Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

Α	For the	e 2022 calendar year, or tax year beginning and	ending				
В	Check if applicable	C Name of organization		D Employer identifi	cation number		
	Addre: chang		•				
	Name chang	Doing business as		04-30666	93		
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numbe			
	Final return			508-990-			
_	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	522,805.		
Ļ	Ameno return Applic	DARIMOUTI, MA 02/40-1320		H(a) Is this a group re			
	tion pendir	F Name and address of principal officer:OIIO W. SCIIDEINKOF	EK III				
_		SAME AS C ABOVE		H(b) Are all subordinates in			
		empt status: X 501(c)(3) 501(c)() (insert no.) 4947(a)(1) of the: WWW • LLOYDCENTER • ORG	or 527	1	list. See instructions		
	Websit		I Veer	H(c) Group exemptio			
	art I	organization: X Corporation Trust Association Other Summary	L Year	of formation: 1904 N	M State of legal domicile: MA		
	T 4	Briefly describe the organization's mission or most significant activities: INST:	TT.Τ. Δ	T.TFE-T.ONG R	ESPECT AND		
Governance	1	AFFECTION FOR NATURE IN ALL PEOPLE THROUGH					
nar	2	Check this box if the organization discontinued its operations or dispose					
Ver	3	·		3	19		
		Number of independent voting members of the governing body (Part VI, line 1b)			19		
Š		Total number of individuals employed in calendar year 2022 (Part V, line 2a)			11		
itie	6	Total number of volunteers (estimate if necessary)			100		
Activities	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.		
۹	b	Net unrelated business taxable income from Form 990-T, Part I, line 11			0.		
				Prior Year	Current Year		
Φ	8	Contributions and grants (Part VIII, line 1h)		753,301.	349,281.		
eun	9	Program service revenue (Part VIII, line 2g)		96,982.	146,936.		
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		11,920.	-27,404.		
ш	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-2,958.	-2,258.		
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		859,245.	466,555.		
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.		
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.		
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		405,731.	402,811.		
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	<u>.</u>	0.	0.		
X	b	Total fundraising expenses (Part IX, column (D), line 25) 101, 2		100 522	227 262		
_	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		199,522. 605,253.	227,363. 630,174.		
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		253,992.	-163,619.		
<u></u> 0	19 3	Revenue less expenses. Subtract line 18 from line 12		ginning of Current Year	End of Year		
Net Assets or	g 20	Total access (Dort V. line 16)		4,471,383.	4,139,450.		
ASSE	20 21	Total assets (Part X, line 16) Total liabilities (Part X, line 26)		18,099.	31,442.		
Net	22	Net assets or fund balances. Subtract line 21 from line 20		4,453,284.	4,108,008.		
P	art II	Signature Block					
		Ities of perjury, I declare that I have examined this return, including accompanying schedule	s and statem	ents, and to the best of m	y knowledge and belief, it is		
	-	t, and complete. Declaration of preparer (other than officer) is based on all information of wh			,		
Siç	gn	Signature of officer		Date			
He		DANIELLE NIHILL, TREASURER					
		Type or print name and title					
		Print/Type preparer's name Preparer's signature		Date Check Check	PTIN		
Pai	id	STEPHEN M. SNOW		self-employ			
	eparer	Firm's name LEONARD, MULHERIN & GREENE, P.C.		Firm's EIN 0	4-3108635		
Us	e Only	Firm's address 625 GROVE STREET					
		BRAINTREE, MA 02184		Phone no. (7	81) 356-4800		
Ма	y the IF	RS discuss this return with the preparer shown above? See instructions			X Yes No		

Pa	rt 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:
	THE MISSION OF THE CENTER IS TO INSTILL A LIFE-LONG RESPECT AND
	AFFECTION FOR NATURE IN ALL PEOPLE THROUGH RESEARCH AND EDUCATION; TO
	ADVANCE A SCIENTIFIC AND PUBLIC UNDERSTANDING OF OUR COASTAL
	ECOSYSTEMS AND THE NEED TO PROTECT THEM; AND TO PROMOTE A LEGACY OF
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	
	ENVIRONMENTAL RESEARCH
	HISTORY/BACKGROUND:
	SINCE ITS FOUNDING, THE LLOYD CENTER HAS FOCUSED ITS RESEARCH ON
	ASSESSING AND DOCUMENTING THE DISTRIBUTION AND ECOLOGY OF THE NATURAL
	RESOURCES OF SOUTHEASTERN NEW ENGLAND, WITH A SPECIAL FOCUS ON RARE
	SPECIES LISTED UNDER THE MASSACHUSETTS ENDANGERED SPECIES ACT AND THEIR
	HABITATS.
	SPECIALIZATIONS HAVE INCLUDED LEPIDOPTERA (MOTHS, BUTTERFLIES), FOR
	SPECIALIZATIONS HAVE INCLUDED LEPIDOPTERA (MOTHS, BUTTERFLIES), FOR WHICH SURVEYS HAVE BEEN CONDUCTED THROUGHOUT NEW ENGLAND, AND WORK
	WITH THE FEDERALLY-ENDANGERED PIPING PLOVER, FOR WHICH RESEARCH,
	MONITORING, AND PROTECTION EFFORTS HAVE BEEN CONDUCTED IN BRISTOL
4b	000 000
40	(Code:) (Expenses \$ 221,631. including grants of \$) (Revenue \$) (Revenue \$)
	THE LLOYD CENTER CONTINUES TO PROVIDE A NUMBER OF UNIQUE HANDS-ON
	SCIENCE PROGRAMS FOR SCHOOLCHILDREN AND ADOLESCENTS IN OVER 20
	DIFFERENT NEW ENGLAND CITIES AND TOWNS, AT LEVELS RANGING FROM
	KINDERGARTEN THROUGH COLLEGE. THE LLOYD CENTER WORKED WITH OVER 40
	ELEMENTARY AND MIDDLE SCHOOLS IN THE REGION, TO TEACH INTERACTIVE
	LESSONS ON RELEVANT AND CRITICALLY IMPORTANT ENVIRONMENTAL ISSUES.
	PROGRAM OFFERINGS HAVE BEEN UPDATED TO NOW INCLUDE A VARIETY OF VIRTUAL
	CLASSROOM LESSONS.
	THE CURRICULUM-BASED OFFERINGS, FEATHERY FOCUS (AN ORNITHOLOGY PROGRAM
	SPECIALLY CREATED FOR THE THIRD-GRADE LEVEL), AS WELL AS THE INNOVATIVE
4c	
	ENVIRONMENTAL OUTREACH:
	THE CENTER OUTREACH STAFF INTERACTED WITH NEARLY 700 PEOPLE IN THE COMMUNITY. THE CENTER ENGAGED THE PUBLIC AS OFTEN AS POSSIBLE WHILE ON
	THE PROPERTY WITH IMPROMPTU OWL PRESENTATIONS, UPDATES TO BIRD ACTIVITY
	ON SITE, AND NATURAL HISTORY INFORMATION ABOUT THE LANDSCAPE, AS WELL
	AS PROVIDING PRESENCE AT SCHOOLS OFFERING SCIENCE FAIRS AND OTHER STEM
	EVENTS. THE CENTER CONTINUES TO FEATURE A STORYWALK TRAIL ON THE
	PROPERTY.
	OVER FIVE MILES OF RUSTIC HIKING TRAILS, OPEN TO THE PUBLIC EVERY DAY
	FROM DAWN TO DUSK ON THE CENTER'S HARDSCRABBLE NATURE PRESERVE, AND A
	BROAD VARIETY OF LIVE MARINE ANIMAL EXHIBITS, COMPLEMENTED BY PROGRAMS
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 428,167.
	Farm 990 (2022)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
_	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4		1 22
5	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	х	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
·	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	11.5		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			77
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			.,
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х

D 11/	Checklist of Required Schedules (continued)
Dart IV	I I TOOCKIICT OF WOOLIIFOO SCHOOLIIOC (continued)
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			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			ا ۔۔
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
_	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			,,
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			,,
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		7.7	
Da:	Note: All Form 990 filers are required to complete Schedule 0 t V Statements Regarding Other IRS Filings and Tax Compliance	38	Х	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			
_	Establish sumbay yang dadin hay 0 of Farm 1000 Establish 2 feath and Backle		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 7			
d	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	۵.		
	(gambling) winnings to prize winners?	_1c	000	<u></u>

LLOYD CENTER FOR THE ENVIRONMENT, INC. Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

				Yes	NO
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a 11		77	
_	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?	2b	Х	37
3a			3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other				Х
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		Λ
D	If "Yes," enter the name of the foreign country	and (FDAD)			
5 0	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A		E-		Х
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a 5b		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		21
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		30		
ua			6a		Х
h	any contributions that were not tax deductible as charitable contributions?		- Oa		
b	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).		OD		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was				
	to file Form 8282?	·	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	I	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contri		7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	orm 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the			
	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? \dots		9b		
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:	l I			
а	Gross income from members or shareholders	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against	441.			
100	amounts due or received from them.)	11b	100		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	12a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120			
	Is the organization licensed to issue qualified health plans in more than one state?		13a		
ŭ	Note: See the instructions for additional information the organization must report on Schedule O.		iou		
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans	13b			
С	Enter the amount of reserves on hand	13c			
14a			14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune				
	excess parachute payment(s) during the year?		15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t income?	16		Х
	If "Yes," complete Form 4720, Schedule O.				
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac	tivities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
	If "Yes," complete Form 6069.				

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			X
Sec	tion A. Governing Body and Management			
000	tion 7th dovorning body and management		Yes	No
12	Enter the number of voting members of the governing body at the end of the tax year 1a 19		163	140
Ia	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	Enter the number of voting members included on line 1a, above, who are independent1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
2		2	х	
3	officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision			
Ü	of officers, directors, trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
74		7a	х	
b	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	74		
		7b		х
8	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7.5		
	The governing body?	8a	х	
b		8b		Х
9	Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	OD		
3	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	tion Divided (This cooling Dioqueste information about periode not required by the internal riorance code.)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	100	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
_	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
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		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed MA			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3	s only) avail	able
	for public inspection. Indicate how you made these available. Check all that apply.	,		
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d finai	ncial	
	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			
	RACHEL L. STRONACH - 508-990-0505			
	430 POTOMSKA ROAD, DARTMOUTH, MA 02748			

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

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

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

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

 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
- Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employees."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

Check this box if neither the organization r	(B)	J. gc	~. ··· <u>~</u> ·		C)			(D)	(E)	(F)
Name and title	Average			Pos	itior			Reportable	Reportable	Estimated
Name and the	hours per week	box	, unle	ss pe	rson	than is bot or/trus	h an	compensation	compensation from related	amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) RACHEL L. STRONACH	37.50	1								
EXECUTIVE DIRECTOR				Х				67,322.	0.	15,703.
(2) OTTO W. SCHLEINKOFER III, CPA	5.00	ļ								
CHAIR		Х		Х				0.	0.	0.
(3) SUZANNE W. PRESCOTT	5.00	ļ		l						
1ST VICE CHAIR		Х		Х				0.	0.	0.
(4) JONATHAN S. CARVALHO	5.00	ļ								
2ND VICE CHAIR		Х		Х				0.	0.	0.
(5) DANIELLE NIHILL, CPA	5.00	ļ								
TREASURER		Х		Х				0.	0.	0.
(6) DAPHNE F. SIEGAL	5.00	ļ								
CLERK		Х		Х				0.	0.	0.
(7) PETER BANGS, PH.D.	1.00								_	
DIRECTOR		Х						0.	0.	0.
(8) WHITT BARNARD	1.00	ļ								
DIRECTOR		Х						0.	0.	0.
(9) MICHAEL GAGNE	1.00	1							_	
DIRECTOR		Х						0.	0.	0.
(10) TIMOTHY G. HAYDOCK, MD.	1.00								_	
DIRECTOR		Х						0.	0.	0.
(11) KINNAIRD HOWLAND, ESQ.	1.00								_	
DIRECTOR		Х						0.	0.	0.
(12) SARA H. JOHNSTON	1.00	ļ								
DIRECTOR	1	Х						0.	0.	0.
(13) KATHRYN KAVANAGH, PH.D.	1.00	ļ								
DIRECTOR	1	Х						0.	0.	0.
(14) NICHOLAS KELLEY	1.00	ļ								
DIRECTOR	1	Х						0.	0.	0.
(15) EMAN KHWAJA	1.00	l								_
STUDENT DIRECTOR	1 1 1 1	Х						0.	0.	0.
(16) PETER M. NICHOLSON, ESQ.	1.00									_
DIRECTOR	1 1 1 1	Х						0.	0.	0.
(17) WINIFRED S. PHYFE	1.00									_
DIRECTOR	I	Х	l	I		1	l	0.	0.	0.

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(A) Name and title	(B) Average hours per	Average hours per Position (do not check more than one box, unless person is both an						(D) Reportable compensation	(E) Reportable compensation			(F) stimate nount	
	week (list any hours for related organizations below line)					Highest compensated employee	stee)	from the organization (W-2/1099-MISC/1099-NEC)	from related organizations (W-2/1099-MISC 1099-NEC)		com fr org	other pensarom th panizat d relat	ation le tion ted
(18) SUSAN ROGERS DIRECTOR	1.00	х						0.		0.			0.
(19) MICHAEL J. SWEETSER	1.00									Ť			
DIRECTOR		Х						0.		0.			0.
(20) NINA W. WEEKS	1.00	,,								ا ۸			^
DIRECTOR (21) NICOLE WHEPLEY	1.00	Х				-		0.		0.			0.
STUDENT DIRECTOR	1.00	x						0.		٥.			0.
(22) STEPHEN B. WITZIG, PH.D.	1.00					\vdash				"			
DIRECTOR		Х						0.		0.			0.
1b Subtotal	<u> </u>							67,322.		0.	1	5,7	03.
c Total from continuation sheets to Part V	II, Section A							0.		0.			0.
d Total (add lines 1b and 1c)								67,322.		0.	1	5,7	03.
2 Total number of individuals (including but n compensation from the organization	not limited to th	ose	liste	ed al	bov	e) w	ho r	eceived more than \$100	0,000 of reportable				0
compensation from the organization												Yes	No
3 Did the organization list any former officer, line 1a? <i>If</i> "Yes," <i>complete Schedule J for s</i>											3		Х
4 For any individual listed on line 1a, is the su										···	3		
and related organizations greater than \$15	•		-					·	-		4		Х
5 Did any person listed on line 1a receive or a													
rendered to the organization? If "Yes," com Section B. Independent Contractors	plete Schedul	e J f	or s	uch	pers	son					5		X
Complete this table for your five highest co	mpensated in	dene	ende	ent c	ont	racto	ors t	that received more than	\$100,000 of comp	ens	ation :	from	
the organization. Report compensation for	-	-							· · · · · · · · · · · · · · · · · · ·				
(A) Name and business	address	NI	INC	7				(B) Description of s	ervices	C	(Compe	C) nsatio	n
		140	2141					2000p		_			
Total number of independent contractors (i \$100,000 of compensation from the organi	•	ot li	mite	d to		se li 0	stec	d above) who received m	nore than				
												000 /	2022)

Part VIII Statement of Revenue

		Check if Schedule O conta	ains a response	or note to any lin	e 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
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions, gifts, grants similar amounts not included above the contributions included in lines Total. Add lines 1a-1f	1b 1c 1d ions) 1e ts, and ve 1f 1g \$	33,305. 34,857. 24,940. 256,179. 7,225.	349,281.			
				Business Code				
Service nue	2 a b c			611710	146,936.	146,936.		
Program Service Revenue	d e							
₫	f	All other program service reve			115.005			
\rightarrow	g	Total. Add lines 2a-2f			146,936.			
	3				19,096.			19,096.
	4 5	Income from investment of tax Royalties						
		0	(i) Real	(ii) Personal				
		Gross rents 6a Less: rental expenses 6b						
		Rental income or (loss) 6c						
		Net rental income or (loss)	1					
		Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory 7a		1,000.				
	b	Less: cost or other basis						
Jue		and sales expenses 7b		47,500.				
ě		Gain or (loss) 7c		-46,500.	46 500	16 500		
ř.		Net gain or (loss)			-46,500.	-46,500.		
Other Revenue		Gross income from fundraising evincluding \$ 34,8 contributions reported on line Part IV, line 18 Less: direct expenses	57 • of 1c). See 8a	6,492. 8,750.				
		Net income or (loss) from fund			-2,258.			-2,258.
	9 a	Gross income from gaming ac Part IV, line 19						
	b	Less: direct expenses	9b					
		Net income or (loss) from gam	· —					
		Gross sales of inventory, less and allowances	10a					
		Less: cost of goods sold						
_	<u> </u>	Net income or (loss) from sale	s of inventory	Business Code				
sno	11 a							
Miscellaneous Revenue	b							
eve	c							
Ais	d	All other revenue						
		Total. Add lines 11a-11d						
	12	Total revenue. See instructions			466,555.	100,436.	0.	16,838.

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 respons	se or note to any line in	this Part IX		X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations		ол, р олюос	долога: одрогово	сироново
•	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
•	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
·	trustees, and key employees	83,025.	64,759.	11,625.	6,641.
6	Compensation not included above to disqualified	55,525	0 = 7 : 00 :		.,
Ū	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	263,310.	185,120.	51,964.	26,226.
8	Pension plan accruals and contributions (include			0=,00=0	
J	section 401(k) and 403(b) employer contributions)	1,556.	1,209.	221.	126.
9	Other employee benefits	31,141.	24,206.	4,413.	2.522-
10	Payroll taxes	23,779.	18,548.	3,329.	2,522. 1,902.
11	Fees for services (nonemployees):	207777	20,0100	3,3230	
	Management				
b	Legal				
	Accounting	15,000.		15,000.	
d		20,0001		23,000	
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g g					
9	column (A), amount, list line 11g expenses on Sch 0.)	81,461.	41,500.	186.	39.775.
12	Advertising and promotion	460.	359.	64.	39,775. 37.
13	Office expenses	42,539.	24,369.	3,123.	15,047.
14	Information technology			7,220	
15	Royalties				
16	Occupancy	19,714.	15,377.	2,760.	1,577.
17	Travel	6,402.	6,301.	= 7 / 0 0 0	101.
18	Payments of travel or entertainment expenses	7,	7,00=		
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	18,670.	14,562.	2,614.	1,494.
23	Insurance	40,211.	29,215.	5,244.	5,752.
24	Other expenses. Itemize expenses not covered	,		,	•
	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	INTERN REIMBURSEMENTS	1,552.	1,552.		
b	OTHER	1,354.	1,090.	169.	95.
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	630,174.	428,167.	100,712.	101,295.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
00001	n 12-13-22		-		Form 990 (2022)

Form 990 (2022) Part X Balance Sheet

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or no	te to ar	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			73,643.	1	134,894.
	2	Savings and temporary cash investments			6,621.	2	7,088.
	3	Pledges and grants receivable, net			273,501.	3	50,000.
	4	Accounts receivable, net			4	10,842.	
	5	Loans and other receivables from any current of					
		trustee, key employee, creator or founder, subs	tantial	contributor, or 35%			
		controlled entity or family member of any of the	se pers	ons		5	
	6	Loans and other receivables from other disqual					
		under section 4958(f)(1)), and persons describe		6			
ţ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			9,079.	9	9,079.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	4,335,448.			
	b	Less: accumulated depreciation	10b	1,049,438.	3,291,468.	10c	3,286,010.
	11	Investments - publicly traded securities		817,071.	11	641,537.	
	12	Investments - other securities. See Part IV, line		12			
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equ	4,471,383.	16	4,139,450.		
	17	Accounts payable and accrued expenses		18,099.	17	31,442.	
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
ies	22	Loans and other payables to any current or form					
ij		trustee, key employee, creator or founder, subs					
Liabilities		controlled entity or family member of any of the				22	
_	23	Secured mortgages and notes payable to unrel				23	
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, pa	•				
		parties, and other liabilities not included on line	S 17-24). Complete Part X		25	
	06	of Schedule D		·····	18,099.	26	31,442.
	26	Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, che			10,000	20	31,442
es		and complete lines 27, 28, 32, and 33.	eck nei	e <u>21</u>			
auc	27				2,320,025.	27	2,338,084.
Bal	28	Net assets with donor restrictions			2,133,259.	28	1,769,924.
Pu		Organizations that do not follow FASB ASC 9				20	
F		and complete lines 29 through 33.	, cii	cox norc			
ō	29	Capital stock or trust principal, or current funds				29	
ets	30	Paid-in or capital surplus, or land, building, or ea				30	
Ass	31	Retained earnings, endowment, accumulated in				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			4,453,284.	32	4,108,008.
~	33	Total liabilities and net assets/fund balances			4,471,383.	33	4,139,450.
	1 00	Total nabilities and not assets/fully baidifies .			=,=:=,0000	- 55	

Form **990** (2022)

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		6,5	
2	Total expenses (must equal Part IX, column (A), line 25)	2		0,1	
3	Revenue less expenses. Subtract line 2 from line 1	3	-16		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	4,45		
5	Net unrealized gains (losses) on investments	5	-15	8,1	<u>56.</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-2	3,5	01.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	4,10	8,0	08.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	e O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat				
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

SCHEDULE A

(Form 990)

Total

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 for instructions and the latest information.

Open to Public

OMB No. 1545-0047

Name of the organization

Employer identification number

LLOYD CENTER FOR THE ENVIRONMENT, 04-3066693 TNC Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I 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).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 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). 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.) 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 X 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other ì your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

(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.)

Sec	ction A. Public Support						_
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						_
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						_
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						_
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						_
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3)	
	organization, check this box and stop	here					<u></u>
	ction C. Computation of Publ						
	Public support percentage for 2022 (14	<u>%</u>
	Public support percentage from 2021					15	<u>%</u>
16a	33 1/3% support test - 2022. If the o						
	stop here. The organization qualifies						
b	33 1/3% support test - 2021. If the d						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the fact				· ·	_	
	meets the facts-and-circumstances to	~		• • •			
b	10% -facts-and-circumstances tes						10% or
	more, and if the organization meets the				-		
46	organization meets the facts-and-circ		-	· ·			H
18	Private foundation. If the organization	n did not check a	pox on line 13, 16	a, 16b, 1/a, or 17	b, cneck this box a	and see instruction	sL

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

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

Se	ction A. Public Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total		
1	Gifts, grants, contributions, and						_		
	membership fees received. (Do not								
	include any "unusual grants.")	678,676.	894,579.	415,065.	753,301.	349,281.	3090902.		
2	Gross receipts from admissions,								
	merchandise sold or services per-								
	formed, or facilities furnished in								
	any activity that is related to the organization's tax-exempt purpose	118,516.	103,924.	49,412.	96,982.	146,936.	515,770.		
3	Gross receipts from activities that	-	-	-	-	-	-		
_	are not an unrelated trade or bus-								
	iness under section 513	44,838.					44,838.		
4	Tax revenues levied for the organ-	,					-		
·	ization's benefit and either paid to								
	or expended on its behalf								
5	The value of services or facilities								
J	furnished by a governmental unit to								
	the organization without charge								
6	Total. Add lines 1 through 5	842,030.	998 503.	464 477	850,283.	496 217.	3651510.		
	•	042,030.	330,303.	101,177	030,203.	450,217	30313101		
7 6	Amounts included on lines 1, 2, and 3 received from disqualified persons	93,932.	172,599.	115,870.	45,013.	30,363.	457,777.		
ŀ	Amounts included on lines 2 and 3 received	75,752.	112,333.	113,070.	43,013.	30,303.	431,1111		
•	from other than disqualified persons that								
	exceed the greater of \$5,000 or 1% of the	16,138.		1 750	7 752	37 16/	62 804		
	amount on line 13 for the year	110,070.	172,599.	1,750. 117,620.	7,752. 52,765.	67 527	62,804. 520,581.		
	Add lines 7a and 7b	110,070.	112,399.	117,020.	32,703.	01,521.	3130929.		
	Public support. (Subtract line 7c from line 6.)						3130949.		
	•••	() 2040	(1) 0040	() 0000	/ N 0004	() 0000	(O.T.)		
	endar year (or fiscal year beginning in)	(a) 2018 842, 030.	(b) 2019 998, 503.	(c) 2020 464, 477.	(d) 2021 850, 283.	(e) 2022 496, 217.	(f) Total 3651510.		
	Amounts from line 6	042,030.	990,303.	404,477.	030,203.	490,211.	2021210.		
IUa	dividends, payments received on								
	securities loans, rents, royalties,	17,296.	16,574.	17,932.	11,920.	19,096.	02 010		
	and income from similar sources	17,290.	10,374.	11,934.	11,940.	19,090.	82,818.		
t	Unrelated business taxable income								
	(less section 511 taxes) from businesses								
	acquired after June 30, 1975	17,296.	16 574	17 022	11 000	10 000	00 010		
	Add lines 10a and 10b	17,296.	16,574.	17,932.	11,920.	19,096.	82,818.		
11	Net income from unrelated business activities not included on line 10b,								
	whether or not the business is								
40	regularly carried on								
12	Other income. Do not include gain or loss from the sale of capital		000	C 0			0.00		
	assets (Explain in Part VI.)	050 206	800.	60.	060 000	F1F 212	860.		
	Total support. (Add lines 9, 10c, 11, and 12.)	859,326.	1015877.	482,469.	862,203.	515,313.	3735188.		
14	First 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third,	fourth, or fifth tax	year as a section 5	601(c)(3) organizat	ion,		
_							<u></u>		
	ction C. Computation of Publ						02 00		
15	15 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f)) 15 83 • 82						0.4.0.4		
	6 Public support percentage from 2021 Schedule A, Part III, line 15								
Se	ction D. Computation of Inves								
17	Investment income percentage for 20	22 (line 10c, colum	nn (f), divided by li	ne 13, column (f))		17	2.22 %		
18						18	1.89 %		
198	a 33 1/3% support tests - 2022. If the	organization did n	ot check the box	on line 14, and line	15 is more than 3	3 1/3%, and line 1			
	more than 33 1/3%, check this box a	nd stop here. The	organization qualit	fies as a publicly s	upported organiza	tion	X		
k	33 1/3% support tests - 2021. If the	organization did n	ot check a box on	line 14 or line 19a	, and line 16 is mo	re than 33 1/3%,	and		
	line 18 is not more than 33 1/3%, che	ck this box and st	op here. The orga	nization qualifies a	s a publicly suppo	rted organization			
20	line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization								

Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of 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

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

		Yes	No
	1		
	2		
	3a		
	3b		
	3c		
	30		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	3		
	9a		
	0.		
	9b		
	9с		
	10a		
	461		
ماريا	10b	~ 000	

Par	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	ction 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 office	ers,		
	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 suppor	rted		
	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		
Sec	ction 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		
Sec	ction 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 on 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			
200	supported organizations played in this regard.	3		
	etion 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 yeafsee instruc	tions).		
a	,			
b		(coo instructio	no)	
с 2	Activities Test. Answer lines 2a and 2b below.	,see mstructio	Yes	No
			162	NO
а	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
h	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,	24		
	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 position that its supported organization(s) would have organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.	2.0		
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
а	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

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

7

8

Schedule A (Form 990) 2022

Recoveries of prior-year distributions

instructions).

Minimum Asset Amount (add line 7 to line 6)

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)									
Sect	Section D - Distributions Current Year								
1	Amounts paid to supported organizations to accomplish exe	1							
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported							
	organizations, in excess of income from activity			2					
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	ns	3					
4	Amounts paid to acquire exempt-use assets			4					
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5					
6	Other distributions (describe in Part VI). See instructions.			6					
7	Total annual distributions. Add lines 1 through 6.			7					
8	Distributions to attentive supported organizations to which the	he organization is responsive	Э						
	(provide details in Part VI). See instructions.			8					
9	Distributable amount for 2022 from Section C, line 6			9					
10	Line 8 amount divided by line 9 amount			10					
Sect	ection E - Distribution Allocations (see instructions) (i) Excess Distributions Underdistribution Pre-2022				(iii) Distributable Amount for 2022				
1	Distributable amount for 2022 from Section C, line 6								
2	Underdistributions, if any, for years prior to 2022 (reason-								
	able cause required - explain in Part VI). See instructions.								
3	Excess distributions carryover, if any, to 2022								
а	From 2017								
b	From 2018								
С	From 2019								
d	From 2020								
е	From 2021								
f	Total of lines 3a through 3e								
g	Applied to underdistributions of prior years								
h	Applied to 2022 distributable amount								
i	Carryover from 2017 not applied (see instructions)								
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.								
4	Distributions for 2022 from Section D,								
	line 7: \$								
а	Applied to underdistributions of prior years								
b	Applied to 2022 distributable amount								
С	Remainder. Subtract lines 4a and 4b from line 4.								
5	Remaining underdistributions for years prior to 2022, if								
	any. Subtract lines 3g and 4a from line 2. For result greater								
	than zero, explain in Part VI. See instructions.								

Schedule A (Form 990) 2022

6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, *explain in*

7 Excess distributions carryover to 2023. Add lines 3j

Part VI. See instructions.

and 4c.

8 Breakdown of line 7:

a Excess from 2018

b Excess from 2019

c Excess from 2020

d Excess from 2021

e Excess from 2022

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047 Open to Public

Inspection

Employer identification number

Name of the organization

LLOYD CENTER FOR THE ENVIRONMENT, 04-3066693 INC.

Par	TI Organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, lin		ds or Accounts. Complete if the
	, ,	(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 v	writing that the assets held in donor ac	lvised funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can	be used only
	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other purpo	se conferring
	impermissible private benefit?		
Par	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 99	0, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (for example, recrea	· —	of a historically important land area
	Protection of natural habitat	Preservation	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the fo	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a		
	historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by	the organization during the tax
	year		
4	Number of states where property subject to conservation eas	sement is located	_
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, $ \\$	handling of violations, and enforcing c	onservation easements during the year
7	Annual of our cases in a small in annual action in annual in a		
7	Amount of expenses incurred in monitoring, inspecting, hand	illing of violations, and emorcing conse	rvation easements during the year
8	Does each conservation easement reported on line 2(d) above	re satisfy the requirements of section 1	70(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation		
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial state	ements that describes the
	organization's accounting for conservation easements.		
Par	t III Organizations Maintaining Collections of	-	Other Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under FASB ASC 95	•	
	of art, historical treasures, or other similar assets held for pub		
	service, provide in Part XIII the text of the footnote to its finar		
b	If the organization elected, as permitted under FASB ASC 95		
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in for	urtherance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		\$
2	If the organization received or held works of art, historical treatments	asures, or other similar assets for finan	cial gain, provide
	the following amounts required to be reported under FASB A	_	
а	Revenue included on Form 990, Part VIII, line 1		\$
b	Assets included in Form 990, Part X		\$

		ENTER FOR					06669		age 2
Pai	t III Organizations Maintaining C		-	-			•	nued)	
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that make	e significa	ant use of i	ts		
	collection items (check all that apply):								
а	X Public exhibition	d		hange program					
b	Scholarly research	е	Other						
С	X Preservation for future generations								
4	Provide a description of the organization's co						art XIII.		
5	During the year, did the organization solicit of		•	•			_	77	٦
D	to be sold to raise funds rather than to be m						Yes		No
Par	reported an amount on Form 990, Pa		ete if the organizatio	n answered "Yes"	on Form !	990, Part I\	/, line 9, o	r	
1a	Is the organization an agent, trustee, custod	ian or other intermed	liary for contribution	s or other assets n	ot includ	ed _			
	on Form 990, Part X?					L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing table:						
							Amoun	t	
С	Beginning balance				10	:			
d	Additions during the year				10	t			
е	Distributions during the year				16	•			
f	Ending balance				1	f			_
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for escrow or co	ustodial account lia	bility?	L	Yes		_ No
_	If "Yes," explain the arrangement in Part XIII.								
Par	t V Endowment Funds. Complete i								la a a la
		(a) Current year	(b) Prior year	(c) Two years back					
	Beginning of year balance	817,071.	749,551.	766,569		734,198			846.
	Contributions	13,000.	8,000.	8,000		13,000			000.
	Net investment earnings, gains, and losses	-140,519.	113,245.	109,482	·	151,971	• •	-27	048.
	Grants or scholarships								
е	Other expenditures for facilities								
	and programs	35,015.	53,725.	134,500	·	132,600	<u>'- </u>	32	600.
f	Administrative expenses	654 525	04.5.054	F.10 F.51				= 2.4	
g	End of year balance	654,537.	817,071.	· · · · · · · · · · · · · · · · · · ·	•	766,569	<u>'• </u>	734	198.
2	Provide the estimated percentage of the cur			a)) held as:					
	Board designated or quasi-endowment	12.3000	_%						
	Permanent endowment 80.9000 Term endowment 6.8000	%							
С									
2-	The percentages on lines 2a, 2b, and 2c sho				41				
3a	Are there endowment funds not in the posse	ession of the organiza	ation that are neid a	na aaministerea to	rtne			Yes	No
	organization by:						3a(i)	100	X
	(i) Unrelated organizations								X
h	(ii) Related organizations								
4	Describe in Part XIII the intended uses of the						30		
	t VI Land, Buildings, and Equipm		willent lunus.						
	Complete if the organization answere). Part IV. line 11a. S	See Form 990. Part	X. line 10).			
	Description of property	(a) Cost or of	` '	1	Accumu		(d) Boo	k valu	 e
	Becomplian or property	basis (investm	, ,	' '	depreciati		(u) 500	it valu	
	Land	-		0,000.	,		1,51	0.0	00.
	Buildings			6,427.	824,	868.		$\frac{3,5}{1,5}$	
	Leasehold improvements		-,	•				, -	
	Equipment		17	7,894.	171,	508.		6,3	86.
	Other			1,127.		062.	1,56		
	. Add lines 1a through 1e. (Column (d) must e						3,28		

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022 LLOYD CENTE	R FOR THE EN	VIRONMENT,	INC.	04-3066693 Page 3
Part VII Investments - Other Securities.				_
Complete if the organization answered "Yes" (a) Description of security or category (including name of security)	(b) Book value			st or end-of-year market value
	(b) Book value	(C) Method of	valuation. Co.	St of end-of-year market value
(1) Financial derivatives				
(2) Closely held equity interests				
(3) Other				
(A) (D)				
(B) (C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes"	on Form 990, Part IV, lin	e 11c. See Form 990	, Part X, line 1	13.
(a) Description of investment	(b) Book value			st or end-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets.				
Complete if the organization answered "Yes"		e 11d. See Form 990), Part X, line 1	
	Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9) Total. (Column (b) must equal Form 990, Part X, col. (B) lin				
Part X Other Liabilities.	<u>e 13.)</u>			
Complete if the organization answered "Yes"	on Form 990 Part IV lin	e 11e or 11f See Fo	rm 990 Part X	(line 25
(1) 5		C 11C 01 111. OCC 1 0	1111 330, 1 411 7	(b) Book value
(a) Description of liability (1) Federal income taxes				(5) 2550 7400
(2)				
(3)				
(4)				
(5)				
(6)				
\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-				

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

(8) (9)

HAVE BEEN ASSIGNED TO THEM.

Schedule D (Form 990) 2022 LLOYD CENTER FOR THE ENVIRONMENT, INC. 04-3066693 Page 5 Part XIII Supplemental Information (continued)
PART III, LINE 4:
THE CENTER MAINTAINS BOTH LIVING AND NON-LIVING COLLECTIONS THAT DIRECTLY
RELATE TO OR ARE USED IN ITS RESEARCH, OUTREACH AND EDUCATIONAL PROGRAMS.
THE COLLECTIONS REMAIN ON DISPLAY FOR VISITORS.
PART V, LINE 4:
THE PERMANENT ENDOWMENT FUNDS ARE USED FOR INCOME PRODUCING PURPOSES.
PURSUANT TO THE EXPRESSED WISHES OF THE DONORS OF SUCH FUNDS, INCOME FROM
THEM IS USED TO SUPPORT THE PROVISION OF EDUCATION PROGRAM SERVICES AND
FOR THE MAINTENANCE OF THE CENTERS' NATURE PRESERVE AND FACILITIES IN
SUPPORT OF ALL PROGRAM SERVICES.

SCHEDULE G (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Employer identification number

Troad G	ENTER FOR THE ENVI	RON.	MEN	T, INC.	04-3066	693			
Part I Fundraising Activities. required to complete this par	Complete if the organization answe	ered "\	es" o	n Form 990, Part IV,	line 17. Form 990-E2	Z filers are not			
Indicate whether the organization rais a	e Solicita f Solicita g Special or oral agreement with any individual art VII) or entity in connection with p	tion of tion of fundra I (inclu profess	non-g gover aising ding o	overnment grants nment grants events fficers, directors, tru fundraising services?	stees, or Yes				
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	or cor	Did raiser custody ntrol of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization			
		Yes	No						
Total									
List all states in which the organization or licensing.	n is registered or licensed to solicit	contrib	oution	s or has been notified	d it is exempt from re	egistration			

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 **(b)** Event #2 (c) Other events (d) Total events NONE (add col. (a) through CLAMBAKEcol. (c)) (event type) (event type) (total number) Revenue 41,349. 41,349 1 Gross receipts 34,857. 34,857. 2 Less: Contributions 6,492. 6,492. 3 Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs 5,001. 5,001. 7 Food and beverages 8 Entertainment 3,749. 9 Other direct expenses 3,749. 10 Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary. Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes Yes % Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) **9** Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? No **b** If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? _____ Yes ____ No **b** If "Yes," explain:

Sch	edule G (Form 990) 2022 LLOYD CENTER FOR THE ENVIRONMENT, INC. 04-3	066693	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	No No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	☐ No
13	Indicate the percentage of gaming activity conducted in:		
	The organization's facility	13a	%
	An outside facility	13b	
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	130	70
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	News		
	Name		
	Address		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	· L Yes	└── No
b	olf "Yes," enter the amount of gaming revenue received by the organization \$ and the amount		
	of gaming revenue retained by the third party \$		
c	: If "Yes," enter name and address of the third party:		
	Name		
	Address		
	- Addices		
16	Gaming manager information:		
10	daming manager information.		
	Name		
	Name		
	Gaming manager compensation \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Yes	☐ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
	organization's own exempt activities during the tax year \$		
Pa	irt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III is a column of the	rt III. lines 9	. 9b. 10b.
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	, ,	,,,
	100, 100, 10, and 110, an approximation floor provided any administration of the medical control of the medical co		

Schedule G	i (Form 990)	LLOYD	CENTER	FOR	THE	ENVIRONMENT,	INC.	04-3066693	Page 4
Part IV	(Form 990) Supplemental Info	rmation (co	ontinued)						. ago r
			,						

SCHEDULE O (Form 990)

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

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 Form 990-EZ.

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

OMB No. 1545-0047
2022
Open to Public Inspection

Name of the organization

LLOYD CENTER FOR THE ENVIRONMENT, INC.

Employer identification number 04-3066693

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

NATURAL DIVERSITY LARGELY IN, BUT NOT RESTRICTED TO, THE COASTAL

ENVIRONMENTS OF SOUTHEASTERN NEW ENGLAND.

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

COUNTY. OTHER AVIAN SURVEYS, WATER QUALITY ORIENTED EFFORTS, SALT MARSH

SURVEYS, VERNAL POOL CERTIFICATIONS, AND DIAMONDBACK TERRAPIN

MONITORING AND PROTECTION, ARE OTHER MULTI-YEAR HISTORICAL RESEARCH

EFFORTS.

NEWER VENTURES INCLUDE THE "BIODIVERSITY INITIATIVE", AN EFFORT TO

DOCUMENT ALL TAXA WITHIN SLOCUM AND WESTPORT RIVER WATERSHEDS AT

SAMPLING LOCATIONS MONITORED LONG-TERM TO ASSESS LANDSCAPE RESPONSES TO

CLIMATE CHANGE, AND "MASS MOTHS", A PROJECT AIMED AT IDENTIFYING AND

MAPPING THE PAST AND CURRENT DISTRIBUTION 2,800+ SPECIES OF MOTHS IN

MASSACHUSETTS.

RECENT PROJECTS:

IN 2022, MOTH WORK THROUGH A FEDERAL CONTRACT FOCUSING ON SITES UNDER
RESTORATION IN NEW YORK, RHODE ISLAND, AND ON NANTUCKET ISLAND
CONTINUED. IDENTIFICATION OF MOTHS COLLECTED BY THE MARTHA'S VINEYARD
LAND BANK COMMISSION, AND FROM CAMP EDWARDS, ALSO TOOK PLACE, ALONG
WITH CONTINUED SAMPLING WORK ON MASS MOTHS. A NEW CONTRACT OCCURRED
WITH THE FRIENDS OF HERRING RIVER IN COOPERATION WITH THE NATIONAL PARK
SERVICE, FOR THE HERRING RIVER RESTORATION PROJECT. THIS WAS A REPEAT
OF WORK CONDUCTED IN 2005 AND 2015, INVOLVING MAPPING DECODON HABITAT

Name of the organization

LLOYD CENTER FOR THE ENVIRONMENT, INC.

Employer identification number 04-3066693

USED BY THE ENDANGERED "WATER-WILLOW BORER" MOTH, AND DOCUMENTING RECORDS OF LARVAE.

CONTRACTED PIPING PLOVER WORK CONTINUED AT WEST ISLAND WITH THE TOWN OF

FAIRHAVEN, AND AT BAKER'S BEACH IN WESTPORT, MARKING THE 5TH

CONSECUTIVE YEAR FOR CONTRACTS AT THESE SITES. NEW IN 2022 WAS A

CONTRACT WITH THE CITY OF NEW BEDFORD FOR WORK AT "EAST BEACH". THIS

WAS THE 36TH YEAR OF MONITORING AND PROTECTION OF PIPING PLOVERS IN

BRISTOL COUNTY.

OTHER VOLUNTEER-BASED MONITORING PROJECTS THAT CONTINUED IN 2022

INCLUDED THE 12TH YEAR OF BIRD FEEDER SURVEYS AS PART OF DATA

COLLECTION FOR THE BIODIVERSITY INITIATIVE (INCLUDING CORNELL

FEEDERWATCH PROGRAM), OSPREY MONITORING, BEACH BIRD MORTALITY SURVEYS

FOR THE SEABIRD ECOLOGICAL ASSESSMENT NETWORK (SEANET), AND WATER

TESTING IN SLOCUM AND LITTLE RIVERS FOR THE COALITION FOR BUZZARDS BAY

BAYWATCHERS PROGRAM. THE ANNUAL WINTER WATERFOWL COUNT WATERFOWL SURVEY

OCCURRED FOR THE 36TH SEASON, ADDING TO A DECADES LONG DATA SET.

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

CLIMATE SCIENCE LEARNING PROJECT, HAVE PROVEN TO BE ESPECIALLY

EFFECTIVE. ALL EDUCATION PROGRAMS ARE DESIGNED TO MEET THE

MASSACHUSETTS CURRICULUM FRAMEWORKS IN SCIENCE AND

TECHNOLOGY/ENGINEERING AND IN HISTORY/SOCIAL STUDIES.

FOR CHILDREN AGES 6-12, THE CENTER'S EDUCATION DEPARTMENT ANNUALLY

PROVIDES UP TO 15 DISTINCT SUMMER PROGRAMS DESIGNED TO HELP STUDENTS

DEVELOP A BETTER UNDERSTANDING OF SCIENCE AND A DEEPER APPRECIATION FOR

Name of the organization

LLOYD CENTER FOR THE ENVIRONMENT, INC.

Employer identification number 04-306693

THE NEED TO PROTECT THE FRAGILE NATURE OF OUR COAST. EVERY YEAR, AS

MANY AS 13,000 STUDENTS BENEFIT FROM THE PARTICIPATION IN LLOYD CENTER

EDUCATION PROGRAMS.

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

AND SEMINARS, CONTINUES TO DRAW A GROWING NUMBER OF CITIZENS OF ALL

AGES TO OUR VISITOR CENTER. IN ADDITION, OUTREACH COLLABORATION WITH

PARTNERING ORGANIZATIONS CONTINUES TO PROVE EXCEPTIONALLY EFFECTIVE IN

PROMOTING LIFESTYLE CHANGES AIMED AT A MORE SUSTAINABLE USE OF NATURAL

RESOURCES. THE CENTER'S UNIQUE WEBSITE PROVIDES A VAST AMOUNT OF

ENVIRONMENTAL RESEARCH AND EDUCATION INFORMATION FOR THOSE WHO SEEK IT

ELECTRONICALLY.

FORM 990, PART VI, SECTION A, LINE 2:

DIRECTORS WHITT BARNARD AND SUSAN ROGERS ARE MARRIED.

FORM 990, PART VI, SECTION A, LINE 6:

THERE SHALL BE ONLY ONE CLASS OF MEMBERS OF THE CENTER AND ALL MEMBERS

SHALL HAVE THE SAME RIGHTS WITHIN THE CENTER, EXCEPT THAT THE RIGHT TO VOTE

SHALL NOT ACCRUE TO CHILDREN OR GRANDCHILDREN INCLUDED IN "FAMILY"

MEMBERSHIPS. FOR "INDIVIDUAL" MEMBERSHIPS, ALL THE PRIVILEGES OF

MEMBERSHIP, INCLUDING THE RIGHT TO VOTE, SHALL ACCRUE TO ONE NAMED ADULT.

FOR "FAMILY" MEMBERSHIPS, ALL THE PRIVILEGES OF MEMBERSHIP SHALL ACCRUE A

MAXIMUM OF TWO NAMES ADULTS RESIDING IN THE SAME HOUSEHOLD AND, EXCEPT FOR

THE RIGHT TO VOTE, TO THEIR CHILDREN OR GRANDCHILDREN UNDER THE AGE OF 18.

THE ANNUAL MEETING OF THE MEMBERS OF THE CENTER SHALL INCLUDE THE ELECTION

OF DIRECTORS AND ACTION ON ANY PROPERLY PROPOSED AMENDMENT OR ALTERATION OF

THE BY-LAWS. SPECIAL MEETINGS OF THE MEMBERS OF THE CENTER MAY BE CALLED AT

Name of the organization

LLOYD CENTER FOR THE ENVIRONMENT, INC.

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THE WRITTEN REQUEST (BEARING THE SIGNATURES) OF TWENTY-FIVE MEMBERS IN

ACCORDANCE WITH APPLICABLE PROVISIONS OF LAW. AT ALL MEETINGS OF THE

MEMBERS OF THE CENTER, EACH MEMBER OVER THE AGE OF 18 SHALL BE ENTITLED TO

ONE VOTE.

THE BOARD SHALL CONSIST OF THE CHAIR OF THE BOARD, EX-OFFICIO, THE VICE

CHAIR, EX-OFFICIO, THE CLERK, EX-OFFICIO, AND THE TREASURER, EX-OFFICIO,

AND NOT MORE THAN TWENTY-ONE OTHER DIRECTORS ELECTED BY THE MEMBERS OF THE

CENTER AT THE ANNUAL MEETING.

THE BY-LAWS MAY AT ANY TIME BE AMENDED OR REPEALED, IN WHOLE OR IN PART, AT ANY ANNUAL OR SPECIAL MEETING OF THE MEMBERS OF THE CENTER BY A VOTE OF TWO-THIRDS OF THOSE ADULT MEMBERS PRESENT. A MAJORITY OF THE DIRECTORS IN OFFICE MAY ALSO AMEND OR REPEAL BY-LAWS, PROVIDED THAT NO AMENDMENT OR REPEAL MAY BE MADE BY THE DIRECTORS WHICH CHANGES THE DATE OF THE ANNUAL MEETING OF THE MEMBERS OF THE CENTER, OR WHICH ALTERS THE PROVISIONS OF THE BY-LAWS WITH RESPECT TO REMOVAL OF DIRECTORS, INDEMNIFICATION OF DIRECTORS AND OFFICERS, OR AMENDMENT OF THE BY-LAWS, OR WHICH REQUIRES ACTION BY THE MEMBERS OF THE CENTER. ANY BY-LAW ADOPTED BY THE DIRECTORS MAY BE AMENDED OR REPEALED BY THE MEMBERS OF THE CENTER.

FORM 990, PART VI, SECTION A, LINE 7A:

SEE RESPONSE TO QUESTION #6.

FORM 990, PART VI, SECTION A, LINE 8B:

THERE ARE NO COMMITTEES WITH THE AUTHORITY TO ACT ON BEHALF OF THE BOARD OF DIRECTORS.

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

THE GOVERNING BODY OR BOARD OF DIRECTORS RECEIVES AN ELECTRONIC COPY OF THE

Name of the organization

LLOYD CENTER FOR THE ENVIRONMENT, INC.

| Employer identification number 04-3066693

CENTER'S FORM 990 FOR REVIEW AND APPROVAL BEFORE FILING.

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

ANY POTENTIAL CONFLICT IS BROUGHT TO THE ATTENTION OF THE BOARD OF

DIRECTORS BY THE EXECUTIVE DIRECTOR AND IT IS DISCUSSED AT LENGTH AND

RESOLVED/APPROVED, ACCORDINGLY.

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

THE SALARY OF THE EXECUTIVE DIRECTOR IS DISCUSSED BETWEEN THE TREASURER AND THE CHAIR OF THE BOARD AND THEN APPROVED BY THE FINANCE COMMITTEE.

SUBSEQUENTLY, THE COMPENSATION IS INCLUDED IN THE CENTER'S BUDGET AND THE ENTIRE BOARD OF DIRECTORS APPROVES THE BUDGET, ANNUALLY. THE EXECUTIVE DIRECTOR'S SALARY REVIEW WAS MOST RECENTLY PERFORMED IN JUNE 2022 AND JANUARY 2023.

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

GOVERNING DOCUMENTS ARE AVAILABLE ONLINE VIA THE SECRETARY FOR THE

COMMONWEALTH OF MASSACUSETTS, OR UPON REQUEST. THE CONFLICT OF INTEREST

POLICY IS AVAILABLE UPON REQUEST. FINANCIAL STATEMENTS ARE AVAILABLE

THROUGH THE COMMONWEALTH OF MASSACHUSETTS DIVISION OF PUBLIC CHARITIES, OR

UPON REQUEST.

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

OTHER "OUTSIDE" SERVICES:

PROGRAM SERVICE EXPENSES 41,500.

MANAGEMENT AND GENERAL EXPENSES 186.

FUNDRAISING EXPENSES 39,775.

TOTAL EXPENSES 81,461.

Schedule O (Form 990) 2022 Page 2 Name of the organization **Employer identification number** LLOYD CENTER FOR THE ENVIRONMENT, INC. 04-3066693 TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A 81,461. FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: WRITE-OFF OF CONTRIBUTIONS RECEIVABLE -23,501.