Form **990**

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

Department of the Treas	ury
Internal Revenue Service	, ,

A F	or the	2020 calendar year, or tax year beginning AUG 1, 2020 and er	nding J	UL 31, 2021	
	heck if oplicable	C Name of organization		D Employer identified	cation number
	Addres	CONSERVATION LAW FOUNDATION, INC.			
	Name change	Doing business as		04-61499	86
	Initial return Final return/	Number and street (or P.O. box if mail is not delivered to street address) 62 SUMMER STREET	oom/suite	E Telephone number (617) 350	
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	23,788,117.
	Amend return	BOSION, MA 02110		H(a) Is this a group re	
	Application pending	F Name and address of principal officer: BRADLET CAMPBELL		for subordinates	? Yes X No
		SAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No
		mpt status: X 501(c)(3)	527	1	list. See instructions
		e: ► WWW.CLF.ORG	T	H(c) Group exemption	
		organization: X Corporation	L Year (of formation: 1966 N	1 State of legal domicile; MA
е		Briefly describe the organization's mission or most significant activities: CONSEI	RVATI	ON OF NATURA	AL .
Governance	-	RESOURCES			
ern		Check this box if the organization discontinued its operations or disposed		1 1	
Š				3	23 22
8		Number of independent voting members of the governing body (Part VI, line 1b)			113
Activities &		Fotal number of individuals employed in calendar year 2020 (Part V, line 2a)			90
tivi		Fotal number of volunteers (estimate if necessary) Fotal unrelated business revenue from Part VIII, column (C), line 12			0.
Ac		Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
		ver amounted business taxable mount of most of the tri, into 11		Prior Year	Current Year
•	8 (Contributions and grants (Part VIII, line 1h)		12,048,854.	21,601,574.
nue		Program service revenue (Part VIII, line 2g)		836,643.	1,040,300.
Revenue		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		798,493.	449,207.
Ä		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		138,596.	207,388.
		Fotal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		13,822,586.	23,298,469.
	13 (Grants and similar amounts paid (Part IX, column (A), lines 1-3)		236,765.	109,000.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
Se		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		8,760,123.	9,780,725.
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
жbе		Fotal fundraising expenses (Part IX, column (D), line 25) 1,476,176		6 540 010	6 111 000
ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		6,549,019.	6,111,980.
		Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		15,545,907.	16,001,705.
s		Revenue less expenses. Subtract line 18 from line 12		-1,723,321.	7,296,764.
Net Assets or Fund Balances	an -	Fotal assets (Part X, line 16)		ginning of Current Year 30,545,208.	End of Year 40,803,982.
Asse Bala	20 ⁻ 21 ⁻	Fotal liabilities (Part X, line 16)		7,519,567.	7,407,915.
Vet /	22	Net assets or fund balances. Subtract line 21 from line 20		23,025,641.	33,396,067.
Pa	rt II	Signature Block		23,023,0120	33733070071
		ties of perjury, I declare that I have examined this return, including accompanying schedules at	nd stateme	nts, and to the best of my	knowledge and belief, it is
true,	correct	, and complete. Declaration of preparer (other than officer) is based on all information of whicl	h preparer	has any knowledge.	
		\			
Sigr	ا ۱	Signature of officer		Date	
Her	е	BRADLEY CAMPBELL, PRESIDENT			
		Type or print name and title	Ir)oto la	DTIN
].	Print/Type preparer's name Preparer's signature		Date Check Check	PTIN
Paid		AMYN GILLANI AMYN GILLANI	ĮŪ	6/10/22 self-employe	
	arer	Firm's name CITRIN COOPERMAN ADVISORS LLC	0.0	Firm's EIN	87-2525370
Use	UIIIY	Firm's address 30 BRAINTREE HL OFFICE PARK STE 3 BRAINTREE, MA 02184	000	Dhana na 7Q	1-356-2000
N/a	the ID	·		I Priorie no. 7 O	77
ıvıay	ine iH	S discuss this return with the preparer shown above? See instructions			X Yes No

Pa	Till Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	CONSERVATION LAW FOUNDATION FORGES LASTING SOLUTIONS TO ENVIRON	
	CHALLENGES FOR THE PEOPLE OF NEW ENGLAND. FOR 50 YEARS, CLF HAS	
	ON POWERFUL OPPONENTS WHO WOULD POLLUTE OUR AIR AND WATER AND S	QUANDER
	OUR RESOURCESCONTINUED ON SCHEDULE O	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total ex	· ·
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 2 , 548 , 484 • including grants of \$) (Revenue \$	131,389.)
	HEALTHY & RESILIENT COMMUNITIES	
	CLF PARTNERS WITH COMMUNITY ORGANIZATIONS, PUBLIC AGENCIES,	
	PHILANTHROPY, AND PRIVATE INVESTORS TO BETTER UNDERSTAND ENVIRO	NMENTAL
	CHALLENGES AND CREATE NEW SOLUTIONS. WE BELIEVE THE PEOPLE MOST	INITIALITIE
	IMPACTED BY A PROBLEM UNDERSTAND BEST HOW TO SOLVE IT. WE COMBI	NT
	PEOPLE POWER WITH THE POWER OF BIG DATA TO UNDERSTAND HOW THE	ME
	ENVIRONMENT IS IMPACTING PEOPLE AND WHAT WE CAN DO, TOGETHER, TO	
	IMPROVE IT. WE'RE PUTTING RESEARCH INTO ACTION THROUGH INNOVATION THRO	
	INVESTMENTS THAT CREATE JOBS, PROTECT NATURAL RESOURCES, PROMOT	
	ENERGY, AND CREATE HEALTHY NEIGHBORHOODS. WE'RE DEVELOPING NEW	
	FOR SCREENING INVESTMENTS, MEASURING PROGRESS, AND MONITORING O	
	FOR ECONOMIC, ENVIRONMENTAL, AND COMMUNITY HEALTH AND WELLBEING	
4b	(Code:) (Expenses \$1, 466, 815	482,000.)
	CLEAN AIR AND WATER	
	CLEAN AIR AND WATER ARE FUNDAMENTAL HUMAN RIGHTS. BUT TOO MANY	
	DO NOT HAVE ACCESS TO THESE RIGHTS TODAY. CLF IS WORKING TO HOLD	
	POLLUTERS ACCOUNTABLE TO THE CLEAN WATER AND CLEAN AIR ACTS, FIG.	GHTING
	FOR PROTECTIONS AND CREATIVE SOLUTIONS TO KEEP WATER POLLUTION	FROM
	WREAKING HAVOC ON OUR COMMUNITIES, AND PUSHING FOR MORE STRINGE	NT
	DRINKING WATER STANDARDS TO PROTECT OUR FAMILIES FROM TOXIC CHE	MICALS
	AND LEAD POISONING.	
4c	(Code:) (Expenses \$1, 387, 402. including grants of \$) (Revenue \$	1,920.)
	ENVIRONMENTAL JUSTICE	· · · · · · · · · · · · · · · · · · ·
	THE HEALTHY COMMUNITIES AND ENVIRONMENTAL JUSTICE PROGRAM WORKS	ΤО
	ELIMINATE GREENHOUSE GAS EMISSIONS AND AIR POLLUTION, OVERCOME	
	DISINVESTMENT AND STRUCTURAL INEQUALITY, IMPROVE PUBLIC HEALTH	
	SOCIAL MOBILITY, AND REDUCE WASTE STREAM TO ZERO, AS CLF ADVOCA	
	A ROBUST SUSTAINABLE FOOD ECONOMY AND ACCESSIBLE, RELIABLE, AFF	
	TRANSPORTATION OPTIONS.	OKDADHE
	ILVUIDI OLITOIA OLITOIAD.	
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ 7,250,197. including grants of \$ 154,625.) (Revenue \$ 523,710	•)
4e	Total program service expenses ► 12,652,898.	
		Form 990 (2020)

Form 990 (2020) CONSERVATION LAW FOUNDATION, INC. Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		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,	۰		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	- '-		1
8	, ,			x
•	Schedule D, Part III	8		
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?			3,7
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
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	X	
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	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<u> </u>		
	Schedule D, Parts XI and XII	12a		x
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	I Lu		
D	, .	12b	х	
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	-2	Х
	Did the appropriation projection of the control of the United Otelson			X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		 ^
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	4 41:		x
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
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	l		
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			3,7
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> X</u>
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		X
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
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	X	

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Pa	rt IV Checklist of Required Schedules (continued)		Vaa	N _a
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	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		X
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		X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			 ₩
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
D	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	OEL		x
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	25b		1
20	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,	1		
	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 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
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			l
	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			 ₩
00	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			x
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	34	Х	
35 a	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	000		
~	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
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		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
_	Note: All Form 990 filers are required to complete Schedule O	38	X	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>	 T	
٠.	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 1a	_		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			

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Form **990** (2020)

(gambling) winnings to prize winners?

Form 990 (2020) CONSERVATION LAW FOUNDATION, INC. Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			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 113			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			37
_	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	ا ا		
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			v
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7.		Х
a	to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year 7d	7с		Α
		7e		х
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	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?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
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			
	Enter the amount of reserves on hand			37
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			₩.
	excess parachute payment(s) during the year?	15		X
40	If "Yes," see instructions and file Form 4720, Schedule N.	40		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		^
	If "Yes," complete Form 4720, Schedule O.		990	(0000)

Form 990 (2020) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI

Sec	tion A. Governing Body and Management										
				Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax year	23									
	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	, , ,										
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other										
	officer, director, trustee, or key employee?										
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision										
	of officers, directors, trustees, or key employees to a management company or other person?		3		X						
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	37	Х						
6	Did the organization have members or stockholders?		6	X							
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or		_	v							
	more members of the governing body?		7a	_X_							
b					 ₩						
_	persons other than the governing body?		7b		X						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		0-	v							
a	The governing body?		8a	X							
b	Each committee with authority to act on behalf of the governing body?		8b	Λ							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the		9		x						
Sec	organization's mailing address? If "Yes." provide the names and addresses on Schedule O		9		21						
000	(This Section B requests information about policies not required by the Internal Revenue Code.)			Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?		10a	X	140						
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,		104								
D	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b	х							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the		11a	X							
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		110								
12a			12a	Х							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		12b	X							
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe										
•	in Schedule O how this was done		12c	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							
b	Other officers or key employees of the organization		15b		Х						
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).										
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a										
	taxable entity during the year?		16a		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, ME, NH, NY, RI, VT										
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)	availa	ble						
	for public inspection. Indicate how you made these available. Check all that apply.										
	X Own website Another's website Upon request Other (explain on Schedule O)										
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest p	olicy, and	financ	cial							
	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	▶									
	EILEEN MARKS, CFO - (617)350-0990										
	62 SUMMER STREET, BOSTON, MA 02110										

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 instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

See instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per	(do box,	Position (do not check more than one box, unless person is both an officer and a director/trustee)				ne an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) BRADLEY CAMPBELL	40.00	.,		37				272 466	0	20 410
PRESIDENT (2) MARGARET CHURCH	1.00	Х		Х				272,466.	0.	29,410.
	40.00					v		200 600	0	0 026
VP FOR MARKET INNOVATION A (3) KATHERINE GROVE	40.00					Х		209,600.	0.	9,036.
VP DEVELOPMENT	40.00					х		186,033.	0.	8,310.
(4) CHRISOPHER DEMPSEY	40.00							100,033.	0.	0,310.
T4MA DIRECTOR	40.00					Х		177,671.	0.	14,403.
(5) PETER SHELLEY	40.00					- 22		177,071.		11,103.
ADVOCACY DIRECTOR	40.00					х		163,759.	0.	26,421.
(6) SEAN MAHONEY	40.00							103/1331		20,1210
EVP + DIRECTOR-CLF MAINE	1000	•				х		161,700.	0.	26,923.
(7) DAVID W. ELLIS	1.00									
VICE CHAIR		Х		Х				0.	0.	0.
(8) ANDREW FALENDER	1.00									
TREASURER		Х		Х				0.	0.	0.
(9) PAUL LEE	1.00									
VICE CHAIR		Х		X				0.	0.	0.
(10) SARA MOLYNEAUX	3.00									
CHAIR		Х		Х				0.	0.	0.
(11) PETER NESSEN	1.00									
VICE CHAIR		Х		Х				0.	0.	0.
(12) THALEIA T. SCHLESINGER	1.00									
CLERK		Х		Х				0.	0.	0.
(13) M. ROBIN BARONE	1.00								_	_
TRUSTEE		Х						0.	0.	0.
(14) PRABAL CHAKRABARTI	1.00									_
TRUSTEE		Х						0.	0.	0.
(15) ALICE CHAMBERLIN	1.00									_
TRUSTEE	1 00	Х						0.	0.	0.
(16) CAROLYN MANSFILED DUPONT	1.00	٦,							^	_
TRUSTEE (17.) POUGLAG T. FOY	1 00	Х						0.	0.	0.
(17) DOUGLAS I. FOY TRUSTEE	1.00	Х						0.	0.	0.
032007 12-23-20		Λ						0.	0.	Form 990 (2020)

032007 12-23-20

Part VIII Section A Officers Directors Trustees Key Employees and Highest Compensated Employees (as-ation-d)											
Section A. Onicers, Directors, Trustees, Rey Employees, and Figure 1 Continued											
(A)	(B)	Dacition							(E)	(F)	
Name and title	Average	(do	Position (do not check more than one				one	Reportable	Reportable	Estimated	
	hours per	box	, unle	ss per	son is	s both	n an	compensation	compensation	amount of	
	week		ler ar	lu a u	recto	i/iius	iee)	from	from related	other	
	(list any hours for	recto						the	organizations	compensation	
	related	or di	e e			ated		organization	(W-2/1099-MISC)	from the	
	organizations	ustee	trust		ap.	suedi		(W-2/1099-MISC)		organization	
	below	ual tr	ional		ploye	t con	١.			and related organizations	
	line)	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			Organizations	
(18) JOHN T. GOODHUE	1.00	_	_		×						
TRUSTEE		Х						0.	0.	0.	
(19) WHITNEY HATCH	1.00										
TRUSTEE		Х						0.	0.	0.	
(20) DR. THEA JAMES	1.00										
TRUSTEE		Х						0.	0.	0.	
(21) EKONGKAR SINGH KHALSA	1.00										
TRUSTEE		Х						0.	0.	0.	
(22) KATE KILGUSS	1.00										
TRUSTEE		Х						0.	0.	0.	
(23) CHRISTOPHER KLEM	1.00										
TRUSTEE		Х						0.	0.	0.	
(24) SHARON MALT	1.00										
TRUSTEE		Х						0.	0.	0.	
(25) TRAVIS MCCREADY	1.00										
TRUSTEE		Х						0.	0.	0.	
(26) LORETTA MICKLEY	1.00										
TRUSTEE	TRUSTEE							0.	0.	0.	
1b Subtotal							>	1,171,229.	0.	114,503.	
c Total from continuation sheets to Part VI								0.	0.	0.	
d Total (add lines 1b and 1c)							<u> </u>	1,171,229.	0.	114,503.	
2 Total number of individuals (including but n	ot limited to th	ose	liste	d ab	ove) wh	o re	ceived more than \$100,	000 of reportable		

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

5 X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A)	(B)	(C)
Name and business address	Description of services	Compensation
MASS HOUSING INVESTMENT CORP		
21 CUSTOM HOUSE, BOSTON, MA 02110	RESEARCH	369,800.
CLA	ACCOUNTING & HR	
131 HARTWELL AVE, LEXINGTON, MA 02421	SERVICES	313,534.
MIT		
77 MASS AVE, CAMBRIDGE, MA 02114	RESEARCH	305,500.
AMERICAN LITTORAL SOCIETY		
18 HARTSHORNE DR, HIGHLANDS, NJ 07732	RESEARCH	226,765.
METROPOLITAN AREA PLANNING COUNCIL		
70 FEDERAL ST, BOSTON, MA 02110	RESEARCH	205,070.
2 Total number of independent contractors (including but not limited to those	e listed above) who received more than	
\$100,000 of compensation from the organization		
GET DIDE HET GEGETON I GOVERNMENT HEAVY	~	000

SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2020)

6

Form 990 CONSERVAT	ION LAW	ŀ	·OU	ИD	ΑT	TO	Ν,	INC.	04-614	9986
Part VII Section A. Officers, Directors, Tru	stees, Key En	nplo	yee	s, aı	nd H	lighe	est (Compensated Employe	ees (continued)	
(A) Name and title	Name and title Average hours			Pos	C) ition that	(E) Reportable compensation	(F) Estimated amount of			
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(27) SHARMILA MURTHY PRUSTEE	1.00	Х						0.	0.	0
28) LOIS SCHIFFER	1.00									
TRUSTEE		X						0.	0.	0

		Check if Schedule O contains a response or	r note to any line	e in this Part VIII			
				(A)	(B)	(C)	_ (D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
					function revenue	business revenue	sections 512 - 514
SS	1 :	a Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	1 4						
je g							
ts, Ar	(· · · · · · · · · · · · · · · · · · ·					
ij Gi	(1 402 379				
ns, Sim	•	e Government grants (contributions) 1e	1,492,378.				
utio er (1	f All other contributions, gifts, grants, and	20 100 106				
듗			20,109,196.				
ont od (9	Noncash contributions included in lines 1a-1f	159,533.	04 604 554			
<u>0 p</u>	l	h Total. Add lines 1a-1f		21,601,574.			
		 	Business Code				
e	2 8	a ENFORCEMENT REVENUE	541900	1,040,300.	1,040,300.		
e Ķ	ŀ	b					
Sen	(c					_
am	(d					
Program Service Revenue	•	e					
P	1	f All other program service revenue					
	9	g Total. Add lines 2a-2f		1,040,300.			
	3	Investment income (including dividends, interes					
		other similar amounts)		153,593.			153,593.
	4	Income from investment of tax-exempt bond pro					
	5	Royalties					
		(i) Real	(ii) Personal				
	6 :	a Gross rents 6a 108,669.					
		b Less: rental expenses 6b 0.					
		c Rental income or (loss) 6c 108,669.					
		d Net rental income or (loss)	_	108,669.			108,669.
		a Gross amount from sales of (i) Securities	(ii) Other				
	, ,	assets other than inventory 7a 785,262.	(.,, 5 a 5.				
		b Less: cost or other basis					
ø.							
Ď							
eve		. ,		295,614.			295,614.
her Revenue		d Net gain or (loss)	······	275,014.			233,014.
	8 8	a Gross income from fundraising events (not					
Ò		including \$ of					
		contributions reported on line 1c). See					
	_	Part IV, line 18 8a					
		b Less: direct expenses 8b					
		c Net income or (loss) from fundraising events	····· •				
	9 a	a Gross income from gaming activities. See					
		Part IV, line 199a					
	ŀ	b Less: direct expenses 9b					
	(c Net income or (loss) from gaming activities					
	10 a	a Gross sales of inventory, less returns					
		and allowances10a					
	ŀ	b Less: cost of goods sold10b					
		c Net income or (loss) from sales of inventory					
(0		<u> </u>	Business Code				
ons 6	11 a	a MISCELLANEOUS REVENUE	900099	98,719.	98,719.		
ane Dug	ŀ	b					
Miscellaneous Revenue	(c					
lisc Be	(d All other revenue					
Ž		e Total. Add lines 11a-11d		98,719.			
	12	Total revenue. See instructions		23,298,469.	1,139,019.	0.	557,876.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (**D**) Fundraising expenses (C) Management and general expenses Do not include amounts reported on lines 6b. Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations 109,000. 109,000. and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 136,233. 272,466. 136,233. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7,858,944. 6,289,164. 623,171. 946,609. Other salaries and wages 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 1,052,395. 833,894. 107,003. 111,498. Other employee benefits 9 596,920. 470,416. 58,199. 68,305. 10 Payroll taxes 11 Fees for services (nonemployees): Management Legal Accounting Lobbying Professional fundraising services. See Part IV, line 17 51,906. 51,906. Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 3,797,302. 2,980,019. 689,534. 127,749. column (A) amount, list line 11g expenses on Sch O.) 147,505. 104,531. 42,974. Advertising and promotion 12 55,619. 38,652. 11,310. 5,657. Office expenses 13 Information technology 14 15 Royalties 13,115. 8,743. 265,927. 244,069. 16 Occupancy 25,982. 22,150. 2,712. 1,120. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 26,082. 17,930. 549. 7,603. Conferences, conventions, and meetings 19 199,373. 23,925. 15,950. 159.498. 20 Payments to affiliates 21 440,248. 352,198. 52,830. 35,220. Depreciation, depletion, and amortization 22 69,691. 55,753. 8,363. 5,575. 23 Other expenses. Itemize expenses not covered 24 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.) 196,090. 138,156. 12,407. 45,527. SOFTWARE AND LICENSING TRAINING 161,283. 147,476. 7,200. 6,607. 113,270. 141,587. $11, \overline{327}$. 16,990. BAD DEBT 21,299. 130,586. **TELECOMMUNICATIONS** 100,736. 8,551. 402,799. 339,753. 35,885. 27,161. All other expenses 1,476,176. 16,001,705. 12,652,898. 1,872,631. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. if following SOP 98-2 (ASC 958-720)

t X	Balance Sheet					
	Check if Schedule O contains a response or note	to an	y line in this Part X			
				(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing			269.	1	0.
2					2	9,057,162.
3	Pledges and grants receivable, net			2,674,191.	3	6,235,784.
4				1,327,862.	4	957,367.
5						
	trustee, key employee, creator or founder, substa	antial c	contributor, or 35%			
	controlled entity or family member of any of these	e perso	ons		5	
6	Loans and other receivables from other disqualifi	ed per	sons (as defined			
	under section 4958(f)(1)), and persons described	in sec	tion 4958(c)(3)(B)		6	
7	Notes and loans receivable, net				7	
8	Inventories for sale or use				8	
9	Prepaid expenses and deferred charges			153,784.	9	197,163.
10a						
b	Less: accumulated depreciation	10b	4,040,045.			7,076,618.
11						14,647,557.
12	Investments - other securities. See Part IV, line 1	1		697,530.	12	720,580.
13	Investments - program-related. See Part IV, line 1	1			13	
14						
15	Other assets. See Part IV, line 11		·····	1,795,053.		1,911,751.
16						40,803,982.
17				1,519,624.		1,486,429.
18						
				4 410 757		4 206 200
				4,419,757.		4,306,382.
					21	
22						
				1 400 270		1 520 047
	the state of the s			1,492,378.	24	1,538,847.
25						
	•	,	•	97 909	0.5	76,257.
00				7 510 567	25	7,407,915.
26				7,313,307.	26	7,407,313.
		K Her				
27	• • • • • • • • • • • • • • • • • • • •			7 258 698.	27	8,888,469.
						24,507,598.
20				237.0073231	20	22/30//3301
		, onc	JOK HOLE P			
29					29	
				23,025,641.		33,396,067.
32	Total net assets or fund balances			43,043,041	32	33,330.001
	1 2 3 4 5 5 6 7 8 9 10a b 11 12 13 14 15 16 17	Check if Schedule O contains a response or note 1	Check if Schedule O contains a response or note to an Check if Schedule O contains a response or note to an Check if Schedule O contains a response or note to an Check if Schedule O contains a response or note to an Check if Schedule O controlled entity or family member of any of these personal controlled	Check if Schedule O contains a response or note to any line in this Part X Cash - non-interest-bearing	Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year 26 3. 28 Savings and temporary cash investments 39 Pedgas and grants receivable, net 4 Accounts receivable, net 29 Loans and other receivables from any current or former officer, director, trustee, key employee, careator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 6 Loans and other receivables from other disqualified persons (as defined under section 4958(r)(3)(8) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepatie expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 11 Investments - publicly traded securities 12 Investments - publicly traded securities 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 17 Accounts payable and accrued expenses 28 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 20 Cher liabilities (including federal contributor, or 35% controlled entity or family member of any of these persons 29 Secured mortgages and notes payable to unrelated third parties 20 Office in this program in the payable to unrelated third parties 30 Paid in or capital surplus, or land, building, or equipment fund 30 Paid-in or capital surplus, or land, building, or equipment fund 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowers, accumilated in cort or other undes	Check if Schedule O contains a response or note to any line in this Part X

	330 (2020) 331(321(1111111111111111111111111111111		<u> </u>		ıα	gc
Pa	T XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>,29</u>		
2	Total expenses (must equal Part IX, column (A), line 25)	2		,00		
3	Revenue less expenses. Subtract line 2 from line 1	3		,29		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	23	,02	5,6	<u>41.</u>
5	Net unrealized gains (losses) on investments	5	3	,07	3,6	62.
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				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	33	,39	6,0	67 .
Pa	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>			X
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Э.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	gle Aud	it			
	Act and OMB Circular A-133?			За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require		t			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		

032012 12-23-20

SCHEDULE A

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Employer identification number Name of the organization CONSERVATION LAW FOUNDATION, 04-6149986 INC. 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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 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). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other n your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	10741421.	17325254.	8868520.	12048854.	21601574.	70585623.
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	10741421.	17325254.	8868520.	12048854.	21601574.	70585623.
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)						
	Public support. Subtract line 5 from line 4.						70585623.
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7	Amounts from line 4	10741421.	17325254.	8868520.	12048854.	21601574.	70585623.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	281,535.	314,128.	301,444.	336,552.	210,356.	1444015.
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.)						
	Total support. Add lines 7 through 10						72029638.
	Gross receipts from related activities,	,	,			12	393,476.
13	First 5 years. If the Form 990 is for the	-			<u>-</u>		
0	organization, check this box and sto						_
	ction C. Computation of Publ					T T	00 00
	Public support percentage for 2020 (14	98.00 % 97.36 %
	Public support percentage from 2019					15	
16a	33 1/3% support test - 2020. If the						
	stop here. The organization qualifies						
D	33 1/3% support test - 2019. If the	•		•		•	
17-	and stop here. The organization qua 10% -facts-and-circumstances test						
17a		ū					•
	and if the organization meets the fact			=	•	_	▶ □
Į.	meets the facts-and-circumstances to	-	•		-	17a and line 15 io	
O	10% -facts-and-circumstances test	-					1070 UI
	more, and if the organization meets the				-		▶□
10	organization meets the facts-and-circ						.
ıδ	Private foundation. If the organization	on did not check a l	box on line 13, 16a	i, 100, 1/a, or 1/b	o, check this box a	nu see instruction	S

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

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

Section A. Public Support						
Calendar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions,						
merchandise sold or services per- formed, or facilities furnished in						
any activity that is related to the						
organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						<u> </u>
6 Total. Add lines 1 through 5				<u> </u>		
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons b Amounts included on lines 2 and 3 received					+	_
from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.) Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6	(a) 2010	(b) 2017	(6) 2018	(u) 2019	(e) 2020	(i) Total
10a Gross income from interest,						
dividends, payments received on						
securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business						
activities not included in line 10b,						
whether or not the business is regularly carried on						
12 Other income. Do not include gain						
or loss from the sale of capital assets (Explain in Part VI.)				<u> </u>		<u> </u>
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for th	e organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3) organizati	ion,
check this box and stop here	•		,	•	. , . ,	·
Section C. Computation of Public	c Support Per	centage				
15 Public support percentage for 2020 (li	ne 8, column (f), d	livided by line 13, o	column (f))		15	%
16 Public support percentage from 2019					16	%
Section D. Computation of Inves	tment Income	e Percentage				
17 Investment income percentage for 20	20 (line 10c, colur	mn (f), divided by li	ne 13, column (f))		17	%
18 Investment income percentage from 2					18	%
19a 33 1/3% support tests - 2020. If the	organization did r	not check the box	on line 14, and line	e 15 is more than 3	33 1/3%, and line 1	17 is not
more than 33 1/3%, check this box an						
b 33 1/3% support tests - 2019. If the						
line 18 is not more than 33 1/3%, chec	ck this box and st	t op here. The orga	ınization qualifies a	as a publicly suppo	orted organization	
20 Private foundation If the organization	n did not check a	hoy on line 1/ 10	a or 10h check th	nie hov and sec inc	etructions	

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 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 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?

 If "Yes." complete Part I of Schedule L (Form 990 or 990-EZ).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 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		
За		
3b		
3c		
4-		
4a		
1h		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
Ol-		
9b		
9с		
10a		
10b		

Pai	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		
С	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
	F		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			l
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			l
	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			l
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	•		
Sec	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations	2		
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		162	NO
•	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	tion 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			l
	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			l
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have a			l
	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	2		
Sec	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete</i> line 3 <i>below.</i>			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see inst	truction	s).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			l
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
_	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	20		
h	trustees of each of the supported organizations? <i>If</i> "Yes" or "No" provide details in Part VI. Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	3a		
J	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		
	5 II 100. GOODING III - IIIO TOTO DIGITO DI LITO O GALILIZATIONI III LITO LOGALA.			

Part '	V Type III Non-Functionally Integrated 509(a)(3) Support	ing Organi	zations	
1 [Check here if the organization satisfied the Integral Part Test as a qualify	ying trust on N	ov. 20, 1970 (explain in	Part VI). See instructions
	All other Type III non-functionally integrated supporting organizations may		•	
Section	n A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 N	let short-term capital gain	1		
2 R	lecoveries of prior-year distributions	2		
3 0	Other gross income (see instructions)	3		
4 A	dd lines 1 through 3.	4		
5 D	Depreciation and depletion	5		
6 P	ortion of operating expenses paid or incurred for production or			
C	ollection of gross income or for management, conservation, or			
	naintenance of property held for production of income (see instructions)	6		
	Other expenses (see instructions)	7		
	djusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
	n B - Minimum Asset Amount	1	(A) Prior Year	(B) Current Year (optional)
1 A	ggregate fair market value of all non-exempt-use assets (see			
in	nstructions for short tax year or assets held for part of year):			
a A	verage monthly value of securities	1a		
b A	verage monthly cash balances	1b		
c Fa	air market value of other non-exempt-use assets	1c		
d T	otal (add lines 1a, 1b, and 1c)	1d		
e D	Discount claimed for blockage or other factors			
	explain in detail in Part VI):			
2 A	cquisition indebtedness applicable to non-exempt-use assets	2		
3 S	subtract line 2 from line 1d.	3		
4 C	ash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	ee instructions).	4		
5 N	let value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 M	fultiply line 5 by 0.035.	6		
	ecoveries of prior-year distributions	7		
8 M	finimum Asset Amount (add line 7 to line 6)	8		
Section	n C - Distributable Amount			Current Year
1 A	djusted net income for prior year (from Section A, line 8, column A)	1		
	inter 0.85 of line 1.	2		
3 M	finimum asset amount for prior year (from Section B, line 8, column A)	3		
	inter greater of line 2 or line 3.	4		
	ncome tax imposed in prior year	5		
	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	mergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	nally integrated	d Type III supporting orga	nization (see

Schedule A (Form 990 or 990-EZ) 2020

instructions).

Schedule A (Form 990 or 990-EZ) 2020

e Excess from 2020

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

	1 50 1 (C)(4), (5), 01 (6) 01ga1112a	lions. Complete Part III.		Te	
Name of or	•		ETON THO	Emp	loyer identification number
Dort I A	CONSERV	ATION LAW FOUNDA	TION, INC.	or is a section 507 or	04-6149986
Part I-A	Complete if the org	janization is exempt und	er section 501(c)	or is a section 527 or	ganization.
1 Drovid	lo a description of the organi-	ation's direct and indirect politic	ool compoign activities i	in Dort IV	
		ures	. •		\$
		gn activities			
3 Volum	eel nours for political campai	gri activities			
Part I-B	Complete if the org	janization is exempt und	er section 501(c)(3).	
1 Enter	the amount of any excise tax	incurred by the organization und	der section 4955	>	\$
2 Enter	the amount of any excise tax	incurred by organization manag	ers under section 4955	▶	\$
		n 4955 tax, did it file Form 4720			
4a Was a	correction made?				Yes No
	s," describe in Part IV.			=0.1/	1/0
Part I-C		anization is exempt und			
	, ,	d by the filing organization for se	•		
		ization's funds contributed to of	ther organizations for se		
•					<u> </u>
		a. Add lines 1 and 2. Enter here a			
		1120-POL for this year?			
	•	nployer identification number (El	,	•	• •
		tion listed, enter the amount pai	0 0		•
	·	omptly and directly delivered to additional space is needed, prov			te segregated fund or a
Рошо	` ,	· · · · · · · · · · · · · · · · · · ·			(-) A
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds. If none, enter -0	promptly and directly
					delivered to a separate
					political organization. If none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2020

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section 501(h)).

A Check > X if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

<u>B (</u>	Check 🕨 💹 if the filing organization check	ed box A and "limited control" provisions apply.		
		oying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1:	a Total lobbying expenditures to influence publ	ic opinion (grassroots lobbying)	4,159.	4,159.
- 1	Total lobbying expenditures to influence a leg	gislative body (direct lobbying)	64,170.	64,170.
	Total lobbying expenditures (add lines 1a and	I 1b)	68,329.	68,329.
	1.00		15,881,470.	15,881,470.
	Total exempt purpose expenditures (add lines	s 1c and 1d)	15,949,799.	15,949,799.
	f _Lobbying nontaxable amount. Enter the amou		947,490.	947,490.
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e.		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.		
-	g Grassroots nontaxable amount (enter 25% of	line 1f)	236,873.	236,873.
- 1	h Subtract line 1g from line 1a. If zero or less, e	nter -0-	0.	0.
	i Subtract line 1f from line 1c. If zero or less, er	nter -0-	0.	0.
	j If there is an amount other than zero on eithe	r line 1h or line 1i, did the organization file Form 4720		

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

	Lobbying Expen	ditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
2a Lobbying nontaxable amount	750,457.	845,092.	927,295.	947,490.	3,470,334.
b Lobbying ceiling amount (150% of line 2a, column(e))					5,205,501.
c Total lobbying expenditures	55,005.	89,915.	99,098.	68,329.	312,347.
d Grassroots nontaxable amount	187,614.	211,273.	231,824.	236,873.	867,584.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,301,376.
f Grassroots lobbying expenditures	3,419.	5,492.	6,591.	4,159.	19,661.

Schedule C (Form 990 or 990-EZ) 2020

reporting section 4911 tax for this year?

Schedule C (Form 990 or 990-EZ) 2020 CONSERVATION LAW FOUNDATION, INC. 04-61499 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

the lobbying activity. During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? art III-A Complete if the organization is exempt under section 501(c)(4), section 501	s N	lo	Amo	ount
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
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d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
a if the filling organization incurred a section 4912 tax, did it file form 4/20 for this year?				
	(c)(5) o	r sec	tion	
501(c)(6).	(0)(0), 0	1 300	tion	
			Yes	No
Were substantially all (90% or more) dues received nondeductible by members?		1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior art III-B Complete if the organization is exempt under section 501(c)(4), section 501		3		
answered "Yes." Dues, assessments and similar amounts from members		1		
Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				
expenses for which the section 527(f) tax was paid).		_		
a Current year		2a		
b Carryover from last year		2b		
c Total		2c		
Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess				
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political				
		4		
expenditure next year? Taxable amount of lobbying and political expenditures (See instructions)		5		

Schedule C (Form 990 or 990-EZ) CONSERVATI
Part IV Supplemental Information (continued)

Schedule C	Affiliated Group Lobbying Expenditures Part II -A	
Name of Affiliated Group Member CLF VENTURES		Employer ID Number 04-3355728
Affiliated Group Member Address 62 SUMMER STREET BOSTON, MA 02110		Electing Member NO

Limits on Lobbying Expenditures:				
Total lobbying expenditures to influence public opinion (grassroots lobbying) 4,158.				
Total lobbying expenditures to	influence a legislative body (dire	ct lobbying)	35,525.	b
Total lobbying expenditures (ac	dd lines 1a and 1b)		39,683.	С
Other exempt purpose expendi	itures		0.	d
Total exempt purpose expendit	cures (add lines 1c and 1d).		39,683.	е
Lobbying nontaxable amount. Enter the amount from the follo	wing table:			
If the amount on line e is:	The lobbying nontaxable amount is:			
Not over \$500,000 > 500,000 <= 1,000,000 > 1,000,000 <= 1,500,000 > 1,500,000 <= 17,000,000	20% of the amount on line 1e 100,000 + 15% > 500,000 175,000 + 10% > 1,000,000 225,000 + 5% > 1,500,000			
Over \$17,000,000	\$1,000,000		7,937.	f
Grassroots nontaxable amount (enter 25% of line 1f) 1,984.				g
Subtract line 1g from line 1a (limit to zero)				h
Subtract line 1f from line 1c (lin	Subtract line 1f from line 1c (limit to zero) 31,746.			
Member's share of excess lobbying expenditures 0.				

Part IV | Supplemental Information (continued)

Schedule C

Affiliated Group Lobbying Expenditures Part II -A

Name of Affiliated Group Member

ENVIRONMENTAL INSURANCE AGENCY, INC.

Employer ID Number 04-3393004

Affiliated Group Member Address

62 SUMMER STREET BOSTON, MA 02110

Electing Member NO

			T
imits on Lobbying Expenditu	res:		
Total lobbying expenditures to i	nfluence public opinion (grassro	ots lobbying) 0 •	
Total lobbying expenditures to i	nfluence a legislative body (direc	t lobbying) 28,645.	
Total lobbying expenditures (ad	d lines 1a and 1b)	28,645.	
Other exempt purpose expendi	tures	0.	
Fotal exempt purpose expendit	ures (add lines 1c and 1d).	28,645.	
obbying nontaxable amount. Enter the amount from the follo	wing table:		
If the amount on line e is:	The lobbying nontaxable amount is:		
Not over \$500,000 > 500,000 <= 1,000,000 > 1,000,000 <= 1,500,000	20% of the amount on line 1e 100,000 + 15% > 500,000 175,000 + 10% > 1,000,000		
> 1,500,000 <= 17,000,000 Over \$17,000,000	225,000 + 5% > 1,500,000 \$1,000,000		
	\$1,000,000	5,729.	
Grassroots nontaxable amount	(enter 25% of line 1f)	1,432.	
ubtract line 1g from line 1a (limit to zero)		0.	
subtract line 1f from line 1c (limit to zero)		22,916.	
Member's share of excess lobbying expenditures			

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

Name of the organization

CONSERVATION LAW FOUNDATION, INC. **Employer identification number** 04-6149986

Pa			ilar Funds or A	ccounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	e 6. (a) Donor advised fu	ınds	(b) Funds and other accounts
1	Total number at end of year	(a) Donor advised it		ואין ו מוועט מווע טנווטו מטטטעוונט
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 w	vriting that the assets held in	n donor advised fun	ds
Ū	are the organization's property, subject to the organization's			
6	Did the organization inform all grantees, donors, and donor ad			
	for charitable purposes and not for the benefit of the donor or			
	impermissible private benefit?			Yes No
Pai	t II Conservation Easements. Complete if the org	anization answered "Yes" o	on Form 990, Part IV	, line 7.
1	Purpose(s) of conservation easements held by the organization			
	Preservation of land for public use (for example, recreat	ion or education) P	reservation of a hist	orically important land area
	Protection of natural habitat	P	reservation of a cert	ified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contributio	n in the form of a co	nservation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b				2b
С	Number of conservation easements on a certified historic stru	cture included in (a)		2c
d	Number of conservation easements included in (c) acquired a	fter 7/25/06, and not on a h	istoric structure	
	listed in the National Register			2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or term	ninated by the organ	ization during the tax
	year ▶			
4	Number of states where property subject to conservation eas	ement is located		
5	Does the organization have a written policy regarding the peri	odic monitoring, inspection	, handling of	
	violations, and enforcement of the conservation easements it	holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and e	enforcing conservation	on easements during the year
	>			
7	Amount of expenses incurred in monitoring, inspecting, handle	ling of violations, and enforce	cing conservation ea	sements during the year
	▶ \$			
8	Does each conservation easement reported on line 2(d) above	•		
	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservation		·	
	balance sheet, and include, if applicable, the text of the footness.	ote to the organization's fina	ancial statements th	at describes the
Dai	organization's accounting for conservation easements. † III Organizations Maintaining Collections of	Art Historical Treasu	ures or Other S	Similar Assats
I a	Complete if the organization answered "Yes" on Form		ures, or other c	minia Assets.
			a atatament and hal	anno aboat works
ıa	If the organization elected, as permitted under FASB ASC 958	•		
	of art, historical treasures, or other similar assets held for pub	•		nice of public
h	service, provide in Part XIII the text of the footnote to its finan			a shoot works of
D	If the organization elected, as permitted under FASB ASC 958	•		
	art, historical treasures, or other similar assets held for public	exhibition, education, or res	search in lurtherance	e of public service,
	provide the following amounts relating to these items:			• •
	(i) Revenue included on Form 990, Part VIII, line 1			k
2		scures or other similar asso		
2	If the organization received or held works of art, historical treation following amounts required to be reported under EASP ASP			provide
_	the following amounts required to be reported under FASB AS			• •
a	Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X			
IJ	ASSERT INCIDITED IN FULL BOOK FAIL A			. 🕶 🛡

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

Schedule D (Form 990) 2020

Par	rt III Organizations Maintaining	Collections of Art	t, Historical Tre	asures, or Othe	er Similar As	sets (continued)
3	Using the organization's acquisition, acce					
	collection items (check all that apply):					
а	Public exhibition	d	Loan or exch	nange program		
b	Scholarly research	е	Other			
С	Preservation for future generations					_
4	Provide a description of the organization'	s collections and explain	how they further the	e organization's exe	empt purpose in	Part XIII.
5	During the year, did the organization solid					
	to be sold to raise funds rather than to be	e maintained as part of th	ne organization's col	lection?		Yes No
Par	rt IV Escrow and Custodial Arr	angements. Comple	ete if the organization	n answered "Yes" o	n Form 990, Par	t IV, line 9, or
	reported an amount on Form 990,		_			
1a	Is the organization an agent, trustee, cus	todian or other intermedi	ary for contributions	or other assets not	t included	
	on Form 990, Part X?					Yes No
b	If "Yes," explain the arrangement in Part	XIII and complete the fol	lowing table:			
						Amount
С	Beginning balance				1c	
d	Additions during the year					
е						
f	Ending balance				1f	
2a	Did the organization include an amount o				ility?	Yes No
	If "Yes," explain the arrangement in Part				•	
Par	rt V Endowment Funds. Comple	ete if the organization an	swered "Yes" on For	rm 990, Part IV, line	10.	
	·	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years	back (e) Four years back
1a	Beginning of year balance	12,356,674.	11,803,960.	10,800,719.	10,361,7	
b				373,548.	5,0	000. 462,827.
С	Net investment earnings, gains, and losse		1,216,335.	1,104,165.	822,8	1,258,926.
d	Grants or scholarships					
е						
	and programs	720,806.	663,621.	474,472.	388,9	468,028.
f						
g		14 007 020	12,356,674.	11,803,960.	10,800,7	19. 10,361,792.
2	Provide the estimated percentage of the	•	(line 1g, column (a)	held as:	•	
а			%			
b	- 25 000		_			
С						
	The percentages on lines 2a, 2b, and 2c					
За	Are there endowment funds not in the po	ssession of the organiza	tion that are held an	d administered for t	he organization	
	by:					Yes No
	(i) Unrelated organizations					3a(i) X
	(ii) Related organizations					3a(ii) X
b	If "Yes" on line 3a(ii), are the related orga					
4	Describe in Part XIII the intended uses of	the organization's endov	wment funds.			
Par	rt VI Land, Buildings, and Equi	pment.				
	Complete if the organization answ	ered "Yes" on Form 990	, Part IV, line 11a. Se	ee Form 990, Part X	(, line 10.	
	Description of property	(a) Cost or o	ther (b) Cost	or other (c)	Accumulated	(d) Book value
		basis (investr	nent) basis (other) d	epreciation	
1a	Land			7,500.		397,500.
b			4,55	0,297. 2,	705,420.	
С			5,26	2,961.	792,344.	
			90	5,905.	542,281.	363,624.
	Other					
Total	il. Add lines 1a through 1e. (Column (d) mu	st equal Form 990. Part	X. column (B), line 10	Oc.)		7,076,618.

Schedule D (Form 990) 2020

	LAW FOUNDAT	ION, INC.	04-6149986 _{Page}
Part VII Investments - Other Securities. Complete if the organization answered "Yes" of	on Form 000 Dort IV line:	11h Soo Earm 000 Dort V line 10	n
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cos	
(1) Financial derivatives	(b) Book value	(e) Metrica er variation: eee	t or one or year market value
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13	3.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cos	
(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" or		11d. See Form 990, Part X, line 15	
(a) [Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	<u>15.)</u>	······	▶
Complete if the organization answered "Yes" or	n Form 990, Part IV, line	11e or 11f. See Form 990, Part X,	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			==
(2) CHARITABLE ANNUITY LIABILI	TY		55,424
(3) SECURITY DEPOSITS			20,833
(4)			
(5)			

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

Schedule D (Form 990) 2020

76,257.

(6) (7) (8)

DEFERRED TAX LIABILITIES AND ASSETS ARE DETERMINED BASED ON THE DIFFERENCE

STATEMENTS.

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations. Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

➤ Attach to Form 990.

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

Open to Public

OMB No. 1545-0047

Inspection Name of the organization **Employer identification number** 04-6149986 CONSERVATION LAW FOUNDATION, INC. Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection X No criteria used to award the grants or assistance? Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of (e) Amount of (g) Description of (h) Purpose of grant valuation (book, or government (if applicable) cash grant non-cash noncash assistance or assistance FMV, appraisal, assistance other) PRESERVATION TRUST VERMONT 104 CHURCH STREET 03-0281195 501(C)(3) BURLINGTON, VT 05401 0. BOOK EXIT 4 LAND CONSERVATION 10,000. NATURAL RESOURCES DEFENSE COUNCIL 40 W 20TH STREET MARINE MONUMENT 13-2654926 501(C)(3) CONSERVATION NEW YORK, NY 10011 62,500. 0 BOOK EARTHJUSTICE 50 CALIFORNIA STREET, SUITE 500 MARINE MONUMENT 94-1730465 501(C)(3) SAN FRANCISCO, CA 94111 27,500 0. BOOK CONSERVATION Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2020

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistan
Supplemental Information. Provide the information	required in Part L lin	e 2: Part III. columi	(h): and any other ad	ditional information	
Supplemental mormation 1 Toylde the mormation	Toquilou IIII are I, IIII	<u> </u>	r (b), and any other ad	Millional information.	

SCHEDULE J (Form 990)

Compensation Information

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

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

➤ Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Questions Regarding Compensation

Department of the Treasury

CONSERVATION LAW FOUNDATION, INC.

Employer identification number 04-6149986

			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		<u> </u>
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9	l	l

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Schedule J (Form 990) 2020

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

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

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

	(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	penents	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
(1) BRADLEY CAMPBELL (i	272,466		0.	13,544.	15,866.	301,876.	0.
PRESIDENT (ii	0.	-	0.	0.	0.	0.	0.
(2) MARGARET CHURCH (i	209,600		0.	8,384.	652.	218,636.	0.
VP FOR MARKET INNOVATION A (ii			0.	0.	0.	0.	0.
(3) KATHERINE GROVE	186,033		0.	7,441.	869.	194,343.	0.
VP DEVELOPMENT (iii			0.	0.	0.	0.	0.
(4) CHRISOPHER DEMPSEY (i	177,671		0.	7,107.	7,296.	192,074.	0.
T4MA DIRECTOR (ii	0		0.	0.	0.	0.	0.
(5) PETER SHELLEY (i	163,759	0.	0.	6,550.	19,871.	190,180.	0.
ADVOCACY DIRECTOR (iii	0		0.	0.	0.	0.	0.
(6) SEAN MAHONEY (i	161,700		0.	6,468.	20,455.	188,623.	0.
EVP + DIRECTOR-CLF MAINE (ii	0.	0.	0.	0.	0.	0.	0.
(i)						
(ii							
(i)						
(ii)						
(i)						
(ii)						
(i))						
(ii)						
(i))						
(ii)						
(i))						
(ii)						
(i))						
(ii)						
(i))						
(ii)						
(i)							
(ii							
(ii							

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

SCHEDULE K (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions,

explanations, and any additional information in Part VI.

Attach to Form 990.

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

2020
Open to Public Inspection

Name of the organization

CONSERVATION LAW FOUNDATION, INC.

Employer identification number 04-6149986

	CONDERVATIO										エモノ			
Part I	Bond Issues SE	E PART VI	FOR COLUMI	NS (A) AN	D (F) (CONTI	NUATIONS							
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP#	(d) Date issued	l (e) Issu	e) Issue price (f) Description of purpos			(g) De	Defeased (h) On behal				
										of issuer		suer	financing	
									Yes	No	Yes	No	Yes	No
	SSACHUSETTS						REMODEL							ĺ
A DE	VELOPMENT FINANCE AGEN	04-2456011	NONE	10/01/18	4,500	,000.	AND PAYO	FF A PRIC		X	X			Х
														ĺ
В														<u> </u>
														ĺ
С														<u></u>
														1
D														ĺ
Part II	Proceeds													
					١		В	С				D		
1 A	mount of bonds retired			11	3,216.									
2 A	mount of bonds legally defeased													
3 To	otal proceeds of issue			4,50	00,000.									
4 G	ross proceeds in reserve funds													
5 C	apitalized interest from proceeds													
6 Pi	roceeds in refunding escrows													
7 Is	suance costs from proceeds]	31,950.									
8 C	redit enhancement from proceeds													
9 W	orking capital expenditures from proceeds													
10 C	apital expenditures from proceeds			3,57	77,620.									
11 0	ther spent proceeds			89	0,430.									
12 0	ther unspent proceeds													
13 Y	ear of substantial completion			2	2019									
				Yes	No	Yes	No	Yes	No		Yes		No	
14 W	ere the bonds issued as part of a refunding i	ssue of tax-exempt b	onds (or,											
if	issued prior to 2018, a current refunding issu	ıe)?		X										
15 W	ere the bonds issued as part of a refunding i	ssue of taxable bond	ls (or, if											
is	sued prior to 2018, an advance refunding iss	ue)?			X									
	as the final allocation of proceeds been made	_		37										
17 D	oes the organization maintain adequate book													
		······································	-	X										
	or Panerwork Reduction Act Notice see th			•			•	•		Scho	dula K	/Earn	2000	2020

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Schedule K (Form 990) 2020

Par	t III Private Business Use								
			A	E	3	(С	Γ	כ
1	Was the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No
	which owned property financed by tax-exempt bonds?		X						
2	Are there any lease arrangements that may result in private business use of								
	bond-financed property?		X						
За	Are there any management or service contracts that may result in private								
	business use of bond-financed property?		X						
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside								
	counsel to review any management or service contracts relating to the financed property?								
С	Are there any research agreements that may result in private business use of								
	bond-financed property?		X						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other								
	outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities								
	other than a section 501(c)(3) organization or a state or local government		%		%		%		%
5	Enter the percentage of financed property used in a private business use as a								
	result of unrelated trade or business activity carried on by your organization,								
	another section 501(c)(3) organization, or a state or local government		%		%		%		%
6	Total of lines 4 and 5		%		%		%		<u>%</u>
7	Does the bond issue meet the private security or payment test?	X							
8a	Has there been a sale or disposition of any of the bond-financed property to a non-								
	governmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or								
	disposed of		%		%		%		<u>%</u>
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations								
	sections 1.141-12 and 1.145-2?								
9	Has the organization established written procedures to ensure that all								
	nonqualified bonds of the issue are remediated in accordance with the		37						
_	requirements under Regulations sections 1.141-12 and 1.145-2?		X						
Par	t IV Arbitrage			_					
_	H. W. S. S. LE. COOCT ALS D. D. L. N. LID. L. N.		A	E			C	_)
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No X	Yes	No	Yes	No	Yes	No
	Penalty in Lieu of Arbitrage Rebate?								
	If "No" to line 1, did the following apply?	X							
	Rebate not due yet?		Х				-		
	Exception to rebate?		X				-		
<u>c</u>	No rebate due?		_ A						
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was								
3	performed Is the bond issue a variable rate issue?		Х						
<u>ა</u>	Is the bond issue a variable rate issue?		23						i

Part IV Arbitrage (continued)								
		4	E	3		С	D)
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?		X						
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		Х						
7 Has the organization established written procedures to monitor the								
requirements of section 148?	x							
Part V Procedures To Undertake Corrective Action		I.	·		1			
		Α	E	3		C	П	
Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No
of federal tax requirements are timely identified and corrected through the		- 110						
voluntary closing agreement program if self-remediation isn't available under								
applicable regulations?	l x							
Part VI Supplemental Information. Provide additional information for responses to questions	s on Schedule	K. See instr	uctions.		1	.1	<u> </u>	
SCHEDULE K, PART I, BOND ISSUES:								
(A) ISSUER NAME: MASSACHUSETTS DEVELOPMENT FINANC	CE AGENO	CY						
(F) DESCRIPTION OF PURPOSE: REMODEL BUILDING AND			R BOND					
						-		
						-	-	
						-	-	

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

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

Open to Public Inspection Employer identification number

	CONSERVATION	LAW F	OUNDATION	, INC.	04-6	1499	986	
Pai	t I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	termini	•	S
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property			450 500				
9	Securities - Publicly traded	X	2	159,533.				
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution - Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other							
26	Other • ()							
27	Other							
28	Other (
29	Number of Forms 8283 received by the organiz	zation during	the tax year for co	ontributions				
	for which the organization completed Form 82	83, Part V, D	onee Acknowledge	ement 29			Vaa	Na
30a	During the year, did the organization receive by	y contributio	n any property rep	orted in Part I, lines 1 througl	n 28, that it		Yes	No
	must hold for at least three years from the date	of the initia	l contribution, and	which isn't required to be us	ed for			
	exempt purposes for the entire holding period?	?				30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	oolicy that re	equires the review of	of any nonstandard contributi	ons?	31		Х
32a	Does the organization hire or use third parties	or related or	ganizations to solid	cit, process, or sell noncash				
	contributions?					32a		Х
b	If "Yes," describe in Part II.				·			
33	If the organization didn't report an amount in c	olumn (c) foi	r a type of property	for which column (a) is chec	ked,			
	describe in Part II.							

032141 11-23-20

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Schedule M (Form 990) 2020

032142 11-23-20

SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ)
Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

► Attach to Form 990 or 990-EZ.

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

2020 Open to Public Inspection

OMB No. 1545-0047

Name of the organization

CONSERVATION LAW FOUNDATION, INC.

Employer identification number 04-6149986

PART III, LINE CONSERVATION LAW FOUNDATION FORGES LASTING SOLUTIONS TO ENVIRONMENTAL CHALLENGES FOR THE PEOPLE OF NEW ENGLAND. FOR 50 YEARS, CLF HAS TAKEN ON POWERFUL OPPONENTS WHO WOULD POLLUTE OUR AIR AND WATER AND SQUANDER OUR RESOURCES. OUR DEEP LOCAL KNOWLEDGE, LEGAL ACUMEN, AND POLICY EXPERTISE MAKE CLF A PRIME MOVER IN BUILDING OUR CLEAN ENERGY FUTURE COUNTERING CLIMATE CHANGE, AND SAFEGUARDING OUR COMMUNITIES. WE NEVER GIVE UP AND GO HOME BECAUSE WE ARE HOME. FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: SHIFT NEW ENGLAND TO A GREEN ECONOMY ONE THAT'S LOW CARBON SUSTAINABLE, AND PROVIDES OPPORTUNITIES FOR ALL PEOPLE ACROSS THE REGION. OUR PEOPLE-POWERED SOLUTIONS CAN PROTECT AND RESTORE OUR ENVIRONMENT, POSITIVELY IMPACT COMMUNITY HEALTH, AND CREATE THRIVING LOCAL ECONOMIES. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: OTHER PROGRAMS INCLUDE THE FOLLOWING PEOPLE AND COMMUNITIES FOR 50 YEARS, CLF HAS FOUGHT TO CREATE HEALTHY COMMUNITIES FOR PEOPLE ACROSS NEW ENGLAND. IT IS HOW WE MADE OUR NAME: RETURNING A CLEAN BOSTON HARBOR TO THE PEOPLE AND CONNECTING MORE OF US TO RELIABLE PUBLIC TRANSPORTATION. TODAY, ARE WORKING TO END CHILDHOOD LEAD POISONING, FIGHTING FOR ADDITIONAL FUNDING FOR ACCESSIBLE AND EQUITABLE PUBLIC TRANSIT, SHUTTING DOWN DIRTY POWER PLANTS THAT POLLUTE

032211 11-20-20

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Schedule O (Form 990 or 990-EZ) 2020

Schedule O (Form 990 or 990-EZ) 2020 Page 2 **Employer identification number** Name of the organization CONSERVATION LAW FOUNDATION, INC. 04-6149986 VULNERABLE COMMUNITIES, AND SUPPORTING A RESILIENT LOCAL FOOD ECONOMY THROUGH OUR LEGAL FOOD HUB. OCEANS THE OCEAN PLAYS AN INTEGRAL ROLE IN NEW ENGLANDERS' LIVES, OUR ECONOMY, AND OUR COMMUNITIES. CLF HAS SAFEGUARDED NEW ENGLAND'S OCEAN FOR DECADES, FROM BLOCKING OIL AND GAS DRILLING ON GEORGES BANK, TO CURBING OVERFISHING, TO PIONEERING SMART OCEAN PLANNING ACROSS THE REGION. WE FIGHT FOR A CLEAN, HEALTHY, PRODUCTIVE OCEAN TO ENSURE THAT ENDANGERED RIGHT WHALES CAN RECOVER FROM THE BRINK OF EXTINCTION, OUR WATERS CAN ONCE AGAIN ABOUND WITH COD AND OUR FISHERIES FLOURISH, AND OUR MOST FRAGILE HABITATS CAN BE PROTECTED FOREVER FROM OVERFISHING AND INDUSTRIAL EXPLOITATION. EXPENSES \$ 7,250,197. INCLUDING GRANTS OF \$ 154,625. REVENUE \$ 523,710. FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION HAS PUBLIC, NON-VOTING, DUES-PAYING MEMBERS. FORM 990, PART VI, SECTION A, LINE 7A: THE BOARD OF OVERSEERS, A MAJORITY OF WHICH ARE NOT TRUSTEES, ELECTS THE BOARD OF TRUSTEES, WHICH IS THE GOVERNING BODY.

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

PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE, MEMBERS OF THE ORGANIZATION'S MANAGEMENT AND THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES REVIEW THE FORM 990 BEFORE IT IS SUBMITTED TO THE FULL BOARD FOR REVIEW.

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

Name of the organization CONSERVATION LAW FOUNDATION, INC.	Employer identification number 04-6149986
CONFLICT OF INTEREST DISCLOSURE FORMS ARE REQUIRED TO BE C	OMPLETED
ANNUALLY. TRANSACTIONS POTENTIALLY INVOLVING CONFLICTS OF	INTEREST ARE
IDENTIFIED BY MANAGEMENT AND GIVEN SPECIAL ATTENTION BY CO	UNSEL. PERSONS
WITH A CONFLICT ARE PROHIBITED FROM PARTICIPATING IN THE G	OVERNING BODY'S
DELIBERATIONS AND DECISIONS IN THE TRANSACTION.	
FORM 990, PART VI, SECTION B, LINE 15A:	
THE COMPENSATION OF THE CEO WAS DETERMINED BY THE EXECUTIVE	E COMMITTEE OF
THE BOARD OF TRUSTEES, IN CONSULTATION WITH THE EXECUTIVE	SEARCH FIRM
RETAINED BY THE BOARD IN CONNECTION WITH HIS HIRING IN 201	5. THE BOARD
CHAIR HAS RETAINED NOTES THAT CONTEMPORANEOUSLY DOCUMENT T	HE DELIBERATION
AND DECISION REGARDING THE CEO'S COMPENSATION ARRANGEMENT.	THE CEO
DETERMINES THE COMPENSATION OF OTHER OFFICERS, GIVING CONS	IDERATION TO ANY
AVAILABLE COMPARABILITY DATA.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND CONFLIC	TS OF INTEREST
POLICY AVAILABLE TO THE PUBLIC UPON REQUEST.	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
CONSULTING:	
PROGRAM SERVICE EXPENSES	2,980,019.
MANAGEMENT AND GENERAL EXPENSES	689,534.
FUNDRAISING EXPENSES	127,749.
TOTAL EXPENSES	3,797,302.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	3,797,302.

FORM 990, PART XII, LINE 2C:

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

04-6149986

CONSERVATION I	LAW FOUNDATION, I	NC.				04-61499	86	
Part I Identification of Disregarded Entities. Comple	ete if the organization answered "	Yes" on Form 990, Part IV, line 3	3.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state of foreign country)	(d) Total inco	me End-of-yea		Direct c	(f) controlling ntity	g
Part II Identification of Related Tax-Exempt Organizations during the tax year.	ations. Complete if the organizat	ion answered "Yes" on Form 990	0, Part IV, line 34, t	pecause it had one	or more	related tax-exer	mpt	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section		(f) ect controlling entity	cont	g) 512(b)(13) rolled tity?
CLF VENTURES, INC 04-3355728				501(c)(3))			Yes	No
62 SUMMER STREET BOSTON, MA 02110	CONSULTING	MASSACHUSETTS	501(C)(3)	11-I		RVATION LAW	X	
-					1			

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Schedule R (Form 990) 2020

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

(a) Name, address, and EIN of related organization	(b) Primary activity	Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule	(j) General managir partner	(k) Percentage ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	0

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	ent	tion b)(13) rolled tity?
ENVIRONMENTAL INSURANCE AGENCY, INC 04-3393004, 62 SUMMER STREET, BOSTON, MA		Country						Yes	No
02110	INSURANCE	MA	CLF VENTURES	C CORP					Х

Page 3

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

Not	ote: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		_		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more	e related organizations listed i	n Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			1a		<u>X</u>
	Gift, grant, or capital contribution to related organization(s)			1b		<u>X</u>
	Gift, grant, or capital contribution from related organization(s)			1c		_X_
	d Loans or loan guarantees to or for related organization(s)			1d	Х	
	Loans or loan guarantees by related organization(s)			1e	Х	
f	Dividends from related organization(s)			1f		_X_
	g Sale of assets to related organization(s)			1g		_X_
h	Purchase of assets from related organization(s)			1h		_X_
i	Exchange of assets with related organization(s)			1i		X
j	Lease of facilities, equipment, or other assets to related organization(s)			1j		_X_
k	c Lease of facilities, equipment, or other assets from related organization(s)			1k		<u>X</u>
- 1	Performance of services or membership or fundraising solicitations for related organization(s)			11		_X_
m	n Performance of services or membership or fundraising solicitations by related organization(s)			1m		<u>X</u>
n	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			1n		<u>X</u>
0	Sharing of paid employees with related organization(s)			10	Х	
р	Reimbursement paid to related organization(s) for expenses			1p		_X_
q	Reimbursement paid by related organization(s) for expenses			1q		<u>X</u>
r	Other transfer of cash or property to related organization(s)			1r		_X_
s	S Other transfer of cash or property from related organization(s)			1s		_X_
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete	this line, including covered r	elationships and transaction thresholds.			
	(a) (b) Name of related organization (case) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount invol	ved		

Name of related organization

(a)
Transaction type (a·s)

(b)
Transaction type (a·s)

(c)
Amount involved

Method of determining amount involved

(d)
Method of determining amount involved

(1) CLF VENTURES, INC.

D
1,596,880.FMV

(2) ENVIRONMENTAL INSURANCE AGENCY

E
85,734.FMV

(3) CLF VENTURES, INC.

O
59,025.FMV

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec. 501(c)(3) orgs.? Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproptionate allocation	Code V-UBI amount in box 2 of Schedule K-	General of managing partner? Yes No	(k) r Percentage ownership
	-									

Schedule R (Form 990) 2020