# IRS e-file Signature Authorization for a Tax Exempt Entity

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			21	200	 ٦.	n di			

OMB No. 1545-0047

Departmen	nt of the Treasury			Do not send to the IRS. Keep for your records.		
	venue Service		Go	to www.irs.gov/Form8879TE for the latest information.		
Name of	filer				EIN or SSN	
	EARTH	SANGHA			54-18	368546
Name an	d title of officer or pe	erson subject to	tax C	HRISTOPHER BRIGHT		
	•		F	RESIDENT		
Part I	Type of	Return and	d Retu	rn Information		
Form 53 or <b>10a</b> b whichev than on	330 filers may ente below, and the am	er dollars and o ount on that li lank (do not e	cents. For the enter -0-).	using this Form 8879-TE and enter the applicable amount, if any, from all other forms, enter whole dollars only. If you check the box on line return being filed with this form was blank, then leave line <b>1b, 2b,</b> But, if you entered -0- on the return, then enter -0- on the applicable <b>Total revenue,</b> if any (Form 990, Part VIII, column (A), line 12)	line <b>1a, 2a,</b> 3 <b>b, 4b, 5b,</b> e line below	3a, 4a, 5a, 6a, 7a, 8a, 9a, 6b, 7b, 8b, 9b, or 10b, or Do not complete more
2a	Form 990-EZ che	ck here	Ш і	Total revenue, if any (Form 990-EZ, line 9)		2b
3a	Form 1120-POL	check here		Total tax (Form 1120-POL, line 22)		
4a	Form 990-PF che	ck here		Tax based on investment income (Form 990-PF, Part V, line 5)		
	Form 8868 check			Balance due (Form 8868, line 3c)		
	Form 990-T chec			Total tax (Form 990-T, Part III, line 4)		
	Form 4720 check			Total tax (Form 4720, Part III, line 1)		7b
	Form 5227 check			FMV of assets at end of tax year (Form 5227, Item D)		8b
	Form 5330 check			Tax due (Form 5330, Part II, line 19)		9b
	Form 8038-CP ch			• Amount of credit payment requested (Form 8038-CP, Part III, li	ino 22)	10b
Part I				re Authorization of Officer or Person Subject to Tax		100
				am an officer of the above entity or I am a person subject to ta	1-370.0	and to Inoma
				, (EIN)		
acknowlof any reentry to financial later that paymen persona	ledgement of rece efund. If applicable the financial instit I institution to deb in 2 business days t of taxes to receive	ipt or reason to a lauthorize to a lauthorize to ution account it the entry to a prior to the part of	for reject the U.S. t indicate this acco payment il informa	ctronic return originator (ERO) to send the return to the IRS and to ion of the transmission, (b) the reason for any delay in processing to Treasury and its designated Financial Agent to initiate an electronic add in the tax preparation software for payment of the federal taxes count. To revoke a payment, I must contact the U.S. Treasury Finance (settlement) date. I also authorize the financial institutions involved attion necessary to answer inquiries and resolve issues related to the ature for the electronic return and, if applicable, the consent to electronic return and its policities.	he return on funds with towed on this cial Agent a in the proce payment.	r refund, and (c) the date drawal (direct debit) s return, and the at 1-888-353-4537 no essing of the electronic I have selected a
TIN. CIR	l authorize			to	ontor my D	OIN!
				ERO firm name	enter my F	Enter five numbers, but do not enter all zeros
	with a state age on the return's con the return's conditions and an officer or preturn. If I have in the IRS Fed/State por officer or person subject of the properson subje	ncy(ies) regulatisclosure con person subjectindicated with rogram, I will	ating chansent scr et to tax nin this re enter my	with respect to the entity, I will enter my PIN as my signature on the sturn that a copy of the return is being filed with a state agency(ies) PIN on the return's disclosure consent screen.	rementione e tax year 20 regulating o	ed ERO to enter my PIN  022 electronically filed
	FIN/PIN. Enter yo	AND THE PERSON NAMED IN COLUMN TWO			•	Data Was regional from
	(EFIN) followed by			E4440400EGE		
certify	that the above nur	meric entry is	my PIN,	which is my signature on the 2022 electronically filed return indicate	ed above. I	confirm that I am

submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature

KATHLEEN M. FLAHERTY

09/13/23 Date

**ERO Must Retain This Form - See Instructions** Do Not Submit This Form to the IRS Unless Requested To Do So

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8879-TE** (2022)

202521 12-16-22

**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.

2022
Open to Public

A F	or the	2022 calendar year, or tax year beginning	and	ending		
B c	Check if pplicable	C Name of organization			D Employer identific	cation number
	Addres change	EARTH SANGHA				
	Name change	Doing business as			54-18685	46
	Initial return	Number and street (or P.O. box if mail is not delive	ered to street address)	Room/suite	E Telephone number	
	Final return/	5101 I BACKLICK ROAD		703-333-		
	termin- ated	City or town, state or province, country, and Z		G Gross receipts \$	570,000.	
	Amend return	annandale, va 22003			H(a) Is this a group re	
	Application	IF Name and address of principal officer.	STOPHER BRIGHT		for subordinates	? Yes X No
	pendin	SAME AS C ABOVE			H(b) Are all subordinates in	ncluded? Yes No
1 7	Гах-ехе	mpt status: X 501(c)(3) 501(c) ( )	(insert no.) 4947(a)(1)	or 527	200 00	list. See instructions
	Nebsit				H(c) Group exemption	n number
			ociation Other	L Year		State of legal domicile: VA
		Summary				
-		Briefly describe the organization's mission or most s	significant activities: CONS	ERVATI	ON, ECOLOGI	CAL
nce	1	RESTORATION, AND HELPING E	PEOPLE DEVELOP	HEALTH	IER CONNECT	IONS TO THE
rua	-		tinued its operations or dispo			
Ş.		Number of voting members of the governing body (			3	9
Ğ	1000	Number of independent voting members of the gov				7
S		Fotal number of individuals employed in calendar ye				11
įŧį		Total number of volunteers (estimate if necessary)				1225
Activities & Governance		Fotal unrelated business revenue from Part VIII, coli				0.
ď		Net unrelated business taxable income from Form 9				0.
		Total Control of Contr			Prior Year	Current Year
4	8 (	Contributions and grants (Part VIII, line 1h)			361,479.	216,206.
Revenue					223,164.	353,518.
) Ye		nvestment income (Part VIII, column (A), lines 3, 4,			467.	276.
ď		Other revenue (Part VIII, column (A), lines 5, 6d, 8c,			0.	0.
		Fotal revenue - add lines 8 through 11 (must equal F			585,110.	570,000.
		Grants and similar amounts paid (Part IX, column (A			45,000.	0.
		Benefits paid to or for members (Part IX, column (A)			0.	0.
10	l		297,723.	355,614.		
Se	160	Professional fundraising fees (Part IX column (A) lin	ne 11e)		0.	0.
Expenses	h a	Salaries, other compensation, employee benefits (P Professional fundraising fees (Part IX, column (A), lir Fotal fundraising expenses (Part IX, column (D), line	25) 32.4	91.		
$\frac{\Sigma}{\Sigma}$		Other expenses (Part IX, column (A), lines 11a-11d,	-		198,765.	221,321.
		Fotal expenses. Add lines 13-17 (must equal Part IX			541,488.	576,935.
		Revenue less expenses. Subtract line 18 from line 1			43,622.	
es or	13 1	tevenue less expenses. Oubtract line 10 from line 1			ginning of Current Year	End of Year
ets	20 7	Fotal assets (Part X, line 16)			924,897.	916,667.
Ass Ba	21				2,303.	948.
Net Assets or Fund Balances	22 1	Net assets or fund balances. Subtract line 21 from I			922,594.	915,719.
Pa	art II	Signature Block	#10 Z0		,	
		ties of perjury, I declare that I have examined this return, i	ncluding accompanying schedule	s and statem	ents, and to the best of m	y knowledge and belief, it is
		, and complete. Declaration of preparer (other than officer				,
	T	(V) 1 1 H	,		09/13/	123
Sig	n I	Signature of officer			Date /	~0
Her		CHRISTOPHER BRIGHT, PRESID	ENT			
	Ť	Type or print name and title				
		Print/Type preparer's name	Preparer's signature	320	Date Check	PTIN
Paid		KATHLEEN M. FLAHERTY		lo	9/13/23 if self-employed	₽00969957
		Firm's name MATTHEWS, CARTER &	BOYCE		Firm's EIN 5	4-1487262
		Firm's address 12500 FAIR LAKES		60	2	
	,	FAIRFAX, VA 22033		cont DED	Phone no. 70	3-218-3600
May	the IR	S discuss this return with the preparer shown above	re? See instructions		1	X Yes No

Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	CONSERVATION, ECOLOGICAL RESTORATION, AND HELPING PEOPLE DEVELOP
	HEALTHIER CONNECTIONS TO THE LANDS AND WATERS AROUND THEM.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.  (Code: ) (Expenses \$ 268, 180 • including grants of \$ ) (Revenue \$ 340, 310 • )
4a	(Code:) (Expenses \$ 268,180 . including grants of \$
	PLANT SPECIES NATIVE TO THE GREATER WASHINGTON, DC, REGION FOR USE IN
	LOCAL ECOLOGICAL RESTORATION PROJECTS. ALL STOCK IS LOCAL ECOTYPE
	(PROPAGATED DIRECTLY FROM LOCAL WILD NATIVE-PLANT POPULATIONS). SOME OF
	THESE SPECIES ARE RARE, EITHER LOCALLY OR ON THE STATE LEVEL; WE ARE
	PROPAGATING THEM AT THE REQUEST OF LOCAL GOVERNMENT AGENCIES, FOR USE
	ON THEIR RESTORATION SITES. OUR PLANTS ARE ALSO USED IN OUR OWN
	PROJECTS AND IN THOSE OF OTHER NONPROFITS, "FRIENDS OF" GROUPS,
	INDIVIDUAL RESTORATIONISTS, AS WELL AS GOVERNMENT AGENCIES MANAGING
	LOCAL PARKLAND AND SCHOOLYARDS. DURING 2022, ABOUT 56,014 NATIVE TREES,
	SHRUBS, AND HERBACEOUS PLANTS WERE DISTRIBUTED FROM THE NURSERY TO
	LOCAL FORESTS, MEADOWS, AND MAINTAINED LANDSCAPES.
4b	(Code: ) (Expenses \$ 143,067 • including grants of \$ ) (Revenue \$ 6,330 • )
	TREE BANK HISPANIOLA: OPERATION OF A COMMUNITY TREE NURSERY AND
	ASSOCIATED FOREST-CONSERVATION AND TREE-PLANTING PROGRAMS ON THE
	DOMINICAN SIDE OF A PORTION OF THE DOMINICAN REPUBLIC - HAITI BORDER,
	TO SLOW DEFORESTATION AND HELP SMALL-HOLDER FARMERS INCREASE THEIR
	INCOMES. DURING 2022, ABOUT 65 FARMS PARTICIPATED. PROGRAM ACTIVITIES
	WERE SOMEWHAT CONSTRAINED BECAUSE OF UNUSUALLY HEAVY RAINS AND A LOCAL
	LABOR SHORTAGE BUT WE STILL MANAGED TO PRODUCE AND PLANT ABOUT 17,860
	ORCHARD, TIMBER, AND LOCAL-ECOTYPE NATIVE TREE SEEDLINGS; EIGHT NATIVE SPECIES WERE REPRESENTED, ALL OF THEM PROBABLY IN DECLINE IN THE WILD.
	OUR FOREST CREDIT PROGRAM, IN WHICH OUR LOCAL INDEPENDENT PARTNER
	ORGANIZATION (THE ASOCIACION DE PRODUCTORES DE BOSQUE, LOS CEREZOS)
	EXTENDS LOW-COST CREDIT TO SMALL-HOLDER FARMERS IN EXCHANGE FOR PLEDGES
4c	71 140
	DC-AREA FOREST AND MEADOW RESTORATION: ON-GOING WORK AT THE 20-ACRE
	MARIE BUTLER LEVEN PRESERVE IN FAIRFAX COUNTY, VIRGINIA. DURING 2022,
	WE DONATED AND INSTALLED 466 NATIVE HERBACEOUS AND WOODY PLANTS. WE
	HOSTED A COMBINATION OF SMALL, REGULAR FIELD EVENTS FOR OUR OWN
	VOLUNTEERS, AND LARGE ONE-OFF EVENTS WITH STUDENT GROUPS AND EAGLE
	SCOUTS. ALL TOLD, WE ESTIMATE THAT 219 VOLUNTEERS INVESTED SOME 857
	HOURS IN MARIE BUTLER LEVEN DURING 2022. SOME OF THIS LABOR WAS DEVOTED
	TO THE PLANTING EFFORTS JUST MENTIONED, BUT MOST OF IT WAS DEVOTED TO
	THE CONTROL OF INVASIVE ALIEN VEGETATION, WHICH IS A MAJOR PROBLEM AT
	THIS PARK AND MANY OTHERS IN OUR REGION.
	WE HOSTED SIMILAR PROJECTS AT FOUR OTHER FAIRFAX COUNTY PARKS. AT
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )  Total program service expenses 482,389.
4e	Total program service expenses 482,389.
232003	SEE SCHEDULE O FOR CONTINUATION(S)

orm 990 (2022) EARTH SANGHA 54-1868546 Page **3** 

# Form 990 (2022) EARTH SANGHA 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)?  If "Yes," complete Schedule A	1	х	
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			х
	public office? If "Yes," complete Schedule C, Part I	3		
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i>	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?	•		x
40	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
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,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
_	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in	110		
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			٠,,
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		37	
	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		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			٦,
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	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	ا _ ا		v
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u> </u>

232003 12-13-22

Form **990** (2022)

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Form 990 (2022)

EARTH SANGHA

Part IV   Checklist of Required Schedules (continued
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22 X  23 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part X, County A), inc. 22 if Yes, "complete Schedule J, Part I is M. 24 or S, about compensation of the organization aurent and former officers, directors, trustees, key employees, and highest compensated employees? If Yes, "complete Schedule J and the organization have a tax-assempt 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 J, If Yes, 'the Yes,				Yes	No					
23 Did the organization answer "Vert 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 I.  24 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 260 through 24d and complete Schedule K. If "No." yo to line 23a.  25 Did the organization mantain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  26 Did the organization mantain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  26 Did the organization and an escrow account other than a refunding escrow at any time during the year?  27 Did the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  27 Did the organization aware that it engaged in an excess benefit transaction with a disqualified person in a plory year, and that the transaction has not been reported on any of the organization spine Forms 990 or 990-E27 If "Yes," complete Schedule L, Part II  28 Did the organization provid any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, fustee, key employee, creator or forunder, substantial contributor, or any and the partition of the assistance to any current or former officer, director, fustee, key employee, creator or forunder, substantial contributor?  28 Did the organization provide a grant or other assistance to any current or former officer, director, fustee, key employee, creator or forunder, or substantial contributor?  29 Did the organization or povide and part of their assistance to any current or former officer, director, fustee, key employee, creator or forunder, or substan	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on								
and former officers, directors, frustees, key employees, and highest compensated employees? If "Yes," complete Schedule L, Part IV.  23		Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X					
Schedule J  4a 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." ye to fine 23b.  5 Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?  C Did the organization aminish an escrew account other than a refunding secrew at any time during the year to defease any tax-exempt bonds?  d Did the organization aware that it engaged in an excess benefit transaction with a disqualified perion during the year?  24d	23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current								
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 Proxyph 2dd and complete Schedule II. If "No," for bine 25s 24a 2db		and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete								
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 240 through 24d and complete Schedule K. If "No." yo to line 25a Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  24d Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  24d Did the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year?  25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  25b It be organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  25c If the organization are ben reported on any of the organization's prior forms 900 or 900 E27 If "Yes," complete Schedule L, Part I  25c If the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, fustee, key employee, creator or founder, substantial contributor, or 35% controlled entity finculary and prior the part of these persons? If "Yes," complete Schedule L, Part II  27c If the organization aparty to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable limp thresholds, conditions, and exceptions):  28c A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV  28c A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule II, Part IV  28c Did the organization receive		Schedule J	23		X					
Schedule K. If "No." or to line 25a	24a									
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  d Did the organization act as an 1 no behalf of "issuer for bonds outstanding at any time during the year?  24d		last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete								
c Did the organization maintain an escriow account other than a refunding escriow at any time during the year to defease any tax-exempt bonds?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d    25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization again an excess benefit transaction with a disqualified person during the year? If "Ves," complete Schedule L, Part I   25a   X    b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization spinor Forms 990 or 990 EZ? If "Yes," complete Schedule L, Part I   25b   X    25b   X    26c   Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II   26   X    27d Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part II   27d   X    28d Was the organization aparty to a business transaction with one of the following parties (see the Schedule L, Part II   27d   X   X   X   X   X   X   X   X   X		Schedule K. If "No," go to line 25a	24a		Х					
any tax-exempt bonds?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  25a Section 501c(3), 501c(4), and 501c(3/29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year?  b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 // "Yes," complete Schedule L, Part I  25b X  26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 38% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II  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 38% controlled entity or founder, substantial contributor or employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III  28 Was the organization applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV  28 A 33% complete Schedule L, Part IV  29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule L, Part IV  29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, III or IV, and Part V, I	b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b							
d Did the organization act as an "on behalf of "issuer for bonds outstanding at any time during the year? 256 Section 501(QA), 501(QA), and 501(QA) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease								
d Did the organization act as an "on behalf of "issuer for bonds outstanding at any time during the year? 256 Section 501(QA), 501(QA), and 501(QA) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		any tax-exempt bonds?	24c							
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b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990 E2? If "Yes," complete Schedule L, Part I yes," to organization report any amount on Part X, line 5 or 22, for receivables from or payables to any curent 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 yes," to a publication committed in contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III.  27	25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit								
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Schedule L, Part I  25b   X  27b   Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II   26	b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and								
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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 I I I I I I I I I I I I I I I I I		Schedule L, Part I	25b		X					
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Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III.  27  X  28  Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IIV instructions for applicable filling thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If  "Yes," complete Schedule L, Part IV  b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV  c A 359% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If  "Yes," complete Schedule L, Part IV  28  X  29  X  30  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  30  Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I  31  Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I  32  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3 nf "Yes," complete Schedule R, Part I, III, or IV, and Part V, Iine 1  33  Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1  34  X  35a  Did the organization have a controlled entity within the meaning of section 512(b)(13)?  35b  X  37b  Did the organization on conduct more than 5% of its activities through an entity that is not a related organization.  If "Yes," complete Schedule R, Part V, Iine 2  36   S		or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%								
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		controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х					
entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part IV, instructions for applicable filling thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28a X 28b	27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,								
Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If  "Yes," complete Schedule L, Part IV  b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV  c 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  28b X  27c  28c X  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  29 J X  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M, Part I  30 Did the organization ilquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I  31 Did the organization self, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 30 1.7701-2 and 30 1.7701-3? If "Yes," complete Schedule R, Part I  33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  34 Was the organization have a controlled entity within the meaning of section 512(b)(13)?  35 Did the organization have a controlled entity within the meaning of section 512(b)(13)?  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  36 If "Yes," complete Schedule R, Part V, line 2  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization?  37 If "Yes," complete Schedule R, Part V, line 2  38 Did the organization co		creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled								
instructions for applicable filling thresholds, conditions, and exceptions):  a 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  c 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 I Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I II  31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I II  32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulation sections 301.7701.3? If "Yes," complete Schedule R, Part I III  32 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  33 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  34 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  35 Section 501(c)(3) organizations. Did the organization complete Schedule R, Part V, line 2  36 Section 501(c)(3) organizations. Did the organization of the organization on Schedule R, Part V, line 2  37 Did the organization complete Schedule O and provide explanations on Schedule R, Part V III  38 Did the org		entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х					
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28b X  c 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 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 inquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 31 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1 32 Did the organization have a controlled entity within the meaning of section 512(b)(13)? Basic V, Iine 1 33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? Basic V, Iine 2 35a Did the organization base a controlled entity within the meaning of section 512(b)(13)? Basic V, Iine 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, Iine 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? A X 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, Iines 11b and 19? 36 Note: All Form 990 filers are required to complete Schedule O or Part VI, Iines 11b and 19? 37 Note: All Form 990 filers are requ	28									
"Yes," complete Schedule L, Part IV  b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV  c 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 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 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I  31 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  32 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1  33 Did the organization have a controlled entity within the meaning of section 512(b)(13)?  34 Was the organization have a controlled entity within the meaning of section 512(b)(13)?  35 Did the organization. Did the organization make any transfers to an exempt non-charitable related organization?  34 If "Yes," complete Schedule R, Part V, Iine 2  35 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  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 V I  38 Did the organization conduct more than 5% of its activities through an entity that is not a related organization organization conduct more than 5% of its activities through an e		instructions for applicable filing thresholds, conditions, and exceptions):								
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV  c 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	а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If								
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.  c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b7/If "Yes," complete Schedule L, Part IV.  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.  29 X  29 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 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.  31 Did the organization on 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.  32 A Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  33 Did the organization have a controlled entity within the meaning of section 512(b)(13)?  35 Did the organization have a controlled entity within the meaning of section 512(b)(13)?  35 Did the organization by a controlled entity within the meaning of section 512(b)(13)?  35 Did the organization conduct more than 5% of its activities through an entity that is not a related organization?  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V I.  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 V I.  38 Did the organization conduct more than 5% of its activities		"Yes," complete Schedule L, Part IV	28a		Х					
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?//  "Yes," complete Schedule L, Part IV.  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.  30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.  31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.  31 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.  32 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  33 Did the organization have a controlled entity within the meaning of section 512(b)(13)?  35 Did the organization have a controlled entity within the meaning of section 512(b)(13)?  35 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  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  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  Check if Schedule O contains a response or note to any line in this Part V  10 Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  11 Enter the number reported in box 3 of Form 1096. Enter 0- if not applicable  12 Did the organiz	b									
Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  30										
Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  Sa Did the organization have a controlled entity within the meaning of section 512(b)(13)?  b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  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  To 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 V II as The III and The		"Yes," complete Schedule L, Part IV	28c		Х					
contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  30 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  31 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  32 A Was the organization have a controlled entity within the meaning of section 512(b)(13)?  33 b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  34 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  35 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 V    36 A X  37 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O  Check if Schedule O contains a response or note to any line in this Part V  10 Enter the number of Forms W-2G included on line 1a. Enter -0 - if not applicable  b Enter the number of Forms W-2G included on line 1a. Enter -0 - if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	29		29		Х					
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I  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 sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  33 X  34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  34 X  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  35b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2  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 X  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  10 Check if Schedule O contains a response or note to any line in this Part V  11 Enter the number reported in box 3 of Form 1096. Enter -0 if not applicable  12 b Enter the number of Forms W-2G included on line 1a. Enter -0 if not applicable  13 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation								
Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		contributions? If "Yes," complete Schedule M	30		Х					
Schedule N, Part II  32  X  33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  35b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  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  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  28 Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  10 Enter the number reported in box 3 of Form 1096. Enter -0 - if not applicable  11	31		31		Х					
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  35a Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  35b If "Yes," complete Schedule R, Part V, line 2  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  36 If "Yes," complete Schedule R, Part V, line 2  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 Note: All Form 990 filers are required to complete Schedule O  38 X  Part 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  1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable  1a 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete								
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 X  34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X  b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 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 V 37 X  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  Part V Statements Regarding Other IRS Fillings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 1  b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 1b 0  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		Schedule N, Part II	32		Х					
Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  34	33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations								
Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  34		"	33		X					
Part V, line 1  34	34									
Did the organization have a controlled entity within the meaning of section 512(b)(13)?  b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  35b  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 Y  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 V			34		X					
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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  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  Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V  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 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			35b							
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  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  Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  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  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	36									
27 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  28 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  28 Example 11b and 19?  Check if Schedule O contains a response or note to any line in this Part V  19 Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable  10 b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable and reportable gaming		If "Yes," complete Schedule R, Part V, line 2	36		Х					
Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O  Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  The image of the schedule O contains a response or note to any line in this Part V  The image of the schedule O contains a response or note to any line in this Part V  The image of the schedule O contains a response or note to any line in this Part V  The image of the image of the schedule O contains a response or note to any line in this Part V  The image of the image of the image of the schedule O contains a response or note to any line in this Part V  The image of the	37									
Note: All Form 990 filers are required to complete Schedule O  Part 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  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х					
Note: All Form 990 filers are required to complete Schedule O  Part 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  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	38									
Part 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  Take Inter 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  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		Note: All Form 990 filers are required to complete Schedule O	38	X						
Ta Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1  b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	Pai	t V Statements Regarding Other IRS Filings and Tax Compliance								
Ta Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1  b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		Check if Schedule O contains a response or note to any line in this Part V	<u></u> .							
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable				Yes	No					
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1a									
	b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b								
(gambling) winnings to prize winners?	С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming								
		(gambling) winnings to prize winners?	1c	Х						

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Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

				Yes	No					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,									
	filed for the calendar year ending with or within the year covered by this return	2a 11								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur	ns?	2b	Х						
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		За		X					
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0	3b							
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	authority over, a								
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		X					
b	If "Yes," enter the name of the foreign country									
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccounts (FBAR).								
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa		5b		X					
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5с							
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the									
	any contributions that were not tax deductible as charitable contributions?		6a		X					
b	If "Yes," did the organization include with every solicitation an express statement that such contribut									
	were not tax deductible?		6b							
7	Organizations that may receive deductible contributions under section 170(c).				37					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser		7a		X					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b							
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	·			37					
	to file Form 8282?	ı	7c		X					
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	_		v					
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c		7e		X					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr		7f 7g							
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?									
_	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?									
8										
0	sponsoring organization have excess business holdings at any time during the year?									
a	<ul> <li>Sponsoring organizations maintaining donor advised funds.</li> <li>a Did the sponsoring organization make any taxable distributions under section 4966?</li> </ul>									
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9a 9b							
10	Section 501(c)(7) organizations. Enter:		35							
а	Initiation fees and capital contributions included on Part VIII, line 12	10a								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b								
11	Section 501(c)(12) organizations. Enter:									
а	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								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.									
а	Is the organization licensed to issue qualified health plans in more than one state?		13a							
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.									
b	Enter the amount of reserves the organization is required to maintain by the states in which the									
	organization is licensed to issue qualified health plans	13b								
	Enter the amount of reserves on hand	13c								
			14a		X					
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu		14b							
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune				77					
	excess parachute payment(s) during the year?		15		X					
	If "Yes," see the instructions and file Form 4720, Schedule N.				77					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investmen	t income?	16		X					
	If "Yes," complete Form 4720, Schedule O.									
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac									
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17							
	If "Yes," complete Form 6069.									

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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.

					Λ
Sec	tion A. Governing Body and Management				
		1 1	_	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	9		
	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.				
b	Enter the number of voting members included on line 1a, above, who are independent	1b	7		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi	p with any other	_		
_	officer, director, trustee, or key employee?		2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the				
3					Х
	of officers, directors, trustees, or key employees to a management company or other person?		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form S		4		
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?	5		X
6	Did the organization have members or stockholders?		6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	opoint one or			
	more members of the governing body?		7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	stockholders, or			
	persons other than the governing body?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year				
а	The governing body?		8a	Х	
b	Each committee with authority to act on behalf of the governing body?		8b		Х
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea		0.0		
3	organization's mailing address? If "Yes," provide the names and addresses on Schedule O		9		Х
800	tion B. Policies (This Section B requests information about policies not required by the Internal R		<u> </u>		21
360	tion B. Foncies (mis Section B requests information about policies not required by the internal h	evenue Code.)		V	Nia
40-	Did the same in the second should be shown because of the test		40-	Yes	No X
	Did the organization have local chapters, branches, or affiliates?		10a		- 22
р	If "Yes," did the organization have written policies and procedures governing the activities of such c				
	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b		37
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	y before filing the form?	11a		Х
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	'es," describe			
	on Schedule O how this was done		12c	Х	
13	Did the organization have a written whistleblower policy?		13	X	
14	Did the organization have a written document retention and destruction policy?		14	Х	
15	Did the process for determining compensation of the following persons include a review and approve				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
а	The organization's CEO, Executive Director, or top management official		15a	Х	
	Other officers or key employees of the organization		15b		Х
	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 arrange	ment with a			
	taxable entity during the year?		16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalua				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga				
	exempt status with respect to such arrangements?		16b		
Sec	tion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed VA				
 18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, a	nd 990-T (section 501(c)(	3)s only	) avail:	able
	for public inspection. Indicate how you made these available. Check all that apply.	222 . (222.311 201(0)(	_,_ oiny	,	
		on Schedule O)			
10	Describe on Schedule O whether (and if so, how) the organization made its governing documents, or		nd fina	ncial	
19		ornilot or interest policy, a	nu iiia	icial	
20	statements available to the public during the tax year.	also and received			
20	State the name, address, and telephone number of the person who possesses the organization's be CHRISTOPHER BRIGHT $-703-333-3022$	oks and records			
	5101 I BACKLICK ROAD, ANNANDALE, VA 22003				

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## 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

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

Check this box if neither the organization		orga	anıza			npe	nsat			<b>(E)</b>
(A)	(B)			)) Pos	C) ition	1		(D)	(E)	(F)
Name and title	Average		not c	heck	more	than		Reportable compensation	Reportable compensation	Estimated amount of
	hours per week	box, unless person is both an officer and a director/trustee)					tee)	from	from related	other
	(list any	ctor	ctor					the	organizations	compensation
	hours for	r dire				ted		organization	(W-2/1099-MISC/	from the
	related	stee o	rustee			en sa		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	al tru	onal t		oloye	comb		1099-NEC)		and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	rmer			organizations
(1) CHRISTOPHER BRIGHT	50.00	드	드	5	₹.	王旨	요			
PRESIDENT		x		x				60,000.	0.	657.
(2) LISA BRIGHT	50.00							, , , , , , ,		
EXECUTIVE DIRECTOR EMERITA		Х		х				43,000.	0.	0.
(3) MARY SYLVIA	0.50									
CHAIR OF THE BOARD		Х		Х				0.	0.	0.
(4) AMY FREY	0.50	ļ								
DIRECTOR	0.50	Х						0.	0.	0.
(5) RICHARD HAEUBER	0.50									•
DIRECTOR	0.50	Х						0.	0.	0.
(6) ROBERT JORDAN	0.50	X						0.	0.	0
DIRECTOR	0.50	^						0.	0.	0.
(7) CHRISTIAN LANSING DIRECTOR	0.50	X						0.	0.	0.
(8) KRISTINE LANSING	0.50	^						0.	0.	0.
DIRECTOR	0.30	x						0.	0.	0.
(9) ASHLEY TODD MATTOON	0.50									
DIRECTOR		х						0.	0.	0.
		1								
		-								
		-								
		1								
	-		$\vdash$							
		1								
		1								

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(E) (E)

	(A) Name and title	(B) (C)  Average hours per (do not check more than one box, unless person is both an officer and a director/trustee)						h an	(D) (E)  Reportable Reportable compensation			(F) Estimated amount of				
		(list any hours for related organizations below line)	tee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)		compensation from the organization and related			other compensation from the organization and related organizations	
	Subtotal								103,000.	C			657.			
С	Total from continuation sheets to Part V Total (add lines 1b and 1c)	II, Section A							103,000.	C	•	0. 657.				
2	Total number of individuals (including but rompensation from the organization	not limited to th	ose	liste	ed al	bove	e) wł	no r	eceived more than \$100	0,000 of reportable			0			
3	Did the organization list any <b>former</b> officer line 1a? <i>If</i> "Yes," <i>complete Schedule J for</i> s										3	Ye	s No X			
4	For any individual listed on line 1a, is the sand related organizations greater than \$15	um of reportab	le co	omp	ensa	atior	n and	d ot	her compensation from	the organization			X			
5	Did any person listed on line 1a receive or rendered to the organization? If "Yes," con					-					. 5	5	Х			
1	tion B. Independent Contractors  Complete this table for your five highest countries the organization. Report compensation for	· ·	-							· · · · · · · · · · · · · · · · · · ·	nsatio	on from	1			
	(A) Name and business			ONI		*****	0, ,,		(B)  Description of s		Com	(C) pensa	tion			
2	Total number of independent contractors ( \$100,000 of compensation from the organ		ot li	mite	d to		se lis	stec	d above) who received n	nore than						
	,										Fo	m <b>99</b> 0	(2022)			

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		- ()	H SANGHA				54-1868	546 Page 9
Pa	rt V							
		Check if Schedule O cor	ntains a response	or note to any lin	e in this Part VIII			L
					(A) Total revenue	(B) Related or exempt function revenue	Unrelated	( <b>D)</b> Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants   and Other Similar Amounts		<ul><li>b Membership dues</li><li>c Fundraising events</li></ul>	1c   1d   1d   1e   1ntions)   1e   1nts, and   1f   1g   \$	Business Code	216,206.			
ce	2	a NATIVE PLANT S.	ALES	900099	353,518.	353,518.		
Program Service Revenue		b c d d d d d d d d d d d d d d d d d d	venue		353,518.			
	3	Investment income (including						
	4 5	other similar amounts) Income from investment of to		proceeds	276.			276
		b Less: rental expenses 66 c Rental income or (loss)	a b					
			(i) Securities	(ii) Other				
venue		a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses	a	(ii) Other				
Other Reve		c Gain or (loss)						
₹		including \$ contributions reported on lin Part IV, line 18 b Less: direct expenses	e 1c). See <b>8a 8b</b>					
		c Net income or (loss) from fur						
		a Gross income from gaming a     Part IV, line 19     b Less: direct expenses	9a 9b					
		c Net income or (loss) from gai						
		<ul> <li>a Gross sales of inventory, less and allowances</li> <li>b Less: cost of goods sold</li> </ul>	10a					
		c Net income or (loss) from sal	es of inventory					
neous nue	11	a		Business Code				

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570,000.

353,518.

**d** All other revenue e Total. Add lines 11a-11d

Total revenue. See instructions

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### 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 respon	olete all columns. All otherse or note to any line in the			
	not include amounts reported on lines 6b,	(A) Total expenses	<b>(B)</b> Program service	(C) Management and	<b>(D)</b> Fundraising
	8b, 9b, and 10b of Part VIII.	·	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
•	and domestic governments. See Part IV, line 21 Grants and other assistance to domestic				
2					
3	Grants and other assistance to foreign				
3	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
3	trustees, and key employees	103,657.	79,394.	18,197.	6,066
6	Compensation not included above to disqualified		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Ü	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	205,209.	161,403.	25,149.	18,657
8	Pension plan accruals and contributions (include				
Ŭ	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	22,168.	18,667.	2,373.	1,128
10	Payroll taxes	24,580.	19,173.	3,441.	1,966
11	Fees for services (nonemployees):	,	- ,	,	,
	Management				
b	Legal				
c	Accounting	2,172.	1,737.	326.	109
d		,	,		
e	D ( )   (   )   )   O D   N     17				
f	Investment management fees				
g					
·	column (A), amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion				
13	Office expenses	24,984.	19,631.	4,488.	865
14	Information technology	10,861.	9,110.	1,324.	427
15	Royalties				
16	Occupancy	27,696.	19,387.	5,539.	2,770
17	Travel	2,624.	2,580.	44.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	54,726.	53,746.	618.	362
23	Insurance	13,869.	13,692.	133.	44
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),				
	amount, list line 24e expenses on Schedule 0.)				
а	TREE BANK SUPPLIES	39,636.	39,556.	80.	
b	SUPPLIES	38,189.	37,970.	164.	55
С	EQUPMENT	6,383.	6,162.	179.	42
d	OTHER EXPENSE	181.	181.		
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	576,935.	482,389.	62,055.	32,491
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				Form <b>990</b> (2022

Form **990** (2022)

54-1868546 Page **11** Form 990 (2022)
Part X Balance Sheet EARTH SANGHA

	LA	Check if Schedule O contains a response or note t	o any line	e in this Part X			
		·	-		<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			153,756.	1	108,405.
	2	Savings and temporary cash investments	554,940.	2	611,414.		
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	123.
	5	Loans and other receivables from any current or fo					
		trustee, key employee, creator or founder, substan					
		controlled entity or family member of any of these persons				5	
	6	Loans and other receivables from other disqualified	d persons	s (as defined			
		under section 4958(f)(1)), and persons described in	section	4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ř	9					9	
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D1	0a	517,192.			
	b	Less: accumulated depreciation1	0b	320,467.	216,201.	10c	196,725.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line 11				12	
	13	Investments - program-related. See Part IV, line 11				13	
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equal li			924,897.	16	916,667.
	17	Accounts payable and accrued expenses			2,303.	17	948.
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Par	t IV of So	chedule D		21	
Se	22	Loans and other payables to any current or former	officer, c	director,			
Ě		trustee, key employee, creator or founder, substan	tial contr	ibutor, or 35%			
Liabilities		controlled entity or family member of any of these	persons			22	
-	23	Secured mortgages and notes payable to unrelated	d third pa	arties		23	
	24	Unsecured notes and loans payable to unrelated the	hird parti	es		24	
	25	Other liabilities (including federal income tax, payat	bles to re	lated third			
		parties, and other liabilities not included on lines 17	7-24). Co	mplete Part X			
		of Schedule D				25	0.10
	26	Total liabilities. Add lines 17 through 25			2,303.	26	948.
ű		Organizations that follow FASB ASC 958, check	here	X			
၁၁		and complete lines 27, 28, 32, and 33.			000 504		045 540
alai	27	Net assets without donor restrictions			922,594.	27	915,719.
d B	28	Net assets with donor restrictions				28	
Š		Organizations that do not follow FASB ASC 958	, check h	nere 🔲 📗			
Net Assets or Fund Balances		and complete lines 29 through 33.					
ts (	29	Capital stock or trust principal, or current funds $\dots$				29	
SSe	30	Paid-in or capital surplus, or land, building, or equip				30	
ţ.	31	Retained earnings, endowment, accumulated income			000 504	31	015 540
Š	32	Total net assets or fund balances			922,594.	32	915,719.
	33	Total liabilities and net assets/fund balances			924,897.	33	916,667.

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Form 990 (2022) EARTH SANGHA 54-1868546 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			00.
2	Total expenses (must equal Part IX, column (A), line 25)	2			35.
3	Revenue less expenses. Subtract line 2 from line 1	3			35.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	92	<u>2,5</u>	94.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			60.
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	91	5,7	19.
Pa	rt XII Financial Statements and Reporting				,
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedul	e O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	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	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on Scl	nedule O.			
За	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		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
	, , ,		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

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.

Open to Public

OMB No. 1545-0047

Inspection

Name of the organization EARTH SANGHA Employer identification number 54-1868546

Pa	Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.							
		ı nization is not a private founc			-			
	ligai							
1	H	A church, convention of ch	•			)(a)U\1 n	I)(A)(I).	
2	Н	A school described in <b>sect</b>						
3	Щ	A hospital or a cooperative	hospital service orga	anization described in <b>s</b> e	ection 170	)(b)(1)(A)(i	ii).	
4		A medical research organiz	ation operated in co	njunction with a hospital	described	d 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 co	ollege or university owned	d or opera	ted by a g	overnmental unit describ	ped in
		section 170(b)(1)(A)(iv). (C	Complete Part II.)					
6		A federal, state, or local go	vernment or governn	nental unit described in	section 17	70(b)(1)(A)	(v).	
7	X	An organization that norma						public described in
•		section 170(b)(1)(A)(vi). (C	-	artial part of its support	rom a gov	orriin iorrica	arm or normano goriorar	pasio accorisca in
۰				(4)(A)(vi) (Complete Dord	<b>.</b> II \			
8	$\vdash$	A community trust describe						
9		An agricultural research org						
		or university or a non-land-o	grant college of agric	culture (see instructions).	Enter the	name, city	y, and state of the colleg	e or
		university:						
10		An organization that norma	Illy receives (1) more	than 33 1/3% of its sup	port from	contributio	ons, membership fees, a	nd gross receipts from
		activities related to its exen	npt functions, subjec	ct to certain exceptions;	and (2) no	more that	n 33 1/3% of its support	from gross investment
		income and unrelated busin	ness taxable income	(less section 511 tax) from	om busine	sses acqu	ired by the organization	after June 30, 1975.
		See section 509(a)(2). (Co	mplete Part III.)					
11		An organization organized		ively to test for public sa	fety. See	section 50	09(a)(4).	
12		An organization organized	and operated exclus	ively for the benefit of, to	perform	the functio	ons of, or to carry out the	purposes of one or
		more publicly supported or	•	•	-		•	
		lines 12a through 12d that	-					
а		Type I. A supporting orga				-	•	, aivina
٠	· -	the supported organization	•	•	•	-		
		• • • • •			a majority	or the dire	ctors or trustees or the s	supporting
		organization. You must o						
k	) [		•					-
		control or management of			ame perso	ons that co	ontrol or manage the sup	pported
		organization(s). You mus						
C	: L	☐ Type III functionally integrated in the last of the last o	egrated. A supporting	g organization operated	in connec	tion with,	and functionally integrat	ed with,
		_ its supported organizatio	n(s) (see instructions	s). You must complete I	Part IV, Se	ections A,	D, and E.	
C	ıL		<b>y integrated.</b> A supp	orting organization oper	ated in co	nnection v	with its supported organ	zation(s)
		that is not functionally int	tegrated. The organiz	zation generally must sat	tisfy a dist	ribution re	quirement and an attent	iveness
		requirement (see instruct	ions). <b>You must con</b>	nplete Part IV, Sections	A and D,	and Part	V.	
e		Check this box if the orga	anization received a	written determination fro	m the IRS	that it is a	a Type I, Type II, Type III	
		functionally integrated, or						
f	Ente	er the number of supported of		, 3 11				
		vide the following information	-					•
		(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	inization listed	(v) Amount of monetary	(vi) Amount of other
		organization		(described on lines 1-10	Yes	No	support (see instructions)	support (see instructions)
				above (see instructions))		110		
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	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.")	230,689.	229,158.	266,574.	361,479.	216,206.	1,304,106.
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	230,689.	229,158.	266,574.	361,479.	216,206.	1,304,106.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						218,077.
_6	Public support. Subtract line 5 from line 4.						1,086,029.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020 266, 574.	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	230,689.	229,158.	266,574.	361,479.	216,206.	1,304,106.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	-181.	1,141.	738.	404.	276.	2,378.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on	-1,082.					-1,082.
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	<b>Total support.</b> Add lines 7 through 10						1,305,402.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	576,682.
13	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section t	501(c)(3)	
_	organization, check this box and stop						<u></u>
	ction C. Computation of Publ					г т	02 10
14	Public support percentage for 2022 (					14	83.19 %
15	Public support percentage from 2021					15	82.55 %
16a	33 1/3% support test - 2022. If the o	•		•		•	
	stop here. The organization qualifies as a publicly supported organization						
b	b 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box						
	and <b>stop here.</b> The organization qual						
17a	10% -facts-and-circumstances tes	•					· ·
	and if the organization meets the fact				•	VI how the organiz	ation
	meets the facts-and-circumstances to	ū	•				
b	10% -facts-and-circumstances tes	-					10% or
	more, and if the organization meets the				-		
	organization meets the facts-and-circ						
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17b	o, check this box a		Form 990) 2022

## 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.")	<u> </u>					
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	<u> </u>					
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			1			
	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		1	,			
	endar year (or fiscal year beginning in)	<b>(a)</b> 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						
11	Net income from unrelated business activities not included on line 10b,						
	whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)	<del> </del>			1		
	Total support. (Add lines 9, 10c, 11, and 12.)			1		<u> </u>	<u> </u>
14	First 5 years. If the Form 990 is for the	e organization's fi	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organizat	tion,
<u></u>	check this box and stop here						<u></u>
	ction C. Computation of Publ					Liel	
	Public support percentage for 2022 (I					15	%
	Public support percentage from 2021 ction D. Computation of Investigation					16	%
	Investment income percentage for 20					17	04
						18	%
	Investment income percentage from 2 a 33 1/3% support tests - 2022. If the						17 is not
196	more than 33 1/3%, check this box a						
L	33 1/3% support tests - 2021. If the						
	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		
	За		
	3b		
	0-		
	3с		
	4a		
	Tu		
	4b		
	40		
	4c		
	5a		
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	8		
	9a		
	9b		
	30		
	9с		
	10a		
	.54		
	10b		
مان	A /Earr	~ 000	

Par	t IV   Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	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		
	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			110
•	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
	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		
	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		
	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		
	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sect	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 yea(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 in	structio	ns).	
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.			
	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		

232025 12-09-22

Schedule A (Form 990) 2022

Pai	rt V Type III Non-Functionally Integrated 509(a)	(3) Supporting Orga	nizations	
1	Check here if the organization satisfied the Integral Part T	est as a qualifying trust or	n Nov. 20, 1970 (explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting or	ganizations must complet	e Sections A through E.	
Sect	tion 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 o	r		
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see inst	tructions) 6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	tion 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 gre	ater 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	tion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, colum	nn A) <b>1</b>		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, co	lumn 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 subje	ct to		
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as	a non-functionally integra	ited Type III supporting ord	aanization (see

Schedule A (Form 990) 2022

instructions).

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Org	anizations <sub>(continu</sub>	ıed)	
Secti	on D - Distributions		•		Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	าร	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 tl	he organization is responsive	е		
	(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			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2022	ns	(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				
c	From 2019				
d	From 2020				
e	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
i_	Carryover from 2017 not applied (see instructions)				
j	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				
b	Applied to 2022 distributable amount				
c	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
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:				
а	Excess from 2018				
b	Excess from 2019				
С	Excess from 2020				
	Excess from 2021				
е	Excess from 2022				

Schedule A (Form 990) 2022

### Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

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

OMB No. 1545-0047

2022

Name of the organization Employer identification number EARTH SANGHA 54-1868546 Organization type (check one): Filers of: Section: X = 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule ☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \_\_\_\_\_\_\_\_\$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering

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

"N/A" in column (b) instead of the contributor name and address), II, and III.

Schedule B (Form 990) (2022)

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

Name of organization	Employer identification number
EARTH SANGHA	54-1868546

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al 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		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$16,150.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$15,910.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$15,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$14,255.	Person X Payroll

Schedule B (Form 990) (2022)

Name of organization Employer identification number

EARTH	SANGHA		54-1868546
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
7		\$ 10,5	Person X Payroll  Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) ns Type of contribution
8		\$10,0	Person X Payroll  Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
9		\$ 10,0	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d)
10		\$10,0	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
11		\$10,0	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d)
12		\$ 6.0	Person X Payroll

223452 11-15-22

(Complete Part II for noncash contributions.) Schedule B (Form 990) (2022) Page **2** 

Name of organization	Employer identification number		
EARTH SANGHA	54-1868546		

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13		\$\$, 5,000.	Person X Payroll
(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.)
(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.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Page 3

Name of organization Employer identification number

EARTH	SANGHA
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54-1868546

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** 54-1868546 EARTH SANGHA 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 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

#### **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

EARTH SANGHA

**Employer identification number** 54-1868546

Par	t I Organizations Maintaining Donor Advise	ed Funds or Other S	Similar Funds or A	Accounts. Complete if the			
	organization answered "Yes" on Form 990, Part IV, lir	ne 6.					
		(a) Donor advised	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	writing that the assets he	eld in donor advised fur	nds			
	are the organization's property, subject to the organization's	exclusive legal control?		Yes No			
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that gra	ant funds can be used	only			
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for ar	ny other purpose confe	rring			
_	impermissible private benefit?						
Par		•	s" on Form 990, Part IV	, line 7.			
1	Purpose(s) of conservation easements held by the organizat		1				
	Preservation of land for public use (for example, recrea	ation or education)	1	orically important land area			
	Protection of natural habitat		Preservation of a cert	ified historic structure			
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contrib	ution in the form of a co				
	day of the tax year.			Held at the End of the Tax Year			
	Total number of conservation easements			2a			
b				2b			
С.	Number of conservation easements on a certified historic str			2c			
d	Number of conservation easements included in (c) acquired	· · · · · · · · · · · · · · · · · · ·					
_	historic structure listed in the National Register			2d			
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or i	terminated by the organ	nization during the tax			
4	Number of states where property subject to concernation of	acoment is leasted					
4 5	Number of states where property subject to conservation ea Does the organization have a written policy regarding the pe		tion, handling of				
3	violations, and enforcement of the conservation easements			Yes No			
6	Staff and volunteer hours devoted to monitoring, inspecting,						
•	etan ana volanteen neare develou te memering, mepeeting,	, manaling of violations, a	ia omoromy concervat	on casements daming the year			
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and en	forcing conservation ea	asements during the year			
		,	· ·	<b>G</b> ,			
8	Does each conservation easement reported on line 2(d) abor	ve satisfy the requiremen	ts of section 170(h)(4)(l	3)(i)			
	and section 170(h)(4)(B)(ii)?			Yes No			
9	In Part XIII, describe how the organization reports conservat						
	balance sheet, and include, if applicable, the text of the foot	note to the organization's	financial statements t	nat describes the			
	organization's accounting for conservation easements.						
Par	t III Organizations Maintaining Collections of	•	easures, or Other	Similar Assets.			
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.					
1a	If the organization elected, as permitted under FASB ASC 95	•					
	of art, historical treasures, or other similar assets held for pu	·		ince of public			
	service, provide in Part XIII the text of the footnote to its financial statements that describes these items.						
b	If the organization elected, as permitted under FASB ASC 95						
	art, historical treasures, or other similar assets held for public	c exhibition, education, or	r research in furtherand	e of public service,			
	provide the following amounts relating to these items:						
	(i) Revenue included on Form 990, Part VIII, line 1						
	(ii) Assets included in Form 990, Part X						
2	If the organization received or held works of art, historical tre		-	provide			
	the following amounts required to be reported under FASB A			•			
a	Revenue included on Form 990, Part VIII, line 1						
	Assets included in Form 990, Part X						
∟НА	For Paperwork Reduction Act Notice, see the Instruction	15 IUI FUIM 99U.		Schedule D (Form 990) 2022			

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection times (check all that apply):  a Public exhibition	Par	rt III   Organizations Maintaining C	Collections of Ar	t, Historical	Treasures, c	or Other	Similar A	ssets(contii	nued)	
a Public exhibition d	3	Using the organization's acquisition, accessi	on, and other record	s, check any of t	ne following tha	t make sigr	nificant use o	of its		
b Scholarly research e		collection items (check all that apply):								
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of air, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Part IV   Excrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.  1b   I'Yes, "explain the arrangement in Part XIII and complete the following table:    C   Beginning balance	а	Public exhibition	d	Loan or e	xchange progra	ım				
4. Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.  5. During the year, did the organization solidor to receive donations of art, historical treasures, or other similar assets to be solid to raise funds rather than to be maintained aspart of the organization's collection?    Yes	b	Scholarly research	е	Other						
55 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be solid to raise funds rather than to be maintained as part of the organization's collection?  Part IV	С	Preservation for future generations								
To be sold to raise funds rather than to be maintained as part of the organization's collection?  Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.  1b If "Yes," explain the arrangement in Part XIII and complete the following table:    Complete the following table:	4	Provide a description of the organization's co	ollections and explair	n how they furthe	r the organizati	on's exemp	ot purpose in	Part XIII.		
Part IV   Escrow and Custodial Arrangements. Complete if the organization answered "ves" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X2, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X2   Ves	5	During the year, did the organization solicit of	r receive donations o	of art, historical tr	easures, or oth	er similar a	ssets			_
reported an amount on Form 990, Part X, line 21.  1a is the organization an agent, true, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  b if "Yes," explain the arrangement in Part XIII and complete the following table:  C Beginning balance  d Additions during the year  e Distributions during the year  f Ending balance 2D Distributions 2D Dis										<b>No</b>
Tale   Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?   Yes   No   If Yes,* explain the arrangement in Part XIII and complete the following table:   Amount   It   Amount   It   It   It   It   It   It   It	Par	rt IV Escrow and Custodial Arran	gements. Comple	te if the organiza	tion answered '	'Yes" on Fo	orm 990, Par	t IV, line 9, o	r	
on Form 990, Part X?    Yes		reported an amount on Form 990, Pa	rt X, line 21.							
b If "Yes," explain the arrangement in Part XIII and complete the following table:    C   Beginning balance	1a	Is the organization an agent, trustee, custod	ian or other intermed	iary for contribut	ons or other as	sets not in	cluded			_
c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII  Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part V, line 10.  1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance b Permanent endowment y6 b Permanent endowment y6 c Term endowment y6 c Term endowment thurds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organizations (iii) Related organizations Description of property (a) Gost or other basis (investment)  Description of property (a) Gost or other basis (investment)  Description of property (b) Buildings 14,4444 3,839, 10,605. 238. 37,762. 6 Edupment 99,870, 62,108, 337,762. 6 Edupment 99,870, 62,108, 337,762. 6 Edupment 99,870, 62,108, 37,762.		on Form 990, Part X?						· L Yes		∟ No
c Beginning balance   1c	b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:						
d Additions during the year    Distributions during the year   Fending balance								Amoun	t	
e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part X, line 10.  Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.  [a] Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back [b] Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment y6 The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organizations (iii) Related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  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) basis (investment) basis (investment) basis (investment)  1a Land  b Buildings 14 4 444 3 3, 839 10, 605. c Leasehold improvements 4 402, 160. 254, 040 148, 120. d Equipment 7 60, 18 4, 120. d Equipment 7 7 18 4, 480 238.							1c			
tending balance 12a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?							1d			
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part X, line 10.  [a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (d) Three years back (e) Four years bac	е						$\vdash$			
Part V   Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.	f									
Part V   Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.   (a) Current year   (b) Prior year   (c) Two years back   (d) Three years back   (e) Four years back   (d) Three years back   (e) Four yea		<del>-</del>				-	?	. ∟∟ Yes	F	∟ No
ta Beginning of year balance   (a) Current year   (b) Prior year   (c) Two years back   (d) Three years back   (e) Four years back   b Contributions   C Net investment earnings, gains, and losses   C Net investment earnings, gains, and losses   d Grants or scholarships   C Other expenditures for facilities and programs   f Administrative expenses   C Net expenditures for facilities and programs   f Administrative expenses   C Net expenditures for facilities and programs   f Administrative expenses   C Net expenditures for facilities and programs   f Administrative expenses   C Net expenditures for facilities and programs   f Administrative expenses   C Net expenditures for facilities and programs   f Administrative expenses   C Net expenditures for facilities and programs   f Administrative expenses   C Net expenditures for facilities and programs   f Administrative expenses   C Net expenditures for facilities and programs   f Administrative expenses   C Net expenditures for facilities and programs   f Administrative expenses   C Net expenditures for facilities and programs   f Administrative expenses   C Net expension   f Net expension   C Net expension   f Administrative expenses   C Net expension   f Net expension   C Net expension   f N										
Beginning of year balance	Pai	Endowment Funds. Complete						and (a) Four	rvoare	hack
b Contributions			(a) Current year	(b) Prior year	(C) TWO year	S Dack (a)	i illiee years i	Jack (e) i ou	years	Dack
c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	1a									
d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	b									
e Other expenditures for facilities and programs  f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	C									
and programs  f Administrative expenses g End of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	d									
g End of year balance	е	·								
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment	_									
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment										
Board designated or quasi-endowment		The state of the s		- /li <b>-</b>	. (-)\					
b Permanent endowment					i (a)) neid as:					
The percentages on lines 2a, 2b, and 2c should equal 100%.   The percentages on lines 2a, 2b, and 2c should equal 100%.   Are there endowment funds not in the possession of the organization that are held and administered for the organization by:   (i)   Unrelated organizations	a			_%						
The percentages on lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) Unrelated organizations  (ii) Related organizations  b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  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 Buildings  14 Land  b Buildings  14 , 4444  3 , 839  10 , 605  c Leasehold improvements  4 02 , 160  2 54 , 040  1 48 , 120  d Equipment  9 9 , 870  6 2, 108  37 , 762  e Other	D	•								
Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) Unrelated organizations (ii) Related organizations (iii) Related orga	C		, •							
Ves   No   (i)   Unrelated organizations   3a(i)	20			ation that are half	l and administa	rad for tha				
(i) Unrelated organizations (ii) Related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  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 (other) (b) Cost or other depreciation  1a Land b Buildings 14,444 3,839 10,605 c Leasehold improvements 402,160 254,040 148,120 d Equipment 99,870 62,108 33(ii)  34(ii)  Chacking a complete if the related organizations listed as required on Schedule R?  (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value  402,160 524,040 537,762 60ther	Ja		ssion of the organiza	ation that are new	and administe	red for the		1	Yes	No
(ii) Related organizations  b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  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 Buildings  14,4444  3,839  10,605  c Leasehold improvements  402,160  254,040  148,120  d Equipment  999,870  62,108  37,762  e Other		-						3a(i)		<del></del>
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  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 (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  1a Land  b Buildings  14,4444  3,839  10,605  c Leasehold improvements  402,160  254,040  148,120  d Equipment  99,870  62,108  37,762  e Other								······		
4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  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 (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  1a Land  b Buildings  14,444. 3,839. 10,605.  c Leasehold improvements  402,160. 254,040. 148,120.  d Equipment  99,870. 62,108. 37,762.  e Other	h									
Part VI	4				··					
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	Par			WITICITE TUTTUS.						
Description of property   (a) Cost or other basis (investment)   (b) Cost or other basis (other)   (c) Accumulated depreciation				, Part IV, line 11a	. See Form 990	, Part X, lin	ie 10.			
basis (investment)         basis (other)         depreciation           1a Land         14,444.         3,839.         10,605.           c Leasehold improvements         402,160.         254,040.         148,120.           d Equipment         99,870.         62,108.         37,762.           e Other         718.         480.         238.		· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·				(d) Boo	k valu	<u>—</u>
b Buildings       14,444.       3,839.       10,605.         c Leasehold improvements       402,160.       254,040.       148,120.         d Equipment       99,870.       62,108.       37,762.         e Other       718.       480.       238.		2 document of property	1 ' '			. ,		(4, 200		•
b Buildings       14,444.       3,839.       10,605.         c Leasehold improvements       402,160.       254,040.       148,120.         d Equipment       99,870.       62,108.       37,762.         e Other       718.       480.       238.	1a	Land	<u> </u>			<u>'</u>				
c Leasehold improvements       402,160.       254,040.       148,120.         d Equipment       99,870.       62,108.       37,762.         e Other       718.       480.       238.					14,444.		3,839.	1	0,6	05.
d Equipment     99,870.     62,108.     37,762.       e Other     718.     480.     238.				4		25				
e Other 718. 480. 238.										
							-			
				X, column (B), lin	e 10c.)			19	6,7	<del>25.</del>

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022 EARTH SANGH	IA	54	-1868546 Page 3
Part VII Investments - Other Securities.			, agu -
Complete if the organization answered "Yes"	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-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)	<del> </del>		
(B)	<del> </del>		
(C)	<del> </del>		
(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"	on Form 990. Part IV. line	11c. See Form 990. Part X. line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d-of-vear market value
(1)	(-,	(-)	<b>,</b>
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990. Part IV. line	11d. See Form 990. Part X. line 15.	
	Description		(b) Book value
(1)			(-,
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	 ne 15 )		
Part X Other Liabilities.	<u> </u>		
Complete if the organization answered "Yes"	on Form 990. Part IV. line	11e or 11f. See Form 990. Part X. line 25	5.
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			. ,
(2)			
(3)			
(4)			
(5)			
<u>(6)</u>			
(7)			
(8)			

Schedule D (Form 990) 2022

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

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

Subtract line 2e from line 1

Amounts included on Form 990, Part VIII, line 12, but not on line 1:

**b** Other (Describe in Part XIII.)

a Investment expenses not included on Form 990, Part VIII, line 7b

#### c Add lines 4a and 4b Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 Part XII | Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements 1 2 Amounts included on line 1 but not on Form 990. Part IX. line 25: a Donated services and use of facilities **b** Prior year adjustments c Other losses d Other (Describe in Part XIII.) e Add lines 2a through 2d 2e 3 Subtract line 2e from line 1 3 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b **b** Other (Describe in Part XIII.) c Add lines 4a and 4b 4c Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI,

lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Schedule D (Form 990) 2022

#### SCHEDULE F (Form 990)

### **Statement of Activities Outside the United States**

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

Attach to Form 990.

2022 Open to Bublio

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the organization					Employer identi	fication number
EARTH SANGHA					54-18685	46
	nformation on A	ctivities Ou	tside the United States. Comple	ete if the organ		
Form 990, Pa	art IV, line 14b.					
			ds to substantiate the amount of its gr			. —
the grantees' eligibil	ity for the grants or	assistance, and	the selection criteria used to award the	e grants or assi	istance? X	Yes No
0	No continue to Double Malo					tatala dia a
2 For grantmakers. D United States.	escribe in Part V the	e organization's	procedures for monitoring the use of it	s grants and o	tner assistance ou	tside the
	The following Part	t L line 3 table ca	an be duplicated if additional space is	needed )		
(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in the region		vity listed in (d)	(f) Total
., •	offices	employees, agents, and independent	(by type) (such as, fundraising, pro-		gram service,	expenditures
	in the region	independent	gram services, investments, grants to		specific type	for and investments
		contractors in the region	recipients located in the region)	of service	(s) in the region	in the region
CENTRAL AMERICA AND						
THE CARRIBBEAN	0	9	PROGRAM SERVICE	FOREST CONS	SERVATION	40,203.
3 a Subtotal		9				40,203.
<b>b</b> Total from continuat		_				
sheets to Part I		0				0.
c Totals (add lines 3a	,					40 203

232071 10-17-22

Schedule F (Form 990) 2022

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

Schedule F (Form 990) 2022 EARTH SANGHA 54-1868546 Page 2

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	<b>(c)</b> Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)		
			recognized as charities by the					1		
	exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter  Enter total number of other organizations or entities									

54-1868546

Schedule F (Form 990) 2022

EARTH SANGHA

Page 3

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.  Part III can be duplicated if additional space is needed.								
(a) <sup>↑</sup>	Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

54-1868546

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

Instructions for Form 5713; don't file with Form 990)

Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see

Schedule F (Form 990) 2022

6

54-1868546 Page 5

#### **SCHEDULE L**

Department of the Treasury

Internal Revenue Service

(Form 990)

### **Transactions With Interested Persons**

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

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 54-1868546							
Part I Ex	cess Bene	fit Trans	sacti	ons (section 5	01(c)(3	3), sect	ion 50	1(c)(4), and	sect	tion 501(c)(29) orga	anizat	ions o	nly).			
Co	mplete if the c	organization	n ansv	wered "Yes" on	Form 9	990, P	art IV, I	ine 25a or 2	25b,	or Form 990-EZ, P	art V,	line 40	Db.			
1 (a) Name of disqualified person			(b) Relationship between disqualified person and organization					(c) Description of transaction			n	(d) Corr		Corre	ected?	
(a) Name of disquainted person		(c) Description of transaction					,,,		Y	es	No					
														_		
														+	_	
														+	-+	
														+		
2 Enter the a section 495		•		· ·	•			•		ng the year under		\$			-	
	mount of tax,	if any, on li	ne 2, :	above, reimbur	sed by	the or	ganiza	tion				\$				
Part II Lo	ans to and	l/or Fron	n Int	erested Per	sons											
Co	mplete if the c	organization	n ansv	wered "Yes" on	Form 9	990-EZ	', Part \	/, line 38a d	or Fo	rm 990, Part IV, lir	ne 26;	or if th	ne orga	anizati	on	
		1		, Part X, line 5,		2. an to or							Vh\ Δn	nroved		
(a) Nar interested		(b) Relatio with organi		(c) Purpose of loan	fron	n the		) Original ipal amoun	.	(f) Balance due		) In ault?	(h) Ap by bo	ard or	(i) V agree	Vritten ement?
	po. 00				<u> </u>	zation? From	l '	.pa. a	`		Yes	No	Yes	No	Yes	
					10	FIOIII			+		162	INO	162	NO	165	NO
									+							
									$\perp$							
									4							
									_							
									+							
Total									\$							
	ants or As	sistance	Ber	nefiting Inte	reste	d Pe	rsons		φ							
				wered "Yes" on												
(a) Name	of interested p	person		(b) Relationship	betwe	en	(0	) Amount o	of	(d) Type	of		(e	) Purp	ose o	of
(a) Name of interested person			interested person and the organization				assistance		assistance			assistance				
			$\perp$													
			-													
			+									-+				
			_													

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

Schedule L (Form 990) 2022

	volving Interested Persons.				
Complete if the organization answ  (a) Name of interested person	wered "Yes" on Form 990, Part IV, line 28a, 2  (b) Relationship between interested	8b, or 28c. (c) Amount of	(d) Description of	(e) Sha	aring of
(a) Name of interested person	person and the organization	transaction	transaction	organization's revenues?	
		48 000		Yes	No
MATTHEW BRIGHT KATHERINE ISAACSON	OFFICER SON OFFICER IN-LAW		EMPLOYEE EMPLOYEE		X
KATHERINE ISAACSON	OFFICER IN-LAW	47,000	EMPLOIEE		
				<del> </del>	
Provide additional information for	<b>n.</b> responses to questions on Schedule L (see	instructions)			
Provide additional information for	responses to questions on schedule E (see	instructions).			
PART V					
MILE CON AND MILE DALICHME	D IN IAM OF MILE DESCIO	ENIM ANID EVI	CUMTUR DIDI	TOMOT	
THE SON AND THE DAUGHTE	R-IN-LAW OF THE PRESID	FILL AND EVI	COTIVE DIKE	CTOR	
WERE EMPLOYEES OF THE O	RGANIZATION DURING 202	2.			
			Cobodulo I	/F 0/	20) 000

#### SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ Go to www.irs.gov/Form990 for the latest information.

Open to Public

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

EARTH SANGHA

**Employer identification number** 54-1868546

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: LANDS AND WATERS AROUND THEM.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: TO CONSERVE FOREST - THAT CREDIT PROGRAM LENT ABOUT \$35,150 TO 55 IN EXCHANGE FOR PLEDGES COVERING ABOUT 358 ACRES OF FOREST. (THE PLEDGES ARE HELD BY OUR DOMINICAN PARTNER ORGANIZATION.) OUR 44.3-ACRE THE REGION'S ONLY COMMUNITY-OWNED NATURE RESERVE, NATURE RESERVE, IS PROTECTING THE HEADWATERS OF A VILLAGE WATER SUPPLY. OUR RISING FORESTS COFFEE PROGRAM IS REHABILITATING THE REGION'S SHADE-GROWN COFFEE, IN THE WAKE OF THE COFFEE LEAF-RUST EPIDEMIC OF 2014-15; THE EPIDEMIC KILLED VIRTUALLY ALL OF THE REGION'S COFFEE TREES. RISING FORESTS IS PRODUCING RUST-RESISTANT COFFEE TREES FOR PLANTING ON LOCAL FARMS, AS WELL AS COCOA TREES. BOTH COFFEE AND COCOA ARE HIGH-VALUE CROPS THAT GROW BEST UNDER FOREST CANOPY, SO OUR PROGRAM IS CREATING A POWERFUL ECONOMIC INCENTIVE TO CONSERVE FOREST, AND WE ARE CONTINUING TO RESTORE ADDITIONAL PATCHES OF FOREST FOR UNDERPLANTING WITH COFFEE AND COCOA.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS: RUTHERFORD PARK, WE PLANTED ABOUT 280 HERBACEOUS AND WOODY PLANTS AND CUT AWAY INVASIVES OVER ABOUT HALF AN ACRE OF THE PARK'S RIPARIAN ZONE. WE ALSO WORKED WITH OUR FAIRFAX COUNTY COLLEAGUES TO IDENTIFY AREAS IN THE PARK THAT WOULD BENEFIT FROM A LARGER RIPARIAN RESTORTION PROJECT THAT SHOULD BEGIN OVER THE NEXT FEW YEARS.

AT ELK LICK PARK, WE CONTINUED OUR PARTNERSHIP WITH FAIRFAX COUNTY

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

Schedule O (Form 990) 2022

Schedule O (Form 990) 2022 Page 2 Name of the organization **Employer identification number** EARTH SANGHA 54-1868546 BOTANISTS TO PROPAGATE AND RESTORE SEVERAL COUNTY-RARE MEADOW SPECIES, AS WELL AS VARIOUS COMMON MEADOW SPECIES. ALL TOLD, WE INSTALLED SOME 650 HERBACEOUS PLANTS HERE. AT POPLAR FORD PARK, WE WORKED WITH FAIRFAX COUNTY BOTANISTS TO DEVELOP A PROJECT SIMILAR TO THAT OF ELK LICK. OVER THE COURSE OF THE YEAR, WE PUT IN ABOUT 2,290 MEADOW PLANTS AT POPLAR FORD, SOME RARE AND SOME COMMON. AT LAUREL HILL CENTRAL GREEN, WE CONTINUED OUR TREE-PLANTING EFFORTS BY INSTALLING ANOTHER 270 HICKORIES, AS WELL AS A NATIVE BUT LOCALLY UNCOMMON SPECIES, THE BUTTERNUT (JUGLANS CINEREA), AND A MIX OF SHRUBS AND A FEW GRAMINOIDS. WE ALSO WORKED TO SUPPRESS THE INVASIVE ALIEN VINES THAT HAD BEGUN TO COVER OUR METAL (AND THEREFORE EXPENSIVE) DEER PROTECTION FENCING. FORM 990, PART VI, SECTION A, LINE 2: IN 2022: CHRISTOPHER BRIGHT, THE PRESIDENT, AND LISA BRIGHT, THEN THE EXECUTIVE DIRECTOR, WERE MARRIED. THEIR SON, MATTHEW BRIGHT, WAS MARRIED TO KATHERINE ISAACSON. BOTH MATTHEW AND KATHERINE WERE EMPLOYEES OF THE EARTH SANGHA. AMONG THE BOARD:

AMY FREY WAS MARRIED TO RICHARD HAEUBER.

Schedule O (Form 990) 2022 Page 2

Name of the organization **Employer identification number** EARTH SANGHA 54-1868546 CHRISTIAN LANSING WAS MARRIED TO KRISTINE LANSING. FORM 990, PART VI, SECTION A, LINE 8B: THERE WERE NO MEETINGS OF COMMITTEES ACTING ON BEHALF OF THE GOVERNING BODY. NO SUCH COMMITTEES EXIST. FORM 990, PART VI, SECTION B, LINE 11B: OUR FORM 990 IS REVIEWED BY THE PRESIDENT ON BEHALF OF THE BOARD, AND BY OUR ACCOUNTANT. FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION HAS A CONFLICT OF INTEREST POLICY. FORM 990, PART VI, SECTION B, LINE 15A: THE BOARD OF DIRECTORS MUST APPROVE THE PRESIDENT'S SALARY. FORM 990, PART VI, SECTION C, LINE 18: UPON WRITTEN REQUEST, THE ORGANIZATION WILL MAKE THESE DOCUMENTS AVAILABLE. FORM 990, PART VI, SECTION C, LINE 19: UPON WRITTEN REQUEST, THE ORGANIZATION WILL MAKE THESE DOCUMENTS AVAILABLE.