

Open to Public Inspection

|                                |            | - 2010 -                 |  | inning 01 01 2010 and anding 12   | 21 2010     |                 |                           |            |                     |        |
|--------------------------------|------------|--------------------------|--|---|-------------|-----------------|---------------------------|------------|---------------------|--------|
|                                |            |                          | C Name of organization                             | inning 01-01-2019 , and ending 12   | -31-2019    | 1               | D Employ                  | or ident   | ification number    |        |
|                                |            | pplicable:<br>change     | League to Save Lake Tahoe                          |   |             |                 |                           |            | medicin number      | •      |
|                                | me ch      | - 1                      |  |   |             |                 | 94-612                    | 8680       |                     |        |
|                                | tial ret   |                          | Doing business as                                  |   |             |                 |                           |            |                     |        |
|                                |            | n/terminated<br>I return |  | mail is not delivered to street address) Room,                                      | suite       |                 | E Telepho                 | ne numbe   | er                  |        |
|                                |            | on pending               | 3600 Laka Tahaa Blud                               | Than is not delivered to see see add asso, itself,                                  | ourco.      |                 | (530) 5                   | 41-538     | .8                  |        |
|                                |            |                          |  | ountry, and ZIP or foreign postal code  |             |                 |                           |            |                     |        |
|                                |            |                          | South Lake Tahoe, CA 96150                         |   |             |                 | <b>G</b> Gross re         | eceipts \$ | 3,031,325           |        |
|                                |            |                          | F Name and address of princi                       | pal officer:  | H(a)        | Is this         | a group re                | turn for   | -                   |        |
|                                |            |                          | Darcie Goodman Collins PHD<br>2608 Lake Tahoe Blvd |   |             |                 | inates?                   |            | □Yes 🛂              | ∄No    |
|                                |            |                          | South Lake Tahoe, CA 96150                         |   | H(b)        | Are all include | subordina                 | tes        | ☐ Yes ☐             | JNo    |
| [ Ta:                          | x-exen     | npt status:              | <b>☑</b> 501(c)(3) □ 501(c)()                      | <b>◄</b> (insert no.)   |             |                 |                           | list. (se  | e instructions)     |        |
| J W                            | ebsit      | e: > ww                  | w.keeptahoeblue.org                                |   | H(c)        | Group           | exemption                 | numbe      | er ▶                |        |
|                                |            |                          |  |   | 1           |                 |                           | T          |                     |        |
| <b>∢</b> Forr                  | n of or    | ganization               | : 🗹 Corporation 🗌 Trust 🔲 As                       | ssociation  | L Year      | of format       | ion: 1957                 | M Stat     | e of legal domicile | ؛: CA  |
| Ps                             | art I      | Sum                      | mary   |   |             |                 |                           |            |                     |        |
| 1 6                            |            |                          | scribe the organization's mission                  | or most significant activities:   |             |                 |                           |            |                     |        |
|                                | т          | Γhe Leagu                | ie to Save Lake Tahoe is dedicat                   | ed to protecting and restoring the enviro   |             |                 |                           |            |                     | of the |
| ဥ                              | │ <u>└</u> | _ake Taho                | e Basin. We focus on water qua                     | lity and its clarity for the preservation of  | a pristine  | Lake to         | r future ge               | eneratio   | ns.                 |        |
| <u> </u>                       |            |                          |  |   |             |                 |                           |            |                     |        |
| - Ke                           | -          |                          |  |   |             |                 |                           |            |                     |        |
| Activities & Governance        |            |                          |  | discontinued its operations or disposed of  |             |                 | of its net a              |            | . 1                 | 2.0    |
| ಶ                              | l          |                          | -  | ning body (Part VI, line 1a)  |             |                 |                           | 3          |                     | 20     |
| Seg.                           | l          |                          | •  | of the governing body (Part VI, line 1b)  |             |                 |                           | 4          |                     | 20     |
| ₹                              |            |                          | , ,  | calendar year 2019 (Part V, line 2a) .  |             |                 |                           | 5          |                     | 23     |
| ACT                            | l          |                          | ,  | necessary)  |             |                 | •                         | 6          |                     | 1,211  |
| •                              | l          |                          |  | art VIII, column (C), line 12   |             |                 |                           | 7a         |                     |        |
|                                | b          | Net unrel                | ated business taxable income fr                    | om Form 990-T, line 39  | <u> </u>    |                 |                           | 7 t        |                     |        |
|                                |            |                          |  |   |             | Prio            | r Year                    |            | Current Yea         |        |
| ₫:                             | l          |                          | tions and grants (Part VIII, line 1                |   | 1,362,      | 460<br>163      | 1,70                      | 65,73      |                     |        |
| Ravenue                        | l          | _                        | •  | ervice revenue (Part VIII, line 2g)   |             |                 |                           |            |                     | (      |
| ã                              | l          |                          | ent income (Part VIII, column (A)                  |   |             |                 | 57,850                    |            |                     |        |
|                                | l          |                          | enue (Part VIII, column (A), line                  |   |             |                 | 665,                      |            |                     | 26,01  |
|                                |            |                          | <u> </u>   | nust equal Part VIII, column (A), line 12)  |             |                 | 2,076,                    | 939        |                     | 49,59  |
|                                | l          |                          | nd similar amounts paid (Part IX                   |   |             |                 |                           |            |                     |        |
|                                | l          |                          | paid to or for members (Part IX,                   |   | _           |                 |                           |            |                     |        |
| 8                              | l          | -                        | , , , , ,  | benefits (Part IX, column (A), lines 5–10)  | ' <u> </u>  |                 | 1,149,                    | 347        | 1,2                 | 17,78  |
| Expenses                       | l          |                          | onal fundraising fees (Part IX, co                 |   |             |                 |                           |            |                     |        |
| 3                              | l          |                          | raising expenses (Part IX, column (D               | ·· · · <del>_ ·</del>   |             |                 |                           |            |                     |        |
| ш                              |            |                          | penses (Part IX, column (A), line                  | •   |             |                 | 849,                      |            |                     | 76,37  |
|                                | l          | •                        | `  | qual Part IX, column (A), line 25)  |             |                 | 1,999,                    |            |                     | 94,15  |
| . 0                            | 19         | Revenue                  | less expenses. Subtract line 18                    | from line 12  |             |                 |                           | 804        |                     | 55,439 |
| Net Assets or<br>Fund Balances |            |                          |  |   | Beg         | mming o         | of Current \              | еаг        | End of Year         |        |
| s e e                          | 20         | Total ass                | ets (Part X, line 16)                              |   |             |                 | 3,951,                    | 694        | 4,8                 | 19,78  |
| Ž Ž                            | 21         | Total liab               | ilities (Part X, line 26)                          |   |             |                 | 57,                       | 695        |                     | 85,73  |
| ΣĪ                             | 22         | Net asset                | s or fund balances. Subtract lin                   | e 21 from line 20   |             |                 | 3,893,                    | 999        | 4,7                 | 34,05  |
| Pa                             | rt II      | Sign                     | ature Block  |   | •           |                 |                           |            |                     |        |
|                                |            |                          |  | mined this return, including accompanying te. Declaration of preparer (other than o |             |                 |                           |            |                     |        |
|                                | nowle      |                          | i, it is true, correct, and comple                 | te. Declaration of preparer (other than o   | incer) is b | aseu on         | an inioini                | acion o    | Willelf prepare     | 1 1103 |
|                                |            | 1                        |  |   |             |                 |                           |            |                     |        |
|                                |            | ******<br>Signati        | *<br>ure of officer                                |   |             | 2020<br>Date    | -10-27                    |            |                     | —      |
| Sign<br>Here                   |            |                          | 0 1 0 11 0 110 000                                 |   |             |                 |                           |            |                     |        |
|                                | •          |                          | Goodman Collins PHD CEO r print name and title     |   |             |                 |                           |            |                     |        |
|                                |            | 17                       | rint/Type preparer's name                          | Preparer's signature  | Date        |                 |                           | PTIN       |                     |        |
| Paid                           | 4          | [                        | A - A to - to - change a sequence                  |   |             |                 |                           | P019588    | 78                  |        |
|                                | a<br>pare  | .r  -                    | irm's name ► HEALY AND ASSOCI                      | ATES  | <u> </u>    |                 | empioyea  <br>'s EIN ► 81 | -148982:   | 1                   |        |
| -                              | On         | ⊢                        |  |   |             |                 |                           |            |                     |        |
| USE                            | UII        | <b>עי</b>                | ïrm's address ► 1200 CONCORD AVE                   | STE 250   |             | Phon            | e no. (925)               | 603-080    | 0                   |        |
|                                |            |                          | CONCORD, CA 945                                    | 20  |             |                 |                           |            |                     |        |
| √lay t                         | he IR      | S discuss                | this return with the preparer sh                   | own above? (see instructions)   |             |                 |                           | <b>✓</b>   | Yes 🗌 No            |        |

| Form                                | 990 (2019)   |  |   |   |   | Page <b>2</b>   |
|-------------------------------------|--|--|---|---|---|---|
| Pa                                  | t III Statement  | of Program Service   | e Accomplis   | hments  |   |   |
|                                     | ———<br>Check if Sche   | edule O contains a respo   | nse or note to a  | any line in this Part III   |   | 🗹   |
| 1                                   | Briefly describe the   | organization's mission:  |   | ,   |   |   |
| Basin<br>crysta<br>inforr<br>that h | . We focus on water of<br>al clear Lake, function<br>med community of res<br>narmonize with the na<br>and into the future.Th | quality and its clarity for<br>ling and healthy forests,<br>sidents and visitors who<br>atural environment by fin<br>e League to Save Lake T | the preservation meadows, strestact as stewards iding a balance ahoe is a solut | n of a pristine Lake for<br>ams and marshes that<br>for the Lake, and com<br>between outdoor recre<br>ions-oriented team of T | alth, sustainability and scenic beauty future generations.Our Vision: "Keep support abundant native plants and munities and facilities within longstation, human uses and a Lake resilitahoe advocates who use innovation the Lake we love. Together with our | o Tahoe Blue" means a<br>wildlife, an active and<br>inding urban boundaries<br>ent to climate change<br>, boots on-the-ground |
| 2                                   | Did the organization   | undertake any significar   | nt program serv   | vices during the year w   | hich were not listed on   |   |
|                                     | the prior Form 990 c   | or 990-EZ?   |   |   |   | ☑ Yes ☐ No  |
|                                     | If "Yes," describe the   | ese new services on Sch  | edule O.  |   |   |   |
| 3                                   |  | cease conducting, or ma  |   | changes in how it condu   | ucts, any program   |   |
|                                     | services?  |  |   |   |   | 🗌 Yes 🗹 No  |
|                                     | If "Yes," describe the   | ese changes on Schedule  | e O.  |   |   |   |
| 4                                   | Describe the organiz<br>Section 501(c)(3) ar   | ation's program service  | accomplishmer<br>ns are required  | to report the amount of   | largest program services, as measu<br>of grants and allocations to others, t  |   |
| 4a                                  | (Code:   | ) (Expenses \$   | 1,685,049   | including grants of \$  | ) (Revenue \$   | )   |
|                                     | See Additional Data  |  |   |   | , ,   |   |
|                                     |  |  |   |   |   | _   |
| 4b                                  | (Code:   | ) (Expenses \$   |   | including grants of \$  | ) (Revenue \$   | )   |
|                                     |  |  |   |   |   |   |
| 4c                                  | (Code:   | ) (Expenses \$   |   | including grants of \$  | ) (Revenue \$   | )   |
|                                     |  |  |   |   |   |   |
|                                     |  |  |   |   |   |   |
| 4d                                  | Other program servi<br>(Expenses \$  | ices (Describe in Schedu<br>inclu  | le O.)<br>Iding grants of   | \$  | ) (Revenue \$   | )   |
| 4e                                  | Total program ser  |  | 1,685,0   | ·   | , ,   |   |
| -T-C                                | - Jean program ser   | expenses r   | 1,000,0   |   |   |   |

| Par | Checklist of Required Schedules   |     |     |    |
|-----|---|-----|-----|----|
|     | •   |     | Yes | No |
| 1   | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 😼   | 1   | Yes |    |
| 2   | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🥞   | 2   | Yes |    |
| 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 2  | 3   |     | No |
| 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   | Yes |    |
| 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 $\ref{20}$ .  | 5   |     | No |
| 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   2   | 6   |     | No |
| 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 2  | 7   |     | No |
| 8   | Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D,</i> Part III 2  | 8   |     | No |
| 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 2                                     | 9   |     | No |
| 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  | Yes |    |
|     | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.   |     |     |    |
|     | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.  | 11a | Yes |    |
|     | 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 | Yes |    |
|     | 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 |     | No |
|     | 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 2  | 11d | Yes |    |
| е   | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🥦   | 11e |     | No |
|     | 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 |     | No |
|     | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII  | 12a | Yes |    |
|     | 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  Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 12b |     | No |
|     |   | 13  |     | No |
|     | Did the organization maintain an office, employees, or agents outside of the United States?   | 14a |     | No |
| b   | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV                           | 14b | Yes |    |
| 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  |     | No |
| 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  |     | No |
| 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(see instructions)  | 17  |     | No |
| 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  | Yes |    |
| 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  |     | No |
|     | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H   | 20a |     | No |
| b   | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  | 20b |     |    |
| 21  | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II   | 21  |     | No |

| Form | 990 (2019)   |     |     | Page <b>4</b> |
|------|--|-----|-----|---------------|
| Pai  | t 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  |     | No            |
| 23   | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>  | 23  |     | No            |
| 24a  | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a   | 24a |     | No            |
| b    | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  | 24b |     |               |
| c    | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?   | 24c |     |               |
| d    | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  | 24d |     |               |
| 25a  | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I   | 25a |     | No            |
| b    | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>   | 25b |     | No            |
| 26   | Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II  | 26  |     | No            |
| 27   | Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L</i> ,Part III | 27  |     | No            |
| 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, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV   | 28a |     | No            |
| b    | A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV  | 28b |     | No            |
| c    | A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>   | 28c |     | No            |
| 29   | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule $M$ $\$   | 29  | Yes |               |
| 30   | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M   | 30  |     | No            |
| 31   | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I   | 31  |     | No            |
| 32   | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>  | 32  |     | No            |
| 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  |     | No            |
| 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  |     | No            |
| 35a  | Did the organization have a controlled entity within the meaning of section 512(b)(13)?  | 35a |     | No            |
| b    | If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line $2$  | 35b |     |               |
| 36   | <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>   | 36  |     | No            |
| 37   | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  | 37  |     | No            |
| 38   | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O  | 38  | Yes |               |

Yes

Yes Form **990** (2019)

42

0

**1**c

**1**a

1b

No

Statements Regarding Other IRS Filings and Tax Compliance

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 .

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

Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

Part V

| Par      | tV Statements Regarding Other IRS Filings and Tax Compliance (continued)   |            |     | rage <b>3</b> |
|----------|--|------------|-----|---------------|
|          | Enter the number of employees reported on Form W-3, Transmittal of Wage and  |            |     |               |
| 24       | Tax Statements, filed for the calendar year ending with or within the year covered by  |            |     |               |
| <b>L</b> | this return  | 2b         | Yes |               |
| D        | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  | 20         | 103 |               |
| За       | Did the organization have unrelated business gross income of \$1,000 or more during the year?  | 3a         |     | No            |
| b        | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O  | 3b         |     |               |
| 4a       | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a         |     | No            |
| b        | If "Yes," enter the name of the foreign country: ▶   |            |     |               |
| _        | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  | _          |     |               |
|          | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?                    | 5a         |     | No<br>No      |
|          |  | 5b         |     |               |
|          | If "Yes," to line 5a or 5b, did the organization file Form 8886-T?   | 5c<br>6a   |     | No No         |
|          | solicit any contributions that were not tax deductible as charitable contributions?  | - Oa       |     |               |
|          | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  | <b>6</b> b |     |               |
|          | Organizations that may receive deductible contributions under section 170(c).  |            |     |               |
| а        | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  | 7a         | Yes |               |
|          | If "Yes," did the organization notify the donor of the value of the goods or services provided?  | <b>7</b> b | Yes |               |
| С        | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?   | <b>7</b> c | Yes |               |
| d        | If "Yes," indicate the number of Forms 8282 filed during the year  |            |     |               |
| е        | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  | 7e         |     | No            |
| f        | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?   | 7f         |     | No            |
| g        | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?   | 7g         |     | No            |
| h        | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?   | 7h         |     | No            |
|          |  |            |     |               |
| 8        | <b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?   | 8          |     |               |
| 9        | Sponsoring organizations maintaining donor advised funds.  |            |     |               |
| а        | Did the sponsoring organization make any taxable distributions under section 4966?   | <b>9</b> a |     |               |
| b        | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  | 9b         |     |               |
| 10       |  |            |     |               |
|          | Initiation fees and capital contributions included on Part VIII, line 12   |            |     |               |
| 11       | Section 501(c)(12) organizations. Enter:   |            |     |               |
| а        | Gross income from members or shareholders  |            |     |               |
| b        | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)   |            |     |               |
| 12a      | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?   | 12a        |     |               |
| b        | If "Yes," enter the amount of tax-exempt interest received or accrued during the year.   |            |     |               |
| 13       | Section 501(c)(29) qualified nonprofit health insurance issuers.   |            |     |               |
| а        | Is the organization licensed to issue qualified health plans in more than one state?   | 13a        |     |               |
| b        | Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  |            |     |               |
| c        | Enter the amount of reserves on hand   |            |     |               |
| 14a      | Did the organization receive any payments for indoor tanning services during the tax year?   | 14a        |     | No            |
|          | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O  | 14b        |     |               |
| 15       | Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?   | 15         |     | No            |
| 16       | Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.  | 16         |     | No            |

| orm | 990 (2019)  |            |           | Page <b>6</b> |
|-----|---|------------|-----------|---------------|
| Par | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.  Check if Schedule O contains a response or note to any line in this Part VI | ·          | onse to i | lines         |
| Se  | ction 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 20  |            |           |               |
|     | If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.   |            |           |               |
| b   | Enter the number of voting members included in line 1a, above, who are independent  1b 20   |            |           |               |
| 2   | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?   | 2          |           | No            |
| 3   | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?   | 3          |           | No            |
| 4   | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?  | 4          |           | No            |
| 5   | Did the organization become aware during the year of a significant diversion of the organization's assets?  | 5          |           | No            |
| 6   | Did the organization have members or stockholders?  | 6          | Yes       |               |
| 7a  | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?  | 7a         | Yes       |               |
| b   | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?   | <b>7</b> b |           | No            |
| 8   | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:   |            |           |               |
| а   | The governing body?   | 8a         | Yes       |               |
| b   | Each committee with authority to act on behalf of the governing body?   | 8b         | Yes       |               |
| 9   | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O  | 9          |           | No            |
| Se  | ction B. Policies (This Section B requests information about policies not required by the Internal Revenu   | e Code     | e.)       |               |
|     |   |            | Yes       | No            |
| L0a | Did the organization have local chapters, branches, or affiliates?  | 10a        |           | No            |
| b   | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  | 10b        |           |               |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?   | 11a        | Yes       |               |
| 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        | Yes       |               |
| b   | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?   | 12b        | Yes       |               |
| c   | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  | 12c        | Yes       |               |
| 13  | Did the organization have a written whistleblower policy?   | 13         | Yes       |               |
| 14  | Did the organization have a written document retention and destruction policy?  | 14         | Yes       |               |
| 15  | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  |            |           |               |
| а   | The organization's CEO, Executive Director, or top management official  | 15a        | Yes       |               |
| b   | Other officers or key employees of the organization   | 15b        | Yes       |               |
|     | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).   |            |           |               |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?   | 16a        |           | No            |
| b   | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt  |            |           |               |
|     | status with respect to such arrangements?   | 16b        |           |               |
|     | ction C. Disclosure   |            |           |               |
| 17  | List the states with which a copy of this Form 990 is required to be filed ► CA   |            |           |               |
| 18  | Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.   |            |           |               |
|     | ☑ Own website ☐ Another's website ☑ Upon request ☑ Other (explain in Schedule O)  |            |           |               |
| 19  | Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.   |            |           |               |
| 20  | State the name, address, and telephone number of the person who possesses the organization's books and records:<br>THE ORGANIZATION 2608 Lake Tahoe Blvd South Lake Tahoe, CA 96150 (530) 541-5388  |            |           |               |

Part VII

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII  $\,$  . Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax

- 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, or 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

| <ul> <li>List all of the organization's former director<br/>organization, more than \$10,000 of reportable control</li> </ul> | mpensation fro  | m the                             |                         |                              |                       |                              |           |  |  |   |
|---|---|-----------------------------------|-------------------------|------------------------------|-----------------------|------------------------------|-----------|--|--|---|
| See instructions for the order in which to list the   |   |                                   |                         |                              |                       |                              |           |  |  |   |
| Check this box if neither the organization no  (A)  Name and title  | (B) Average hours per week (list any hours            | Positio<br>tha<br>pers            | n (do<br>an on<br>on is | (C)<br>o not<br>e bo<br>both | t cho<br>x, u<br>h an |                              | ore<br>er | (D) Reportable compensation from the organization  | (E) Reportable compensation from related organizations | (F) Estimated amount of other compensation from the |
|   | for related<br>organizations<br>below dotted<br>line) | Individual trustee<br>or director | Institutional Trustee   | Officer                      | Key employee          | Highest compensated employee | Former    | (W-2/1099-<br>MISC)  | (W-2/1099-<br>MISC)                                    | organization and<br>related<br>organizations        |
| (1) Darcie Goodman Collins PHD  | 46.00   |                                   |                         | x                            |                       |                              |           | 133,333  | 0  | 0   |
| CEO   | 0.00  |                                   |                         |                              |                       |                              |           | ,  |  |   |
| (2) Jesse Patterson<br>Chief Strategy Ofr   | 44.00   |                                   |                         |                              |                       |                              |           | 111,087  | 0  | 0   |
| (3) David A Brandenburger   | 4.70  |                                   |                         |                              |                       |                              |           |  |  |   |
| President   | 0.00  | Х                                 |                         | X                            |                       |                              |           | 0  | 0  | 0   |
| (4) William D Evers Jr  | 1.60  | .,                                |                         |                              |                       |                              |           |  |  |   |
| Vice President  | 0.00  | Х                                 |                         | X                            |                       |                              |           | 0  | 0  | 0   |
| (5) Lucas Giordano  | 1.60  |                                   |                         | .,                           |                       |                              |           |  |  |   |
| Treasurer   | 0.00  | Х                                 |                         | X                            |                       |                              |           | 0  | 0  | 0   |
| (6) Joseph Brooks Stratmore II  | 1.10  |                                   |                         |                              |                       |                              |           |  | _  |   |
| Secretary   | 0.00  | Х                                 |                         | X                            |                       |                              |           | 0  | 0  | 0   |
| (7) David H Blau  | 1.50  |                                   |                         |                              |                       |                              |           |  | _  | _   |
| BOARD MEMBER  | 0.00  | Х                                 |                         |                              |                       |                              |           | 0  | 0  | 0   |
| (8) Catherine Marken Boyle  | 1.50  | Х                                 |                         |                              |                       |                              |           | 0  | 0  | 0   |
| BOARD MEMBER  | 0.00  |                                   |                         |                              |                       |                              |           |  |  |   |
| (9) Ash Daggs   | 1.50  | ×                                 |                         |                              |                       |                              |           | 0  | 0  | 0   |
| Board Member  | 0.00  |                                   |                         |                              |                       |                              |           | ŭ  |  |   |
| (10) Bob Damaschino   | 1.50  | ×                                 |                         |                              |                       |                              |           |  | n  | 0   |
| Board Member  | 0.00  | ^                                 |                         |                              |                       |                              |           | ŭ  |  |   |
| (11) Scott Drummond   | 1.50  | ×                                 |                         |                              |                       |                              |           | 0  | 0  | 0   |
| Board Member  | 0.00  |                                   |                         |                              |                       |                              |           | Ŭ  |  |   |
| (12) Stephen Gordon   | 1.50  | x                                 |                         |                              |                       |                              |           | 0  | 0  | 0   |
| Board Member  | 0.00  |                                   |                         |                              |                       |                              |           | , and the second |  |   |
| (13) Allison Gorelick   | 1.50  | x                                 |                         |                              |                       |                              |           | 0  | 0  | 0   |
| Board Member  | 0.00  |                                   |                         |                              |                       |                              |           |  |  |   |
| (14) Hillary Hilken Marble<br>Board Member  | 0.00  | X                                 |                         |                              |                       |                              |           | 0  | 0  | 0   |
| (15) Tom Mertens<br>Board Member  | 1.50  | ×                                 |                         |                              |                       |                              |           | 0  | 0  | 0   |
| (16) Phil Metting van Rijn  | 1.50  | .,                                |                         |                              |                       |                              |           | _  | _  |   |
| Board Member  | 0.00  | X                                 |                         |                              |                       |                              |           | 0  | 0  | 0   |
| (17) Kimberley Milligan   | 1.50  | Х                                 |                         |                              |                       |                              |           | 0  | 0  | 0   |
| Board Member  | 0.00  |                                   |                         |                              |                       |                              |           |  |  | 0   |
|   |   |                                   |                         |                              |                       |                              |           |  |  | Form <b>990</b> (2019)                              |

Part VII

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

(A)

(B)

(C)

(D)

(E)

(F)

Average Position (do not check more Reportable Reportable Estimated)

Page 8

|      | Name and title  | Average hours per week (list any hours for related | than c                            | ne b                  | ox, ι<br>ın of | t ch<br>unle<br>fice | r and a                      | son    | Reportable compensation from the organization (W-2/1099-   | Reportable compensation from related organizations (W-2/1099- |           | Estima<br>amount o<br>compen<br>from | ated<br>of other<br>sation<br>the |
|------|---|--|-----------------------------------|-----------------------|----------------|----------------------|------------------------------|--------|--|---|-----------|--------------------------------------|-----------------------------------|
|      |   | organizations<br>below dotted<br>line)             | Individual trustee<br>or director | Institutional Trustée | Officer        | Key employee         | Highest compensated employee | Former | (W-2/1099-   | MISC)   |           | organizat<br>relat<br>organiza       | ed                                |
|      | Michael L Ross  | 1.50   | Y                                 |                       |                |                      |                              |        | C  |   | 0         |                                      |                                   |
| BOAF | LD MEMBER   | 0.00   | ^                                 |                       |                |                      |                              |        | ۲  |   | <u> </u>  |                                      |                                   |
| (19) | Steven M Spurlock   | 1.50   | v                                 |                       |                |                      |                              |        | _  |   | 0         |                                      |                                   |
|      | D MEMBER  | 0.00   |                                   |                       |                |                      |                              |        | ۲  |   |           |                                      |                                   |
| (20) | Scott A Torgan  | 1.50   |                                   |                       |                |                      |                              |        | _  |   | 0         |                                      |                                   |
|      | D MEMBER  | 0.00   | ^                                 |                       |                |                      |                              |        |  |   |           |                                      |                                   |
| (21) | Allyson Willoughby  | 1.50   | v                                 |                       |                |                      |                              |        | _  |   | 0         |                                      |                                   |
|      | D MEMBER  | 0.00   |                                   |                       |                |                      |                              |        |  |   | $ \perp $ |                                      |                                   |
| (22) | Michael J Zukerman  | 1.50   | v                                 |                       |                |                      |                              |        | _  |   | 0         |                                      |                                   |
|      | D MEMBER  | 0.00   |                                   |                       |                |                      |                              |        | , and the second |   |           |                                      |                                   |
|      |   |  |                                   |                       |                |                      |                              |        |  |   |           |                                      |                                   |
|      |   |  |                                   |                       |                |                      |                              |        |  |   | 十         |                                      |                                   |
|      |   |  |                                   |                       |                |                      |                              |        |  |   | +         |                                      |                                   |
|      |   |  |                                   |                       |                |                      |                              |        |  |   |           |                                      |                                   |
|      |   |  |                                   |                       |                |                      |                              |        |  |   | T         |                                      |                                   |
| 1 h  | Sub-Total   |  |                                   |                       |                | <u> </u>             |                              |        |  | <u> </u>  | _         |                                      |                                   |
|      | Fotal from continuation sheets to Part \  |  |                                   |                       | •              | j                    |                              |        |  |   |           |                                      |                                   |
|      | Fotal (add lines 1b and 1c)   | •  |                                   |                       |                | 1                    | •                            |        | 244,420  |   |           |                                      |                                   |
| 2    | Total number of individuals (including bur of reportable compensation from the orga               |  | those li                          | sted a                | abov           | /e) v                | who re                       | ceive  | ed more than \$100   | ,000  |           |                                      |                                   |
| 3    | Did the organization list any <b>former</b> office  |  |                                   |                       |                | ,                    |                              | -      |  | mployee on  |           | Yes                                  | No                                |
|      | line 1a? If "Yes," complete Schedule J for  | sucn individual                                    |                                   | •                     | •              | •                    |                              | •      |  |   | 3         |                                      | No                                |
| 4    | For any individual listed on line 1a, is the organization and related organizations gr individual | eater than \$150                                   | 0,000?                            | If "Ye                | s," (          | com                  |                              |        |  | the   | 4         |                                      | No                                |
| 5    | Did any person listed on line 1a receive of services rendered to the organization? If             |  |                                   |                       |                |                      |                              |        |  | dual for  | 5         |                                      | No                                |
| 6.   | ection B. Independent Contractors   | •  |                                   |                       |                |                      |                              |        |  |   | Ĭ         |                                      | 110                               |
| 1    | Complete this table for your five highest from the organization. Report compensat                 | compensated in                                     |                                   |                       |                |                      |                              |        |  |   | ens       | ation                                |                                   |
|      |   | (A)  |                                   |                       |                |                      |                              |        | 1  | (B)   | $\Box$    | (C                                   |                                   |
|      | Name and I  | ousiness address                                   |                                   |                       |                |                      |                              |        | Descrip  | tion of services  | $\dashv$  | Compen                               | sation                            |
|      |   |  |                                   |                       |                |                      |                              |        |  |   | +         |                                      |                                   |
|      |   |  |                                   |                       |                |                      |                              |        |  |   | 耳         |                                      |                                   |
|      |   |  |                                   |                       |                |                      |                              |        |  |   |           |                                      |                                   |

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

| Miscellaneous Revenue  Business Code  11a  b  c  d All other revenue   |                             |              | (2019)   | - f D     |                 |            |                     |                        |   |                       | Page <b>9</b>                                  |
|--|-----------------------------|--------------|--|-----------|-----------------|------------|---------------------|------------------------|---|-----------------------|--|
| Total Personnel    | Part                        | VIII         |  |           |                 | respo      | onse or note to any | line in this Part VIII |   |                       | 🗆  |
| 10   10   10   10   10   10   10   10  |                             |              | S. SSIN II SUII S                                |           | <u> </u>        | ,,         |                     | (A)                    | (B)<br>Related or<br>exempt<br>function | Unrelated<br>business | Revenue<br>excluded from<br>tax under sections |
| Submiss Code    Submiss Code   Submi |                             | 1:           | a Federated campa                                | igns      |                 | 1a         |                     |                        | revenue                                 |                       | 512 - 514                                      |
| Submiss Code    Submiss Code   Submi | iifts, Grants<br>ar Amounts |              | <b>b</b> Membership dues                         | 5.        | . [             | 1b         | 536,164             |                        |   |                       |  |
| Submiss Code    Submiss Code   Submi | Gra                         |              | c Fundraising even                               | ts .      | .               | 1c         |                     |                        |   |                       |  |
| Submiss Code    Submiss Code   Submi | S, S                        |              |  |           | Ŀ               |            |                     |                        |   |                       |  |
| Submiss Code    Submiss Code   Submi | Gif<br>ilai                 |              | _  |           | Ŀ               |            |                     |                        |   |                       |  |
| Submiss Code    Submiss Code   Submi | ıs,                         |              | -  |           | · L             |            |                     |                        |   |                       |  |
| Submiss Code    Submiss Code   Submi | itio!                       |              | and similar amounts                              | s not     | included        | 1f         | 1,229,566           |                        |   |                       |  |
| Submiss Code    Submiss Code   Submi | <b>寶美</b>                   |              | g Noncash contributio                            | ns in     | cluded in       |            |                     |                        |   |                       |  |
| Submiss Code    Submiss Code   Submi | ont<br>d (                  |              |  |           | L               | <b>1</b> g | 118,324             |                        |   |                       |  |
| Total Add lines 2x-2/2   | ح ت                         |              | h Total. Add lines                               | 1a-11     | f               | •          |                     | 1,765,730              |   |                       |  |
| Description      |                             | 22           |  |           |                 |            | Business Code       |                        |   |                       |  |
| 9 Total: Add lines 2a-2f   |                             | Za           |  |           |                 |            |                     |                        |   |                       |  |
| 9 Total: Add lines 2a-2f   | en E                        | ١.           |  |           |                 |            |                     |                        |   |                       |  |
| 9 Total: Add lines 2a-2f   | Rex                         | 6            | <b>'</b>   |           |                 |            |                     |                        |   |                       |  |
| 9 Total: Add lines 2a-2f   | ice                         | c            | :  |           |                 |            |                     |                        |   |                       |  |
| 9 Total: Add lines 2a-2f   | Şer                         | ي ا          |  |           |                 |            |                     |                        |   |                       |  |
| 9 Total: Add lines 2a-2f   | E                           | "            |  |           |                 |            |                     |                        |   |                       |  |
| 9 Total: Add lines 2a-2f   | ogr                         | e            | •  |           |                 |            |                     |                        |   |                       |  |
| 9 Total. Add lines 2a-2f.  | Δ                           | ı,           | All other program                                | conv      | ice revenue     |            |                     |                        |   |                       |  |
| 3   Investment isorome (including dividends, interest, and other similar amounts)   57,850   57,850     4   Income from investment of tax-exempt bond proceeds   6   6   6     5   Royalties   7   7   7   7   7   7   7   7   7   |                             |              | · -  |           |                 |            |                     |                        |   |                       |  |
| 37,850   5   |                             | ⊢            |  |           |                 |            |                     | 1                      | T                                       |                       |  |
| S Royalties  |                             | 9            | similar amounts) .                               | •         |                 | •          | •                   |                        |   |                       |  |
| Comparison   Com   |                             |              |  |           |                 | npt bo     |                     | <u> </u>               |   |                       |  |
| Ga Gross rents   6a  |                             | 5            | Royalties  | <u>.</u>  |                 |            |                     | <u>'</u>               | 0                                       |                       |  |
| D   Less: rental   Companies   C   Rental income or (loss)   Rental income   |                             |              |  |           | (I) Nea         |            | (II) Personal       | -                      |   |                       |  |
| Exercises  |                             |              |  | 6a        |                 |            |                     |                        |   |                       |  |
| Or (loss)   Sc   |                             | b            |  | 6ь        |                 |            |                     |                        |   |                       |  |
| d Net rental income or (loss)  |                             | С            | Rental income                                    |           |                 |            |                     |                        |   |                       |  |
| Ta Gross amount forms selected from selected |                             | ۔ ا          |  |           | (1)             |            |                     | ┧ .                    |   |                       |  |
| Table   Tabl   |                             | `            | ı Net rental income                              | or (      |                 |            |                     |                        |   |                       |  |
| ## To be contributed by the contribute of the co |                             | 72           | Gross amount                                     |           | (I) Securit     | .163       | (II) Other          | _                      |   |                       |  |
| Description      |                             |              | from sales of                                    | 7a        |                 |            |                     |                        |   |                       |  |
| Other basis and sales expenses   70  |                             |              |  |           |                 |            |                     | 4                      |   |                       |  |
| C Gain or (loss)  7 C  d Net gain or (loss)  8a Gross income from fundraising events (not including \$\frac{1}{2}\$ of contributions reported on line 1c).  See Part IV, line 18   |                             | b            | other basis and                                  | 7b        |                 |            |                     |                        |   |                       |  |
| Net gain or (loss)   Netgain or (loss)      |                             |              | sales expenses                                   |           |                 |            |                     | -                      |   |                       |  |
| 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18  |                             |              |  |           |                 |            |                     |                        |   |                       |  |
| (not including s of contributions reported on line 1c).  See Part IV, line 18  |                             |              |  |           |                 | _          |                     |                        | 0                                       |                       |  |
| 9a Gross income from gaming activities. See Part IV, line 19   | e<br>E                      | 8a           | (not including \$                                |           | of              |            |                     |                        |   |                       |  |
| 9a Gross income from gaming activities. See Part IV, line 19   | E-                          |              |  |           |                 |            | 1 122 265           |                        |   |                       |  |
| 9a Gross income from gaming activities. See Part IV, line 19   | Re                          | ١,           |  |           |                 |            |                     |                        |   |                       |  |
| 9a Gross income from gaming activities. See Part IV, line 19   | er                          |              | •  |           |                 |            |                     |                        | 2                                       |                       |  |
| See Part IV, line 19       9a       9b         b Less: direct expenses       9b       0         c Net income or (loss) from gaming activities       0         10a Gross sales of inventory, less returns and allowances       10a       75,480         b Less: cost of goods sold       10b       33,926         c Net income or (loss) from sales of inventory       41,554       41,554         Miscellaneous Revenue       Business Code       11a         b       0       0       0         d All other revenue       0       0       0         12 Total revenue. See instructions       2,649,596       57,850       41,554   |                             |              |  |           |                 |            |                     |                        |   |                       |  |
| b Less: direct expenses  |                             | 9a           | Gross income from<br>See <b>Part</b> IV, line 19 | gami<br>• | ing activities. | 92         |                     |                        |   |                       |  |
| c Net income or (loss) from gaming activities .    10aGross sales of inventory, less returns and allowances .   10a 75,480  b Less: cost of goods sold .   10b 33,926  c Net income or (loss) from sales of inventory .   41,554  Miscellaneous Revenue Business Code  11a  b  c  d All other revenue .   e Total. Add lines 11a-11d .   0  12 Total revenue. See instructions   2,649,596  57,850  41,554   |                             | l t          | Less: direct expen                               | ses       |                 |            |                     | -                      |   |                       |  |
| returns and allowances 10a   |                             |              | ·  |           |                 | ctivit     | ies                 |                        | о                                       |                       |  |
| returns and allowances 10a   |                             |              | -C   | 1         | n. 1            |            |                     |                        |   |                       |  |
| b Less: cost of goods sold .   |                             | 10           |  |           |                 | 10a        | 75,480              |                        |   |                       |  |
| Miscellaneous Revenue  Business Code  11a  b  c  d All other revenue   |                             | ŀ            | Less: cost of good                               | s sol     | d               |            | 33,926              | .                      |   |                       |  |
| 11a         b         c         d All other revenue         e Total. Add lines 11a-11d   |                             | ,            | Net income or (los                               | s) fr     | om sales of i   | nvent      | ory <b>&gt;</b>     | 41,55                  | 4                                       |                       | 41,554   |
| b  c  d All other revenue  e Total. Add lines 11a-11d  |                             |              |  | us R      | evenue          |            | Business Code       |                        |   |                       |  |
| d All other revenue       □         e Total. Add lines 11a-11d       □         12 Total revenue. See instructions       □         2,649,596       57,850   |                             | 11           | La   |           |                 |            |                     |                        |   |                       |  |
| d All other revenue       □         e Total. Add lines 11a-11d       □         12 Total revenue. See instructions       □         2,649,596       57,850   |                             |              | _  |           |                 |            |                     |                        |   |                       |  |
| d All other revenue  |                             | <sup>t</sup> | ס  |           |                 |            |                     |                        |   |                       |  |
| d All other revenue  |                             |              |  |           |                 |            |                     |                        |   |                       |  |
| e Total. Add lines 11a–11d   |                             | <b>'</b>     | u  |           |                 |            |                     |                        |   |                       |  |
| e Total. Add lines 11a–11d   |                             |              | d All other reverse                              |           |                 |            |                     |                        |   |                       |  |
| 12 Total revenue. See instructions   |                             |              |  |           |                 | .          | , , <b>b</b>        |                        |   |                       | <del> </del>                                   |
| 2,649,596 57,850 41,554  |                             |              |  |           |                 | •          |                     | +                      | 0                                       |                       |  |
|  |                             |              | - 70tal reveilue: 3                              | II        | .56 4660115     | •          | • • • •             | 2,649,59               | 6 57,850                                |                       | 41,554<br>Form <b>990</b> (2019)               |

| Form | 990 (2019)  |                        |                              |   | Page <b>10</b>                        |
|------|---|------------------------|------------------------------|---|---------------------------------------|
| Pa   | nIX Statement of Functional Expenses  |                        |                              |   |                                       |
|      | Section 501(c)(3) and 501(c)(4) organizations must c  |                        | _                            |   | mn (A).                               |
|      | Check if Schedule O contains a response or note to an   | y line in this Part IX |                              |   | <u> L</u>                             |
|      | not include amounts reported on lines 6b,<br>8b, 9b, and 10b of Part VIII.  | (A)<br>Total expenses  | (B) Program service expenses | (C)<br>Management and<br>general expenses | <b>(D)</b><br>Fundraising<br>expenses |
|      | Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21  | 0                      |                              |   |                                       |
|      | Grants and other assistance to domestic individuals. See Part IV, line 22   | 0                      |                              |   |                                       |
|      | Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.   | 0                      |                              |   |                                       |
| 4    | Benefits paid to or for members   | 0                      |                              |   |                                       |
| 5    | Compensation of current officers, directors, trustees, and key employees  | 133,332                | 117,629                      | 10,597                                    | 5,106                                 |
|      | Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$  | 0                      |                              |   |                                       |
| 7    | Other salaries and wages  | 865,883                | 763,902                      | 68,820                                    | 33,161                                |
|      | Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)   | 0                      |                              |   |                                       |
|      | Other employee benefits   | 157,313                | 138,785                      | 12,503                                    | 6,025                                 |
|      | Payroll taxes   | 61,257                 | 54,042                       | 4,869                                     | 2,346                                 |
|      | Fees for services (non-employees):  | •                      |                              |   | ·                                     |
| a    | Management  | 0                      |                              |   |                                       |
| _    | Legal   | 0                      |                              |   |                                       |
|      | Accounting  | 0                      |                              |   |                                       |
|      | Lobbying  | 0                      |                              |   |                                       |
|      | Professional fundraising services. See Part IV, line 17   | 0                      |                              |   |                                       |
|      | Investment management fees  | 0                      |                              |   |                                       |
| g    | Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)  | 152,150                | 137,370                      | 13,130                                    | 1,650                                 |
| 12   | Advertising and promotion   | 0                      |                              |   |                                       |
| 13   | Office expenses   | 0                      |                              |   |                                       |
| 14   | Information technology  | 0                      |                              |   |                                       |
| 15   | Royalties   | 0                      |                              |   |                                       |
|      | Occupancy   | 0                      |                              |   |                                       |
| 17   | Travel  | 45,355                 | 43,674                       | 1,559                                     | 122                                   |
| 18   | Payments of travel or entertainment expenses for any federal, state, or local public officials .  | 0                      | ·                            |   |                                       |
| 19   | Conferences, conventions, and meetings  | 0                      |                              |   |                                       |
| 20   | Interest  | 0                      |                              |   |                                       |
| 21   | Payments to affiliates  | 0                      |                              |   |                                       |
|      | Depreciation, depletion, and amortization   | 24,463                 | 17,586                       | 6,877                                     |                                       |
|      | Insurance   | 0                      |                              |   |                                       |
| 24   | Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) |                        |                              |   |                                       |
|      | Operating Expenses  | 277,031                | 253,261                      | 23,735                                    | 35                                    |
| ŀ    | In-Kind Donation  | 118,323                |                              |   | 118,323                               |
| •    | Education and Engagement  | 102,638                | 102,638                      |   |                                       |
| •    | Communicate and advocacy exp.   | 29,912                 | 29,662                       | 250                                       |                                       |
| -    | All other expenses  | 26,500                 | 26,500                       |   |                                       |
| 25   | Total functional expenses. Add lines 1 through 24e  | 1,994,157              | 1,685,049                    | 142,340                                   | 166,768                               |
|      | 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).   |                        |                              |   |                                       |
|      | ·   | I.                     |                              |   | Form 000 (2010)                       |

| P     | art X | Balance Sheet   |                         |                         |                                 |     |                    |
|-------|-------|---|-------------------------|-------------------------|---------------------------------|-----|--------------------|
|       |       | Check if Schedule O contains a response or not  | e to a                  | ny line in this Part IX |                                 |     | 🗆                  |
|       |       |   |                         |                         | <b>(A)</b><br>Beginning of year |     | (B)<br>End of year |
|       | 1     | Cash-non-interest-bearing   | 298,608                 | 1                       | 854,662                         |     |                    |
|       | 2     | Savings and temporary cash investments .  | 154,086                 | 2                       | 287,109                         |     |                    |
|       | 3     | Pledges and grants receivable, net  |                         |                         |                                 | 3   | 0                  |
|       | 4     | Accounts receivable, net  |                         | 15,502                  | 4                               | 25  |                    |
|       | 5     | Loans and other payables to any current or form<br>key employee, creator or founder, substantial c<br>entity or family member of any of these persons | itor, or 35% controlled |                         | 5                               | 0   |                    |
|       | 6     | Loans and other receivables from other disquali section $4958(f)(1)$ ), and persons described in section $4958(f)(1)$                                 |                         |                         | 6                               | 0   |                    |
| s     | 7     | Notes and loans receivable, net   |                         | 7                       | 0                               |     |                    |
| ssets | 8     | Inventories for sale or use   |                         |                         | 79,653                          | 8   | 84,726             |
| ASS   | 9     | Prepaid expenses and deferred charges   |                         |                         | 36,224                          | 9   | 39,381             |
| _     | 10a   | Land, buildings, and equipment: cost or other<br>basis. Complete Part VI of Schedule D  | 10a                     | 801,977                 |                                 |     |                    |
|       | ь     | Less: accumulated depreciation  | 10b                     | 215,097                 | 609,399                         | 10c | 586,880            |
|       | 11    | Investments—publicly traded securities .  |                         |                         |                                 | 11  | 0                  |
|       | 12    | Investments—other securities. See Part IV, line   | 11 .                    |                         | 1,384,711                       | 12  | 1,382,937          |
|       | 13    | Investments—program-related. See Part IV, line  |                         |                         | 13                              | 0   |                    |
|       | 14    | Intangible assets   |                         | [                       |                                 | 14  | 0                  |
|       | 15    | Other assets. See Part IV, line 11  |                         |                         | 1,373,511                       | 15  | 1,584,064          |
|       | م ا   | <b>-</b>  | 1.12                    |                         | 2.054.604                       | 4.0 | 4.040.704          |

|    | lua | basis. Complete Part VI of Schedule D             | 10a       | 801,977       |           |             |   |
|----|-----|---|-----------|---------------|-----------|-------------|---|
|    | b   | Less: accumulated depreciation                    | 10b       | 215,097       | 609,399   | <b>10</b> c |   |
|    | 11  | Investments—publicly traded securities .          |           |               | 11        |             |   |
|    | 12  | Investments—other securities. See Part IV, line   | 11 .      |               | 1,384,711 | 12          | 1 |
|    | 13  | Investments—program-related. See Part IV, line    |           | 13            |           |             |   |
|    | 14  | Intangible assets                                 |           | 14            |           |             |   |
|    | 15  | Other assets. See Part IV, line 11                | 1,373,511 | 15            | 1         |             |   |
|    | 16  | Total assets. Add lines 1 through 15 (must equ    | ual line  | 34)           | 3,951,694 | 16          | 4 |
|    | 17  | Accounts payable and accrued expenses             |           |               | 57,695    | 17          |   |
|    | 18  | Grants payable                                    |           |               | 18        |             |   |
|    | 19  | Deferred revenue                                  |           |               |           | 19          |   |
|    | 20  | Tax-exempt bond liabilities                       |           | 20            |           |             |   |
| es | 21  | Escrow or custodial account liability. Complete F | Part IV   | of Schedule D |           | 21          |   |
| O) | I   |   |           |               |           |             | 1 |

|             | 15 | Other assets. See Part IV, line 11   | 1,373,511 | 15 | 1,584,064 |
|-------------|----|--|-----------|----|-----------|
|             | 16 | Total assets. Add lines 1 through 15 (must equal line 34)  | 3,951,694 | 16 | 4,819,784 |
|             | 17 | Accounts payable and accrued expenses  | 57,695    | 17 | 85,730    |
|             | 18 | Grants payable   |           | 18 |           |
|             | 19 | Deferred revenue   |           | 19 |           |
|             | 20 | Tax-exempt bond liabilities  |           | 20 |           |
| Ś           | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D  |           | 21 |           |
| Liabilities | 22 | Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons |           | 22 |           |
| <u> </u>    | 23 | Secured mortgages and notes payable to unrelated third parties   |           | 23 |           |
|             | 24 | Unsecured notes and loans payable to unrelated third parties   |           | 24 |           |
|             | 25 | Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24).<br>Complete Part X of Schedule D                                 |           | 25 |           |
|             | 26 | Total liabilities. Add lines 17 through 25   | 57,695    | 26 | 85,730    |
| sea         |    | Organizations that follow FASB ASC 958, check here ▶ ☑ and   |           |    |           |

| idei.    |    | or family member of any of these persons   |           | 22 |           |
|----------|----|--|-----------|----|-----------|
| Ξ.       | 23 | Secured mortgages and notes payable to unrelated third parties   |           | 23 |           |
|          | 24 | Unsecured notes and loans payable to unrelated third parties   |           | 24 |           |
|          | 25 | Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24).  Complete Part X of Schedule D |           | 25 |           |
|          | 26 | Total liabilities. Add lines 17 through 25   | 57,695    | 26 | 85,730    |
| Balances | 27 | Organizations that follow FASB ASC 958, check here ► ☑ and complete lines 27, 28, 32, and 33.  | 3.194.462 | 27 | 3,939,344 |
| <u> </u> | 27 | Net assets without donor restrictions  | 3,194,462 | 27 | 3,939,344 |
|          | 28 | Net assets with donor restrictions   | 699,537   | 28 | 794,710   |
| Fund     |    | Organizations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 29 through 33.  |           |    |           |

29

30

31

32

33

3,893,999

3,951,694

4,734,054

4,819,784

Form **990** (2019)

Net Assets or

29

30

31

32

33

Capital stock or trust principal, or current funds . . .

Total net assets or fund balances .

Total liabilities and net assets/fund balances

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

| Form | 990 (2019)  |         |    |     | Page <b>12</b> |
|------|---|---------|----|-----|----------------|
| Pai  | Reconcilliation of Net Assets   |         |    |     |                |
|      | Check if Schedule O contains a response or note to any line in this Part XI   | <u></u> |    |     |                |
| 1    | Total revenue (must equal Part VIII, column (A), line 12)   | 1       |    | 2   | ,649,596       |
| 2    | Total expenses (must equal Part IX, column (A), line 25)  | 2       |    | 1   | ,994,157       |
| 3    | Revenue less expenses. Subtract line 2 from line 1  | 3       |    |     | 655,439        |
| 4    | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))   | 4       |    | 3   | ,893,999       |
| 5    | Net unrealized gains (losses) on investments  | 5       |    |     | 184,616        |
| 6    | Donated services and use of facilities  | 6       |    |     |                |
| 7    | Investment expenses   | 7       |    |     |                |
| 8    | Prior period adjustments  | 8       |    |     |                |
| 9    | Other changes in net assets or fund balances (explain in Schedule O)  | 9       |    |     |                |
| 10   | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))  | 10      |    | 4   | 734,054        |
| Pa   | rt XII Financial Statements and Reporting   |         |    |     | ,              |
|      | Check if Schedule O contains a response or note to any line in this Part XII  |         |    |     |                |
|      |   |         |    | Yes | No             |
| 1    | Accounting method used to prepare the Form 990:   |         |    |     |                |
| 2a   | Were the organization's financial statements compiled or reviewed by an independent accountant?   |         | 2a |     | No             |
|      | If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:  | on a    |    |     |                |
|      | ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis  |         |    |     |                |
| b    | Were the organization's financial statements audited by an independent accountant?  |         | 2b | Yes |                |
|      | If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both:   | basis,  |    |     |                |
|      | ✓ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis  |         |    |     |                |
| С    | If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? |         | 2c | Yes |                |
|      | If the organization changed either its oversight process or selection process during the tax year, explain in Sche  | dule O. |    |     |                |
| За   | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin<br>Audit Act and OMB Circular A-133?  | ngle    | 3a |     | No             |
| b    | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.        | red     | 3b |     |                |

#### **Additional Data**

Software ID: 19009920

Software Version: 2019v5.0

**EIN:** 94-6128680

Name: League to Save Lake Tahoe

Form 990 (2019)

#### Form 990, Part III, Line 4a:

To achieve our mission the League to Save Lake Tahoe advocates for environmental protections and policies that are backed by science to ensure that Tahoe is resilient to the changing climate, we engage Tahoes diverse and evolving community of visitors and residents to protect Lake Tahoe by spreading awareness and taking action, and we create solutions to the challenges facing Tahoe that strike a balance between the enjoyment of the Lake today and preservation for future generations. Our work is focused on three primary campaigns; to Combat Pollution, Advance Restoration and Tackle Invasive Species, Our successes through our four focal campaigns are outlined below: Restoration of wetlands and habitat: With so much of Tahoes wetlands and forests damaged by past development, ecosystem restoration is key to bringing back the Lakes natural filtration system, creating a healthy and safe fire regime, and ridding the environment of harmful invasive species. Functioning and healthy forests, meadows, streams and marshes make for a resilient ecosystem that is better able to avoid catastrophic wildfire and adapt to other threats from a changing climate. Tahoe Forest Stewardship Days is the Leagues longest running community engagement event and Tahoes largest single day restoration volunteer effort. On June 22 for our spring event, 57 volunteers and partners braved the windy day to protect the endemic and sensitive Tahoe Yellow Cress plant at Baldwin Beach in South Lake Tahoe. Volunteers installed 300 feet of new fencing and planted 500 willow stakes around the TYC at the mouth of Tallac Creek, which flows to Lake Tahoe; cleared the beach of 14 pounds of litter; and monitored for aquatic invasive species around Baldwin Beach, in which no invasive species were found. At the fall event on September 21, 70 participants came out to the 22nd annual Fall Tahoe Forest Stewardship Day at Johnson Meadow along the Upper Truckee River. Volunteers planted 600 willow stakes and installed 60 willow fascines in 100 yards of the Upper Truckee River to stabilize the stream banks and prevent sediment from dumping into Lake Tahoe; removed 138 encroaching Conifer trees from a 1/4 acre of Aspen grove and meadow; removed 20 T-posts, two wooden posts, and 200 feet of remnant fencing leftover from historic cattle grazing days; removed approximately 128 cubic feet of down wood and branches for fuel hazard reduction; removed invasive weeds including 4,665 Curly Dock, 56 Bull Thistle, and 24 Salsify; removed 20 pounds of litter, including 148 cigarette butts and 378 plastic pieces (cleanup efforts were part of the larger regional Great Sierra River Cleanup.Controlling weeds: Eyes on the Lake is the Leagues citizen science program to help prevent the spread of aquatic invasive species in Tahoes waters. League staff train water recreationists to identify aguatic invasive plants and their native look-alikes in and around Lake Tahoe, complete short field surveys while out enjoying the water and report what they see. In 2019 we: Conducted 9 trainings certifying 66 volunteers 166 surveys were completed In 2019, the Citizen Science team worked with a local designer to create a wooden countertop display that holds four preserved plant samples in plastic test tubes. The League also contracted with a printer to develop new accordion handouts to accompany the plant displays, which quick identification of aquatic invasive plants found in Lake Tahoe, Maintained bubble curtain at mouth of TKPOA channel into Lake TahoeInstalled and monitored Laminar Flow Aeration project at multiple locations within the Tahoe KeysContinued to work on the Tahoe Keys Lagoon Restoration Stakeholder ProcessProtecting our Shoreline: Tahoes shoreline beauty is deteriorating rapidly in some areas. Algae blooms, sediment, water weeds, and non-native clams are big problems. The shoreline ecosystem is rapidly changing. Trash and graffiti mar beaches and boulder areas. In 2018 the League helped to protect our Shorelines by: Keep Tahoe Blue Cleanups provide locals and visitors with opportunities to protect Tahoes shoreline and the surrounding watershed. Lake Tahoe attracts millions of visitors to enjoy its beaches and trails, but heavy use often means large quantities of litter left behind. We partner with land managers and local jurisdictions to target beaches and community areas where volunteer efforts will help most. The League collects data on the trash collected to identify hot spots and advocate for solutions. In 2019 we hosted 28 cleanups with 887 volunteers who helped us collect over 3,300 pounds of trash. Through these cleanups we cleaned 38 miles of beach and collected 24,363 cigarette butts. Fighting pollution: Unchecked past development paved over much of Tahoes natural pollution filtration system its marshes and wetlands. Now, rain and melting snow moving over our roads, buildings and parking lots releases fine sediment pollution that flows into the Lake, a threat that is intensified by climate change. Litter, like cigarette butts and single-use plastics, also harm the Lakes health and degrade its unmatched natural beauty. Our vision for Tahoe is one where the general public, visitors, core volunteers, community members and better businesses are all an active part of the solution to protecting our Lakes clarity. We continue to work to bring alternative transportation methods like Lime bikes and microtransit like Chariot to South Lake. These smart transportation ideas encourage visitors and locals to use greener methods of transportation. Our transportation and stormwater accomplishments in 2019; Snapshot Day; Snapshot Day is an annual event occurring each May, in which volunteers take a snapshot of the health of the Tahoe-Truckee watershed by collecting water quality data from select streams and lakes in the Tahoe Basin. The Leagues efforts are focused on the upper watershed, which includes the headwaters of the Upper Truckee River and Lake Tahoes South Shore from Meeks Bay to Zephyr Cove. In 2019 90 volunteers attended Snapshot Day and monitored 34 sites. Pipe Keepers: Pipe Keepers is the Leagues citizen science program to address stormwater runoff into Lake Tahoe, Unchecked twentieth-century development payed over much of Tahoes marshes and wetlands, which had acted as natural pollution filters. Now, when rain hits our roads and parking lots, it washes off fine sediment, the number one threat to Lake clarity, and other pollutants into storm drains that lead to the Lake, League experts train community members to assess and monitor the condition of stormwater infrastructure and collect stormwater samples for turbidity analysis during the first big storm of the year and large snowmelt events. Volunteer efforts help League staff locate and address pipes that are dumping high levels of sediment into Lake Tahoe. League staff then collaborate with agency partners to find solutions for the most-polluting pipes, so we can stop pollution before it enters the Lake. In 2019 we trained 23 volunteers who made 163 assessments of pipes.

| efile GRAPHIC print - DO NOT PROCESS |         |                                     |                                       | DLN: 9                      | DLN: 93493301011330   |  |   |  |                              |
|--------------------------------------|---------|-------------------------------------|---------------------------------------|-----------------------------|---|--|---|--|------------------------------|
| SCHEDULE A                           |         |                                     |                                       | ublic C                     | harity Statu  | e and Dul  | olic Supp   | ort  | OMB No. 1545-0047            |
|                                      | m 99    |                                     | Complet                               | e if the or                 | ganization is a sect<br>4947(a)(1) nonexe<br>▶ Attach to Form 9 | ion 501(c)(3) c<br>empt charitable<br>990 or Form 99 | organization or<br>trust.<br>0-EZ.                | a section  | 2019                         |
|                                      |         | f the Treasury                      | ► Go to                               | <u>www.irs.</u>             | <i>gov/Form990</i> for i  | nstructions and                                      | the latest info                                   | rmation.   | Open to Public<br>Inspection |
| Nam                                  | e of th | <b>he organiza</b><br>ve Lake Tahoe | tion                                  |                             |   |  |   | Employer identific   | ation number                 |
| _                                    |         |                                     |                                       |                             |   |  |   | 94-6128680   |                              |
|                                      | rt I    |                                     |                                       |                             | <b>s</b> (All organization it is: (For lines 1 thro             |  |   | ee instructions.   |                              |
| 1                                    | n yannz |                                     | •                                     |                             | sociation of churches   | - '  |   | (A)(i)   |                              |
| 2                                    |         | ·                                   |                                       | ,                           | .)(A)(ii). (Attach Sch  |  |   | (~)(1).  |                              |
| 3                                    |         |                                     |                                       |                             | ice organization desc   | ,  | , ,   | :::\   |                              |
| 4                                    |         | ·                                   | ·                                     | ·                           | -   |  |   | •  | ntor the beenitalle          |
| 7                                    | Ш       | name, city,                         |                                       | ion operate                 | a in conjunction with   | a nospital descri                                    | bed in <b>section</b> .                           | l <b>70(b)(1)(A)(iii)</b> . E  | nter the hospital's          |
| 5                                    |         |                                     | ation operated for (iv). (Complete Pa |                             | of a college or unive   | rsity owned or op                                    | perated by a gov                                  | ernmental unit descri  | bed in <b>section 170</b>    |
| 6                                    |         | A federal, s                        | tate, or local gove                   | ernment or                  | governmental unit de  | scribed in <b>sectio</b>                             | on 170(b)(1)(A                                    | )(v).  |                              |
| 7                                    |         |                                     | ation that normally (O(b)(1)(A)(vi).  |                             |   | s support from a                                     | governmental u                                    | nit or from the gener  | al public described in       |
| 8                                    |         |                                     |                                       |                             | 170(b)(1)(A)(vi).   | (Complete Part I                                     | I.)   |  |                              |
| 9                                    |         |                                     |                                       |                             | scribed in <b>170(b)(1)</b><br>e instructions. Enter            |  |   |  | ege or university or a       |
| 10                                   | ✓       | from activit<br>investment          | ies related to its e                  | exempt fund<br>ated busine  | tions—subject to ceress taxable income (le                      | tain exceptions, a                                   | and (2) no more                                   | s, membership fees,<br>than 331/3% of its su<br>ses acquired by the c  | -                            |
| 11                                   |         | An organiza                         | ation organized an                    | d operated                  | exclusively to test fo  | r public safety. S                                   | ee section 509                                    | (a)(4).  |                              |
| 12                                   |         | more public                         | ly supported orga                     | nizations d                 |   | 09(a)(1) or sec                                      | ction 509(a)(2                                    | s of, or to carry out th<br>). See section 509(a<br>12e, 12f, and 12g. |                              |
| a                                    |         | <b>Type I.</b> A so                 | supporting organiz                    | ation opera<br>regularly ap | ted, supervised, or c   | ontrolled by its s                                   | upported organiz                                  | ration(s), typically by<br>of the supporting orga                      |                              |
| b                                    |         | Type II. A<br>manageme              | supporting organ                      | ization supe<br>ng organiza | tion vested in the sar  |  |   | rganization(s), by ha<br>le the supported orga                         |                              |
| С                                    |         | Type III f                          | unctionally integ                     | j <b>rated.</b> A si        |   |  |   | nd functionally integra  | ted with, its                |
| d                                    |         | Type III n                          | on-functionally<br>integrated. The o  | integrated<br>organization  | A supporting organi   | zation operated<br>fy a distribution                 | in connection wi                                  | th its supported orgar<br>an attentiveness req                         |                              |
| е                                    |         | Check this                          | box if the organiza                   | ation receiv                |   | ation from the II                                    |   | pe I, Type II, Type II   | I functionally               |
| f                                    | Enter   |                                     | of supported orga                     |                             |   | -  |   | <u> </u>   |                              |
| g                                    |         |                                     |                                       |                             | oported organization(   |  |   |  |                              |
|                                      | (i) N   | Name of supp<br>organizatior        |                                       | ii) EIN                     | organization in your governing document? monetar                |  | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions)                        |                              |
|                                      |         |                                     |                                       |                             |   | Yes  | No  |  |                              |
|                                      |         |                                     | <u> </u>                              |                             |   |  |   |  |                              |
|                                      |         |                                     |                                       |                             |   |  |   |  |                              |
| Tota                                 |         | l. B. '                             | tion Act Notice,                      |                             | -t  | Cat. No. 11285                                       |   | Schedule A (Form 9   | 000 57) 5515                 |

| Sch         | edule A (Form 990 or 990-EZ) 2019   |                            |   |  |  |  | Page <b>2</b>   |
|-------------|---|----------------------------|---|--|--|--|-----------------|
| P           | art II Support Schedule for   | Organizations              | Described in S                          | Sections 170(b                         | )(1)(A)(iv) ar                                   | nd 170(b)(1)(A                         | (vi)            |
|             | (Complete only if you ch  |                            |   |  |  |  | under Part III. |
|             | If the organization failed  | to qualify unde            | r the tests listed                      | below, please                          | complete Part I                                  | II.)                                   |                 |
|             | ection A. Public Support  Calendar year                                       |                            | I                                       |  |  |  |                 |
|             | (or fiscal year beginning in) ▶   | (a) 2015                   | <b>(b)</b> 2016                         | (c) 2017                               | (d) 2018   | (e) 2019                               | (f) Total       |
| 1           | Gifts, grants, contributions, and   |                            |   |  |  |  |                 |
|             | membership fees received. (Do not include any "unusual grant.")               |                            |   |  |  |  |                 |
| 2           | Tax revenues levied for the   |                            |   |  |  |  |                 |
| _           | organization's benefit and either paid  |                            |   |  |  |  |                 |
| _           | to or expended on its behalf The value of services or facilities              |                            |   |  |  |  |                 |
| 3           | furnished by a governmental unit to   |                            |   |  |  |  |                 |
|             | the organization without charge   |                            |   |  |  |  |                 |
| 4           | <b>Total.</b> Add lines 1 through 3   |                            |   |  |  |  |                 |
| 5           | The portion of total contributions by each person (other than a               |                            |   |  |  |  |                 |
|             | governmental unit or publicly   |                            |   |  |  |  |                 |
|             | supported organization) included on   |                            |   |  |  |  |                 |
|             | line 1 that exceeds 2% of the amount shown on line 11, column (f).            |                            |   |  |  |  |                 |
| 6           | Public support. Subtract line 5 from  |                            |   |  |  |  |                 |
|             | line 4.   |                            |   |  |  |  |                 |
| <u>s</u>    | ection B. Total Support   |                            | T                                       |  | 1  | 1                                      |                 |
|             | Calendar year<br>(or fiscal year beginning in) ▶                              | (a) 2015                   | <b>(b)</b> 2016                         | (c) 2017                               | (d) 2018   | (e) 2019                               | (f) Total       |
| 7           | Amounts from line 4   |                            |   |  |  |  |                 |
| 8           | Gross income from interest,   |                            |   |  |  |  |                 |
|             | dividends, payments received on<br>securities loans, rents, royalties and     |                            |   |  |  |  |                 |
|             | income from similar sources   |                            |   |  |  |  |                 |
| 9           | Net income from unrelated business  |                            |   |  |  |  |                 |
|             | activities, whether or not the  |                            |   |  |  |  |                 |
| 10          | business is regularly carried on Other income. Do not include gain or         |                            |   |  |  |  | -               |
|             | loss from the sale of capital assets  |                            |   |  |  |  |                 |
|             | (Explain in Part VI.).  |                            |   |  |  |  |                 |
| 11          | <b>Total support.</b> Add lines 7 through 10                                  |                            |   |  |  |  |                 |
| 12          | Gross receipts from related activities,                                       | etc. (see instruction      | ons)                                    |  |  | 12                                     |                 |
| 13          | First five years. If the Form 990 is for                                      | or the organization        | 's first, second, th                    | ird, fourth, or fifth                  | n tax year as a sec                              | tion 501(c)(3) org                     | anization,      |
|             | check this box and <b>stop here</b>   |                            |   |  |  | ▶ [                                    |                 |
| S           | ection C. Computation of Publi  |                            |   |  |  |  |                 |
| 14          | Public support percentage for 2019 (li  | ne 6, column (f) di        | vided by line 11,                       | column (f))                            |  | 14                                     | -               |
| 15          | Public support percentage for 2018 Sc   | hedule A, Part II,         | line 14                                 |  |  | 15                                     |                 |
| 16a         | <b>33 1/3% support test—2019.</b> If the                                      |                            |   |  |  |  |                 |
|             | and <b>stop here.</b> The organization qual                                   | ifies as a publicly s      | supported organiza                      | ation                                  |  |  | ▶□              |
| b           | <b>33 1/3% support test—2018.</b> If th                                       | e organization did         | not check a box o                       | on line 13 or 16a,                     | and line 15 is 33 i                              | 1/3% or more, chec                     | k this          |
|             | box and <b>stop here.</b> The organization                                    | qualifies as a pub         | licly supported or                      | ganization                             |  |  | ▶ 🗆             |
| <b>17</b> a | 10%-facts-and-circumstances tes   | t— <b>2019.</b> If the org | ganization did not                      | check a box on lin                     | ne 13, 16a, or 16b                               | , and line 14                          |                 |
|             | is 10% or more, and if the organization in Part VI how the organization meets | n meets the facts          | r-and-circumstanci<br>cumstances" test. | es test, check thi<br>The organization | s box and <b>stop n</b> e<br>qualifies as a publ | e <b>re.</b> Explain<br>icly supported |                 |
|             | organization  |                            |   | -                                      |  |  | ►□              |
| h           | 10%-facts-and-circumstances tes   | st— <b>2018.</b> If the o  | rganization did no                      | t check a box on I                     | ine 13, 16a, 16b,                                | or 17a, and line                       |                 |
| _           | 15 is 10% or more, and if the organiz   | zation meets the "i        | facts-and-circums                       | tances" test, chec                     | k this box and <b>sto</b>                        | p here.                                |                 |
|             | Explain in Part VI how the organization                                       |                            |   | -                                      |  | • •                                    | . $\Box$        |
| _           | supported organization  |                            | haven 15 40-4                           | C- 10b 47 4                            | 76   |  | ▶⊔              |
| 18          | _   |                            |   |  |  |  | . □             |
|             | instructions  |                            | <u> </u>                                |  | - Cabadu   | lo A (Form 000 o                       | ▶ ⊔             |

20

| Ġ   | Part IIII Support Schedule for  |                            |                      |                       |                     |                   |                |
|-----|---|----------------------------|----------------------|-----------------------|---------------------|-------------------|----------------|
|     | (Complete only if you o   |                            |                      |                       |                     | to qualify unde   | er Part II. If |
| _   | the organization fails to   | o qualify under t          | ne tests listed b    | elow, please co       | mplete Part II.)    |                   |                |
| S   | ection A. Public Support  |                            |                      |                       |                     | <u> </u>          |                |
|     | Calendar year<br>(or fiscal year beginning in) ▶                        | (a) 2015                   | <b>(b)</b> 2016      | (c) 2017              | (d) 2018            | (e) 2019          | (f) Total      |
| 1   | Gifts, grants, contributions, and                                       |                            |                      |                       |                     |                   |                |
|     | membership fees received. (Do not                                       | 2,040,280                  | 1,667,705            | 1,739,696             | 2,295,766           | 2,955,845         | 10,699,292     |
| 2   | include any "unusual grants.") .<br>Gross receipts from admissions,     |                            |                      |                       |                     |                   |                |
| _   | merchandise sold or services  |                            |                      |                       |                     |                   |                |
|     | performed, or facilities furnished in                                   | 423,785                    | 649,416              | 464,956               | 49,163              |                   | 1,587,320      |
|     | any activity that is related to the organization's tax-exempt purpose   |                            |                      |                       |                     |                   |                |
| 3   | Gross receipts from activities that                                     |                            |                      |                       |                     |                   |                |
|     | are not an unrelated trade or   |                            |                      |                       |                     |                   | 0              |
|     | business under section 513  |                            |                      |                       |                     |                   | -              |
| 4   | Tax revenues levied for the   |                            |                      |                       |                     |                   |                |
|     | organization's benefit and either                                       |                            |                      |                       |                     |                   | 0              |
|     | paid to or expended on its behalf                                       |                            |                      |                       |                     |                   | Ü              |
| 5   | The value of services or facilities                                     |                            |                      |                       |                     |                   |                |
| -   | furnished by a governmental unit to                                     |                            |                      |                       |                     |                   | 0              |
| _   | the organization without charge   | 2.464.065                  | 2 247 424            | 2 224 652             | 2 244 020           | 2.055.045         | 12.206.612     |
| 6   | <b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and | 2,464,065                  | 2,317,121            | 2,204,652             | 2,344,929           | 2,955,845         | 12,286,612     |
| / a | 3 received from disqualified persons                                    |                            |                      |                       |                     |                   | 0              |
| b   | Amounts included on lines 2 and 3                                       |                            |                      |                       |                     |                   |                |
|     | received from other than disqualified                                   |                            |                      |                       |                     |                   | 0              |
|     | persons that exceed the greater of \$5,000 or 1% of the amount on line  |                            |                      |                       |                     |                   | U              |
|     | 13 for the year.  |                            |                      |                       |                     |                   |                |
|     | Add lines 7a and 7b   |                            |                      |                       |                     |                   |                |
| 8   | <b>Public support.</b> (Subtract line 7c from line 6.)                  |                            |                      |                       |                     |                   | 12,286,612     |
| S   | ection B. Total Support   | <u> </u>                   | <u> </u>             |                       | <u> </u>            |                   |                |
|     | Calendar year   | (-) 201F                   | (h) 2016             | (-) 2017              | (4) 2010            | (-) 2010          | (f) T-t-1      |
|     | (or fiscal year beginning in) ▶   | (a) 2015                   | <b>(b)</b> 2016      | (c) 2017              | (d) 2018            | (e) 2019          | (f) Total      |
| 9   |   | 2,464,065                  | 2,317,121            | 2,204,652             | 2,344,929           | 2,955,845         | 12,286,612     |
| l0a | Gross income from interest, dividends, payments received on             |                            |                      |                       |                     |                   |                |
|     | securities loans, rents, royalties                                      | 14,281                     | 48,611               | 88,899                |                     | 57,850            | 209,641        |
|     | and income from similar sources   |                            |                      |                       |                     |                   |                |
| b   | <br>Unrelated business taxable income                                   |                            |                      |                       |                     |                   |                |
| D   | (less section 511 taxes) from   |                            |                      |                       |                     |                   | 0              |
|     | businesses acquired after June 30,                                      |                            |                      |                       |                     |                   | U              |
| _   | 1975.   | 14,281                     | 48,611               | 88,899                |                     | 57,850            | 209,641        |
| 11  |   | 14,201                     | 48,011               | 86,633                |                     | 37,830            | 203,041        |
|     | activities not included in line 10b,                                    | 1,187                      |                      |                       |                     |                   | 1,187          |
|     | whether or not the business is  | 1,107                      |                      |                       |                     |                   | 1,107          |
| 12  | regularly carried on. Other income. Do not include gain                 |                            |                      |                       |                     |                   |                |
| 12  | or loss from the sale of capital  |                            |                      |                       |                     |                   | 0              |
|     | assets (Explain in Part VI.)  |                            |                      |                       |                     |                   |                |
| 13  | <b>Total support.</b> (Add lines 9, 10c, 11, and 12.).                  | 2,479,533                  | 2,365,732            | 2,293,551             | 2,344,929           | 3,013,695         | 12,497,440     |
| 14  | First five years. If the Form 990 is for                                | or the organization        | 's first, second, th | ird, fourth, or fifth | n tax year as a sec | tion 501(c)(3) or | ganization,    |
| -   | check this box and <b>stop here</b>                                     |                            |                      |                       |                     |                   | ▶ 🗆            |
| S   | ection C. Computation of Public   |                            |                      |                       |                     |                   |                |
| 15  | Public support percentage for 2019 (li                                  |                            |                      | column (f))           |                     | 15                | 98.310 %       |
| 16  | Public support percentage from 2018 :                                   | Schedule A, Part II        | I, line 15           |                       |                     | 16                | 98.580 %       |
| S   | ection D. Computation of Invest   | ment Income l              | Percentage           |                       |                     |                   |                |
| 17  | Investment income percentage for 20                                     |                            |                      | ine 13, column (f)    | )                   | 17                | 1.680 %        |
|     | Investment income percentage from 2                                     | . <b>018</b> Schedule A, F | Part III, line 17 .  |                       |                     | 18                | 1.400 %        |
| 18  |   |                            |                      |                       |                     |                   | 17 is not      |

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

10a

answer line 10b below.

the organization had excess business holdings).

Sections A and D, and complete Part V.) Section A. All Supporting Organizations Yes No

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 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

Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. 3a Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the

determination. 3b 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. 3с

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 Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or

4b supervised by or in connection with its supported organizations. Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 4c 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 5a amendment to the organizing document).

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b

5c Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other 6

supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) . 7

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

8 complete Part I of Schedule L (Form 990 or 990-EZ). 8

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

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Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
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than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its

organization had an interest? If "Yes," provide detail in Part VI.

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2019

9b

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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.
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Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

|    | edule A (101111 330 01 330 E2) 2013  |        |         | age 3 |
|----|--|--------|---------|-------|
| Pa | rt IV Supporting Organizations (continued)   |        |         |       |
| _  |  |        | Yes     | No    |
|    | 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) below, the governing body of a supported organization?  |        |         |       |
|    |  | 11a    |         |       |
|    | A family member of a person described in (a) above?  | 11b    |         |       |
|    | A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI</b> .  | 11c    |         |       |
| S  | ection B. Type I Supporting Organizations  |        |         |       |
|    |  |        | 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 <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or 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 organizations and what conditions or restrictions, if any, applied to such powers during the tax year. | 1      |         |       |
| 2  | Did the organization operate for the benefit of any supported organization other than the supported organization(s) that   | -      |         |       |
| 2  | operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting   | 2      |         |       |
|    | organization.  |        |         |       |
| S  | ection C. Type II 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 or trustees of  |        |         |       |
|    | each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the   | 1      |         |       |
|    | supporting organization was vested in the same persons that controlled or managed the supported organization(s).   |        |         |       |
| S  | ection D. All Type III Supporting Organizations  |        |         |       |
| _  |  |        | Yes     | No    |
| 1  | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax 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?  |        |         |       |
| 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 <b>Part VI</b> 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 income or assets at all times during the tax  |        |         |       |
|    | year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.  | 3      |         |       |
| S  | ection E. Type III Functionally-Integrated Supporting Organizations  |        |         |       |
| 1  | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction)  | ions): |         |       |
|    | The organization satisfied the Activities Test. Complete line 2 below.   |        |         |       |
|    | b  |        |         |       |
| •  | The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see  | instru | ctions) |       |
| 2  | Activities Test. Answer (a) and (b) below.   | ſ      | Yes     | No    |
| •  | a 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 <b>Part VI identify those supported organizations and explain</b> 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     |         |       |
| ı  | 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.   |        |         |       |
| •  | a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .   | 3a     |         |       |
|    | <b>b</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 <b>Part VI.</b> the role played by the organization in this regard.  | 3h     |         |       |

3b

| 1 | Type III Non-Functionally Integrated 509(a)(3) Supporting O  Check here if the organization satisfied the Integral Part Test as a qualifying true.   |            |                | . Part VIV. See               |
|---|--|------------|----------------|-------------------------------|
|   | Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organization                                  |            |                |                               |
|   | Section A - Adjusted Net Income  |            | (A) Prior Year | (B) Current Yea<br>(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 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          |                |                               |
|   | Section B - Minimum Asset Amount   |            | (A) Prior Year | (B) Current Yea<br>(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):  | 1          |                |                               |
| а | Average monthly value of securities  | 1a         |                |                               |
| b | Average monthly cash balances  | <b>1</b> b |                |                               |
| C | Fair market value of other non-exempt-use assets   | 1c         |                |                               |
| d | Total (add lines 1a, 1b, and 1c)   | 1d         |                |                               |
| e | <b>Discount</b> 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          |                |                               |
|   | Section 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 | <b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)   | 6          |                |                               |

|   | Amounts paid to supported organizations to accomplish exempt purposes   |  |
|---|---|--|
| 2 | Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity             |  |
| 3 | Administrative expenses paid to accomplish exempt purposes of supported organizations   |  |
| 4 | Amounts paid to acquire exempt-use assets   |  |
| 5 | Qualified set-aside amounts (prior IRS approval required)   |  |
| 6 | Other distributions (describe in <b>Part VI</b> ). See instructions   |  |
| 7 | Total annual distributions. Add lines 1 through 6.  |  |
| 8 | Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions |  |
| 9 | Distributable amount for 2019 from Section C, line 6  |  |

| 7 Total annual distributions. Add lines 1 through 6.  |                             |  |   |
|---|-----------------------------|--|---|
| 8 Distributions to attentive supported organizations to who details in <b>Part VI</b> ). See instructions | sive (provide               |  |   |
| 9 Distributable amount for 2019 from Section C, line 6  |                             |  |   |
| 10 Line 8 amount divided by Line 9 amount   |                             |  |   |
| Section E - Distribution Allocations (see instructions)   | (i)<br>Excess Distributions | (ii)<br>Underdistributions<br>Pre-2019 | (iii)<br>Distributable<br>Amount for 2019 |
| 1 Distributable amount for 2019 from Section C, line 6  |                             |  |   |
| 2 Underdistributions if any for years prior to 2019   |                             |  |   |

|   | ***                         |  |   |
|---|-----------------------------|--|---|
| 7 Total annual distributions. Add lines 1 through 6.  |                             |  |   |
| Distributions to attentive supported organizations to who details in <b>Part VI</b> ). See instructions                         |                             |  |   |
| 9 Distributable amount for 2019 from Section C, line 6  |                             |  |   |
| 10 Line 8 amount divided by Line 9 amount   |                             |  |   |
| Section E - Distribution Allocations<br>(see instructions)  | (i)<br>Excess Distributions | (ii)<br>Underdistributions<br>Pre-2019 | (iii)<br>Distributable<br>Amount for 2019 |
| 1 Distributable amount for 2019 from Section C, line 6  |                             |  |   |
| 2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in <b>Part VI</b> ). See instructions. |                             |  |   |
| <b>3</b> Excess distributions carryover, if any, to 2019:   |                             |  |   |
| a From 2014   |                             |  |   |
| <b>b</b> From 2015  |                             |  |   |
| c From 2016   |                             |  |   |

| Section E - Distribution Allocations (see instructions)   | (i)<br>Excess Distributions  | (ii)<br>Underdistributions<br>Pre-2019 | (iii)<br>Distributable<br>Amount for 2019 |
|---|--|--|---|
| 1 Distributable amount for 2019 from Section C, line 6  |  |  |   |
| 2 Underdistributions, if any, for years prior to 2019<br>(reasonable cause required explain in Part VI).<br>See instructions. |  |  |   |
| 3 Excess distributions carryover, if any, to 2019:  |  |  |   |
| a From 2014   |  |  |   |
| <b>b</b> From 2015  |  |  |   |
| c From 2016   |  |  |   |
| <b>d</b> From 2017  |  |  |   |
| <b>e</b> From 2018  |  |  |   |
| f Total of lines 3a through e   |  |  |   |
| <b>g</b> Applied to underdistributions of prior years   |  |  |   |
| <b>h</b> Applied to 2019 distributable amount   |  |  |   |
| <ul> <li>Carryover from 2014 not applied (see instructions)</li> </ul>  |  |  |   |
| j Remainder. Subtract lines 3g, 3h, and 3i from 3f.   |  |  |   |
|   | The state of the s | ·                                      |   |

| c From 2016  |  |  |
|--|--|--|
| d From 2017  |  |  |
| e From 2018  |  |  |
| <b>Total</b> of lines 3a through e                 |  |  |
| g Applied to underdistributions of prior years     |  |  |
| n Applied to 2019 distributable amount             |  |  |
| Carryover from 2014 not applied (see instructions) |  |  |
| Remainder. Subtract lines 3g, 3h, and 3i from 3f.  |  |  |
| Distributions for 2019 from Section D, line 7:     |  |  |
| \$   |  |  |
| Applied to underdistributions of prior years       |  |  |
| Applied to 2019 distributable amount               |  |  |
| Remainder. Subtract lines 4a and 4b from 4.        |  |  |

| instructions)  |  |  |
|--|--|--|
| j Remainder. Subtract lines 3g, 3h, and 3i from 3f.  |  |  |
| 4 Distributions for 2019 from Section D, line 7:   |  |  |
| \$   |  |  |
| Applied to underdistributions of prior years   |  |  |
| <b>b</b> Applied to 2019 distributable amount  |  |  |
| c Remainder. Subtract lines 4a and 4b from 4.  |  |  |
| <b>5</b> Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in <b>Part VI</b> . See instructions. |  |  |
| 6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions  |  |  |

| C Remainder, Subtract lines 4a and 4b from 4.  |  |  |
|--|--|--|
| 5 Remaining underdistributions for years prior to<br>2019, if any. Subtract lines 3g and 4a from line 2.<br>If the amount is greater than zero, explain in Part VI.<br>See instructions. |  |  |
| 6 Remaining underdistributions for 2019. Subtract<br>lines 3h and 4b from line 1. If the amount is greater<br>than zero, explain in Part VI. See instructions.                           |  |  |
| <b>7 Excess distributions carryover to 2020.</b> Add lines 3j and 4c.  |  |  |
| 8 Breakdown of line 7:   |  |  |
| a Excess from 2015   |  |  |
| <b>b</b> Excess from 2016  |  |  |
| c Excess from 2017   |  |  |

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

d Excess from 2018.

e Excess from 2019. . . . .

### **Additional Data**

**Software ID:** 19009920 Software Version: 2019v5.0

**EIN:** 94-6128680

Page 8

Name: League to Save Lake Tahoe Schedule A (Form 990 or 990-EZ) 2019

17a or 17b; Part III, line 12; Part IV, nes 1 and 2; Part IV, Section C, line 1; Part V, Section B, line 1e; Part V any additional information. (See

**Facts And Circumstances Test** 

| Part VI | <b>Supplemental Information.</b> Provide the explanations required by Part II, line 10; Part II, line |
|---------|---|
|         | Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lir  |
|         | Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1;   |
|         | Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for   |
|         | instructions).  |
|         |   |
|         |   |

SCHEDULE C (Form 990 or 990-

EZ)

**Political Campaign and Lobbying Activities** 

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

OMB No. 1545-0047

DLN: 93493301011330

Inspection

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. Department of the Treasury ▶Go to www.irs.gov/Form990 for instructions and the latest information. 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) organizations: Complete Part III. Name of the organization **Employer identification number** League to Save Lake Tahoe 94-6128680 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") 2 Political campaign activity expenditures (see instructions) 3 Volunteer hours for political campaign activities (see instructions) ...... Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 ..... 1 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ...... If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ..... 3 ☐ Yes ✓ No Was a correction made? 4a ☐ Yes ✓ No If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). Part I-C Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... 1 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b......... Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated

| fund or a political action committe       | ee (PAC). If additional space is needed, p | provide informatio | n in Part IV.  | , , ,  |
|---|--|--------------------|--|--|
| (a) Name                                  | (b) Address                                | (c) EIN            | (d) Amount paid from<br>filing organization's<br>funds. If none, enter<br>-0 | (e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0 |
| 1   |  |                    |  |  |
| 2   |  |                    |  |  |
| 3   |  |                    |  |  |
| 4   |  |                    |  |  |
| 5   |  |                    |  |  |
| 6   |  |                    |  |  |
| For Paperwork Reduction Act Notice, see t | he instructions for Form 990 or 990-EZ.    | Cat.               | No. 50084S Schedule C (  | Form 990 or 990-EZ) 2019   |

39,455

155

Grassroots ceiling amount

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

Grassroots lobbying expenditures

379,931

Return Reference

| For e                   | ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying  | (  | a)      | (b)                           | )   |
|-------------------------|---|--|---------|-------------------------------|-----|
| ctivi                   |   | Yes  | No      | Amo                           | unt |
| 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:   |  |         |                               |     |
| а                       | Volunteers?   |  |         |                               |     |
| b                       | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  |  |         |                               |     |
| С                       | Media advertisements?   |  |         |                               |     |
| d                       | Mailings to members, legislators, or the public?  |  |         |                               |     |
| е                       | 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  |  |         |                               |     |
| a                       | 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   |  |         |                               |     |
| С                       | If "Yes," enter the amount of any tax incurred by organization managers under section 4912  |  |         |                               |     |
|                         | TO 1 CT 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1   |  |         |                               |     |
| d                       | If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  |  |         |                               |     |
|                         | t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)  | )(5), o                                      | r secti | on                            |     |
|                         | ,   | )(5), o                                      | r secti |                               | . N |
| ar                      | t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).   |  | r secti | Yes                           | s N |
| ar                      | Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?   |  | r secti | Yes                           | s N |
| ar                      | Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  |  | E       | Yes                           | s N |
| Par                     | Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?   |  | <br>    | Yes 1 2 3                     |     |
| 'ar                     | Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  | <br>   |         | Yes<br>1<br>2<br>3<br>on 501( |     |
| ar                      | Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?   | <br>   |         | Yes<br>1<br>2<br>3<br>on 501( |     |
| 'ar                     | Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?   | )(5), o                                      |         | Yes<br>1<br>2<br>3<br>on 501( |     |
| ar                      | Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  | )(5), o<br>III-A                             |         | Yes<br>1<br>2<br>3<br>on 501( |     |
| ar<br>ar<br>b           | Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  | (5), o<br>III-A<br>1<br>2a<br>2b             |         | Yes<br>1<br>2<br>3<br>on 501( |     |
| ar<br>ab                | Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total   | (5), o<br>III-A<br>1<br>2a<br>2b<br>2c       |         | Yes<br>1<br>2<br>3<br>on 501( |     |
| ar                      | Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .  | (5), o<br>III-A<br>1<br>2a<br>2b             |         | Yes<br>1<br>2<br>3<br>on 501( |     |
| ar                      | Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  LIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political | (5), o<br>IIII-A<br>1<br>2a<br>2b<br>2c<br>3 |         | Yes<br>1<br>2<br>3<br>on 501( |     |
| ar<br>2<br>3<br>ar<br>b | Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does  | (5), o<br>III-A<br>1<br>2a<br>2b<br>2c       |         | Yes<br>1<br>2<br>3<br>on 501( |     |

Explanation

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493301011330

OMB No. 1545-0047

2019

## **SCHEDULE D**

Department of the Treasury

Internal Revenue Service

(Form 990)

**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.

Open to Public Inspection

|              | me of the organization<br>gue to Save Lake Tahoe   |   | E                            | Employer identification number   |
|--------------|--|---|------------------------------|--|
| _cd          | gae to dave tune runde   |   | 9                            | 94-6128680   |
| Pa           | rt I Organizations Maintaining Donor Adv   |   | unds or A                    | Accounts.  |
|              | Complete if the organization answered "Y   | 'es" on Form 990, Part IV, line 6.  (a) Donor advised funds                     |                              | (b) Funds and other accounts   |
|              | Total number at end of year  | (a) Donor advised funds   |                              | (b) runds and other accounts   |
|              | · ·  |   |                              |  |
| <u>.</u>     | Aggregate value of contributions to (during year)  |   |                              |  |
|              | Aggregate value of grants from (during year)   |   |                              |  |
|              | Aggregate value at end of year   |   |                              |  |
| 5            | Did the organization inform all donors and donor advisorganization's property, subject to the organization's edition by the organization inform all grantees, donors, and charitable purposes and not for the benefit of the | exclusive legal control?  | <br>nds can be<br>urpose con | . $\hfill \hfill \hfil$ |
| 2 -          | rt II Conservation Easements.  |   | • •                          | ∐ Yes ∐ No   |
| <b>-</b> (-) | Complete if the organization answered "Y   | es" on Form 990, Part IV, line 7.   |                              |  |
|              | Purpose(s) of conservation easements held by the org   | anization (check all that apply).   |                              |  |
|              | Preservation of land for public use (e.g., recreati  | on or education)  | on of an his                 | storically important land area   |
|              | Protection of natural habitat  | Preservation  | on of a cert                 | tified historic structure  |
|              | Preservation of open space   |   | 511                          | amed materie an decare   |
|              | ' '  | 116.  |                              |  |
|              | Complete lines 2a through 2d if the organization held easement on the last day of the tax year.  | a qualified conservation contribution in  | tne form                     | Held at the End of the Year  |
| а            | Total number of conservation easements   |   | 2                            | a l  |
| b            | Total acreage restricted by conservation easements .   |   | 2                            | b  |
| С            | Number of conservation easements on a certified histo  | ric structure included in (a)   | 2                            | de l   |
| d            | Number of conservation easements included in (c) acq structure listed in the National Register   | uired after 7/25/06, and not on a histo   | oric 2                       | d  |
| 3            | Number of conservation easements modified, transfer tax year ▶   | red, released, extinguished, or termina   | ated by the                  | e organization during the  |
| ŀ            | Number of states where property subject to conservat   | ion easement is located <b>&gt;</b>   |                              |  |
| 5            | Does the organization have a written policy regarding and enforcement of the conservation easements it hol   |   | andling of v                 | violations,  Yes No  |
| •            | Staff and volunteer hours devoted to monitoring, insp  | ecting, handling of violations, and enfo  | orcing cons                  | ervation easements during the year   |
| ,            | Amount of expenses incurred in monitoring, inspecting  \$ \begin{align*}  \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \   | g, handling of violations, and enforcing  | ı conservat                  | ion easements during the year  |
| 3            | Does each conservation easement reported on line 2(o   |   |                              | (h)(4)(B)(i)   |
|              | and section 170(h)(4)(B)(ii)?  |   |                              | 🗌 Yes 🔲 No   |
| )            | In Part XIII, describe how the organization reports corbalance sheet, and include, if applicable, the text of the organization's accounting for conservation easeme  | e footnote to the organization's financ   |                              |  |
| ar           | <b>TIII</b> Organizations Maintaining Collection Complete if the organization answered "Y  |   | or Other                     | Similar Assets.  |
| .a           | If the organization elected, as permitted under SFAS 1 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its final  | or public exhibition, education, or resea                                       | arch in furt                 |  |
| b            | If the organization elected, as permitted under SFAS 1 historical treasures, or other similar assets held for pu following amounts relating to these items:  | .16 (ASC 958), to report in its revenue blic exhibition, education, or research | statemen<br>in furthera      | t and balance sheet works of art,<br>ance of public service, provide the   |
| (            | i) Revenue included on Form 990, Part VIII, line 1   |   |                              | <b>&gt;</b> \$   |
| (i           | i)Assets included in Form 990, Part X  |   |                              | ▶\$  |
| 2            | If the organization received or held works of art, histo following amounts required to be reported under SFAS  | rical treasures, or other similar assets  | for financi                  |  |
| а            | Revenue included on Form 990, Part VIII, line 1  |   |                              | <b>&gt;</b> \$   |
| b            | Assets included in Form 990, Part X  | <u> </u>  | <u>.</u> .                   | <b>&gt;</b> \$   |
|              |  |   |                              |  |

d Equipment . . . .

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

| Sche       | dule D (Fo             | orm 990) 2019  |                           |                       |              |            |              |              |               |              | Page <b>2</b>                                       |
|------------|------------------------|--|---------------------------|-----------------------|--------------|------------|--------------|--------------|---------------|--------------|---|
| Par        | tiiii (                | Organizations Ma   | aintaining Col            | lections of Art,      | Histori      | cal Tre    | asures, c    | r Other      | Similar As    | sets (cor    | ntinued)  |
| 3          |                        | e organization's acq<br>heck all that apply):                |                           | n, and other records  | , check a    | any of th  | ne following | that are a   | significant u | se of its co | ollection   |
| а          | ☐ Pu                   | ıblic exhibition   |                           |                       | d            |            | oan or excl  | nange prog   | ırams         |              |   |
| b          | ☐ So                   | cholarly research  |                           |                       | е            |            | Other        |              |               |              |   |
| c          | ☐ Pr                   | eservation for future  | e generations             |                       |              |            |              |              |               |              |   |
| 4          | Provide -<br>Part XIII | a description of the   | organization's coll       | lections and explain  | how the      | y furthe   | r the organ  | ization's ex | kempt purpo   | se in        |   |
| 5          | _                      | he year, did the org<br>o be sold to raise fur               |                           |                       |              |            |              |              |               | ☐ Yes        | □ No  |
| Pa         | (                      | <b>Escrow and Cust</b><br>Complete if the org<br>(, line 21. |                           |                       | rm 990       | , Part I   | V, line 9, d | or reporte   | ed an amou    | nt on For    | rm 990, Part  |
| <b>1</b> a |                        | rganization an agent<br>on Form 990, Part :                  |                           |                       |              |            |              |              |               | Yes          | □ No  |
| b          | If "Yes "              | ' explain the arrange  | ement in Part XIII        | and complete the f    | ollowina     | tahle:     |              |              | Δ             | mount        |   |
| c          |                        | ng balance   |                           |                       | -            |            |              | 1c           |               | ounc         |   |
| d          | -                      | s during the year .  |                           |                       |              |            |              | 1d           |               |              |   |
| е          |                        | tions during the year  |                           |                       |              |            |              | 1e           |               |              |   |
| f          |                        | palance  |                           |                       |              |            |              | 1f           |               |              |   |
| 2a         | Did the                | organization include   | an amount on Fo           | rm 990. Part X. line  | 21. for      | escrow c   | or custodial | account lia  | ability?      | □ ves        |   |
| b          |                        | explain the arrange  |                           |                       |              |            |              |              | •             | _            |   |
|            |                        | Indowment Fund   |                           | . Check here it the c | zxpianaci    | 011 1103 2 | een provid   | ca m rare /  |               |              |   |
|            |                        | Complete if the or   |                           | ered "Yes" on Fo      | rm 990       | , Part I   | V, line 10.  |              |               |              |   |
|            |                        |  |                           | (a) Current year      | <b>(b)</b> P | rior year  |              |              | (d) Three yea |              | ) Four years back                                   |
|            |                        | of year balance .  |                           | 2,758,222             |              | 614,3      |              | 1,448,979    |               | 530,925      | 445,197   |
|            |                        | ions   |                           | 18,159<br>256,565     |              | 178,7      | 12           |              |               |              |   |
|            |                        | tment earnings, gair<br>                                     | ·                         | 230,303               |              |            |              |              |               |              | _   |
|            |                        | scholarships   |                           |                       |              |            |              |              |               |              |   |
|            | and progr              | enditures for facilitie<br>ams                               |                           | 51,042                |              |            |              |              |               |              |   |
| f          | Administr              | ative expenses .   |                           | 14,903                |              | 93,5       |              |              |               |              |   |
| g          | End of year            | ar balance   |                           | 2,967,001             |              | 699,5      | 537          | 1,448,979    |               | 530,925      | 445,197   |
| 2          | Provide <sup>1</sup>   | the estimated perce  | ntage of the curre        | ent year end balance  | e (line 1    | g, colum   | n (a)) held  | as:          |               |              |   |
| а          | Board de               | esignated or quasi-e   | endowment 🟲               | 63.000 %              |              |            |              |              |               |              |   |
| b          | Permane                | ent endowment ►  | 25.000 %                  |                       |              |            |              |              |               |              |   |
| C          | Tempora                | arily restricted endov                                       | wment ► 12.0              | 000 %                 |              |            |              |              |               |              |   |
| За         | Are ther               | centages on lines 2a<br>e endowment funds                    |                           |                       | tion that    | t are held | d and admir  | nistered fo  | r the         |              |   |
|            | organiza               | •  |                           |                       |              |            |              |              |               | 2-7          | Yes No  |
|            |                        | lated organizations  |                           |                       |              |            |              |              |               | 3a(i<br>3a(i | <del></del>   |
| b          |                        | ted organizations   .<br>on 3a(ii), are the rel              |                           | s listed as required  | on Sche      | dule R?    |              |              |               | 3b           | <del>-                                       </del> |
| 4          |                        | e in Part XIII the inte                                      | =                         | •                     |              |            |              | •            | •             |              | 1   |
|            |                        | and, Buildings,  |                           |                       |              |            |              |              |               |              |   |
|            |                        | Complete if the or   | ganization answ           | ered "Yes" on Fo      |              |            |              |              |               |              |   |
|            | Description            | on of property   | (a) Cost or oth (investme |                       | t or other   | basis (oth | ner) (c) Ad  | cumulated o  | lepreciation  | (d)          | Book value  |
|            |                        |  | (                         | ,                     |              |            |              |              |               |              |   |
|            | Land .                 |  |                           |                       |              | 207        |              |              | .=            |              | 207,000   |
|            |                        |  |                           |                       |              | 543        |              |              | 172,131       |              | 371,171   |
| C          | Leasehold              | l improvements   |                           |                       |              | 27         | ,581         |              | 25,185        |              | 2,396   |

24,094

6,313

586,880

17,781

| Part VII  | Investments—Other Securities.   | 000 Bart TV !:     | ne 11h Soo Form 000       | Part V line 12   |
|---|---|--------------------|---------------------------|--|
|   | Complete if the organization answered "Yes" on Form  (a) Description of security or category  (including name of security)          | (b) Book           | (c) Metho                 | d of valuation:  |
| (1) Financia                                    | (including name of security)  I derivatives   | value<br>•         | Lost or end-of            | -year market value                                     |
| <ul><li>(2) Closely-</li><li>(3)Other</li></ul> | held equity interests   |                    |                           |  |
|   |   |                    |                           |  |
| (A)   |   |                    |                           |  |
| (B)   |   |                    |                           |  |
| (C)   |   |                    |                           |  |
| (D)   |   |                    |                           |  |
| (E)   |   |                    |                           |  |
| (F)   |   |                    |                           |  |
| (G)   |   |                    |                           |  |
| (H)   |   |                    |                           |  |
|   | n (b) must equal Form 990, Part X, col. (B) line 12.)   | <b>▶</b> 1,382,937 |                           |  |
| Part VIII                                       | Investments—Program Related.  Complete if the organization answered 'Yes' on Form   | 990, Part IV, li   | ne 11c. See Form 990,     | Part X, line 13.                                       |
|   | (a) Description of investment   |                    | (b) Book value            | (c) Method of valuation:<br>Cost or end-of-year market |
| (1)   |   |                    |                           | value  |
|   |   |                    |                           |  |
| (2)   |   |                    |                           |  |
| (3)   |   |                    |                           |  |
| (4)   |   |                    |                           |  |
| (5)<br>   |   |                    |                           |  |
| (6)   |   |                    |                           |  |
| (7)   |   |                    |                           |  |
| (8)   |   |                    |                           |  |
| (9)   |   |                    |                           |  |
|   | n (b) must equal Form 990, Part X, col.(B) line 13.)  |                    | <b>•</b>                  |  |
| Part IX   | Other Assets.  Complete if the organization answered 'Yes' on Form  | 990, Part IV, lir  | ne 11d. See Form 990, Pai |  |
| (1)Endowm                                       | (a) Description   |                    |                           | <b>(b)</b> Book value 1,584,064                        |
| (2)   |   |                    |                           |  |
| (3)   |   |                    |                           |  |
| (4)   |   |                    |                           |  |
| (5)   |   |                    |                           |  |
| (6)   |   |                    |                           |  |
| (7)   |   |                    |                           |  |
| (8)   |   |                    |                           |  |
| (9)   |   |                    |                           |  |
|   |   |                    |                           | 1,584,064  |
| Part X  | <b>Other Liabilities.</b> Complete if the organization answered 'Yes' on Form   | 990, Part IV, lir  | ne 11e or 11f.See Form    | 990, Part X, line 25.                                  |
| 1.  | (a) Description of  | liability          |                           | (b) Book value   |
|   | income taxes  |                    |                           |  |
| (2)   |   |                    |                           |  |
| (3)   |   |                    |                           |  |
| (4)   |   |                    |                           |  |
| (5)   |   |                    |                           |  |
| (6)   |   |                    |                           |  |
| (7)   |   |                    |                           |  |
| (8)   |   |                    |                           |  |
| (9)   |   |                    |                           |  |
|   | n (b) must equal Form 990, Part X, col.(B) line 25.)  |                    | <b>•</b>                  |  |
|   | or uncertain tax positions. In Part XIII, provide the text of the s's liability for uncertain tax positions under FIN 48 (ASC 740). |                    |                           | _  |

Donated services and use of facilities . . . . . 2b 74.051 b Recoveries of prior year grants . . . . . . 2c c

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

d Other (Describe in Part XIII.) 2d 347,803 e 2e 3 3

Subtract line 2e from line 1 . . . . . . . . . . . 4

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) . . . . . . .

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

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

Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b .

b Add lines **4a** and **4b** . . . . . . C

Net unrealized gains (losses) on investments . . . .

Schedule D (Form 990) 2019

Part XI

а

1

2

C

d

е

b

Part XIII

See Additional Data Table

5

3 4

5

Part XII

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) . . . . . . .

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total expenses and losses per audited financial statements . . . . . .

Amounts included on line 1 but not on Form 990, Part IX, line 25:

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . .

Donated services and use of facilities . . .

Prior year adjustments . . . . .

Subtract line 2e from line 1 . . . . . . . . . . .

Add lines **4a** and **4b** . . . . . . . . . . . .

Supplemental Information

Other (Describe in Part XIII.) . . .

Add lines 2a through 2d .

Return Reference

4a 4b

2a

2b

2c

2d

4a 4b

Explanation

2a

4c 5

74,051

347,803

2e

3

4c

5

1,994,157

Schedule D (Form 990) 2019

| 1,994 |
|-------|
|       |

Page 4

3,071,450

421,854

2,649,596

2,649,596

2,416,011

421,854

| chedule D (Form 990) 2019   | Page <b>5</b>        |
|-----------------------------|----------------------|
| Part XIII Supplemental Info | ormation (continued) |
| Return Reference            | Explanation          |
|                             |                      |
|                             |                      |
|                             |                      |
|                             |                      |
|                             |                      |
|                             |                      |
|                             |                      |
|                             |                      |

Schedule D (Form 990) 2019

### **Additional Data**

**Software ID:** 19009920 **Software Version:** 2019v5.0 **EIN:** 94-6128680

Name: League to Save Lake Tahoe

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### Supplemental Information

included on form 990

| Supplemental Information  |                               |
|---|-------------------------------|
| Return Reference  | Explanation                   |
| Part XI, Line 2d: Other revenue amounts included in F/S but not | Fundraising Expenses \$347803 |

| Supplemental Information                                     |                               |
|--|-------------------------------|
| Return Reference   | Explanation                   |
| Part XII, Line 2d: Other expenses and losses per audited F/S | Fundraising Expenses \$347803 |

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efile GRAPHIC print - DO NOT PROCESS DLN: 93493301011330 As Filed Data -OMB No. 1545-0047 SCHEDULE F Statement of Activities Outside the United States (Form 990) 2019 ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Open to Public Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** League to Save Lake Tahoe 94-6128680 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance 2 outside the United States. Activites per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) 3 (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a (f) Total expenditures offices in the employees, agents, region (by type) (such as, program service, describe for and investments and independent fundraising, program specific type of in the region region contractors in the services, investments, grants service(s) in the region region to recipients located in the region) South America 0 0 Environmental Protection Educate on climate change 3a Sub-total . b Total from continuation sheets to Part I . . . c Totals (add lines 3a and 3b)

| Type of grant or assistance | (b) Region | (c) Number of recipients | (d) Amount of<br>cash grant | (e) Manner of cash<br>disbursement | (f) Amount of<br>noncash<br>assistance | (g) Description<br>of noncash<br>assistance | (h) Method of<br>valuation<br>(book, FMV,<br>appraisal, other |
|-----------------------------|------------|--------------------------|-----------------------------|------------------------------------|--|---|---|
|                             |            |                          |                             |                                    |  |   |   |
|                             |            |                          |                             |                                    |  |   |   |
|                             |            |                          |                             |                                    |  |   |   |
|                             |            |                          |                             |                                    |  |   |   |
|                             |            |                          |                             |                                    |  |   |   |
|                             |            |                          |                             |                                    |  |   |   |
|                             |            |                          |                             |                                    |  |   |   |
|                             |            |                          |                             |                                    |  |   |   |
|                             |            |                          |                             |                                    |  |   |   |
|                             |            |                          |                             |                                    |  |   |   |
|                             |            |                          |                             |                                    |  |   |   |
|                             |            |                          |                             |                                    |  |   |   |
|                             |            |                          |                             |                                    |  |   |   |
|                             |            |                          |                             |                                    |  |   |   |
|                             |            |                          |                             |                                    |  |   |   |
|                             |            |                          |                             |                                    |  |   |   |
|                             |            |                          |                             |                                    |  |   |   |
|                             |            |                          |                             |                                    |  |   |   |
|                             |            |                          |                             |                                    |  |   |   |

| Sched | dule F (Form 990) 2019  |       | Page <b>4</b> |
|-------|---|-------|---------------|
| Par   | Foreign Forms   |       |               |
| 1     | Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)  | Yes   | <b>☑</b> No   |
| 2     | Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990) |       |               |
|       |   | ☐ Yes | <b>✓</b> No   |
| 3     | Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign  |       |               |
|       | Corporations. (see Instructions for Form 5471)  | ☐Yes  | <b>☑</b> No   |
| 4     | Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621).   | Yes   | <b>☑</b> No   |
| 5     | Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)  |       |               |
|       | (see instructions for Form 6000)  | ☐ Yes | <b>✓</b> No   |
| 6     | Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the   |       |               |
|       | organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).   | ☐Yes  | <b>✓</b> No   |

| Schedule I | F (Form 990                 | ) 2019 Page <b>5</b>  |
|------------|-----------------------------|---|
| Part V     | Provide<br>amount<br>method | emental Information the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; to of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting l); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide ditional information. See instructions. |
|            | edule F, S                  | Supplemental Information  Explanation   |
| Part I, Li |                             | In 2019 we continued our partnership with Limpios Lagos, a group of stakeholders from Chile focused on protecting Chilean   |

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493301011330 OMB No. 1545-0047 SCHEDULE G **Supplemental Information Regarding** (Form 990 or 990-EZ) **Fundraising or Gaming Activities** Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. **Open to Public** Department of the Treasury Attach to Form 990 or Form 990-EZ. Inspection Internal Revenue Service ▶Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization **Employer identification number** League to Save Lake Tahoe 94-6128680 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. ✓ Mail solicitations ✓ Solicitation of non-government grants Solicitation of government grants ✓ Internet and email solicitations Phone solicitations ✓ Special fundraising events ✓ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ✓ Yes ☐ No If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (i) Name and address of individual (iii) Did (iv) Gross receipts (vi) Amount paid to (ii) Activity (v) Amount paid to fundraiser have or entity (fundraiser) from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col. (i) contributions? Yes No Kristin Keane event planning, 975 Vine Street execution No 89,100 Reno, NV 89503 89,100 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

|                 | dule G (Form 990 or 990-EZ) 2019  rt III Fundraising Events. Comple                    | ete if the organization a   | answered "Yes" on For                         | m 990, Part IV, line 18  | Page <b>2</b><br>3, or reported more           |
|-----------------|--|-----------------------------|---|--------------------------|--|
|                 | than \$15,000 of fundraising e<br>gross receipts greater than \$5                      | vent contributions and      |   |                          |  |
|                 | g, 000 , 000,p00 g, 00000, 0,100, q,   | (a)Event #1                 | <b>(b)</b> Event #2                           | (c)Other events          | (d) Total events<br>(add col. (a) through      |
|                 |  | Benefit 2019 (event type)   | (event type)                                  | (total number)           | col. <b>(c)</b> )                              |
| Reversie        |  | , , , , ,                   |   |                          |  |
|                 | 1 Gross receipts   | 1,132,265                   |   |                          | 1,132,265                                      |
|                 | <b>2</b> Less: Contributions   |                             |   |                          |  |
|                 | 3 Gross income (line 1 minus line 2)   | 1,132,265                   |   |                          | 1,132,265                                      |
|                 | 4 Cash prizes  |                             |   |                          |  |
| s               | 5 Noncash prizes   |                             |   |                          |  |
| Direct Expenses | <b>6</b> Rent/facility costs   |                             |   |                          |  |
| ed X            | 7 Food and beverages   |                             |   |                          |  |
| й<br>Ш          | 8 Entertainment  |                             |   |                          |  |
| Dire            | 9 Other direct expenses  | 347,803                     |   |                          | 347,803  |
|                 | 10 Direct expense summary. Add lines 4 t   | hrough 9 in column (d)      |   | <b>&gt;</b>              | 347,803  |
|                 | 11 Net income summary. Subtract line 10  | from line 3, column (d)     |   | •                        | 784,462  |
| Par             | <b>Gaming.</b> Complete if the organization on Form 990-EZ, line 6a.                   | anization answered "Ye      | es" on Form 990, Part I                       | IV, line 19, or reported | more than \$15,000                             |
| Revenue         |  | (a) Bingo                   | (b) Pull tabs/Instant bingo/progressive bingo | (c) Other gaming         | (d) Total gaming (add col.(a) through col.(c)) |
| Re              | <b>1</b> Gross revenue   |                             |   |                          |  |
| nses            | 2 Cash prizes  |                             |   |                          |  |
| ed X            | 3 Noncash prizes   |                             |   |                          |  |
| Direct Expense  | 4 Rent/facility costs  |                             |   |                          |  |
| ۵               | 5 Other direct expenses  |                             |   |                          |  |
|                 |  | ☐ Yes%_                     | ☐ Yes %                                       | ☐ Yes%                   |  |
|                 | <b>6</b> Volunteer labor   | □ No                        | □ No  | □ No                     |  |
|                 | 7 Direct expense summary. Add lines 2 t  | through 5 in column (d)     |   |                          |  |
|                 | 8 Net gaming income summary. Subtrac   | t line 7 from line 1, colum | n (d)   | •                        |  |
| 9<br>a<br>b     | Enter the state(s) in which the organization licensed to conduct gas If "No," explain: | aming activities in each of | these states?                                 |                          | ☐ Yes ☐ No                                     |
| 10a<br>b        |  | censes revoked, suspende    | d or terminated during th                     |                          | J  |
| 10a<br>b        | Were any of the organization's gaming lie  | enses revoked, suspende     | d or terminated during th                     |                          |  |

| Sche | dule G (Form 990 or 990-EZ) 20                                    | 19  |   |          |         | F   | age <b>3</b> |
|------|---|---|---|----------|---------|-----|--------------|
| 11   | Does the organization conduct                                     | gaming activities with nonmembers   | 5?  |          | Yes     | Пио |              |
| 12   | Is the organization a grantor, be formed to administer charitable |   | member of a partnership or other entity   |          | Yes     |     |              |
| 13   | Indicate the percentage of gam                                    | ning activity conducted in:   |   |          |         |     |              |
| а    | The organization's facility .                                     |   |   | 13a      |         |     | %            |
| b    | An outside facility   |   |   | 13b      |         |     | %            |
| 14   | Enter the name and address of                                     | the person who prepares the organ   | nization's gaming/special events books and  | records: |         |     |              |
|      | Name •  |   |   |          |         |     |              |
|      | Address >   |   |   |          |         |     |              |
| 15a  |   |   | m the organization receives gaming  |          | ·   Yes | Пио |              |
| b    | If "Yes," enter the amount of g                                   | aming revenue received by the orgained by the third party $ ightharpoons$ | anization 🕨 \$ and  | the      |         |     |              |
| c    | If "Yes," enter name and addre                                    | ss of the third party:  |   |          |         |     |              |
|      | Name •  |   |   |          |         |     |              |
|      | Address ▶   |   |   |          |         |     |              |
|      |   |   |   |          |         |     |              |
| 16   | Gaming manager information:                                       |   |   |          |         |     |              |
|      | Name 🟲  |   |   |          |         |     |              |
|      | Gaming manager compensation                                       | 1 ▶ \$  | <del></del>   |          |         |     |              |
|      | Description of services provided                                  | d ▶   |   |          |         |     |              |
|      | ☐ Director/officer  | ☐ Employee  | ☐ Independent contractor  |          |         |     |              |
| 17   | Mandatory distributions:  |   |   |          |         |     |              |
| а    | <u>-</u>  |   | stributions from the gaming proceeds to   |          | □Yes    | Пио |              |
| b    | Enter the amount of distributio                                   | ns required under state law distribu                                      | ited to other exempt organizations or spent   | :        | ☐ 1e3   |     |              |
|      |   | pt activities during the tax year   |   |          |         |     |              |
| Pai  |   |   | ions required by Part I, line 2b, colum<br>licable. Also provide any additional inf |          |         |     | s.           |
|      | Return Reference  |   | Explanation   |          |         |     |              |

DLN: 93493301011330 SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) 2019 ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** League to Save Lake Tahoe 94-6128680 Part I Types of Property (a) (b) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art—Works of art . . Art-Historical treasures Art—Fractional interests 4 Books and publications 5 Clothing and household goods . . . . . Cars and other vehicles **7** Boats and planes . . 8 Intellectual property . . . Securities—Publicly traded . 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests . . . . 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures . . . . Qualified conservation contribution—Other . . Real estate—Residential . Real estate—Commercial . Real estate—Other . . . 18 Collectibles . . . . 19 Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy . . . . . 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . 25 Other ► ( Food,gift card ) Χ 107,009 FMV 26 Other ▶ ( Auction prizes ) Χ 11,315 FMV 27 Other ▶ ( \_\_\_\_\_\_) Other ▶ ( \_\_\_\_\_\_ 28 Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt 30a Nο **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Yes 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Nο **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2019) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 51227J

| Schedule M (Form 990) (2019)                              | Page <b>2</b>   |
|---|---|
|   | tion. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization                          |
| is reporting in Part I, colu<br>complete this part for an | ımn (b), the number of contributions, the number of items received, or a combination of both. Also<br>y additional information. |
| Return Reference  | Explanation   |
|   | Schedule M (Form 990) (2019)  |

| efile GRAPH   | IC print  | - DO NOT PROCESS   | As Filed Data -   |  | DLN:  | 93493301011330 |
|---|---|--|---|--|---|----------------|
| (Form 990 or<br>EZ)<br>Department of the Ti<br>Name! Setherofgi | ★ Attach to Form 990 or 990-EZ.  partment of the Treasury  For the latest information.  Formal Bを比較の行政が認識にある  ague to Save Lake Tahoe   |  | ons on  | OMB No. 1545-0047  2019 Open to Public Inspection fication number  |   |                |
| 990 Schedule  | O, Sup  | plemental Informatio   | n   |  |   |                |
| Return<br>Reference   |   |  |   | Explanation  |   |                |
| Form 990,<br>Part III, Line<br>2: New<br>Services               | were our ation and y and co pant on t statewidd As memil tunities to spring of he Deseit in the T o join the d the sar nd sedim amples to on reseated micro our Leag and suppopt. Tahe Each Cre | four campaigns: combating of protecting our shoreline. It is a laboration. New programs to the steering committee of the efforts to help improve the bers of the CLSN we are stored in the composition of t | g pollution, tackling involve executed these care to the League in 2019 or e California Landscape pace and scale of lar atewide leaders in idea ement ecosystem leve be Keepers volunteers or conduct a citizen scalected and invited sor person training on the pers then visited assige pipe outfalls during a plastics. League staff devocacy implications are of Lake Tahoe for the dour Tahoe Blue Coor conduct cleanup efficiduals, community groff on how to conduct a | rew in 2019. Tahoe Blue Crew e<br>orts in an area of need that they<br>ups, businesses, school groups<br>cleanup and collect data and Cr | artici and  or  t s t a s c mpowers ad etc. |                |

rovided to the outside accounting firm allowing electronic filing.

| Return<br>Reference  | <b>Explanation</b>  |
|--|---|
| Form 990,<br>Part VI, Line<br>11b: Form<br>990 Review<br>Process | The tax return is prepared by an outside accounting firm. After completion of said returns , the organization is sent a draft of the tax returns to be reviewed and examined. The org anization makes copies of the returns and distributes to those individuals charged with go vernance. Those individuals at that time can review and if applicable discuss any line ite ms in the return with the accountant who has prepared the return. If all items are found t o be acceptable, an authorization is signed and provided to authorize the outside accounting firm to process, sign and provide copies of the returns to be filed (paper or electronically) with the designated governmental agencies. The tax returns are then signed by the organization, stamped and mailed with certified return receipt or the signed form 8879 is p |

990 Schedule O, Supplemental Information

Doturn

| Reference  | Explanation   |
|--|---|
| Form 990,<br>Part VI, Line<br>12c:<br>Explanation<br>of Monitoring<br>and<br>Enforcement<br>of Conflicts | The organization trains annually on the importance of conflict of interest and board members review and sign the policy annually. |

Evolunation

| Return<br>Reference  | <b>Explanation</b>  |
|--|---|
| Form 990,<br>Part VI, Line<br>15a:<br>Compensation<br>Review &<br>Approval | The Chief Executive Officers performance is reviewed annually by the board of directors. C ompensation is then determined using various publications that show salaries for similarly sized organizations in similar geographical areas, as well as reviewing compensation for other non-profits in the area. |
| Process -<br>CEO, Top<br>Management  |   |

| Return<br>Reference   | <b>Explanation</b>   |
|---|--|
| Form 990,<br>Part VI, Line<br>18:<br>Explanation<br>of Other<br>Means<br>Forms<br>Available For<br>Public<br>Inspection | Federal Tax Returns are available at guidestar.org and charitynavigator.orgThe returns are also posted on our website and available at office. |

| Return<br>Reference   | <b>Explanation</b>  |
|---|---|
| Form 990,<br>Part VI, Line<br>19: Other<br>Organization<br>Documents<br>Publicly<br>Available | Governing documents are available for public inspection at the principal place of business .The conflict of interest policy and the organization's financial statements are available upon request. |