Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Inspection

Α	For th	e 2010 calendar year, or tax year beginning $$ FEB $1,$ 2010 $$ and ending	<u>J</u> AN 31, 2011	
В	Check if	C Name of organization	D Employer identifi	cation number
	applicab	EARTHRIGHTS INTERNATIONAL, INC.		
	Addr	ess a /o pritting c aparting timb		
	Name		04-3	265555
F	Initial return			
F	Term			466-5188
F	ated Amer	ded Ou	G Gross receipts \$	5,017,977.
F	returr Appli tion		H(a) Is this a group re	
L	tion pend	F Name and address of principal officer:MARIE SOVEROSKI		Yes X No
			for affiliates?	,
		C/O 1612 K STREET, NW STE 401, WASHINGTON,		
				list. (see instructions)
		te: ► WWW.EARTHRIGHTS.ORG	H(c) Group exemptio	
			ear of formation: 1995 n	State of legal domicile: MA
P	art I	Summary		
ģ	1	Briefly describe the organization's mission or most significant activities: TO WORK	WITH PEOPLE A	ROUND THE
JE C	-	WORLD TO PROTECT HUMAN RIGHTS AND THE ENVIRO	NMENT.	
Ë	2	Check this box if the organization discontinued its operations or disposed of r	nore than 25% of its net as	ssets.
ove.	3	Number of voting members of the governing body (Part VI, line 1a)	3	9
& Governance	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	9
S	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)		20
Activities	6	Total number of volunteers (estimate if necessary)		11
	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		0.
ď		Net unrelated business taxable income from Form 990-T, line 34		0.
	5	That difficulties business taxable mount of the cool i, and co	Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	1,590,071.	2,501,986.
Revenue	9		1,350,071.	2,301,300.
Ver		Program service revenue (Part VIII, line 2g)	20,761.	9,118.
Re	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	530,783.	27,106.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,141,615.	2,538,210.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	43,861.	34,818.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,004,565.	1,104,690.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
ďx	b	Total fundraising expenses (Part IX, column (D), line 25) 121,112.		
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	796,976.	602,143.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,845,402.	1,741,651.
	19	Revenue less expenses. Subtract line 18 from line 12	296,213.	796,559.
Net Assets or Fund Balances			Beginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)	3,786,663.	4,664,210.
ASS	21	Total liabilities (Part X, line 26)	11,627.	75,209.
Net	22	Net assets or fund balances. Subtract-line 21 from line 20	3,775,036.	4,589,001.
	art II	Signature Block		
		alties of perjury, I declare that I have examined this return, including accompanying schedules and sta	tements, and to the hest of m	/ knowledge and helief, it is
		ct, and complete. Declaration of preparer (other than officer) is based on all information of which prep		, momoago ana bonon, ie io
1140	, 00110	When I And All a	internas any knowledge.	
Ci	_	Signature of officer	Date	
Sig		MARIE SOVEROSKI, SECRETARY/MANAGING DIREC	mop	
Her	е	Type or print name and title	IUR	
			Date / Check	PTIN
		Print/Type preparer's name MARGARET H. MARTINEZ Print/Type preparer's signature MARGARET H. MARTINEZ	1 11/6/	'
Paid			1 7 7 7 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2	u
,	parer	Firm's name DUKES & GRAVES, LTD.	Firm's EIN	
Use	Only	Firm's address 4306 EVERGREEN LANE, SUITE 202		
		ANNANDALE, VA 22003	Phone no. 7	03-941-1400
Ma	y the I	RS discuss this return with the preparer shown above? (see instructions)		X Yes No
		1 HA For Panerwork Reduction Act Notice see the senarate instructions		Form 990 (2010)

Pa	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	EARTHRIGHTS USES THE POWER OF LAW AND THE POWER OF PEOPLE IN DEFENSE
	OF HUMAN RIGHTS AND THE ENVIRONMENT
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
•	If "Yes," describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
т	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported.
4-	
4a	(Code:) (Expenses \$238,786. including grants of \$) (Revenue \$) ADVOCACY & CAMPAIGNS: SEEKS TO RAISE AWARENESS AND BUILD BROAD SUPPORT
	FOR EARTH RIGHTS ISSUES. GOAL IS TO HOLD CORPORATE AND GOVERNMENTAL
	HUMAN RIGHTS & ENVIRONMENTAL OFFENDERS ACCOUNTABLE FOR THEIR ACTIONS.
4b	(Code:) (Expenses \$ 403,090 • including grants of \$) (Revenue \$)
	LEGAL: SEEKS TO PROVIDE REMEDIES FOR RIGHTS ABUSES AROUND THE WORLD.
	LAWSUITS ARE PURSUED TO HOLD CORPORATIONS AND OTHERS ACCOUNTABLE FOR
	THEIR ACTIONS BOTH DOMESTICALLY AND GLOBALLY.
	INDIK ACTIONS BOTH BOMBSTICABLE AND GLODALLI.
4c	(Code:) (Expenses \$ 405,489. including grants of \$ 34,818.) (Revenue \$)
	THE EARTHRIGHTS SCHOOLS: EDUCATES PEOPLE OF SOUTHEAST ASIA AND SOUTH
	AMERICA IN ENVIRONMENTAL AND HUMAN RIGHTS MONITORING AND ADVOCACY
	TECHNIQUES.

4d	Other program services. (Describe in Schedule O.)
	(Expenses \$ 438,406 · including grants of \$) (Revenue \$)
4e	Total program service expenses ► 1,485,771.
	Form 990 (2010)

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Form 990 (2010) C/O DUKES & GRAVES, LTD.

Part IV Checklist of Required Schedules

1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		Yes	No
•	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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; 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 term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
Ī	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	х	
h	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, XII, and XIII is optional	12b		Х
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
о 4а	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	. 14		
	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b	х	
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	140		
•	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	-10		
•	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	х	
7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10	**	
•	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part i	17		Х
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17		47
J	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	10		
J		19		v
	complete Schedule G, Part III			X
0-	Did the organization operate one or more hospitals? If "Vos." complete Schodule U	20~	- 1	×
0a b	Did the organization operate one or more hospitals? If "Yes," complete Schedule H If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that	20a		X

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Part IV | Checklist of Required Schedules (continued)

		T	Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the	-	163	NO
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	***	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	***************************************	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
	Section 501(c)(3) and 501(c)(4) 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 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	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
		28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
00	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
٠.	If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	<u> </u>		
O.L.	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
00	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?			
04	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of	- 00		**
а	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
26	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
36	If "Yes," complete Schedule R, Part V, line 2	36		X
27	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	50		-41
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	- J,		
30	Note. All Form 990 filers are required to complete Schedule O	38	Х	
	140te: First of the coordinate required to complete outleddie o		44	

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Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
		Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a	9		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	3		UB E
(gambling) winnings to prize winners?		X	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			13.
filed for the calendar year ending with or within the year covered by this return 2a	20		6511
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b If "Yes," enter the name of the foreign country: ▶			
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			X
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization so			
any contributions that were not tax deductible?			Х
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts		Table.	
were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to t	he payor? 7a		Х
b If "Yes," did the organization notify the donor of the value of the goods or services provided?			-23
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	70		
to file Form 8282?	7c		Х
d If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as requ	********		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1	100		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	1000 01		
organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the	e year? 8		
9 Sponsoring organizations maintaining donor advised funds.	, your:		
a Did the organization make any taxable distributions under section 4966?	9a		
b Did the organization make a distribution to a donor, donor advisor, or related person?			9
10 Section 501(c)(7) organizations. Enter:	30		
a Initiation fees and capital contributions included on Part VIII, line 12		1	195
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders 11a			1
b Gross income from other sources (Do not net amounts due or paid to other sources against			
amounts due or received from them.)			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	,128		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state?	13a		
Note. See the instructions for additional information the organization must report on Schedule O.	108		
b Enter the amount of reserves the organization is required to maintain by the states in which the			110
b Enter the amount of reserves the organization is required to maintain by the states in which the	***************************************		Part'
organization is licensed to issue qualified health plans			= Eus
organization is licensed to issue qualified health plans C. Enter the amount of reserves on hand		1	
c Enter the amount of reserves on hand 13c	145		X
	14a		X

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

	to line 6a, 6b, 6i Tob below, describe the circumstances, processes, or changes in Schedule C. See instructions.			
	Check if Schedule O contains a response to any question in this Part VI	******		X
Sec	tion A. Governing Body and Management		T	,
			Yes	No
1a		7		
b	Enter the number of voting members included in line 1a, above, who are independent	4		***************************************
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other		x	
2	officer, director, trustee, or key employee?	2	<u> </u>	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			х
4	of officers, directors or trustees, or key employees to a management company or other person?	4	-	X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets? Does the organization have members or stockholders?	5 6		X
6 7a		-		Δ
/ a		70		Х
h	governing body? Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7a 7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	70		Λ
0	by the following:			
_		0-	х	
	The governing body? Each committee with authority to act on behalf of the governing body?	8a	X	
		8b	Δ.	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			Х
Sac	organization's mailing address? If "Yes," provide the names and addresses in Schedule O tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	9	l	Δ
000	tion b. I oncies (this Section & requests information about policies not required by the internal Revenue Code.)		V	NI.
100	Does the organization have local chapters, branches, or affiliates?	100	Yes	No X
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	10a		- 22
IJ		10b		
112	and branches to ensure their operations are consistent with those of the organization? Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	I Ia	Δ	
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12 a	x	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	iza	22	*************
Ü		12b	х	
c	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120	21	***************************************
Ŭ	in Schedule O how this is done	12c	х	
13	Does the organization have a written whistleblower policy?	13	23	X
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent	17		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	-		
а	The organization's CEO, Executive Director, or top management official	15a	х	
	Other officers or key employees of the organization	15b	X	
-	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure		L	•••••
17	List the states with which a copy of this Form 990 is required to be filed ►MA			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	for		
	public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, ar	nd fina	ncial	
	statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	ion: 🕨	•	
	DUKES & GRAVES, LTD 703-941-1400	-	***************************************	
	4306 EVERGREEN LANE, SUITE 202, ANNANDALE, VA 22003			
		C	000 (2040)

032006 12-21-10

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

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A) Name and Title	(B) Average	(C) Position				1		(D) Reportable	(E) Reportable	(F) Estimated	
Tame and The	hours per	(c	(check all that app				ly)	compensation	compensation	amount of	
	week (describe hours for related organizations in Schedule O)		institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations	
CHARLIE CLEMENTS								_			
TREASURER	1.00	X	ļ	X				0.	0.	0.	
DORCUS MOO									•		
DIRECTOR	0.50	X	ļ			-		0.	0.	0.	
NEIL POPOVIC	1 00			.,					0	_	
<u>CO-CHAIR</u>	1.00	X	-	Х		ļ		0.	0.	0.	
JELSON GARCIA	0.50							0.	0.	0.	
DIRECTOR	0.50	Α.	-			-		U •	U •	V .	
JAMES THOMPSON	0.50	v						0.	0.	0.	
DIRECTOR DOCKERRILLER LAMBERS	0.30	<u> </u>	-			 	:	.	<u> </u>	<u> </u>	
REBECCA ROCKEFELLER-LAMBERT CO-CHAIR	2.00	x		х				0.	0.	0.	
LAURA LEVINE			 								
DIRECTOR	2.00	х						0.	0.	0.	
JASPER TEULINGS											
DIRECTOR	0.50	X						0.	0.	0.	
KATHERINE TILLERY											
DIRECTOR	2.00	X						0.	0.	0.	
KATHARINE J. REDFORD									_		
US OFFICE DIRECTOR	40.00	ļ		X		_		95,481.	0.	5,815.	
KA HSAW WA								405 000	•		
EXECUTIVE DIRECTOR	40.00		ļ	X		X		106,080.	0.	6,026.	
MARIE SOVEROSKI	40.00			**				70 560	0	E 222	
SECRETARY/MANAGING DIRECTO	40.00			Х				79,568.	0.	5,323.	

04-3265555 Page **8**

Га	rt VII Section A. Officers, Directors, Tru	ustees, Key Er	mpl	oyee			High	est		rees (continued)			
	(A) Name and title	(B) Average	(C) Position						(D)	(E)		(F)	
	Name and title	hours per	1					oly)	Reportable compensation	Reportable compensation		Estima amoun	
		week	5	Τ		Γ	T	İ	from	from related		othe	
		(describe hours for	ndividual trustee or director				2		the	organizations	- 1	compens	
		related	tee or	ustee			ensate		organization (W-2/1099-MISC)	(W-2/1099-MISC)	-MISC) from t organiza		-
		organizations	al trus	institutional trustee		Key employee	Highest compensated employee		(** 2, 1000 1100)			and rela	
		in Schedule O)	divid	stituti	Officer	ay emp	ighest	Former			(organiza	tions
		0,	<u> </u>	-	0	SZ.	= 5	<u>-</u>			_		
***************************************			-	\vdash	 	<u> </u>	\vdash	 			-		

											_		

	Sub-total				1				281,129.	^		17 1	<i>C A</i>
C	Sub-total Total from continuation sheets to Part VI	I Section A							201,129.	<u>0</u> 0		17,1	0.
	Total (add lines 1b and 1c)								281,129.	0		17,1	
2	Total number of individuals (including but n						e) wh	io re					
	compensation from the organization												1
												Yes	No
3	Did the organization list any former officer,			, key	em/	ploy	/ee,	or h	ighest compensated en	nployee on			
4	line 1a? If "Yes," complete Schedule J for s										3	3	X
4	For any individual listed on line 1a, is the su and related organizations greater than \$150												Х
5	Did any person listed on line 1a receive or a										4	•	Α.
	rendered to the organization? If "Yes," com									300,101,000	5	5	х
Sec	tion B. Independent Contractors												
1	Complete this table for your five highest con	mpensated ind	epe	nde	nt co	ontr	acto	rs th	nat received more than S	\$100,000 of comper	satio	n from	
	the organization. NONE												
	(A) Name and business	address							(B) Description of se	anvicas	Com	(C) pensatio	\n
								+	20001101101101101	51 VICCS		perisatio	/1 I
			**********		-			\top					
								_					
						***************************************	********	+					
										TO PARTY VIOLEN			
2	Total number of independent contractors (ir	ncluding but no	ot lin	nited	l to t	hos	e list	ted:	above) who received mo	ore than		***	
	\$100,000 in compensation from the organiz					0							
											Far	m 990 (2010)

	n 990 art VI	(2010) C/O I	OUKES & G	RAVES, I	TD.		04-3265	5555 Page 9
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a b c d e f	Fundraising events Related organizations Government grants (contributions, gifts, grants) Similar amounts not included about	1b 1c 1d 1d 1tions) 1e 1ts, and ove 1f 2,	501,986. 13,436.				
Program Service Revenue	2 a b c d			Business Code				
	1	Total. Add lines 2a-2f	dividends, inter	est, and	9,600.			9,600.
	4 5 6 a	Income from investment of ta Royalties	(i) Real					
	b d	Rental income or (loss) Net rental income or (loss)		I				
	b	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss)	(i) Securities 2479285. 2479767. <482.					
Other Revenue	d	Net gain or (loss) Gross income from fundraisin including \$ contributions reported on line	g events (not	>	<482.	> <482.	>	
Other R	С	Part IV, line 18 Less: direct expenses Net income or (loss) from fund Gross income from gaming ad	bdraising events	>				
	С	Part IV, line 19 Less: direct expenses Net income or (loss) from gan Gross sales of inventory, less	b ing activities	1				
	b	and allowances Less: cost of goods sold Net income or (loss) from sale	a					
	11 a	Miscellaneous Revenu REIMBURSEMENTS MISCELLANEOUS		Business Code 900099 900099	27,064. 42.	27,064. 42.		
	d e 12	All other revenue			27,106. 2,538,210.	26,624.	0.	9,600.

9,600. Form **990** (2010)

C/O DUKES & GRAVES, LTD.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must comp			e columns (B), (C), and (D)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16	34,818.	34,818.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	281,129.	217,475.	39,784.	23,870.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	101,123.	22772736	33,7020	237070
7	Other salaries and wages	672,642.	590,402.	12,717.	69,523.
8	Pension plan contributions (include section 401(k)	/			,
•	and section 403(b) employer contributions)	13,896.	11,099.	906.	1,891.
9	Other employee benefits	73,527.	64,547.	2,511.	6,469.
10	Payroll taxes	63,496.	51,735.	4,312.	7,449.
11	Fees for services (non-employees):	<u> </u>			
	Legal	13,147.	13,147.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Accounting	24,839.		24,839.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g					
12	Advertising and promotion	3,204.			3,204.
13	Office expenses	25,366.	21,203.	3,906.	257.
14	Information technology	24,106.	21,166.	1,870.	1,070
15	Royalties				
16	Occupancy	107,297.	93,202.	7,396.	6,699.
17	Travel	90,594.	84,345.	6,070.	179.
18	Payments of travel or entertainment expenses	<u> </u>	01/0101		
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,285.	2,285.		
20	Interest	109.		109.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	11,672.	10,095.	1,548.	29.
23	Insurance	8,125.		8,125.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule 0.)	-,		,,===	A 4444
а	MID A TATTATO	157,632.	157,391.	241.	
a b	CONSULTANTS	49,328.	43,392.	5,936.	
'n	PLANNING, BOARD, MISCELLA	38,362.	24,183.	14,064.	115.
d	FIELD WORK	24,676.	24,676.		
e	PUBLICATIONS	21,401.	20,610.	434.	357.
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	1,741,651.	1,485,771.	134,768.	121,112.
26	Joint costs. Check here if following SOP	-1, -1 ,001.	-, -00, , , - 1		
20	98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising				
	solicitation				Form 990 (2010)

Part X Balance Sheet

Par	LA	Balance Sneet					
					(A) Beginning of year		(B) End of year
T	1	Cash - non-interest-bearing			······································	1	
ĺ	2	Savings and temporary cash investments			3,335,050.	2	3,377,111
	3	Pledges and grants receivable, net		175,000.	1	1,038,520	
	4	Accounts receivable, net	59,414.	4			
	5	Receivables from current and former officers, d					
		employees, and highest compensated employe		•			
		of Schedule L			5		
	6	Receivables from other disqualified persons (as					
		4958(f)(1)), persons described in section 4958(c		i			
		employers and sponsoring organizations of sec					
		employees' beneficiary organizations (see instru			6		
Assets	7	Notes and loans receivable, net				7	
ISS	8	Inventories for sale or use			***************************************	8	
1	9	Prepaid expenses and deferred charges			4,513.	9	9,543
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	103,001.			
	b	Less: accumulated depreciation		73,904.	36,512.	10c	29,097
	11	Investments - publicly traded securities			70,214.		103,979
	12	Investments - other securities. See Part IV, line				12	
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets	***************************************	14			
	15	Other assets. See Part IV, line 11		105,960.	15	105,960	
	16	Total assets. Add lines 1 through 15 (must equ			3,786,663.	16	4,664,210
	17	Accounts payable and accrued expenses			11,627.	17	12,044
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
S	21	Escrow or custodial account liability. Complete				21	
皇	22	Payables to current and former officers, directo		F			
Liabilities		highest compensated employees, and disqualif	ied pers	ons. Complete Part II			
		of Schedule L				22	
	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelate		The state of the s		24	
	25	Other liabilities. Complete Part X of Schedule D			0.	25	63,165
	26	Total liabilities. Add lines 17 through 25			11,627.	26	75,209
		Organizations that follow SFAS 117, check he	ere 🕨	X and complete			
es		lines 27 through 29, and lines 33 and 34.					
Net Assets or Fund Balances	27	Unrestricted net assets			3,284,111.	27	3,109,523
398	28	Temporarily restricted net assets			490,925.	28	1,479,478
١	29	Permanently restricted net assets		29			
Ī		Organizations that do not follow SFAS 117, c	heck he	ere 🕨 🔲 and			
ō		complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds				30	
HSS	31	Paid-in or capital surplus, or land, building, or ed				31	
et	32	Retained earnings, endowment, accumulated in				32	
2		Total net assets or fund balances			3,775,036.	33	4,589,001
	34	Total liabilities and net assets/fund balances			3,786,663.	34	4,664,210.

Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response to any question in this Part XI		***********		X		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,53	8,2	10.		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,74	1,6	51.		
3							
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 3						
5	Other changes in net assets or fund balances (explain in Schedule O)	5	1	7,4	06.		
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	4,58	9,0	01.		
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response to any question in this Part XII				X		
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.					
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?						
b	Were the organization's financial statements audited by an independent accountant?		2b	X			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,	-				
	review, or compilation of its financial statements and selection of an independent accountant?		. 2c	X			
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	edule O.					
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued	d on a					
	separate basis, consolidated basis, or both:		name and a second				
	X Separate basis Consolidated basis Both consolidated and separate basis		-				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	gle Audit	-				
	Act and OMB Circular A-133?		. 3a		X		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required		and the same of th				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b				

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

or a section

Open to Public Inspection

Employer identification number

04-3265555

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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. ➤ See separate instructions.

EARTHRIGHTS INTERNATIONAL, INC.

C/O DUKES & GRAVES, LTD.

Part I	Reason	tor Public Chai	rity Status (All organiz	zations mu	st comple	te this par	t.) See ins	tructions.				
he organ	ization is not a	a private foundation	because it is: (For lines	1 through	11, check	only one b	oox.)					
1	A church, cor	nvention of churche	s, or association of chur	ches desc	ribed in se	ection 170)(b)(1)(A)(i)).				
2	A school des	cribed in section 1	70(b)(1)(A)(ii). (Attach Sc	hedule E.)								
3	A hospital or	a cooperative hosp	ital service organization	described	in section	170(b)(1)	(A)(iii).					
4	A medical res	search organization	operated in conjunction	with a hos	pital desc	ribed in s e	ection 170	(b)(1)(A)(i	ii). Enter th	ne hospita	l's nam	ie,
	city, and state											
5	-	***************************************	benefit of a college or u	niversity o	wned or or	perated by	a governi	mental un	it describe	d in		
	_	(b)(1)(A)(iv). (Compl	=	,	,		J					
6			nent or governmental uni	t describe	d in sectio	n 170(b)(1)(A)(v).					
7 X	,		ceives a substantial part					or from the	e general pi	ublic desc	ribed i	n
•	_	b)(1)(A)(vi). (Comple		or its supp	on nom a	governin	ornar armi c)	y goriorai pi	abiio a cco	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	••
8 🔲	•		section 170(b)(1)(A)(vi).	(Complete	Dort II \							
9 🗍			ceives: (1) more than 33			rom oontr	ibutions n	aambarsh	in foot and	d aross ro	cainte	from
9		•	·									
			nctions - subject to certa									
			axable income (less sec	แดกอากเล	ix) from bu	sinesses	acquired b	y the orga	anization ai	ter June 3	30, 197	5.
		509(a)(2). (Complet	·	_ 1)	F00()(-	41				
10	_	-	perated exclusively to te	•	-			-			of one :	~~
11			perated exclusively for the									Of
			ations described in secti				2). See se d	ction 509	(a)(3). Oned	ck the box	tnat	
			organization and compl								O.U	
	a Type I		, ,		e III · Fund	-	•			Type III - (
e	-	=	at the organization is not		-							ın
		•	than one or more publicl		-				9(a)(1) or se	ection 509	3(a)(2).	
f	•		tten determination from		•			e III				
			his box									. L
g	-		organization accepted ar			•						T
		· ·	directly controls, either a	_							Yes	No
			upported organization?							3	<u> </u>	
			n described in (i) above?									
			a person described in (i) o							11g(iii)	لــــــــــــــــــــــــــــــــــــــ	<u></u>
h	Provide the fo	ollowing information	about the supported or	ganization	(s).							
		T	1			,		T				
(i) Name	of supported	organization				(iv) Is the organization (v) Did you notify the organization in col.						f
organization organization in col. (i) listed in your organization in col. (i) organized in the		zed in the	sup									
			above or IRC section			ļ	η	0.8				
			(see instructions))	Yes	No	Yes	No	Yes	No			
							<u> </u>			······································		
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2010

032021 12-21-10

Schedule A (Form 990 or 990-EZ) 2010 C/O DUKES & GRAVES, LTD. 04-3265555 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.)

Calendar year (or fiscal year beginning in) 1 Giffs, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2 Tax revenues levide for the organization without charge furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 2 Teleform Romania (for fiscal year beginning in) 6 Public support. Subtract line 8 from line 4. 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assests (Explain in Part IV.) (a) 2006 (b) 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total 15 (f) Total 25 (f) To	Section A. Public Support						
I diffic, grants, contributions, and membership fees received, (Do not include any "unusual grants.") 921,680. 1671572. 2100446. 1590071. 2501986. 8785755. 1 Tax revenues levied for the organization is benefit and either paid to or expended on its benefit and either paid to or expended on its benefit and either paid to or expended on the benefit is the organization without charge. 4 Total. Add lines 1 through 3 5 The portion of total conflibutions by each person (other than a governmental unit or publicly supported organization) included on line 11 that exceeds 2% of the amount shown on line 11. 208,820. 6 Public support, Guitest fire 5 team for 4 Section B. Total Support 208,820. 6 Public support form inne 4 921,680. 1671572. 2100446. 1590071. 2501986. 8785755. 8785755. 8785755. 928,820. 6 Public support, Guitest fire 5 team for 4 Section B. Total Support 208,820. 6 Public support form inne 4 921,680. 1671572. 2100446. 1590071. 2501986. 8785755. 8785755. 8785755. 928,820. 9 Public support, Guitest fire 5 team for 4 921,680. 1671572. 2100446. 1590071. 2501986. 8785755. 8785755. 9886. 8785755. 9886. 8785755. 98876935. 9988.		(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
memborship fees received. (Do not include any "unusual grants.") 21 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf and either paid to or expended on this behalf are strongly and the property of the proper		(4, 200	10/2-00	10,200	(4) 2000	(0/20:0	
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Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
J	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)						<u> </u>
	ction B. Total Support		<u> </u>				
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties						
	and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
12	assets (Explain in Part IV.)						
	Total support (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for	the ergonization's	first second this	d fourth or fifth t	av voor op a soctio	n 501(a)(2) arganiz	ation
14	-	•			ax year as a sectio		
Sec	ction C. Computation of Publi				*************	******************	
	Public support percentage for 2010 (li			column (fl)		15	%
	Public support percentage from 2009					16	%
	ction D. Computation of Inves				***************************************	10	70
	Investment income percentage for 20					17	%
	Investment income percentage from 2					18	
	33 1/3% support tests - 2010. If the						
130	more than 33 1/3%, check this box ar						, 13 HOC
b	33 1/3% support tests - 2009. If the						and
	line 18 is not more than 33 1/3%, che	-					·
20	Private foundation. If the organization						

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SCHEDULE D

Department of the Treasury

(Form 990)

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions.

2010 Open to Public Inspection

OMB No. 1545-0047

Internal Revenue Service

Name of the organization

EARTHRIGHTS INTERNATIONAL, INC. C/O DUKES & GRAVES, LTD.

Employer identification number 04-326555

Pa	rt I Organizations Maintaining Donor Advised		or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3			
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w		proceeding process
	are the organization's property, subject to the organization's e		
6	Did the organization inform all grantees, donors, and donor ad	visors in writing that grant funds can be u	used only
	for charitable purposes and not for the benefit of the donor or		p
	impermissible private benefit?		Yes No
_	rt II Conservation Easements. Complete if the orga	10 mm - 1	art IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or ed		orically important land area
	Protection of natural habitat	Preservation of a certif	fied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the form o	f a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		
b	Total acreage restricted by conservation easements		2b
	Number of conservation easements on a certified historic structure		
d	Number of conservation easements included in (c) acquired af		re
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele	ased, extinguished, or terminated by the	organization during the tax
	year >		
4	Number of states where property subject to conservation ease		
5	Does the organization have a written policy regarding the period		
	violations, and enforcement of the conservation easements it it		
6	Staff and volunteer hours devoted to monitoring, inspecting, a		
7	Amount of expenses incurred in monitoring, inspecting, and er		
8	Does each conservation easement reported on line 2(d) above		COLUMN STATE
	and section 170(h)(4)(B)(ii)?		
9	In Part XIV, describe how the organization reports conservation	n easements in its revenue and expense :	statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	on's financial statements that describes the	ne organization's accounting for
-	conservation easements.		
Pai	rt III Organizations Maintaining Collections of		her Similar Assets.
	Complete if the organization answered "Yes" to Form 9		
1a	If the organization elected, as permitted under SFAS 116 (ASC		
	historical treasures, or other similar assets held for public exhit	bition, education, or research in furtheran	ce of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that describe	es these items.	
b	If the organization elected, as permitted under SFAS 116 (ASC	958), to report in its revenue statement a	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, edu	ucation, or research in furtherance of publ	lic service, provide the following amounts
	relating to these items:		
	(i) Revenues included in 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 treas	sures, or other similar assets for financial	gain, provide
	the following amounts required to be reported under SFAS 116	6 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		

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

Schedule D (Form 990) 2010

		S & GRAVE						4-32			
Pa	rt III Organizations Maintaining Co				·····						
3	Using the organization's acquisition, accession	n, and other record	ls, checl	k any of the	following that	at are a sig	gnificant us	se of its	collectio	n iten	าร
	(check all that apply):										
а	Public exhibition	d			change progr						
b	Scholarly research	е		Other							
С	Preservation for future generations										
4	Provide a description of the organization's coll	lections and explai	n how th	ney further	the organizat	ion's exen	npt purpos	e in Parl	XIV.		
5	During the year, did the organization solicit or								-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	to be sold to raise funds rather than to be main								Yes		No
Pa	rt IV Escrow and Custodial Arrang		ete if the	organizati	on answered	"Yes" to f	Form 990, I	Part IV, I	ine 9, or		
	reported an amount on Form 990, Part	X, line 21.									
1a	Is the organization an agent, trustee, custodia	n or other intermed	liary for	contributio	ns or other as	ssets not i	ncluded		_		~~
	on Form 990, Part X?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		************	***********			L	Yes	L	J No
b	If "Yes," explain the arrangement in Part XIV as						ļ	*******************************	**************		
									Amoun	t	
С	Beginning balance						. 1c				
d	Additions during the year										
е	Distributions during the year						. 1e				
f	Ending balance			*******			. 1f				
2a	Did the organization include an amount on For	m 990, Part X, line	21?	**********	***********		****	<u> </u>	Yes		No
b	If "Yes," explain the arrangement in Part XIV.										
Pa	t V Endowment Funds. Complete if t	the organization an	swered	"Yes" to Fo	orm 990, Part	IV, line 10).				
		(a) Current year	(b) P	rior year	(c) Two yea	rs back (d) Three yea	ars back	(e) Fou	r years	back
1a	Beginning of year balance										***********
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the year	end balance held a	s:								
а	Board designated or quasi-endowment		%								
b	Permanent endowment	%									
С	Term endowment ▶ %										
За	Are there endowment funds not in the possess	sion of the organiza	ation tha	it are held a	and administe	ered for th	e organizat	tion			
	by:									Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
b	If "Yes" to 3a(ii), are the related organizations li	isted as required o	n Sched	lule R?					3b		
4	Describe in Part XIV the intended uses of the co								<u> </u>		
Pai	t VI Land, Buildings, and Equipme	nt. See Form 990	, Part X,	line 10.							
	Description of investment	(a) Cost or o	ther	(b) Cos	t or other	(c) Ac	cumulated	T	(d) Boo	k valu	e
	•	basis (investn	E .		(other)	. ,	reciation				
1a	Land								***************************************		
	Buildings										
	Leasehold improvements								***************************************		
	Equipment	103,	001.				73,90	4.	2	9,0	97.

Schedule D (Form 990) 2010

29,097.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

Schedule D (Form 990) 2010

C/O DUKES & GRAVES, LTD.

Part VII Investments - Other Securities. (a) Description of security or category			ad of valuation:
(including name of security)	(b) Book value		od of valuation: of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
(I)			
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)			
Part VIII Investments - Program Related.	See Form 990, Part X, line		
(a) Description of investment type	(b) Book value		od of valuation: f-year market value
(1)			
(2)			
(3)			***************************************
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)			
Part IX Other Assets. See Form 990, Part X, lir			
(4	a) Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)	in a 1E l		
Total. (Column (b) must equal Form 990, Part X, col (B) li. Part X Other Liabilities. See Form 990, Part X		***************************************	>
(a) Description of liability	^, iii le ∠5.	(b) Amount	
		(b) Amount	
(1) Federal income taxes		62 165	
(2) ACCRUED PAYROLL		63,165.	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
(11)			
	ne 25.)	63 165	
Total. (Column (b) must equal Form 990, Part X, col (B) lin FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote 2. FIN 48 (ASC 740).	to the organization's financial stat	ements that reports the organization's liabilit	y for uncertain tax positions under

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Schedule D (Form 990) 2010

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

➤ Attach to Form 990. ➤ See separate instructions.

2010	
Open to Public Inspection	_

Name of the organization Employer identification number EARTHRIGHTS INTERNATIONAL, INC. C/O DUKES & GRAVES, LTD. 04-3265555 General Information on Activities Outside the United States. Complete if the organization answered "Yes" Part I to Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number of (c) Number of (d) Activities conducted in region (e) If activity listed in (d) (f) Total employees, agents, and expenditures offices (by type) (e.g., fundraising, program is a program service, for and in the region independent services, investments, grants to describe specific type investments contractors recipients located in the region) of service(s) in region in region in region ADVOCACY AND CAMPAIGNS, PROGRAM SERVICES, GRANTS TO LEGAL AND EARTHRIGHTS EAST ASIA AND THE RECIPIENTS LOCATED IN SCHOOLS. SEE 990 PART PACIFIC REGION III FOR DETAILED 600,591, 3 a Sub-total 23 600,591. b Total from continuation sheets to Part I 0. c Totals (add lines 3a and 3b) 600,591.

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

Schedule F (Form 990) 2010

SEE PART V FOR COLUMN (E) DESCRIPTIONS

EARTHRIGHTS INTERNATIONAL, INC.

C/O DUKES & GRAVES, LTD.

Schedule F (Form 990) 2010

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any 04-3265555 recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 Part II can be duplicated if additional space is needed.

Page 2

(i) Method of valuation (book, FM) appraisal, other)					
(h) Description of non-cash assistance					
(g) Amount of non-cash assistance					empt by
(f) Manner of cash disbursement					recognized as tax-e>
(e) Amount of cash grant					foreign country,
(d) Purpose of grant					Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities
(c) Region					is listed above that are r I has provided a section r entities
(b) IRS code section and EIN (if applicable)					recipient organization he grantee or counse other organizations or
1 (a) Name of organization					 2 Enter total number of recipient organizations listed a the IRS, or for which the grantee or counsel has pro 3 Enter total number of other organizations or entities

Schedule F (Form 990) 2010

EARTHRIGHTS INTERNATIONAL, INC.

C/O DUKES & GRAVES, LTD.

Schedule F (Form 990) 2010

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. 04-3265555

Page 3

Part III can be duplicated if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other) VALUE (CASH) FAIR MARKET (g) Description of non-cash assistance (f) Amount of non-cash assistance 0 34,818, INDIVIDUAL RECIPIENTS (e) Manner of cash disbursement CASH DISBURSEMENT TO (c) Number of cash amount of recipients cash grant 16 EAST ASIA AND THE (b) Region PACIFIC EARTHRIGHTS SCHOOL SMALL CASH (a) Type of grant or assistance ASSIST STUDENTS AND ALUMNI GRANTS GIVEN TO ALUMNI TO

SEE PART V FOR COLUMN (A) DESCRIPTIONS

032073 12-20-10

Schedule F (Form 990) 2010

Schedule F (Form 990) 2010 C/O DUKES & GRAVES, LTD. Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Yes	X 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, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	X No
		Schedule F (For	m 990) 2010

032074 12-20-10

Part V | Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); 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.

SCHEDULE F, PART I, LINE 2: GRANTS ARE APPLIED FOR BY STUDENTS AND ALUMNI OF THE EARTHRIGHTS SCHOOL. THE GRANT REQUEST IS EVALUATED BY A COMMITTEE AND IF APPROVED DISTRIBUTED TO THE RECIPIENT. FOLLOW UP IS DONE BY EARTHRIGHTS STAFF AND A REPORT OF THE USE OF THE GRANT FUNDS IS PROVIDED TO EARTHRIGHTS FOR REVIEW.

SCHEDULE F, PART I, LINE 3: THE ORGANIZATION ACCOUNTS FOR THE EXPENDITURES ON THE ACCRUAL BASIS. MONTHLY ACCOUNTING IS PROVIDED BY THE ASIA OFFICE AND THIS IS INCORPORATED INTO THE RECORDS OF THE ORGANIZATION.

PART I, LINE 3, COLUMN (E):

REGION: EAST ASIA AND THE PACIFIC

(E) SPECIFIC TYPES OF SERVICES IN REGION: ADVOCACY AND CAMPAIGNS, LEGAL AND EARTHRIGHTS SCHOOLS. SEE 990 PART III FOR DETAILED DESCRIPTION OF PROGRAMS

PART III, COLUMN (A):

REGION: EAST ASIA AND THE PACIFIC

(A) TYPE OF GRANT OR ASSISTANCE: EARTHRIGHTS SCHOOL SMALL CASH GRANTS GIVEN TO ALUMNI TO ASSIST STUDENTS AND ALUMNI WITH

ACTIVITIES RELATED TO TRAINING RECEIVED AT EARTHRIGHTS SCHOOLS AND

DOCUMENTING

HUMAN RIGHTS AND ENVIRONMENTAL RIGHTS ACTIVITIES AND ABUSES

SCHEDULE J (Form 990)

Compensation Information

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

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990. EARTHRIGHTS INTERNATIONAL, INC.

C/O DUKES & GRAVES, LTD.

Employer identification number 04-3265555

Pa	art 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 in Form 990	0,		
	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 resid	ence		
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, cher	f)		
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 officers, direct			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?		X	
	• •			
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's	-		
	CEO/Executive Director. Check all that apply.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation com	imittee		
4	During the year, did any person listed in 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 from the organization or a related organization?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in 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		Х
	Any related organization?			X
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			ĺ
	contingent on the net earnings of:			ĺ
а	The organization?	6a		X
b	Any related organization?			X
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		
LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Schedule J (Form	1 990)	2010

04 - 3265555EARTHRIGHTS INTERNATIONAL, INC.

Page 2

C/O DUKES & GRAVES, LTD.

Schedule J (Form 990) 2010

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

For each individual whose compensation must be reported in 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 are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	9	0	(E)	(E)
					Ratirement and	Nontavable	Total of columns	(1)
(A) Name		(i) Base compensation	(ii) Bonus & incentive	(iii) Other reportable	other deferred	benefits	(B)(i)-(D)	reported in prior
			compensation	compensation	Company			Form 990-EZ
	ε							
	(II)							
	ε							
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	(E)							
3	(ii)							
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14	(ii)							
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15	(E)							
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16	<u> </u>							

Schedule J (Form 990) 2010

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2010
Open to Public Inspection

Internal Revenue Service

Name of the organization

EARTHRIGHTS INTERNATIONAL, INC. C/O DUKES & GRAVES, LTD.

Employer identification number 04-326555

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
PUBLIC EDUCATION AND OUTREACH INCLUDING THE DANIEL CLARK MEMORIAL FUND:
THE FUND PROVIDES RESOURCES TO EMPOWER ALUMNI OF THE EARTHRIGHTS
SCHOOLS TO CONTINUE THE WORK OF EDUCATING AND TRAINING HUMAN RIGHTS
AND ENVIRONMENTAL ACTIVISTS IN SOUTHEAST ASIA. OTHER EDUCATION AND
OUTREACH EFFORTS FOCUSED ON EDUCATING THE PUBLIC IN HUMAN RIGHTS AND
ENVIRONMENTAL ACTIVITIES AROUND THE WORLD
EXPENSES \$ 438,406. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
FORM 990, PART VI, SECTION A, LINE 2: KA HSAW WA, THE EXECUTIVE DIRECTOR
AND KATHARINE J. REDFORD, THE U.S. OFFICE DIRECTOR ARE MARRIED.
FORM 990, PART VI, SECTION B, LINE 11: THE 990 IS SENT VIA EMAIL (IN A PDF
FILE FORMAT) TO THE BOARD MEMBERS FOR REVIEW BEFORE IT IS FILED WITH THE
I.R.S.
FORM 990, PART VI, SECTION B, LINE 12C: 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
FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION IS ANALYZED AND
REVIEWED EACH YEAR. SALARIES ARE COMMENSURATE WITH OTHER ORGANIZATIONS OF
COMPARABLE SIZE. THE BOARD REVIEWS AND APPROVES A BUDGET EACH YEAR WHICH
INCLUDES COMPENSATION DATA FOR ALL EARTHRIGHTS EMPLOYEES BROKEN DOWN BY JOB

032211 01-24-11

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

Schedule O (Form 990 or 990-EZ) (2010)

Name of the organization EARTHRIGHTS INTERNATIONAL, INC. C/O DUKES & GRAVES, LTD.	Employer identification number 04-326555
TITLE AND FUNCTION.	
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'	S FINANCIAL
STATEMENTS ARE AVAILABLE ONLINE AT WWW.EARTHRIGHTS.ORG A	S PART OF THE
ANNUAL REPORT POSTING. GOVERNING DOCUMENTS AND CONFLICT	OF INTEREST POLICY
ARE AVAILABLE UPON REQUEST AND A COPY OF THESE DOCUMENTS	IS ALSO ON FILE
WITH THE COMMONWEALTH OF MASSACHUSETTS.	
FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:	
NET UNREALIZED GAINS ON INVESTMENTS:	13,159.
DONATED SERVICES AND USE OF FACILITIES:	4,247.
TOTAL TO FORM 990, PART XI, LINE 5	17,406.
FORM 990 PART XII QUESTION 2C THE ORGANIZATION'S FINANCE AND AUDIT COMMITTEE IS INVOLVED DISCUSSIONS ABOUT THE UNDERTAKING OF THE AUDIT, INCLUDING	ED WITH
INDEPENDENT ACCOUNTANT IS CHARGED WITH THIS TASK. THE M	
DIRECTOR IS ASSIGNED WITH OVERSEEING THE AUDIT PROCESS A	
STAFF TO PROVIDE THE AUDITOR WITH ALL REQUIRED INFORMATION	ON. UPON
COMPLETION OF THE AUDIT, THE AUDIT REPORT AND MANAGEMENT	LETTER IS
PROVIDED TO THE BOARD OF DIRECTORS FOR REVIEW AND DISCUS	SION.

Earthrights International Fixed Assets, A/D, Depreciation 1/31/2011

31/2011	POPTag #5 & notes	program	(erail)	Acq date M	ethod t	ife	Cost	A/0 1/31/2010	Depreciation 1/31/2011	AD 1/31/2011	
escription		2331 Legal	IP.	3/29/2005 5	ι.	5	870.93	841.92	29.01	870.93	29.01
ateway Computer			RS	8/1/2005 S	L	5	942.99	848.70	94.29	942.99	94.29
ateway Computer - Marco				4/1/2005 S		5	952.9	921.14	31.78	952.90	31.78
ateway Computer- 3310S	No tag (offsite - Rick)	Legal	Chev						187.09	724.06	
ateway Laptop - Kalie			LS LS	9/29/2008 S 7/31/2008 S		5	835.43 1903.47	558.97 571.05	380.70	951.75	
ony Japiop - Katie		2348 Legal		17007446		ú					547.79
		2478 Legal	SEA	9/30/2009 S	L	5	\$28.82	35.26	105.77	141.03	105.77
esktop Computer		zaro cega-									
	not tagged	Cempaign	8P	5/11/2004	SL	5	3,284.00	3,284.00	240.45	3,284.00 961.80	
anasonic Laptop aptop - Matthew	ma region		BP BP	2/28/2007 4/30/2008	SL	5	889.68	721.35 256.90	133.45	400.35	
tr conditioner	r/a		BP BP	4/30/2010	SL	5	890.62		178.13	178.13	552.03
omputer for Ross		1.77 miles									
A Charles	N/a	Core		6/25/2001	SL	3 5	1,903.00	1,903,00		2,900.00	
aradigm software ompuler		2345 Core		10/31/2002	SE	5	913.00	913.00		913.00	
amera	rVa	Core 2343 Core		12/29/2002	SL	5	1,068.00	1,068.00	0.52	2,373.00	
ell computer - Anne ynamism	2317, 2328	Core		10/2/2005	St. SL	3 5	703.87	167.71	140.78	328.49	
AM upgrade	n/a	Core		10/29/2008	SL	5	1,532 29	363.05	306 48	689.54	
ell - 3 computers	2321, 2323, 2325	2337 Core		4/30/2009	SL.	5	952.22	142.84	190,45	333.29	637.69
cer laptop										-	HEAT 25.
aleway Computer		2319 Core	Dev	3/29/2005	SL	5	870.93	841.92	29.01	870.93	HAME OF LE
sicual company		Core	Into	1/29/2007	SL	5	1,152.00	691.20	230.40	921.60	
oreaming Tree Tech	Firewall user software	2350 Core	IMC	1/29/2007	SL	5	1,999.74	1,200.00	400.00 175.78	1,600.00 512.64	
dell Computer (KSW)		2333 Gore	IITLC	2/28/2008 8/12/2009	SL SL	5	578.79 570.30	43 35	104.08	147.42	
SW laptop		2338 Core		G 1878							910 22
		Core	IXP	2/27/2009	SL	5	19,650.00	3,802.50	3,930.00	7,532.50 89.68	
harePoint project and implementation	n/a	Cora	(XP	10/14/2010	SL	5	1,345.14		89.68 48.59	48 59	4,068 27
lac Computer oriable digital projector		Corp	IXP	9/15/2010	SL	5	582.99		10.43	y rije	
										1,307.70	
omputer		2341 Campaign	PEO	5/13/1999	SL	5	1,307.70	1,307.70	10.00	912.28	
omputer		2342 Campaign Campaign	PEO	11/29/2000	SL	5	3,199.00	3,199.00		3,199.00	
ligital slide projector	n/a	2339 Campaign	PEO	11/14/2001	SL	5	692.05	692.05		95.00	
aptop and bag - Kalie refrigerator	n/a	Campaign	PEO	3/29/2001	SL	5	95,00 4,365,00	95.00 4,368.00		1,368.00	
elephone system	n/a	Campaign	PEO	7/14/1999 6/14/2002	SL SL	7	860.00	850.00	3-3-1	860.00	
ttice furniture	Na .	Campaign Campaign	PEO	8/27/2002	SL	7	535.00	535.00		535,00	
esks, chairs, faleral file	Na	2492 Campaign	PEO	8/29/2002	SL	5	1,259.00	1,259.00		1,651.00	
aleway computers	2488, 2487	Campaign	PEO	9/29/2002	SL	5	1,651.00	1,186.00	T.A.Ca.	1,166.00	
PC Parts - Computer hardware		2340 Campaign 2344 Campaign	PEO	10/29/2003	SL	5	1,166.00	1,150 00	1 2 1 1 1	1,185.00	
PC Parts - Computer hardware		2347 Csimpaign	PEO	11/30/2003	SL	5	1,012.59	1,012.59		1,012.59	
lateway computer equip		2345 Campaign Campaign	PEO	11/30/2003 3/29/2005	SL	5	2,410.40	2,330.05	80.35	2,410 40	
each Camera - Camera & lenses KSW		Campagn	720								80 35
		2476 Campaign	вр	9/30/2008	SL	5	842.10	561.40		729.82	
Computer		2479 Campaign	69	12/31/2007	SL	5	523.53	122.17	104.71	3,754.56	
esktop - Rachel ruck (1/2)	n/a	Campaign	BP	1/31/2008	SL	5	8,257,58	2,503.04	1,251,52	3,130.00	
1950 (117)											1524 85
		100		FM410550	st	5	525.43	70.00	105.09	175.09	105 09
Desktop computer		2474 Campaigns	IAA	5/31/2009	at					2,574.00	
Computers	unlagged ERSB student computers	Training	A&B	6/30/2003 5/30/2004	SL	5	1,460 00	2,574.00 1,460.00		1,460.00	
Computers	untagged ERSB student computers	Training	AAB	5/30/2004	at		15040.21				
		2122 2122		10/31/2005	SL	5	780.32	780.32		780 32	
computer		2488 Training 2489 Training	ERS8	10/31/2005	BL	5	1,375 61	1,375.61		1,375.61	
omputer		2490 Training	ERSS	4/30/2008	SL	5	1,039.03	779.28 658.88		987.09 872.57	
omputer		2491 Training	ERSB	1/31/2008	SL SL	5	1,058,42 6,257.58	2,503.04		3,754.56	
nuck (1/2)	Na	Training 2450 Training	ERSB	9/30/2009		5	518 53	34 57	103.71	135 28	
AP desk computer		Training	ERSB	8/31/2010	SL	5	590.63		49 22 210 20	49 22 216 20	
rejector Ir Candilloner		Training	ERSB	2/28/2010	SL	5	1,178 79		210.20	2,020	2,042.15
				- Constitution			***	727 54	197.37	953.96	
aptop	not tagged	Training	ERSM	3/31/2006 8/30/2006		5	988.85 897.37	756.59 843.13	179.48	822.61	
.eptop	nol taggest	Training 2454 Training	ERSM ERSM	9/10/2006		5	1,052.35	701.57	210.47	912 04	
			ERSM	3/31/2005		5	932.47	341.97	160.50	528.42	
Computer	not teaged	Treining						128 54	140.00	268 34	
Computer Satebook computer Satebook computer	nut tagged nut tagged	Training	ERSM	2/28/2009		6	700,00	128 34	140.00	268 34	913.82

11671.90

Computer equipment Computer software Other property 50,035.18 24,923.00 28,042.65 [0300.8]

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