Department of the Treasury

Internal Revenue Service

EXTENDED TO NOVEMBER 15, 2023 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.



asplicable: STOCKHOLM ENVIRONMENT INSTITUTE 20 Origo business as 20 Number and street (or P.0. box if mail is not delivered to street address) Room/suite E Teleph If comment 11 CURTIS AVENUE (6 Origo business as Room/suite E Teleph Interview Finant (6 Overside: SOMERVILLE, MA 02144 (6) City or town, state or province, country, and ZIP or foreign postal code G Gross refusion SAME AS C ABOVE H(e) State I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527 J Website: WWW SEI – US.ORG H(c) Grow H(c) Grow H(c) Grow Form of organization: IX Corporation Trust Association Other L Year of formation Part I Summary I Briefly describe the organization's mission or most significant activities: INTERNATIONAL R: ON SUSTAINABLE DEVELOPMENT I Total number of individuals employed in calendar year 2022 (Part V, line 1a) I Total number of individuals employed in calendar year 2022 (Part V, line 2a) I Total number of individuals employed in calendar year 2022 (Part V, line 2a) I Total numetemploy		
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SÓMERVILLE, MA 02144 H(a) is th Predicting F Name and address of principal officer: BONNIE COCKMAN SAME AS C ABOVE H(b) Are all I tax-exempt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or J Website: WWW.SEI-US.ORG K Form of organization: X Corporation Trust Association Other L Briefly describe the organization's mission or most significant activities: INTERNATIONAL R: ON SUSTAINABLE DEVELOPMENT 2 Check this box if the organization discontinued its operations or disposed of more than 25% Number of independent voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 2a) 6 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, Part I, line 11 Prior N 2, 38 9 Program service revenue (Part VIII, line 14), lines 3, 4, and 7d) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 4.3, 4, and 7d) 12 To		5,886,222.
Part II F Name and address of principal officer:BONNIE COCKMAN for s I Tax-exempt status: IX is 001(c)(3) is 001(c) () (insert no.) is 4947(a)(1) or is 277 H(b) Are all if *N J Website: WWW SEI - US • ORG H(c) Groute the comparization: IX corporation is russion or most significant activities: INTERNATIONAL R. Part II Summary Summary International isometry of the organization's mission or most significant activities: INTERNATIONAL R. ON SUSTAINABLE DEVELOPMENT 2 Check this box if the organization discontinued its operations or disposed of more than 25% 3 Number of voting members of the governing body (Part VI, line 1a) 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 Total number of individuals employed in calendar year 2022 (Part VI, line 2a) 6 Total number of volunteers (estimate if necessary) 7 Total number of volunteers (estimate if necessary) 7 7 Total number of column (A), lines 3, 4, and 7d) 10 Investment income (Part VIII, column (A), lines 4, and 7d) 5 5 11 Other revenue (Part VIII, column (A), lines 4, and 7d) 5 5 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), lines 5-10) 4 4	is a group retu	
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9 Program service revenue (Part VIII, line 2g) 3,34 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		Current Year
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 5 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 5, 78 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 5 14 Benefits paid to or for members (Part IX, column (A), line 4) 4, 37 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 4, 37 16a Professional fundraising fees (Part IX, column (A), line 11e) 566, 964. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1, 13 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 5, 50	4,780.	4,172,170.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 5 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 5, 78 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 5 14 Benefits paid to or for members (Part IX, column (A), line 4) 4, 37 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 4, 37 16a Professional fundraising fees (Part IX, column (A), line 11e) 566, 964. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1, 13 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 5, 50	4,967.	1,671,810.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 5 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 5, 78 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 5 14 Benefits paid to or for members (Part IX, column (A), line 4) 4, 37 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 4, 37 16a Professional fundraising fees (Part IX, column (A), line 11e) 566, 964. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1, 13 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 5, 50	6,168.	28,931.
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,339.	13,311.
14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 5 5		5,886,222.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 4,37 16a Professional fundraising fees (Part IX, column (A), line 11e) 566,964. b Total fundraising expenses (Part IX, column (D), line 25) 566,964. 17 Other expenses (Part IX, column (A), lines 11a.11d, 11f.24e) 1,13 18 Total expenses. Add lines 13.17 (must equal Part IX, column (A), line 25) 5,50	0.	0.
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17 Other expenses (Part IX, column (A), lines 11a-11d, 111-24e) 17, 13 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 5, 50	6,176.	4,710,799.
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17 Other expenses (Part IX, column (A), lines 11a-11d, 111-24e) 17, 13 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 5, 50		
	3,153.	1,408,363.
		6,119,162.
	7,925.	-232,940.
Beginning of C20Total assets (Part X, line 16)21Total liabilities (Part X, line 26)22Net assets or fund balances. Subtract line 21 from line 20		End of Year
정정 20 Total assets (Part X, line 16) 5, 38	9,275.	5,603,170.
21 Total liabilities (Part X, line 26) 1, 46	2,177.	2,141,162.
² 코 22 Net assets or fund balances. Subtract line 21 from line 20	7,098.	3,462,008.

Part II Signature Block

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

Sign	Signature of officer				Date				
-	BONNIE COCKMAN, TREASURER,	DIR. OF	FINANCE	& OPS					
	Type or print name and title								
	Print/Type preparer's name P	Preparer's signature		Date	Check	PTIN			
Paid	SANDRA M. BROWN, CPA S	ANDRA M.	BROWN,		• • • • • • • • • • • • • • • • • • •	P01614103			
Preparer	Firm's name SMITH, SULLIVAN &	BROWN, P.	С.		Firm's EIN 43-	1985162			
Use Only	Firm's address 80 FLANDERS ROAD -	SUITE #3	02						
WESTBOROUGH, MA 01581 Phone no. (508)									
May the IF	May the IRS discuss this return with the preparer shown above? See instructions 🛛 🚺 Yes 🛄 No								
232001 12-1	32001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2022)								

	STOCKHOLM ENVIRONMENT INSTITUTE	
Form	990 (2022) U.S., INC. 20-4659308 Page	2
Pa	rt III Statement of Program Service Accomplishments	_
	Check if Schedule O contains a response or note to any line in this Part III	<u> </u>
1	Briefly describe the organization's mission:	
	THE CENTER CONDUCTS RESEARCH AND ENGAGES WITH DECISION-MAKERS AND	
	CIVIL SOCIETY ON ENERGY, WATER, AND CLIMATE POLICY AS WELL AS ON	
	BROADER DIMENSIONS OF DEVELOPMENT, SUSTAINABILITY, AND EQUITY. IT BUILDS CAPACITY THROUGH TRAINING AND COLLABORATION, AND ITS	
	Did the organization undertake any significant program services during the year which were not listed on the	
2		
	prior Form 990 or 990-EZ?	0
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	0
•	If "Yes," describe these changes on Schedule O.	•
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 4,706,329. including grants of \$ 0. (Revenue \$ 1,671,810.	
	THE CENTER CONDUCTS RESEARCH AND ENGAGES WITH DECISION-MAKERS AND CIVII	<u>د</u>
	SOCIETY ON ENERGY, WATER, AND CLIMATE POLICY AS WELL AS ON BROADER	
	DIMENSIONS OF DEVELOPMENT, SUSTAINABILITY, AND EQUITY. IT BUILDS	
	CAPACITY THROUGH TRAINING AND COLLABORATION, AND ITS DECISION-SUPPORT TOOLS ARE USED WIDELY AROUND THE GLOBE.	
	TOOLS ARE USED WIDELI AROUND THE GLOBE.	
	SEI-US SUPPORTS DECISION-MAKING AND INDUCING CHANGE TOWARD SUSTAINABLE	—
	DEVELOPMENT AROUND THE WORLD BY PROVIDING KNOWLEDGE THAT BRIDGES	—
	SCIENCE AND POLICY IN THE FIELDS OF ENVIRONMENT AND DEVELOPMENT, AND BY	<u>_</u>
	CONDUCTING INNOVATIVE, INTEGRATED APPLIED SYSTEMS RESEARCH, WHICH FORMS	
	THE BASIS FOR POLICY ADVICE, CAPACITY BUILDING, DECISION SUPPORT AND	
	POLICY IMPLEMENTATION.	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$))
		—
		—
		—
		—
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)	_)
		—
		—
		—
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses 4,706,329.	
4e	Total program service expenses 4,706,329. Form 990 (20)	201
222000	Form 990 (20)	<u> ~</u> 2)
202004	3	

15401027 807818 ST09308 2022.04030 STOCKHOLM ENVIRONMENT INSTI ST093081

STOCKHOLM ENVIRONMENT INSTITUTE U.S., INC.

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		37	
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			v
	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			x
-	during the tax year? If "Yes," complete Schedule C, Part II	4		<u> </u>
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 Rev. Proc. 98-19? <i>If</i> "Yes," <i>complete Schedule C, Part III</i>	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	5		- 23
0	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
'	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	<u>'</u>		
Ū	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	-		
Ū	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
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		Х
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		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	X	
	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			37
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		х	
	Schedule D, Parts XI and XII	12a	A	
D	Was the organization included in consolidated, independent audited financial statements for the tax year?	104		x
10	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If</i> "Yes," <i>complete Schedule E</i>	13 14a		X
	Did the organization maintain an office, employees, or agents outside of the United States?	144		- 23
D	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	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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Form 990 (2022)

Part IV Checklist of Required Schedules

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	990 (2022) U.S., INC. 20-465	<u>59308</u>	P	age 4
Pa	t IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	. 23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	. 24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	. 24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	. 24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	. 24d		
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	. 25 a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes, " complete			
	Schedule L, Part I	. 25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	. 26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	1		
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	. 27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	. 28 a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	. 28 b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?If			
	"Yes," complete Schedule L, Part IV	. 28 c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M			X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	. 30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	. 31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes, " complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	. 33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1			X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	. 35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	. 36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	. 37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
D-	Note: All Form 990 filers are required to complete Schedule O t V Statements Regarding Other IRS Filings and Tax Compliance	38	X	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
		L 4	Yes	No
		0		
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b	-		
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
00000	(gambling) winnings to prize winners?	1 C	000	(2022)
23200	4 12-13-22 5		1990	(2022)
	5			

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Form	990 (2022) U.S., INC. 20-4659	308	P	age 5
Par	t 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 46			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	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		х
	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?	50 50		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	50		
Ua		60		x
h	any contributions that were not tax deductible as charitable contributions?	6a		
a	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	Ch		
-	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section $170(c)$.	-		x
	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		
	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	_		v
	to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year 7d			37
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	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		<u> </u>
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 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	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 12b			
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 13b			
с	Enter the amount of reserves on hand 13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	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			<u> </u>
	excess parachute payment(s) during the year?	15		x
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		1
	If "Yes," complete Form 6069.			
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232005 12-13-22

Form	990 (2022) U.S., INC.		20	-4659	308	Р	age 6
Pa	t VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 th	nrough	7b below	, and for a	"No"	respo	nse
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule C). See	instructior	1S.			
	Check if Schedule O contains a response or note to any line in this Part VI						X
Sec	tion A. Governing Body and Management						
						Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		8			
	If there are material differences in voting rights among members of the governing body, or if the governing						
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.						
b	Enter the number of voting members included on line 1a, above, who are independent	1b		8			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship						
	officer, director, trustee, or key employee?				2		X
3	Did the organization delegate control over management duties customarily performed by or under the		-				
	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 9				4		X
5	Did the organization become aware during the year of a significant diversion of the organization's ass				5		X
6	Did the organization have members or stockholders?				6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap						
	more members of the governing body?				7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s						
_	persons other than the governing body?				7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year					v	
	The governing body?				8a	X X	
b	Each committee with authority to act on behalf of the governing body?				8b	~	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea						x
800	organization's mailing address? If "Yes," provide the names and addresses on Schedule O				9		- 22
000		venue	; 000e.)			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?				10a	103	X
	If "Yes," did the organization have written policies and procedures governing the activities of such ch				100		
	and branches to ensure their operations are consistent with the organization's exempt purposes?				10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod				11a	Х	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	,	eg				
	Did the organization have a written conflict of interest policy? If "No," go to line 13				12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise				12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y						
	on Schedule O how this was done				12c	Х	
13	Did the organization have a written whistleblower policy?				13	Х	
14	Did the organization have a written document retention and destruction policy?				14	Х	
15	Did the process for determining compensation of the following persons include a review and approva	al by in	depender	nt			
	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		X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger						
	taxable entity during the year?				16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate		-	n			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ						
0	exempt status with respect to such arrangements?		<u></u>		16b		
-	tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed CA, MA						
17 19		nd 000		a 501(c)(3)			ablo
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, au for public inspection. Indicate how you made these available. Check all that apply.	iu 990		1001(0)(3	is only	, avail	aule
	Image: The public inspection. Indicate how you made these available. Check all that apply. Image: The public inspection. Indicate how you made these available. Check all that apply. Image: The public inspection. Indicate how you made these available. Check all that apply. Image: The public inspection. Indicate how you made these available. Check all that apply. Image: The public inspection. Indicate how you made these available. Check all that apply. Image: The public inspection. Indicate how you made these available. Check all that apply. Image: The public inspection. Indicate how you made these available. Check all that apply. Image: The public inspection. Indicate how you made these available. Check all that apply. Image: The public inspection. Indicate how you made these available. Check all that apply. Image: The public inspection. The publi	on Sc	hedule ())				
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co		,	nolicy an	d finar	Icial	
	statements available to the public during the tax year.			peney, ar	- 11101		
20	State the name, address, and telephone number of the person who possesses the organization's bo	oks an	d records				
	BONNIE COCKMAN - $(617) - 627 - 3786$						
	11 CURTIS AVENUE, SOMERVILLE, MA 02144						
23200	§ 12-13-22				Form	990	(2022)
	7						,

^{2022.04030} STOCKHOLM ENVIRONMENT INSTI STO93081

STOCKHOLM	ENVIRONMENT	INSTITUTE

	/									
Part VII	Coi	mpensatio	n of	Officers,	Directors,	Trustees,	Key	Employees,	Highest	Compen
	Em		nd In	donondo	ont Contrad	atore				

Employees, and Independent Contractors

Form 990 (2022)

U.S., INC.

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

List all of the organization's current key employees, if any. See the instructions for definition of "key 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)	T		(0	C)			(D)	(E)	(F)
Name and title	Average	(-1		Pos	ition			Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson i	than is bot	h an	compensation	compensation	amount of
	week		cer an	nd a d	irecto	or/trus	tee)	from	from related	other
	(list any	Individual trustee or director						the	organizations	compensation
	hours for	or di	e e			ated		organization	(W-2/1099-MISC/	from the
	related	ustee	truste		e	suadu		(W-2/1099-MISC/	1099-NEC)	organization
	organizations below	ual tr	ional) yoldr	t con /ee	_	1099-NEC)		and related organizations
	line)	ndivid	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizationo
(1) CHARLES HEAPS	40.00	-		0	×	тə	ш			
SR SCIENTIST		1			х			181,795.	0.	30,233.
(2) MICHAEL LAZARUS	40.00									
PRESIDENT/SR SCIENTIST		1		X				184,303.	0.	12,837.
(3) SIVAN KARTHA	40.00							-		
SR SCIENTIST		1				Х		148,601.	0.	30,389.
(4) ANNETTE HUBER-LEE	40.00									
SR SCIENTIST					Х			150,378.	0.	27,422.
(5) JOHN SIEBER	40.00									
CLERK/SR SCIENTIST				Х				154,403.	0.	14,751.
(6) BONNIE COCKMAN	40.00									
TREASURER, DIR. OF FINANCE				Х				154,690.	0.	11,552.
(7) JASON VEYSEY	40.00								_	
SR SCIENTIST						Х		138,086.	0.	28,093.
(8) CHARLES YOUNG	40.00								_	
SR SCIENTIST						Х		147,781.	0.	17,113.
(9) MARIA ESCOBAR-ARIAS	40.00									
SR SCIENTIST						Х		143,760.	0.	20,576.
(10) DERIK BROEKHOFF	40.00							100.000		< 0 T 0
SR SCIENTIST	1 1 0 0					х		139,396.	0.	6,970.
(11) SUSAN JULIUS	1.00									•
DIRECTOR	1 00	X						0.	0.	0.
(12) EILEEN QUIGLEY	1.00	.,							0	0
DIRECTOR	1 00	X						0.	0.	0.
(13) DENNIS MCLERRAN, J.D.	1.00							0	0	0
DIRECTOR	1.00	X						0.	0.	0.
(14) ELIZABETH SODERSTROM, PH.D.	1.00	x						0.	0.	0.
DIRECTOR	1.00							0.	0.	0.
(15) MANS NILSSON	1.00	x						0.	0.	0.
CHAIR (16) LINDA ABRIOLA, PH.D.	1.00	^						0.	0.	0.
(16) LINDA ABRIOLA, PH.D. DIRECTOR	1.00	x						0.	0.	0.
(17) RACHEL CLEETUS	1.00	<u> </u>						0.	0.	0.
DIRECTOR	1.00	x						0.	0.	0.
	1	1 27	<u> </u>		L			0.	0.	Form 990 (2022)
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8 2022.04030 STOCKHOLM ENVIRONMENT INSTI STO93081

STOCKHOLI		ONI	ME1	T	II	NSI	'I'	TUTE	20-46	E 0 '	200	D 0
Form 990 (2022) U.S., INC Part VII Section A. Officers, Directors, Trus										59.	508	Page 8
		ploy I	ees			gne	st C					<u></u>
(A) Name and title	(B) Average hours per week (list any	box offi	not c , unle	ss pe	ition more rson i	than is bot pr/trus	n an	(D) Reportable compensation from	(E) Reportable compensation from related		Estin amo ot	F) nated unt of her
	hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MIS(1099-NEC)		fron organ and r	nsation n the ization elated zations
(18) NICOLAS DI SBROIAVACCA DIRECTOR	1.00	x						0.		ο.		0.
		-										
		-										
1b Subtotal c Total from continuation sheets to Part V								1,543,193.		0.	199	,936. 0.
d Total (add lines 1b and 1c)								1,543,193.		0.	199	,936.
2 Total number of individuals (including but n compensation from the organization								eceived more than \$100	,000 of reportable)		17
3 Did the organization list any former officer,	director trust	ee l		omo	love		hic	hest compensated emr	lovee on	Г	Y	es No
line 1a? If "Yes," complete Schedule J for s	uch individual										3	X
and related organizations greater than \$15	0,000? If "Yes,	" co	mple	ete S	Sche	edule	Ji	for such individual			4	x
5 Did any person listed on line 1a receive or a rendered to the organization? <i>If "Yes," com</i>	-				-			-			5	X
Section B. Independent Contractors 1 Complete this table for your five highest co	mpensated in	depe	ende	ent c	ontr	racto	ors 1	that received more than	\$100.000 of com	oensa	ation fro	
the organization. Report compensation for	•	•						n the organization's tax				
(A) Name and business			<u> </u>	201				(B) Description of s	ervices	C	(C) ompens	ation
STANTEC CONSULTING SERVIC STREET, SUITE 1900, SACRA		-						CONSULTING			163	,919.
2 Total number of independent contractors (i \$100,000 of compensation from the organi	•	iot li	mite	a to		se lis 1	stec	a above) who received m	iore than		- 00)(2022)

			2022) U.S., INC.				20-4659	308 Page 9
Pa	rt \	VIII						
			Check if Schedule O contains a response	or note to any lir	ne in this Part VIII (A)	(B)	(C)	[] (D)
					Total revenue	Related or exempt function revenue	Unrelated	Revenue excluded from tax under
S O								sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1		Federated campaigns 1a		4			
<u> </u>			Membership dues 1b		4			
fts,			Fundraising events 1c	711 616	-			
nila,			Related organizations 1d 1,	711,646.71,803.	-			
Sin				/1,005.	-			
her		T	All other contributions, gifts, grants, and similar amounts not included above 11 1f 2,	388,721.				
Ģţi		~	Noncash contributions included in lines 1a-1f 1g \$		1			
Con		-	Total. Add lines 1a-1f		4,172,170.			
				Business Code				
ø	2	а	CONTRACT REVENUE		1,175,783.	1,175,783.		
Program Service Revenue	-	b	LICENSE REVENUE	900099	496,027.	496,027.		
Sei		с						
am		d						
ogr		е						
P		f	All other program service revenue					
		g	Total. Add lines 2a-2f		1,671,810.			
	3		Investment income (including dividends, inter	est, and				
	other similar amounts)				28,931.			28,931.
	4 Income from investment of tax-exempt bond p							
	5		Royalties					
			(i) Real	(ii) Personal	-			
	6		Gross rents <u>6a</u> 13,000		4			
					-			
			Rental income or (loss) [6c] 13,000. Net rental income or (loss)		13,000.			13,000.
	7		Gross amount from sales of (i) Securities	(ii) Other				
	•		assets other than inventory 7a					
		b	Less: cost or other basis					
an			and sales expenses 7b					
evenue		с	Gain or (loss)					
Ê		d	Net gain or (loss)					
Other	8	а	Gross income from fundraising events (not					
ò			including \$ of					
			contributions reported on line 1c). See					
			Part IV, line 18 8a Less: direct expenses 8b		-			
			Less: direct expenses 8b Net income or (loss) from fundraising events					
	٩		Gross income from gaming activities. See					
	Ū		Part IV, line 19					
		b	Less: direct expenses 9b					
			Net income or (loss) from gaming activities					
	10		Gross sales of inventory, less returns					
			and allowances 10	a				
		b	Less: cost of goods sold 10	5				
		с	Net income or (loss) from sales of inventory					
sn			MICCELLANDOUC	Business Code	211	211		
oeu Ine	11		MISCELLANEOUS	900099	311.	311.		
ella		b						
Miscellaneous Revenue		c d	All other revenue					
Σ			Total. Add lines 11a-11d		311.			
	12		Total revenue. See instructions		5,886,222.	1,672,121.	0.	41,931.
23200								Form 990 (2022)

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U.S., INC. Form 990 (2022)

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).

Doi	Check if Schedule O contains a respons not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		ľ		·
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	014 076			
	trustees, and key employees	914,876.	544,486.	272,938.	97,452
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	3,008,855.	2,452,963.	209,255.	216 627
7	Other salaries and wages	3,000,000.	2,452,903.	209,255.	346,637
8	Pension plan accruals and contributions (include	145,947.	119,600.	10,148.	16,199
~	section 401(k) and 403(b) employer contributions)	332,950.	255,104.	40,018.	37,828
9 10	Other employee benefits	308,171.	236,041.	37,264.	34,866
10	Payroll taxes	500,171.	230,041.	57,204.	54,000
11	Fees for services (nonemployees):				
a L		17,912.		17,912.	
b		31,000.		31,000.	
	Accounting	51,000.		51,000	
	Lobbying Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
י מ	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A), amount, list line 11g expenses on Sch 0.)	704,111.	616,998.	76,113.	11,000
12	Advertising and promotion	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	020,000		
13	Office expenses	142,677.	81,367.	61,310.	
14	Information technology	,			
15	Royalties				
16	Occupancy	203,128.	155,584.	24,562.	22,982
17	Travel	193,124.	182,257.	10,867.	,
18	Payments of travel or entertainment expenses			,	
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
 22	Depreciation, depletion, and amortization	8,390.		8,390.	
23	Insurance	29,031.		29,031.	
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25. column (A).				
	amount, list line 24e expenses on Schedule 0.)				
а	MISCELLANEOUS	55,745.	44,269.	11,476.	
b	PROFESSIONAL DEVELOP.	23,245.	17,660.	5,585.	
с					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	6,119,162.	4,706,329.	845,869.	566,964
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

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2022.04030 STOCKHOLM ENVIRONMENT INSTI STO93081

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Form	990	(2022)

U.S., INC.

	990 (20-	4659308 Page 11
Pa	tΧ	Balance Sheet					
		Check if Schedule O contains a response or not	e to any line in this Part X	<u></u>			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1,185,498.	1	759,941.
	2	Savings and temporary cash investments			2,459,464.	2	2,838,395.
	3	Pledges and grants receivable, net			115,643.	3	562,746.
	4	Accounts receivable, net		1,583,765.	4	882,058.	
	5	Loans and other receivables from any current or	F				
		trustee, key employee, creator or founder, subst	_				
		controlled entity or family member of any of thes	e persons			5	
	6	Loans and other receivables from other disquali					
		under section 4958(f)(1)), and persons described	d in section 4958(c)(3)(B)			6	
ts	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ÿ	9	Prepaid expenses and deferred charges			36,515.	9	68,258.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	0.			
	b	Less: accumulated depreciation	10b	0.	8,390.	10c	0.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line 1	1			12	
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			0.	15	491,772.
	16	Total assets. Add lines 1 through 15 (must equa			5,389,275.	16	5,603,170.
	17	Accounts payable and accrued expenses			758,144.	17	737,803.
	18	Grants payable				18	000 000
	19	Deferred revenue			656,216.	19	896,379.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete I				21	
ies	22	Loans and other payables to any current or form		_			
jit		trustee, key employee, creator or founder, subst					
Liabilities		controlled entity or family member of any of thes				22	
	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated		····· -		24	
	25	Other liabilities (including federal income tax, par parties, and other liabilities not included on lines					
					47,817.	25	506,980.
	26	of Schedule D			1,462,177.	25 26	2,141,162.
	20	Organizations that follow FASB ASC 958, che			1,102,11,1	20	2/11/1020
ses		and complete lines 27, 28, 32, and 33.		_			
anc	27	Net assets without donor restrictions		- 1	3,231,516.	27	2,872,393.
Bal	28	Net assets with donor restrictions			695,582.	28	589,615.
pu		Organizations that do not follow FASB ASC 9					,
μ		and complete lines 29 through 33.		_			
s or	29	Capital stock or trust principal, or current funds				29	
sets	30	Paid-in or capital surplus, or land, building, or eq				30	
Ast	31	Retained earnings, endowment, accumulated in				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			3,927,098.	32	3,462,008.
-	33	Total liabilities and net assets/fund balances			5,389,275.	33	5,603,170.
							Form 990 (2022)

Form **990** (2022)

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	1990 (2022) U.S., INC.	20-465	9308	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,88		
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,11		
3	Revenue less expenses. Subtract line 2 from line 1	3	-232		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3,92	7,0	98.
5	Net unrealized gains (losses) on investments	5			
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	-232	<u>2,1</u>	50.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	3,462	2,0	08.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	e O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		. 2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?		. 2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	nedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				<u>-</u> -
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		. 3 a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			1
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		. 3b		

Form **990** (2022)

232012 12-13-22

SC	HEC	DULE A					OMB No. 1545-0047							
(Form 990) Public Charity Status and							2022							
(Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.													
Depar	tment c	f the Treasury			47(a)(1) nonexempt cha ttach to Form 990 or Fo					Open to Public				
		nue Service						formation.		Inspection				
Nam	e of t	he organizati	Go to www.irs.gov/Form990 for instructions and the latest information. tion STOCKHOLM ENVIRONMENT INSTITUTE Employer							Employer identification number				
		-		, INC.					2	0-4659308				
Pa	rt I	Reason			(All organizations must o	complete t	his part.) S	See instruction	ctions.					
The	organ				(For lines 1 through 12, o									
1					on of churches describe									
2			described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)											
3			or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).											
4		•	•		, onjunction with a hospita			•	.)(iii). Enter	the hospital's name,				
		city, and stat		·										
5		An organizati	on operated f	or the benefit of a co	ollege or university owne	d or opera	ted by a g	overnmental	unit descrik	oed in				
				Complete Part II.)										
6		A federal, sta	te, or local go	vernment or govern	mental unit described in	section 17	70(b)(1)(A)	(v).						
7	X	An organizati	on that norma	ally receives a substa	antial part of its support	from a gov	ernmenta	l unit or from	the general	public described in				
		section 170(b)(1)(A)(vi). (C	Complete Part II.)										
8		A community	trust describe	ed in section 170(b))(1)(A)(vi). (Complete Par	t II.)								
9		An agricultura	al research org	ganization described	d in section 170(b)(1)(A)	(ix) operate	ed in conju	unction with a	land-grant	college				
		or university	or a non-land-	grant college of agrie	culture (see instructions)	. Enter the	name, cit	y, and state o	f the colleg	e or				
		university:												
10		An organizati	on that norma	ally receives (1) more	e than 33 1/3% of its sup	port from	contributio	ons, members	ship fees, a	nd gross receipts from				
		activities rela	ted to its exer	npt functions, subje	ct to certain exceptions;	and (2) no	more tha	n 33 1/3% of	its support	from gross investment				
		income and u	inrelated busi	ness taxable income	e (less section 511 tax) fr	om busine	esses acqu	uired by the o	rganization	after June 30, 1975.				
		See section	509(a)(2). (Co	mplete Part III.)										
11		An organizati	on organized	and operated exclus	sively to test for public sa	afety. See	section 5	09(a)(4).						
12		An organizati	on organized	and operated exclus	sively for the benefit of, t	o perform	the function	ons of, or to c	arry out the	e purposes of one or				
		more publicly	supported or	rganizations describ	ed in section 509(a)(1) c	or section	509(a)(2).	See section	509(a)(3). (Check the box on				
		7	-	•••	of supporting organization				-					
а					supervised, or controlled									
			-		egularly appoint or elect	a majority	of the dire	ctors or trust	ees of the s	supporting				
		¬		complete Part IV, S										
b					d or controlled in connec									
			•		panization vested in the s	same perso	ons that co	ontrol or mana	age the sup	ported				
_		¬ ۲	()	st complete Part IV,			1			1				
С		•••	-	•	ng organization operated				ally integrate	ed with,				
ام		- ··	•	. , .	s). You must complete				أحرج والمحاصر					
d	L		-		porting organization oper ization generally must sa				-					
			-		mplete Part IV, Section	•		-	u an alleni	IVEI IESS				
е		- ·		,	written determination fro									
e	L		-		onally integrated support			а турет, туре	л, туре ш					
f	Ente													
g				n about the support										
		i) Name of supp		(ii) EIN	(iii) Type of organization	(iv) Is the orga	inization listed ing document?	(v) Amount o	f monetary	(vi) Amount of other				
		organizatior			(described on lines 1-10 above (see instructions))	Yes	No	support (see ii	nstructions)	support (see instructions)				
Tota	1													

STOCKH	OLM	ENVIRONMENT	INSTITUTE
U.S.,	INC.		

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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 organizatio

fails to qualify under the tests listed below, please complete Part III.)

Schedule A (Form 990) 2022

Part II

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	2643406.	2455261.	3632598.	2384780.	4172170.	15288215.
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	2643406.	2455261.	3632598.	2384780.	4172170.	15288215.
	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)						395,041.
6	Public support. Subtract line 5 from line 4.						14893174.
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 4	2643406.	2455261.	3632598.	2384780.	4172170.	15288215.
8	Gross income from interest.	20101000	21352011	50525501	2001/001	11/21/01	192002191
0	,						
	dividends, payments received on						
	securities loans, rents, royalties,	9,827.	29,862.	10,357.	6,168.	28,931.	85,145.
•	and income from similar sources	5,027.	27,002.	10,337.	0,100.	20,751.	05,145.
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		F 10F	07 654	40 100	211	125 220
	assets (Explain in Part VI.)		5,125.	87,654.	42,139.		135,229.
11	Total support. Add lines 7 through 10						15508589.
12	Gross receipts from related activities,	· ·	,				,344,728.
13	First 5 years. If the Form 990 is for the	-	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3)	
	organization, check this box and stor						
	ction C. Computation of Publ						00.00
	Public support percentage for 2022 (14	96.03 %
	Public support percentage from 2021					15	95.17 %
16a	33 1/3% support test - 2022. If the o						
	stop here. The organization qualifies						
b	33 1/3% support test - 2021. If the o						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes	t - 2022. If the org	anization did not c	heck a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the fact	s-and-circumstanc	es test, check this	box and stop he	re. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	est. The organization	on qualifies as a pu	ublicly supported of	organization		
b	10% -facts-and-circumstances tes	t - 2021. If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or ⁻	17a, and line 15 is	10% or
	more, and if the organization meets the	ne facts-and-circur	nstances test, che	ck this box and st	op here. Explain in	n Part VI how the	
	organization meets the facts-and-circ	umstances test. Th	ne organization qu	alifies as a publicly	y supported organ	ization	
18	Private foundation. If the organization	n did not check a	<u>box on line 13, 16</u>	a, 16b, 17a, or 17t	o, check this box a	ind see instruction	ıs
						Sebedule A	(Form 990) 2022

232022 12-09-22

Section A. Public Su		(-) 0010	(1-) 0040	(2) 0000	(4) 0001	1 .	0000	(A T · · ·
alendar year (or fiscal year 1 Gifts, grants, contribu	· · · ⊢	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e)	2022	(f) Total
, O	,							
membership fees rece								
include any "unusual g	· · · · · · · · · · · · · · · · · · ·							
2 Gross receipts from a merchandise sold or s								
formed, or facilities ful								
any activity that is rela								
organization's tax-exe	mpt purpose							
3 Gross receipts from a	ctivities that							
are not an unrelated t	rade or bus-							
iness under section 5 ⁻	13							
4 Tax revenues levied for	or the organ-							
ization's benefit and e	ither paid to							
or expended on its be								
5 The value of services								
furnished by a govern								
the organization witho								
6 Total. Add lines 1 thro								
	-							
7a Amounts included on								
3 received from disquants included on lines 2	· · –							
from other than disqualified p								
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. (Subtrac								
Section B. Total Sup	port							
alendar year (or fiscal year	· · · –	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e)	2022	(f) Tota
9 Amounts from line 6	L							
10a Gross income from int								
dividends, payments r securities loans, rents								
and income from simil	ar sources							
b Unrelated business taxab								
(less section 511 taxes) (from businesses							
acquired after June 30, 1								
c Add lines 10a and 10k								
II Net income from unre						-		
activities not included								
whether or not the bu	siness is							
regularly carried on								
12 Other income. Do not or loss from the sale or								
assets (Explain in Part						_		
I3 Total support. (Add lines 9								
14 First 5 years. If the Fo	orm 990 is for the	organization's fir	rst, second, third,	fourth, or fifth tax y	ear as a sectior	n 501(c)(3)	organizatio	n,
check this box and st	op here	<u></u>						
Section C. Computa	tion of Public	Support Per	rcentage					
15 Public support percer	tage for 2022 (lir	ne 8, column (f), d	livided by line 13,	column (f))		15		
6 Public support percer								
Dection D. Computa						17		
Section D. Computa	reentage for LeL		'					
17 Investment income pe	rcentage from 20						and line 17	is not
Investment income perInvestment income per	-		ot check the hox	on line 1/1 and line	15 is more than			
 Investment income per Investment income per<	ts - 2022. If the c	organization did n						
 Investment income per Investment income per<	ts - 2022. If the c heck this box and	organization did n d stop here. The	organization quali	fies as a publicly su	pported organiz	zation		
 Investment income per Investment income per<	ts - 2022. If the c heck this box and ts - 2021. If the c	organization did n d stop here. The o organization did n	organization quali ot check a box or	fies as a publicly su n line 14 or line 19a,	pported organiz and line 16 is n	zation	33 1/3%, ar	nd
 Investment income per Investment income per<	ts - 2022. If the c heck this box and ts - 2021. If the c an 33 1/3%, chec	organization did n d stop here. The organization did n ck this box and sto	organization quali ot check a box or op here. The orga	fies as a publicly su n line 14 or line 19a, nization qualifies as	apported organi: and line 16 is n a publicly supp	zation nore than ported org	33 1/3%, ar ganization	nd
 Investment income per Investment income per<	ts - 2022. If the c heck this box and ts - 2021. If the c an 33 1/3%, chec	organization did n d stop here. The organization did n ck this box and sto	organization quali ot check a box or op here. The orga	fies as a publicly su n line 14 or line 19a, nization qualifies as	apported organi: and line 16 is n a publicly supp	zation nore than ported org nstructior	33 1/3%, ar ganization	nd

	- 1
	_

20-4659308 Page 3

Schedule A (Form 990) 2022 U.S., INC. Part III Support Schedule for Organizations Described in Section 509(a)(2)

U.S., INC.

1

Yes No

Schedule A (Form 990) 2022 Part IV Supporting Organizations

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

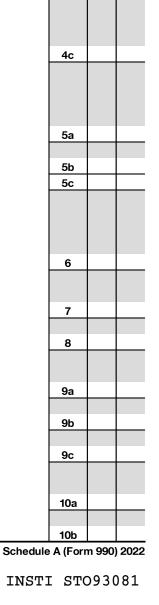
Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disgualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b



U.S., INC.

Sche	edule A (Form 990) 2022 U.S., INC.	20-465930)8 Pa	age 5
Ра	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's or directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	fficers, ported		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations	· ·	•	
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations	i	•	
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2				
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
-	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	stion E. Type III Functionally Integrated Supporting Organizations	0		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see inst	ructions)		
' a	The organization satisfied the Activities Test. Complete line 2 below.	uctions).		
a b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity.	tity (see instructiv	200	
с 2	Activities Test. Answer lines 2a and 2b below.		Yes	No
			103	
а	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	these supported organization(s) to which the organization was responsive? If res, then in Part Vi identity 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	0.5		
Ŀ	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
		2b		

- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- **a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "*No*" provide details in **Part VI.**
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If* "Yes," *describe in* **Part VI** *the role played by the organization in this regard.*

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3b Schedule A (Form 990) 2022

3a

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STOCKHOLM ENVIRONMENT INSTITUTE

	dule A (Form 990) 2022 U.S., INC.			20-4659308 _{Page} e
Ра	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	ng Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyir	ng trust on	Nov. 20, 1970 (explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus	t complete	e Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functiona	llv integrat	ed Type III supporting or	nanization (see

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990) 2022

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	dule A (Form 990) 2022 U.S., INC.			2	0-4659308 Page 7
Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations _{(continu}	ued)	
Secti	on D - Distributions			-	Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		1	
2	Amounts paid to perform activity that directly furthers exemption	ot purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	าร	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	he organization is responsive	e		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount		-	10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2022	าร	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
а	From 2017				
b	From 2018				
с	From 2019				
	From 2020				
e	From 2021				
f	Total of lines 3a through 3e				
	Applied to underdistributions of prior years				
	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
i	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
-	line 7: \$				
a	Applied to underdistributions of prior years				
-	Applied to 2022 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
Ũ	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
Ū	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2018				
	Excess from 2019				
-	Excess from 2020				
	Excess from 2020				
	Excess from 2022				

Schedule A (Form 990) 2022

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	Part IV, Seo line 1; Part	ction A, li IV, Sectio lines 5, 6	Information. Pro nes 1, 2, 3b, 3c, 4b on D, lines 2 and 3; a, and 8; and Part V,	, 4c, 5a Part IV	a, 6, 9a, 9b, 9c, 1 ′, Section E, lines	1a, 11b, a 1c, 2a, 2b	nd 11c; Par , 3a, and 3	rt IV, Sec b; Part V	tion B, lines 1 , line 1; Part V	and 2; Part I , Section B, I	V, Section C, ine 1e; Part V,
SCHEDU	ILE A,	PART	II, LINE	10,	EXPLANA	TION F	OR OT	HER 1	NCOME:		
MISCEL	LANEOU	S INC	COME								
2019 A	MOUNT:	\$	5,125.								
2020 A	MOUNT:	\$	7,104.								
2021 A	MOUNT:	\$	8,189.								
2022 A	MOUNT :	\$	311.								
FFCRA	WAGE C	REDI	Г								
2020 A	MOUNT :	\$	80,550.								
2021 A	MOUNT:	\$	33,950.								

Name of the organization STOCKHOLM ENVIRONMENT INSTITUTE Engloyer identification number 20-4659308 Path Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization asseed "Yes" on Form 990, Part IV, line 8. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of yes (a) Donor advised funds (b) Funds and other accounts 2 Aggregate value of end form (sum year) (a) Donor advised funds (b) Funds and other accounts 3 Aggregate value of end of year (a) Donor advised funds (b) Funds and other accounts 4 Aggregate value of end form (sum year) (b) Funds and other accounts (b) Funds and other accounts 6 Dot the organization form all donors advisor, or for any other purpose conterning imperenceiod prints benefit? No 7 Propercipit of conservation accounts in the based of the donor of a control? No 8 Dot the organization form all grantes, donora, successor of a construction of a batchrisky important land area 1 Propercipit of public use (for example, increation or education) Preservation of a batchrisky important land area 2 Complete lines 2a through 2a if the organization held a qualified conservation accompation is accompation in the form at a conservation accompation (acconspate accompation (accompation (accompate acc	(Forr	HEDULE D n 990) ment of the Treasury I Revenue Service	Complete if the orga Part IV, line 6, 7, 8, 9, 10 A	al Financial Statements nization answered "Yes" on Form 990, , 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ttach to Form 990. 0 for instructions and the latest information	OMB No. 1545-0047 2022 Open to Public Inspection
Pert Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete If the organization answered "Yes' on Form 990, Part IV, Jie 6. 1 Total number at end of year (a) Donor advised funds (b) Funds and other accounts 2 Aggregate value of contributions to (during year) (a) Contro advised funds (b) Funds and other accounts 3 Aggregate value of contributions to (during year) (a) Contro advised funds (b) Funds and other accounts 4 Aggregate value of controlutions to (during year) (c) Controlutions to (during year) (c) Controlutions to (during year) 5 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charalise purposes and not for the banefit of the donor or donor advisor, or for any other purpose conforming impermissible pivate benefit? Yes No Pertexcition of addition to the banefit of the organization inscreted "Yes" on Fom 980, Part IV, line 7. Preservation faster organization induces and advisor, or for any other purpose conforming impermissible pivate benefit? Yes No Pertexcition of addition of the banefit of the anglitation (chick all that appl). Preservation faster for points passe Yes No 2 Complete lines 2a through 2b of the organization inscreted "Yes" on Fom 980, Part IV, line 7. Preservation faster for organizatins advisor advisor advisor advisor advisor advisor advisor advisor	Nam	e of the organizatio		ENT INSTITUTE	
orgänization answered "Yes" on Form 980, Part IV, line 0. (a) Donor advised funds (b) Funds and other accounts (c) Funds and other accounts (c) Aggregate value of contributions to (during year) (c) Aggregate value of grants from (during year) (c) Aggregate value of grants from (during year) (c) Aggregate value of and of year (c) Aggregate value of and of year (c) Aggregate value of grants from (during year) (c) Aggregate value of grants from (during year) (c) Aggregate value of grants from (during year) (c) Dot the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantes, donors, and donor advisor, for any other purpose conferring morrinsolation inform all grantes, donors, and donor advisor, or for any other purpose conferring morrinsolate pirvate benefit? Conservation Easements had by the organization (chard at linta app), Perservation of a historical lymoptimum link and area Protection of ratural handlat Protecevation of a control historic structure Preservation of open space 2 Complete inte cognization (chard and public use (for example, recreation or education) Preservation of a control historic structure Preservation of conservation easements (d) but the organization (chard and bated in the form of a control historic structure Preservation of conservation easements (d) but the organization intervent is located (d) conservation easements (d) addition all property subject to conservation easements (d) addition all property subject to conservation easements (d) addition all property subject to conservation easements (d) and encomervation easements in codified, transferred, released, extreguland, or terminated by the organization during the year (d) Number of conservation easements in codified, transferred, released, extreguland, or terminated by the commutation during the year Number of conse					
I Total number at and of year (a) Donor advised funds (b) Funds and other accounts I Total number at and of year (b) Funds and other accounts Aggregate value of contributions to (during year) (c) Aggregate value at and of year (c) S Dot the organization inform all donors and donor advisors in writing that grant funds can be used only to charatable purposes and not for the bonefit to the donor of and values in any other purposes conferring importantiation is properly, subject to the corre advisor, or for any other purposes conferring importantiation accounts of the donor of any other purposes conferring important land area Protection of natural habitat Preservation easements held by the organization (account of velocity) (Perservation of a historically important land area Protection of natural habitat Preservation easements held by the organization account of the donor of donor advisor, or term you then purpose Protection of natural habitat Preservation of a historically important land area Protection of natural habitat Preservation easements Protection of conservation easements 2a A Number of conservation easements 2a A Number of conservation easements an ceffied historic structure included in (a) 2a A Number of conservation easements in colfied material structure included in (a) 2a A Number of conservation easeaments in colfied material structure included	Pai	-	-		r Accounts.Complete if the
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and section 170(h)(4)(B)(ii)? Yes No 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Image: Complete if the organization statements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, no to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part X \$ 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported	8	Does each conserv	 ration easement reported on line 2(d) aboy	ve satisfy the requirements of section 170(h)(4	4)(B)(i)
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balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part X (ii) Assets included in Form 990, Part X (iii) Assets included in Form 990, Part X (iii) Assets included on Form 990, Part X (iii) Assets included on Form 990, Part X (ii) Bevenue included on Form 990, Part X (ii) Assets included in Form 990, Part X (iii) Assets included in Form 990, Part X (ii) Assets included on Form 990, Part X (ii) Assets included on Form 990, Part X (iii) Assets included in Form 990, Part X (iii) Assets included in Form 990, Part X (iii) Assets included in Form 9	9				
organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part XIII ine 1 \$ (ii) Assets included in Form 990, Part X \$ 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part XIII, line 1 \$ b Assets included in Form 990, Part X \$ b Assets included in Form 990, Part X \$ b Assets included in Form 990, Part X <th></th> <th></th> <th>•</th> <th></th> <th></th>			•		
Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:				-	
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service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1	1a	If the organization e	elected, as permitted under FASB ASC 95	58, not to report in its revenue statement and	balance sheet works
 b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part X b Assets included in Form 990, Part X tha For Paperwork Reduction Act Notice, see the Instructions for Form 990. 2202051 09-01-22 		of art, historical trea	asures, or other similar assets held for pul	olic exhibition, education, or research in furthe	erance of public
 art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part X b Assets included in Form 990, Part X c LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2022 		service, provide in l	Part XIII the text of the footnote to its final	ncial statements that describes these items.	
provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X 2 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 2 Schedule D (Form 990) 2022	b	If the organization e	elected, as permitted under FASB ASC 95	58, to report in its revenue statement and bala	ance sheet works of
 (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2022 		art, historical treasu	ures, or other similar assets held for public	exhibition, education, or research in furthera	ance of public service,
(ii) Assets included in Form 990, Part X \$ 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: • a Revenue included on Form 990, Part VIII, line 1 \$ b Assets included in Form 990, Part X \$ LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2022 232051 09-01-22		-			
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 232051 09-01-22					
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a Revenue included on Form 990, Part VIII, line 1 \$	2				in, provide
b Assets included in Form 990, Part X \$ LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. \$ 232051 09-01-22		-		-	•
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2022 232051 09-01-22					
232051 09-01-22					
			auction Act Notice, see the Instruction	s tor form 990.	Schedule D (Form 990) 2022
	23205	1 09-01-22		26	

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	dule D (Form 990) 2022 U.S., I							20-46			age 2
Par	t III Organizations Maintaining C									nued)	
3	Using the organization's acquisition, accessi	on, and other record	ls, checl	k any of the	e following that i	make się	gnificant	use of its			
	collection items (check all that apply):		. — .								
a	Public exhibition	c			change program	ו					
b	Scholarly research	e		Other							
c	Preservation for future generations										
4	Provide a description of the organization's co	-		-	-			ose in Par	t XIII.		
5	During the year, did the organization solicit o								V		7
Par	to be sold to raise funds rather than to be ma t IV Escrow and Custodial Arran										No
	reported an amount on Form 990, Par	t X, line 21.		0				, Fait IV,	iii ie 9, 0		
1 a	Is the organization an agent, trustee, custodi								7.		٦.,
	on Form 990, Part X?							L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing t	able:					Amour	+	
	De sieurie e halan as								Amour	L	
	Beginning balance										
	Additions during the year										
	Distributions during the year										
t Oo	Ending balance								Yes		No
	Did the organization include an amount on Fe If "Yes," explain the arrangement in Part XIII.						• • • • • • • •	L			
Par											
		(a) Current year		rior year	(c) Two years			ears back	(e) Fou	r vears	back
1a	Beginning of year balance	(()	,			- , ,		(-)	<u> </u>	
	Contributions										
	Net investment earnings, gains, and losses										
	Grants or scholarships										
	Other expenditures for facilities										
e											
f	and programs										
	Administrative expenses										
-	End of year balance Provide the estimated percentage of the curr	ant year and balance	o (lino 1	a oolumn (
2	Board designated or quasi-endowment			y, column (a)) Helu as.						
	Permanent endowment	%	_%								
		⁷⁰									
C	The percentages on lines 2a, 2b, and 2c sho										
30	Are there endowment funds not in the posse		ation the	t are held a	and administere	d for th	0				
Ja	organization by:			it are new a			6			Yes	No
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations										
h	If "Yes" on line 3a(ii), are the related organizations										
4	Describe in Part XIII the intended uses of the				• • • • • • • • • • • • • • • • • • • •				00		
-	t VI Land, Buildings, and Equipm			unus.							
	Complete if the organization answered		0, Part IV	/, line 11a. :	See Form 990, I	Part X, li	ine 10.				
	Description of property	(a) Cost or o			t or other		cumulate	ed be	(d) Boo	k valu	e
		basis (investr		• •	(other)	. ,	reciation		(-)		-
1 a	Land										
	Buildings										
	Leasehold improvements										
	Equipment										
	Other										
-	Add lines 1a through 1e. (Column (d) must e		X, colun	nn (B), line	10c.)						0.

Schedule D (Form 990) 2022

STOCKHOLM ENVIRONMENT INSTITUTE

Schedule D (Form 990) 2022 U.S., INC.		20	-4659308 Page 3
Part VII Investments - Other Securities. Complete if the organization answered "Yes	an Form 990 Part IV line	11b See Form 990 Part X line 12	
(a) Description of security or category (including name of security)		(c) Method of valuation: Cost or en	d-of-vear market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes	s" on Form 990, Part IV, line		
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes		e 11d. See Form 990, Part X, line 15.	
	a) Description		(b) Book value
(1) OPERATING RIGHT OF USE A	SSET		491,772.
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) Total. (Column (b) must equal Form 990, Part X, col. (B) l	ino 15)		491,772.
Part X Other Liabilities.	ine 15.)		491,1120
Complete if the organization answered "Yes	s" on Form 990 Part IV line	11e or 11f See Form 990 Part X line 2	5
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(1) PERATING LEASE LIABILIT	Y		506,980.
(3)	-		
(4)			
(5)			
(6)			
(7)			
(8)			
(-)			
(9)			
(9) Total. (Column (b) must equal Form 990, Part X, col. (B) l	ine 25.)		506,980.

Schedule D (Form 990) 2022

232053 09-01-22

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тт	a	TNO		

20-4659308 Page

-	edule D (Form 990) 2022 U.S., INC.				4659308 Page 4			
Pa	rt XI Reconciliation of Revenue per Audited Financial Stateme	ents Witl	h Revenue per	Returr	1.			
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.							
1	Total revenue, gains, and other support per audited financial statements			1	5,886,222.			
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:							
а	Net unrealized gains (losses) on investments	2a						
b	Donated services and use of facilities	2b						
с	Recoveries of prior year grants							
d	Other (Describe in Part XIII.)	2d						
е				2e	0.			
3	Subtract line 2e from line 1			3	5,886,222.			
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:							
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a						
b	Other (Describe in Part XIII.)							
	Add lines 4a and 4b			4c	0.			
С			5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)					
с 5				5	5,886,222.			
	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 12.</i>)	ents Wi			rn.			
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	ents Wi	th Expenses pe					
Pa	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 12.</i>) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	ents Wi	th Expenses pe	r Retu	rn.			
Pa 1	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements	ents Wi	th Expenses pe	r Retu	rn.			
Pa 1 2	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	ents Wit	th Expenses pe	r Retu	rn.			
Pa 1 2 a	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	ents Wi	th Expenses pe	r Retu	rn.			
Pa 1 2 a	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other losses	2a 2b 2c	th Expenses pe	r Retu	rn. 6,351,312.			
Pa 1 2 a b c	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Other (Describe in Part XIII.)	ents Wit	th Expenses pe	r Retu	rn. 6,351,312. 232,150.			
Pa 1 2 a b c d	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	ents Wit 2a 2b 2c 2d	th Expenses pe	r Retu	rn. 6,351,312.			
Pa 1 2 b c d e	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Other (Describe in Part XIII.)	ents Wit 2a 2b 2c 2d	th Expenses pe	r Retu	rn. 6,351,312. 232,150.			
Pa 1 2 a b c d e 3	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	2a 2b 2c 2d	th Expenses pe	r Retu	rn. 6,351,312. 232,150.			
Pa 1 2 a b c d e 3 4	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	ents Wit	th Expenses pe	r Retu	rn. 6,351,312. 232,150.			
Pa 1 2 3 4 4	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	ents Wit	th Expenses pe	r Retu	rn. 6,351,312. 232,150. 6,119,162. 0.			
Pa 1 2 a b c d e 3 4 a b	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	ents Wit	th Expenses pe	r Retu 1 2e 3 4c	rn. 6,351,312. 232,150. 6,119,162.			
Pa 1 2 a b c d e 3 4 a b c 5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b	ents Wit	th Expenses pe	r Retu 1 2e 3 4c	rn. 6,351,312. 232,150. 6,119,162. 0.			

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

PART XII, LINE 2D - OTHER ADJUSTMENTS:

FOREIGN CURRENCY EXCHANGE LOSS

232,150.

232054 09-01-22

Dependent metazy Open to Full Open to Full Name of the organization Coto www.f.south/ORMSPD for instructions and the latest information. Coto Second	SCHEDULE F (Form 990)			ivities Outside the Ur Inswered "Yes" on Form 990, Part IV			OMB No. 1545-0047
Name of the organization Employer identification number STOCKHOLM ENVIRONMENT INSTITUTE 20-465930.8 Part I General Information on Activities Outside the United States. Complete if the organization number dryss on Form 980, Part IV, Ime 14b. 1 For grantmakers. Describe in Part V the organization maintain records to substantiate the amount of its grants and other assistance? IX Yes INV 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. (9) Forgene Pegion. (The following Part Line 3 table can be duplicated if additional space is needed.) (9) Total 5 3 Activities perflegion. (The following Part Line 3 table can be duplicated if additional space is needed.) (9) Total 5 4 (9) Region (10) Number of (10) (4) Addities conducted in the region on the region of the region on		Go to w	ww.irs.aov/Forn		information.		
Part I Ceneral Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 390, Part IV, Ine 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance. The grantmakers. Does the organization spacetare or assistance, and the selection orders used to award the grants or assistance? IX Yes No 2 For grantmakers. Does the organization in maintain records to substantiate the amount of its grants and other assistance outside the United States. IVes IN No 2 For grantmakers. Does the organization's procedures for monitoing the use of its grants and other assistance outside the United States. IVes IN No 3 Activities per Region. (the organization's procedures for monitoing the use of its grants and other assistance outside the United States. IVes (the its grants grants its aprogram service, difference of the organization's procedures grants to contractors IVes (the its grants grants its aprogram service, difference organization's procedures grants aprophysication's	Name of the organization STOCKHOLM ENVI						dentification number
Form 990, Part V, line 14b, I For grantmakers, Does the organization maintain neords to substantiate the amount of its grants and other assistance, the grantese leightifty for the grants or assistance outside the unded States. 2 For grantmakers, Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the Unded States. (a) Region (b) Number of comparison (c) Number of comparison (c) (c) Activities conducted in the region of the region (c) (c) Machine (c) (c) (c) Machine (c)		rmation on A	ctivities Ou	tside the United States Compl	ato if the organ		
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J Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (e) If activity listed in (d) service, describe specific type of service, describe specific type of service(s) in the region of the region of the region of the region of service (s) in the region of service(s) in the region of	1 For grantmakers. Doe	s the organization		-			X Yes 🗌 No
(a) Region (b) Number of offices in the region (c) Number of employees, agents, and agents, and agents, and agents, and recipients located in the region (c) Hactwity listed in (d) is a program service, describe spacific type of service(s) in the region (f) Total expenditures for and investments, or the region EAST ASIA AND THE PACIFIC 0 0 FROGRAM SERVICES RESEARCH & DEVELOPMENT 14,560. EUROPE (INCLUDING ICELAND & GREENLAND) 0 16 FROGRAM SERVICES RESEARCH & DEVELOPMENT 223,148. MIDDLE EAST AND NORTH AFRICA 0 4 FROGRAM SERVICES RESEARCH & DEVELOPMENT 31,873. SUB-SAHARAN AFRICA 0 4 FROGRAM SERVICES RESEARCH & DEVELOPMENT 48,934. SUB-SAHARAN AFRICA 0 4 FROGRAM SERVICES RESEARCH & DEVELOPMENT 17,175. NORTH AMERICA 0 FROGRAM SERVICES RESEARCH & DEVELOPMENT 14,523. SUB-SAHARAN AFRICA 0 FROGRAM SERVICES RESEARCH & DEVELOPMENT 14,523. NORTH AMERICA 0 FROGRAM SERVICES RESEARCH & DEVELOPMENT 14,523. NORTH AMERICA 0 FROGRAM SERVICES RESEARCH & DEVEL	-	cribe in Part V the	e organization's	procedures for monitoring the use of it	s grants and c	ther assistan	ce outside the
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3 a Subtotal 0 28 427,459. b Total from continuation sheets to Part I 0 1 12,988. c Totals (add lines 3a and 3b) 0 29 440,447.		0	0	PROGRAM SERVICES	RESEARCH &	DEVELOPME	NT 36,386.
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c Totals (add lines 3a and 3b) 0 29 440,447.		ו					
and 3b) 0 29 440,447.		0	1				12,988.
		tion Act Notice				Scher	

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			NMENT INSTITUTE		
Schedule F (Form 990)	U.S., IN	<u>C.</u>		20-465930) 8 Page 1
Part I Continuatio	on of Activitie		1. (Schedule F (Form 990), Part I, line 3	3)	
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
CENTRAL AMERICA AND					
THE CARIBBEAN	0	1	PROGRAM SERVICES	RESEARCH & DEVELOPMENT	12,988.
Totals		1			12,988.

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Schedule F (Form 990) 2022

U.S., INC.

20-4659308

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			recognized as charities by the				1	1
exempt 501(c)(3) orgaBenter total number of			or counsel has provided a sec			>		

Schedule F (Form 990) 2022

Page 2

STOCKHOLM	ENVIRONMENT	INSTITUTE
U.S., INC.	•	

20-4659308

Schedule F (Form 990) 2022

Part III	Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16
	Part III can be duplicated if additional space is needed.

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

Schedule F (Form 990) 2022

Page 3

U.S., INC.

Schedule F (Form 990) 2022

Part		Foreign Forms		
1	the	s the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign poration (see Instructions for Form 926)	Yes	X No
2	be r Rec	the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and ceipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a d. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	the	the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to tain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	qua Info	s the organization a direct or indirect shareholder of a passive foreign investment company or a lified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, ormation Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Ind (see Instructions for Form 8621)	Yes	X No
5	the	the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain eign Partnerships (see Instructions for Form 8865)	Yes	X No
6	"Yes	the organization have any operations in or related to any boycotting countries during the tax year? If s, " the organization may be required to separately file Form 5713, International Boycott Report (see fructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2022

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Schedule F (Form 990) 2022	U.S., INC.		INDITIOID	2	20-4659	308 _{Pa}
Part V Supplement	al Information					
	mation required by Part I, line expenditures per region); Part					
	per of recipients), as applicable					
					Cake to T	(Farm 000)
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sc	HEDULE J	Compensation Information	(OMB No.	1545-00)47
	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		20	77)
•	,	Compensated Employees		ΖU	_	-
Dana	tment of the Treesury	Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.	(Open to	o Publ	lic
	tment of the Treasury al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe	ection	
Nan	e of the organization	STOCKHOLM ENVIRONMENT INSTITUTE	Employer iden			mber
		U.S., INC.	20-465	<u>5930</u>	8	
Pa	rt I Question	s Regarding Compensation				
					Yes	No
1a	Check the appropri	ate box(es) if the organization provided any of the following to or for a person listed on Form	ı 990,			
	Part VII, Section A,	line 1a. Complete Part III to provide any relevant information regarding these items.				
	First-class or c	harter travel Housing allowance or residence for perso	nal use			
	Travel for com	panions Payments for business use of personal re	sidence			
	Tax indemnific	ation and gross-up payments Health or social club dues or initiation fee	s			
	Discretionary s	spending account Personal services (such as maid, chauffer	ur, chef)			
b		on line 1a are checked, did the organization follow a written policy regarding payment or				
	reimbursement or p	provision of all of the expenses described above? If "No," complete Part III to explain		1b		
2	Did the organization	n require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2		
3		ny, of the following the organization used to establish the compensation of the organization'				
		ector. Check all that apply. Do not check any boxes for methods used by a related organizat	ion to			
		ation of the CEO/Executive Director, but explain in Part III.				
	Compensation					
	·	compensation consultant Compensation survey or study				
	Form 990 of o	ther organizations	ommittee			
	D · · · · ·					
4		I any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
	organization or a re					x
a		e payment or change-of-control payment?		4a		X
b		eive payment from a supplemental nonqualified retirement plan?		4b		X
С		eive payment from an equity-based compensation arrangement?		4c		
	If tes to any of in	nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
	Only section 501/2	;)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	on			
5	contingent on the r					
а	Ũ			5a		x
		ation?		5b		X
~		or 5b, describe in Part III.				
6		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati	on			
-	contingent on the r					
а				6a		X
		ation?		6b		X
		or 6b, describe in Part III.				
7		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payment	S			
		nes 5 and 6? If "Yes," describe in Part III		7		X
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to t				
	•	ption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		X
9		id the organization also follow the rebuttable presumption procedure described in				
		1 53.4958-6(c)?		9		
LHA		eduction Act Notice, see the Instructions for Form 990.	Schedule	J (Forr	n 990) 2022

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Schedule J (Form 990) 2022

U.S., INC.

20-4659308

Page 2

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 of W	/-2 and/or 1099-MIS compensation	C and/or 1099-NEC	other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) CHARLES HEAPS	(i)	181,795.	0.	0.	9,359.	20,874.	212,028.	0.
SR SCIENTIST	(ii)	0.	0.	0.	0.	0.		0.
(2) MICHAEL LAZARUS	(i)	184,303.	0.	0.	9,099.	3,738.	197,140.	0.
PRESIDENT/SR SCIENTIST	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) SIVAN KARTHA	(i)	148,601.	0.	0.	6,978.	23,411.	178,990.	0.
SR SCIENTIST	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) ANNETTE HUBER-LEE	(i)	150,378.	0.	0.	7,781.	19,641.		0.
SR SCIENTIST	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) JOHN SIEBER	(i)	154,403.	0.	0.	7,375.	7,376.	169,154.	0.
CLERK/SR SCIENTIST	(ii)	0.	0.	0.	0.	0.	-	0.
(6) BONNIE COCKMAN	(i)	154,690.	0.	0.	7,428.	4,124.	166,242.	0.
TREASURER, DIR. OF FINANCE	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) JASON VEYSEY	(i)	138,086.	0.	0.	7,234.	20,859.	166,179.	0.
SR SCIENTIST	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) CHARLES YOUNG	(i)	147,781.	0.	0.	6,877.	10,236.	164,894.	0.
SR SCIENTIST	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) MARIA ESCOBAR-ARIAS	(i)	143,760.	0.	0.	7,396.	13,180.	164,336.	0.
SR SCIENTIST	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(i)							
	(ii)							
	(i)							
	(ii)							

STOCKHOLM	ENVIRONMENT	INSTITUTE
U.S., INC.	,	

Schedule J (Form 990) 2022

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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 J (Form 990) 2022

SCHEDULE O (Form 990)

(10111 330)

Department of the Treasury

Name of the organization

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.



20-4659308

U.S., INC.

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

STOCKHOLM ENVIRONMENT INSTITUTE

DECISION-SUPPORT TOOLS ARE USED WIDELY AROUND THE GLOBE.

SEI-US SUPPORTS DECISION-MAKING AND INDUCING CHANGE TOWARD SUSTAINABLE

DEVELOPMENT AROUND THE WORLD BY PROVIDING KNOWLEDGE THAT BRIDGES

SCIENCE AND POLICY IN THE FIELDS OF ENVIRONMENT AND DEVELOPMENT, AND BY

CONDUCTING INNOVATIVE, INTEGRATED APPLIED SYSTEMS RESEARCH, WHICH FORMS

THE BASIS FOR POLICY ADVICE, CAPACITY BUILDING, DECISION SUPPORT AND

POLICY IMPLEMENTATION.

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

THE AUDIT COMMITTEE REVIEWED AND APPROVED THE FORM 990, WHICH WAS THEN MADE AVAILABLE TO THE BOARD OF DIRECTORS TO REVIEW PRIOR TO ITS FILING.

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

THE DIRECTOR OF FINANCE REGULARLY REVIEWS ALL BUSINESS TRANSACTIONS TO DETERMINE IF CONFLICTS OF INTEREST MAY EXIST FOR BOARD MEMBERS, OFFICERS, KEY EMPLOYEES, AND ALL OTHER EMPLOYEES. ANY POTENTIAL CONFLICTS OF INTEREST ARE BROUGHT TO THE ATTENTION OF THE PRESIDENT, WHO THEN BRINGS THE ISSUE BEFORE THE BOARD AND REQUESTS THAT THE INTERESTED PERSON PRESENT THE ISSUE TO THE BOARD FOR REVIEW.

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

 THE COMPENSATION OF THE PRESIDENT IS APPROVED BY THE BOARD AFTER A REVIEW

 OF A PERIODIC COMPENSATION SURVEY DETAILING COMPENSATION OF OTHER SENIOR

 SCIENTIST OF SIMILAR ORGANIZATIONS AND OTHER COMPARABLE 990S. THE

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

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Schedule O (Form 990) 2022 Name of the organization STOCKHOLM ENVIRONMENT INSTITUTE	Page Employer identification numbe
U.S., INC.	20-4659308
PRESIDENT'S PAY IS COMPARABLE TO SENIOR SCIENTISTS IN THE	INDUSTRY.
FORM 990, PART VI, SECTION C, LINE 19:	
GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICIES ARE	AVAILABLE UPON
REQUEST. AUDITED FINANCIAL STATEMENTS AND FORM 990 ARE AV	AILABLE ON OUR
WEBSITE AND UPON REQUEST.	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
OTHER CONSULTING FEES:	
PROGRAM SERVICE EXPENSES	616,998
MANAGEMENT AND GENERAL EXPENSES	76,113
FUNDRAISING EXPENSES	11,000
FOTAL EXPENSES	704,111
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	704,111
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
FOREIGN CURRENCY EXCHANGE LOSS	-232,150
32212 10-28-22	Schedule O (Form 990) 202
40 .01027 807818 STO9308 2022.04030 STOCKHOLM ENVIRONM	ENT INSTI STO93081