990 Form

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 2024 Open to Public

P00295352

47-4018663

703-218-4100

X Yes No

Form **990** (2024)

Firm's EIN

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. Inspection For the 2024 calendar year, or tax year beginning and ending C Name of organization D Employer identification number Check if applicable: Address change EARTHRIGHTS INTERNATIONAL, Doing business as 04-3265555 Name change Number and street (or P.O. box if mail is not delivered to street address) 1400 K STREET NW SUITE 750 202-466-5188 Initial return Final return/ City or town, state or province, country, and ZIP or foreign postal code terminated WASHINGTON DC 20005 11,650,306 **G** Gross receipts\$ Amended return Name and address of principal officer: X No **H(a)** Is this a group return for subordinates? Yes Application pending ODESSA STA. MARIA **H(b)** Are all subordinates included? If "No." attach a list. See instructions **X** 501(c)(3) 501(c) 4947(a)(1) or 527 Tax-exempt status) (insert no.) WWW.EARTHRIGHTS.ORG Website: H(c) Group exemption number X Corporation Trust Year of formation: 1995 Form of organization: Association M State of legal domicile: MA Part I Summarv 1 Briefly describe the organization's mission or most significant activities: TO WORK WITH PEOPLE AROUND THE WORLD TO PROTECT HUMAN RIGHTS AND THE Governance ENVIRONMENT 2 Check this box | if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 11 ⋖ర 4 Number of independent voting members of the governing body (Part VI, line 1b) 11 5 Total number of individuals employed in calendar year 2024 (Part V, line 2a) 5 40 6 Total number of volunteers (estimate if necessary) 10 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 0 b Net unrelated business taxable income from Form 990-T, Part I, line 11 Current Year 5,825,794 8 Contributions and grants (Part VIII, line 1h) 10,591,187 Revenue 9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 200,396 261,881 82<u>,630</u> 1,045 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 6,108,820 10,854,113 12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 340,608 265,635 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 4,518,755 5,733,718 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 449,645 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 2,642,837 2,934,715 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 8,934,068 7,502,200 -1,393,3801,920,045 19 Revenue less expenses. Subtract line 18 from line 12 Or Soc Beginning of Current Year End of Year 13,555,077 15,714,040 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 364,682 436,528 22 Net assets or fund balances. Subtract line 21 from line 20 13,190,395 15,277,512 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Fernanda Hopenhaum 11/11/2025 Signature of officer a Hopenhaym, 11, Sign FERNANDA HOPENHAYM TREASURER-OUTGOING Here Type or print name and title PTIN Preparer's name Preparer's signature Margaret Martinez
MARGARET H MARTINEZ Paid 11/11/25 self-employed

100

22030

VTA ADVISORS

FAIRFAX, VA May the IRS discuss this return with the preparer shown above? See instructions

10400 EATON PL STE

MARGARET H MARTINEZ

Firm's name

Preparer

Use Only

Form 990 (2024) EARTHRIGHTS IN	TERNATIONAL, IN	NC. 04-326555	5 Page 2
Part III Statement of Program	Service Accomplishme	ents to any line in this Part III	
1 Briefly describe the organization's mission		,	
TO WORK WITH PEOPLE ENVIRONMENT	AROUND THE WORL	LD TO PROTECT HU	MAN RIGHTS AND THE
PUDIC	INSD	ection	CODV
2 Did the organization undertake any signifi	cant program services during th	ne year which were not listed on t	
prior Form 990 or 990-EZ?			Yes X No
If "Yes," describe these new services on			
3 Did the organization cease conducting, or services?		ow it conducts, any program	Yes X No
If "Yes," describe these changes on Sche		of its three largest program consis	an an management by
4 Describe the organization's program servi expenses. Section 501(c)(3) and 501(c)(4			
the total expenses, and revenue, if any, for		· -	anocations to others,
4a (Code:) (Expenses \$ 1 ADVOCACY AND CAMPAIGN BROAD SUPPORT AMONG L RESOURCES, ADVOCATE FOR AND PROMOTE ACCOUNTAB	OCAL COMMUNITIE OR HUMAN AND CI	SEEKS TO RAISE A S TO PROTECT THE VIL RIGHTS AND	AWARENESS AND BUILD EIR RIGHTS AND
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LEGAL: EARTHRIGHTS UN LEGAL ADVOCACY TO DEF ESTABLISH AND CLARIFY	LEGAL STANDARD LD. CASES ARE C NEFIT RATHER TH)(3), THE ORGAN TABLE PURPOSES OBTAINED FOR IN	ABLE IMPACT LITICIVIL RIGHTS AND PROMOTE A CHOSEN FOR THEIR AND TO ADVANCE PROMOTE AND IS DESIGNED TO THE STATES OF THE STATES O	GATION AND RELATED ENVIRONMENTAL RIGHTS, ACCOUNTABILITY AND DETER PUBLIC SIGNIFICANCE AND RIVATE INTERESTS. IN ATION FURTHERS TO PRODUCE SYSTEMIC S IS INCIDENTAL TO THESE
4c (Code:) (Expenses \$ THE EARTHRIGHTS SCHOO) AMERICA IN ENVIRONMENTECHNIQUES.	LS: EDUCATES PE		T ASIA AND SOUTH
• • • • • • • • • • • • • • • • • • • •			

•			
4d Other program services (Describe on Sch	edule O.)		
	including grants of \$) (Revenue \$	
4e Total program service expenses	7,309,320		

			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 candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		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,"	110	х	
h	complete Schedule D, Part VI Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more	11a	Λ	
b	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more	110		
·	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
ŭ	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
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	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	X	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	4-7		-
10	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	10		х
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		^
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		Х
20a	Did the consciention around one or many beautiful facilities? If "Vee " consults Cabadyde II	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
-	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x

	One chilst of Required Continuedy			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the		y	
	organization's current and former officers, directors, trustees, key employees, and highest compensated	V		
240	employees? If "Yes," complete Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	ZJa		
-	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule			
	L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
00	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	33		
٠.	or IV, and Part V, line 1	34	x	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	X	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable		3,5	
37	related organization? If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36	X	
31	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and	<u> </u>		<u></u>
	19? Note: All Form 990 filers are required to complete Schedule O.	38	х	
Pa	art V Statements Regarding Other IRS Filings and Tax Compliance			-
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		X
,	5. #		Yes	No
1a h	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 1a 26	-		
b C	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
Ü	reportable gaming (gambling) with backup withholding rules for reportable payments to vehiclis and	10		

Pa	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 40			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	_3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,	V		
	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		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
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			
	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			
	required to file Form 8282?	7с		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
40	against amounts due or received from them.) [11b]	40		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b 12	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	42-		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
L	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
_	the organization is licensed to issue qualified health plans Enter the amount of reserves on hand 13b			
C 1 <i>1</i> 2	Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year?	14a		х
14a b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14a 14b		<u> </u>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	1.40		
		15		х
	excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	"		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х
. •	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, 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			

Form 990 (2024) EARTHRIGHTS INTERNATIONAL, INC. 04-3265555 Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI. Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 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 11 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? X 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? X 8a Each committee with authority to act on behalf of the governing body? X 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X the organization's mailing address? If "Yes," provide the names and addresses on Schedule O 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? 10a X b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe on Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 12a **b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c 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 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official X 15a X Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement Х with a taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 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 17 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.
- State the name, address, and telephone number of the person who possesses the organization's books and records.

SELAM HAILU WASHINGTON

1400 K ST. NW STE 750

202-466-5188 DC 20005

Form 990 (20	24) EARTHRIGHTS	INTERNATIONAL,	INC.	04-3265555	Page
Part VII	Compensation of Off	icers, Directors, Truste	es, Key	Employees, Highest Compensat	ed Employees, and

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

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

Independent Contractors

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, 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 por any related organization compensated any current officer, director, or trustee.

Check this box if neither the org	anization nor an	y rel	ated	orga	aniza	tion c	om	pensated any current office	er, director, or trustee.	
(A) Name and title	(B) Average hours per week	off	Position (do not check more than one cox, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
(1) SHANNON YOUNG	40.00									
DEPUTY EXEC DIRECTOR	0.00			X				197,932	0	6,088
(2) RICHARD HERZ	40.00									
SR. LITIGATION ATTY	0.00					x		154,902	0	29,364
(3) ODESSA STA. MAR	IA 40.00									
EXECUTIVE DIRECTOR	0.00	1		x				156,575	0	21,285
(4) SELAM HAILU	0.00							130/3/3		21,203
(4) 522221 121220	40.00									
FINANCE DIRECTOR	0.00	-				x		160,318	0	14,785
(5) MARISSA VAHLSING		1						100/310		11/705
(5) FRICEDOM VINIBILITY	40.00									
SUPERVISING ATTY	0.00					\mathbf{x}		164,412	0	4,986
(6) MICHELLE HARRIS		1						101/112		1,700
(o) III CIIIIII III III III III	40.00									
DEP. US LEGAL DIR	0.00	1				x		147,397	0	16,278
(7) MARCO SIMONS	0.00							117/337		10/2/0
(//IIIICO BITIONS	40.00									
FORMER GEN COUNSEL	0.00	·				x		153,762	0	4,661
(8) AARON ESKE	0.00							2557762		1,001
(o) Indicate Library	2.00									
CO-CHAIR	0.00	X		x				0	0	0
(9) DAN GERARD	0000	 								
(0) 2121 321212	0.50									
TREASURER-INCOMING	0.00	X		x				0	0	0
(10) RACHEL GORE-FRE		† <u></u>		_ _						
· · · · · · · · · · · · · · · · · · ·	0.50									
DIRECTOR	0.00	X						0	0	0
(11) FERNANDA HOPENH										
	1.00									
TREASURER-OUTGOING	0.00	X		X				0	0	0

Part VII	Section A. Officers	s, Directors, Tr	uste	es, ł	⟨ ey	Emp	oloyee	es,	and Highest Compensate	ed Employees (continued)				
Na	(A) me and title	(B) Average hours per week (list any hours for related organizations below dotted line)	bo	x, unle ficer a	Pos check ess pe nd a d	rson i directo	than or s both is both Highest compensated	an	(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	or	(F) timated of oth compens from t ganization	er ation he	6
(12)	RAH JAFFE	0.50												_
(13)	URA LEVINE	0.00	X						0	0				0
DIRECTOR (14) SO: (14)	LINN LIM	0.00	X						0	0				0
DIRECTOR (15) GR. (15)	ACIELA M M	0.00 ERCEDES 0.50	LU						0	0				0
DIRECTOR	OL MEHRA	0.00	X						0	0				0
DIRECTOR (17) SH	ALINI NATA		x						0	0				0
(17) <u>CO-CHAIR</u> (18) NE	IL POPOVIC	2.00 0.00	x		x				0	0				0
(18)		0.50	x						0	0				0
(19)														
c Total fro	m continuation she	ets to Part VII,	Sec	tion	Α				1,135,298				7,4	
d Total (ac 2 Total nur reportable	Id lines 1b and 1c) nber of individuals (in compensation from	cluding but not I the organization	imite	d to 7	thos	e list	ted at	 DOV	1,135,298 e) who received more than	\$100,000 of			97,4	
employee 4 For any i organizat	e on line 1a? If "Yes," ndividual listed on lind ion and related organ	complete Scheme 1a, is the sum nizations greater	dule of rotthan	J for eport	suci able 50,00	h ind com	dividua npens f "Yes	al . atio s," c	ee, or highest compensate n and other compensation complete Schedule J for su	from the		3	Yes	X
5 Did any	person listed on line '	1a receive or ac	crue	com	pens	atior	າ from	n an	ny unrelated organization on for such person	r individual		5	Λ	х
1 Complete		ve highest comp							actors that received more a		-ar			
		(A) I business address	Jinpe	nout		01 11		<u> Cria</u>		(B) tion of services	Juli.	Со	(C) mpensati	ion
	TREET DC LLC	NY	. 1	.10		26	HAR		r park dr R ENT				139	,524
	mber of independent of more than \$100,000							thos	se listed above) who	1				

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (B) Related or exempt (D) Revenue excluded (A) Total revenue function revenue business revenue from tax under sections 512-514 1a Federated campaigns 1a **b** Membership dues 1b **c** Fundraising events 1c d Related organizations 1d **e** Government grants (contributions) 1e Contributions, and Other Sir f All other contributions, gifts, grants, 10,591,187 and similar amounts not included above 1f g Noncash contributions included in 630 lines 1a-1f 10,591,187 h Total. Add lines 1a-1f Business Code Program Service Revenue f All other program service revenue **g Total.** Add lines 2a–2f 3 Investment income (including dividends, interest, and other similar amounts) 111,453 111,453 Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6a Gross rents **b** Less: rental expenses 6b c Rental inc. or (loss) d Net rental income or (loss) **7a** Gross amount from (i) Securities (ii) Other sales of assets 929,453 17,168 other than inventory Revenue **b** Less: cost or other 796,193 basis and sales exps. 133,260 17,168 7с **c** Gain or (loss) 150,428 133,260 17,168 d Net gain or (loss) **8a** Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses 9b c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances 10a **b** Less: cost of goods sold 10b c Net income or (loss) from sales of inventory Business Code 1,045 1,045 OTHER ADJ & REFUNDS d All other revenue 1,045 e Total. Add lines 11a-11d . 10,854,113 133,260 129,666 Total revenue. See instructions

Form 990 (2024)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX X Do not include amounts reported on lines 6b, 7b Total expenses Management and general expenses Fundraising Program service 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 265,635 265,635 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 354,507 228,361 57,312 68,834 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 4,393,126 3,560,401 626,404 206,321 Pension plan accruals and contributions (include 109,260 87,193 6,332 section 401(k) and 403(b) employer contributions) 15,735 Other employee benefits 384,505 69,387 27,924 481,816 Payroll taxes 315,230 56,886 395,009 22,893 10 Fees for services (nonemployees): 43,604 33,601 10,003 a Management 3,850 2,100 1,750 **b** Legal 98,151 85,599 12,552 c Accounting e Professional fundraising services. See Part IV, line 17 Investment management fees 45,567 45,567 **g** Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.) 923,181 47,742 970,923 12 Advertising and promotion 160,847 24,924 241,088 55,317 13 Office expenses 12,940 Information technology 45,154 70,510 12,416 14 15 Royalties 225,509 179,847 22,831 22,831 Occupancy 16 610,641 564,612 5,534 40,495 Travel 17 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 282,517 280,681 1,836 19 142 142 20 Interest Payments to affiliates 30,465 273 Depreciation, depletion, and amortization 29,919 273 22 Insurance 44,562 37,201 6,484 877 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.) 92,779 LITIGATION FEES 92,779 SUBSCRIPTIONS & REFERENCE 54,018 52,494 1,524 35,529 11,770 BANKING/FIN SVCS/CURRENCY 23,757 4,544PROFESSIONAL DUES/LICENSE 34,588 27,985 2,059 e All other expenses 50,272 3,298 46,873 101 8,934,068 7,309,320 1,175,103 449,645 Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here | if following SOP 98-2 (ASC 958-720)

Part X **Balance Sheet**

Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year Cash—non-interest-bearing 5,862,035 4,526,679 Savings and temporary cash investments 6,249,042 Pledges and grants receivable, net 3,063,862 3 Accounts receivable, net 2,561 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) Notes and loans receivable, net 7 Inventories for sale or use Prepaid expenses and deferred charges 46,997 45,652 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 1,341,649 10a **b** Less: accumulated depreciation _____ 10b 288,762 1,016,014 1,052,887 3,438,293 Investments—publicly traded securities 11 3,788,229 11 Investments—other securities. See Part IV, line 11 12 12 Investments—program-related. See Part IV, line 11 13 13 14 Intangible assets 14 Other assets. See Part IV, line 11 127,876 48,990 15 15 15,714,040 Total assets. Add lines 1 through 15 (must equal line 33) 13,555,077 16 16 Accounts payable and accrued expenses 143,800 141,594 17 17 18 Grants payable 18 Deferred revenue 19 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to any current or former officer, director, Liabilities trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 220,882 294,934 of Schedule D Total liabilities. Add lines 17 through 25 364,682 436,528 Organizations that follow FASB ASC 958, check here X Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 7,034,704 7,263,232 27 Net assets without donor restrictions 6,155,691 8,014,280 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds 29 29 Paid-in or capital surplus, or land, building, or equipment fund 30 30 Retained earnings, endowment, accumulated income, or other funds 31 Total net assets or fund balances 13,190,395 15,277,512 32 13,555,077 15,714,040 Total liabilities and net assets/fund balances

Form **990** (2024)

Schedule O.

Uniform Guidance, 2 C.F.R. Part 200, Subpart F?

the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain on

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

Form **990** (2024)

X

2c | X

3a

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.

Attach to Form 990 or Form 990-EZ.

 $\textbf{Go to} \ \textit{www.irs.gov/Form990} \ \ \textbf{for instructions and the latest information}.$

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number EARTHRIGHTS INTERNATIONAL, INC. 04-3265555 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college 9 or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Typ functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (iv) Is the organization (ii) EIN (v) Amount of monetary (iii) Type of organization (vi) Amount of organization (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D) (E) **Total**

Page 2

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) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not	Ins	spe	CTIO	n	POD	V
	include any "unusual grants.")	3,982,141	6,323,119	4,610,831	5,825,794	10,591,487	31,333,372
2	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	3,982,141	6,323,119	4,610,831	5,825,794	10,591,487	31,333,372
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)						17,644,608
6	Public support. Subtract line 5 from line 4						13,688,764
	tion B. Total Support						
Caler	dar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7	Amounts from line 4	3,982,141	6,323,119	4,610,831	5,825,794	10,591,487	31,333,372
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	74,213	55,709	70,858	155,685	111,453	467,918
9	Net income from unrelated business activities, whether or not the business is regularly carried on	5,591	2,050	2,111			9,752
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	20,475	53,875	385	82,630	1,045	158,410
11	Total support. Add lines 7 through 10						31,969,452
12	Gross receipts from related activities, etc.	(see instructions)				12	
13	First 5 years. If the Form 990 is for the o						
	organization, check this box and stop her						
Sec	tion C. Computation of Public S						
14	Public support percentage for 2024 (line 6	, column (f), divided	d by line 11, colun	nn (f))		14	42.82 %
15	Public support percentage from 2023 Sche						59.91 %
16a	33 1/3% support test — 2024. If the orga				s 33 1/3% or more	e, check this	
	box and stop here. The organization qual						X
b	33 1/3% support test — 2023. If the orga						
	this box and stop here. The organization						Ц
17a	10%-facts-and-circumstances test — 2	•					
	10% or more, and if the organization mee				-		
	Part VI how the organization meets the fa		_	•			
	organization				40- 40 47-		Ц
b	10%-facts-and-circumstances test — 2	=					
	15 is 10% or more, and if the organization				-		
	in Part VI how the organization meets the			•		•	
18	organization Private foundation. If the organization di	d not check a box	on line 12 162 16		ack this have and a		Ц
10	instructions						

04-3265555 INC.

Schedule A (Form 990) 2024

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

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

Sec	tion A. Public Support	quality under ti	ile lesis listeu	below, please	complete Fail	ı II. <i>)</i>	
	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1	Gifts, grants, contributions, and membership fees	ing		CTIO	n		
2	received. (Do not include any "unusual grants.") 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	3,982,141	6,323,119	4,610,831	5,825,794	10,591,487	31,333,372
3	Gross receipts from activities that are not an unrelated trade or business under section 513	20,475	53,875	385	82,630	1,045	158,410
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	4,002,616	6,376,994	4,611,216	5,908,424	10,592,532	31,491,782
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons					56,363	56,363
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						
С	Add lines 7a and 7b					56,363	56,363
8	Public support. (Subtract line 7c from line 6.)						31,435,419
Sec	tion B. Total Support			<u> </u>			
Caler	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9	Amounts from line 6	4,002,616	6,376,994	4,611,216	5,908,424	10,592,532	31,491,782
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	74,213	55,709	70,858	155,685	111,453	467,918
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	74,213	55,709	70,858	155,685	111,453	467,918
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on	5,591	2,050	2,111			9,752
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	20,475	53,875	385	82,630	1,045	158,410
13	Total support. (Add lines 9, 10c, 11,	-	-		-	-	-
	and 12.)	4,102,895	6,488,628	4,684,570	6,146,739	10,705,030	32,127,862
14	First 5 years. If the Form 990 is for the o	-	econd, third, fourth	n, or fifth tax year a	as a section 501(c	:)(3)	_
	organization, check this box and stop her						
	tion C. Computation of Public S						
15	Public support percentage for 2024 (line 8						97.84 %
16	Public support percentage from 2023 Sche					16	98.00%
	ction D. Computation of Investme					T	
17	Investment income percentage for 2024 (I			3, column (f))			1%
18	Investment income percentage from 2023						2 %
19a	33 1/3% support tests — 2024. If the org 17 is not more than 33 1/3%, check this both	ox and stop here.	The organization of	qualifies as a public	cly supported orga	anization	<u>x</u>
b	33 1/3% support tests — 2023. If the org	-					_
	line 18 is not more than 33 1/3%, check th		_			-	····· <u></u>
20	Private foundation. If the organization did	d not check a box c	n line 14. 19a. or	19b. check this bo	x and see instruct	tions	1

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 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.
- 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 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 "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.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," 5a 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? С
- 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).
- 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 disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- 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.)

-		-	
	\perp	Yes	No
		У	
	W		
	1_		
	2		
	_		
	3a		
	3b		
	3c		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	9b		
	9с		
	10a		
Schr	10b	(Form (990) 2024
	Judie F	. (. 0.111 5	,,,, 2024

Par	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
c	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,		V	
·	provide detail in Part VI.	11c	7	
Sect	ion B. Type I Supporting Organizations	1.0		
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or		103	110
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
_	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	ion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
0 1	the supported organization(s).	1		
Sect	ion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	_		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI			
	how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sect	ion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
a	The organization satisfied the Activities Test. Complete line 2 below.			
b c	The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instru	ctions)	١.	
		[Yes	No
2	Activities Test. Answer lines 2a and 2b below.			
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to each of its supported organizations, and how the organization determined	2a		
	that these activities constituted substantially all of its activities.			
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
_	navo ongagoa in unoso acuvidos par noi uno organizadono involventent.			
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	3a		
b	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.			
J	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes" describe in Part VI the role played by the organization in this regard	3b		
	OLIGA AUDOCICU OLUMIKANOHA! IL TEA. UEAGIDE IILEMIL VI IHE TOIE DIAVEO DV THE OHANIZANOH IILIHIS TEGAM	പാവ		

Schedu	le A (Form 990) 2024 EARTHRIGHTS INTERNATIONAL ,	TINC	U4-3265	DDD Page 6
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Or	ganiz	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov	v. 20,	1970 (explain in Part VI). \$	See
	instructions. All other Type III non-functionally integrated supporting organizations mus	t com	plete Sections A through E	
Sect	on A – Adjusted Net Income		(A) Prior Year	(B) Current Year
			(rt) The Total	(optional)
1_	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		$\mathcal{O}_{\mathcal{A}}$
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection			
	of gross income or for management, conservation, or maintenance of			
	property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	on 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		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	on C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally integrated	Type I	II supporting organization	

Schedule A (Form 990) 2024

(see instructions).

Schedu	le A (Form 990) 2024 EARTHRIGHTS INTER	NATIONAL, INC	!. 04-32	65555 Page 7
Par	t V Type III Non-Functionally Integrated 509(a)(3)	Supporting Organiz	zations (continued	d)
Sect	ion D – Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purpo	ses		1
2	Amounts paid to perform activity that directly furthers exempt purposes organizations, in excess of income from activity	s of supported		2
3	Administrative expenses paid to accomplish exempt purposes of supp	orted organizations		3
4	Amounts paid to acquire exempt-use assets			4
5	Qualified set-aside amounts (prior IRS approval required—provide det	ails in Part VI)		5
6	Other distributions (describe in Part VI). See instructions.			6
7	Total annual distributions. Add lines 1 through 6.			7
8	Distributions to attentive supported organizations to which the organizations	ation is responsive		
	(provide details in Part VI). See instructions.			8
9	Distributable amount for 2024 from Section C, line 6			9
10	Line 8 amount divided by line 9 amount			10
		(i)	(ii)	(iii)
Sect	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2024	Distributable Amount for 2024
1_	Distributable amount for 2024 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2024			
	(reasonable cause required-explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2024			
	From 2019			
	From 2020			
	From 2021			
	From 2022			
	From 2023			
	Total of lines 3a through 3e			
	Applied to underdistributions of prior years			
	Applied to 2024 distributable amount			
	Carryover from 2019 not applied (see instructions) Remainder. Subtract lines 3q, 3h, and 3i from line 3f.			
4	Distributions for 2024 from			
4				
	Section D, line 7: \$ Applied to underdistributions of prior years			
	Applied to 2024 distributable amount			
	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2024, if			
J	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2024. Subtract lines 3h			
·	and 4b from line 1. For result greater than zero, <i>explain in</i>			
	Part VI. See instructions.			
7	Excess distributions carryover to 2025. Add lines 3j			
-	and 4c.			
8	Breakdown of line 7:			
	Excess from 2020			
	Excess from 2021			
	Excess from 2022			
	Excess from 2023			

Schedule A (Form 990) 2024

e Excess from 2024

Schedule A (Form 990) 2024

Part VI									17a or 17b; Part
									Part IV, Section
									E, lines 1c, 2a, 2b,
			V, line 1; Part 2, 5, and 6. A						
	Sec	tion E, intes	2, 3, and 6. A	iso complete	tilis part i	or arry addition	iai iiiioiiiiai	ion. (See insur	actions.)
рарт т	TT	T.TNE 12	2 - OTHER	TNCOME	ημτάτι.				
		SERVICE		TINCOME	\$	157,3	265		
		REFUND	TINCOME			1,0			
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INTERNATIONAL

DAA

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.

2024
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 I-B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and I-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:

• Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name	of organization	TTONAT THE		Employer identi	fication number (EIN)
Par	EARTHRIGHTS INTERNA t I-A Complete if the organization is exe		c) or is a sect		
<u>r aı</u> 1	Provide a description of the organization's direct and indire				ition.
•	definition of "political campaign activities."	cot political campaign activities	iii i dit iv. occ iiio	11001101101	
2	Political campaign activity expenditures. See instructions			\$	
3	Volunteer hours for political campaign activities. See instr				
	t I-B Complete if the organization is exe				
1	Enter the amount of any excise tax incurred by the organization	zation under section 4955	,,,	\$	
2	Enter the amount of any excise tax incurred by organization	on managers under section 495	5	\$	
3	If the organization incurred a section 4955 tax, did it file Fo	orm 4720 for this year?			Yes No
4a					
<u>b</u>	If "Yes," describe in Part IV.				
Pai	t I-C Complete if the organization is exe	mpt under section 501(c), except sec	tion 501(c)(3).	
1	Enter the amount directly expended by the filing organizat	ion for section 527 exempt fund	tion		
	activities			\$	
2	Enter the amount of the filing organization's funds contribu	•			
	527 exempt function activities			\$	
3	Total exempt function expenditures. Add lines 1 and 2. En		•	•	
	line 17b			\$	□ Voc. □ No
4	Did the filing organization file Form 1120-POL for this year				Yes No
5	Enter the names, addresses, and EINs of all section 527		0 0	, ,	
	For each organization listed, enter the amount paid from t contributions received that were promptly and directly deliv				
	segregated fund or a political action committee (PAC). If a		•	•	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(a) Name	(b) Address	(6) = 114	filing organization's	contributions received and
				funds. If none, enter -0	promptly and directly
					delivered to a separate political organization.
					If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(e)					
(6)					
		1	ı l		i

Sche			TERNATIONAL					age 2
Pa	rt II-A Complete if the organi	zation is exemp	ot under section	501(c)(3) an	d filed Form	5768 (ele	ection under	
	section 501(h)).	1.1	Parks I have a facility	D (D)	. I (CP . C . I			
A (Check if the filing organization	-		in Part IV ea	ch affiliated gro	oup membe	er's name, addre	₃SS,
	EIN, expenses, and shaped Einstein Eins	_		rovicione appl	,			
•		bying Expendi		iovisions appi	y. (a) Filing	· Or	(b) Affiliated	
	(The term "expenditures" i			UUI	organization's to	otals	group totals	
	Total lobbying expenditures to influence po					0		
	Total lobbying expenditures to influence a					,421		
С	Total lobbying expenditures (add lines 1a a	and 1b)				,421		
	Other exempt purpose expenditures				8,929			
	Total exempt purpose expenditures (add lin				8,934	<u>,068</u>		
f	Lobbying nontaxable amount. Enter the an	nount from the follow	ing table in both					
_	columns.				596	,703		
ŀ	IF the amount on line 1e, column (a) or (b), i		ng nontaxable amount i	s:				
ŀ	not over \$500,000	20% of the amoun						
-	over \$500,000 but not over \$1,000,000		% of the excess over \$50					
ŀ	over \$1,000,000 but not over \$1,500,000		% of the excess over \$1,0					
ŀ	over \$1,500,000 but not over \$17,000,000		of the excess over \$1,50	00,000.				
	over \$17,000,000	\$1,000,000.			140	,176		
9 5	Grassroots nontaxable amount (enter 25%				143	0		
	Subtract line 1g from line 1a. If zero or less Subtract line 1f from line 1c. If zero or less					0		
	If there is an amount other than zero on ei		did the organization fi	∟ le Form 4720				
,	reporting section 4911 tax for this year?		, did the organization in	ie i oiiii 4720			☐Yes ☐	No
	reporting section 4011 tax for this year:	4 Vaar Avarasi	na Dariad Hadar C	action FO4/b\			103	110
	(Same argenizations that made	_	ng Period Under S			ivo oolumn	o bolow	
	(Some organizations that made		nstructions for line	-		ive coluitili	is below.	
	3	ee the separate i	iistructions for line	s za tiliougii	21.)			
	Lo	bbying Expenditu	res During 4-Year	Averaging Po	eriod			
	Calendar year (or fiscal year							
	beginning in)	(a) 2021	(b) 2022	(c) 2023	(d)	2024	(e) Total	
	- ,							
2a	Lobbying nontaxable amount							
	, ,	457,034	469,878	525,	,110	596,703	2,048,7	25
b	Lobbying ceiling amount							
	(150% of line 2a, column (e))						3,073,0	88
С	Total lobbying expenditures	01 710	04 716	1.0	107	4 401	67.6	146
		21,712	24,716	16,	,197	4,421	67,0	740
d	Grassroots nontaxable amount	114,259	117,470	131,	278	149,176	512,1	83
	Grassroots ceiling amount	114,239	11/,4/0	131,	. 2 / 0	179,170	312,1	.03

Schedule C (Form 990) 2024

768,275

(150% of line 2d, column (e))

f Grassroots lobbying expenditures

		INTERNATIONAL,		04-3				F	Page 3
Part II-B Complete if the org (election under sec		empt under section 5	501(c)(3) and	has NOT	file	d For	rm 5768		
For each "Yes" response on lines 1a th	arough 1i helow r	rovide in Part IV a detaile	ad		(a)	(I	b)	
description of the lobbying activity.	"ough" if below, p	TOVIGO III I GIL IV G GOLGIIO			Yes	No	Ame	ount	
During the year, did the filing organizate legislation, including any attempt to in referendum, through the use of: Voluntors?	fluence public opinic	on on a legislative matter or) (O	ру		
b Paid staff or management (include co		nses reported on lines 1c thr				╛			
c Media advertisements?									
d Mailings to members, legislators, or the	ne public?								
e Publications, or published or broadca									
f Grants to other organizations for lobb		ioiala ar a lagialativa hadv?							
g Direct contact with legislators, their sth Rallies, demonstrations, seminars, co									
j Total. Add lines 1c through 1i2a Did the activities in line 1 cause the o	rganization to not be	e described in section 501(c)	(3)?						
b If "Yes," enter the amount of any tax i									
c If "Yes," enter the amount of any tax is	ncurred by organiza	tion managers under section	4912						
d If the filing organization incurred a sec									
		empt under section 5		ction 501((c)(5)	, or	section		
501(c)(6).		•		•					
								Yes	No
1 Were substantially all (90% or more)	dues received nond-	eductible by members?					1		
2 Did the organization make only in-hou	ise lobbying expend	itures of \$2,000 or less?					2	┷	
3 Did the organization agree to carry over									
		empt under section 5						01(c)((6)
answered "Yes."		nes 1 and 2, are answ	verea "No;"	OK (b) Pa	art III		ne 3, IS		
1 Dues, assessments, and similar amou						1			
2 Section 162(e) nondeductible lobbying			ounts of						
political expenses for which the se						0-			
					}	2a			
b Carryover from last year					}	2b			
c Total3 Aggregate amount reported in section					}	2c 3			
4 If notices were sent and the amount of	` / ` / ` /		` '						
excess does the organization agree to		•		1					
and political expenditures next year?	-					4			
5 Taxable amount of lobbying and politi						5			
Part IV Supplemental Infor									
Provide the descriptions required for Part I-A		ne 4; Part I-C, line 5; Part II-A	A (affiliated grou	p list); Part II-	-A, line	es 1 aı	nd		
2 (see instructions); and Part II-B, line 1. Al	so, complete this pa	irt for any additional informati	ion.						
		•							

DAA Schedule C (Form 990) 2024

Schedule C (Form		EARTHRIGHTS INTERNATIONAL,	INC.	04-3265555	Page 4
Part IV	Supplemental	Information (continued)			
		io lococot			
		ic inchact			/

DAA Schedule C (Form 990) 2024

SCHEDULE D (Form 990)

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number Name of the organization EARTHRIGHTS INTERNATIONAL, INC. 04-3265555 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) 3 Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II **Conservation Easements** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a a Total number of conservation easements **b** Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included on line 2a 2c d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conversation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B) | Yes | No (i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items. (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items. a Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X.

	dule D (Form 990) (Rev. 12-2024) EARTI					265555			age 2	
Pa	rt III Organizations Maintainin	g Collections of	Art, Historical T	reasures, o	r Other Sir	nilar Asset	s (con	tinue	ed)	
3										
	collection items (check all that apply).	_								
а	Public exhibition	d 🔲 🗆	Loan or exchange prog	gram						
b	Scholarly research	е 📗	Other					,		
С	Preservation for future generations	Ing								
4	Provide a description of the organization's c	ollections and explain	how they further the c	organization's ex	cempt purpose	in Part	<i>,</i> $^{\prime}$			
	XIII.									
5	During the year, did the organization solicit	or receive donations of	of art historical treasur	es or other sim	ilar					
Ū	assets to be sold to raise funds rather than						☐ Ye	مe	No	
Pa	ert IV Escrow and Custodial A		bart of the organization	3 CONCONOTE			<u> </u>	,3] 110	
	Complete if the organization	_	" on Form 990 P	art IV line 0	or reported	l an amoun	t on E	orm		
	990, Part X, line 21.	ii alisweled Tes	011101111 990, 17	art iv, line 3	, or reported	an amoun	COLLIC	J1111		
4-		Para an attanta ta (anasa at								
та	Is the organization an agent, trustee, custoo						\Box \checkmark		٦	
	included on Form 990, Part X?						Y€	es	No	
b	If "Yes," explain the arrangement in Part XII	I and complete the fo	llowing table.							
							Amoun	t		
С	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e				
	Ending balance					1f				
2a	Did the organization include an amount on F	Form 990, Part X, line	21, for escrow or cust	odial account lia	ability?		☐ Ye	es 🗆	No	
	If "Yes," explain the arrangement in Part XIII						<u> </u>	🗀	Ī	
	rt V Endowment Funds									
	Complete if the organization	n answered "Yes	" on Form 990. Pa	art IV. line 1	0.					
		(a) Current year	(b) Prior year	(c) Two years b		ree years back	(e) Fou	r vears	back	
12	Beginning of year balance	169,207	145,606	173,	- + ` ′ -	231,561		197,		
		203/207	213,000		75 25	202,002				
	Contributions									
C	Net investment earnings, gains,	19,905	23,601	_27	,934	41,979		22	946	
	and losses	19,905	23,601	-21	, 934	41,3/3		33,	340	
	Grants or scholarships									
е	Other expenditures for facilities and									
	programs					100,000				
	Administrative expenses	757								
g	End of year balance	188,355	169,207		606	173,540	-	231,	561	
2	Provide the estimated percentage of the cur	•	e (line 1g, column (a)) ł	neld as:						
а	Board designated or quasi-endowment	81.50 %								
b	Permanent endowment %									
С	Term endowment 18.50 %									
	The percentages on lines 2a, 2b, and 2c sh	ould equal 100%.								
3a	Are there endowment funds not in the posse	•	tion that are held and	administered for	r the					
	organization by:	ŭ						Yes	No	
	(i) Unrelated organizations?						3a(i)		X	
	(ii) Related organizations?						3a(ii)		X	
h	(ii) Related organizations?	zatione lietad as roqui	rad on Schodula D2				3b		21	
4							30			
Bo	Describe in Part XIII the intended uses of the		wment tunas.							
Fa	Irt VI Land, Buildings, and Equation 15		" an Farm 000 De	- mt 1\/ 1:m 1:	10 Coo For	000 Dow	V 1:	- 10		
	Complete if the organization		·			i				
	Description of property	(a) Cost or other b	, ,		(c) Accumulate	d	(d) Book	value		
		(investment)	(other	·	depreciation			- ^	<u> </u>	
	Land			0,018				50,0		
b	Buildings		90	3,360	166	,785	7.	36,	<u> 575</u>	
С	Leasehold improvements									
	Equipment		18	88,271	121	,977	(56,2	<u> 294</u>	
	Other									
Total	. Add lines 1a through 1e. (Column (d) must	equal Form 990, Part	X, line 10c, column (E	B))			1,05	52,8	387	

Part VII	Investments - Other Securities			
	Complete if the organization answered "Yes" on			<u>. </u>
	(a) Description of security or category	(b) Book value	(c) Method of valuation:	
(1) Financial a	(including name of security)	4	Cost or end-of-year market value	
(1) Financial of	d equity interests	<u>octio</u>	o(0)	
(3) Other	d equity interests	GUIU		
(A)				
(B)		_		
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	(b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII	Investments – Program Related	F 000 P(I) / I'		
	Complete if the organization answered "Yes" on			
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value	
(4)			Cost of the orycer market value	
<u>(1)</u> <u>(2)</u>				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	(b) must equal Form 990, Part X, line 13, col. (B))			
Part IX	Other Assets			
	Complete if the organization answered "Yes" on	Form 990, Part IV, III		
(4)	(a) Description		(b) Book value	
(1)			+	
(2)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	(b) must equal Form 990, Part X, line 15, col. (B))			
Part X	Other Liabilities			
	Complete if the organization answered "Yes" on	Form 990, Part IV, li	ne 11e or 11f. See Form 990, Part X,	
	line 25.			
1.	(a) Description of liability		(b) Book value	
	ncome taxes ED PAYROLL/BENEFITS		294,9	03/
	ED PAIROLL/ BENEFIIS		294,:	937
(3)				
(4) (5)				
(6)				
(7)				
(8)				
(9)				
	(b) must equal Form 990, Part X, line 25, col. (B))		294,9	<u>9</u> 34
2. Liability for u	uncertain tax positions. In Part XIII, provide the text of the foo	tnote to the organization's f	•	
organization's li	ability for uncertain tax positions under FASB ASC 740. Chec	k here if the text of the foot	note has been provided in Part XIII	

Schedule D (I	Form 990) (R	ev. 12-2024)	EARTHRIC	HTS IN	TERNATIO	NAL,	INC.	04-3265555	Page 5
Part XIII	Supplen	nental In	formation (continued)	TERNATIO				
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					spe				~ 1 /
							l.().[).		
. '									

SCHEDULE F (Form 990)

(Rev. December 2024)

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.

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Name of the organization Employer identification number EARTHRIGHTS INTERNATIONAL, INC. 04-3265555 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on 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 X Yes No award the grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (b) Number (c) Number of (a) Region (d) Activities conducted in the (e) If activity listed in (d) is (f) Total of offices in employees. expenditures for region (by type) (such as, a program service, agents, and describe specific type of the region fundraising, program services, and investments independent investments, grants to recipients service(s) in the region in the region contractors located in the region) in the region EAST ASIA AND THE PACIFIC 36 PROGRAM SERVICES LEGAL (1) EAST ASIA AND THE PACIFIC PROGRAM SERVICES ADVOCACY & CAMPAIGNS (2) EAST ASIA AND THE PACIFIC PROGRAM SERVICES SCHOOLS & TRAINING (3) SOUTH AMERICA 11 PROGRAM SERVICES LEGAL (4) EAST ASIA AND THE PACIFIC PROGRAM SERVICES DEVELOPMENT EAST ASIA AND THE PACIFIC PROGRAM SERVICES GENERAL/ADMIN (6) (7) (8) (9) (10)(11) (12)(13)(14) (15) (16) (17)3a Subtotal 47 **b** Total from continuation

sheets to Part I c Totals (add

Scriedule i	(1 01111 330) (INEV. 12-2024) LIFTICE	TIVI TOTT IN	TRIGINAL TORNAL A	NC. 01-32	3333			i aye	
Part II	Grants and Other Assi	stance to Organ	izations or Entities Οι	utside the United S	ates. Complete if	the organization ar	nswered "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) Mothod of	

	Part IV, line	e 15, for any rec	ipient who rece	eived more than \$5,000. Part II	can be duplicated	d if additional s	pace is needed.		
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
				MYANMAR GRANT	67,500	WIRE			
(1)			EAST ASIA	& THE PACIFIC					
				GENERAL SUPPORT	7,500	WIRE			
(2)			SOUTH AME	RICA					
				GENERAL SUPPORT	7,500	WIRE			
(3)			SOUTH AME	RICA					
				GENERAL SUPPORT	20,000	WIRE			
(4)			SOUTH AME	RICA					
				GENERAL SUPPORT	50,000	WIRE			
(5)									
				GENERAL SUPPORT	5,015	WIRE			
(6)			EAST ASIA	AND THE PACIFIC					
				GENERAL SUPPORT	64,550	WIRE			
(7)			SUB-SAHAR	AN AFRICA					
(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 Enter total number of other organizations or entities

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. (c) Number of (f) Amount of (a) Type of grant or assistance (b) Region (d) Amount of (e) Manner of (g) Description (h) Method of valuation (book, FMV, cash grant cash of noncash assistance noncash disbursement assistance appraisal, other) EAST ASIA & THE PACIFIC (1) EMERGENCY/GENERAL 8 33,570 WIRE FMV (4) (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 the Instructions for Form 926) 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	X Yes [No
	Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see the 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 the 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 the 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 the Instructions for Form 8865)		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 the Instructions for Form 5713; don't file with Form 990)	Yes [X No

Schedule F (Form 990) (Rev. 12-2024)

Part V

Suppl	lemental	Inf	formation
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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), as applicable. Also complete this part to provide any additional information. See instructions.

				EDURES I							
ORGANIZ	CITAL	N RE	QUIRES	WRITTEN	GRANT	PROPC	SAL,	REVIEWS	PROPO	SAL THE	∑N
MONITOR	RS VI	A PE	RIODIC	REPORTI	NG THE	USE C	F THE	GRANT	MONEY	TO ACC	OMPLISH
THE PR	OPOS	L'S	STATEL	PURPOSI	E(S).						

						· · · · · · · · · · · · · · · · · · ·					
PART	I, LI	NE 3	3 - 2	ACTIVITIES	PER	REGION					
REGION							EXPENDIT	URES	INVI	ESTMENTS	
EAST Z	ASIA	AND	THE	PACIFIC				0		()
				PACIFIC			\$	0	\$)
EAST Z	ASIA	AND	THE	PACIFIC			\$	0	\$)
SOUTH	AMER	RICA					\$	0	\$)
EAST Z	ASIA	AND	THE	PACIFIC			\$	0	\$	(
EAST Z	ASIA	AND	THE	PACIFIC			\$ \$ \$ \$ \$ \$	0	\$	()

SCHEDULE J

(Form 990) (Rev. December 2024)

Department of the Treasury Internal Revenue Service Name of the organization

Compensation Information

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

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number EARTHRIGHTS INTERNATIONAL, INC. 04-3265555

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

04-3265555

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.

(A) Name and Title	(B) Breakdown of W-2 (i) Base compensation	and/or 1099-MISC and/or (ii) Bonus & incentive compensation	099-NEC compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
SHANNON YOUNG (6	197,932	0	0	6,088	0	204,020	0
1 DEPUTY EXEC DIRECTOR (iii) 0	0	0	0	0	0	0
RICHARD HERZ	154,902	0	0	29,364	0	184,266	0
2 SR. LITIGATION ATTY) 0	0	0	0	0	0	0
ODESSA STA. MARIA	156,575	0	0	21,285	0	177,860	0
3 EXECUTIVE DIRECTOR (ii	0	0	0	0	0	0	0
SELAM HAILU (i	160,318	0	0	14,785	0	175,103	0
4 FINANCE DIRECTOR (ii	0	0	0	0	0	0	0
MARISSA VAHLSING	164,412	0	0	4,986	0	169,398	0
5 SUPERVISING ATTY (ii	0	0	0	0	0	0	0
MICHELLE HARRISON (i	147,397	0	0	16,278	0	163,675	0
6 DEP. US LEGAL DIR) 0	0	0	0	0	0	0
MARCO SIMONS	153,762	0	0	4,661	0	158,423	0
7 FORMER GEN COUNSEL (ii) 0	0	0	0	0	0	0
8 (ii) 						
9 (ii)						
10 (ii)						
11 (ii)						
[i] 12))						
13 (ii))						
14 (ii)						
15 (ii)						
16 (i)) 						

Schedule J (Form 990) (Rev. 12-2024)

Schedule J (Form 990) (Rev. 12-2024)

SCHEDULE O (Form 990)

(Rev. December 2024)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

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.

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 CHALLENGING COMPLICITY OF BANANA COMPANY AND ITS EXECUTIVES IN PARAMILITARY KILLINGS OF PLAINTIFFS' DECEDENTS)

DOE V. IFC (COUNSEL FOR HONDURAN FARMERS WHOSE FAMILY MEMBERS WERE MURDERED BY PALM OIL COMPANY FUNDED BY IFC)

BOULDER COUNTY V. SUNCOR (COUNSEL FOR CO MUNICIPALITIES SUING OIL COMPANIES FOR ENVIRONMENTAL DAMAGES)

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)

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)

COUNSEL TO TRIBAL NATION BRINGING ADMINISTRATIVE COMPLAINT AGAINST STATE ALLEGING VIOLATIONS OF CIVIL RIGHTS IN USE OF FEDERAL FUNDS AWARDED BY HUD.

INSTITUTO BRASILEIRO DE DEFESA DO CONSUMIDOR V. MEAD JOHNSON & COMPANY, LLC (COUNSEL FOR A BRAZILIAN CONSUMER RIGHTS ORGANIZATION SEEKING DISCOVERY FROM MEAD JOHNSON UNDER 28 U.S. § 1782 IN SUPPORT OF LITIGATION IN BRAZIL CHALLENGING THE MISLEADING MARKETING OF POWDERED MILK-LIKE BEVERAGES FOR TODDLERS IN PACKAGING AND WITH LABELS EXTREMELY SIMILAR IN DESIGN TO INFANT FORMULA).

EL PODER DEL CONSUMIDOR V. THE COCA-COLA COMPANY (COUNSEL FOR A MEXICAN CONSUMER RIGHTS ORGANIZATION SEEKING DISCOVERY FROM COCA-COLA UNDER 28 U.S. § 1782 IN SUPPORT OF AN ADMINISTRATIVE HEALTH COMPLAINT FILED IN MEXICO RELATING TO THE DANGERS OF THE CONSUMPTION OF SWEETENED BEVERAGES).

ZOZO ET ALL V. WILDLIFE CONSERVATION SOCIETY (COUNSEL FOR 274 VICTIMS OF ALLEGED CRIMES AGAINST HUMANITY IN THE DEMOCRATIC REPUBLIC OF CONGO SEEKING DISCOVERY FROM WILDLIFE CONSERVATION SOCIETY UNDER 28 U.S. § 1782 IN SUPPORT OF CRIMINAL INVESTIGATIONS IN THE DRC)

EARTHRIGHTS ATTORNEYS ALSO LITIGATE CASES BEFORE THE INTER-AMERICAN COURT OF HUMAN RIGHTS AND THE COURTS OF THE REPUBLIC OF PERU TO DEFEND HUMAN

SCHEDULE O (Form 990)

(Rev. December 2024)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

EARTHRIGHTS INTERNATIONAL, INC.

Employer identification number 04-3265555

RIGHTS AND PROTECT THEENVIRONMENT. EARTHRIGHTS ALSO FILES AMICUS CURIAE BRIEFS IN U.S., FOREIGN AND INTERNATIONAL COURTS ON BEHALF OF ITSELF AND AS COUNSEL FOR OTHER AMICI.

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 (IN PDF) IS SENT TO THE ORGANIZATION AND REVIEWED BY THE FINANCE DIRECTOR, FINANCE ASSOCIATE, INTERNAL COUNSEL AND EXECUTIVE MANAGEMENT. ONCE THE DRAFT IS REVIEWED AND APPROVED, A COPY IS SENT (IN PDF FORMAT) TO THE ENTIRE BOARD FOR REVIEW. A FINAL COPY IS SENT (IN PDF FORMAT) FOR FINAL REVIEW AND SIGNATURE TO THE EXECUTIVE DIRECTOR 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.

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

DESCRIPTIO	N					
	TOT/E	PROG SERVICE	MGT	& GENERAL	FUND:	RAISING
IT SUPPORT	•					
	\$	71,214	\$	8,852	\$	0
PROGRAM CO	ONSULTAI	NTS				
	\$	749,479	\$	38,090	\$	0
COMMUNICAT	ION CO	NSULTANTS				
	\$	27,636	\$	0	\$	0

SCHEDULE O (Form 990)

(Rev. December 2024)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization	EARTHRIGH	ITS INTERNAT	IONAL, INC.		04-3265555	
TRANSLATIO	N					
OTHER CON	\$ SULTANTS	65,606	\$	0	\$	0
	\$ TOTAL	9,246	\$	800	\$	0
	\$	923,181	\$	47,742	\$	0
·						
·						
•						

SCHEDULE R (Form 990)

(Rev. December 2024)

Department of the Treasury Internal Revenue Service **Related Organizations and Unrelated Partnerships**

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization EARTHRIGHTS INTERNATIONAL, INC.	CUO)		Employer ident		er
Part I Identification of Disregarded Entities. Complete if the	organization an	swered "Yes" on	Form 990,	, Part IV, line 33	3.			
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile or foreign co	e (state ountry)	(d) Total income		(e) year assets	(f) Direct con entity	trolling
(1)								
(2)								
(3)								
(A)								
(4)								
(5)								
Part II Identification of Related Tax-Exempt Organizations. one or more related tax-exempt organizations during the	Complete if the tax year.	organization ans	wered "Yes	s" on Form 990,	Part IV,	line 34, beca	ause it ha	ıd
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code s	(e)		(f) Direct controlling entity	Section scontrolle	g) 512(b)(13) d entity?
(1)								
(2)								
(3)								
(4)								
(5)								

Schedule R (Form 990) (Rev. 12-2024) EARTHRIGHTS INTERNATIONAL, INC.

04-3265555

Soriodale IV (I	0111 550) (ICCV. 12 2024) ELECTRICE E			B / · ·	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			<i>,</i> "	_		D : " :			i agc
Part III	Identification of Related Organizati because it had one or more related or	ons Taxable organizations	treate	a Partnershi ed as a partn	p. Complete if ership during tl	tne organiza ne tax year.	ation answered "\	res" on	For	m 990,	Part IV,	line (34,	
	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of tota income	(g)	of- Di por al	(h) spro- tionate loc.?	amour of Sci (Foi	(i) e V—UBI nt in box 20 hedule K-1 rm 1065)	Genera manag partne	al or Per jing ^{OW} er?	(k) centage nership
(1)														
(2)												Ħ		
(3)														
(4)														
Part IV	Identification of Related Organizati line 34, because it had one or more	ons Taxable related organi	as a	Corporations treated as	n or Trust. Co a corporation	mplete if the or trust duri	e organization ar ng the tax year.	swered	"Ye	es" on F	-orm 990	, Par	t IV,	
ı	(a) Name, address, and EIN of related organization	(b) Primary activity	′	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	1	(g) Share of-year	of assets	(h) Percenta owners	age	Se 512 cor	(i) ection (b)(13) ntrolled ntity?
	-FOUNDATION FOR CULTURE AND		_										Yes	No
PO BOX	183													
CHIANG	MAI TH	ADVOC/TRI	1G	TH	N/A									x
(2) (FENR) PO BOX	FOUNDATION FOR ENVIRONMENT 183													
CHIANG	MAI TH	RESEARCH		TH	N/A									x
(3)		RESEARCH		In	N/A									
(4)														

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more re-						
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		/ y		1a		X
b Gift, grant, or capital contribution to related organization(s)		<u>. I</u>		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)				1e		Х
f Dividends from related organization(s)				1f		х
f Dividends from related organization(s) g Sale of assets to related organization(s)				1g		x
h Purchase of assets from related organization(s)						х
i Exchange of assets with related organization(s)				1i		х
j Lease of facilities, equipment, or other assets to related organization(s)				1j		Х
k Lease of facilities, equipment, or other assets from related organization(s)				1k		Х
l 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)				1n		Х
Sharing of paid employees with related organization(s)				10		Х
					7.	
p Reimbursement paid to related organization(s) for expenses				1p	х	х
q Reimbursement paid by related organization(s) for expenses				1q		
• Other transfer of each or property to related erganization(s)				1r		х
 r Other transfer of cash or property to related organization(s) s Other transfer of cash or property from related organization(s) 						x
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete the				13		
(a)	(b)	(c)	(d)			
Name of related organization	Transaction	Amount involved	Method of determining amo	unt involv	ed	
	type (a-s)					
(1) FOUNDATION FOR CULTURE AND	P	411,326	CASH TRANSFER VA	ALUE		
(0)	_	505 100	a. a			
(2) FOUNDATION FOR ENVIRONMENT AND	P	505,192	CASH TRANSFER VA	ALUE		
(3)						
(6)						
(4)						
(5)						
(5)						
(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.

(a) 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	partners tion c)(3)	(f) Share of total income	(g) Share of end-of-year assets		h) ortionate itions?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana parti		(k) Percentage ownership
		country)	sections 512-514)	Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													

Schedule R (F	Form 990) (Rev. 12-2 Supplemental Provide additio	024) EARTHR	<u> IGHTS</u>	INTERNAT	LONAL,	INC.	04-3265555	Page 5
Part VII	Provide additio	nal information.	for respo	onses to questi	ions on Sch	nedule R. Se	e instructions.	
			· ·	<u>'</u>				
	Pub	liC	Ins	spe	Cti	on	Cop	У
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Form **4562**

Depreciation and Amortization

(Including Information on Listed Property)

Go to www.irs.gov/Form4562 for instructions and the latest information.

Attach to your tax return.

OMB No. 1545-0172

Department of the Treasury Internal Revenue Service Name(s) shown on return

EARTHRIGHTS INTERNATIONAL,

Identifying number

INC. 04-3265555 Business or activity to which this form relates EARTHRIGHTS INTERNATATIONAL, INC Election To Expense Certain Property Under Section 179 Part I Note: If you have any listed property, complete Part V before you complete Part I. 1,220,000 1 Maximum amount (see instructions) Total cost of section 179 property placed in service (see instructions) 2 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 3,050,000 3 3 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 4 5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions ... 5 (a) Description of property (b) Cost (business use only) Listed property. Enter the amount from line 29 7 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 8 Tentative deduction. Enter the **smaller** of line 5 or line 8 9 9 Carryover of disallowed deduction from line 13 of your 2023 Form 4562 10 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 11 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 12 Carryover of disallowed deduction to 2025. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 during the tax year. See instructions Property subject to section 168(f)(1) election 15 15 Other depreciation (including ACRS). MACRS Depreciation (Don't include listed property. See instructions.) 27,510 MACRS deductions for assets placed in service in tax years beginning before 2024 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2024 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property (e) Convention (f) Method (a) Depreciation deduction placed in (business/investment use period service only-see instructions) 19a 3-year property 25,033 5.0 1,252 b 5-year property SL42,305 7-year property 7.0 SL10-year property 15-year property 20-year property 25-year property 25 yrs. S/L MM S/L Residential rental 27.5 yrs. property MM S/L 27.5 yrs. 39 yrs. MM S/I i Nonresidential real property MM S/L Section C-Assets Placed in Service During 2024 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year 12 yrs. S/L 30-year MM S/L 30 yrs. 40-year 40 yrs. MM S/L d **Summary** (See instructions.) Listed property. Enter amount from line 28 21

Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter

here and on the appropriate lines of your return. Partnerships and S corporations—see instructions ...

For assets shown above and placed in service during the current year, enter the

30,465

23

(Rev. November 2018)

Department of the Treasury

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

OMB No. 1545-0026

▶ 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.

Attachment Sequence No. 128

	rt I U.S. Transferor Information (see instructions)		ation: cequine No. 120
	of transferor		Identifying number (see instructions)
INAITIE		action	identifying number (see instructions)
E 7	ARTHRIGHTS INTERNATIONAL, INC.	5611011 1	04-3265555
		controlled foreign corneration?	
	Is the transferee a specified 10%-owned foreign corporation that is not a	controlled foreign corporation?	Yes X No
	If the transferor was a corporation, complete questions 2a through 2d.		
а	If the transfer was a section 361(a) or (b) transfer, was the transferor cor	strolled (under section 368(c)) by	
b			X Yes No
	If not, list the controlling shareholder(s) and their identifying number(s).		
	Controlling shareholder	Identifying	g number
С	If the transferor was a member of an affiliated group filing a consolidated	return, was it the parent	
	corporation?		X Yes No
	·		
	If not, list the name and employer identification number (EIN) of the pare	nt corporation.	
	Name of parent corporation	EIN of parer	nt 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 transfer	eror (but is not treated as such under sed	ction 367),
_	complete questions 3a through 3d.		
a	List the name and EIN of the transferor's partnership.		
	Name of partnership	EIN of pa	artnership
	·	•	•
	But the mention of them to a second of the s	mahin anata0	П,, П.,
	Did the partner pick up its pro rata share of gain on the transfer of partner		
	Is the partner disposing of its entire interest in the partnership?		Yes No
d	Is the partner disposing of an interest in a limited partnership that is regu	-	
	securities market?		Yes No
	rt II Transferee Foreign Corporation Information (s	· ·	
4	Name of transferee (foreign corporation)		Identifying number, if any
	FOUNDATION FOR CULTURE & ENVIRONMEN		
6	Address (including country)		Reference ID number
	PO BOX 183	(se	e instructions)
	CHIANG MAI TH THAILAND		
7	Country code of country of incorporation or organization (see instructions	5)	
	TH		
8	Foreign law characterization (see instructions)		
	CORPORATION		
			X Yes No

6	55	5	5	Р
---	----	---	---	---

Form 926 (Rev. 11-2018)	EAKIRKI	-	TINC .	<u>,</u> 04-3∠6.	3333	Page 2
	ation Regar	ding Transfer of Property (see in	struction	ns)		
Section A—Cash	(a)	(b)		(6)	(d)	(e)
Type of	Date of	Description of		(c) Fair market value on	Cost or other	Gain recognized on
property	transfer	property		date of transfer	basis	transfer
Cash	Hali		\sim 1	505,192		
10 Was cash the only			Gl	.1011	60	X Yes No
If "Yes," skip the re	mainder of Part	III and go to Part IV.				
Section B—Other Pro	 	than intangible property subject to	section		(-1)	(a)
Type of	(a) Date of	(b) Description of		(c) Fair market value on	(d) Cost or other	(e) Gain recognized on
property	transfer	property		date of transfer	basis	transfer
Stock and						
securities						
Inventory						
Other property						
(not listed under						
another category)						
Proporty with						
Property with built-in loss						
Totals						
foreign corporation If "Yes," go to line 1 b Was the transferor (including a branch If "Yes," continue to c Immediately after the transferee foreign of If "Yes," continue to d Enter the transferre	2b. a domestic corp that is a foreign line 12c. If "No te transfer, was corporation? line 12d. If "No d loss amount ir	ch (including a branch that is a foreign disre- poration that transferred substantially all of the disregarded entity) to a specified 10%-owno," skip lines 12c and 12d, and go to line 13. In the domestic corporation a U.S. shareholded, skip line 12d, and go to line 13. Included in gross income as required under of described in section 367(d)(4)? Ins 14a through 15.	he assets ned foreign er with re section 9	s of a foreign branch gn corporation? spect to the		Yes No Yes No Yes No Yes No
Section C—Intangible	Property Su	ubject to Section 367(d)				
	(a)	(b)	(c)	(d)	(e)	(f)
Type of	Date of	Description of	Useful	Arm's length price	Cost or other	Income inclusion for year of transfer
property	transfer	property	life	on date of transfer	basis	(see instructions)
Property described						
in sec. 367(d)(4)						
550. 507 (4)(7)						
Totals						

14a b c	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? 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? 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) > \$		Yes Yes Yes		No No No
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)?		Yes		No
Supp	plemental Part III Information Required To Be Reported (see instructions)				
					<u> </u>
					_
Part	IV Additional Information Regarding Transfer of Property (see instructions)				—
· uit	Additional information regarding francisc of Property (500 instructions)				
16	Enter the transferor's interest in the transferee foreign corporation before and after the transfer.				
	(a) Before % (b) After %				
17	Type of nonrecognition transaction (see instructions) ▶				
18	Indicate whether any transfer reported in Part III is subject to any of the following.				
а	Gain recognition under section 904(f)(3)		Yes		No
b	Gain recognition under section 904(f)(5)(F)		Yes	X	No
С	Recapture under section 1503(d)		Yes		No
d	Exchange gain under section 987		Yes	-	No
19	Did this transfer result from a change in entity classification?		Yes		No
20a	Did a domestic corporation make a distribution of property covered by section 367(e)(2)? See instructions		Yes		No
	If "Yes," complete lines 20b and 20c.				
b	Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b) ▶ \$				
С	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)?		Yes		No
21	Did a domestic corporation make a section 355 distribution of stock in a foreign controlled corporation	_		ш	-
	covered by section 367(e)(1)? See instructions		Yes	X	No

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

Attachment

Sequence No. 128

Pa	rt I U.S. Transferor Information (see instructions)		
Name	of transferor	action	Identifying number (see instructions)
ים	ARTHRIGHTS INTERNATIONAL, INC.		04-3265555
	Is the transferee a specified 10%-owned foreign corporation that is not a	controlled foreign corporation?	Yes X No
	If the transferor was a corporation, complete questions 2a through 2d.		
	If the transfer was a section 361(a) or (b) transfer, was the transferor con	trolled (under section 368(c)) by	
	five or fewer domestic corporations?		Yes X No
b	Did the transferor remain in existence after the transfer?		
	If not, list the controlling shareholder(s) and their identifying number(s).		
	Controlling shareholder	Identi	ifying number
	If the transferor was a member of an affiliated group filing a consolidated	roturn, was it the parent	
·	corporation?		X Yes No
	If not, list the name and employer identification number (EIN) of the pare		
	The first the name and employer demandation number (Env) of the pare	ni corporation.	
	Name of parent corporation	EIN of p	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 transfe	ror (but is not treated as such unde	er section 367)
Ū	complete questions 3a through 3d.	Tor (but is not ireated as such unde	in section cory,
а	List the name and EIN of the transferor's partnership.		
	Name of partnership	EIN o	of partnership
	·		
b	Did the partner pick up its pro rata share of gain on the transfer of partner	rship assets?	Yes No
С	Is the partner disposing of its \textbf{entire} interest in the partnership?		Yes No
	Is the partner disposing of an interest in a limited partnership that is regul		
Da	securities market?		Yes No
	Transferee Foreign Corporation Information (S Name of transferee (foreign corporation)	see instructions)	5a Identifying number, if any
4	FOUNDATION FOR ENVIRONMENT &		Ja identifying number, if any
6	Address (including country)		5b Reference ID number
	PO BOX 183		(see instructions)
	CHIANG MAI TH THAILAND		
7	Country code of country of incorporation or organization (see instructions)	
0	TH Exercise law characterization (see instructions)		
8	Foreign law characterization (see instructions) CORPORATION		
9	Is the transferee foreign corporation a controlled foreign corporation?		X Yes No
			5 026 (D 11 0010)

Form 926 (Rev. 11-2018)	EARTHRI	GHTS INTERNATIONAL, I	NC.	04-3265	5555		Page 2
Part III Informa	ition Regard	ding Transfer of Property (see ins	struction	ns)			
Section A—Cash							
Type of property	(a) Date of transfer	(b) Description of property		(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recogniz transfer	
Cash	1.0.1010	property		411,326			
10 Was cash the only If "Yes," skip the rer			Ct	ion	Co	X Yes [No
Section B—Other Pro	perty (other t	han intangible property subject to s	ection	367(d))			
Type of property	(a) Date of transfer	(b) Description of property		(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer	
Stock and securities							
Inventory							
•							
Other property							
(not listed under							
another category)							
Property with							
built-in loss							
Totals							
recognition agreemed 12a Were any assets of foreign corporation? If "Yes," go to line 1. b Was the transferor a (including a branch of the transfere to transfere foreign of the transfere foreign of the transfere foreign of the transferred 13 Did the transferor	a foreign brance 2b. a domestic corp that is a foreign line 12c. If "No, the transfer, was orporation? line 12d. If "No, the loss amount in ansfer property C and question	s 14a through 15.	garded e	ntity) transferred to a sof a foreign branch gn corporation?		Yes Yes Yes Yes Yes Yes	No No No No No
Section C—Intangible	Property Su	bject to Section 367(d)	1			1	
Type of property	(a) Date of transfer	(b) Description of property	(c) Useful life	(d) Arm's length price on date of transfer	(e) Cost or other basis	Income inclusion for year of transfer (see instruction)	ansfer
						+	
						+	
Property described						†	
in sec. 367(d)(4)						1	
						1	
				 		1	

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

Totals

Form 926 (Rev. 11-2018) EARTHRIGHTS INTERNATIONAL, INC. 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?		No
b	At the time of the transfer, did any of the transferred intangible property have an indefinite useful life?	Yes	☐ No
С	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?	Yes	☐ No
d	If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable	OPY	
	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)?	Yes	No
Sup	plemental Part III Information Required To Be Reported (see instructions)		
Part	IV Additional Information Regarding Transfer of Property (see instructions)		
16	Enter the transferor's interest in the transferee foreign corporation before and after the transfer.		
	(a) Before % (b) After %		
17	Type of nonrecognition transaction (see instructions) ▶		
18	Indicate whether any transfer reported in Part III is subject to any of the following.		
а	Gain recognition under section 904(f)(3)	Yes	X No
b	Gain recognition under section 904(f)(5)(F)		X No
С	Recapture under section 1503(d)	Yes	X No
d	Exchange gain under section 987		X No
19	Did this transfer result from a change in entity classification?	Yes	X No
20a	Did a domestic corporation make a distribution of property covered by section 367(e)(2)? See instructions	Yes	X No
	If "Yes," complete lines 20b and 20c.	······	
b	Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b) ▶ \$		
C	Did the domestic corporation not recognize gain or loss on the distribution of property because the		
C	property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)?	Yes	□No
24		res	☐ MO
21	Did a domestic corporation make a section 355 distribution of stock in a foreign controlled corporation		==
	covered by section 367(e)(1)? See instructions	Vas	X Na

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

eSignature - Certificate of Completion

Document id: MBMQWMYN

Signatures: 2 Initials: 0

Requested by: Margaret Martinez (peggy@vtaadvisors.com)

Requestor IP address: 50.31.152.145

Time zone: UTC Document pages: 55

Signers

Signer: Margaret Martinez

peggy@vtaadvisors.com

IP address: 50.31.152.145 User id: DQCNSPZSG

Timestamp: Sent - 11/11/2025 11:38 PM

Signed - 11/11/2025 11:38 PM

Signature

Margaret Martinez

Margaret Martinez

Signer: Fernanda Hopenhaym

fernanda.hopenhaym@projectpoder.org

Signer id: PWJHN1N
IP address: 148.241.111.14
User id: HHSNS6GXG

Timestamp: Sent - 11/11/2025 11:38 PM

Opened - 11/11/2025 11:38 PM Signed - 11/11/2025 11:39 PM Signature

Fernanda Hopenhaym

Fernanda Hopenhaym