ECHANGE 2010 E7 PACCOUNTING PERIOD

Form Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

u Do not enter Social Security numbers on this form as it may be made public.

2013 Open to Public Inspection

OMB No. 1545-0047

Internal Revenue Service u Information about Form 990 and its instructions is at www.irs.gov/form990. For the 2013 calendar year, or tax year beginning 02/01/13, and ending 12/31/13D Employer identification number Check if applicable: C Name of organization EARTHRIGHTS INTERNATIONAL, INC. X Address change Doing Business As 04-3265555 Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite Telephone number Initial return 202-466-5188 1612 K STREET NW SUITE 401 Terminated City or town, state or province, country, and ZIP or foreign postal code WASHINGTON DC 20006 4,438,342 Amended return **G** Gross receipts\$ Name and address of principal officer: Application pending H(a) Is this a group return for subordinates? MARIE SOVEROSKI 1612 K STREET, NW H(b) Are all subordinates included? WASHINGTON DC 20006 If "No," attach a list. (see instructions) **X** 501(c)(3) 4947(a)(1) or 501(c) () t (insert no.) WWW.EARTHRIGHTS.ORG Website: U H(c) Group exemption number ${f u}$ X Corporation Trust Year of formation: 1995 Form of organization: Association Other ${f u}$ M State of legal domicile: Summary 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 u | 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) Activities & 11 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 24 5 6 Total number of volunteers (estimate if necessary) 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 **b** Net unrelated business taxable income from Form 990-T, line 34 ... Current Year 1,955,497 2,726,285 8 Contributions and grants (Part VIII, line 1h) Revenue 9 Program service revenue (Part VIII, line 2g) 0 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 4,913 8,474 5,703 1,693,396 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,966,113 4,428,155 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) 123,491 116,787 14 Benefits paid to or for members (Part IX, column (A), line 4) 1,270,224 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ${\bf u}$ 167,870 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) ______ 1,032,671 930,315 2,426,386 2,357,363 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) -460,2732,070,792 19 Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year End of Year 20 4,396,904 6,662,483 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 87,266 273,553 22 Net assets or fund balances. Subtract line 21 from line 20 . 4,309,638 6,388,930 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. Sian Signature of officer Here STANLEY CORFMAN TREASURER Type or print name and title Print/Type preparer's name Preparer's signature Check Paid MARGARET H MARTINEZ MARGARET H MARTINEZ 11/13/14 self-employed P00295352 Preparer LEVY & ASSOCIATES, PC 20-0588376 Firm's name Firm's EIN } **Use Only** 10400 EATON PL STE 100 22030-2225 703-218-4100 FAIRFAX, VA

May the IRS discuss this return with the preparer shown above? (see instructions)

4d Other program services. (Describe in Schedule O.)

Total program service expenses u

(Expenses \$ 296,538 including grants of \$

1,944,287

75,000) (Revenue \$

			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	Х	
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 Revenue Procedure 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			l
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			l
	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,"			l
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			١
	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 temporarily restricted		37	
	endowments, permanent endowments, or 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,"		v	
	complete Schedule D, Part VI	11a	X	
D	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	446		x
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	11c		x
d	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	110		
u	reported in Part V. line 162 If "Vee." complete Schoolule D. Part IV	11d		x
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		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	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any 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	Х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government 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 or 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 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) 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		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If so, complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	l		٦,
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			\
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			.
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			x
33	complete Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33		33		x
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	33		
J-	an IV and Dart V line 4	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	334		
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	335		
-	related annual attack Week and a secondary Ocharleta D. Bart V. Lan O.	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		<u> </u>
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Port VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	х	

Part V Statements Regarding Other IRS Filings and Tax Compliance X Check if Schedule O contains a response or note to any line in this Part V No 14 Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 0 b Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 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 **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) Did the organization have unrelated business gross income of \$1,000 or more during the year? X b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 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)? If "Yes," enter the name of the foreign country: u SEE SCHEDULE O See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? ... X X Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the X organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). 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? If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting 8 organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person? b Section 501(c)(7) organizations. Enter: 10 Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: 11 Gross income from members or shareholders а Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year ________12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. **b** Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand X Did the organization receive any payments for indoor tanning services during the tax year? 14h If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Form 990 (2013) EARTHRIGHTS INTERNATIONAL, INC. 04-3265555 Page 6 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 in 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 No 11 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 in Schedule O. Enter the number of voting members included in line 1a, above, who are independent 11 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 any other officer, director, trustee, or key employee? X 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 Х supervision of officers, directors, or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 7a 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? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? 8a **b** 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 the organization's mailing address? If "Yes," provide the names and addresses in Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a Х b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe in 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 in Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 13 Did the organization have a written document retention and destruction policy? X 14 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? 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 in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? Х 16a 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 u MA, VA, CA, NY, MD, DC, IL, CO 17

- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 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 in Schedule O)
- 19 Describe in 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.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: 11 LEVY & ASSOCIATES, PC 10400 EATON PLACE

organization: u LEVY & ASSOCIATES, PC 10400 EATON PLACE FAIRFAX VA 22030

Form 990 (2013	B) EARTHRIGHTS	INTERNATIONAL,	INC.	04-3265555	Page ·
Part VII	Compensation of O	fficers, Directors, Trus	tees, Key	Employees, Highest Comp	ensated Employees, and

Independent	Contractors					•	_
Check if Sche	dule O contains a	response or r	note to any	line in th	is Part \/II		

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.

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

(A) Name and Title	Name and Title Average hours per (do not check more than one box, unless person is both an (list any officer and a director/trustee)			an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation			
	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)	(W-2/1099-MISC)	from the organization and related organizations
(1) STANLEY CORFMAN	1 00									
TREASURER	1.00	x		x				0	0	0
(2) DORCUS MOO										
DIDECTOR	0.50	X						0	0	0
OIRECTOR (3) NEIL POPOVIC	0.00	Δ						• 0	0	0
CO-CHAIR	2.00 0.00	x		x				0	0	0
(4) JELSON GARCIA										
DIRECTOR	0.50	X						0	0	0
(5) JAMES THOMPSON										
DIRECTOR	0.50 0.00	x						o	0	0
(6) DAVID HUNTER										
DIRECTOR	1.00 0.00	x						0	0	0
(7) LAURA LEVINE										
DIRECTOR	2.00 0.00	x						0	0	0
(8) JASPER TEULINGS	0.00							0		<u> </u>
` ,	0.50									
DIRECTOR	0.00	X						0	0	0
(9) KATHERINE TILLER	2.00									
CO-CHAIR	0.00	x						0	0	0
(10) SARAH SINGH	0.00									
	0.50									
DIRECTOR	0.00	X						0	0	0
(11) ABBY REYES	0.50									
DIRECTOR	0.00	X						0	0	0

Part VII Section A. Officers	, Directors, Tru	ıstee	es, K	ey E	mpl	oyee	s, a	nd Highest Compensated	Employees (continued)			
(A) Name and title	(B) Average hours per week (list any hours for	of	x, unl	Pos check ess pe	erson i directo	than o	an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	c	(F) Estimat amount other compensa	ted t of r ation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	, , ,		organiza and rela organizat	ated
(12) PAUL HOFFMAN	0.50											
DIRECTOR	0.50	x						0	o	ı		(
(13) KA HSAW WA									-			
EXECUTIVE DIRECTOR	40.00			x				128,026	o	İ		2,561
(14) KATHARINE J. RE	DFORD							120,020				2,502
US OFFICE DIRECTOR	40.00			x				115,424	o	ı	1	L1,397
(15) MARIE SOVEROSKI	0.00							115,424	0			LT , 39 /
	40.00							07.445		ı		- 4-4
SECRETARY/MANAGING D (16)	0.00	-	\vdash	X				97,446	0			7,474
										ı		
(17)										l		
(18)										<u> </u>		
(19)					\\					ı		
1b Sub-total							u	340,896			2	21,432
c Total from continuation she d Total (add lines 1b and 1c)							u	340,896			-	21,432
Total (add lines to and rc) Total number of individuals (in reportable compensation from	cluding but not I	imite	d to	thos		_	bove		\$100,000 in			
3 Did the organization list any for	ormer officer, dir	ecto	r, or	trust	ee, l	key e	empl	oyee, or highest compensa	ated	Г		Yes No
employee on line 1a? If "Yes," For any individual listed on lin	complete Sche	dule	J fo	r suc	h ind	dividu	ıal	an and other compensation	from the		3	X
organization and related orgar	nizations greater	than	\$15	50,00	0? I	f "Ye	s," c	complete Schedule J for su	ch			x
individual	1a receive or ac	crue	com	pens	satio	n fror	n ar	ny unrelated organization or	r individual		4	
for services rendered to the o		es,"	com	plete	Sc.	hedu	le J	for such person		<u></u>	5	X
1 Complete this table for your fi	ve highest comp	ensa	ated	inde	pend	lent o	contr	ractors that received more to	than \$100,000 of			
compensation from the organi	zation. Report co (A) I business address	ompe	ensa	tion f	or th	ne ca	lend		in the organization's tax ye (B) ition of services	ar.		(C) mpensation
Name and	business address							Descript	lion of services		Cor	mpensation
2 Total number of independent	contractors (incl	ıdina	. but	not	limit	ad to	ther	se listed above) who		\longrightarrow		
received more than \$100,000								oc noted above) WHO	0			

orm 990 (201)	3) EARTHRIGHTS	INTERNATIONAL,	INC
Part VIII	Statement of Reven	nue	

		Check i	if Schedule () conta	ains a i	response c	or note to any line	in this Part VIII		
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts s	1a	Federated cam	npaigns	1a				Tevendo		012 014
Z an		Membership du	100	1b						
۵۶		Fundraising even	onto	1c						
ifts		Related organiz		1d						
ပြု										
Sir		Government grants (1e						
声	ı	All other contributions and similar amounts r			2	726 205				
ള				1f		726,285				
Contributions, Gifts, Grants and Other Similar Amounts	_	Noncash contributions				10,186	2 726 205			
	h	Total. Add lines	s 1a–1f				2,726,285			
Program Service Revenue	_					Busn. Code				
Seve	2a									
به	b									
S	С									
Se	d									
am	е									
.og	f	All other progra	am service reve	nue						
Ā	g	Total. Add lines	s 2a–2f			u				
	3	Investment inco	ome (including	dividend	ds, intere	est,				
		and other simila	ar amounts)			u	8,667			8,667
	4	Income from in								
	5	Royalties				u				
			(i) Real		(ii) F	Personal				
	6a	Gross rents								
	b	Less: rental exps.								
	С	Rental inc. or (loss)								
	d	Net rental incor	me or (loss)			u				
		Gross amount from	(i) Securities			Other				
		sales of assets other than inventory	**	994						
	h	Less: cost or other	- ,							
		basis & sales exps.	10.	187						
	_	Gain or (loss)		·193						
		Net gain or (loss)		$\overline{}$			-193	-193		
		Gross income from				ú		-173		
ne	oa		iii iuiiuiaisiiig eve	1115						
Ven		(not including \$								
Re		of contributions re								
Other Revenu		See Part IV, line 1		a						
ਰੋ		Less: direct exp		b L						
		Net income or			events .	u				
	9a	Gross income from								
		See Part IV, line 1								
		Less: direct exp								
		Net income or	-	ning acti	ivities	u				
	10a	Gross sales of	•							
		returns and allo		a						
	b	Less: cost of go	oods sold	b∟						
	С	Net income or	(loss) from sale	s of inv	entory	u				
		Misce	ellaneous Revenue			Busn. Code				
	11a	ATTORNEY E	FEES AWARDED)			1,692,619	1,692,619		
	b	REIMBURSEM	ENTS				777	777		
	С	* * * * * * * * * * * * * * * * * * * *								
	d	All other revenu								
	е	Total. Add lines	s 11a–11d			u	1,693,396			
	12	Total revenue.	See instruction	ns	<u></u>	u	4,428,155	1,693,203	0	8,667

Form 990 (2013)

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 (B) Program service (C) Management and (D) Fundraising Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 75,000 75,000 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 41,787 41,787 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 340,896 48,723 263,317 28,856 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 790,952 676,640 28,016 86,296 Pension plan accruals and contributions (include <u>1</u>,375 15,169 11,630 2,164 section 401(k) and 403(b) employer contributions) 96,278 82,585 1,617Other employee benefits 12,076 9 Payroll taxes 66,966 52,712 5,427 8,827 Fees for services (non-employees): 17,927 a Management 17,927 2,178 251 1,927 **b** Legal 39,006 333 38,673 c Accounting Professional fundraising services. See Part IV, line 17 Investment management fees **g** Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) 87,745 79,952 7,431 362 12 Advertising and promotion 451 451 37,710 20,388 15,218 2,104 Office expenses 13 Information technology 45,907 38,436 6,025 1,446 14 Royalties 123,002 102,029 14,639 6,334 16 Occupancy 186,248 18,208 165,384 2,656 Travel 17 Payments of travel or entertainment expenses for any federal, state, or local public officials 9,444 9,094 Conferences, conventions, and meetings 350 19 406 150 256 20 Interest Payments to affiliates 21 11,530 4,824 6,655 Depreciation, depletion, and amortization 51 22 10,261 10,036 225 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 211,061 211,061 TRAINING 51,320 BOARD 51,320 FIELD WORK 50,826 50,826 INTERNS, VOLUNTEERS, FELL 28,429 28,4294,761 e All other expenses 16,864 11,532 571 2,357,363 245,206 1,944,287 167,870 25 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 **u** | if following SOP 98-2 (ASC 958-720) .

Part X Balance Sheet

P	art)	Balance Sheet	-				<u> </u>
		Check if Schedule O contains a response or n	ote to any line ir	this Part X			
					(A)		(B)
					Beginning of year		End of year
	1	Cash—non-interest bearing				1	
	2	Savings and temporary cash investments			3,239,029	2	4,735,494
	3	Pledges and grants receivable, net			730,000	3	1,402,880
	4	Accounts receivable, net			1,045	4	69,062
	5	Loans and other receivables from current and former	er officers, directe	ors,			
		trustees, key employees, and highest compensated	employees.				
		Complete Part II of Schedule L				5	
	6	Loans and other receivables from other disqualified	persons (as defi	ned under section			
		4958(f)(1)), persons described in section 4958(c)(3)	(B), and contribu	iting employers and			
		sponsoring organizations of section 501(c)(9) volunt					
şţ		organizations (see instructions). Complete Part II of				6	
Assets	7	Notes and loans receivable, net				7	
⋖	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			4,934	9	8,857
	10a	Land, buildings, and equipment: cost or		240 001			
		other basis. Complete Part VI of Schedule D	10a	348,991	010 104		040 222
	l .	Less: accumulated depreciation	[10b	99,658	218,194		249,333
	11	Investments—publicly traded securities			97,742		127,152
	12	Investments—other securities. See Part IV, line 11				12	
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets			105 060	14	60 705
	15	Other assets. See Part IV, line 11			105,960	15	69,705
	16	Total assets. Add lines 1 through 15 (must equal lines 1 through 15 must equal lines 1 through 1			4,396,904 24,806		6,662,483 12,594
	17	Accounts payable and accrued expenses			21,000		60,000
	18 19	Grants payable				18 19	00,000
	20	Deferred revenue				20	
	21	Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part	IV of Schodulo I			21	
	22	Loans and other payables to current and former offi		-			
Liabilities		trustees, key employees, highest compensated emp					
ig		disqualified persons. Complete Part II of Schedule L				22	
Ë	23	Secured mortgages and notes payable to unrelated	third parties			23	
	24	Unsecured notes and loans payable to unrelated thi	rd parties			24	
	25	Other liabilities (including federal income tax, payable					
		parties, and other liabilities not included on lines 17-					
		of Schedule D			62,460	25	200,959
	26	Total liabilities. Add lines 17 through 25			87,266	26	273,553
		Organizations that follow SFAS 117 (ASC 958), c	heck here u	X and			
Ses		complete lines 27 through 29, and lines 33 and 3	4.				
Balances	27	Unrestricted net assets			2,624,741	27	3,755,001
	28	Temporarily restricted net assets			1,684,897	28	2,633,929
Fund	29	Permanently restricted net assets				29	
Ē		Organizations that do not follow SFAS 117 (ASC	958), check he	re u 🔲 and 📗			
s or		complete lines 30 through 34.					
Assets	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building, or equip				31	
Net	32	Retained earnings, endowment, accumulated incom			4 200 620	32	6 200 020
	33				4,309,638	33	6,388,930
	34	Total liabilities and net assets/fund balances			4,396,904	34	6,662,483

Form **990** (2013)

Both consolidated and separate basis

Both consolidated and separate basis

If "Yes," check a box below to indicate whether the financial statements for the year were compiled or

If "Yes," check a box below to indicate whether the financial statements for the year were audited on a

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in

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

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 in Schedule O and describe any steps taken to undergo such audits.

reviewed on a separate basis, consolidated basis, or both:

separate basis, consolidated basis, or both:

Consolidated basis

Consolidated basis

the Single Audit Act and OMB Circular A-133?

b Were the organization's financial statements audited by an independent accountant?

Separate basis

X Separate basis

Schedule O.

 2c	х		
 3a		x	
3b			

Form 990 (2013)

2b X

SCHEDULE A

(Form 990 or 990-EZ)

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.

u Attach to Form 990 or Form 990-EZ.

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

u Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection

Employer identification number

04-3265555

			THATTIME	THI DIGINI TOMAD	T11C.				0 1	J20.	3333			
Pa	art I	Reas	on for Public Charity	Status (All organizations	must co	omplete	this pa	art.) Se	e ins	truction	าร.			
Γhe	orga	nization is not	a private foundation becaus	e it is: (For lines 1 through 11,	check only	one box	.)							
1		A church, co	nvention of churches, or ass	sociation of churches described	in sectio i	n 170(b)(1)(A)(i).							
2	П	A school des	scribed in section 170(b)(1)((A)(ii). (Attach Schedule E.)										
3	П		. , , , ,	ce organization described in se	ction 170)(b)(1)(A)(iii).							
4	П	•	·	d in conjunction with a hospital)(1)(A)(iii). Ente	er the h	ospital's	name	<u>.</u>	
•	ш	city, and stat	•	a in conjunction with a neephar	acconsca	000110		·/(·//·//	,	J. 1110 11	oopiiai o	riarri	,	
5				of a college or university owned	or operat	od by a o	ovornm	ontal uni	t doccri	hod in				
J	ш	-		-	or operar	eu by a g	overnine	eniai un	i descii	beu III				
_			(b)(1)(A)(iv). (Complete Part	•			., .							
6	Ш			governmental unit described in s										
7	Ш	•	•	substantial part of its support from	om a gove	ernmental	unit or	from the	genera	al public				
	_	described in	section 170(b)(1)(A)(vi). (C	omplete Part II.)										
8	Ш	A community	trust described in section	170(b)(1)(A)(vi). (Complete Part	t II.)		4							
9	X	An organizati	ion that normally receives: (1	I) more than 33 1/3% of its sup	port from	contributi	ons, me	mbershi	p fees,	and gro	oss			
		receipts from	activities related to its exem	npt functions—subject to certain	exception	ns, and (2) no mo	re than	33 1/3%	6 of its				
		support from	gross investment income ar	nd unrelated business taxable in	ncome (les	ss section	511 tax	k) from I	ousines	ses				
		acquired by t	the organization after June 3	0, 1975. See section 509(a)(2)	. (Comple	te Part III	.)							
10			•	exclusively to test for public safe										
11	П	J	,	exclusively for the benefit of, to	•				out the	2				
•	ш	Ū	•	ted organizations described in s	•						1			
				the type of supporting organizati				, , ,			-			
		— <u>`</u>		c Type III–Function			d	~ ~		on funct	ا برالمحما	intogra	tod	
_		a Type	··	□ ′′	,		· I				ionally i	inegra	ileu	
е	Ш			ganization is not controlled direct						•				
			ŭ	er than one or more publicly sur	оропеа от	ganization	is descr	ibea in :	section	509(a)(1)			
		or section 50	· / /				_							
f				rmination from the IRS that it is	a Type I,	Type II,	or Type	III supp	orting					
		organization,	check this box											Ш
g		Since August	t 17, 2006, has the organiza	tion accepted any gift or contrib	ution from	any of th	ne							
		following pe	rsons?											
		(i) A person	n who directly or indirectly co	ontrols, either alone or together	with perso	ons descr	ibed in (ii) and					Yes	No
		(iii) belov	w, the governing body of the	supported organization?								11g(i)		
		(ii) A family	member of a person describ	ped in (i) above?								11g(ii)		
		(iii) A 35% d	controlled entity of a person of	described in (i) or (ii) above?								11g(iii)		
h		Provide the	following information about t	the supported organization(s).										
(i) Nam	e of supported	(ii) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Did y	ou notify	(vi)	ls the	(vii) A	Amount	of mone	tary
	org	anization		(described on lines 1-9		sted in your		nization in	organizati			supp	ort	
				above or IRC section	governing	document?		of your oort?		zed in the S.?				
				(see instructions))	Yes	No	Yes	No	Yes	No				
A)					1.55				1.00					
~,														
B)														
D)														
C)														
					+									
D)														
					1									
E)														
_														
Γota	I													

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

Schedule A (Form 990 or 990-EZ) 2013

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	ndar year (or fiscal year beginning in) u	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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						
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)						
6	Public support. Subtract line 5 from line 4.						
Sec	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in) ${f u}$	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts 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 assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc.	(see instructions)				12	
13	First five years. If the Form 990 is for the	,		urth or fifth tax ve			
	organization, check this box and stop her	J				() ()	▶□
Sec	tion C. Computation of Public S						
14	Public support percentage for 2013 (line 6			nn (f))		14	%
15	Public support percentage from 2012 Scho		- 11			45	<u>%</u>
16a					33 1/3% or more	· · · · · · · · · · · · · · · · · · ·	,,,
. • •	box and stop here. The organization qual			ation			▶ □
b	33 1/3% support test—2012. If the organ					ore.	······································
-	check this box and stop here. The organi			ad argonization			▶ □
17a	10%-facts-and-circumstances test—20°						······································
	10% or more, and if the organization mee	=					
	Part IV how the organization meets the "f				-		
							▶ □
b	10%-facts-and-circumstances test—20°						
	15 is 10% or more, and if the organization	•					
	Explain in Part IV how the organization m			•	•		
	aupported organization			-		-	▶ □
18	Private foundation. If the organization did		on line 13, 16a, 16				
	inatruotiana						▶ □
	Instructions						<u> </u>

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.)

500	tion A. Public Support	quality under the	e tests listed be	elow, please co	implete Part II.)	
	ndar year (or fiscal year beginning in) u	(=) 2000	(h) 2040	(-) 2044	(4) 2042	(=) 2042	(f) T-+-1
		(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,590,071	2,501,986	2,243,560	1,955,497	2,726,285	11,017,399
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose				5,703	1,693,396	1,699,099
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
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	1,590,071	2,501,986	2,243,560	1,961,200	4,419,681	12,716,498
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
	line 6.)						12,716,498
	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in) u	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6	1,590,071	2,501,986	2,243,560	1,961,200	4,419,681	12,716,498
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	20,761	9,118				29,879
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	207701	3,110				25,015
С	Add lines 10a and 10b	20,761	9,118				29,879
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on		8,600	8,927	3,996	7,667	29,190
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	530,783	27,106				557,889
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	2,141,615	2,546,810	2,252,487	1,965,196	4,427,348	13,333,456
14	First five years. If the Form 990 is for the	organization's first,	second, third, fou	rth, or fifth tax year	r as a section 501	(c)(3)	
	organization, check this box and stop her						<u></u> ▶ ∟
Sec	tion C. Computation of Public Su						
15	Public support percentage for 2013 (line 8	, column (f) divided	by line 13, column	n (f))		15	95.37 %
<u>16</u>	Public support percentage from 2012 Sche					16	94.04%
Sec	tion D. Computation of Investme						
17	Investment income percentage for 2013 (I	ine 10c, column (f) of	divided by line 13,	column (f))		17	%_
18	Investment income percentage from 2012						1%
19a	33 1/3% support tests—2013. If the orga	nization did not ched	ck the box on line	14, and line 15 is a	more than 33 1/3%	6, and line	
b	17 is not more than 33 1/3%, check this be 33 1/3% support tests—2012. If the orga		-				► <u>X</u>
	line 18 is not more than 33 1/3%, check th						▶ □
20	Private foundation. If the organization did		_				▶ □

	(Form 990 or 990-E	Z) 2013 EART :	HRIGHTS	TNTERNAT	LONAL,	INC.	04-326555	5 Page 4
Part IV	Supplementa Part III. line 1	al Information 12. Also comple	. Provide the ete this part for	explanations or anv addition	required by nal informa	/ Part II, line tion. (See ins	I0; Part II, line 17 tructions).	a or 17b; and
PART	III, LINE					(
				· · · · · · · · · · · · · · · · · · ·				
MISCE	LLANEOUS			\$	557	,889		
•								
•								
•								
•								
•								
						.,		
•								
•								

Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule of Contributors

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization u Attach to Form 990, Form 990-EZ, or Form 990-PF.

u Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

Employer identification number

04-3265555

EARTHRIGHTS IN	TERNATIONAL, INC.	04-3265555				
Organization type (check one	s):					
Filers of:	Section:					
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
	overed by the General Rule or a Special Rule . (8), or (10) organization can check boxes for both the General Rule and a Special Rule	. See				
General Rule						
	ng Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in mone contributor. Complete Parts I and II.	ey or				
Special Rules						
under sections 509(a)(the greater of (1) \$5,00	For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 ¹ / ₃ % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
during the year, total of	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
during the year, contril not total to more than year for an exclusively applies to this organization.	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year					
990-EZ, or 990-PF), but it mus	is not covered by the General Rule and/or the Special Rules does not file Schedule B (Fig. 4 answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or	990-EZ or on its				

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization

EARTHRIGHTS INTERNATIONAL, INC.

Employer identification number 04-3265555

Part I	Contributors (see instructions). Use duplicate copies of P	art I if additional space is ne	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 245,341	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b)	(c)	(d)
2	Name, address, and ZIP + 4	Total contributions \$ 80,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ 115,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$ 289,787	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ 60,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$ 750,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

EARTHRIGHTS INTERNATIONAL, INC.

Employer identification number 04-3265555

Part I	Contributors (see instructions). Use duplicate copies of Pa	art I if additional space is ne	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 220,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
8		\$ 75,000	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$ 448,500	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10		\$ 70,000	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

 ${f u}$ Complete if the organization is described below. ${f u}$ Attach to Form 990 or Form 990-EZ.

u See separate instructions.

u Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

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

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

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

Nan	e of organization EARTHRIGHTS INTERNAT	CONAT. TNC		Employer identificati 04-32655!	
Pai	t I-A Complete if the organization is exem		or is a section		
1	Provide a description of the organization's direct and indire	•		or organization	/////
2	Political expenditures			u\$	
3	Volunteer hours				
Pai	t I-B Complete if the organization is exen	npt under section 501(c)(3).		
1	Enter the amount of any excise tax incurred by the organiz	ration under section 4955		u \$	
2	Enter the amount of any excise tax incurred by organization	n 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.				
Pa	t I-C Complete if the organization is exen	npt under section 501(c), except secti	on 501(c)(3).	
1	Enter the amount directly expended by the filing organizati	on for section 527 exempt fund	tion		
	activities			u\$	
2	Enter the amount of the filing organization's funds contribu	J			
	527 exempt function activities			u\$	
3	Total exempt function expenditures. Add lines 1 and 2. Ent		,		
	line 17b			u\$	
4	Did the filing organization file Form 1120-POL for this year				Yes No
5	Enter the names, addresses and employer identification nu	` '	J	· ·	
	organization made payments. For each organization listed,		0 0		
	the amount of political contributions received that were pro-			•	
	as a separate segregated fund or a political action commit	<u> </u>			()
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds. If none, enter -0	promptly and directly
					delivered to a separate
					political organization. If none, enter -0
(1)					·
(')					
(2)					
(-)					
(3)					
` ,					
(4)					
(5)					
(6)					

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

Schedule C (Form 990 or 990-EZ) 2013

Sche	dule C (Form 990 or 990-EZ) 2013 EARTHR	IGHTS INT	ERNATIONAL,	INC.	04-3265555	Page 2
Pa	art II-A Complete if the organiz	ation is exemp	t under section !	501(c)(3) and 1	filed Form 5768 (el	ection under
	section 501(h)).					
A	Check u if the filing organization	n belongs to an	affiliated group (a	and list in Part	IV each affiliated gro	oup member's
	name, address, EIN,	expenses, and	share of excess lo	bbying expend	litures).	
В	Check u if the filing organization	n checked box	A and "limited cor	ntrol" provisions	apply.	
	Limits on Lob	bying Expendi	tures		(a) Filing	(b) Affiliated
	(The term "expenditures" n				organization's totals	group totals
1	a Total lobbying expenditures to influence pu	blic opinion (grass i	roots lobbying)			
ı	Total lobbying expenditures to influence a	egislative body (dire	ect lobbying)			
(Total lobbying expenditures (add lines 1a a					
(d Other exempt purpose expenditures					
(Total exempt purpose expenditures (add lin	1 1 1-1\				
	f Lobbying nontaxable amount. Enter the am					
	columns.					
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxal	ole amount is:			
	Not over \$500,000	20% of the amount on li	ne 1e.			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	ne excess over \$500,000.			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	ne excess over \$1,000,000.			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	e excess over \$1,500,000.			
	Over \$17,000,000	\$1,000,000.				
(g Grassroots nontaxable amount (enter 25%	of line 1f)				
ı	h Subtract line 1g from line 1a. If zero or less					
	i Subtract line 1f from line 1c. If zero or less,	antar O				
	j If there is an amount other than zero on eit					
	reporting section 4911 tax for this year?					Yes No
	(Sama arganizations th	_	ing Period Under S		complete all of the fi	h.ca
	(Some organizations the					ive
	columns b	elow. See the ins	structions for lines	za through zi	on page 4.)	
	Lol	obying Expenditu	ures During 4-Year	Averaging Per	riod	
	Colondar year (or fineal year					
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
	bogining my					
2	a Lobbying nontaxable amount					
I	b Lobbying ceiling amount					
	(150% of line 2a, column(e))					
	Tetal labbida a susa diseas					
	Total lobbying expenditures					
	d Crossvets neutovekla amazint					
	d Grassroots nontaxable amount					
-	e Grassroots ceiling amount					
	(150% of line 2d, column (e))					

Schedule C (Form 990 or 990-EZ) 2013

f Grassroots lobbying expenditures

	•
Page	_'

(election under section 501(h)).	(a	a)	(b	١	
For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed			<u> </u>	-	
description of the lobbying activity.	Yes	No	Amo	unt	
1 During the year, did the filing organization attempt to influence foreign, national, state or local					
legislation, including any attempt to influence public opinion on a legislative matter or					
referendum, through the use of:					
a Volunteers?	X				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X				
c Media advertisements?		Х			
d Mailings to members, legislators, or the public?		Х			
e Publications, or published or broadcast statements?	<u>X</u>			3,	915
f Grants to other organizations for lobbying purposes?		Х			
g Direct contact with legislators, their staffs, government officials, or a legislative body?					962
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х			
i Other activities?					149
j Total. Add lines 1c through 1i				8,	026
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X			
b If "Yes," enter the amount of any tax incurred under section 4912		_			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part III-A Complete if the organization is exempt under section 501(c)(4), section 5	001(C)(5),	or sect	ion		
501(c)(6).				Yes	No
1 Mars substantially all (00% or mars) dues received pendeductible by members?			1	162	NO
1 Were substantially all (90% or more) dues received nondeductible by members?2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?					
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?			2		
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes."	o," OR (b)			3, is	
1 Dues, assessments and similar amounts from members		1			
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of					
political expenses for which the section 527(f) tax was paid).					
a Current year		2a			
b Carryover from last year		2b			
c Total		2c			
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the					
excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying					
and political expenditure next year?		4			
5 Taxable amount of lobbying and political expenditures (see instructions)		5			
Part IV Supplemental Information	Dest II A. Per				
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list);	Paπ II-A, III	ie 2; and			
Part II-B, line 1. Also, complete this part for any additional information.					
SCHEDULE C, PART II-B, LINE 1					
THE ORGANIZATION PARTICIPATED IN LOBBYING ACTIVITIES R	ELATED	TO			
PROPOSED CORPORATE ACCOUNTABILITY LEGISLATION.					
SCHEDULE C, PART IV, ADDITIONAL INFORMATION					

PUBLICATIONS OR PUBLISHED OR BROADCAST STATEMENTS:

Page 4

- 1. THE ORGANIZATION PARTICIPATED IN RESEARCHING, WRITING, NETWORKING WITH PARTNERS REGARDING, AND PUBLISHING THE 2012 CORPORATE ACCOUNTABILITY COALITION CONGRESSIONAL REPORT CARD, WHICH ENDORSES SEVERAL LEGISLATIVE MEASURES ON CORPORATE ACCOUNTABILITY AND CORPORATE POWER. TOTAL EXPENDITURES WERE: \$2760.
- 2. THE ORGANIZATION PARTICIPATED IN WRITING MATERIALS ON PROPOSED CORPORATE ACCOUNTABILITY LEGISLATION FOR THE U.S. CONGRESS. TOTAL EXPENDITURES WERE: \$374.
- 3. THE ORGANIZATION WORKED WITH SEVERAL LAW SCHOOL CLINICS TO WRITE
 MATERIALS PROPOSING CORPORATE ACCONTABILITY LEGISLATION AT THE STATE LEVEL
 IN SEVERAL STATES. TOTAL EXPENDITURES WERE: \$781.

DIRECT CONTACT WITH LEGISLATORS, THEIR STAFFS, GOVERNMENT OFFICIALS OR A LEGISLATIVE BODY:

- 1. THE ORGANIZATION PARTICIPATED IN MEETINGS WITH MEMBERS OF CONGRESS TO DISCUSS PROPOSED CORPORATE ACCOUNTABILITY LEGISLATION. TOTAL EXPENDITURES WERE: \$587.
- 2. THE ORGANIZATION COMMUNICATED WITH MEMBERS OF THE U.S. SENATE JUDICIARY COMMITTEE ABOUT THE CORPORATE ACCOUNTABILITY RECORD OF JUDICIAL NOMINEES.

 TOTAL EXPENDITURES WERE: \$309.
- 3. THE ORGANIZATION COMMUNICATED WITH STATE LEGISLATORS TO ADVANCE

Schedule C (Form 990 or 9	990-EZ) 2013 EARTHRI G	HTS INTERNA	ATTONAL,	INC.	04-326555	5 Page 4
Part IV S	upplemental Information	(continued)				
		, , , , , , , , , , , , , , , , , , , ,				
GODDOD 3 ===	3 000thm3 5		mom		mad terr	566
CORPORATE	ACCOUNTABILITY	PROPOSALS.	TOTAL	EXPENDIT	JRES WERE:	\$66 .
OTHER ACT	rivities:					
THE ORGAN	NIZATION HELD SE	VERAL INTERI	NAL DISC	CUSSIONS Z	AS WELL AS	DISCUSSIONS
WITH EXTE	ERNAL PARTNERS A	BOIT SPECTE	TC CORP	ORATE ACC	OIMTARTI.TT	7 T.ECTST.ATTON
	MALI TAKINDED A	DOOT DIECTE		OIMIL ACC	OOMIADILLI	LEGIDIMITON
		_				
PROPOSALS	. TOTAL EXPEND	ITURES: \$31	49.			
				······		
					_	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

u Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization Employer identification number

E	ARTHRIGHTS INTERNATIONAL, INC.		04-3265555
	rt I Organizations Maintaining Donor Advised Fur Complete if the organization answered "Yes" to F	nds or Other Similar Funds or A	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing that		
•	funds are the organization's property, subject to the organization's excl		Yes No
6	Did the organization inform all grantees, donors, and donor advisors in		
٠	only for charitable purposes and not for the benefit of the donor or donor		
	conferring impermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the organization answered "Yes" to F		
1	Purpose(s) of conservation easements held by the organization (check	all that apply).	
	Preservation of land for public use (e.g., recreation or education)	Preservation of an historically im	portant land area
	Protection of natural habitat	Preservation of a certified historic	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified conse	rvation contribution in the form of a conse	ervation
_	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		
h	Total acreage restricted by conservation easements		
c	Number of conservation easements on a certified historic structure incl	uded in (a)	2c
d			
u	Partials atmosphere Partial in the National Deviation		2d
3	Number of conservation easements modified, transferred, released, ex	tinguished, or terminated by the organiza	
3		inguished, or terminated by the organiza	uon duning the
4	tax year u	located **	
4	Number of states where property subject to conservation easement is		
5	Does the organization have a written policy regarding the periodic mon		☐ Yes ☐ No
	violations, and enforcement of the conservation easements it holds?		·····
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforce	ang conservation easements during the y	real
7	U	concernation accompants during the year	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing of	conservation easements during the year	
_	u\$		
8	Does each conservation easement reported on line 2(d) above satisfy	the requirements of section 170(n)(4)(B)	□ vaa □ Na
_	(i) and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation easements	•	·
	balance sheet, and include, if applicable, the text of the footnote to the	organization's financial statements that of	describes the
Do	organization's accounting for conservation easements. rt III Organizations Maintaining Collections of Art,	Historical Transumas or Other	Similar Assats
Га	Complete if the organization answered "Yes" to F		Sillillai Assets.
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), n	ot 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 furth	erance of
	public service, provide, in Part XIII, the text of the footnote to its finance	ial statements that describes these items.	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to	report in its revenue statement and bala	ance sheet
	works of art, historical treasures, or other similar assets held for public		
	public service, provide the following amounts relating to these items:	•	
	(i) Revenues included in Form 990, Part VIII, line 1		u \$
	(ii) Assets included in Form 990, Part X		u \$
2	If the organization received or held works of art, historical treasures, or	other similar assets for financial gain, pro	ovide the
_	following amounts required to be reported under SFAS 116 (ASC 958)		- · · · - · ·
а	Revenues included in Form 990, Part VIII, line 1	<u> </u>	u \$
	Assets included in Form 990, Part X		

249,333

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

Schedule D (F	form 990) 2013 EARTHRIGHTS INTER	NATIONAL,	INC.	04-3265555	Page 3
Part VII	Investments—Other Securities.	-			
	Complete if the organization answered "Y	es" to Form 990,	Part IV, line	11b. See Form 990, Pa	rt X, line 12.
	(a) Description of security or category	(b) E	Book value	(c) Method of	valuation:
	(including name of security)			Cost or end-of-year	market value
(1) Financial	derivatives				
(2) Closely-he	ld equity interests				
(A)					
(D)					
(E)					
(F)					
(G)					
(H)					
	n (b) must equal Form 990, Part X, col. (B) line 12.) 1				
Part VIII	Investments—Program Related.	4			
i ait viii	Complete if the organization answered "Y	es" to Form 990	Part IV line	11c See Form 990 Pa	urt X line 13
	(a) Description of investment		Book value	(c) Method of	
	(a) Description of investment	(6)	SOOK Value	Cost or end-of-year	
(4)				Soci di dila di yea	- Thailet Value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	n (b) must equal Form 990, Part X, col. (B) line 13.)	1			
Part IX	Other Assets.		5		
	Complete if the organization answered "Y		Part IV, line	11d. See Form 990, Pa	
	(a) Descri	ription			(b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column	n (b) must equal Form 990, Part X, col. (B) line 15.)			u	
Part X	Other Liabilities.				
	Complete if the organization answered "Y	es" to Form 990,	Part IV, line	11e or 11f. See Form 9	90, Part X,
	line 25.				
1.	(a) Description of liability	(b) E	Book value		
(1) Federal	income taxes				
(2) ACCRU	ED PAYROLL		100,959		
(3) PLAIN			100,000		
(4)					
(5)					
(6)					
(7)					
(8)					
(9)	(h) must equal Form 990 Part Y col (R) line 25)	,	200.959		

^{2.} Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2013 EARTHRIGHTS INTERNATIONAL, INC.

Page 4

Schedule D (Fo	orm 990) 2013]	EARTHRIGHTS	INTERNATIONAL,	INC.	04-3265555	Page 5
Part XIII	Supplementa	I Information (cor	INTERNATIONAL, ntinued)			

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Statement of Activities Outside the United States

u Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. u Attach to Form 990. u See separate instructions.

u Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Employer identification number

Open to Public Inspection

EARTHRIGHTS INTERNATIONAL, INC. 04-3265555

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on

		Fo	rm 99	0, Par	t IV, line	14b) .						
1	For							to substantia	te the amount of its gi	rants and other	er		
	assi	stance, th	he grai	ntees' e	eligibility fo	r the	e grants or assista	nce, and the	selection criteria used	to award the			
	gran	its or ass	sistanc	e?									X Yes No
2	For	arantma	akore	Describ					monitoring the use of		other		
_		_			ited States		e organization's pr	ocedures for i	nonitoring the use of	its grants and	ouiei		
3	Activ	ities per	Regio	n. (The	following	Part	I, line 3 table can	be duplicated	d if additional space is	needed.)			
	(a) R	egion		(b) Num offices i regio	in the	,	(c) Number of employees, agents, and independent contractors in region	region fundraising ir grant	ities conducted in (by type) (e.g., , program services, vvestments, s to recipients d in the region)	a pr describ	tivity listed rogram se be specific ice(s) in r	rvice, type of	(f) Total expenditures for and investments in region
E	AST	ASIA	AND	THE	PACIF	IC			, , , , , , , , , , , , , , , , , , , ,				
(1)					1		14	PROGRAM	SERVICES, GR	SCHOOLS	AND	TRAINING	566,666
	AST	ASIA	AND	THE	PACIF	IC							
(2)					1		12	PROGRAM	SERVICES	LEGAL			170,982
	AST	ASIA	AND	THE	PACIF	IC							
(3)					1		2	PROGRAM	SERVICES	CAMPAIGN	NS		104,055
	TUC	I AMEI	RICA										
(4)					1		3	PROGRAM	SERVICES	LEGAL			180,122
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(10)													
(11)													
(12)													
(13)													
(13)													
(14)													
(15)													
(16)													
			1										
(17)													
	Sub-to	tal			4		31						1,021,825
		n continuation	on										
s	heets to	Part I				L							
	otals												
		a and 3b)		4		31						1,021,825

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 Part III can be duplicated if additional space is needed. (e) Manner of (f) Amount of (h) Method of valuation (a) Type of grant or assistance (b) Region (c) Number of (d) Amount of non-cash (g) Description (book, FMV, recipients cash grant disbursement assistance of non-cash assistance appraisal, other) EAST ASIA AND THE PACIFIC 12 41,787 (1) EARTHRIGHTS SCHOOL SMALL CASH DISBURSEME FMV (2) (8) (10) (11) (12) (13) _(14) (15)

(16)

(17)

(18)

Pa	rt 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)	s 🗓 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)	s 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)	s 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, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	s 🗓 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)	s 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)	s 🗓 No

Schedule F (Form 990) 2013

Part V Supplemental Information

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).

PART I, LINE 2 - PROCEDURES FOR MONI	TORING TH	E USE OF GRANT F	UNDS	
ORGANIZATION REQUIRES WRITTEN GRANT PROPOSAL, REVIEWS PROPOSAL THEN				
MONITORS VIA PERIODIC REPORTING THE	USE OF TH	E GRANT MONEY TO	ACCOMPLISH	
THE PROPOSAL'S STATED PURPOSE(S).				
PART I, LINE 3 - ACTIVITIES PER REGI	ON			
REGION	EXP	ENDITURES INVEST	TMENTS	
EAST ASIA AND THE PACIFIC	\$	566,666 \$	0	
EAST ASIA AND THE PACIFIC	\$	170,982 \$	0	
EAST ASIA AND THE PACIFIC	\$	104,055 \$	0	
SOUTH AMERICA	\$	180,122 \$	0	

Department of the Treasury

Internal Revenue Service

Name of the organization

SCHEDULE I (Form 990)

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

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

u Attach to Form 990.

u Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

EARTHRIGHTS INTERN	ATIONAL,	INC.				0	<u>4-3265555</u>	
Part I General Information on Grants and	d Assistance							
 Does the organization maintain records to substantiate the selection criteria used to award the grants or assista Describe in Part IV the organization's procedures for mo 	nce?						X Yes	☐ No
Part II Grants and Other Assistance to Go Part IV, line 21, for any recipient that	overnments ar	nd Organ	izations in the U				vered "Yes" to For	m 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose o or assistar	· ·
(1) THE TIDES FOUNDATION PO BOX 29198							ICAR ACTIVIT	'IES
SAN FRANCISCO CA 94129	94-3213100	501C3	75,000		FMV			
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
 Enter total number of section 501(c)(3) and government Enter total number of other organizations listed in the lin 	- 4 4-6-1-		1 table					

04_	22	65	5	55	
U -1 -	2	o o	Э.	ככ	

Part III Grants and Other Assistance t			plete if the organization	on answered "Yes" to Form	990, Part IV, line 22.
Part III can be duplicated if additi (a) Type of grant or assistance	onal space is needed. (b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(f) Description of non-cash assistance
(a) Type of grafficor assistance	recipients	cash grant	non-cash assistance	FMV, appraisal, other)	(i) Description of non-cash assistance
1					
2					
_					
3					
4					
_					
5					
6					
7					
Part IV Supplemental Information. Pro	vide the information re	equired in Part I, line	2, Part III, column (b), and any other additional	information.
PART I, LINE 2 - PROCEDURES	5 FOR MONITOR	ING THE USE O	OF GRANT FUND	S	
THESE FUNDS WERE TRANSFERRE	ED TO THE TIDE	ES FOUNDATION	SO THAT THE	Y COULD	
ASSUME THE FISCAL SPONSORSE	IIP OF ICAR.	THE FOUNDATI	ON WILL DISB	URSE THESE	
FUNDS AS NEEDED FOR THE ACT	TIVITIES OF IC	CAR. WRITTEN	REQUESTS AR	E REQUIRED.	

SCHEDULE O (Form 990 or 990-EZ) Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047 **2013**

ZUIJ

Department of the Treasury Internal Revenue Service u Attach to Form 990 or 990-EZ.
u Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Employer identification number Name of the organization **EARTHRIGHTS** INTERNATIONAL, INC. 04-3265555 FORM 990 - ADDITIONAL INFORMATION THE ORGANIZATION CHANGED ITS REPORTING YEAR TO A CALENDAR YEAR DURING 2013 THE 990 BEING FILED REPORTS ON 11 MONTHS OF OPERATIONS DUE TO THE CHANGE. FORM 990, PART III - ADDITIONAL INFORMATION CASE SUMMARIES: OCCIDENTAL PETROLEUM (OXY) CASE IN 2013 THE PARTIES CONFIRMED A MUTUAL SETTLEMENT OF THE CLAIMS IN LITIGATION. UNDER THE SETTLEMENT, THE TERMS OF WHICH ARE CONFIDENTIAL. OXY WILL PROVIDE ASSISTANCE FOR COMMUNITY DEVELOPMENT PROGRAMS FOR THE BENEFIT OF THE ACHUAR COMMUNITIES. SCHEDULE OF COURT-APPROVED ATTORNEYS' FEES AND COSTS \$1,792,619 OCCIDENTAL PETROLEUM ERI'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 INCLUDING CIVIL, POLITICAL AND ENVIRONMENTAL RIGHTS. SAHU V. UNION CARBIDE (COUNSEL FOR NAMED INDIAN PLAINTIFFS AND

A PUTATIVE CLASS WHO SUFFERED PERSONAL INJURIES DUE TO MASSIVE

ENVIRONMENTAL DEGRADATION AT A PESTICIDE FACILITY IN BHOPAL, INDIA)

Name of the organization	Employer identification number
EARTHRIGHTS INTERNATIONAL, INC.	04-3265555
SAHU V. UNION CARBIDE (COUNSEL FOR INDIAN PLAINTIFFS WHO) SUFFERED
PROPERTY DAMAGE FROM MASSIVE ENVIRONMENTAL DEGRADATION A	T A
PESTICIDE FACILITY IN BHOPAL, INDIA)	
PESTICIDE FACILITI IN BROPAL, INDIA)	
DOE V. CHIQUITA (COUNSEL FOR COLOMBIAN PLAINTIFFS	
CHALLENGING BANANA COMPANYS COMPLICITY IN	
PARAMILITARY KILLINGS OF PLAINTIFFS' DECEDENTS)	
CARIJANO V. OCCIDENTAL PETROLEUM CORP., (COUNSEL FOR PER	RUVIAN
INDIGENOUS PLAINTIFFS CHALLENGING OIL COMPANY'S MASSIVE	
ENVIRONMENTAL DEGRADATION OF THEIR LANDS)	
ENVIRONMENTAL DEGRAPATION OF THEIR HANDS)	
AMERICAN PETROLEUM INSTITUTE V. UNITED STATES SECURITIES	AND
EXCHANGE COMMISSION, (COUNSEL FOR NGO INTERVENOR IN INDU	JSTRY
GROUP'S CHALLENGE TO RULES IMPLEMENTING SECTION 1504 OF	THE
DODD_EDANE WALL CURET DEFORM ACTS DECLIDEMENT THAT OLD	
DODD-FRANK WALL STREET REFORM ACTS REQUIREMENT THAT OIL,	
GAS, AND MINING COMPANIES DISCLOSE THEIR PAYMENTS TO	
FOREIGN GOVERNMENTS FOR ALL EXTRACTIVE PROJECTS).	
CHEVRON CORP. V. DONZIGER (COUNSEL FOR NGO AND NUMEROUS	
INDIVIDUALS MOVING TO QUASH THIRD-PARTY DEPOSITION AND I	
SUBPOENAS THAT WOULD INTRUDE INTO THE FIRST AMENDMENT	
RIGHTS TO CAMPAIGN AND ASSOCIATE).	
TN DE WEMGAGUADINI (GOINGEL EOD NIGEDIAN VILLAGEDG GEEVIN	
IN RE METSAGHARUN (COUNSEL FOR NIGERIAN VILLAGERS SEEKIN	IG
DOCUMENTS FROM CHEVRON CORPORATION UNDER 28 U.S.C. 1782	

IN SUPPORT OF THEIR LAWSUIT IN NIGERIA AGAINST CHEVRON'S NIGERIA SUBSIDIARY REGARDING THE HARM CAUSED BY GAS FLARING) CAMPOS-ALVAREZ V. NEWMONT MINING CORP. (COUNSEL FOR PERUVIAN SHOT WHILE PROTESTING ENVIRONMENTALLY DESTRUCTIVE PROPOSED MINE SEEKING DOCUMENTS FROM NEWMONT UNDER 28 U.S.C. 1782 IN SUPPORT OF CRIMINAL AND CIVIL ACTIONS IN PERU AGAINST THOSE RESPONSIBLE FOR THE SHOOTING) IN RE APPLICATION OF LOSERIAN MINIS (COUNSEL FOR TANZANIAN VILLAGERS SEEKING DOCUMENTS AND TESTIMONY FROM U.SBASED SAFARI OPERATOR UNDER 28 U.S.C. 1782 IN SUPPORT OF THEIR LAWSUIT IN TANZANIA ALLEGING LAND-GRABBING AND VIOLENCE) FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT EARTHRIGHTS USES THE POWER OF LAW AND THE POWER OF PEOPLE IN DEFE HUMAN RIGHTS AND THE ENVIRONMENT FORM 990, PART V, LINE 4B - FINANCIAL ACCOUNTS IN FOREIGN COUNTRI THAILAND, PERU FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFICE KATHERINE REDFORD KA HSAW WA	n number	Employer identification number	ame of the organization
SUBSIDIARY REGARDING THE HARM CAUSED BY GAS FLARING) CAMPOS-ALVAREZ V. NEWMONT MINING CORP. (COUNSEL FOR PERUVIAN SHOT WHILE PROTESTING ENVIRONMENTALLY DESTRUCTIVE PROPOSED MINE SEEKING DOCUMENTS FROM NEWMONT UNDER 28 U.S.C. 1782 IN SUPPORT OF CRIMINAL AND CIVIL ACTIONS IN PERU AGAINST THOSE RESPONSIBLE FOR THE SHOOTING) IN RE APPLICATION OF LOSERIAN MINIS (COUNSEL FOR TANZANIAN VILLAGERS SEEKING DOCUMENTS AND TESTIMONY FROM U.SBASED SAFARI OPERATOR UNDER 28 U.S.C. 1782 IN SUPPORT OF THEIR LAWSUIT IN TANZANIA ALLEGING LAND-GRABBING AND VIOLENCE) FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT EARTHRIGHTS USES THE POWER OF LAW AND THE POWER OF PEOPLE IN DEFE HUMAN RIGHTS AND THE ENVIRONMENT FORM 990, PART V, LINE 4B - FINANCIAL ACCOUNTS IN FOREIGN COUNTRI THAILAND, PERU FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFICE KATHERINE REDFORD KA HSAW WA US OFF. DIR. EXEC. DIR.	55	04-3265555	EARTHRIGHTS INTER
CAMPOS-ALVAREZ V. NEWMONT MINING CORP. (COUNSEL FOR PERUVIAN SHOT WHILE PROTESTING ENVIRONMENTALLY DESTRUCTIVE PROPOSED MINE SEEKING DOCUMENTS FROM NEWMONT UNDER 28 U.S.C. 1782 IN SUPPORT OF CRIMINAL AND CIVIL ACTIONS IN PERU AGAINST THOSE RESPONSIBLE FOR THE SHOOTING) IN RE APPLICATION OF LOSERIAN MINIS (COUNSEL FOR TANZANIAN VILLAGERS SEEKING DOCUMENTS AND TESTIMONY FROM U.SBASED SAFARI OPERATOR UNDER 28 U.S.C. 1782 IN SUPPORT OF THEIR LAWSUIT IN TANZANIA ALLEGING LAND-GRABBING AND VIOLENCE) FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT EARTHRIGHTS USES THE POWER OF LAW AND THE POWER OF PEOPLE IN DEFE HUMAN RIGHTS AND THE ENVIRONMENT FORM 990, PART V, LINE 4B - FINANCIAL ACCOUNTS IN FOREIGN COUNTRI THAILAND, PERU FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFICE KATHERINE REDFORD KA HSAW WA US OFF. DIR. EXEC. DIR.		N'S NIGERIA	IN SUPPORT OF THEIR LAWSUIT
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IN RE APPLICATION OF LOSERIAN MINIS (COUNSEL FOR TANZANIAN VILLAGERS SEEKING DOCUMENTS AND TESTIMONY FROM U.SBASED SAFARI OPERATOR UNDER 28 U.S.C. 1782 IN SUPPORT OF THEIR LAWSUIT IN TANZANIA ALLEGING LAND-GRABBING AND VIOLENCE) FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT EARTHRIGHTS USES THE POWER OF LAW AND THE POWER OF PEOPLE IN DEFE HUMAN RIGHTS AND THE ENVIRONMENT FORM 990, PART V, LINE 4B - FINANCIAL ACCOUNTS IN FOREIGN COUNTRI THAILAND, PERU FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFICE KATHERINE REDFORD KA HSAW WA US OFF. DIR. EXEC. DIR.			SEEKNG DOCUMENTS FROM NEWMON
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VILLAGERS SEEKING DOCUMENTS AND TESTIMONY FROM U.SBASED SAFARI OPERATOR UNDER 28 U.S.C. 1782 IN SUPPORT OF THEIR LAWSUIT IN TANZANIA ALLEGING LAND-GRABBING AND VIOLENCE) FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT EARTHRIGHTS USES THE POWER OF LAW AND THE POWER OF PEOPLE IN DEFE HUMAN RIGHTS AND THE ENVIRONMENT FORM 990, PART V, LINE 4B - FINANCIAL ACCOUNTS IN FOREIGN COUNTRI THAILAND, PERU FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFICE KATHERINE REDFORD KA HSAW WA US OFF. DIR. EXEC. DIR.			RESPONSIBLE FOR THE SHOOTING
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FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT EARTHRIGHTS USES THE POWER OF LAW AND THE POWER OF PEOPLE IN DEFE HUMAN RIGHTS AND THE ENVIRONMENT FORM 990, PART V, LINE 4B - FINANCIAL ACCOUNTS IN FOREIGN COUNTRI THAILAND, PERU FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFIC KATHERINE REDFORD KA HSAW WA US OFF. DIR. EXEC. DIR.		EIR	SAFARI OPERATOR UNDER 28 U.S
EARTHRIGHTS USES THE POWER OF LAW AND THE POWER OF PEOPLE IN DEFE HUMAN RIGHTS AND THE ENVIRONMENT FORM 990, PART V, LINE 4B - FINANCIAL ACCOUNTS IN FOREIGN COUNTRI THAILAND, PERU FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFIC KATHERINE REDFORD KA HSAW WA US OFF. DIR. EXEC. DIR.		CE)	LAWSUIT IN TANZANIA ALLEGING
EARTHRIGHTS USES THE POWER OF LAW AND THE POWER OF PEOPLE IN DEFE HUMAN RIGHTS AND THE ENVIRONMENT FORM 990, PART V, LINE 4B - FINANCIAL ACCOUNTS IN FOREIGN COUNTRI THAILAND, PERU FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFIC KATHERINE REDFORD KA HSAW WA US OFF. DIR. EXEC. DIR.			
HUMAN RIGHTS AND THE ENVIRONMENT FORM 990, PART V, LINE 4B - FINANCIAL ACCOUNTS IN FOREIGN COUNTRI THAILAND, PERU FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFIC KATHERINE REDFORD KA HSAW WA US OFF. DIR. EXEC. DIR.		T	FORM 990, PART III, LINE 4D
FORM 990, PART V, LINE 4B - FINANCIAL ACCOUNTS IN FOREIGN COUNTRI THAILAND, PERU FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFIC KATHERINE REDFORD KA HSAW WA US OFF. DIR. EXEC. DIR.	INSE OF	OPLE IN DEFENSE (EARTHRIGHTS USES THE POWER O
THAILAND, PERU FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFIC KATHERINE REDFORD KA HSAW WA US OFF. DIR. EXEC. DIR.			HUMAN RIGHTS AND THE ENVIRON
THAILAND, PERU FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFIC KATHERINE REDFORD KA HSAW WA US OFF. DIR. EXEC. DIR.			
FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFIC KATHERINE REDFORD KA HSAW WA US OFF. DIR. EXEC. DIR.	ES	EIGN COUNTRIES	FORM 990, PART V, LINE 4B -
FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFIC KATHERINE REDFORD KA HSAW WA US OFF. DIR. EXEC. DIR.			
KATHERINE REDFORD KA HSAW WA US OFF. DIR. EXEC. DIR.			
KATHERINE REDFORD KA HSAW WA US OFF. DIR. EXEC. DIR.	CERS	AMONG OFFICERS	FORM 990, PART VI, LINE 2 -
US OFF. DIR. EXEC. DIR.			KATHERINE REDFORD
			.

Employer identification number Name of the organization EARTHRIGHTS INTERNATIONAL, INC. 04-3265555

A DRAFT OF THE 990 IS REVIEWED BY THE CFO, MANAGING DIRECTOR AND TREASURER. ONCE THE DRAFT IS REVIEWED AND APPROVED, A COPY OF THE 990 IS SENT VIA EMAIL (IN A PDF FILE FORMAT) TO THE GOVERNING BOARD PRIOR TO ITS 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. 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, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL COMPENSATION IS ANALYZED AND REVIEWED EACH YEAR. SALARIES ARE COMMENSURATE WTIH OTHER ORGANIZATIONS OF COMPARABLE SIZE. THE BOARD REVIEWS AND APPROVES A BUDGET EACH YEAR WHICH INCLUDES COMPENSATION DATA FOR ALL EARTHRIGHTS EMPLOYEESS BROKEN DOWN BY JOB TITLE AND FUNCTION.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS SEE COMPENSATION POLICY REVIEW PROCEDURE IN PREVIOUS QUESTION.

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 THESE DOCUMENTS IS ALSO ON FILE WITH THE COMMONWEALTH OF MASSACHUSETTS.

11/13/2014 1:27 PM

EART5555 EARTHRIGHTS INTERNATIONAL, INC.
04-3265555 Federal Statements

04-3265555

FYE: 12/31/2013

KATHARINE J. REDFORD

Org retirement or deferred

Description	<u></u>	Amount
SIMPLE HEALTH (NET)	\$	2,227 9,170
TOTAL	\$	11,397



11/13/2014 1:27 PM

EART5555 EARTHRIGHTS INTERNATIONAL, INC.
04-3265555 Federal Statements

04-3265555

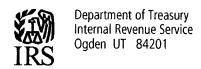
FYE: 12/31/2013

MARIE SOVEROSKI

Org retirement or deferred

Description	 Amount		
SIMPLE HEALTH	\$ 1,877 5,597		
TOTAL	\$ 7,474		





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EARTHRIGHTS INTERNATIONAL INC % LEVY AND ASSOCIATES PC 10400 EATON PL STE 100 FAIRFAX VA 22030-2225

Notice	CP211A
Tax period	January 31, 2014
Notice date	June 16, 2014
Employer ID number	04-3265555
To contact us	Phone 1-877-829-5500
	FAX 801-620-5670

Page 1 of 1



077690

Important information about your January 31, 2014 Form 990

We approved your Form 8868, Application for Extension of Time To File an Exempt Organization Return

We approved the Form 8868 for your January 31, 2014 Form 990. Your new due date is September 15, 2014.

What you need to do

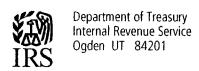
File your January 31, 2014 Form 990 by September 15, 2014. We encourage you to use electronic filing—the fastest and easiest way to file.

Visit www.irs.gov/charities to learn about approved e-File providers, what types of returns can be filed electronically, and whether you are required to file electronically.

Additional information

- Visit www.irs.gov/cp211a.
- For tax forms, instructions, and publications, visit www.irs.gov or call 1-800-TAX-FORM (1-800-829-3676).
- Keep this notice for your records.

If you need assistance, please don't hesitate to contact us.



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EARTHRIGHTS INTERNATIONAL INC % LEVY AND ASSOCIATES PC 10400 EATON PL STE 100 FAIRFAX VA 22030-2225

Notice	CP211A
Tax period	January 31, 2014
Notice date	September 22, 2014
Employer ID number	04-3265555
To contact us	Phone 1-877-829-5500
	FAX 801-620-5555

Page 1 of 1



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Important information about your January 31, 2014 Form 990

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