# \*\* PUBLIC DISCLOSURE COPY \*\* Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

X Amended return SEATTLE, WA 98115  Application F Name and address of principal officer: JOHNNY MADRID  H(a) Is this a group return for subordinates?	296 3,306,768 Yes X No ? Yes No Gee instructions
Name change Change Initial return       Doing business as       91-1592071         Initial return terminated return/ terminated return       6310 NE 74TH STREET       Room/suite 201E       € Telephone number (206) 322-9         City or town, state or province, country, and ZIP or foreign postal code return       SEATTLE, WA 98115       G Gross receipts \$         Manual control in the province of th	Yes X No Yes No Yes No
Change   Doing business as   91-1392071	Yes X No Yes No Yes No
Room/suite   E Telephone number	Yes X No Yes No Yes No
return/ termin- ated  City or town, state or province, country, and ZIP or foreign postal code  X Amended return  SEATTLE, WA 98115  F Name and address of principal officer: JOHNNY MADRID  (2007) 322 3  (2007) 32	Yes X No Yes No Yes No
Anended SEATTLE, WA 98115  Application  F Name and address of principal officer: JOHNNY MADRID  City or town, state or province, country, and ZIP or foreign postal code  Gross receipts \$  H(a) Is this a group return for subordinates?	Yes X No Yes No No See instructions
Application F Name and address of principal officer: JOHNNY MADRID for subordinates?	Yes No
Finame and address of principal officer: OCHNN1 MADKID for subordinates?	Yes No
pending CANCE A C A DOLLE	See instructions
SAME AS C ABOVE H(b) Are all subordinates included?	
I Tax-exempt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or 527 If "No," attach a list. S	nber
J Website: WWW.EARTHCORPS.ORG H(c) Group exemption num	
K Form of organization: X Corporation Trust Association Other L Year of formation: 1993 M State  Part I Summary	e of legal domicile: WA
1 Briefly describe the organization's mission or most significant activities: EARTHCORPS DEVELOPS LEADS STRENGTHEN COMMUNITY AND RESTORE THE HEALTH OF OUR ENVIRONMEN	
SIRENGIAEN COMMONITI AND RESTORE THE REALITH OF OUR ENVIRONMEN	11 •
2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.  3 Number of voting members of the governing body (Part VI, line 1a)	22
3 Number of voting members of the governing body (Part VI, line 1a) 4 Number of independent voting members of the governing body (Part VI, line 1b) 4	22
y 5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 5	81
STRENGTHEN COMMUNITY AND RESTORE THE HEALTH OF OUR ENVIRONMEN  Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.  Number of voting members of the governing body (Part VI, line 1a)  Number of independent voting members of the governing body (Part VI, line 1b)  Total number of individuals employed in calendar year 2022 (Part V, line 2a)  Total number of volunteers (estimate if necessary)  Ta Total unrelated business revenue from Part VIII, column (C), line 12  Total number of volunteers (estimate if necessary)  Ta Total unrelated business revenue from Part VIII, column (C), line 12	407
7 a Total unrelated business revenue from Part VIII, column (C), line 12	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	0.
	Current Year
8 Contributions and grants (Part VIII, line 1h) 3,321,277.	2,977,478.
9 Program service revenue (Part VIII, line 2g) 183,126.	81,994.
9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 30, 293.	16,539.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) -13,022.	63,705.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 3,521,674.	3,139,716.
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
14 Benefits paid to or for members (Part IX, column (A), line 4)	0.
φ 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 2,449,407.	2,839,361.
16 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)  16a Professional fundraising fees (Part IX, column (A), line 11e)  b Total fundraising expenses (Part IX, column (D), line 25)  17. Other expenses (Part IX, column (A), lines 11a, 11d, 11f, 24e)  75.9 678	23,863.
b Total fundraising expenses (Part IX, column (D), line 25)	
17 Other expenses if art ix, column (x), lines i ra-i ra, i i i-24e)	1,008,086.
	3,871,310.
19 Revenue less expenses. Subtract line 18 from line 12 266, 218.	-731,594.
Beginning of Current Year  20 Total assets (Part X, line 16)  3,549,376.  21 Total liabilities (Part X, line 26)  22 Net assets or fund balances. Subtract line 21 from line 20  23,577,260.	End of Year
20 Total assets (Part X, line 16) 3,549,376.	4,181,075.
21 Total liabilities (Part X, line 26) 972,116.	2,405,213.
Part II Signature Block	1,775,862.
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowlettle personal and expenses the perjury of property (other than efficies) is based on all information of which property has any knowledge.	leage and belief, it is
true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.	
Sign Signature of officer Date	
Sign Signature of officer  Here JOHNNY MADRID, FINANCE AND ADMIN DIRECTOR	
Type or print name and title	
Print/Type preparer's name Preparer's signature Date Check	PTIN
1 Time Type property of hemo	00147726
	2011386
Use Only Firm's address 200 1ST AVE W, SUITE 200	
SEATTLE, WA 98119 Phone no. 206-6	28-8990
	X Yes No

Form	990 (2022) EARTHCORPS	91-1592071	Page 2
	rt III Statement of Program Service Accomplishments		9-
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:  EARTHCORPS DEVELOPS LEADERS TO STRENGTHEN COMMUNITY AND		
	HEALTH OF OUR ENVIRONMENT.		
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?  If "Yes," describe these new services on Schedule O.	X Y6	esNo
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Y	s X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	• •	
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$3, 160, 815including grants of \$) (Reverse		,078.
	ENVIRONMENTAL RESTORATION: THE ORGANIZATION WORKS ALONGS VOLUNTEERS TO SUPPORT THE PUGET SOUND ECOSYSTEM'S HEALTH		RPS
	INVASIVE SPECIES REMOVAL AND RESTORATION OF NATURAL HABI		
4b	(Code:) (Expenses \$	enue \$	92.
	COMMUNITY PARTNERSHIPS: THE ORGANIZATION WORKS ALONGSIDE		
	PARTNERS TO EXPAND ACCESS TO GREEN SPACES WHILE PROVIDING	NG PATHWAYS	FOR
	YOUTH INTERESTED IN GREEN CAREERS.		
_	(Code: ) (Expenses \$ 11,326 • including grants of \$ ) (Reve	. 10	924
4c	(Code:) (Expenses \$		<u>,824.</u>
	MITIGATE THE IMPACTS OF CLIMATE CHANGE BY CENTERING ON T		
	CREATE AND MAINTAIN RESILIENT ECOSYSTEMS IN OUR COMMUNIC		
	COLLABORATIONS AND FIELD PROJECTS.	•	
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue \$	)	
4-	Total program conject expenses 3, 172, 621.	,	

# Form 990 (2022) EARTHCORPS Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		37	
	If "Yes," complete Schedule A	1	X	_
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_		,,
	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	_		3,7
_	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	_		, v
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			x
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		x
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			X
_	Schedule D, Part III	8		_
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?		v	
40	If "Yes," complete Schedule D, Part IV	9	Х	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments		х	
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		Х	
	Part VI	11a	Λ	
D	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	446		X
_	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 of its total	11c		X
ч	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 reported in	110		
u		11d	х	
_	Part X, line 16? If "Yes," complete Schedule D, Part IX  Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116		
•	the organization's separate of 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			
124	Schedule D, Parts XI and XII	12a	х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
~	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
-	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		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	Х	L
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х

Form 990 (2022) EARTHCORPS
Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			,,
	Schedule K. If "No," go to line 25a	24a		X
	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	04.		
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
<b>2</b> 5a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	25a		x
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
		25b		x
26	Schedule L, Part I  Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	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," complete			.,
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			X
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	34		x
35.2	Part V, line 1  Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			<u></u>
-	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 related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	X	
Pai	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	4	v	
	(gambling) winnings to prize winners?	1c	X	

**EARTHCORPS** 91-1592071 Page 5 Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Х 2h X Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O 3b At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? Х 6a If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 7 Organizations that may receive deductible contributions under section 170(c). Х Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a X If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7с 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? 7e 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? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 9 Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? 9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 11a 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? 12a **b** If "Yes," enter the amount of tax-exempt interest received or accrued during the year ...... 12b 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. 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 c Enter the amount of reserves on hand Х Did the organization receive any payments for indoor tanning services during the tax year? 14a If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation on Schedule O 14b Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or 15 excess parachute payment(s) during the year? X 15

16

17

X

If "Yes," see the instructions and file Form 4720, Schedule N.

If "Yes," complete Form 4720, Schedule O.

If "Yes," complete Form 6069.

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

that would result in the imposition of an excise tax under section 4951, 4952 or 4953?

Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities

EARTHCORPS 91-1592071 Page 6 Form 990 (2022) Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 22 **1a** Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 22 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision Х of officers, directors, trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 6 Х 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? Х 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? 10a 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? Х 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 on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a 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? Х 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? 14 Х 14 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? Х The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization Х 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure WA List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Upon request X Own website X Another's website \_\_\_ Other *(explain on Schedule O)* Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial

statements available to the public during the tax year.

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

JOHNNY MADRID - (206) 322-9296

6310 NE 74TH STREET, 201E, SEATTLE, WA 98115

Form 990 (2022) EARTHCORPS 91-1592071 Page 7

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

Week	(A)  Name and title	(B) Average hours per	(do	(C Posi	C) ition	l than o	one	(D)  Reportable compensation	(E)  Reportable compensation	(F) Estimated amount of
EXECUTIVE DIRECTOR		week (list any hours for related organizations below line)						from the organization (W-2/1099-MISC/	from related organizations (W-2/1099-MISC/	compensation
TANIA ELAHEE		40.00						140.000		•
RESIDENT				X				140,000.	0.	0.
(3) SHANNON TYSLAND		4.00								
VICE PRESIDENT			X	Х				0.	0.	0.
(4) Jasmine Williams	, , , , , , , , , , , , , , , , , , , ,	4.00							•	•
SECRETARY		4 00	X	X				0.	0.	0.
S		4.00		7.7					0	0
TREASURER		4 00	X	X				0.	0.	0.
Color		4.00	37	37					0	0
DIRECTOR		4 00	Λ	Λ				0.	0.	0.
The transmal simpson	, , ,	4.00	v						0	0.
DIRECTOR		4 00	Λ					0.	0.	<u> </u>
(8) QUENA BATRES	, , ,	4.00	v					_	0	0.
DIRECTOR   X		4 00	Λ					0.	0.	0.
O	· · · •	7.00	v					l 0	0	0.
DIRECTOR		4.00	21					•	<b></b>	
O		4.00	x					0.	0.	0.
DIRECTOR   X		4.00						•		
DIRECTOR			х					0.	0.	0.
DIRECTOR		4.00								
DIRECTOR	DIRECTOR		х					0.	0.	0.
Column	(12) DARRYL AOKI	4.00								
DIRECTOR   X	DIRECTOR		Х					0.	0.	0.
Color	(13) ANTHONY JONES	4.00								
DIRECTOR   X   0. 0. (0. (15) WALTER EUYANG   4.00	DIRECTOR		Х					0.	0.	0.
(15) WALTER EUYANG       4.00         DIRECTOR       X         (16) SARAH GUSTAFSON       4.00         DIRECTOR       X         (17) AMANDA TAPLETT JOHNSON       4.00	(14) JOHANNA COOLBAUGH	4.00								
DIRECTOR   X   0. 0. ((16) SARAH GUSTAFSON   4.00   X   0. 0. ((17) AMANDA TAPLETT JOHNSON   4.00   (17) AMANDA TAPLETT	DIRECTOR		Х					0.	0.	0.
(16) SARAH GUSTAFSON       4.00         DIRECTOR       X         (17) AMANDA TAPLETT JOHNSON       4.00	(15) WALTER EUYANG	4.00								
DIRECTOR X 0. 0. (17) AMANDA TAPLETT JOHNSON 4.00	DIRECTOR		Х					0.	0.	0.
(17) AMANDA TAPLETT JOHNSON 4.00	(16) SARAH GUSTAFSON	4.00								
	DIRECTOR		Х					0.	0.	0.
DIRECTOR     X         0.   0.	(17) AMANDA TAPLETT JOHNSON	4.00								
	DIRECTOR		Х					0.	0.	990 (2022)

(A) Name and title	Average hours per week  Average hours per week  Position (do not check more than one box, unless person is both an officer and a director/trustee)  Reporta compensa							(D) Reportable compensation from	(E)  Reportable compensation from related	- 1	am	(F) timate nount other	-
	(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MIS 1099-NEC)	(W-2/1099-MISC/ 1099-NEC)		from the organization and related organizations	
(18) MIKE O'BRIEN	4.00	3,7						0		_			^
DIRECTOR		X						0.		0.			0.
								140.000					
1b Subtotal c Total from continuation sheets to Part VI								140,000.		0.			0.
d Total (add lines 1b and 1c)								140,000.		0.			0.
2 Total number of individuals (including but n compensation from the organization	ot limited to th	limited to those listed above) who received more than \$100,000 of reportable											1
Compensation from the organization												Yes	No
3 Did the organization list any <b>former</b> officer,													х
line 1a? If "Yes," complete Schedule J for so 4 For any individual listed on line 1a, is the su											3		
and related organizations greater than \$150	0,000? If "Yes,	" co	mple	ete S	Sche	edule	J f	or such individual			4		Х
5 Did any person listed on line 1a receive or a											5		Х
rendered to the organization?  f "Yes." com	ipiete Scriedule	<del>2</del> J 10	or su	ICH J	oers	On							
1 Complete this table for your five highest conthe organization. Report compensation for	•	-							•	ensat	ion fro	m	
(A)		zai e	iluli	ig w	IUI	JI VVI		(B)			(0		
Name and business	address	NC	ONE	3				Description of s	services	С	omper	nsatio	n
2 Total number of independent contractors (in \$100,000 of compensation from the organization)	•	ot lin	nited	d to	thos (	_	ted	above) who received m	ore than			990 <i>(</i> /	2000;

91-1592071

Form 990 (2022) EARTHCO
Part VIII Statement of Revenue

		Check if Schedule O contains a response	or note to any lin	e in this Part VIII			
				(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
					Turiction revenue	business revenue	sections 512 - 514
ņς	1 a	Federated campaigns 1a					
ant	b						
ဗ် ဗို		Fundraising events 1c	107,305.				
ffs,		Related organizations 1d	107/3031				
ية إق			809,250.				
Sir		• • •	,000,200.				
utio	т	All other contributions, gifts, grants, and	060 023				
έş			10,219.				
Contributions, Gifts, Grants and Other Similar Amounts	9			2 077 470			
0 g	n	Total. Add lines 1a-1f		2,977,478.			
			Business Code	01 004	01 004		
Se	2 a	SERVICE REVENUE	900099	81,994.	81,994.		
e <u>S</u>	b						
Score	С						_
ran Sev	d						
Program Service Revenue	е						
<u> </u>	f	All other program service revenue					
	g	Total. Add lines 2a-2f		81,994.			
	3	Investment income (including dividends, inter-	est, and				
		other similar amounts)		17,063.			17,063.
	4	Income from investment of tax-exempt bond p	oroceeds				
	5	Royalties					
		(i) Real	(ii) Personal				
	6 a	Gross rents 6a					
	b	Less: rental expenses 6b					
	С	Rental income or (loss) 6c					
	d	Net rental income or (loss)					
		Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a 102,626.					
	b	Less: cost or other basis					
<u>o</u>	-	and sales expenses 7ь 103,150.					
Revenue	c	Gain or (loss) $7c -524$ .					
ě		Net gain or (loss)		-524.			-524.
౼		Gross income from fundraising events (not		<b>4</b>			
Other	υu	including \$ 107,305 of					
٠		contributions reported on line 1c). See					
		Part IV, line 18	22,205.				
	h						
		Net income or (loss) from fundraising events	, 00,002.	-41,697.			-41,697.
		Gross income from gaming activities. See		41,007.			±±,00/1
	o d		.1				
		Part IV, line 19 Less: direct expenses  9a					
			0				
		Net income or (loss) from gaming activities					
	ти а	Gross sales of inventory, less returns	_[				
	_	and allowances 10					
		Less: cost of goods sold 10	0				
-+	С	Net income or (loss) from sales of inventory	Duelin C /				
2		DECONOTI TAMEON DECORDED	Business Code	0E 4C2			0F 4C2
eor Te		RECONCILIATION DISCREP	900099	95,463.			95,463.
Miscellaneous Revenue	b		900099	9,939.			9,939.
3eV	С						
Βis		All other revenue		105 400			
$\Box$		Total. Add lines 11a-11d		105,402.	01 004	_	00 044
	12	Total revenue. See instructions		3,139,716.	81,994.	0.	80,244.

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
expenses (**D**)
Fundraising (C) Management and general expenses (A) Total expenses Do not include amounts reported on lines 6b. expenses 7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 ....... Benefits paid to or for members ..... Compensation of current officers, directors, 140,000. 133,334. 4,219. 2,447. trustees, and key employees ..... 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 2,243,560. 2,136,737. 67,613. 39,210. 7 Pension plan accruals and contributions (include 21,600. 7,815. 13,307. 478. section 401(k) and 403(b) employer contributions) 150,158. 4,924. 258,008. 102,926. Other employee benefits 9 176,193. 167,675. 5,309. 3,209. 10 Payroll taxes 11 Fees for services (nonemployees): 134,202. 65,505. 68,697. Management 3,315. $3,\overline{315}$ Legal 99,079. 99,079. Accounting Lobbying 23,863. 23,863. Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 20,192. 2,625. 17,567. column (A), amount, list line 11g expenses on Sch O.) 3,100. 14,180. 132. 10,948. Advertising and promotion 12 46,825. 11,710. 34,589. 526. 13 Office expenses 31,950. 31,950. 14 Information technology Royalties 15 128,778. 46,286. 78,748. 3,744. 16 Occupancy 9,017. 6,033. 2,855. 129. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials Conferences, conventions, and meetings 19 8,757. 8,757. 20 Payments to affiliates 21 <u>20,373.</u> 62,513. 40,475. 1,665. Depreciation, depletion, and amortization 22 32,586. 29,704. 2,882. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 347,346. 340,343. 6,828. 175. CORPS PROGRAMS 45,915. 1,190. 69,346. 22,241. All other expenses 3,871,310. 3,172,621. 606,181. 92,508. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

Check here

if following SOP 98-2 (ASC 958-720)

91-1592071 Page **11** 

<u>rar</u>	t X	Balance Sneet					
		Check if Schedule O contains a response or no	te to any	/ line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			579,714.	1	1,173,766
	2	Savings and temporary cash investments			1,185,735.	2	336,956
	3	Pledges and grants receivable, net			10,675.	3	0
	4	Accounts receivable, net			451,448.	4	630,781
	5	Loans and other receivables from any current of					
		trustee, key employee, creator or founder, subs	stantial c	ontributor, or 35%			
		controlled entity or family member of any of the	ese perso	ons		5	
	6	Loans and other receivables from other disqua	lified per	sons (as defined			
		under section 4958(f)(1)), and persons describe		6			
ပ္	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
₹	9	Prepaid expenses and deferred charges			478,612.	9	346,940
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D		948,136.			
	b	Less: accumulated depreciation		754,910.	133,849.	10c	193,226
	11	Investments - publicly traded securities			709,343.	11	880,850
	12	Investments - other securities. See Part IV, line		12			
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets			14	640 556	
	15	Other assets. See Part IV, line 11			0.	15	618,556
4	16	Total assets. Add lines 1 through 15 (must eq	3,549,376.	16	4,181,075		
	17	Accounts payable and accrued expenses			158,880.	17	190,167
	18	Grants payable	FFC F00	18	1 420 200		
	19	Deferred revenue			556,590.	19	1,439,328
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
es	22	Loans and other payables to any current or for					
		trustee, key employee, creator or founder, subs					
Liabilities		controlled entity or family member of any of the			185,695.	22	116 125
- ∣	23	Secured mortgages and notes payable to unre			103,093.	23	116,135
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, p	-				
		parties, and other liabilities not included on line of Schedule D	S 17-24)	. Complete Part X	70,951.	25	659,583
	26				972,116.	26	2,405,213
	20	Organizations that follow FASB ASC 958, ch	ock bor		J 1 Z , I I U •	20	2,403,213
န္မ		and complete lines 27, 28, 32, and 33.	eck liel				
ğ	27				2,123,314.	27	1 315 419
33	28	Net assets with donor restrictions	453,946.	28	1,315,419 460,443		
9	20	Organizations that do not follow FASB ASC			200,3201	20	100,110
ᆵ		and complete lines 29 through 33.					
5	29	Capital stock or trust principal, or current funds			29		
ets	30	Paid-in or capital surplus, or land, building, or e			30		
Ass	31	Retained earnings, endowment, accumulated i				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			2,577,260.	32	1,775,862
Z	33				3,549,376.	33	4,181,075

Form 990 (2022) EARTHCORPS 91-1592071 Page 12

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1				<u> 16.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	3	,87	1,3	10.
3	Revenue less expenses. Subtract line 2 from line 1	3	-	<u>-73</u>	1,5	94.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2	, 57'	7,2	60.
5	Net unrealized gains (losses) on investments	5		-6	9,8	04.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				0.
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	1	,77	5,8	62.
Pa	rt XII Financial Statements and Reporting			-	-	
	Check if Schedule O contains a response or note to any line in this Part XII					X
	•				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		ſ			
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		[	2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed					
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		[	2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate					
	consolidated basis, or both:	,				
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit.	- 1			
_	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the		·			
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			За		x
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required		Г			
~	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3h		

Form **990** (2022)

#### **SCHEDULE A**

(Form 990)

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

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

2022

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number 91-1592071

			HCORPS						1-1592071			
Pa	rt I	Reason for Public (	Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instructions	3.				
The	organ	ization is not a private found	ation because it is: (F	For lines 1 through 12, cl	heck only	one box.)						
1		A church, convention of ch	churches, or association of churches described in section 170(b)(1)(A)(i).									
2		A school described in sect	ion 170(b)(1)(A)(ii). (	Attach Schedule E (Form	า 990).)							
3		A hospital or a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(ii	i).					
4		A medical research organiz	ation operated in cor	njunction with a hospital	described	in <b>sectio</b>	n 170(b)(1)(A)	(iii). Enter	the hospital's name,			
		city, and state:										
5		An organization operated for	or the benefit of a col	llege or university owned	or operate	ed by a go	vernmental ur	nit describe	ed in			
		section 170(b)(1)(A)(iv). (C	Complete Part II.)									
6		A federal, state, or local government	-									
7	X	An organization that norma		ntial part of its support fr	rom a gove	ernmental	unit or from th	e general <sub>l</sub>	public described in			
		section 170(b)(1)(A)(vi). (C	•									
8	$\vdash$	A community trust describe			•							
9		An agricultural research org				-		-	•			
		or university or a non-land-g	grant college of agrici	ulture (see instructions).	Enter the i	name, city	, and state of	ne college	e or			
10		university:An organization that norma	Illy receives (1) more:	than 22 1/20/ of its supp	ort from o	ontribution	no momborobi	n food on	d aroos rossints from			
10		activities related to its exen										
		income and unrelated busin	· ·	•					-			
		See section 509(a)(2). (Con		(1000 000tion on heavy ind	m baomoc	occ doqui	iod by the org	arnzation c				
11		An organization organized a		ively to test for public sat	fetv. See	section 50	)9(a)(4).					
12		An organization organized a						ry out the	purposes of one or			
		more publicly supported or	ganizations describe	d in <b>section 509(a)(1)</b> o	r section :	509(a)(2).	See section 5	09(a)(3). (	Check the box on			
		lines 12a through 12d that	describes the type of	f supporting organizatior	n and com	plete lines	12e, 12f, and	12g.				
а		Type I. A supporting orga	anization operated, s	upervised, or controlled	by its supp	orted org	anization(s), ty	pically by	giving			
		the supported organization	on(s) the power to req	gularly appoint or elect a	majority o	of the direc	tors or trustee	s of the su	upporting			
		organization. You must o	complete Part IV, Se	ections A and B.								
b	) <u> </u>		anization supervised	or controlled in connect	tion with its	s supporte	d organization	n(s), by hav	/ing			
		control or management o	of the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manag	e the sup	ported			
		organization(s). You mus										
C	;		-					y integrate	ed with,			
_	. —	its supported organization		•	•	-	-					
C								-				
		that is not functionally int requirement (see instructi	-		•		-	an allenin	veriess			
е		Check this box if the orga	•	•	•			I Type III				
·	, F	functionally integrated, or					Type I, Type I	i, Type iii				
f	Ente	er the number of supported of		,								
g	Pro	vide the following information	about the supporte	d organization(s).								
	(	(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your governi	nization listed ng document?	(v) Amount of	•	(vi) Amount of other			
		organization		above (see instructions))	Yes	No	support (see in	structions)	support (see instructions)			
Tota	al											

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	Section A. Public Support											
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total					
1	Gifts, grants, contributions, and											
	membership fees received. (Do not											
	include any "unusual grants.")	1497433.	3343070.	3399031.	3321277.	2977478.	14538289.					
2	Tax revenues levied for the organ-											
	ization's benefit and either paid to											
	or expended on its behalf											
3	The value of services or facilities											
	furnished by a governmental unit to											
	the organization without charge											
4	Total. Add lines 1 through 3	1497433.	3343070.	3399031.	3321277.	2977478.	14538289.					
	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)						161,456.					
6	Public support. Subtract line 5 from line 4.						14376833.					
Sec	ction B. Total Support											
	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total					
	Amounts from line 4	1497433.	3343070.	3399031.	3321277.		14538289.					
	Gross income from interest,	22372331	33133707	333331	3322277	23772700						
Ü	dividends, payments received on											
	securities loans, rents, royalties,											
	and income from similar sources	6,845.	18,312.	13,405.	30,293.	17,063.	85,918.					
9	Net income from unrelated business	0,043.	10,312.	13,403.	30,233.	17,003.	03,310.					
9												
	activities, whether or not the											
10	business is regularly carried on  Other income. Do not include gain											
10	· ·											
	or loss from the sale of capital	242.	16,957.	30.	8,885.	105 402	131,516.					
	assets (Explain in Part VI.)	242.	10,557.	50.	0,003.		14755723.					
	<b>Total support.</b> Add lines 7 through 10						,857,851 <b>.</b>					
	Gross receipts from related activities, First 5 years. If the Form 990 is for the	•	,				,031,031.					
13		•		•								
Sec	organization, check this box and stop ction C. Computation of Publi			• • • • • • • • • • • • • • • • • • • •			·····					
	Public support percentage for 2022 (li			volumn (f))		14	97.43 %					
	Public support percentage from 2021					15	98.28 %					
	<b>33 1/3% support test - 2022.</b> If the c					-						
100	stop here. The organization qualifies				14 13 00 17070 01 111		37					
h	33 1/3% support test - 2021. If the o		•									
D	and <b>stop here.</b> The organization qual											
170												
ı/a	10% -facts-and-circumstances test											
	and if the organization meets the facts			=	•	_						
L	meets the facts-and-circumstances te	~		*	•	7a, and line 15 is						
O	10% -facts-and-circumstances test						1070 UI					
	more, and if the organization meets the				-							
40	organization meets the facts-and-circu		-									
18	Private foundation. If the organizatio	<u>n dia not check a l</u>	oox on line 13, 16a	a, 160, 17a, or 17b	, cneck this box ar	<u>1a see instructions</u>	<u> </u>					

## Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
(	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support	г	_		T	T	
	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
"	Net income from unrelated business activities not included on line 10b,						
	whether or not the business is						
10	regularly carried on Other income. Do not include gain						
12	or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)					01( )(0) : ::	
14	First 5 years. If the Form 990 is for the	-		•			
Se	check this box and stop herection C. Computation of Publi	c Support Per					
	Public support percentage for 2022 (I			oolumn (f)\		15	%
	Public support percentage from 2021					16	<del>/</del> 6
	ction D. Computation of Inves					10	70
	Investment income percentage for 20			ne 13 column (fl)		17	%
	Investment income percentage from 2			10, 00141111 (1))		18	%
	a 33 1/3% support tests - 2022. If the						
.00	more than 33 1/3%, check this box ar						
ŀ	33 1/3% support tests - 2021. If the						ınd
•	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						

## Part IV | Supporting Organizations

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

#### Section A. All Supporting Organizations

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

	Yes	No
1		
2		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5с		
6		
7		
8		
9a		
9b		
9с		
10a		
10b		

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

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	ng Organi	izations	J
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	ng trust on N	Nov. 20, 1970 ( <i>explain in</i> <b>I</b>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must		•	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
_	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	lly integrate	d Type III supporting orga	nization (see
	instructions).	-		

Schedule A (Form 990) 2022

Par	t V Type III Non-Functionally Integrated 509(	(a)(3) Supporting Orga	nizations (continue	ed)	
	on D - Distributions	. , , , , , , , , , , , , , , , , , , ,	(00		Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	S	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount	1		10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	;	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
а	From 2017				
b	From 2018				
С	From 2019				
d	From 2020				
е	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years			_	
h	Applied to 2022 distributable amount				
<u>i</u>	Carryover from 2017 not applied (see instructions)				
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years			_	
	Applied to 2022 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.			_	
5	Remaining underdistributions for years prior to 2022, if			- 1	
	any. Subtract lines 3g and 4a from line 2. For result greater			- 1	
	than zero, explain in Part VI. See instructions.			_	
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				
d	Excess from 2021				

Schedule A (Form 990) 2022

e Excess from 2022

# Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

# **Schedule of Contributors**

Attach to Form 990 or Form 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Name of the organization Employer identification number 91-1592071

Organiz	ation type (check or	ne):
Filers of	:	Section:
Form 99	0 or 990-EZ	$\overline{\mathbf{X}}$ 501(c)( $3$ ) (enter number) organization
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
		527 political organization
Form 99	0-PF	501(c)(3) exempt private foundation
		4947(a)(1) nonexempt charitable trust treated as a private foundation
		501(c)(3) taxable private foundation
Note: Or	nly a section 501(c)(	covered by the <b>General Rule</b> or a <b>Special Rule</b> .  7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
General	Rule	
	-	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special	Rules	
X	sections 509(a)(1) a contributor, during	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; line 1. Complete Parts I and II.
	contributor, during literary, or education	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, anal purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering instead of the contributor name and address), II, and III.
	year, contributions is checked, enter he purpose. Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., explete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively explored, etc., contributions totaling \$5,000 or more during the year
answer "	'No" on Part IV, line	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it <b>must</b> 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify requirements of Schedule B (Form 990).

 $\ \ \, \text{LHA} \ \ \, \text{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$ 

Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022) Name of organization Employer identification number

Name of organization	Employer identification number
EARTHCORPS	91-1592071

Part I	Contributors (see instructions). Use duplicate copies of Part I if ad	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$100,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$\$	Person X Payroll
(a)	(b)	(c)	(d)
No. 4	Name, address, and ZIP + 4	* \$ 136,907.	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		\$\$\$	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		\$\$\$	Person X Payroll

EARTHCORPS 91-1592071

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional additional contributors.	tional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$\$	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
8_		\$361,729.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$59,729	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions  \$	Person Payroll 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.)

Name of organization Employer identification number

# EARTHCORPS

91-1592071

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if	additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		- - - - \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		- - - - \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		- - - - - \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		- - - - - \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		- - - - - \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		- - - - \$	

Name of organization **Employer identification number** 91-1592071 **EARTHCORPS** Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4

## SCHEDULE C

(Form 990)

# **Political Campaign and Lobbying Activities**

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

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

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

OMB No. 1545-0047

2022

Open to Public

Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

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

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

_ • 0	ection 50 f(c)(4), (5), or (6) organization	lions. Complete Part III.					
Name	e of organization			Em	ployer iden		
	EARTHCO					L5920	71
Par	t I-A Complete if the org	janization is exempt und	ler section 501(c) o	or is a section 527 o	rganizati	on.	
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures			\$		
Par	t I-B   Complete if the org	janization is exempt und	ler section 501(c)(3	3).			
1	Enter the amount of any excise tax	incurred by the organization un	der section 4955	•	\$		
	Enter the amount of any excise tax						
	If the organization incurred a sectio					Yes	☐ No
4a \	Was a correction made?					Yes	☐ No
b l	If "Yes," describe in Part IV.						
Par	t I-C Complete if the org	anization is exempt und	ler section 501(c),	except section 501	(c)(3).		
1	Enter the amount directly expended	d by the filing organization for se	ection 527 exempt functi	ion activities	\$		
	Enter the amount of the filing organ		•				
	exempt function activities				\$		
	Total exempt function expenditures		•				
	line 17b				\$	1	
	Did the filing organization file Form					Yes	No
	Enter the names, addresses and en made payments. For each organiza contributions received that were pr	tion listed, enter the amount pa	id from the filing organiz	ation's funds. Also enter t	he amount	of politica	I
	political action committee (PAC). If			· ·	3 3		
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	contribut prompodeliver politic	nount of p tions rece ptly and o red to a se cal organione, ente	eived and lirectly eparate zation.

Schedule C (Form 990) 2022	EARTHCORPS			91-	1592071 Page <b>2</b>
Part II-A Complete if the org section 501(h)).	janization is exen	npt under sectior	501(c)(3) and file	d Form 5768 (el	ection under
	ation belongs to an affil	iated group (and list in	Part IV each affiliated	group member's nar	ne, address, EIN,
expenses, and sha	re of excess lobbying e	expenditures).			
B Check if the filing organization	ation checked box A ar	nd "limited control" pro	visions apply.		
	its on Lobbying Exper ditures" means amou			(a) Filing organization's totals	<b>(b)</b> Affiliated group totals
1a Total lobbying expenditures to infl	uence public opinion (g	grassroots lobbying)			
<b>b</b> Total lobbying expenditures to infl	uence a legislative bod	y (direct lobbying)			
c Total lobbying expenditures (add I	ines 1a and 1b)				
d Other exempt purpose expenditur	es				
e Total exempt purpose expenditure	es (add lines 1c and 1d)	)			
f Lobbying nontaxable amount. Ent	er the amount from the	following table in both	n columns.		
If the amount on line 1e, column (a) o	or (b) is: The lob	bying nontaxable am	ount is:		
Not over \$500,000	20% of t	the amount on line 1e.			
Over \$500,000 but not over \$1,00	0,000 \$100,00	00 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5	500,000 \$175,00	00 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17	,000,000 \$225,00	00 plus 5% of the exces	ss over \$1,500,000.		
Over \$17,000,000	\$1,000,0	000.			
g Grassroots nontaxable amount (er	nter 25% of line 1f)				
h Subtract line 1g from line 1a. If zer	o or less, enter -0-				
i Subtract line 1f from line 1c. If zero	o or less, enter -0				
j If there is an amount other than ze	ero on either line 1h or l	ine 1i, did the organiza	ation file Form 4720		
reporting section 4911 tax for this	year?				Yes No
(Some organizations t	hat made a section 50 See the separa	ate instructions for lir	nave to complete all ones 2a through 2f.)	of the five columns b	pelow.
	Lobbying Exper	nditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2019	<b>(b)</b> 2020	<b>(c)</b> 2021	(d) 2022	(e) Total
2a Lobbying nontaxable amount	326,009.	312,145.			638,154.
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					957,231.
c Total lobbying expenditures	500.	500.			1,000.
<b>d</b> Grassroots nontaxable amount	81,502.	78,036.			159,538.

500.

Schedule C (Form 990) 2022

239,307.

500.

e Grassroots ceiling amount

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

f Grassroots lobbying expenditures

# Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a	)	(b	)
lobbying activity.	Yes	No	Amo	
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:				
Volunteers?				
Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
Media advertisements?				
Mailings to members, legislators, or the public?				
Publications, or published or broadcast statements?				
Grants to other organizations for lobbying purposes?				
Direct contact with legislators, their staffs, government officials, or a legislative body?				
Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
Other activities?				
Total. Add lines 1c through 1i				
Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
If "Yes," enter the amount of any tax incurred under section 4912				
If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
III-A Complete if the organization is exempt under section 501(c)(4), section	501(c)(5	), or sec	ction	
501(c)(6).				
			Yes	N
Were substantially all (90% or more) dues received nondeductible by members?		1		
Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I		i), or sec (b) Part		3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."	No" OR (	b) Part		3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."  Dues, assessments and similar amounts from members	No" OR (	b) Part		3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	No" OR (	b) Part		3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	No" OR (	b) Part		3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year	No" OR (	b) Part		3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year	No" OR (	b) Part		3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total	No" OR (	2a 2b 2c		3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	No" OR (	2a 2b 2c		3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	No" OR (	2a 2b 2c		3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pol	No" OR (	2a 2b 2c 3		3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pol expenditures next year?	No" OR (	2a 2b 2c 3		3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expensions.	No" OR (	2a 2b 2c 3		3, i
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polexpenditures next year?  Taxable amount of lobbying and political expenditures. See instructions  IV Supplemental Information	No" OR (	2a 2b 2c 3 4 5	III-A, line	3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pol expenditures next year?  Taxable amount of lobbying and political expenditures. See instructions	No" OR (	2a 2b 2c 3 4 5	III-A, line	3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polexpenditures next year?  Taxable amount of lobbying and political expenditures. See instructions  IV Supplemental Information	No" OR (	2a 2b 2c 3 4 5	III-A, line	3, i:
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polexpenditures next year?  Taxable amount of lobbying and political expenditures. See instructions  EIV Supplemental Information  de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group line)	No" OR (	2a 2b 2c 3 4 5	III-A, line	3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polexpenditures next year?  Taxable amount of lobbying and political expenditures. See instructions  EIV Supplemental Information  de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group line)	No" OR (	2a 2b 2c 3 4 5	III-A, line	3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polexpenditures next year?  Taxable amount of lobbying and political expenditures. See instructions  EIV Supplemental Information  de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group line)	No" OR (	2a 2b 2c 3 4 5	III-A, line	3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polexpenditures next year?  Taxable amount of lobbying and political expenditures. See instructions  EIV Supplemental Information  de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group line)	No" OR (	2a 2b 2c 3 4 5	III-A, line	3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polexpenditures next year?  Taxable amount of lobbying and political expenditures. See instructions  EIV Supplemental Information  de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group line)	No" OR (	2a 2b 2c 3 4 5	III-A, line	3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polexpenditures next year?  Taxable amount of lobbying and political expenditures. See instructions  EIV Supplemental Information  de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group line)	No" OR (	2a 2b 2c 3 4 5	III-A, line	3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polexpenditures next year?  Taxable amount of lobbying and political expenditures. See instructions  EIV Supplemental Information  de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group line)	No" OR (	2a 2b 2c 3 4 5	III-A, line	3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polexpenditures next year?  Taxable amount of lobbying and political expenditures. See instructions  EIV Supplemental Information  de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group line)	No" OR (	2a 2b 2c 3 4 5	III-A, line	3, is

## **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

**EARTHCORPS** 

**Employer identification number** 91-1592071

Pa	organizations waintaining bonor Advised organization answered "Yes" on Form 990, Part IV, line		iiiiiai i uiius	Complete if the
		(a) Donor advise	d funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in v	writing that the assets he	d in donor advise	ed funds
	are the organization's property, subject to the organization's e	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ad	dvisors in writing that gra	nt funds can be ι	used only
	for charitable purposes and not for the benefit of the donor or	r donor advisor, or for any	y other purpose o	conferring
	impermissible private benefit?			
Pa	rt II Conservation Easements. Complete if the org	ganization answered "Yes	" on Form 990, F	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).		
	Preservation of land for public use (for example, recreat	tion or education)	Preservation of	a historically important land area
	Protection of natural habitat		Preservation of	a certified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribu	ition in the form o	of a conservation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements			2b
С	Number of conservation easements on a certified historic stru	ucture included in (a)		2c
d	Number of conservation easements included in (c) acquired a	after July 25,2006, and no	ot on a	
	historic structure listed in the National Register			2d
3	Number of conservation easements modified, transferred, rele			
	year			
4	Number of states where property subject to conservation eas	ement is located		
5	Does the organization have a written policy regarding the peri	iodic monitoring, inspect	on, handling of	
	violations, and enforcement of the conservation easements it	holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, I	handling of violations, an	d enforcing cons	ervation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enf	orcing conservat	ion easements during the year
8	Does each conservation easement reported on line 2(d) above	, ,	`	
	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservation	on easements in its reven	ue and expense	statement and
	balance sheet, and include, if applicable, the text of the footn	ote to the organization's	financial stateme	ents that describes the
Da	organization's accounting for conservation easements.	Aut Historical Tues		and Oineilan Annata
Pa	rt III Organizations Maintaining Collections of Complete if the organization answered "Yes" on Form	•	asures, or Oti	ner Similar Assets.
				ad balanca abaat wada
та	If the organization elected, as permitted under FASB ASC 958			
	of art, historical treasures, or other similar assets held for pub			•
	service, provide in Part XIII the text of the footnote to its finan			
a	If the organization elected, as permitted under FASB ASC 958	•		
	art, historical treasures, or other similar assets held for public	exhibition, education, or	research in furth	erance of public service,
	provide the following amounts relating to these items:			Φ.
	(i) Revenue included on Form 990, Part VIII, line 1			
_	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of art, historical trea			gain, provide
	the following amounts required to be reported under FASB AS			<b>*</b>
	Revenue included on Form 990, Part VIII, line 1			\$
h	Assats included in Form 990 Part V			u·

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a, See Form 990, Part X, line 10

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
<b>b</b> Buildings				
c Leasehold improvements		78,744.	67,520.	11,224.
<b>d</b> Equipment		869,392.	687,390.	182,002.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equa	193,226.			

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022 EARTHCORPS Part VII Investments - Other Securities.		91	-1592071 Page
Complete if the organization answered "Yes" of	on Form 990. Part IV. line	11b. See Form 990. Part X. line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-of-vear market value
(1) Financial derivatives	(,,	1 '	,
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)  Part IX Other Assets.			
Complete if the organization answered "Yes" of	on Form 990 Part IV line	11d See Form 990 Part X line 15	
	Description	11d. 866 1 6111 666, 1 d.t.A, iii 6 16.	(b) Book value
(1) RIGHT OF USE ASSETS			590,602.
(2) DEPOSITS			27,954.
(3)			2,75510
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15.)		618,556.
Part X Other Liabilities.	•		
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) OPERATING LEASE			659,583.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25.)		659,583.
2 Liability for uncertain tax positions. In Part XIII. provide	the text of the footpote to	the organization's financial statements t	hat reports the

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Par	rt XI Reconciliation of Revenue per Audited Financial Sta	atements With R	evenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, I	line 12a.			
1	Total revenue, gains, and other support per audited financial statements			1	3,133,814.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1			
а			-69,804 <b>.</b>		
b					
С	Recoveries of prior year grants		62.000		
d	,	2d	63,902.		F 000
е				2e	-5,902. 3,139,716.
3	Subtract line <b>2e</b> from line <b>1</b>			3	3,139,716.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1.1			
a		4a			
b				4.	0
_	Add lines 4a and 4b			4c 5	3,139,716.
5 Pai	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I. line 1: rt XII   Reconciliation of Expenses per Audited Financial S	<u>2.)                                    </u>	Expenses per F		3,139,710. 1.
	Complete if the organization answered "Yes" on Form 990, Part IV, I		expended per i	.ota	
1				1	3,935,212.
2	Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:			'	3,333,212.
a	Donated services and use of facilities	2a			
a h	Prior year adjustments				
	Other losses				
4	Other (Describe in Part XIII.)		63,902.		
e			-	2e	63.902.
3	Subtract line 2e from line 1			3	63,902.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				0,0,2,020
a		4a			
b					
	Add lines <b>4a</b> and <b>4b</b>			4c	0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	3,871,310.
Pai	rt XIII Supplemental Information.				
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	I 4; Part IV, lines 1b ar	nd 2b; Part V, line 4	; Part )	(, line 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a	any additional informa	ation.		
PAF	RT IV, LINE 1B:				
THE	E COMMENCEMENT BAY NATURAL RESOURCES DA	MAGES ASSE	SSMENT (NR	DA)	TRUSTEES
SEI	LECTED EARTHCORPS TO DEVELOP AND OVERSE	EE A 300-YE	AR PLAN FO	R TI	HE
PRO	OTECTION AND STEWARDSHIP OF THE SEVENTE	EEN SITES T	HAT HAVE B	EEN	RESTORED
	WWW 3003				
TN	THE AREA.				
D 3 E	DM 17 T TATE 4				
PAF	RT V, LINE 4:				
miit	E ENDORMENT EINDO ADE INTENDED TO DOM			ΔD D (	TAT
THE	E ENDOWMENT FUNDS ARE INTENDED TO PROVI	DE SUPPORT	TO EARTHC	ORP	5 IN
חשם	DDEMITMY				
PEF	RPETUITY.				
PAF	RT XI, LINE 2D - OTHER ADJUSTMENTS:				
	/ /				
SPE	ECTAL EVENT EXPENSES				63 902.

### SCHEDULE G (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

#### **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Employer identification number

**EARTHCORPS** 91-1592071 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. e X Solicitation of non-government grants X Mail solicitations X Internet and email solicitations f X Solicitation of government grants X Phone solicitations g X Special fundraising events X In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or X Yes key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) WRITE FOR GOOD - 12025 76TH Yes No AVE S, SEATTLE, WA 98178 GRANT WRITER Х 370,872. 394,160 23,288 394,160, 23 288 370,872, Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

91-1592071 Page 2 **EARTHCORPS** Schedule G (Form 990) 2022 Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events NONE (add col. (a) through REVIVE col. (c)) (event type) (event type) (total number) 129,510. 129,510. Gross receipts 107,305. 107,305. 2 Less: Contributions 22,205. 22,205. 3 Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs 8,496. 8,496. 35,647. 35,647. 7 Food and beverages 1,000. 1,000. 8 Entertainment 18,759. 18,759. 9 Other direct expenses 63,902. 10 Direct expense summary. Add lines 4 through 9 in column (d) -41,697. 11 Net income summary. Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (a) Bingo (c) Other gaming Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses % Yes Yes Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) **9** Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? **b** If "No," explain: \_ 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?

**b** If "Yes," explain:

Sch	nedule G (Form 990) 2022 EARTHCORPS 9	1-15	9207	1 Page <b>3</b>
	Does the organization conduct gaming activities with nonmembers?	[	Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed	г	_	
	to administer charitable gaming?	L	Yes	No
	Indicate the percentage of gaming activity conducted in:	.	2-	0/
	a The organization's facility  o An outside facility		3a   3b	<u>%</u>
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	Ц	<u> </u>	/0
•	Name			
	Address			
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	[	Yes	No
	o If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$ by If "Yes," enter name and address of the third party:	nt		
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
а	a Is the organization required under state law to make charitable distributions from the gaming proceeds to	_		
	retain the state gaming license?	L	Yes	No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in t	he		
Pa	organization's own exempt activities during the tax year \$  organization's own exempt activities own exempt	nd Part II	I, lines 9	, 9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			

Schedule G	(Form 990) EAR	HCORPS		91-1592071	Page 4
Part IV	(Form 990) EAR: Supplemental Information	(continued)			

### SCHEDULE J (Form 990)

# **Compensation Information**

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

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

2022

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Attach to Form 990.

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

EARTHCORPS

Employer identification number 91-1592071

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account  Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	Х	
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	Independent compensation consultant  X  Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:	_		37
	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			37
	The organization?	6a		X
b	Any related organization?	6b		Х
_	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			37
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			37
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2022

Schedule J (Form 990) 2022 EARTHCORPS 91-1592071 Page 2

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

	(B) Breakdown of W	I-2 and/or 1099-MISo	C and/or 1099-NEC		(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990	
(	(i)							
(i	ii)							
(	(i)							
(i	ii)							
	(i)							
	ii)							
	(i)							
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	ii)							
	(i)							
(i	ii)							
	(i)							
	ii)							
(	(i)							
	ii)							

Schedule J (Form 990) 2022	EARTHCORPS			91-1592071	Page 3
Part III Supplemental Informa	ion				
Provide the information, explanati	on, or descriptions required for Part I, lines 1a, 1b, 3, 4a	a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and fo	or Part II. Also complete this p	art for any additional information	٦.

### SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

2022 Open to Public Inspection

OMB No. 1545-0047

Name of the organization

EARTHCORPS

Employer identification number 91-1592071

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:

IN 2022, WE LAUNCHED OUR STRATEGIC PLAN, WHICH INVOLVES INVESTING IN

COMMUNITY-LED PARTNERSHIPS THAT ARE BIPOC-LED AND BIPOC MAJORITY AND

INCREASING COMMUNITY-LED PROJECTS AND SERVICES THAT ADVANCE YOUTH

DEVELOPMENT AND ENVIRONMENTAL JUSTICE IN UNDER-RESOURCED COMMUNITIES.

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

THE FINANCE AND AUDIT COMMITTEE WILL REVIEW AND APPROVE THE FORM 990. THE

REST OF THE BOARD WILL RECEIVE A COPY AND BE ENCOURAGED TO REVIEW IT. THE

FINANCE DIRECTOR, EXECUTIVE DIRECTOR, AND OTHER TOP MANAGEMENT TEAM

MEMBERS, AS NECESSARY, REVIEW THE FORM 990 CAREFULLY THROUGHOUT THE ENTIRE

PROCESS.

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

BOARD MEMBERS SIGN THE CONFLICT OF INTEREST POLICY WHEN THEY ARE VOTED ON

TO THE BOARD. THEY THEN REVIEW AND RE-SIGN THE POLICY ON AN ANNUAL BASIS.

DETERMINATIONS OF CONFLICT AND REVIEW OF CONFLICTS ARE HANDLED AT THE BOARD

LEVEL. EARTHCORPS USES THE CONFLICT OF INTEREST POLICY DISTRIBUTED BY THE

IRS. IF THERE IS A CONFLICT, THE INDIVIDUAL SHALL LEAVE THE MEETING DURING

THE DISCUSSION OF, AND THE VOTE ON, THE TRANSACTION OR ARRANGEMENT

INVOLVING THE POSSIBLE CONFLICT OF INTEREST.

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

SALARIES FOR OTHER OFFICERS ARE SET BY THE EXECUTIVE DIRECTOR. THE

EXECUTIVE DIRECTOR CONDUCTS AN ANNUAL PERFORMANCE REVIEW AND CONSULTS WITH

THE UNITED WAY OF KING COUNTY SALARY REPORT IN DETERMINING COMPENSATION.

Schedule O (Form 990) 2022 Page **2** 

Name of the organization  EARTHCORPS	Employer identification number 91-1592071
THE SALARY IS THEN REVIEWED BY THE EXECUTIVE COMMITTEE.	
THE EXECUTIVE COMMITTEE PERFORMS AN ANNUAL PERFORMANCE REV	VIEW AND CONSULTS
WITH THE ARCHBRIGHT NONPROFIT WAGE AND BENEFIT SURVEY IN I	ETERMINING
COMPENSATION. RECORDS ARE RECORDED IN THE PERFORMANCE REV	VIEW AND EXECUTIVE
COMMITTEE MINUTES.	
FORM 990, PART VI, SECTION C, LINE 19:	
GOVERNING DOCUMENTS, POLICIES, AND FINANCIAL STATEMENTS AF	RE AVAILABLE UPON
REQUEST.	
FORM 990, PART XII, LINE 2C:	
THE PROCESS HAS NOT CHANGED.	
FORM 990, PART VII	
BOARD LIST WAS AMENDED.	

FORM 990 PAGE 10 990

Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	MACHINERY & EQUIPMENT														
2	OFFICE EQUIPMENT	VARIOUS	SL	5.00	1	16	13,967.				13,967.	13,967.		0.	13,967.
3	OTHER EQUIPMENT * 990 PAGE 10 TOTAL	VARIOUS	SL	5.00	:	16	855,425.				855,425.	630,242.		43,181.	673,423.
	MACHINERY & EQUIPMENT						869,392.				869,392.	644,209.		43,181.	687,390.
	OTHER														
1	LEASEHOLD IMPROVEMENTS	VARIOUS	SL	15.00	=	16	78,744.				78,744.	62,743.		4,777.	67,520.
	* 990 PAGE 10 TOTAL OTHER						78,744.				78,744.	62,743.		4,777.	67,520.
	* GRAND TOTAL 990 PAGE 10 DEPR						948,136.				948,136.	706,952.		47,958.	754,910.