

EXTENDED TO JULY 15, 2022

Form **990****Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

**2020**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**A** For the 2020 calendar year, or tax year beginning **SEP 1, 2020** and ending **AUG 31, 2021****B** Check if applicable:

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Final return/terminated  
☐ Amended return  
☐ Application pending

**C** Name of organization**QUEBEC-LABRADOR FOUNDATION, INC.**

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite

**4 SOUTH MAIN STREET**

City or town, state or province, country, and ZIP or foreign postal code

**IPSWICH, MA 01938****F** Name and address of principal officer: **ELIZABETH ALLING**  
**SAME AS C ABOVE****D** Employer identification number

\*\*-\*\*\*\*\*

**E** Telephone number**978-356-0038****G** Gross receipts \$ **2,236,852.****H(a)** Is this a group returnfor subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. See instructions

**H(c)** Group exemption number**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c)( ) (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: **QLF.ORG****K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other**L** Year of formation: **1963****M** State of legal domicile: **NY****Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>QUEBEC-LABRADOR FOUNDATION U.S. (QLF) EXISTS TO PROMOTE GLOBAL LEADERSHIP DEVELOPMENT, TO SUPPORT</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>10</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>8</b>
	<b>5</b> Total number of individuals employed in calendar year 2020 (Part V, line 2a)	<b>5</b>	<b>10</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>8</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0.</b>
<b>7b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	<b>0.</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	<b>764,294.</b>	<b>788,649.</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>12,240.</b>	<b>11,520.</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>203,850.</b>	<b>480,561.</b>
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>89,000.</b>	<b>103,226.</b>
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<b>1,069,384.</b>	<b>1,383,956.</b>
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	<b>7,500.</b>	<b>21,700.</b>
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<b>0.</b>	<b>0.</b>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	<b>809,441.</b>	<b>788,202.</b>
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25)	<b>0.</b>	<b>0.</b>
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<b>122,252.</b>	
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>465,678.</b>	<b>512,748.</b>
<b>Net Assets or Fund Balances</b>	<b>19</b> Revenue less expenses. Subtract line 18 from line 12	<b>1,282,619.</b>	<b>1,322,650.</b>
	<b>20</b> Total assets (Part X, line 16)	<b>-213,235.</b>	<b>61,306.</b>
	<b>21</b> Total liabilities (Part X, line 26)	<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	<b>5,292,862.</b>	<b>6,064,421.</b>
		<b>156,740.</b>	<b>274,293.</b>
		<b>5,136,122.</b>	<b>5,790,128.</b>

**Part II Signature Block**

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

<b>Sign Here</b>	Signature of officer	Date
	<b>ELIZABETH ALLING, PRESIDENT</b>	<b>02.11.2022</b>
<b>Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature
	<b>EDWARD TAYLOR</b>	<b>EDWARD TAYLOR</b>
	Date	Check <input checked="" type="checkbox"/> if self-employed PTIN
	<b>02/09/22</b>	<b>P00299025</b>
	Firm's name	Firm's EIN
	<b>NARDELLA &amp; TAYLOR, LLP</b>	<b>** - *****</b>
	Firm's address	Phone no.
	<b>24 HARTWELL AVENUE</b>	<b>781-862-6833</b>
	<b>LEXINGTON, MA 02421</b>	

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

032001 12-23-20 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2020)**SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION**

**Part III Statement of Program Service Accomplishments**

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

☒**1** Briefly describe the organization's mission:

QLF EXISTS TO PROMOTE GLOBAL LEADERSHIP DEVELOPMENT, TO SUPPORT THE RURAL COMMUNITIES AND ENVIRONMENT OF EASTERN CANADA AND NEW ENGLAND, AND TO CREATE MODELS FOR STEWARDSHIP OF NATURAL RESOURCES AND CULTURAL HERITAGE THAT CAN BE SHARED WORLDWIDE.

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services?☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code: ) (Expenses \$ 459,534. including grants of \$ 14,200. ) (Revenue \$ )

I. CONSERVATION AND STEWARDSHIP IN 2021, QLF'S CONSERVATION AND STEWARDSHIP INITIATIVES CONSIST OF THE FOLLOWING PROGRAMS AND PROJECTS:

1) THE SOUNDS CONSERVANCY MARINE RESEARCH PROGRAM; 2) BIODIVERSITY CONSERVATION PROGRAM WITH ITS PROJECTS, AQUATIC SPECIES AT RISK AND MARINE BIRD CONSERVATION; 3) CONSERVATION AND STEWARDSHIP OF PROTECTED AREAS, THE MARITIMES; 4) NATIONAL PARK SERVICE STEWARDSHIP INSTITUTE WITH ITS PROJECTS, CHESAPEAKE BAY GATEWAYS NETWORK AND TRAINING ORDERS, CONSERVATION AND STEWARDSHIP; 5) THE QLF GLOBAL PROGRAM WITH ITS PROJECTS, PRIVATELY PROTECTED AREAS, INTERNATIONAL UNION FOR CONSERVATION OF NATURE (IUCN); TRAINING ON PROTECTED AREAS, IUCN WORLD CONSERVATION CONGRESS; PARKS, THE INTERNATIONAL JOURNAL OF PROTECTED AREAS AND CONSERVATION; POLICY NOTES AND TECHNICAL PAPERS, IUCN WORLD

**4b** (Code: ) (Expenses \$ 144,558. including grants of \$ 7,500. ) (Revenue \$ )

II. CONSERVATION LEADERSHIP PROGRAMS

CONSERVATION INTERNSHIPS - THE CONSERVATION INTERNSHIP PROGRAM IS MANAGED BY STAFF FROM THE HEADQUARTERS IN MASSACHUSETTS. AS CONSERVATION LEADERSHIP IS AMONG QLF'S HIGHEST PRIORITIES AND HAS HISTORICALLY BEEN A HALLMARK OF OUR PROGRAMS, QLF INVESTS IN THE NEXT GENERATION OF ENVIRONMENTAL LEADERS WHO ARE UNDERGRADUATE AND GRADUATE STUDENTS AND YOUNG PROFESSIONALS. EACH YEAR, QLF SUPPORTS UP TO 24 INTERNS WHO REPRESENT ACADEMIC INSTITUTIONS WORLDWIDE AND WHO ARE ASSIGNED TO PROGRAMS IN QLF'S HOME REGION: MARITIMES, NEWFOUNDLAND AND LABRADOR, THE QUEBEC NORTH SHORE ALONG THE GULF OF ST. LAWRENCE; AND NEW ENGLAND. INTERNSHIPS PROVIDE HANDS-ON, EXPERIENTIAL TRAINING, AND

**4c** (Code: ) (Expenses \$ 149,939. including grants of \$ ) (Revenue \$ 103,226. )

III. SPECIAL PROJECTS

SPECIAL PROJECTS ARE MANAGED BY QLF PRESIDENT AND PRESIDENT EMERITUS AND CONSIST OF: RESEARCH ON NEW CONSERVATION PROGRAMS AND INITIATIVES BOTH IN-REGION AND WORLDWIDE; NEW PUBLIC/PRIVATE CONSERVATION PARTNERSHIPS AND CONSULTING ASSIGNMENTS IN-REGION; AND A THREE-YEAR PROGRAM REVIEW. SPECIAL PROJECTS ADVANCE THE ORGANIZATION'S MISSION WITH ITS CURRENT FOCUS ON BIODIVERSITY CONSERVATION AND NATURE-BASED SOLUTIONS IN A CHANGING CLIMATE. IN ADDITION, QLF'S PRESIDENT EMERITUS IS WRITING A SERIES OF ARTICLES AND ESSAYS ON THE HISTORY OF THE ORGANIZATION, PROGRAM ACCOMPLISHMENTS, AND MANY OF THE ORGANIZATION'S CONSTITUENTS WHO ARE PROMINENT AND INFLUENTIAL CONSERVATION LEADERS.

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

(Expenses \$ 342,016. including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses 1,096,047.

Form 990 (2020)

**Part IV Checklist of Required Schedules**

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

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

	Yes	No
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	X	
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	X	
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		X
<b>24b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
<b>24c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
<b>24d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
<b>25b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
<b>26</b> Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II		X
<b>27</b> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV		X
<b>b</b> A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV		X
<b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	X	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
<b>35b</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		
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

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

**Part V Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
<b>1a</b> Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	9	
<b>1b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	
<b>1c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

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

		Yes	No
<b>2a</b> Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	<b>2a</b> 10		
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	<b>2b</b>	X	
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>		X
<b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	<b>3b</b>		
<b>4a</b> At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<b>4a</b>		X
<b>b</b> If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>		X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>		X
<b>c</b> If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>		
<b>6a</b> Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	<b>6a</b>		X
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>		
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>			
<b>a</b> Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	<b>7a</b>		X
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7b</b>		
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7c</b>		X
<b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year	<b>7d</b>		
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7e</b>		X
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7f</b>		X
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7g</b>		
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>7h</b>		
<b>8 Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	<b>8</b>		
<b>9 Sponsoring organizations maintaining donor advised funds.</b>			
<b>a</b> Did the sponsoring organization make any taxable distributions under section 4966?	<b>9a</b>		
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	<b>9b</b>		
<b>10 Section 501(c)(7) organizations.</b> Enter:			
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12	<b>10a</b>		
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>		
<b>11 Section 501(c)(12) organizations.</b> Enter:			
<b>a</b> Gross income from members or shareholders	<b>11a</b>		
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>11b</b>		
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>		
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>		
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>			
<b>a</b> Is the organization licensed to issue qualified health plans in more than one state? <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	<b>13a</b>		
<b>b</b> Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	<b>13b</b>		
<b>c</b> Enter the amount of reserves on hand	<b>13c</b>		
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>		X
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	<b>14b</b>		
<b>15</b> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	<b>15</b>		X
<b>16</b> Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	<b>16</b>		X

Form 990 (2020)

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

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

**Section A. Governing Body and Management**

	Yes	No
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year <span style="float: right;">1a 10</span>		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
<b>b</b> Enter the number of voting members included on line 1a, above, who are independent <span style="float: right;">1b 8</span>		
<b>2</b> Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	X
<b>3</b> Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3	X
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	X
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets?	5	X
<b>6</b> Did the organization have members or stockholders?	6	X
<b>7a</b> Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	X
<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	X
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b> The governing body?	8a	X
<b>b</b> Each committee with authority to act on behalf of the governing body?	8b	X
<b>9</b> Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9	X

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

	Yes	No
<b>10a</b> Did the organization have local chapters, branches, or affiliates?	10a	X
<b>b</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	
<b>11a</b> Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X
<b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b> Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X
<b>b</b> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
<b>c</b> Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	X
<b>13</b> Did the organization have a written whistleblower policy?	13	X
<b>14</b> Did the organization have a written document retention and destruction policy?	14	X
<b>15</b> 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?		
<b>a</b> The organization's CEO, Executive Director, or top management official	15a	X
<b>b</b> Other officers or key employees of the organization	15b	X
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
<b>16a</b> 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	X
<b>b</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	

**Section C. Disclosure**

**17** List the states with which a copy of this Form 990 is required to be filed **MA, NY**

**18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

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

**20** State the name, address, and telephone number of the person who possesses the organization's books and records **▶**  
**ELIZABETH ALLING - 978-356-0038**  
**4 SOUTH MAIN ST., IPSWICH, MA 01938-2331**









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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	220,196.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	568,453.				
	g Noncash contributions included in lines 1a-1f	1g \$					
	<b>h Total.</b> Add lines 1a-1f			788,649.			
<b>Program Service Revenue</b>	2 a PROGRAM SERVICES	Business Code	541900	11,520.	11,520.		
	b						
	c						
	d						
	e						
	f All other program service revenue						
	<b>g Total.</b> Add lines 2a-2f			11,520.			
	<b>Other Revenue</b>	3 Investment income (including dividends, interest, and other similar amounts)			103,288.		
4 Income from investment of tax-exempt bond proceeds							
5 Royalties							
6 a Gross rents		6a	(i) Real (ii) Personal				
b Less: rental expenses		6b					
c Rental income or (loss)		6c					
d Net rental income or (loss)							
7 a Gross amount from sales of assets other than inventory		7a	(i) Securities (ii) Other	1,230,169.			
b Less: cost or other basis and sales expenses		7b		852,896.			
c Gain or (loss)		7c		377,273.			
d Net gain or (loss)				377,273.			377,273.
8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18		8a					
b Less: direct expenses		8b					
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
<b>Miscellaneous Revenue</b>	11 a MANAGEMENT FEES	Business Code	561000	93,000.	93,000.		
	b MISCELLANEOUS INCOME		900099	10,226.	10,226.		
	c						
	d All other revenue						
	<b>e Total.</b> Add lines 11a-11d			103,226.			
<b>12 Total revenue.</b> See instructions			1,383,956.	114,746.	0.	480,561.	

**Part IX Statement of Functional Expenses**

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

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

☒ X

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	11,500.	11,500.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22	7,500.	7,500.		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	2,700.	2,700.		
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	378,250.	335,643.	10,381.	32,226.
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	260,128.	230,827.	7,139.	22,162.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	35,160.	31,199.	965.	2,996.
<b>9</b> Other employee benefits	62,598.	55,547.	1,718.	5,333.
<b>10</b> Payroll taxes	52,066.	46,201.	1,429.	4,436.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management				
<b>b</b> Legal	2,040.	1,716.	147.	177.
<b>c</b> Accounting	35,285.	29,682.	2,549.	3,054.
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees	19,038.		19,038.	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	232,948.	195,956.	16,832.	20,160.
<b>12</b> Advertising and promotion				
<b>13</b> Office expenses	45,248.	24,154.	14,963.	6,131.
<b>14</b> Information technology	11,766.	9,898.	850.	1,018.
<b>15</b> Royalties				
<b>16</b> Occupancy	46,405.	34,805.	6,031.	5,569.
<b>17</b> Travel				
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings	5,408.	2,459.	877.	2,072.
<b>20</b> Interest	5,322.	184.	5,138.	
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	10,988.	8,242.	1,427.	1,319.
<b>23</b> Insurance	47,082.	35,311.	6,121.	5,650.
<b>24</b> Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
<b>a</b> STIPENDS	11,800.	11,800.		
<b>b</b> TELECOMMUNICATIONS	10,721.	5,945.	4,776.	
<b>c</b> PRINTING	8,148.	5,185.	678.	2,285.
<b>d</b> DUES & SUBSCRIPTIONS	7,971.	7,078.	401.	492.
<b>e</b> All other expenses	12,578.	2,515.	2,891.	7,172.
<b>25</b> Total functional expenses. Add lines 1 through 24e	1,322,650.	1,096,047.	104,351.	122,252.
<b>26</b> 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)

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	252,543.	<b>1</b>	321,875.
	<b>2</b> Savings and temporary cash investments .....		<b>2</b>	
	<b>3</b> Pledges and grants receivable, net .....	1,392.	<b>3</b>	2,240.
	<b>4</b> Accounts receivable, net .....	24,959.	<b>4</b>	40,087.
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	7,555.	<b>9</b>	13,238.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	10a 199,872.		
	<b>b</b> Less: accumulated depreciation .....	10b 185,924.		
	<b>11</b> Investments - publicly traded securities .....	4,198,165.	<b>11</b>	5,534,203.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	592,838.	<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	204,916.	<b>15</b>	138,830.
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	5,292,862.	<b>16</b>	6,064,421.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	53,436.	<b>17</b>	55,896.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....	103,304.	<b>23</b>	218,397.
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....		<b>25</b>	
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 .....	156,740.	<b>26</b>	274,293.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	98,295.	<b>27</b>	-51,364.
	<b>28</b> Net assets with donor restrictions .....	5,037,827.	<b>28</b>	5,841,492.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> <b>Total net assets or fund balances</b> .....	5,136,122.	<b>32</b>	5,790,128.
<b>33</b> <b>Total liabilities and net assets/fund balances</b> .....	5,292,862.	<b>33</b>	6,064,421.	

Form 990 (2020)

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response or note to any line in this Part XI ☐

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	1,383,956.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	1,322,650.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	61,306.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	5,136,122.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	592,700.
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain on Schedule O)	<b>9</b>	0.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	5,790,128.

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
<b>b</b> Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
<b>c</b> If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
<b>3a</b> As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
<b>b</b> If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

Form 990 (2020)

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

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

**2020**

Open to Public  
Inspection

Name of the organization

QUEBEC-LABRADOR FOUNDATION, INC.

Employer identification number

\*\*-\*\*\*\*\*

**Part I Reason for Public Charity Status.** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: \_\_\_\_\_
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: \_\_\_\_\_
- 10 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations \_\_\_\_\_

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
<b>Total</b>						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 032021 01-25-21 Schedule A (Form 990 or 990-EZ) 2020

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	1015409.	871,838.	659,353.	650,766.	788,649.	3986015.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	1015409.	871,838.	659,353.	650,766.	788,649.	3986015.
<b>5</b> 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) .....						1096949.
<b>6 Public support.</b> Subtract line 5 from line 4.						2889066.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>7</b> Amounts from line 4 .....	1015409.	871,838.	659,353.	650,766.	788,649.	3986015.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	153,105.	113,604.	126,901.	133,423.	103,288.	630,321.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>11 Total support.</b> Add lines 7 through 10 .....						4616336.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	11,520.
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f)) .....	<b>14</b>	62.58 %
<b>15</b> Public support percentage from 2019 Schedule A, Part II, line 14 .....	<b>15</b>	67.16 %
<b>16a 33 1/3% support test - 2020.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2019.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2020.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2019.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		<input type="checkbox"/>

Schedule A (Form 990 or 990-EZ) 2020



**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						
<b>14 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2019 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2019 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2020.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶ ☐

**b 33 1/3% support tests - 2019.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶ ☐

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

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

**Part IV Supporting Organizations** (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?		
11a		
b A family member of a person described in line 11a above?		
11b		
c A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.		
11c		

**Section B. Type I Supporting Organizations**

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, 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 operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
2		

**Section 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 Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

**Section 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?		
1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
2		
3 By reason of the relationship described in line 2, above, 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 Part VI the role the organization's supported organizations played in this regard.		
3		

**Section 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 instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
2 Activities Test. Answer lines 2a and 2b below.		
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 Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	Yes	No
2a		
b Did the activities described in line 2a, above, 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 lines 3a and 3b 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? If "Yes" or "No" provide details in Part VI.		
3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		
3b		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

- 1** ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 ( *explain in Part VI*). **See instructions.**  
All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

<b>Section A - Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b>	Net short-term capital gain	<b>1</b>	
<b>2</b>	Recoveries of prior-year distributions	<b>2</b>	
<b>3</b>	Other gross income (see instructions)	<b>3</b>	
<b>4</b>	Add lines 1 through 3.	<b>4</b>	
<b>5</b>	Depreciation and depletion	<b>5</b>	
<b>6</b>	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)	<b>6</b>	
<b>7</b>	Other expenses (see instructions)	<b>7</b>	
<b>8</b>	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	<b>8</b>	

<b>Section B - Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b>	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
<b>a</b>	Average monthly value of securities	<b>1a</b>	
<b>b</b>	Average monthly cash balances	<b>1b</b>	
<b>c</b>	Fair market value of other non-exempt-use assets	<b>1c</b>	
<b>d</b>	<b>Total</b> (add lines 1a, 1b, and 1c)	<b>1d</b>	
<b>e</b>	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI):		
<b>2</b>	Acquisition indebtedness applicable to non-exempt-use assets	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	
<b>4</b>	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	<b>4</b>	
<b>5</b>	Net value of non-exempt-use assets (subtract line 4 from line 3)	<b>5</b>	
<b>6</b>	Multiply line 5 by 0.035.	<b>6</b>	
<b>7</b>	Recoveries of prior-year distributions	<b>7</b>	
<b>8</b>	<b>Minimum Asset Amount</b> (add line 7 to line 6)	<b>8</b>	

<b>Section C - Distributable Amount</b>			Current Year
<b>1</b>	Adjusted net income for prior year (from Section A, line 8, column A)	<b>1</b>	
<b>2</b>	Enter 0.85 of line 1.	<b>2</b>	
<b>3</b>	Minimum asset amount for prior year (from Section B, line 8, column A)	<b>3</b>	
<b>4</b>	Enter greater of line 2 or line 3.	<b>4</b>	
<b>5</b>	Income tax imposed in prior year	<b>5</b>	
<b>6</b>	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	<b>6</b>	
<b>7</b>	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990 or 990-EZ) 2020

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

Section D - Distributions		Current Year
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	<b>1</b>	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	<b>2</b>	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	<b>3</b>	
<b>4</b> Amounts paid to acquire exempt-use assets	<b>4</b>	
<b>5</b> Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	<b>5</b>	
<b>6</b> Other distributions (describe in Part VI). See instructions.	<b>6</b>	
<b>7</b> Total annual distributions. Add lines 1 through 6.	<b>7</b>	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	<b>8</b>	
<b>9</b> Distributable amount for 2020 from Section C, line 6	<b>9</b>	
<b>10</b> Line 8 amount divided by line 9 amount	<b>10</b>	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
<b>1</b> Distributable amount for 2020 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2020 (reasonable cause required - explain in Part VI). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2020			
<b>a</b> From 2015			
<b>b</b> From 2016			
<b>c</b> From 2017			
<b>d</b> From 2018			
<b>e</b> From 2019			
<b>f</b> Total of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2020 distributable amount			
<b>i</b> Carryover from 2015 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
<b>4</b> Distributions for 2020 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2020 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from line 4.			
<b>5</b> Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
<b>6</b> Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
<b>7</b> Excess distributions carryover to 2021. Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2016			
<b>b</b> Excess from 2017			
<b>c</b> Excess from 2018			
<b>d</b> Excess from 2019			
<b>e</b> Excess from 2020			

Schedule A (Form 990 or 990-EZ) 2020

**SCHEDULE D**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

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

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

OMB No. 1545-0047

**2020**

Open to Public  
Inspection

Name of the organization

QUEBEC-LABRADOR FOUNDATION, INC.

Employer identification number

\*\*-\*\*\*\*\*

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

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

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

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

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

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

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

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

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

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

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ \$

b Assets included in Form 990, Part X ▶ \$

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

Schedule D (Form 990) 2020

032051 12-01-20



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

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

- a ☐ Public exhibition d ☐ Loan or exchange program  
 b ☐ Scholarly research e ☐ Other \_\_\_\_\_  
 c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	5,037,828.	4,875,499.	5,551,672.	5,586,113.	5,294,859.
b Contributions	2,350.	20,400.	40,550.	1,000.	
c Net investment earnings, gains, and losses	1,054,223.	561,919.	87,467.	609,664.	656,704.
d Grants or scholarships					
e Other expenditures for facilities and programs	253,756.	419,990.	804,190.	625,139.	365,450.
f Administrative expenses				19,966.	
g End of year balance	5,840,645.	5,037,828.	4,875,499.	5,551,672.	5,586,113.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment ☐ %  
 b Permanent endowment ☒ 99.9823 %  
 c Term endowment ☒ .0171 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) Unrelated organizations

(ii) Related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? ☐

4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		19,727.	19,727.	0.
d Equipment		100,683.	89,107.	11,576.
e Other		79,462.	77,090.	2,372.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				13,948.

Schedule D (Form 990) 2020

**Part VII Investments - Other Securities.**

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

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

**Part VIII Investments - Program Related.**

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

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

**Part IX Other Assets.**

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

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

**Part X Other Liabilities.**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes .....	
(2) .....	
(3) .....	
(4) .....	
(5) .....	
(6) .....	
(7) .....	
(8) .....	
(9) .....	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

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

Schedule D (Form 990) 2020

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

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

1	Total revenue, gains, and other support per audited financial statements	1	1,957,618.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	592,700.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	592,700.
3	Subtract line 2e from line 1	3	1,364,918.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	19,038.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	19,038.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,383,956.

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

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

1	Total expenses and losses per audited financial statements	1	1,303,612.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	1,303,612.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	19,038.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	19,038.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,322,650.

**Part XIII Supplemental Information.**

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

PART X, LINE 2:

UNCERTAIN TAX POSITIONS

THE ORGANIZATION ACCOUNTS FOR THE EFFECT OF ANY UNCERTAIN TAX POSITIONS BASED ON A "MORE LIKELY THAN NOT" THRESHOLD TO THE RECOGNITION OF THE TAX POSITIONS BEING SUSTAINED BASED ON THE TECHNICAL MERITS OF THE POSITION UNDER SCRUTINY BY THE APPLICABLE TAXING AUTHORITY. IF A TAX POSITION OR POSITIONS ARE DEEMED TO RESULT IN UNCERTAINTIES OF THOSE POSITIONS, THE UNRECOGNIZED TAX BENEFIT IS ESTIMATED BASED ON A "CUMULATIVE PROBABILITY ASSESSMENT" THAT AGGREGATES THE ESTIMATED TAX LIABILITY FOR ALL UNCERTAIN TAX POSITIONS.

**Part XIII** Supplemental Information *(continued)*

THE ORGANIZATION HAS IDENTIFIED ITS TAX STATUS AS A TAX EXEMPT ENTITY AND ITS DETERMINATION AS TO INCOME BEING RELATED OR UNRELATED AS ITS ONLY SIGNIFICANT TAX POSITION; HOWEVER, THE ORGANIZATION HAS DETERMINED THAT SUCH A TAX POSITION DOES NOT RESULT IN AN UNCERTAINTY REQUIRING RECOGNITION. THE ORGANIZATION IS NOT CURRENTLY UNDER EXAMINATION BY ANY TAXING JURISDICTION. THE ORGANIZATION'S UNITED STATES FEDERAL AND STATE TAX RETURNS ARE GENERALLY OPEN FOR EXAMINATION FOR THREE YEARS FOLLOWING THE DATE FILED.

**SCHEDULE I**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

**2020**

Open to Public  
Inspection

Name of the organization

QUEBEC-LABRADOR FOUNDATION, INC.

Employer identification number  
\*\*\*\*\*

**Part I** General Information on Grants and Assistance

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
GREAT GULL ISLAND PROJECT - THE AMERICAN MUSEUM OF NATURAL HISTORY - 200 CENTRAL PARK WEST - NEW YORK, NY 10024			5,000.	0.			GENERAL SUPPORT

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

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

Schedule I (Form 990) 2020

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
AWARDS & SMALL GRANTS	5	7,500.	0.		

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




**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

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

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

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

**2020**

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Inspection

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**\*\*-\*\*\*\*\***

**Part I Questions Regarding Compensation**

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

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

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

	Yes	No
<b>1b</b>		<b>X</b>

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

<b>2</b>		<b>X</b>
----------	--	----------

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

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

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

**a** Receive a severance payment or change-of-control payment?

<b>4a</b>		<b>X</b>
-----------	--	----------

**b** Participate in or receive payment from a supplemental nonqualified retirement plan?

<b>4b</b>		<b>X</b>
-----------	--	----------

**c** Participate in or receive payment from an equity-based compensation arrangement?

<b>4c</b>		<b>X</b>
-----------	--	----------

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

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

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

**a** The organization?

<b>5a</b>		<b>X</b>
-----------	--	----------

**b** Any related organization?

<b>5b</b>		<b>X</b>
-----------	--	----------

If "Yes" on line 5a or 5b, describe in Part III.

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

**a** The organization?

<b>6a</b>		<b>X</b>
-----------	--	----------

**b** Any related organization?

<b>6b</b>		<b>X</b>
-----------	--	----------

If "Yes" on line 6a or 6b, describe in Part III.

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

<b>7</b>		<b>X</b>
----------	--	----------

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

<b>8</b>		<b>X</b>
----------	--	----------

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

<b>9</b>		
----------	--	--

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Schedule J (Form 990) 2020



**Part III** Supplemental information

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

**PART I, LINE 1A:**

SOCIAL CLUB DUES ARE PAID ON BEHALF OF THE PRESIDENT AND PRESIDENT EMERITUS

IN ORDER TO HAVE A CONVENIENT LOCATION TO MEET WITH DONORS & BOARD MEMBERS.

THESE DUES ARE TREATED AS BUSINESS-RELATED AND, THEREFORE, AS NONTAXABLE

COMPENSATION TO THE RECIPIENTS.

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

Department of the Treasury  
Internal Revenue Service

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

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

**2020**

Open to Public  
Inspection

Name of the organization

QUEBEC-LABRADOR FOUNDATION, INC.

Employer identification number

\*\*-\*\*\*\*\*

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

THE RURAL COMMUNITIES AND ENVIRONMENT OF EASTERN CANADA AND NEW  
ENGLAND, AND TO CREATE MODELS FOR STEWARDSHIP OF NATURAL RESOURCES AND  
CULTURAL HERITAGE THAT CAN BE SHARED WORLDWIDE.

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

THE PROGRAM MISSION OF THE QUEBEC-LABRADOR FOUNDATION U.S. (QLF) IS  
DEFINED IN TWO PARTS: A REGIONAL COMPONENT (NEW ENGLAND AND EASTERN  
CANADA), AND AN INTERNATIONAL COMPONENT, WHICH TIES OUR REGIONAL MODEL  
TO A GLOBAL NETWORK. QLF EXISTS TO PROMOTE GLOBAL LEADERSHIP  
DEVELOPMENT, TO SUPPORT THE RURAL COMMUNITIES AND ENVIRONMENT OF  
EASTERN CANADA AND NEW ENGLAND, AND TO CREATE MODELS FOR STEWARDSHIP OF  
NATURAL RESOURCES AND CULTURAL HERITAGE THAT CAN BE SHARED WORLDWIDE.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

COMMISSION ON PROTECTED AREAS; AND WORLD HERITAGE; AND 6) INTERNATIONAL  
CONSERVATION EXCHANGE PROGRAMS TO INCLUDE THE EAST ASIA CONSERVATION  
EXCHANGE PROGRAM WITH CONSERVATION PRACTITIONERS FROM MONGOLIA AND NEW  
ENGLAND; AND THE MIDDLE EAST CONSERVATION EXCHANGE PROGRAM WITH  
ORNITHOLOGISTS ALONG THE RIFT VALLEY/RED SEA FLYWAYS IN JORDAN.

THE SOUNDS CONSERVANCY MARINE RESEARCH PROGRAM - THE SOUNDS CONSERVANCY  
IS A MARINE RESEARCH PROGRAM ALONG THE SIX SOUNDS, ESTUARIES, AND  
COASTAL WATERS OF SOUTHERN NEW ENGLAND AND NEW YORK. FROM SOUTH TO  
NORTH, THE SOUNDS ARE LONG ISLAND, FISHERS ISLAND, BLOCK ISLAND, RHODE

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

Schedule O (Form 990 or 990-EZ) 2020

032211 11-20-20

Name of the organization

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Employer identification number  
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ISLAND, MARTHA'S VINEYARD, AND NANTUCKET. THE PROGRAM IS DEDICATED TO CONSERVE, PROTECT, AND STEWARD THE SOUNDS AND ITS COASTAL WATERS, AND TO SUPPORT MARINE RESEARCH, ENVIRONMENTAL POLICY, AND ENVIRONMENTAL EDUCATION. EACH YEAR, QLF AWARDS SUPPLEMENTAL RESEARCH GRANTS TO GRADUATE STUDENTS, FELLOWS, AND PRACTITIONERS IN MARINE CONSERVATION. AS WELL, EACH YEAR, QLF STAFF UPDATE THE SOUNDS CONSERVANCY'S 200-PAGE ELECTRONIC PUBLICATION, WHICH DOCUMENTS TWENTY-FIVE YEARS OF WORK BY THE PROGRAM'S FELLOWS.

BIODIVERSITY CONSERVATION PROGRAM - QLF'S BIODIVERSITY CONSERVATION PROGRAM IS MANAGED BY A SENIOR PROGRAM CONSULTANT IN MASSACHUSETTS WITH QLF STAFF MEMBERS. THE GOALS OF THE PROGRAM ARE TO ENCOURAGE LOCAL COMMUNITIES TO TAKE AN ACTIVE ROLE AS CITIZEN SCIENTISTS, PROMOTE INITIATIVES THAT SECURE SUSTAINABLE DEVELOPMENT, STEWARD AND CONSERVE ECOSYSTEMS, AND LEAD BIODIVERSITY CONSERVATION INITIATIVES AS A STRATEGY TO MITIGATE THE IMPACTS OF A CHANGING CLIMATE. 2021 PROJECTS ARE:

AQUATIC SPECIES AT RISK - THE GOVERNMENT OF CANADA'S DEPARTMENT OF FISHERIES AND OCEANS AWARDED QLF A FOUR-YEAR GRANT SECURED BY A QLF SENIOR CONSULTANT WHO IS RECOGNIZED WORLDWIDE FOR HER PIONEERING WORK IN COMMUNITY-BASED CONSERVATION. THE PROJECT CONTRIBUTES TO THE RECOVERY OF ENDANGERED AND THREATENED MARINE SPECIES BY REDUCING THREATS CAUSED BY FISHERIES SUCH AS ENTANGLEMENT WITH FISHING GEAR, INGESTION OF PLASTICS, AND BY-CATCH MORTALITY.

MARINE BIRD CONSERVATION: RENEWING SEABIRD CONSERVATION ON THE QUEBEC NORTH SHORE - 2021 MARKS THE SECOND YEAR OF A TWO-YEAR PROJECT, MARINE BIRD CONSERVATION, WHICH IS MANAGED BY A SENIOR CONSULTANT IN MASSACHUSETTS. QLF LAUNCHED THIS PROJECT IN COMMUNITIES OF THE QUEBEC

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LOWER NORTH SHORE, WHICH IS HOME TO TEN OF CANADA'S OLDEST MIGRATORY BIRD SANCTUARIES. PROJECT GOALS ARE TO ENGAGE RESIDENTS IN ACTIVITIES THAT PROTECT THE IMPORTANT SEABIRD COLONIES ALONG THE COAST AND RAISE AWARENESS OF THREATS TO NESTING COLONIES OF SEABIRDS AND SEA DUCKS.

CONSERVATION AND STEWARDSHIP OF PROTECTED AREAS, THE MARITIMES - THE GOAL OF THIS PROGRAM IS TO ENSURE THE CONSERVATION AND STEWARDSHIP OF PROTECTED AREAS IN NEW BRUNSWICK. THE PROGRAM, MANAGED BY QLF STAFF AT THE HEADQUARTERS, IS DIRECTED IN PARTNERSHIP WITH THE NATURE TRUST NEW BRUNSWICK, A CHARITABLE LAND CONSERVATION ORGANIZATION DEDICATED TO THE STEWARDSHIP OF 60 NATURE PRESERVES OF ECOLOGICAL SIGNIFICANCE THROUGHOUT THE PROVINCE, QLF STAFF CONTRIBUTE TO SURVEYS AND LONGITUDINAL STUDIES OF SEABIRDS, SEA DUCKS, AND MIGRATORY BIRDS AS WELL AS FLORA AND FAUNA ACROSS NEW BRUNSWICK'S PROTECTED AREAS. IN 2021, STAFF SET PLANS TO EXPAND THE PROGRAM ACROSS THE MARITIMES IN PARTNERSHIP WITH ORGANIZATIONS IN NOVA SCOTIA AND PRINCE EDWARD ISLAND.

THE NATIONAL PARK SERVICE STEWARDSHIP INSTITUTE - QLF IS THE PRINCIPAL PARTNER IN THE NATIONAL PARK SERVICE STEWARDSHIP INSTITUTE, WHICH WAS FOUNDED WITH THE CONVICTION THAT THE NATIONAL PARK SERVICE (NPS) HAS A GREAT PUBLIC PURPOSE AND THAT ITS PEOPLE CHARGED WITH THE STEWARDSHIP OF SOME OF AMERICA'S GREATEST TREASURES SHOULD BE SUPPORTED, CHALLENGED, AND PROVIDED OPPORTUNITIES FOR RENEWAL. PROJECTS CONSIST OF THE FOLLOWING:

CHESAPEAKE BAY GATEWAYS NETWORK QLF CONCLUDED A PROJECT TO DEVELOP A STRATEGIC PLAN FOR THE CHESAPEAKE BAY GATEWAYS NETWORK TO RENEW PLANS FOR THE REVITALIZATION OF THE STEWARDSHIP OF THE NETWORK AND ITS PARKS, WILDLIFE REFUGES, MARITIME MUSEUMS, HISTORIC SITES AND WATER TRAILS



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WITHIN THE 64,000 SQUARE MILES OF ITS WATERSHED.

TRAINING ORDERS, CONSERVATION AND STEWARDSHIP QLF DEVELOPED A SERIES OF TRAINING ORDERS IN CONSERVATION AND STEWARDSHIP INITIATIVES FOR THE STEWARDSHIP INSTITUTE.

QLF GLOBAL PROGRAM - THE QLF GLOBAL PROGRAM CONSISTS OF SPECIAL ASSIGNMENTS THAT PROMOTE INNOVATIVE SOLUTIONS FOR LOCAL AND REGIONAL ENVIRONMENTAL CHALLENGES SHARED WORLDWIDE. PROJECTS ARE: PRIVATELY PROTECTED AREAS, INTERNATIONAL UNION FOR CONSERVATION OF NATURE QLF'S SENIOR VICE PRESIDENT CHAIRS A SPECIALIST GROUP ON PROTECTED AREAS WITHIN THE INTERNATIONAL UNION FOR THE CONSERVATION OF NATURE (IUCN). ITS RECENT, NOTED PUBLICATION, "GUIDELINES FOR PRIVATELY PROTECTED AREAS," WRITTEN IN COLLABORATION WITH A QLF SENIOR PROGRAM MANAGER, IS CRITICAL TO A GLOBAL EFFORT IN THE CONSERVATION AND STEWARDSHIP OF PROTECTED AREAS.

TRAINING ON PROTECTED AREAS, IUCN WORLD CONSERVATION CONGRESS WITH FUNDING FROM THE GERMAN AGENCY FOR NATURE CONSERVATION (BFN). QLF HAS CONDUCTED A SERIES OF PRESENTATIONS ON THE GUIDELINES FOR PRIVATELY PROTECTED AREAS FIRST AT THE LATIN AMERICA AND CARIBBEAN PROTECTED AREAS CONGRESS IN LIMA, PERU (OCTOBER 2019) FOLLOWED BY THE IUCN WORLD CONSERVATION CONGRESS (WCC) HELD IN MARSEILLE, FRANCE (SEPTEMBER 2021). PRESENTATION PLANS FOR THE IUCN WCC TOOK PLACE THROUGHOUT THE YEAR. PARKS, THE INTERNATIONAL JOURNAL OF PROTECTED AREAS AND CONSERVATION QLF SENIOR VICE PRESIDENT CO-EDITED A SPECIAL ISSUE OF PARKS, THE INTERNATIONAL JOURNAL OF PROTECTED AREAS AND CONSERVATION, ON THE IMPACT AND IMPLICATION OF SARS-COV-2 ON CONSERVATION AREAS WORLDWIDE. PARKS WAS PUBLISHED IN MARCH 2021, THE ANNIVERSARY OF THE DECLARATION OF THE PANDEMIC BY THE WORLD HEALTH ORGANIZATION. THE PUBLICATION

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\*\*-\*\*\*\*\*

CONSISTS OF PEER REVIEW PAPERS DOCUMENTING THE HISTORY OF EPIDEMICS AND LAND CONSERVATION, THE DRIVERS OF COVID-19 IN WILDLIFE AND HUMAN POPULATIONS, AND THE IMPACT OF THE PANDEMIC ON CONSERVATION, STEWARDSHIP, AND THE MANAGEMENTS OF PARKS AND RESERVES WORLDWIDE. POLICY NOTES AND TECHICAL PAPERS, IUCN WORLD COMMISSION ON PROTECTED AREAS QLF SENIOR VICE PRESIDENT ADVISED ON A RANGE OF POLICY DOCUMENTS IN COLLABORATION WITH THE IUCN WORLD COMMISSION ON PROTECTED AREAS TO INCLUDE THE "PROTECTED AND CONSERVED AREAS JOINT STATEMENT ON CLIMATE CHANGE AND BIODIVERSITY CRISES" AND A PEER REVIEWED PAPER, "PRIVATELY PROTECTED AREAS: MISSING PIECES OF THE GLOBAL CONSERVATION PUZZLE." WORLD HERITAGE QLF SENIOR VICE PRESIDENT CONTINUES TO ASSIST THE INTERNATIONAL UNION FOR CONSERVATION OF NATURE IN ITS SUPPORT TO UNESCO IN THE WORLD HERITAGE PROGRAM.

INTERNATIONAL CONSERVATION EXCHANGE PROGRAMS - CONSERVATION EXCHANGE PROGRAMS FOSTER AN EXCHANGE OF KNOWLEDGE, EXPERIENCE, AND CONSERVATION INNOVATION WHILE PROMOTING CROSS-BORDER, INTERNATIONAL COOPERATION BETWEEN COMMUNITIES AND REGIONS WORLDWIDE. INTERNATIONAL FELLOWS WHO HAVE PARTICIPATED IN QLF'S CONSERVATION EXCHANGES REPRESENT 75 COUNTRIES. PROGRAMS PLANNED FOR 2021 ARE:

EAST ASIA CONSERVATION EXCHANGE PROGRAM WITH CONSERVATION PRACTITIONERS FROM MONGOLIA AND NEW ENGLAND QLF MADE ARRANGEMENTS TO LEAD THE SECOND EAST ASIA CONSERVATION EXCHANGE PROGRAM IN MONGOLIA FOR PRACTITIONERS FROM NEW ENGLAND AND MONGOLIA REPRESENTING THE PUBLIC AND PRIVATE SECTOR. THIS EXCHANGE TO BE HELD IN 2021 HAS BEEN POSTPONED UNTIL TRAVEL RESTRICTIONS ARE LIFTED AND UNTIL IT IS SAFE TO TRAVEL TO THE REGION.

MIDDLE EAST CONSERVATION EXCHANGE PROGRAM WITH ORNITHOLOGISTS ON THE

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RIFT VALLEY/RED SEA FLYWAYS SINCE 1992, QLF HAS DIRECTED EXCHANGE PROGRAMS FOR CONSERVATION LEADERS FROM THE MIDDLE EAST, NORTH AFRICA, AND THE GULF STATES. A FOCUS OF THE PROGRAM IS THE ENVIRONMENT, WHICH SERVES AS A BRIDGE TO MUTUAL UNDERSTANDING AND COLLABORATION ACROSS BORDERS, POLITICAL BOUNDARIES, AND CULTURAL FRAMEWORKS. IN 2021, QLF PLANNED FOR A SECOND CONSERVATION EXCHANGE PROGRAM ON THE GREAT FLYWAYS TO BE HELD ON THE RIFT VALLEY/RED SEA FLYWAYS IN JORDAN. THE PROGRAM IS POSTPONED UNTIL IT IS SAFE TO TRAVEL.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

FIELD WORK IN BIODIVERSITY CONSERVATION, MARINE BIRD CONSERVATION, CONSERVATION AND STEWARDSHIP OF MARINE ENVIRONMENTS, PRIVATELY PROTECTED AREAS, AND WILDLIFE CONSERVATION. INTERNSHIPS ARE OFTEN DIRECTED IN PARTNERSHIP WITH MULTIPLE ORGANIZATIONS IN-REGION. INTERNSHIPS BASED AT QLF HEADQUARTERS IN IPSWICH, MASSACHUSETTS, FOCUS ON COMMUNICATIONS, NEW REGIONAL AND GLOBAL INITIATIVES, AND SPECIAL CONSERVATION ASSIGNMENTS. THE CONSERVATION INTERNSHIP PROGRAM IS AN INVESTMENT IN THE NEXT GENERATION'S CONSERVATION LEADERS AND STEWARDS OF OUR ENVIRONMENT.

INVESTING IN THE NEXT GENERATION'S CONSERVATION LEADERS - BASED IN MASSACHUSETTS, QLF MANAGES A THREE-YEAR PROGRAM, INVESTING IN THE NEXT GENERATION'S CONSERVATION LEADERS ACROSS THE GREAT NORTHERN PENINSULA OF NEWFOUNDLAND AND SOUTHERN LABRADOR. THROUGHOUT THE YEAR, STAFF PROVIDE ENVIRONMENTAL EDUCATION WORKSHOPS TO MORE THAN 300 YOUTH ACROSS THE GREAT NORTHERN PENINSULA OF NEWFOUNDLAND AND SOUTHERN LABRADOR. THE PROGRAM IS DESIGNED TO INSPIRE YOUTH AS THE NEXT GENERATION'S CONSERVATION LEADERS. WORKSHOPS FOCUS ON THE IMPACT OF CLIMATE CHANGE

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ON BIODIVERSITY CONSERVATION; SEABIRDS, SEA DUCKS, AND MIGRATORY BIRDS;  
MARINE MAMMALS AT RISK; REDUCING MARINE DEBRIS AND RESTORING MARINE  
ECOSYSTEMS; PROTECTION OF WILDLIFE AND THEIR HABITATS. THIS PROGRAM IS  
MANAGED WITH SEVERAL PARTNER ORGANIZATIONS IN NEWFOUNDLAND AND SOUTHERN  
LABRADOR.

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

IV. COMMUNITY SERVICE FOUNDED BY A BUSH PILOT AND ARCHDEACON OF THE  
QUEBEC NORTH SHORE, QLF BEGAN AS A COMMUNITY SERVICE ORGANIZATION,  
WHICH EVOLVED OVER DECADES AS A COMMUNITY-BASED CONSERVATION TO ADDRESS  
THE NEEDS OF COMMUNITY, CULTURE, AND CONSERVATION. TODAY'S COMMUNITY  
SERVICE INITIATIVES HAVE EVOLVED TO COMMUNITY-BASED CONSERVATION IN  
QLF'S HOME REGION AND MANAGED FROM THE QLF HEADQUARTERS IN IPSWICH,  
MASSACHUSETTS.

EXPENSES \$ 78,910. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

V. CULTURE AND HERITAGE IN 2021, QLF STAFF COMPLETED THE FINAL WORK  
ON THE CULTURE AND HERITAGE PROGRAM BASED ON THE QUEBEC NORTH SHORE AND  
MANAGED FROM THE QLF HEADQUARTERS IN MASSACHUSETTS.

EXPENSES \$ 1,112. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

VI. COMMUNICATIONS QLF COMPLETED THE FIRST SEASON OF ITS NEW WEBINAR  
SERIES, VOICES OF QLF, WHICH IS BROADCAST LIVE THROUGHOUT THE YEAR. THE  
SERIES HIGHLIGHTS THE ACCOMPLISHMENTS OF STAFF AND ALUMNI WHO ARE  
PROMINENT CONSERVATION LEADERS IN-REGION AND WORLDWIDE. EACH EPISODE  
CONSISTS OF INTERVIEWS AND INFORMAL DIALOGUE EXCHANGE ALONG WITH FILM,  
VIDEO, AND PHOTOGRAPHS.

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OTHER QLF COMMUNICATIONS INITIATIVES INCLUDE THE QLF WEBSITE  
MAINTENANCE WITH ARTICLES AND CASE STUDIES ON LONGITUDINAL STUDIES  
CONDUCTED BY STAFF AND ALUMNI, WHICH ARE POSTED UNDER THE SECTION, OUR  
IMPACT; SOCIAL MEDIA; ELECTRONIC NEWS, ONLINE REPORTS AND PUBLICATIONS.  
QLF STAFF CONTINUE TO WRITE ARTICLES DOCUMENTING THE WORK OF QLF'S  
GLOBAL LEADERSHIP NETWORK OF ALUMNI.  
EXPENSES \$ 261,994. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

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

FORM 990 IS REVIEWED BY MANAGEMENT AND THEN, SEPARATELY, BY THE AUDIT  
COMMITTEE. THE ORGANIZATION SENDS A LINK TO THE BOARD OF DIRECTORS,  
QUEBEC-LABRADOR FOUNDATION, INC. - U.S. TO A PROTECTED BOARD WEBSITE TO  
WHICH THE 990 IS POSTED. DIRECTORS REVIEW THE 990 PRIOR TO ITS FILING.

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

FOR PURPOSES OF THIS PROVISION, THE TERM "INTEREST" SHALL INCLUDE PERSONAL  
INTEREST, INTEREST AS A DIRECTOR, OFFICER, MEMBER, STOCKHOLDER,  
SHAREHOLDER, PARTNER, MANAGER, OR BENEFICIARY OF ANY CONCERN OR HAVING AN  
IMMEDIATE FAMILY MEMBER WHO HOLDS SUCH AN INTEREST IN ANY CONCERN. THE  
TERM "CONCERN" SHALL MEAN ANY CORPORATION, ASSOCIATION, TRUST, PARTNERSHIP,  
LIMITED LIABILITY ENTITY, FIRM, PERSON OR OTHER ENTITY OTHER THAN THE  
ORGANIZATION, QUEBEC-LABRADOR FOUNDATION, INC.

NO DIRECTOR, OFFICER OR KEY EMPLOYEE OF THE ORGANIZATION SHALL BE  
DISQUALIFIED FROM HOLDING ANY OFFICE OR POST IN THE ORGANIZATION BY REASON  
OF ANY INTEREST IN ANY CONCERN. A DIRECTOR, OFFICER OR KEY EMPLOYEE OF THE  
ORGANIZATION SHALL NOT BE DISQUALIFIED FROM ENGAGING, EITHER AS VENDOR,  
PURCHASER OR OTHERWISE, OR CONTRACTING OR ENTERING INTO ANY TRANSACTION

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WITH THE ORGANIZATION OR WITH ANY ENTITY OF WHICH THE ORGANIZATION IS AN AFFILIATE, PROVIDED, HOWEVER, THAT THE FOLLOWING PRECAUTIONS ARE UNDERTAKEN:

1. THE INTEREST OF SUCH DIRECTOR, OFFICER OR KEY EMPLOYEE IS FULLY DISCLOSED TO THE BOARD OF DIRECTORS PRIOR TO ITS ENTERING INTO THE TRANSACTION.

2. NO INTERESTED DIRECTOR, OFFICER OR KEY EMPLOYEE MAY VOTE OR LOBBY ON THE MATTER OR BE COUNTED IN DETERMINING THE EXISTENCE OF A QUORUM AT THE MEETING OF THE BOARD OF DIRECTORS AT WHICH SUCH MATTER IS VOTED UPON.

3. ANY TRANSACTION IN WHICH A DIRECTOR, OFFICER OR KEY EMPLOYEE HAS AN INTEREST SHALL BE DULY APPROVED BY THE DISINTERESTED BOARD MEMBERS AS BEING IN THE BEST INTERESTS OF THE ORGANIZATION.

4. PAYMENTS TO THE INTERESTED DIRECTOR, OFFICER OR KEY EMPLOYEE SHALL BE REASONABLE AND SHALL NOT EXCEED FAIR MARKET VALUE.

5. THE MINUTES OF MEETINGS AT WHICH SUCH VOTES ARE TAKEN SHALL RECORD SUCH DISCLOSURE, ABSTENTION, AND RATIONALE FOR APPROVAL.

THE FOREGOING PROCEDURES SHALL NOT BE REQUIRED IF THE INTEREST OF THE AFFECTED DIRECTOR, OFFICER OR KEY EMPLOYEE CONSISTS OF DIRECT OR INDIRECT OWNERSHIP OF 1% OR LESS OF PUBLIC TRADED SECURITIES OF THE CONCERN OR IF THE TRANSACTION IS DE MINIMIS IN RELATION TO THE ORGANIZATION'S ASSETS OR REVENUES.

DIRECTORS, OFFICERS AND KEY EMPLOYEES ARE REQUIRED TO DISCLOSE THEIR INTERESTS THAT COULD GIVE RISE TO CONFLICTS OF INTEREST AT LEAST ANNUALLY. THE CONFLICT OF INTEREST POLICY AND ANNUAL DISCLOSURE STATEMENT ARE MAILED TO THE BOARD OF DIRECTORS, OFFICERS, AND KEY EMPLOYEES OF THE QUEBEC-LABRADOR FOUNDATION. THE SIGNED DISCLOSURE STATEMENT IS COLLECTED AND REVIEWED BY THE PRESIDENT OF THE ORGANIZATION, ELIZABETH ALLING.

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

COMPENSATION IS REVIEWED BY THE MEMBERS OF THE EXECUTIVE COMPENSATION COMMITTEE WITH A PERIODIC REVIEW DONE BY AN EXTERNAL THIRD PARTY. THE COMPENSATION OF THE PRESIDENT IS REVIEWED BY THE EXECUTIVE COMPENSATION COMMITTEE AND APPROVED BY THE BOARD OF DIRECTORS, AND IS PERIODICALLY COMPARED TO COMPARABLE DATA AT SIMILAR ORGANIZATIONS.

## FORM 990, PART VI, SECTION C, LINE 19:

GOVERNING DOCUMENTS, GOVERNANCE REFERENCE MANUAL, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE POSTED ON THE QLF WEBSITE. THE GOVERNANCE REFERENCE MANUAL INCLUDES BY-LAWS, MEMBERS OF THE GOVERNING BOARDS, BOARD COMMITTEES AND CORRESPONDING BOARD CHARTERS, STAFF, AND POLICIES OF THE QUEBEC-LABRADOR FOUNDATION TO INCLUDE: CONFLICT OF INTEREST, WHISTLEBLOWER POLICY, DOCUMENT RETENTION AND DESTRUCTION POLICY, COMPENSATION SETTING POLICY, AND THE JOINT VENTURE POLICY.

## FORM 990, PART IX, LINE 11G, OTHER FEES:

## PAYROLL PROCESSING FEES:

PROGRAM SERVICE EXPENSES	14,824.
MANAGEMENT AND GENERAL EXPENSES	1,273.
FUNDRAISING EXPENSES	1,525.
TOTAL EXPENSES	17,622.

## CONTRACTORS:

PROGRAM SERVICE EXPENSES	10,681.
MANAGEMENT AND GENERAL EXPENSES	917.
FUNDRAISING EXPENSES	1,099.

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TOTAL EXPENSES	12,697.
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## OTHER:

PROGRAM SERVICE EXPENSES	156,203.
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MANAGEMENT AND GENERAL EXPENSES	13,418.
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FUNDRAISING EXPENSES	16,070.
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TOTAL EXPENSES	185,691.
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## BOARD COUNSEL FEES:

PROGRAM SERVICE EXPENSES	14,248.
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MANAGEMENT AND GENERAL EXPENSES	1,224.
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FUNDRAISING EXPENSES	1,466.
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TOTAL EXPENSES	16,938.
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TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	232,948.
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**SCHEDULE R**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Related Organizations and Unrelated Partnerships**

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

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

OMB No. 1545-0047

**2020**

Open to Public  
Inspection

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
QUEBEC LABRADOR FOUNDATION (CANADA), INC. 606 RUE CATHCART, BUREAU 335 MONTREAL, QUEBEC, CANADA H3B 1K9	BIODIVERSITY CONSERVATION AND STEWARDSHIP OF NATURAL RESOURCES	CANADA	CANADIAN REGISTERED				X

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

Schedule R (Form 990) 2020

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

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

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

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

**Part V Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
<b>1</b> During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)	X	
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)	X	
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) QUEBEC-LABRADOR FOUNDATION (CANADA), INC.	D	138,830.	FMV OF CASH PROVIDED
(2) QUEBEC-LABRADOR FOUNDATION (CANADA), INC.	L	93,000.	FMV OF SERVICES PROVIDED
(3)			
(4)			
(5)			
(6)			



## Part VII Supplemental Information

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

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