Department of the Treasury Internal Revenue Service

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.

OMB No. 1545-0047 2022

Open to Public Inspection

<u>A</u>	For the	e 2022 <u>calendar year, or tax year beginning</u> , and ending			
<u>B</u>	Check if a	pplicable: C Name of organization		D Employer	r identification number
	Address c	mange EARTHRIGHTS INTERNATIONAL, INC.			MI/
一	Name cha	Doing business as		04-3	265555
二		Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone	
_	Initial retur			202-4	466-5188
	Final return terminated				
\Box	Amended	WASHINGTON DC 20006		G Gross rec	eipts\$ 6,053,064
=		r Name and address of principal officer.	H(a) Is this a gro	nun roturn for	subordinates? Yes X No
Ш	Application	pending KA HSAW WA (PSEUDONYM)	n(a) is this a give	Jup return for	
			H(b) Are all sub	ordinates inc	luded? Yes No
			If "No,"	' attach a list.	See instructions
ī	Tax-exem	npt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527			
	Website:	WWW.EARTHRIGHTS.ORG	H(c) Group exe	mption numb	er
<u></u>	Form of o		Year of formation: 1		M State of legal domicile: MA
	Part I	Summary			
_		driefly describe the organization's mission or most significant activities:			
Ģ		TO WORK WITH PEOPLE AROUND THE WORLD TO PROTECT HUMA	N RIGHTS	AND TH	 IR
JU.		ENVIRONMENT			
ž		ENVIRONIENI			
Governance			-04 6 %		
	1	Check this box if the organization discontinued its operations or disposed of more than 25	% of its net ass	1 1	1.0
∞ಶ		lumber of voting members of the governing body (Part VI, line 1a)			10
Activities	4 N	lumber of independent voting members of the governing body (Part VI, line 1b)		. 4	10
₹	5 T	otal number of individuals employed in calendar year 2022 (Part V, line 2a)		. 5	37
Act	6 T	otal number of volunteers (estimate if necessary)		6	10
-	7a⊺	otal unrelated business revenue from Part VIII, column (C), line 12		7a	0
	b N	let unrelated business taxable income from Form 990-T, Part I, line 11		7b	0
			Prior Yea	ar	Current Year
ø	8 0	Contributions and grants (Part VIII, line 1h)	6,323	,119	4,610,831
Š	9 P	Program service revenue (Part VIII, line 2g)			0
Revenue	10 lr	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	462	2,594	129,737
Ř	11 0	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		,925	2,496
		otal revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,841		4,743,064
		Grants and similar amounts paid (Part IX, column (A), lines 1–3)		433	293,119
		denefits paid to or for members (Part IX, column (A), line 4)	321,133		
	l ~		4,140	790	4,240,818
Expenses	10 0	calaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) crofessional fundraising fees (Part IX, column (A), line 11e) cotal fundraising expenses (Part IX, column (D), line 25) 459,102	7,170	1,130	<u> </u>
en	16aP	rolessional fundraising fees (Part IX, column (A), line 11e)			<u> </u>
쭚			1 216	. 210	1 062 620
_	"	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,316		1,863,632
		otal expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	5,981		6,397,569
		Levenue less expenses. Subtract line 18 from line 12		0,098	-1,654,505
ts o		(7)	Beginning of Cur		End of Year
Net Assets or Find Balances	g 20 T	otal assets (Part X, line 16)	16,949		14,442,400
et A	21 T	otal liabilities (Part X, line 26)		2,299	299,791
		let assets or fund balances. Subtract line 21 from line 20	16,677	,327	14,142,609
P	Part II	Signature Block			
U	Inder per	nalties of perjury, I declare that I have examined this return, including accompanying schedules and state	ements, and to the	e best of m	y knowledge and belief, it is
tr	ue, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of which prepa	rer has any know	ledge.	
		Fernanda Hopenhaym			11/15/2023
Sig	gn	Signature of officer		Date	
He		FERNANDA HOPENHAYEM TREASURER			
	-	Type or print name and title			
			 Date	Chark	if PTIN
Pai	id	/ / / / / / / / / / / / / / / / / / /	unez	/23 self o-	ployed P00295352
	parer				
	e Only	Firm's name VTA ADVISORS	F	irm's EIN	47-4018663
US	Ciny	10400 EATON PL STE 100			702 010 4100
_		Firm's address FAIRFAX, VA 22030	P	hone no.	703-218-4100
May	y the IR	S discuss this return with the preparer shown above? See instructions			X Yes No

Form 990 (2022) EARTHRIGHTS	INTERNATIONAL,	INC. 04-3265555	Page 2
	m Service Accomplishr		
		ote to any line in this Part III	X
1 Briefly describe the organization's mi		•	
		LD TO PROTECT HUMAN R	IGHTS AND THE
	nen		
2 Did the organization undertake any s	ignificant program services durin	g the year which were not listed on the	
nrior Form 000 or 000 E72			Yes X No
If "Yes," describe these new services			les M
		a how it conducts, any program	
3 Did the organization cease conductin services?	g, or make significant changes i	i now it conducts, any program	Yes X No
			l res 🔼 No
If "Yes," describe these changes on \$		de aftite there because an one of the second	are a come di lecc
		ch of its three largest program services, as	
		to report the amount of grants and allocati	ons to others,
the total expenses, and revenue, if a	ny, for each program service rep	ported.	
		grants of \$ 293,119) (Re	
ADVOCACY AND CAMPAI	GNS: SEEKS TO R	AISE AWARENESS AND BU	ILD BROAD SUPPORT
FOR EARTH RIGHTS IS	SUES. GOAL IS TO	O HOLD CORPORATE AND	GOVERNMENTAL HUMAN
RIGHTS & ENVIRONMEN	TAL OFFENDERS A	CCOUNTABLE FOR THEIR	ACTIONS.
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	0 532 500		
		• / \	evenue \$)
		OR RIGHTS ABUSES AROU	
		RATIONS AND OTHERS AC	COUNTABLE FOR THEIR
ACTIONS BOTH DOMEST	ICALLY AND GLOB	ALLY.	
• • • • • • • • • • • • • • • • • • • •			
• • • • • • • • • • • • • • • • • • • •			
4c (Code:) (Expenses \$	786,465 including	grants of \$) (Re	evenue \$
THE EARTHRIGHTS SCH			SIA AND SOUTH
		RIGHTS MONITORING AN	
	ENIAL AND HUMAN	RIGHTS MONITORING AN	DADVOCACI
TECHNIQUES.			
•			
*			
4d Other program services (Describe on	Schedule O)		
(Expenses \$ 694,42) (Revenue \$	1
4e Total program service expenses	5,360,156) (Novellue ψ	
I Oldi Program Gorviou UAPUNGO	-,, -		

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			37
	candidates for public office? If "Yes," complete Schedule C, Part I	3		_X_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)		x	
5	election in effect during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	4	Λ	
5	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
Ū	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		_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,"	44-	v	
L	complete Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more	110		
·	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets	1.0		
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<u> </u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	37	_X_
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	x	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
. •	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	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		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		<u> </u>
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] ,,		х
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	. gar	(2022)

Checklist of Required Schedules (continued) Part IV 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 Х 23 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 X 24a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 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 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 Х 25a Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I X 25b 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 X 26 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 Х 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): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28a A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV X A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M X 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II X 32 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 Х 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 Did the organization have a controlled entity within the meaning of section 512(b)(13)? X If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b 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 X 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization X and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O. Statements Regarding Other IRS Filings and Tax Compliance X Check if Schedule O contains a response or note to any line in this Part V Yes No 1a 20 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 Did the organization comply with backup withholding rules for reportable payments to vendors and

reportable gaming (gambling) winnings to prize winners?

	990 (2022) EARTHRIGHTS INTERNATIONAL, INC. 04-3265555		Pa	age 3
	rt 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 37			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
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		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X	
b	If "Yes," enter the name of the foreign country SEE SCHEDULE O			
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	_		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	١ ا		
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	_		
	and services provided to the payor?	7a		
b	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	_		
_1	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7-		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		
t ~	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
Ü	appropriate prespiration have exceed hydrogen heldings at any time during the year?	8		
9	Sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds.			
а	Did the appropriate constitution makes any tayable distributions under costice 40000	9a		
b	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter:	0.0		
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
1	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.)			
2a	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			
3	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			
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
5	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		Х
	If "Yes," see instructions and file Form 4720, Schedule N.			
6	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			
7	Section 501(c)(21) organizations. Did the trust, 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		
	If "Yes" complete Form 6069			

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SELAM HAILU

04-3265555 Form 990 (2022) EARTHRIGHTS INTERNATIONAL, INC. Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 10 1a Enter the number of voting members of the governing body at the end of the tax year 1a / If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. Enter the number of voting members included on line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with anv other officer, director, trustee, or key employee? 2 Х 3 Did the organization delegate control over management duties customarily performed by or under the direct Х supervision of officers, directors, trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a one or more members of the governing body? X Are any governance decisions of the organization reserved to (or subject to approval by) members, b stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? 8a X Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a Did the organization have local chapters, branches, or affiliates? X 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11a Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done X 12c Did the organization have a written whistleblower policy? X 13 13 Did the organization have a written document retention and destruction policy? X 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a Х Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? Х 16a If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the 16b organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed MA, VA, CA, NY, MD, DC, IL, CO Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

<u>WASHINGTON</u>
DC 20006 202-466-5188

Form 990 (2022)

1612 K ST. NW STE 800

State the name, address, and telephone number of the person who possesses the organization's books and records

Form 990 (20	022) EARTHRIGHTS INTERNATIONAL, INC. 04-3265555	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees	, and
	Independent Contractors	
	Check if Schedule O contains a response or note to any line in this Part VII	<u> LL</u>
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees	
4 a Camaniata	this table for all yours or required to be listed. Do not appeared by facility and all appears on the model of the	

- **1a** Complete this table for organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, 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) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box	, unle	Pos heck ss pe	rson is directo	than one a both a r/trustee Highest compensated employee	an e)	(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations	
(1)KA HSAW WA (PSE	UDONYM)										
EXEC. DIR./PRESIDENT	40.00			x				165,709	0	5,019	
(2) DANIEL BARASH											
ETNANCE DIDECTOR	40.00					\mathbf{x}		121 420	o	10 526	
FINANCE DIRECTOR (3) MARCO SIMONS	0.00					^	+	131,420	U	18,526	
(0)1211(00 51110115	40.00										
PROG DIR/GEN COUNSEL						X		145,334	0	4,408	
(4) KEITH SLACK											
CAMPAIGNS DIRECTOR	40.00					x		137,764	o	4,259	
(5) SEAN ARTHURS											
DIR GLOBAL EDUC/TRNG	40.00					х		122,778	0	12,001	
(6) RICHARD HERZ											
	40.00							110 100		2 (01	
SR. LITIGATION ATTY (7) AARON ESKE	0.00					X	-	119,109	0	3,621	
(I) AARON ESKE	2.00										
CO-CHAIR	0.00	х		x				0	0	0	
(8) FERNANDA HOPENH	AYEM										
	1.00										
TREASURER	0.00	Х		X		_	4	0	0	0	
(9) LAURA LEVINE	0.50										
DIRECTOR	0.00	х						0	0	0	
(10) SOLINN LIM	0000										
	0.50										
DIRECTOR	0.00	Х						0	0	0	
(11) GRACIELA M MERC	EDES LU 0.50										
DIRECTOR	0.00	х						0	0	0	
									<u> </u>		

Part VII Section A. Officers	s, Directors, 11	uste	ees,	ney		іріоу	ees	, and nignest compens	Tated Employees (continu	T T			
(A) Name and title	(B) Average hours	box	k, unle	Pos heck ss pe	rson	than o is both or/truste	an	(D) Reportable compensation	(E) Reportable compensation		(F) stimated of oth	amount ner	
Publ	per week (list any hours for related organizations below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/ 1099-MISC/ 1099-NEC)	from related organizations (W-2/ 1099-MISC/ 1099-NEC)	or	compens from t rganization ted orga	the	5
(12) AMOL MEHRA	0 50												
DIRECTOR	0.50	х						0	0				0
(13) SHALINI NATA	RAJ												
CO-CHAIR	2.00 0.00	x		x				0	0				0
(14) NEIL POPOVIC	0.00	Λ		Λ				0					
DIRECTOR	0.50 0.00	х						0	0				0
(15) SARAH SINGH	0.50												
DIRECTOR	0.00	x						0	0				0
(16) JASPER TEULI	NGS												
DIRECTOR	0.50	x		x				0	0				0
(17) YSABEL ECHIV		^		^				0	0				
	40.00												_
SECRETARY	0.00			X				0	0				0
								822,114				17, 8	334
c Total from continuation she d Total (add lines 1b and 1c)								822,114				1 7,8	₹34
2 Total number of individuals (in								•			•	<u>.,,c</u>	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
reportable compensation from	the organization	n	6									Yes	No
3 Did the organization list any fo									ited				
employee on line 1a? <i>If "Yes,</i> 4 For any individual listed on lin									on from the		3		X
organization and related orga individual	•						'es,"	complete Schedule J for	such		4	х	
5 Did any person listed on line		ccrue	con	nper	nsati	on fro					7		
for services rendered to the contract Section B. Independent Contract		'Yes,	" cor	nple	te S	ched	ule	J for such person		<u></u>	5		X
1 Complete this table for your f	ive highest com												
compensation from the organ	IZATION. Report of (A) I business address	comp	ensa	ation	tor	the c	aler		(B) ston of services	year.	C-	(C) mpensati	
Name and	Dusiness address							Descrip	nion of services		Co	mpensau	ON
											<u> </u>		
											<u> </u>		
2 Tatal number of 1 1 1 1 1	andra -t C	17	a. l	L ,- ·	r e	14 m =1 .1	<u> </u>	and Batasi aleases 1					
2 Total number of independent received more than \$100,000								ose listed above) who	0				
DAA											Forn	n 990	(2022)

Pa	rt V			f Revenue edule O con	tains	a respo	onse or no	te to any line in	this Part VIII		
								(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under
<u>ω</u> ω				ШО		n	on	OOTL	00		sections 512-514
ant	1a	Federated camp	paigns).II.I.(a	1a						
D G	b	Membership du	es		1b						
ts, Ar	С	Fundraising eve	ents		1c						
igi jar	d	Related organiz	ations		1d						
Sim	е	Government grants (c	contributio	ons)	1e						
Contributions, Gifts, Grants and Other Similar Amounts		All other contributions, and similar amounts n	ot includ	ed above	1f	4,	610,831				
وتز	g	Noncash contributions lines 1a-1f			1g	 	109,796				
Cor	h	Total. Add lines					_	4,610,831			
							Business Code				
ce	2a										
Program Service Revenue	b										
Sun	С										
ran	d										
rog	е										
Д.	f	All other program									
		Total. Add lines									
	3	Investment inco	me (in	cluding dividend	ds, inte	erest, and	t				
		3 Investment income (including dividends, interest, and other similar amounts)						70,858			70,858
	4	Income from inv	estme/	nt of tax-exemp	t bond	d proceed	ds				
	5	Royalties									
				(i) Real		(ii)	Personal				
	6a	Gross rents	6a								
	b	Less: rental expenses	6b								
	С	Rental inc. or (loss)	6c								
	d	Net rental incom	ne or (loss)							
	7a	7a Cross amount from) Other							
		other than inventory	7a	1,363,	344		5,535				
ne	b	Less: cost or other									
Ven		basis and sales exps.	7b	1,310,	000						
Revenue	С	Gain or (loss)	7c	53,	344		5,535				
	d	Net gain or (loss	s)					58,879	53,344		5,535
Other		Gross income from									
		(not including \$		-							
		of contributions rep									
		1c). See Part IV, li	ine 18		8a						
	b	Less: direct exp			8b						
	С	Net income or (loss) f	rom fundraising	event	s					
	9a	Gross income fr	rom ga	aming							
		activities. See P	art IV,	line 19	9a						
	b	Less: direct exp	enses		9b						
	С	Net income or (loss) f	rom gaming act	ivities						
	10a	Gross sales of i	invento	ory, less							
		returns and allo	wance	s	10a						
	b	Less: cost of go			10b						
		Net income or (entory	/					
<u>s</u>							Business Code				
90 n	11a	HONORARIUM	s					2,111			2,111
an	b	OTHER ADJ	& RE	FUNDS				385			385
Sel	С										
Miscellaneous Revenue	d	All other revenu									
	е	Total. Add lines	11a-	11d				2,496			
		Total revenue.						4,743,064	53,344	0	78,889

Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must Check if Schedule O contains a resp			complete column (A).	X
	not include amounts reported on lines 6b, 7 Pb, and 10b of Part VIII.	b, (A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	IIISPt			J J J J
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	293,119	293,119		
4	Benefits paid to or for members	233,113	273,117		
5	Compensation of current officers, directors,	165 500	115 006	22 140	46 554
6	trustees, and key employees Compensation not included above to disqualified	165,709	115,996	33,142	16,571
Ū	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)			204 200	
7 8	Other salaries and wages Pension plan accruals and contributions (include	3,327,706	2,733,790	294,939	298,977
Ū	section 401(k) and 403(b) employer contributions)	78,829	60,583	9,411	8,835
9	Other employee benefits	359,512	304,627	27,986	26,899
10	Payroll taxes	309,062	258,576	25,743	24,743
11	Fees for services (nonemployees):	10 000		11 250	0 640
	Management	19,998 10,033	9,255	11,350 778	8,648
C	Legal Accounting	40,504	6,836	33,668	
d	Lobbying		,,,,,		
е	Professional fundraising services. See Part IV, line 1	7			
	Investment management fees	43,487		43,487	
g	Other. (If line 11g amount exceeds 10% of line 25, column	646 536	602 840	37 000	E 760
12	(A) amount, list line 11g expenses on Schedule O.)	646,526	602,849	37,909	5,768
13	Office expenses	110,023	87,191	10,306	12,526
14	Information technology	68,447	41,242	13,371	13,834
15	Royalties				
16	Occupancy	183,221	155,065	4,634	23,522
	Travel	305,513	290,359	1,756	13,398
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	152,075	150,036	1,795	244
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	33,896	33,371	0.000	525
23	Insurance Other evenues Itemize evenues not envered	41,034	32,111	8,923	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	· · · · · · · · · · · · · · · · · · ·	77,330	77,330		
b	SUBSCRIPTIONS, REF. MATLS	43,681	41,026	167	2,488
c d	BANKING/CURRENCY CHANGES REGULATORY COSTS	35,458 23,200	35,458 21,648	2	1,550
a e		29,206	9,688	18,944	574
25	Total functional expenses. Add lines 1 through 24e	6,397,569	5,360,156	578,311	459,102
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)				
DAA	10110WILING 301 702 (M30 700-720)				Form 990 (2022)

Assets	2 8	Check if Schedule O contains a response or note	to any lir	ne in this Part X	(A)		
Assets	2 8	Cash—non-interest-hearing			(A)		(B)
Assets	2 8	Cash—non-interest-hearing					(6)
Assets	2 8	Cash—non-interest-hearing			Beginning of year		End of year
Assets	2 S	Justi Hell interest bearing	n	Oction		1	MI/
Assets	3 F	Savings and temporary cash investments			4,525,683	2	4,656,344
Assets		Pledges and grants receivable, net			7,174,996	3	5,415,731
Assets	4 /	Accounts receivable, net			15,000	4	34,621
Assets	5 L	oans and other receivables from any current or former					
Assets	tı	rustee, key employee, creator or founder, substantial or	ontributo	r, or 35%			
Assets	С	controlled entity or family member of any of these person	ns			5	
Assets	6 L	oans and other receivables from other disqualified per-	sons (as	defined			
Asse	U	under section 4958(f)(1)), and persons described in sec		6			
₹ ₹	7 N	Notes and loans receivable, net		7			
1 '	8 lı	nventories for sale or use			8		
!	9 F	Prepaid expenses and deferred charges			66,123	9	69 , 258
1/	1 0 a L	and, buildings, and equipment: cost or other					
	b	pasis. Complete Part VI of Schedule D		1,274,311			
	b L	Less: accumulated depreciation	10b	226,255	1,079,939	10c	1,048,056
1		nvestments—publicly traded securities			3,971,461	11	3,100,602
1:	1 2 lı	nvestments—other securities. See Part IV, line 11			12		
1:	3	nvestments—program-related. See Part IV, line 11				13	
14		ntangible assets				14	
1:	5 (Other assets. See Part IV, line 11			116,424	15	117,788
1	6 T	Total assets. Add lines 1 through 15 (must equal line 3	33) <u>.</u>		16,949,626	16	14,442,400
1		Accounts payable and accrued expenses			62,866	17	80,304
18		Grants payable			18		
19		Deferred revenue			19		
2		Tax-exempt bond liabilities			20		
2		Escrow or custodial account liability. Complete Part IV of				21	
<u>s</u> 2		oans and other payables to any current or former offic					
≝		rustee, key employee, creator or founder, substantial c					
Liabilities		controlled entity or family member of any of these person				22	
4		Secured mortgages and notes payable to unrelated third				23	
2		Unsecured notes and loans payable to unrelated third p				24	
2		Other liabilities (including federal income tax, payables t					
	-	parties, and other liabilities not included on lines 17-24).	-		209,433	25	210 107
		of Schedule D			272,299	25 26	219,487 299,791
-	26 T	Total liabilities. Add lines 17 through 25	V		212,233	26	233,131
Ses		organizations that follow FASB ASC 956, check he and complete lines 27, 28, 32, and 33.	ie A				
		• • • • • • • • • • • • • • • • • • • •			6,653,495	27	6,569,209
Bal		Net assets without donor restrictions Net assets with donor restrictions			10,023,832	28	7,573,400
힏		Organizations that do not follow FASB ASC 958, ch		10/025/052	20	7,575,100	
교		and complete lines 29 through 33.	icok iici				
ō 2		Capital stock or trust principal, or current funds				29	
sets		Paid-in or capital surplus, or land, building, or equipmen	4.6			30	
Ass		Retained earnings, endowment, accumulated income, or		unds		31	
Net Assets or Fund Balances					16,677,327	32	14,142,609
Ž 3		Total liabilities and net assets/fund balances			16,949,626	33	14,442,400

Form **990** (2022)

Form	1 990 (2022) EARTHRIGHTS INTERNATIONAL, INC. 04-3265555				Pag	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						
1	Total revenue (must equal Part VIII, column (A), line 12)	1		4,74			
2	Total expenses (must equal Part IX, column (A), line 25)	2		6,39			
3	Revenue less expenses. Subtract line 2 from line 1	3		1,654,505			
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1	6,67			
5	Net unrealized gains (losses) on investments	5		-88	30,2	<u> 213</u>	
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain on Schedule O)	9					
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line						
	32, column (B))	10	1	<u>4,14</u>	2,6	<u> 509</u>	
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII					igcup	
					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 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 on a separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?			2b	X		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a						
	separate basis, consolidated basis, or both:						
	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 audit, review, or compilation of its financial statements and selection of an independent accountant?			2c	X		
	If the organization changed either its oversight process or selection process during the tax year, explain on						
_	Schedule O.						
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the						
_	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			_			
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		ĺ	

Form **990** (2022)

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

OMB No. 1545-0047

Open to Public Inspection

Attach to Form 990 or Form 990-EZ.

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

Inspectio

Name	of the	e organization	IDIIC.	Incho				tification number			
_	4 1		EARTHRIGHTS	INTERNATIONAL,	INC.		04-326				
	art I			/ Status. (All organization				uctions.			
	Ť			se it is: (For lines 1 through 12		•	•				
1	-			sociation of churches described		on 170(I	o)(1)(A)(ı).				
2	-			(A)(ii). (Attach Schedule E (Fo		70/1 \/4\/	A \ /***\				
3	-			rice organization described in s				- 1			
4	_		= -	d in conjunction with a hospita	i describe	a in sec	tion 170(b)(1)(A)(III). Enter th	e nospitars name,			
_		city, and stat									
5	Ш	=	· ·	of a college or university owne	a or opera	ated by a	governmental unit described	in			
6	$\overline{}$		O(b)(1)(A)(iv). (Complete Pareste or local government or	rt II.) governmental unit described in	section	170/h)/1	ΛΑ\ (ν)				
7	_		_	=				olic			
•		An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)									
8	Ш	A community	trust described in section	170(b)(1)(A)(vi). (Complete Pa	art II.)						
9	Ш			scribed in section 170(b)(1)(A							
		-	or a non-land-grant college	of agriculture (see instructions)	. Enter the	e name,	city, and state of the college of	or			
10	X	university:	ion that normally receives (1) more than 33 1/3% of its su	oport from	contribu	tions momborship foos and a				
10	$\overline{}$	•	•	npt functions, subject to certain	•						
				nd unrelated business taxable			,				
	_	acquired by t	the organization after June 3	30, 1975. See section 509(a)(2). (Comp	lete Part	III.)				
11	Ш	An organizati	ion organized and operated	exclusively to test for public sa	afety. See	section	509(a)(4).				
12				exclusively for the benefit of, to							
	one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.										
	а		-	perated, supervised, or controlle	-			=			
	а			wer to regularly appoint or elec	-			giving			
				complete Part IV, Sections A	-	,					
	b		= =	upervised or controlled in conn		n its sup	ported organization(s), by havi	ing			
				rting organization vested in the	same pe	rsons tha	at control or manage the support	orted			
		— ĭ	•	e Part IV, Sections A and C.							
	С			supporting organization operat structions). You must comple				d with,			
	d			ed. A supporting organization of				zation(s)			
				e organization generally must				eness			
				must complete Part IV, Secti							
	е			ceived a written determination f			is a Type I, Type II, Type III				
	f		mber of supported organiza	on-functionally integrated supportions	orung orga	iriizatiori.					
				the supported organization(s).							
(i)		e of supported	(ii) EIN	(iii) Type of organization	(iv) Is the o	rganization	(v) Amount of monetary	(vi) Amount of			
()		anization	()	(described on lines 1-10	listed in you	r governing	support (see	other support (see			
				above (see instructions))	docun		instructions)	instructions)			
					Yes	No					
(A)											
/B)											
(B)											
(C)											
,υ,											
(D)											
(E)											
Tota	ı										

Part II

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

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

Sec	tion A. Public Support						
Caler	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and		DE				V
	membership fees received. (Do not include any "unusual grants.")	4,661,447	5,372,997	3,982,141	6,323,119	4,610,831	24,950,535
2	Tax revenues levied for the organization's benefit and either paid	2,002,000	-,,,,,,,,		.,	2,121,132	
	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	4,661,447	5,372,997	3,982,141	6,323,119	4,610,831	24,950,535
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						0.644.770
6	Public support. Subtract line 5 from line 4						9,644,779 15,305,756
Sec	tion B. Total Support						15,305,756
	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	4,661,447	5,372,997	3,982,141	6,323,119	4,610,831	24,950,535
8	Gross income from interest, dividends,	1,001,117	373,2733,	3,302,111	0,323,223	1,010,031	21,550,555
	payments received on securities loans, rents, royalties, and income from similar sources	59,373	64,403	74,213	55,709	70,858	324,556
9	Net income from unrelated business activities, whether or not the business	150	4 185	5 501	2.050	1 111	12 000
	is regularly carried on	150	4,175	5,591	2,050	1,111	13,077
10	Other income. Do not include gain or						
	loss from the sale of capital assets	4,789	27,797	20,475	53,875	385	107,321
11	(Explain in Part VI.)	4,703	21,131	20,475	33,673	363	25,395,489
 12	Gross receipts from related activities, etc.	(see instructions)				12	23,333,103
13	First 5 years. If the Form 990 is for the o	` ,		rth, or fifth tax vea		· · · · · · · · · · · · · · · · · · ·	
. •	organization, check this box and stop he l	•					
Sec	tion C. Computation of Public S	Support Perce	ntage				
14	Public support percentage for 2022 (line 6			mn (f))		14	60.27 %
15							57.26 %
16a	Public support percentage from 2021 Schro33 1/3% support test—2022. If the organ	nization did not che	ck the box on lin	e 13, and line 14 i	s 33 1/3% or more	e, check this	
	box and stop here. The organization qua	lifies as a publicly	supported organi	zation			X
b	33 1/3% support test—2021. If the organ	nization did not che	ck a box on line	13 or 16a, and line	e 15 is 33 1/3% or	r more, check	_
	this box and $\ensuremath{\text{stop}}$ here. The organization	qualifies as a publ	icly supported or	ganization			
17a	10%-facts-and-circumstances test—20)22. If the organiza	tion did not check	k a box on line 13,	16a, or 16b, and	line 14 is	
	10% or more, and if the organization mee						
	Part VI how the organization meets the fa	acts-and-circumstan	ices test. The org	ganization qualifies	s as a publicly sup	ported	
	organization						Ц
b	10%-facts-and-circumstances test—20	•					
	15 is 10% or more, and if the organization			•	•	•	
	in Part VI how the organization meets the	facts-and-circums	tances test. The	organization qualif	ies as a publicly s	supported	
	organization						Ц
18	Private foundation. If the organization di					see	
	instructions						
						Calaadiida	A (Form 990) 2022

Schedule A (Form 990) 2022

EARTHRIGHTS INTERNATIONAL, INC.
Support Schedule for Organizations Described in Section 509(a)(2) Part III

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

	uder year (or figual year baginning in)	(-) 0040	= 451,0040	4-> 0000	- (-I) 0004	(-) 0000	= (6) T-4-1
	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.")	4,661,447	F 272 207	2 202 242	6 202 110	7 (7) (7)	24 050 535
	· · · · · · · · · · · · · · · · · · ·	4,661,44/	5,372,997	3,982,141	6,323,119	4,610,831	24,950,535
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513	7,460	27,797	20,475	53,875	385	109,992
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
•	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5	4,668,907	5,400,794	4,002,616	6,376,994	4,611,216	25,060,527
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						25,060,527
	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6	4,668,907	5,400,794	4,002,616	6,376,994	4,611,216	25,060,527
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources .	59,373	64,403	74,213	55,709	70,858	324,556
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b	59,373	64,403	74,213	55,709	70,858	324,556
•	rida iirida rad dira rad	02,010	01,100	71,110	207.02	70,000	011,000
11	Net income from unrelated business						
	activities not included on line 10b, whether or not the business is regularly carried on	150	4,175	5,591	2,050	1,111	13,077
12	Other income. Do not include gain or		-	-	-	-	-
12	loss from the sale of capital assets						
	(Explain in Part VI.)	4,789	27,797	20,475	53,875		106,936
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	4,733,219	5,497,169	4,102,895	6,488,628	4,683,185	25,505,096
14	First 5 years. If the Form 990 is for the o			irth, or fifth tax vea			
	organization, check this box and stop he	_					
Sec	tion C. Computation of Public S	Support Perce	entage				
 15	Public support percentage for 2022 (line 8			umn (f))		15	98.26 %
16	Public support percentage from 2021 Sch						98.20 %
	tion D. Computation of Investm						2002075
<u>000</u> 17	Investment income percentage for 2022 (13. column (f))		17	1%
	nvestment income percentage from 2021		I line 47			40	1%
	33 1/3% support tests—2022. If the org			ine 14 and line 15			± /0
134							X
L	17 is not more than 33 1/3%, check this b	-	_			-	
b	33 1/3% support tests—2021. If the org						
20	line 18 is not more than 33 1/3%, check the	-	•			•	
<u>20</u>	Private foundation. If the organization d	ia not check a box	on line 14, 19a,	or 19b, check this	box and see instr		
						Schedule	A (Form 990) 2022

Part IV **Supporting Organizations**

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

Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing 1 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).
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and b satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- 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.
- Was any supported organization not organized in the United States ("foreign supported organization")? If 4a "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- 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.
- 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).
- 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?
- **Substitutions only.** Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other 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.
- 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).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- Did one or more disgualified 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.
- 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.
- 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.)

П		Yes	No
	1		
	1		
	2		
	3a		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	_		
	8		
	9a		
	۵.		
	9b		
	9с		
	46		
	10a		
	46:		
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04-3265555 INC.

Schedu	e A (Form 990)	2022	EA	RTHRIGHTS		INTERNATIONAL,	INC		04-326555	55		Page 5
Par	t IV Sup	porting (Organizati	ons (continued	d)							ı
											Yes	No
11	_		-			y of the following persons?		446				
а	1			rois, eitner alone o pported organization		together with persons describe	ea on iin	ies 11b a	na	11a		
h		7		d on line 11a abov						11b		
						r 11b above? If "Yes" to line 1	11a, 11b	o, or 11c,			Y	
	provide detail		'				,			11c		
Secti	on B. Type	I Suppo	rting Orga	anizations								
											Yes	No
1	•	•				fficers acting in their official ca			•			
		_		-	-	appoint or elect at least a maj		_				
			_			" describe in Part VI how the		_				
		-		=		ion's activities. If the organization's activities. If the organization's activities, directors, or tru						
	-		-			if any, applied to such power			_	1		
2						d organization other than the	_		, our.	•		
_	•	•				supporting organization? If "Y			art			
	-					he supported organization(s) t						
	-	-		g organization.		,,,	•	, i		2		
Secti	on C. Type	II Suppo	orting Org	anizations								
											Yes	No
1	•		-			uring the tax year also a majo	•					
			-			ation(s)? If "No," describe in P						
	_	-		nization was veste	ed i	in the same persons that cont	trolled o	r manage	d			
Sacti	the supported			Organizations						1		
Jecu	OII D. AII I	ype iii ot	apporting	Organizations	<u> </u>						Yes	No
1	Did the organi	ization provid	de to each of	its supported orga	ani	zations, by the last day of the	fifth mo	onth of the	<u> </u>		100	140
-	•	•		•		be and amount of support pro						
	-			=		d as of the date of notification						
	organization's	governing d	documents in	effect on the date	e of	notification, to the extent not	t previou	sly provid	led?	1		
2	Were any of t	the organizat	tion's officers	directors, or trust	tee	s either (i) appointed or electe	ed by th	e support	ed			
	organization(s	s) or (ii) servi	ing on the go	verning body of a	SU	upported organization? If "No,"	" explain	in Part V	/I how			
	•				•	g relationship with the suppor	•	,	,	2		
3	-		•			d the organization's supported	•		ave			
	•		•	•		and in directing the use of the	-					
			•		5, " (describe in Part VI the role the	e organi	ization's		,		
Secti	supported org				no	rting Organizations				3		
1						d to satisfy the Integral Part 1	Test duri	na the ve	ar (see instructio	ns)		
a				ities Test. Comple				g a.e ye	a. (6666 .			
b	_					organizations. Complete line	3 below.					
С	The orgar	nization supp	oorted a gove	ernmental entity. D	es	cribe in Part VI how you supp	ported a	governm	ental entity (see in	structio	ons).	
2	Activities Test	t. Answer li	ines 2a and .	2b below.							Yes	No
а	Did substantia	ally all of the	organization'	s activities during	the	e tax year directly further the	exempt	purposes	of			
		-		=		s responsive? If "Yes," then in		_				
		-		=		activities directly furthered the						
	_		-			ganizations, and how the org $rac{1}{2}$	anizatior	n determir	ned	20		
h				ntially all of its act			zotion's			2a		
b						tivities that, but for the organizing rganization(s) would have been		and in? If				
			_			position that its supported org	_	_				
				r the organization		· · · · · · · -	,	1-7 .7001		2b		
3				nswer lines 3a ar								
а	-	-				elect a majority of the officers	s, directo	ors, or				
	=					"No," provide details in Part				3a		
b	Did the organ	ization exerc	cise a substa	ntial degree of dire	ecti	ion over the policies, program	ns, and a	activities o	of each			
	of its supporte	ed organizati	ions? If "Yes,	" describe in Part	VI	the role played by the organia	ization in	this rega	nrd.	3b		

Page 5

Schedu	lle A (Form 990) 2022 EARTHRIGHTS INTERNATIONAL,	IN	C. 04-3265	555 Page 6
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgan	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on N	ov. 20), 1970 (explain in Part VI	. See
	instructions. All other Type III non-functionally integrated supporting organizations mu	ıst co	mplete Sections A through	E
Sect	ion A – Adjusted Net Income		(A) Prior Year	(B) Current Year
	PHAME INCAPORT	\mathbf{A}		(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		
	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):			
a	Average monthly value of securities	1a		
k	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
e	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-functionally integrated	Тур	e III supporting organization	
	(see instructions).			

Schedule A (Form 990) 2022

EARTHRIGHTS INTERNATIONAL, INC. 04-3265555 Schedule A (Form 990) 2022 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 1 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 Administrative expenses paid to accomplish exempt purposes of supported organizations 3 3 Amounts paid to acquire exempt-use assets 4 Qualified set-aside amounts (prior IRS approval required-provide details in Part VI) 5 Other distributions (describe in Part VI). See instructions. 6 Total annual distributions. Add lines 1 through 6. 7 7 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. Distributable amount for 2022 from Section C. line 6 9 9 10 Line 8 amount divided by line 9 amount (i) (ii) (iii) Section E - Distribution Allocations (see instructions) **Excess Distributions** Underdistributions Distributable Pre-2022 Amount for 2022 Distributable amount for 2022 from Section C, line 6 Underdistributions, if any, for years prior to 2022 (reasonable cause required-explain in Part VI). See instructions. Excess distributions carryover, if any, to 2022 a From 2017 **b** From 2018 **c** From 2019 **d** From 2020 **e** From 2021 f Total of lines 3a through 3e **g** Applied to underdistributions of prior years h Applied to 2022 distributable amount i Carryover from 2017 not applied (see instructions) 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 **b** Applied to 2022 distributable amount c Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2023. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2018 **b** Excess from 2019 c Excess from 2020 d Excess from 2021 e Excess from 2022

Schedule A (Form 990) 2022

Part VI Supplemental Information. Provide III, line 12; Part IV, Section A, lines 1, B, lines 1 and 2; Part IV, Section C, lines 2, 5, and 6. Also complete this part III, LINE 12 - OTHER INCO	2, 3b, 3c, 4b, 4c, 5a ne 1; Part IV, Section tion B, line 1e; Part part for any additiona	uired by Part II, line a, 6, 9a, 9b, 9c, 11a n D, lines 2 and 3; I V, Section D, lines 9	10; Part II, line 17a or , 11b, and 11c; Part IV, Part IV, Section E, lines 5, 6, and 8; and Part V,	Section 1c, 2a, 2b,
CONTRACT SERVICE INCOME	\$	102,414		
LEGAL REPRESENTATION	\$	4,522		
SUPPLEMENTAL INFORMATION				
PART II, LINE 12 CONSISTS OF CINCOME TOTALING \$106936 OVER T			GAL REPRESENTA'	FION

DAA Schedule A (Form 990) 2022

Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

2022

Name of the organization

Employer identification number

EARTHRIGHTS INTERNATIONAL Organization type (check one): Filers of: Section: Form 990 or 990-EZ **X** 501(c)(**3**) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization

EARTHRIGHTS INTERNATIONAL, INC.

Employer identification number 04-3265555

Part I	Contributors (see instructions). Use duplicate copies of	Part I if additional space is	needed.
(a) No.	Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
.1		\$ 100,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 1,100,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No	Name, address, and ZIP + 4	Total contributions \$ 225,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Name, address, and ZiF + 4	\$ 102,521	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
. 5		\$ 100,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$ 246,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)

<u>EART</u>	HRIGHTS INTERNATIONAL, INC.	04	<u>-3265555</u>
Part I	Contributors (see instructions). Use duplicate copies of	Part I if additional space is	s needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
. 7		\$ 375,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No	Name, address, and ZIP + 4	Total contributions \$ 350,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$ 487,590	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 10	Name, address, and ZIP + 4	Total contributions \$ 500,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b) Name, address, and ZIP + 4	(c)	(d) Type of contribution
No	ivalite, auditess, dilu ZIF + 4	Total contributions \$ 254,316	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Traine, address, and Ell TT	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2022) PAGE 1 OF 1 Page 3

Name of organization

EARTHRIGHTS INTERNATIONAL, INC.

Employer identification number 04-3265555

Part II	Noncash Property (see instructions). Use duplica	ate copies of Part II if additiona	al space is needed.
(a) No. from Part I	Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
.4	BENEFICIARY IRA	\$ 102,521	11/08/22
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

2022
Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

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

-	(See separate instructions), then				
	Section 501(c)(4), (5), or (6) organizations: Complete Part I	II		Franksian idan	tification number
Nam	e of organization	MT0313.T T310		1	tification number
D	EARTHRIGHTS INTERNA		(a) ar ia a aa	04-32655	
	rt I-A Complete if the organization is exe	-	'		zation.
1	Provide a description of the organization's direct and indirect and in	ect political campaign activitie	s in Part IV. See i	nstructions for	
_	definition of "political campaign activities."			•	
2	Political campaign activity expenditures. See instructions			 \$	
	Volunteer hours for political campaign activities. See instr				
	rt I-B Complete if the organization is exe			φ	
1	Enter the amount of any excise tax incurred by the organic Enter the amount of any excise tax incurred by organization	zation under section 4955		5	
2	Enter the amount of any excise tax incurred by organization	on managers under section 49	955	 \$	
3	If the organization incurred a section 4955 tax, did it file F	orm 4/20 for this year?			
					Yes No
_	If "Yes," describe in Part IV. rt I-C Complete if the organization is exe	ment under coetien EO	I/a\ avaant a		
		-		ection 501(c)(3).	
1	Enter the amount directly expended by the filing organization of the second control of t	•		•	
_	activities			 \$	
2	Enter the amount of the filing organization's funds contrib	•			
_	527 exempt function activities			\$	
3	Total exempt function expenditures. Add lines 1 and 2. Er		- 1		
_	line 17b			\$	
4	Did the filing organization file Form 1120-POL for this year				
5	Enter the names, addresses and employer identification n	, ,			•
	organization made payments. For each organization listed				
	the amount of political contributions received that were pr			=	
	as a separate segregated fund or a political action commi				
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds. If none, enter -0	contributions received and promptly and directly
				runus. Il riorie, eriter -o .	delivered to a separate
					political organization.
					If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
		1	I	İ	

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

_			TERNATIONAL				Page 2
Pa	Complete if the organisection 501(h)).	ization is exem	npt under section	1 501(c)(3)	and filed	Form 5768 ((election under
A	Check if the filing organization	belongs to an af	filiated group (and I	ist in Part IV	each affiliat	ted group mer	mber's name,
	address, EIN, expense	s, and share of e	excess lobbying exp	enditures).			
В	Check if the filing organization	checked box A	and "limited control"	provisions a	apply.		
	Limits on Lob (The term "expenditures" n	bying Expend neans amounts	itures paid or incurred.)	UU	(a) F organizatio		(b) Affiliated group totals
1:	a Total lobbying expenditures to influence p	ublic opinion (grass	roots lobbying)			0	
	b Total lobbying expenditures to influence a					24,716	
(Total lobbying expenditures (add lines 1a					24,716	
	d Other evenent numbers evenenditures					72,853	
	Total exempt purpose expenditures (add l	ines 1c and 1d)				97,569	
	f Lobbying nontaxable amount. Enter the ar					•	
	columns.		•		4	69,878	
	If the amount on line 1e, column (a) or (b) is	s: The lobbying no	ontaxable amount is:				
	Not over \$500,000	20% of the amou	nt on line 1e.				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15	% of the excess over \$5	00,000.			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10	% of the excess over \$1	,000,000.			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5%	6 of the excess over \$1,5	500,000.			
	Over \$17,000,000	\$1,000,000.					
	g Grassroots nontaxable amount (enter 25%	of line 1f)			1	17,470	
	h Subtract line 1g from line 1a. If zero or les	o ontor O				0	
	i Subtract line 1f from line 1c. If zero or less	s, enter -0-				0	
	j If there is an amount other than zero on e				20		
	reporting section 4911 tax for this year?						Yes No
		4-Year Averagi	ng Period Under S	Section 501	(h)		
	(Some organizations that made					the five colu	mns below.
			nstructions for line				
	Lob	bying Expenditu	res During 4-Year	Averaging	Period		
	Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 202	21	(d) 2022	(e) Total
			I	i			1

c Total lobbying expenditures 44,091 40,459 21,712 24,716 130,978 d Grassroots nontaxable amount 94,747 99,299 114,259 117,470 425,775 e Grassroots ceiling amount 638,663 (150% of line 2d, column (e)) f Grassroots lobbying expenditures 1,122 525 1,647

397,194

457,034

469,878

378,987

Schedule C (Form 990) 2022

1,703,093

2,554,640

2a Lobbying nontaxable amount

b Lobbying ceiling amount (150% of line 2a, column (e))

EARTHRIGHTS INTERNATIONAL, INC. 04-3265555 Schedule C (Form 990) 2022 Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 Part II-B (election under section 501(h)). (a) (b) For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity. Yes No Amount During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? **d** Mailings to members, legislators, or the public? **e** Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? **b** If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 **d** If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year **b** Carryover from last year 2c Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year? Taxable amount of lobbying and political expenditures. See instructions **Supplemental Information** Part IV Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

DAA Schedule C (Form 990) 2022

Schedule C (For	m 990) 2022	EARTHRIGHTS	INTERNATIONAL,	INC.	04-3265555	Page 4
Part IV	Supplemental	Information (cont	inued)			
1 0.10 11	Определения					
	5 1 1					
			spect			
	UUI		SUCUL	U		V
						<i></i>
,						

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047 Open to Public Inspection

Name	of the organization	4 1	Employer identification number
	ARTHRIGHTS INTERNATIONAL, INC.		04-3265555
Pa	Organizations Maintaining Donor Advised Complete if the organization answered "Yes" of	Funds or Other Similar Funds o on Form 990. Part IV. line 6.	r Accounts.
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing		
	funds are the organization's property, subject to the organization's e	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advisors	in writing that grant funds can be used	
	only for charitable purposes and not for the benefit of the donor or or	donor advisor, or for any other purpose	
	conferring impermissible private benefit?		Yes No
Pa	art II Conservation Easements.		
	Complete if the organization answered "Yes" of		
1	Purpose(s) of conservation easements held by the organization (che		
	Preservation of land for public use (for example, recreation or e	· —	-
	Protection of natural habitat	Preservation of a certified his	storic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified con	nservation contribution in the form of a cons	
	easement on the last day of the tax year.		Held at the End of the Tax Yea
а			
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic structure is		2c
d	(1)	lly 25, 2006, and not on a	
			2d
3	Number of conservation easements modified, transferred, released,	extinguished, or terminated by the organization	ation during the
_	tax year		
4	Number of states where property subject to conservation easement		
5	Does the organization have a written policy regarding the periodic n		\sqcap , \sqcap .
•	violations, and enforcement of the conservation easements it holds'		
6	Staff and volunteer hours devoted to monitoring, inspecting, handlin	ig of violations, and enforcing conservation	easements during the year
_			
7	Amount of expenses incurred in monitoring, inspecting, handling of	violations, and enforcing conservation ease	ements during the year
•	Dans and assessment assessment as the O(d) above and	-f. the annual of a still 470/b\/4\/D	V2)
0	Does each conservation easement reported on line 2(d) above satisfied and continue 470(h)(4)(D)(ii)2		□ Vaa □ Na
0	and section 170(h)(4)(B)(ii)?	amonto in ita revenue and evanne stateme	
9	balance sheet, and include, if applicable, the text of the footnote to	•	
	organization's accounting for conservation easements.	the organization's infancial statements that	describes trie
Ps	art III Organizations Maintaining Collections of A	Art Historical Treasures or Othe	or Similar Assets
	Complete if the organization answered "Yes" of		ommai Assets.
	If the organization elected, as permitted under FASB ASC 958, not		nce sheet works
	of art, historical treasures, or other similar assets held for public exh		
	service, provide in Part XIII the text of the footnote to its financial st		
b			sheet works of
	art, historical treasures, or other similar assets held for public exhibit		
	provide the following amounts relating to these items:	, carrier, or research in farmonality	,
	(i) Revenue included on Form 990, Part VIII, line 1		\$
	(ii) Assets in shaded in Fame 000 Part V		Φ.
2	If the organization received or held works of art, historical treasures,	or other similar assets for financial gain in	
_	following amounts required to be reported under FASB ASC 958 rel		.0
а		=	\$
	Revenue included on Form 990, Part VIII, line 1		\$

Sche	edule D (Form 990) 2022 EARTHRIG				4-32655				ge 2
Pa	art III Organizations Maintaini	ng Collections of	f Art, Historical	Treasures,	or Other S	imilar Asse	ets (co	ontinu	ied)
3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):									
а	Public exhibition	∎ d ∏ լ	oan or exchange pro	gram					
b	Scholarly research		Other					7	
С	Preservation for future generations	1115)(=(.1			7() (
4	Provide a description of the organization's	collections and explai	n how they further the	e organization's	exempt purpos	se in Part	7		
	XIII.		•	J					
5	During the year, did the organization solici	it or receive donations	of art, historical treas	ures, or other s	similar				
	assets to be sold to raise funds rather that						Ye	s 🗌	No
Pa	art IV Escrow and Custodial								
	Complete if the organizati 990, Part X, line 21.		s" on Form 990, F	Part IV, line	9, or reporte	ed an amou	int on	Form	
	Is the organization an agent, trustee, custo	ndian or other intermed	diary for contributions	or other assets	not				
	included on Form 000 Port V2		•				☐ Ye	<u>.</u> П	No
h	If "Yes," explain the arrangement in Part X	(III and complete the f					□	" Ш	140
D	ii res, explain the arrangement in rait x	un and complete the it	Silowing table.		ſ		Amount		_
_	Paginning halanga				ŀ	1c	7 1110 0111		_
						1d			
a	Additions during the year					1e			
e	Distributions during the year					1f			
1	Ending balance					<u> </u>			<u> </u>
	Did the organization include an amount on				*		∐ Ye	° ⊢	No
	If "Yes," explain the arrangement in Part X	III. Check here if the 6	explanation has been	provided on Pa	π ΧΙΙΙ				
Fa	ert V Endowment Funds.	on anoward "Var	" on Form 000 [Dort IV line	10				
	Complete if the organizati						() =	1	
	.	(a) Current year	(b) Prior year	(c) Two years b		ee years back	(e) Four		
	Beginning of year balance	173,540	231,561	197,	,613	157,034		63,5	74
	Contributions								
С	Net investment earnings, gains, and	05.034	41 050	2.2	0.4.5	40 501			
	losses	-27,934	41,979	33,	,946	40,581		-5,3	396
	Grants or scholarships								
е	Other expenditures for facilities and		100 000						
	programs		100,000						
f	Administrative expenses								L42
g	End of year balance	145,606	173,540	231,	,561	197,615	1	57,0)34
	Provide the estimated percentage of the c		ce (line 1g, column (a)) held as:					
а	Board designated or quasi-endowment	95.77 %							
b	Permanent endowment %								
С	Term endowment 4.23 %								
	The percentages on lines 2a, 2b, and 2c s								
3a	Are there endowment funds not in the pos	session of the organiz	ation that are held an	d administered	for the				
	organization by:							Yes	No
	(i) Unrelated organizations						3a(i)		X
	(") D (3a(ii)		X
b	If "Yes" on line 3a(ii), are the related organ						3b		
4	Describe in Part XIII the intended uses of								
Pa	art VI Land, Buildings, and Ed								
	Complete if the organizati		s" on Form 990, F	Part IV, line	11a. See Fo	orm 990, Pa	art X, li	ne 10).
	Description of property	(a) Cost or other b			(c) Accumulate		(d) Book		
	•	(investment)	(othe	r)	depreciation				
	Land		25	0,018			25	0,0	18
	Buildings			3,360	120,	123		3,2	
	Leasehold improvements	•						- , -	
	Equipment		12	20,933	106,	132	1	4,8	01
	Other							_,_	<u></u>
	L. Add lines 1a through 1e. (Column (d) mu:		rt X column (R) line	10c)			1,04	<u>8 0</u>	56

DAA Schedule D (Form 990) 2022

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

Sch	edule D (Form 990) 2022 EARTHRIGHTS INTERNATIONAL,	INC.	04-326555		Page 4
P	art XI Reconciliation of Revenue per Audited Financial Sta		•	Retur	n.
	Complete if the organization answered "Yes" on Form 99	00, Part IV, lir	ne 12a.	.	2 010 264
1				1	3,819,364
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12: Net unrealized gains (losses) on investments	2a	-880,213		101/
h	Donated services and use of facilities	2b	0007213		
c	Recoveries of prior year grants	2c			\mathcal{P}
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	-880,213
3				3	4,699,577
4					
	Investment expenses not included on Form 990, Part VIII, line 7b		43,487		
	Other (Describe in Part XIII.)	4b			40 40-
_	Add lines 4a and 4b			4c	43,487
5	7			5 Dot	4,743,064
P	rart XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 99			er Ket	urn.
1	T. 1			1	6,354,082
2					0,331,002
	a Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	d Other (Describe in Part XIII.)	2d			
е				2e	
3	Add lines 2a through 2d			3	6,354,082
		, ,			
4	Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:		43.405		
а	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	4a	43,487		
a b	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.)	4a	43,487	4-	42 407
a b	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	4a 4b		4c	43,487 6 397 569
a b c	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 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	4a 4b		4c 5	43,487 6,397,569
2 5 P :	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 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information.	4a 4b		5	6,397,569
b c 5 Prov	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 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	4a 4b virt IV, lines 1b an	nd 2b; Part V, line 4;	5	6,397,569
b c 5 Prov	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 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part III.) art XIII Supplemental Information. Vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III.	4a 4b virt IV, lines 1b an	nd 2b; Part V, line 4;	5	6,397,569
b c 5 Prov	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 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part III.) art XIII Supplemental Information. Vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III.	4a 4b virt IV, lines 1b an	nd 2b; Part V, line 4;	5	6,397,569
b c 5 Prov	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 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part III.) art XIII Supplemental Information. Vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III.	4a 4b virt IV, lines 1b an	nd 2b; Part V, line 4;	5	6,397,569
b c 5 Prov	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 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part III.) art XIII Supplemental Information. Vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III.	4a 4b virt IV, lines 1b an	nd 2b; Part V, line 4;	5	6,397,569
b c 5 Prov	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 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part III.) art XIII Supplemental Information. Vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III.	4a 4b virt IV, lines 1b an	nd 2b; Part V, line 4;	5	6,397,569
b c 5 Prov	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 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part III.) art XIII Supplemental Information. Vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III.	4a 4b virt IV, lines 1b an	nd 2b; Part V, line 4;	5	6,397,569
b c 5 Prov	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 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part III.) art XIII Supplemental Information. Vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III.	4a 4b virt IV, lines 1b an	nd 2b; Part V, line 4;	5	6,397,569
b c 5 Prov	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 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part III.) art XIII Supplemental Information. Vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III.	4a 4b virt IV, lines 1b an	nd 2b; Part V, line 4;	5	6,397,569
b c 5 Prov	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 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part III.) art XIII Supplemental Information. Vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III.	4a 4b virt IV, lines 1b an	nd 2b; Part V, line 4;	5	6,397,569
b c 5 Prov	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 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part III.) art XIII Supplemental Information. Vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III.	4a 4b virt IV, lines 1b an	nd 2b; Part V, line 4;	5	6,397,569
b c 5 Prov	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 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part III.) art XIII Supplemental Information. Vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III.	4a 4b virt IV, lines 1b an	nd 2b; Part V, line 4;	5	6,397,569
b c 5 Prov	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 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part III.) art XIII Supplemental Information. Vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III.	4a 4b virt IV, lines 1b an	nd 2b; Part V, line 4;	5	6,397,569
b c 5 Prov	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 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part III.) art XIII Supplemental Information. Vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III.	4a 4b virt IV, lines 1b an	nd 2b; Part V, line 4;	5	6,397,569
b c 5 Prov	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 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part III.) art XIII Supplemental Information. Vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III.	4a 4b virt IV, lines 1b an	nd 2b; Part V, line 4;	5	6,397,569
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b c 5 Prov	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 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part III.) art XIII Supplemental Information. Vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III.	4a 4b virt IV, lines 1b an	nd 2b; Part V, line 4;	5	6,397,569
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b c 5 Prov	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 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part III.) art XIII Supplemental Information. Vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III.	4a 4b virt IV, lines 1b an	nd 2b; Part V, line 4;	5	6,397,569
b c 5 Prov	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 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part III.) art XIII Supplemental Information. Vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III.	4a 4b virt IV, lines 1b an	nd 2b; Part V, line 4;	5	6,397,569
b c 5 Prov	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 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part III.) art XIII Supplemental Information. Vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III.	4a 4b virt IV, lines 1b an	nd 2b; Part V, line 4;	5	6,397,569
b c 5 Prov	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 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part III.) art XIII Supplemental Information. Vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III.	4a 4b virt IV, lines 1b an	nd 2b; Part V, line 4;	5	6,397,569
b c 5 Prov	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 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part III.) art XIII Supplemental Information. Vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III.	4a 4b virt IV, lines 1b an	nd 2b; Part V, line 4;	5	6,397,569

Schedule D (Form 990) 2022	EARTHR	IGHTS	INTERNATION	VAL, IN	1C.	04-3265555	Page 5
Part XIII	Suppleme	ental Informa	ation (con	ntinued)				
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) ([15116)

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

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

OMB No. 1545-0047

2022

Open to Public

Name of the organization

EARTHRIGHTS INTERNATIONAL, INC.

Employer identification number 04-3265555

General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes No For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number (c) Number of (d) Activities conducted in the (e) If activity listed in (d) is (f) Total of offices in employees, agents, and region (by type) (such as, a program service, expenditures for and investments fundraising, program services, investments, grants to recipients the region describe specific type of independent service(s) in the region contractors located in the region) in the region EAST ASIA AND THE PACIFIC 36 PROGRAM SERVICES LEGAL 228,534 AND THE PACIFIC EAST ASIA PROGRAM SERVICES ADVOCACY & CAMPAIGNS 345,638 (2) EAST ASIA AND THE PACIFIC (3) PROGRAM SERVICES SCHOOLS & TRAINING 1,375,855 SOUTH AMERICA (4) 11 PROGRAM SERVICES LEGAL 746,750 EAST ASIA AND THE PACIFIC PROGRAM SERVICES DEVELOPMENT 42,716 EAST ASIA AND THE PACIFIC PROGRAM SERVICES GENERAL/ADMIN 152,794 (6) (7) (8) (9) (10)(11) (12) (13) (14)

47

2,892,287

2,892,287

(15)

(16)

(17)

3a Subtotal

b Total from continuation sheets to Part I
c Totals (add lines 3a and 3b)

Schedule F (Form 990) 2022 EARTHRIGHTS INTERNATIONAL, INC. 04-3265555 Page 2

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. (i) Method of 1 (a) Name of (b) IRS code (e) Amount of (f) Manner of (g) Amount of valuation (book, FMV, (d) Purpose of (h) Description section and EIN organization cash grant cash noncash of noncash assistance appraisal, other) (if applicable) disbursemen assistance MYANMAR GRANT 67,500 WIRE & THE PACIFIC (1) EAST ASIA GENERAL SUPPORT 25,000 WIRE EAST ASIA & THE PACIFIC (2) GENERAL SUPPORT 25,000 WIRE EAST ASIA & THE PACIFIC (3) GENERAL SUPPORT 100,000 WIRE EAST ASIA & THE PACIFIC (4) GENERAL SUPPORT 50,000 WIRE EAST ASIA & THE PACIFIC (5) (6) (7) (8) (9) (10) (11) (12) (13) (14) (15) (16)

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax			
	exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter		3	
3	Enter total number of other organizations or entities	•		

Schedule F (Form 990) 2022

Schedule F (Form 990) 2022 EARTHRIGHTS INTERNATIONAL, INC. 04-3265555 Page 3

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. (e) Manner of (b) Region (f) Amount of (g) Description (h) Method of valuation (book, FMV, appraisal, other) recipients noncash of noncash assistance disbursement assistance EAST ASIA & THE PACIFIC (1) EMERGENCY ASSISTANCE 15,619 WIRE FMV (2) (3) (5) (6) (7) (9) (10) (11) (12) (13) (14) (15) (16) (17) (18)

Part IV	Foreign	Forms
	-	

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes,"		
	the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign		
	Corporation (see Instructions for Form 926)	X Yes	∐ No
	L MAIIC HISACCHAH OC	$I \cup V$	
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may		
	be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and		
	Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a		_
	U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes,"		
	the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to		
	Certain Foreign Corporations (see Instructions for Form 5471)	X Yes	No
			_
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a		
	qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621,		
	Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing		
	Fund (see Instructions for Form 8621)	Yes	X No
			_
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes,"		
	the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain		
	Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If		
	"Yes," the organization may be required to separately file Form 5713, International Boycott Report (see		
	Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2022

	Part V	Supplementa	I Information
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Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method);

and Part III, column (c) (estimated number of recipients), a information. See instructions.	s applicable	e. Also complete th	is part to pro	vide any additional				
PART I, LINE 2 - PROCEDURES FOR MONITOR	RING T	HE USE OF (FRANT FU	INDS				
ORGANIZATION REQUIRES WRITTEN GRANT PRO	OPOSAL,	, REVIEWS I	PROPOSAL	THEN				
MONITORS VIA PERIODIC REPORTING THE USE OF THE GRANT MONEY TO ACCOMPLISH								
THE PROPOSAL'S STATED PURPOSE(S).								
PART I, LINE 3 - ACTIVITIES PER REGION								
REGION	EXI	PENDITURES	INVEST	MENTS				
EAST ASIA AND THE PACIFIC	\$	228,534	\$	0				
EAST ASIA AND THE PACIFIC	\$	345,638	\$	0				
EAST ASIA AND THE PACIFIC	\$	1,375,855	\$	0				
SOUTH AMERICA	\$	746,750	\$	0				
EAST ASIA AND THE PACIFIC	\$	42,716	\$	0				
EAST ASIA AND THE PACIFIC	\$	152,794	\$	0				

Schedule F (Form 990) 2022

SCHEDULE J (Form 990)

Compensation InformationFor certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

INTERNATIONAL

Employer identification number

04-3265555

P	art I Questions Regarding Compensation				
				Yes	No
1a	a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form				
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.				
	First-class or charter travel Housing allowance or residence for personal use				
	Travel for companions Payments for business use of personal residence				
	Tax indemnification and gross-up payments Health or social club dues or initiation fees				
	Discretionary spending account Personal services (such as maid, chauffeur, chef)				
h	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment				
~	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to				
			1b		
	explain	⊦	10		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all				
_	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line				
			2		
	1a?	⊦	2		
2	Indicate which if any of the following the expenientian used to establish the compensation of the				
3	Indicate which, if any, of the following the organization used to establish the compensation of the				
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a				
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III.				
	Compensation committee Written employment contract				
	Independent compensation consultant				
	Form 990 of other organizations X Approval by the board or compensation committee				
4					
	organization or a related organization:				
а	Receive a severance payment or change-of-control payment?	-	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	-	4b		X
C	Participate in or receive payment from an equity-based compensation arrangement?		4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any				
	compensation contingent on the revenues of:				
а	The organization?	L	5a		X
b	Any related organization?	L	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.				
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any				
	compensation contingent on the net earnings of:				
а	a The organization?	L	6a		X
b	Any related organization?		6b		X
	If "Yes" on line 6a or 6b, describe in Part III.				
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed				
	payments not described on lines 5 and 6? If "Yes," describe in Part III		7		X
8		···			
-	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe				
	in Part III		8		х
		···			
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in				

Regulations section 53.4958-6(c)?

Schedule J (Form 990) 2022

EARTHRIGHTS INTERNATIONAL, INC.

04-3265555

Page 2

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

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-MISC and/or	1099-NEC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)–(D)	in column (B) reported as deferred on prior Form 990
KA HSAW WA (PSEUDONYM)	i) 165,709	0	o c	5,019	0	170,728	0
1 EXEC. DIR./PRESIDENT	ii) 0		C	0	0		0
	i)						
2	ii)		1				
	i)						
3	ii)						
-	i)						_
	ii)						
	i)						
	ii)						
	i)						
	ii)						
_ -	i)						
	ii)						
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17	i)						
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	'' ii)		·····				
16	''/		I .	l			

Schedule .	J (Form 990) 2022	EARTHRIGHTS	INTERNATIONAL,	INC.	04-3265555		Page 3
Part III	Suppleme	ental Information					
Provide 1	the information	, explanation, or desc	riptions required for Part	I, lines 1a,	1b, 3, 4a, 4b, 4c, 5a, 5	5b, 6a, 6b, 7, and 8, and f	or Part II. Also complete this part
for any a	additional infor	mation.	loopo	Oti			
	PU	IDIIC	IIISpe	Cli		OPY	
• • • • • • • • • • • • • • • • • • • •							

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Noncash Contributions

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

Attach to Form 990.

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

OMB No. 1545-0047

2022

Open To Public Inspection

Name of the organization Employer identification number EARTHRIGHTS INTERNATIONAL 04-3265555 Part I Types of Property (c) (a) (b) (d) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1g Art — Works of art 1 Art — Historical treasures 2 Art — Fractional interests 3 Books and publications 4 Clothing and household 5 Cars and other vehicles 6 Boats and planes 7 Intellectual property 8 Securities — Publicly traded 3 109,796 FAIR MARKET VALUE X 9 10 Securities — Closely held stock 11 Securities — Partnership, LLC, or trust interests Securities — Miscellaneous 12 Qualified conservation contribution — Historic structures 14 Qualified conservation contribution — Other Real estate — Residential 15 Real estate — Commercial 16 Real estate — Other 17 Collectibles 18 Food inventory 19 Drugs and medical supplies 20 21 Taxidermy 22 Historical artifacts Scientific specimens 23 Archeological artifacts 24 25 Other (_____) 26 Other (______) 27 28 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? X 30a If "Yes," describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard Х Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a X contributions? 32a If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,

Schedule M (F	form 990) 2022 EAR	THRIGHTS	INTERNATIONAL,	INC.	04-3265555	Page 2
Part II	Supplemental the organization	Information. on is reporting	Provide the information	required by e number of	Part I, lines 30b, 32b, an contributions, the number	d 33, and whether of items received,
			Inspe	Ctic	on Co	DV
						<i>J</i>

SCHEDULE O (Form 990)

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.

OMB No. 1545-0047
2022

Department of the Treasury Internal Revenue Service Attach to Form 990 or Form 990-EZ.

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

Open to Public

Inspection

Name of the organization

EARTHRIGHTS INTERNATIONAL, INC

Employer identification number

04-3265555 FORM 990, PART III - ADDITIONAL INFORMATION CASE SUMMARIES: EARTHRIGHTS INTERNATIONAL'S CASES SEEK TO PROMOTE SOCIAL WELFARE BY DEFENDING "HUMAN AND CIVIL RIGHTS SECURED BY LAW." THAT IS, OUR PURPOSE IS TO PROVIDE REPRESENTATION TO OTHERS IN CASES INVOLVING THE DEFENSE OF HUMAN AND CIVIL RIGHTS, INCLUDING CIVIL, POLITICAL AND ENVIRONMENTAL RIGHTS. REYES V. OCCIDENTAL PETROLEUM (COUNSEL FOR A REGISTERED VICTIM IN A PROCEEDING BEFORE COLOMBIA'S SPECIAL JURISDICTION FOR PEACE, SEEKING DOCUMENTS FROM OCCIDENTAL PETROLEUM UNDER 28 U.S.C. §1782 IN SUPPORT OF AN INVESTIGATION INTO THE FARC'S 1997 ABDUCTION AND MURDER OF TERENCE FREITAS, AN ACTIVIST WORKING WITH THE U'WA INDIGENOUS PEOPLE). DOE 1 V. CHIQUITA; DOE 1 V. HILLS; DOE 1 V. FREIDHEIM; DOE 1 V. CHIQUITA; DOE 29 V. FREIDHEIM; DOE 29 V. OLSON; DOE 8 V. CHIQUITA (COUNSEL FOR COLOMBIAN PLAINTIFFS AND A PUTATIVE CLASS CHALLENGING COMPLICITY OF BANANA COMPANY AND ITS EXECUTIVES IN PARAMILITARY KILLINGS OF PLAINTIFFS' DECEDENTS) JAM V. IFC (COUNSEL FOR INDIAN PLAINTIFFS WHOSE LIVELIHOODS AND/OR PROPERTY WAS HARMED BY POWER PLANT CHALLENGING THE IFC'S FUNDING OF THE PLANT).

DOE V. IFC (COUNSEL FOR HONDURAN FARMERS WHOSE FAMILY MEMBERS WERE MURDERED

BY PALM OIL COMPANY FUNDED BY IFC)

Schedule O (Form 990) 2022 Page 2

Name of the organization

Employer identification number

EARTHRIGHTS INTERNATIONAL, INC.

04-3265555

BOULDER COUNTY V. SUNCOR (COUNSEL FOR CO MUNICIPALITIES SUING OIL COMPANIES FOR THE EFFECTS OF CLIMATE CHANGE)

ENERGY TRANSFER EQUITY V. GREENPEACE (COUNSEL FOR ACTIVIST IN SLAPP SUIT BY OIL PIPELINE COMPANY)

HOUSKA V. HUBBARD COUNTY (COUNSEL FOR WATER PROTECTORS IN MINNESOTA CHALLENGING ILLEGAL POLICE BLOCKADE OF PRIVATE PROPERTY)

CENTER FOR BIOLOGICAL DIVERSITY V. CALGEM (COUNSEL FOR ENVIRONMENTAL
ORGANIZATION SUING CALIFORNIA'S STATE OIL AND GAS REGULATOR OVER ITS
FAILURE TO APPLY ENVIRONMENTAL REVIEW TO DRILLING PERMITS)

MARGINALISED AFFECTED PROPERTY OWNERS V. BSG RESOURCES LTD. (COUNSEL FOR COMMUNITY IN SIERRA LEONE SEEKING DOCUMENTS UNDER 28 U.S.C. § 1782 RELATING TO CORPORATE STRUCTURE OF MINING COMPANY)

MAI V. THE COCA-COLA CO. (COUNSEL FOR CAMBODIAN VICTIMS OF LAND GRABBING BY A THAI SUGAR COMPANY SEEKING DOCUMENTS UNDER 28 U.S.C. § 1782 RELATING TO COCA-COLA'S INVESTIGATION OF THE LAND-GRABBING INCIDENT)

EARTHRIGHTS ATTORNEYS ALSO LITIGATE CASES BEFORE THE INTER-AMERICAN COURT OF HUMAN RIGHTS, THE COURTS OF THE REPUBLIC OF PERU, AND THE COURTS OF THE REPUBLIC OF THE UNION OF MYANMAR TO DEFEND HUMAN RIGHTS AND PROTECT THE ENVIRONMENT. EARTHRIGHTS ALSO FILES AMICUS CURIAE BRIEFS IN U.S., FOREIGN, AND INTERNATIONAL COURTS ON BEHALF OF ITSELF AND AS COUNSEL FOR OTHER

PAGE 1 OF 4

Schedule O (Form 990) 2022 Page 2

Name of the organization

Employer identification number

EARTHRIGHTS INTERNATIONAL, INC.

04-3265555

AMICI.

Public Inspection Copy

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENTS

EARTHRIGHTS USES THE POWER OF LAW AND THE POWER OF PEOPLE IN DEFENSE OF HUMAN RIGHTS AND THE ENVIRONMENT

FORM 990, PART V, LINE 4B - FINANCIAL ACCOUNTS IN FOREIGN COUNTRIES THAILAND, PERU

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990

A DRAFT OF THE 990 IS SENT TO THE ORGANIZATION AND REVIEWED BY THE FINANCE

DIRECTOR, FINANCE ASSOCIATE AND GENERAL COUNSEL. ONCE THE DRAFT IS REVIEWED

AND APPROVED, A FINAL COPY IS SENT (IN PDF FORMAT) FOR FINAL

REVIEW AND SIGNATURE TO THESE PARTIES AND TO THE TREASURER PRIOR TO

SUBMISSION TO THE I.R.S..

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
THE ORGANIZATION'S CONFLICT OF INTEREST POLICY IS SELF-POLICING. MEMBERS
OF THE ORGANIZATION RECEIVE GUIDANCE AS TO THE ORGANIZATION'S CONFLICT OF
INTEREST POLICY AND ARE REQUIRED TO DISCLOSE ANY POTENTIAL OR ACTUAL
CONFLICTS TO THE BOARD OR THE OFFICERS OF THE ORGANIZATION. AGREEMENT TO
THE CONFLICT OF INTEREST POLICY IS A REQUIRED CONDITION OF EMPLOYMENT FOR
ALL STAFF. ALL BOARD OF DIRECTOR MEMBERS MUST SIGN AN UPDATED CONFLICT OF
INTEREST AGREEMENT, ON AN ANNUAL BASIS, IN ORDER TO ENSURE THAT NO NEW
RELATIONSHIPS HAVE BEEN STARTED WHICH MAY CAUSE ACTUAL OR POTENTIAL
CONFLICTS.

Schedule O (Form 990) 2022 Page 2 Employer identification number Name of the organization EARTHRIGHTS INTERNATIONAL, INC. 04-3265555 FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL COMPENSATION IS ANALYZED AND REVIEWED PERIODICALLY. SALARIES ARE COMMENSURATE WITH OTHER ORGANIZATIONS OF COMPARABLE SIZE. FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION THE ORGANIZATION'S FINANCIAL STATEMENTS ARE AVAILABLE ONLINE AT WWW.EARTHRIGHTS.ORG AS PART OF THE ANNUAL REPORT POSTING. GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST AND A COPY OF THE GOVERNING DOCUMENTS IS ALSO ON FILE WITH THE COMMONWEALTH OF MASSACHUSETTS. FORM 990, PART IX, LINE 11G - OTHER FEES FOR SERVICES DESCRIPTION TOT/PROG SERVICE MGT & GENERAL IT SUPPORT \$ 43,478 \$ 0 PAYROLL \$ 0 \$ 5,438 PROGRAM CONSULTANTS 421,877 COMMUNICATION CONSULTANTS 59,117 TRANSLATION 41,361 \$ 100 \$ MONITORING AND EVALUATION \$ **18,633** \$ 0 \$ STIPENDS PAGE 3 OF 4

Name of the organization EARTHRIGHTS INTERNATIONAL, INC.	Employer identification number 04-3265555
Putalic Inspection	\$ 5,768 CODY
\$ 602,849 \$ 37,909	\$ 5,768
	PAGE 4 OF 4

SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Part I

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

Legal domicile (state

Total income

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

(b)

Primary activity

OMB No. 1545-0047
2022

Open to Public Inspection

Direct controlling

Employer identification number

04-3265555

(e)

End-of-year assets

EARTHRIGHTS INTERNATIONAL, INC.

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

		or foreign co	ountry)					entii	.y
(1)									
(2)									
(3)									
(4)									
(5)									
Part II Identification of Related Tax-Exempt Organizations one or more related tax-exempt organizations during the	Complete if the e tax year.	organization ar	nswered	"Yes" on	Form 990), Par	t IV, line 34,	because it	had
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	Exempt Co	d) ode section	(e) Public charity (if section 501)		(f) Direct controlling entity	Section controlle	(g) 512(b)(13) ed entity?
(a) Name, address, and EIN of related organization (1)	(b)		Exempt Co	d) ode section			(f) Direct controlling	Section controlle Yes	(g) 512(b)(13) ed entity? No
(a) Name, address, and EIN of related organization	(b)		Exempt Co	d) ade section			(f) Direct controlling	Section controlle	(g) 512(b)(13) ed entity?
(a) Name, address, and EIN of related organization (1)	(b)		(c Exempt Co	d) ade section			(f) Direct controlling	Section controlle	(g) 512(b)(13) ed entity?
(a) Name, address, and EIN of related organization (1) (2)	(b)		Exempt Co	d) ade section			(f) Direct controlling	Section controlle	(g) 512(b)(13) ed entity?
(a) Name, address, and EIN of related organization (1) (2)	(b)		Exempt Co	d) ade section			(f) Direct controlling	Section controlle	(g) 512(b)(13) ed entity?

Name, address, and EIN (if applicable) of disregarded entity

(Form 990) 2022	EARTHRIGHTS	INTERNATIONAL,	INC.	04-326555
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EARTHRIGHTS INTER	KNATIONAL,	TM	C. 04-3	265555										⊃age :
ion of Related Organiza	tions Taxabl	le as	a Partnersh	nip. Complete it	f the organi	zation answ	ered "Ye	es" o	n F	orm 990	O, Part I	√, lin∈	e 34,	
(a) ess, and EIN of organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f)	Share	of end-of-	Dis portionallo	pro- onate oc.?	Code amount of Sche	V—UBI in box 20 edule K-1	managir partner	or Perd ng OWI ?	(k) centage nership
		0041.1137		,				Yes	INO			Yes in	10	
ion of Related Organiza cause it had one or more	tions Taxable related organized	l e as nizati	a Corporati ons treated a	on or Trust. Constant or the constant of the c	complete if	the organiza	tion ansv	were	ed "	Yes" on	Form 9	90, P	art I\	/,
(a) EIN of related organization	(b)		(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f)	al						Se 512 con	(i) ction (b)(13) trolled
	<u> </u>												Yes	No
TH														
		NG	TH	N/A					1!	5,473			х	
ON FOR ENVIRONMENT														
TH	RESEARCI	.	тн	N/A					2:	3.744			x	
										7.22				
	ion of Related Organiza had one or more related (a) ess, and EIN of organization ion of Related Organiza cause it had one or more (a) EIN of related organization ION FOR CULTURE AN TH ON FOR ENVIRONMENT TH	ion of Related Organizations Taxab had one or more related organizations (a) (b) Primary activity organization ion of Related Organizations Taxab cause it had one or more related organization (b) Primary activity organization (a) (b) Primary activity organization (b) Primary activity organization (c) Primary	ion of Related Organizations Taxable as had one or more related organizations treat (a) ess, and EIN of organization (b) Primary activity domicile (state or foreign country) ion of Related Organizations Taxable as cause it had one or more related organizati (a) (b) Primary activity EIN of related organization TH ADVOC/TRNG ON FOR ENVIRONMENT TH RESEARCH	ion of Related Organizations Taxable as a Partnersh had one or more related organizations treated as a part (a) (b) (c) Legal (d) Direct controlling domicile (state or foreign country) ion of Related Organizations Taxable as a Corporatic cause it had one or more related organizations treated as a part (b) (c) Legal domicile (state or foreign country) ion of Related Organizations Taxable as a Corporatic cause it had one or more related organizations treated as (a) (b) (c) Legal domicile (state or foreign country) ION FOR CULTURE AND TH ADVOC/TRNG TH RESEARCH TH RESEARCH TH	ion of Related Organizations Taxable as a Partnership. Complete in had one or more related organizations treated as a partnership during (a) ess and EIN of organization of organization or primary activity organization or the country). ion of Related Organizations Taxable as a Corporation or Trust. Organization or the country of the controlling controlling organization or the country of the controlling organization or the country of the controlling organization or the country of the country organization or the country or the country organization or the country or the country organization or the country organization or the country or the count	ion of Related Organizations Taxable as a Partnership. Complete if the organization and one or more related organizations treated as a partnership during the tax yes essable and EIN of primary activity and the controlling of the controlling	ion of Related Organizations Taxable as a Partnership. Complete if the organization answ had one or more related organizations treated as a partnership during the tax year. (d) est, and Elb of primary activity (site or foreign country) ion of Related Organizations Taxable as a Corporation or Trust. Complete if the organization of Related Organizations Taxable as a Corporation or Trust. Complete if the organization of Related Organizations Taxable as a Corporation or Trust. Complete if the organization or trust of the organization or trust organization or trust of the organization or trus	ion of Related Organizations Taxable as a Partnership. Complete if the organization answered "Ye had one or more related organizations treated as a partnership during the tax year. (a)	ion of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" of had one or more related organizations treated as a partnership during the tax year. (a) sest and EIN of the primary activity of the primary act	ion of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on F had one or more related organizations treated as a partnership during the tax year. (a) (b) (c) (c) (d) (c) (d) (c) (d) (d) (c) (d) (d) (d) (d) (d) (e) (d) (e) (d) (e) (e) (e) (e) (e) (e) (e) (e) (e) (e	ion of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 99 had one or more related organizations treated as a partnership during the tax year. (b) (c) (d) (e) (f) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f	ion of Related Organizations Taxable as a Partnership Ourng the tax year. (a) (b) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	ion of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, Inhand one or more related organizations treated as a partnership of ended from the partnership of th	ion of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, had one or more related organizations treated as a partnership control in the tax year. (b)

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.	\mathbf{r}) //			Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more	related organizations list	ed in Parts II-IV?				
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				. <u>1a</u>		X
b Gift, grant, or capital contribution to related organization(s)				. 1b		X
c Gift, grant, or capital contribution from related organization(s)				. 1c		X
d Loans or loan guarantees to or for related organization(s)				. 1d		X
e Loans or loan guarantees by related organization(s)				. <u>1e</u>		Х
f Dividends from related organization(s)				1f		X
g Sale of assets to related organization(s)				. 1g		X
h Purchase of assets from related organization(s)				. 1h		Х
i Exchange of assets with related organization(s)				1i		Х
j Lease of facilities, equipment, or other assets to related organization(s)				. <u>1j</u>		Х
k Lease of facilities, equipment, or other assets from related organization(s)				. 1k		Х
I Performance of services or membership or fundraising solicitations for related organization(s)				. 11		Х
m Performance of services or membership or fundraising solicitations by related organization(s)				. 1m		Х
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)						Х
o Sharing of paid employees with related organization(s)				. 10		Х
p Reimbursement paid to related organization(s) for expenses				. 1p	Х	
q Reimbursement paid by related organization(s) for expenses				. 1q		Х
r Other transfer of cash or property to related organization(s)				. 1r		Х
s Other transfer of cash or property from related organization(s)				. 1s		Х
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete	this line, including cover	ed relationships and trans	action thresholds.			
(a)	(b)	(c)	(d)			
Name of related organization	Transaction type (a-s)	Amount involved	Method of determining a	imount invol	ved	
	,, ,					
		207 200	#- #			
(1) FOUNDATION FOR CULTURE AND	P	327,000	CASH TRANSFER	VALUE	i	
(4)		010 000	61 dii			
(2) FOUNDATION FOR ENVIRONMENT AND	P	210,000	CASH TRANSFER	VALUE	i	
(3)						
10						
(4)						
(5)						
(0)						
(6)						

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

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

Name, address, and EIN of entity	(b) Primary activity	Legal domicile (state or foreign	Predominant income (related, unrelated, excluded from tax under	Are all sec 501(organiz	partners tion c)(3) ations?	(f) Share of total income	(g) Share of end-of-year assets	Disprop alloca	h) ortionate itions?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana parti	eral or aging ner?	(k) Percentage ownership
-		country)	sections 512-514)	Yes	No			Yes	No		Yes	No	1
(1)													l
													I
(2)													
(3)													
(4)													
(5)													
(6)													
•													
(7)													
(8)													
(9)													
(10)													
(11)													
		1						1					

Schedule R (F	Form 990) 2022	EARTHRIGHTS	INTERNATIONAL,	INC.	04-3265555	Page 5
Part VII	Suppleme	ntal Information.				
Part VII	Provide ad	ditional information for	or responses to questions	s on Schedu	ule R. See instructions.	
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Form **926**(Rev. November 2018)
Department of the Treasury
Internal Revenue Service

Return by a U.S. Transferor of Property to a Foreign Corporation

► Go to www.irs.gov/Form926 for instructions and the latest information.

► Attach to your income tax return for the year of the transfer or distribution.

OMB No. 1545-0026

Attachment Sequence No. 128

_Pa	art I U.S. Transferor Information (see instructions)	
	ARTHRIGHTS INTERNATIONAL, INC.	Identifying number (see instructions) 04-3265555
_ <u></u>	Is the transferee a specified 10%-owned foreign corporation that is not	
2	If the transferor was a corporation, complete questions 2a through 2d.	a controlled foreign corporation:
	If the transfer was a section 361(a) or (b) transfer, was the transfer or	controlled (under section 368(c)) by
u	five or ferror deposite comparations?	
h		····· 🛱 🛴
b	If not, list the controlling shareholder(s) and their identifying number(s).	
	The first the controlling characteristics, and their techniques from the first the controlling characteristics,	
	Controlling shareholder	Identifying number
	If the transferor was a member of an affiliated group filing a consolidate	od return, was it the parent
·	corporation?	
	·	
	If not, list the name and employer identification number (EIN) of the pa	rent corporation.
	Name of parent corporation	EIN of parent corporation
	Have basis adjustments under section 367(a)(4) been made?	Yes X No
3	If the transferor was a partner in a partnership that was the actual transcomplete questions 3a through 3d. List the name and EIN of the transferor's partnership.	
	List the flame and Lift of the transletors partiteiship.	
	Name of partnership	EIN of partnership
b	Did the partner pick up its pro rata share of gain on the transfer of part	nership assets?
	le the newtony disposing of its entire interest in the newtoneshing	Yes No
	Is the partner disposing of an interest in a limited partnership that is required.	
4	securities market?	
D,		
	art II Transferee Foreign Corporation Information	(see instructions)
4	Transferee Foreign Corporation Information Name of transferee (foreign corporation)	•
4	Name of transferee (foreign corporation)	5a Identifying number, if any
4	Name of transferee (foreign corporation) FOUNDATION FOR CULTURE & ENVIRONME	5a Identifying number, if any
4	Name of transferee (foreign corporation) FOUNDATION FOR CULTURE & ENVIRONME Address (including country)	5a Identifying number, if any 5b Reference ID number
4	Name of transferee (foreign corporation) FOUNDATION FOR CULTURE & ENVIRONME Address (including country) PO BOX 183 CHIANG MAI	5a Identifying number, if any
6	Name of transferee (foreign corporation) FOUNDATION FOR CULTURE & ENVIRONME Address (including country) PO BOX 183 CHIANG MAI TH 50202 THAILAND	5a Identifying number, if any 5b Reference ID number (see instructions)
4	Name of transferee (foreign corporation) FOUNDATION FOR CULTURE & ENVIRONME Address (including country) PO BOX 183 CHIANG MAI	5a Identifying number, if any 5b Reference ID number (see instructions)
6	Name of transferee (foreign corporation) FOUNDATION FOR CULTURE & ENVIRONME Address (including country) PO BOX 183 CHIANG MAI TH 50202 THAILAND	5a Identifying number, if any 5b Reference ID number (see instructions)

EARTHRIGHTS INTERNATIONAL, 04-3265555 Form 926 (Rev. 11-2018) INC. Page 2 Information Regarding Transfer of Property (see instructions) Part III Section A—Cash **(b)** Description of (c) Fair market value on (d) Cost or other (a) Date of (e) Type of Gain recognized on property transfer property date of transfer basis transfer 327,000 Cash 10 Was cash the only property transferred? Yes No If "Yes," skip the remainder of Part III and go to Part IV. Section B-Other Property (other than intangible property subject to section 367(d)) (d) Cost or other (e) (b) Description of (a) Date of (c) Fair market value on Type of Gain recognized on property date of transfer transfer property basis transfer Stock and securities Inventory Other property (not listed under another category) Property with built-in loss Totals 11 Did the transferor transfer stock or securities subject to section 367(a) with respect to which a gain recognition agreement was filed? 12a Were any assets of a foreign branch (including a branch that is a foreign disregarded entity) transferred to a foreign corporation? If "Yes," go to line 12b. b Was the transferor a domestic corporation that transferred substantially all of the assets of a foreign branch (including a branch that is a foreign disregarded entity) to a specified 10%-owned foreign corporation? If "Yes," continue to line 12c. If "No," skip lines 12c and 12d, and go to line 13. c Immediately after the transfer, was the domestic corporation a U.S. shareholder with respect to the transferee foreign corporation? Yes No If "Yes," continue to line 12d. If "No," skip line 12d, and go to line 13. d Enter the transferred loss amount included in gross income as required under section 91 ▶ \$ 13 Did the transferor transfer property described in section 367(d)(4)? If "No," skip Section C and questions 14a through 15. Section C-Intangible Property Subject to Section 367(d) (f) Income inclusion (c) (e) Type of Date of Description of Useful Arm's length price Cost or other for year of transfer on date of transfer transfer basis property property (see instructions) Property described in sec. 367(d)(4) Totals

Form **926** (Rev. 11-2018)

Form 926 (Rev. 11-2018) EARTHRIGHTS INTERNATIONAL, 04-3265555 Page 3 14a Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life reasonably anticipated to exceed 20 years? At the time of the transfer, did any of the transferred intangible property have an indefinite useful life? b Did the transferor choose to apply the 20-year inclusion period provided under Regulations section 1.367(d)-1(c)(3)(ii) for any intangible property? No If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in Regulations section 1.367(d)-1(c)(3)(ii) ▶\$ 15 Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)? Supplemental Part III Information Required To Be Reported (see instructions) Part IV Additional Information Regarding Transfer of Property (see instructions) Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After Type of nonrecognition transaction (see instructions) 17 Indicate whether any transfer reported in Part III is subject to any of the following. 18 Gain recognition under section 904(f)(3) No Gain recognition under section 904(f)(5)(F) h Yes Nο X Recapture under section 1503(d) Yes С No X Exchange gain under section 987 Yes No Did this transfer result from a change in entity classification? X Yes No 19 X Did a domestic corporation make a distribution of property covered by section 367(e)(2)? See instructions 20a Yes If "Yes," complete lines 20b and 20c. Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b) ▶ \$ b Did the domestic corporation not recognize gain or loss on the distribution of property because the property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)? Did a domestic corporation make a section 355 distribution of stock in a foreign controlled corporation 21 covered by section 367(e)(1)? See instructions Yes

Form **926** (Rev. 11-2018)

(Rev. November 2018) Department of the Treasury Internal Revenue Service

Return by a U.S. Transferor of Property to a Foreign Corporation

► Go to www.irs.gov/Form926 for instructions and the latest information. ► Attach to your income tax return for the year of the transfer or distribution. OMB No. 1545-0026

Sequence No. 128

Attachment

Part 1 U.S. Transferor information (see instructions)	
Name of transferor EARTHRIGHTS INTERNATIONAL, INC.	Identifying number (see instructions) 04-3265555
1 Is the transferee a specified 10%-owned foreign corporation that is not	
2 If the transferor was a corporation, complete questions 2a through 2d.	a controlled total or composition.
a If the transfer was a section 361(a) or (b) transfer, was the transfer or	ontrolled (under section 368(c)) by
fine an ferror demonstration and the con-	□ v ₹₹ v
b Did the transferon agencia in a sistence of the the transfero	W
If not, list the controlling shareholder(s) and their identifying number(s).	
Controlling shareholder	Identifying number
c If the transferor was a member of an affiliated group filing a consolidate corporation?	
If not, list the name and employer identification number (EIN) of the pa	rent corporation.
Name of parent corporation	EIN of parent corporation
d Have basis adjustments under section 367(a)(4) been made?	Yes X No
3 If the transferor was a partner in a partnership that was the actual transcomplete questions 3a through 3d.a List the name and EIN of the transferor's partnership.	eferor (but is not treated as such under section 367),
Name of partnership	EIN of partnership
b Did the partner pick up its pro rata share of gain on the transfer of part	nership assets?
a la the neutron dispession of its entire interest in the neutronates?	Yes No
d Is the partner disposing of an interest in a limited partnership that is required.	
securities market?	
Part II Transferee Foreign Corporation Information	
4 Name of transferee (foreign corporation)	5a Identifying number, if any
FOUNDATION FOR ENVIRONMENT	
6 Address (including country)	5b Reference ID number
PO BOX 183 CHIANG MAI	(see instructions)
CHIANG MAI TH 50202 THAILAND	(
7 Country code of country of incorporation or organization (see instruction	ns)
8 Foreign law characterization (see instructions)	
9 Is the transferee foreign corporation a controlled foreign corporation?	

EARTHRIGHTS INTERNATIONAL, 04-3265555 Form 926 (Rev. 11-2018) INC. Page 2 Information Regarding Transfer of Property (see instructions) Part III Section A—Cash **(b)** Description of (c) Fair market value on (d) Cost or other (a) Date of (e) Type of Gain recognized on property transfer property date of transfer basis transfer 210,000 Cash 10 Was cash the only property transferred? Yes No If "Yes," skip the remainder of Part III and go to Part IV. Section B—Other Property (other than intangible property subject to section 367(d)) (d) Cost or other (e) (b) Description of (a) Date of (c) Fair market value on Type of Gain recognized on property date of transfer transfer property basis transfer Stock and securities Inventory Other property (not listed under another category) Property with built-in loss Totals 11 Did the transferor transfer stock or securities subject to section 367(a) with respect to which a gain recognition agreement was filed? 12a Were any assets of a foreign branch (including a branch that is a foreign disregarded entity) transferred to a foreign corporation? If "Yes," go to line 12b. b Was the transferor a domestic corporation that transferred substantially all of the assets of a foreign branch (including a branch that is a foreign disregarded entity) to a specified 10%-owned foreign corporation? If "Yes," continue to line 12c. If "No," skip lines 12c and 12d, and go to line 13. c Immediately after the transfer, was the domestic corporation a U.S. shareholder with respect to the transferee foreign corporation? Yes No If "Yes," continue to line 12d. If "No," skip line 12d, and go to line 13. d Enter the transferred loss amount included in gross income as required under section 91 ▶ \$ 13 Did the transferor transfer property described in section 367(d)(4)? If "No," skip Section C and questions 14a through 15. Section C-Intangible Property Subject to Section 367(d) (f) Income inclusion (c) (e) Type of Date of Description of Useful Arm's length price Cost or other for year of transfer on date of transfer transfer basis property property (see instructions) Property described in sec. 367(d)(4)

Totals

Form 926 (Rev. 11-2018) EARTHRIGHTS INTERNATIONAL, 04-3265555 Page 3 14a Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life reasonably anticipated to exceed 20 years? At the time of the transfer, did any of the transferred intangible property have an indefinite useful life? b Did the transferor choose to apply the 20-year inclusion period provided under Regulations section 1.367(d)-1(c)(3)(ii) for any intangible property? No If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in Regulations section 1.367(d)-1(c)(3)(ii) ▶\$ 15 Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)? Supplemental Part III Information Required To Be Reported (see instructions) Part IV Additional Information Regarding Transfer of Property (see instructions) Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before % (b) After Type of nonrecognition transaction (see instructions) 17 Indicate whether any transfer reported in Part III is subject to any of the following. 18 Gain recognition under section 904(f)(3) No Gain recognition under section 904(f)(5)(F) h Yes Nο X Recapture under section 1503(d) Yes С No X Exchange gain under section 987 Yes No Did this transfer result from a change in entity classification? X Yes No 19 X Did a domestic corporation make a distribution of property covered by section 367(e)(2)? See instructions 20a Yes If "Yes," complete lines 20b and 20c. Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b) ▶ \$ b Did the domestic corporation not recognize gain or loss on the distribution of property because the property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)? Did a domestic corporation make a section 355 distribution of stock in a foreign controlled corporation 21 covered by section 367(e)(1)? See instructions Yes

Form **926** (Rev. 11-2018)

EART5555 EARTHRIGHTS INTERNATIONAL, INC. 11/15/2023 12:08 PM **Federal Statements** 04-3265555 FYE: 12/31/2022 Savings - EOY Description **Amount** 4,613,203 CASH AND CASH EQUIVALENTS ADVANCES TO FIELD OFFICES 43,141 ROUNDING TOTAL 4,656,344 Other exempt expenditures Description Amount 6,397,569 TOTAL EXPENDITURES LESS:LOBBYING REPORTED ABOVE -24,7166,372,853 TOTAL Prepaid expense - EOY Description Amount PREPAID EXPENSES 69,258 69,258 TOTAL Revenue-net unrealized gains Description Amount -869,496 -10,717 TOTAL -880,213

eSignature - Certificate of Completion

Document id: FNYHZXZV

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Fernanda Hopenhaym

Fernanda Hopenhaym