For	m 99	90	1										OMB No. 1545-0047
FOI	n				f Organ								2022
Depa	artment	of the Treasury		Do not e	nter social sec v.irs.gov/Form	urity number	s on this f	orm as it m	av be ma	de public.			Open to Public Inspection
-		he 2022 calend	ar year, or tax				lactions	, 2022, a			/30		20 2023
			C								D Em	ployer identif	ication number
		ddress change	Earth For	ce Inc							5:	2-18308	73
	H		PO Box 12									ephone numbe	
	1	itial return	Denver, C	0 8020	1						3	03-433-	0016
	H	nal return/terminated											
		mended return									G Gro	ss receipts \$	989,931.
			F Name and add	dress of princi	pal officer:					H(a) Is th	_	return for subo	
			Same As (	Ahove	-					H(b) Are	all subordin	ates included	? Yes No
1	Tax		X 501(c)(3)	501(c) (		(insert no.)	4947	(a)(1) or	527	If "N	o," attach a	list. See inst	ructions.
J			.EarthFo		. ,	(	1.1.1.1	(-)(-)		H(c) Grou	up exemptio	n number	
K			X Corporation	Trust	Association	Other		L Ye	ar of forma	tion: 19	· · ·		gal domicile: CO
Pa	_	Summary								19	<u> </u>		
	1			ation's mis	sion or mos	t significan	t activiti	es:Eart	h For	ce en	gages	voung	people who
a		improve t											
Su	1.5												
rna													
Governance	2	Check this box			ion discontir								ets.
	3	Number of vot	ing members	of the gov	erning body	(Part VI, li	ine 1a).					3 1	12
Activities &	4 Number of independent voting members of the governing body (Part VI, line 1b)											11	
itie	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)										11		
ctiv	6	<ul><li>6 Total number of volunteers (estimate if necessary)</li></ul>									100		
A		Net unrelated											<u> </u>
-	D	Net unrelateu	DUSITIESS taxa			1 990-1, 1 a					Prior Ye		Current Year
	8	Contributions	and grants (P	art VIII lir	ne 1h)							,730.	937,619.
Ine	9	Program servi									515	,150.	5572015.
Revenue	10	Investment inc			0.						1	,037.	8,915.
å	11	Other revenue	(Part VIII, co	lumn (A),	lines 5, 6d,	8c, 9c, 10c	, and 11	e)				,039.	43,397.
	12	Total revenue	- add lines 8	8 through 1	1 (must equ	al Part VII	l, columi	n (A), line	. 12)		1,031	,806.	989,931.
	13	Grants and sir	nilar amounts	paid (Par	t IX, column	(A), lines	1-3)			- 4	191	,826.	153,588.
	14	Benefits paid	to or for mem	bers (Part	IX, column	(A), line 4)							
	15	Salaries, other	r compensatio	on, employ	ee benefits	(Part IX, co	olumn (A	), lines 5	-10)		636	,883.	712,343.
Expenses	16a	Professional fi	undraising fee	es (Part IX	, column (A)	, line 11e).							
pen	b	Total fundraisi							,093.	S		12 - 11	
ă	17	Other expense	•				)				144	,788.	144,571.
	18	Total expense					-					,497.	1,010,502.
	19	Revenue less										,309.	-20,571.
2 8												rrent Year	End of Year
	20	Total assets (F	Part X. line 16	5)						Degin		,957.	1,178,081.
Assets Balanc	21	Total liabilities										,895.	53,590.
Net of	22	Net assets or									1,145		1,124,491.
Pa	rt II	Signature				LULINI EV					1,140	1002.	<u>-11241</u> 471.
-				comined this	otum instudie -		a abadula -	and at-t	nto cod l	the best	E 1001 + 1000 - 11 - 1	dag and balls	f it is true comment and
com	plete. D	Declaration of prepare	er (other than offic	cer) is based of	on all information	n of which prep	barer has a	ny knowledg	e. e.	UNE DEST O	my knowle	and belie	f, it is true, correct, and
-						-							
Sig	m	Signature of o	officer		/					Date	2/8/20	24	
He		VINCE	METORIM	11	-								

	Type or print nam	e and title				
	Print/Type prepar	rer's name	Preparer's signature	Check if	PTIN	
Paid	Brian S	Jacobson, CPA	self-employed	P00668876		
Preparer	Firm's name	HAYNIE & COME				
Use Only	Firm's address	1785 WEST 230	Firm's EIN 8	870325228		
		SALT LAKE CIT	FY, UT 84119		Phone no. 80	1-972-4800
May the IRS	discuss this re		X Yes No			
PAA For De	monuoule Dodu	stion Act Nation can t	he concrete instructions	TEE 001011	00/01/00	Form 000 (2022)

Form	1990(2022) Earth Force Inc.		52-1830873	Page <b>2</b>
Par	<b>3</b>			
		response or note to any line in this Part I	II	<u></u>
1	Briefly describe the organization's miss			
			<u>us who improve the environm</u>	ent and
	their_communities_now_and	d_in_the_future		
2	Did the organization undertake any signific	cant program services during the year which	were not listed on the prior	
			· · · · · · · · · · · · · · · · · · ·	es X No
	If "Yes," describe these new services on S	chedule O.		
3	Did the organization cease conducting,	or make significant changes in how it con	nducts, any program services?	res X No
	If "Yes," describe these changes on Scheo			
4	Describe the organization's program se Section $501(c)(3)$ and $501(c)(4)$ organiz	rvice accomplishments for each of its thre	ee largest program services, as measured	by expenses.
	and revenue, if any, for each program s	service reported.	of grants and allocations to others, the tot	ur experises,
4a	(Code:) (Expenses \$	833,181. including grants of \$		)
			from all walks of life are	
			<u>schools, in their neighbo</u>	
			mplish this, Earth Force w	
			ung_people_in_opportunitie relopment and support aroun	
			wilds skills critical to 1	
			in over 50 communities aro	
	U.S.			
4b	(Code:) (Expenses \$	including grants of \$	) (Revenue \$	)
4.		including grants of ¢	) (Povenue É	
40	(Code:) (Expenses \$	including grants of \$	) (Revenue \$	)
			· ·	
4d	Other program services (Describe on S	chedule O.)		
	(Expenses \$	including grants of \$	) (Revenue \$	)
4e	Total program service expenses	833,181.		
RΔΔ		TEFA0102L 09/01/22		orm <b>990</b> (2022)

Form 990 (2022)Earth Force Inc.Part IVChecklist of Required Schedules

52-	1	01	ΣN	ο	7	С	
52-	т	ο.	טכ	0	1	С	

-			Yes	No
I	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 public office? <i>If "Yes," complete Schedule C, Part I.</i>	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II.	4		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 Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
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? <i>If "Yes," complete Schedule D, Part I</i>	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> .	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	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.			
	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
	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? <i>If "Yes," complete Schedule D, Part VII</i>	11b		Х
	Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i>	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	Х	
	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b		Х
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	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? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Х	

Form 990 (2022)

Part IV Checklist of Required Schedules (continued) Yes No 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III. 22 Х Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current 23 and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Х Schedule J..... 23 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 a "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.* Х 24a **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?..... 24b 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? 24c **d** Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?..... 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I..... Х 25a **b** Is the organization aware that it engaged in an excess benefit transaction with a disgualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L. Part I 25h Х Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II*..... 26 Х 26 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key 27 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 Х persons? If "Yes," complete Schedule L, Part III..... 27 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): 28 a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV..... Х 28a **b** A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV...... Х 28b 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 Х Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M..... Х 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 Х contributions? If "Yes," complete Schedule M. 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part 1..... Х 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 Schedule N, Part II. Х 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? *If "Yes," complete Schedule R, Part I.* 33 Х 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, 34 Х and Part V, line 1..... 34 **35a** Did the organization have a controlled entity within the meaning of section 512(b)(13)?.... Х 35a **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 36 Х 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 37 Х Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 38 Х Note: All Form 990 filers are required to complete Schedule O. 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..... Yes No **1a** Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable ..... 1a 13 **b** Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable..... 1b 0 Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming С Х (gambling) winnings to prize winners? 1c

Form 990 (2022) Earth Force Inc.

BAA

52-1830873

Page 4

Form	990 (2022	2) Eart	h F	orce	In	c.										52-18	30873	3	F	Page 5
Parl		Stateme	nts	Rega	rdin	ng Othe	er IRS	3 Filir	ngs a	nd Ta	ax Co	mplia	nce (co	ontinu	ied)					
																			Yes	No
2a	Enter the	number of	emp	lovees	repo	orted on F	Form V	W-3. T	ransm	ittal of	f Wage	and Ta	ax State-	.			Γ			
	ments, fil	ed for the c	alend	dar yea	ar en	ding with	n or wi	ithin th	ie year	cover	red by t	his ret	urn	2a			11			
b	If at least	one is repo	orted	on line	e 2a,	did the o	organi	ization	ı file al	l requ	ired fed	leral er	nployme	nt tax	returns	?		2b	Х	
3a	Did the or	ganization	have	unrela	ated I	business	gross	s incon	ne of \$	51,000	or mor	e durir	ng the ye	ar?				3a		Х
b	If "Yes," has	it filed a Form	ı 990-'	T for this	s year?	? If "No" to .	line 3b,	provide	e an expla	anation	on Sched	ule O						3b		
		e during the			-			-	-								-			
14	financial a	account in a	a fore	eign co	untry	/ (such as	is a ba	ank acc	count,	securi	ities ac	count,	or other	financi	al acco	ount)?		4a		Х
b	lf "Yes," e	enter the na	me o	of the f	oreig	gn countr	ry													
	See instru	ctions for fili	ng re	quirem	ents <sup>-</sup>	for FinCE	EN Forr	m 114,	Report	t of Foi	reign Ba	ank and	Financia	Ι Αςςοι	unts (FE	BAR).				
5a	Was the c	organization	ара	arty to	a pro	ohibited t	tax she	elter tr	ransact	tion at	t any tir	ne duri	ing the t	ax yea	r?			5a		Х
b	Did any ta	axable party	/ noti	fy the	orga	nization t	that it	was o	or is a p	party t	to a pro	hibited	l tax she	lter tra	nsactio	n?		5b		Х
С	lf "Yes," t	o line 5a or	<sup>.</sup> 5b,	did the	e orga	anization	n file F	orm 88	886-T?	•••••								5c		
6a	Does the solicit any	organization / contributio	n hav ons th	ve annu nat wer	ual g re no	ross rece t tax ded	eipts tl ductible	hat are e as cl	e norm haritat	nally g ble cor	reater t htributio	han \$1 ons?	00,000,	and die	d the or	rganizatio	n 	6a		Х
b	lf "Yes," d not tax de	id the organi eductible?	izatio	n incluc	de wi	th every s	solicita	ition an	1 expres	ss stat	tement t	hat suc	h contrib	utions o	or gifts v	were		6b		
7	Organizat	tions that m	av r	eceive	ded	uctible co	ontrib	utions	s under	r secti	ion 170	(c).								
	-	ganization	-									•••	ion and	partly <sup>.</sup>	for aoo	ds and				
u	services p	provided to	the p	ayor?.														7a		Х
b	If "Yes," of	did the orga	nizat	tion not	tify tl	he donor	r of the	e value	e of the	e good	ds or se	rvices	providec	1?				7b		
с	Did the org	ganization se	ell, ex	change	e, or (	otherwise	e dispos	se of ta	angible	perso	nal prop	perty for	which it	was re	quired t	o file				
		2?																7c		Х
		ndicate the																		
		rganization		-			-		-				•				H	7e		Х
		rganization,		-	-				-		-	•				?		7f		Х
	as require	nization rece																7g		
h		anization re																7h		
8		8-C? I <b>g organizat</b> i																711		
	•	ion have ex			-									-	•	-	[	8		
9	-	ng organiza				-	-		-									-		
	-	onsoring o				-				under	section	1 49663	7					9a		
		onsoring o	-			-												9b		-
		01(c)(7) org					ibution	1 10 4 1	aonor,	aonor	444150	, , , , , ,	natoa pe					55		
		fees and ca	-				led on	Part \	VIII lin	ne 12				10a						
		eipts, inclu	•											10b						
		01(c)(12) or					,	012,1			0 01 014	b laoin		105						
		ome from n												11a						
		ome from oth																		
	against a	mounts due	or r	eceived	d fror	m them.)	)													
		947(a)(1) no		•					•		•			of Forr	n 1041	?		12a		
b	If "Yes," e	enter the an	noun	t of tax	(-exe	empt inter	erest re	eceived	d or ac	crued	during	the ye	ar	12b						
13	Section 5	01(c)(29) qı	ualifi	ed non	prof	it health	insura	ance is	ssuers	5.										
а	Is the org	anization lie	cense	ed to is	sue	qualified	l health	h plans	s in m	ore that	an one	state?						13a		
	Note: See	e the instruc	ctions	s for ad	lditio	nal infor	matior	n the c	organiz	ation	must re	eport or	n Schedi	ule O.						
b	Enter the which the	amount of organization	resei on is	rves the license	e org ed to	janizatior issue qu	n is re Jalified	equired	l to ma h plan:	aintain s	by the	states	in 	13b						
		amount of																		
14a	Did the or	ganization	recei	ve any	, pay	ments fo	or indo	or tanı	ning se	ervices	s during	g the ta	ix year?.					14a		Х
b	lf "Yes," h	nas it filed a	a For	m 720	to re	eport thes	se pay	/ments	\$? <i> f</i> "N	lo," pr	rovide a	n expla	anation d	on Sch	edule C	<b>)</b>		14b		
15		anization s arachute pa																15		Х
		ee the instru																		
16	Is the org	anization a	n edı	ucation	al in	stitution :	subjec	ct to th	ne sect	ion 49	68 exci	ise tax	on net i	nvestm	ent inc	ome?		16		Х
	lf "Yes," o	complete Fo	orm 4	720, S	Sched	dule O.														
17	result in t	501(c)(21) o he impositio complete Fo	on of	an exc														17		
BAA									TEEA01	105L 09	9/01/22							Form	990	(2022)

Pa	<b>rt VI Governance, Management, and Disclosure.</b> For each "Yes" response to lines 2 through 7b b a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or char Schedule O. See instructions.	elow iges	, and on	d for							
	Check if Schedule O contains a response or note to any line in this Part VI.			. Х							
Sec	ction A. Governing Body and Management										
1a	a Enter the number of voting members of the governing body at the end of the tax year1a12If 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.1a		Yes	No							
	<b>b</b> Enter the number of voting members included on line 1a, above, who are independent <b>1b</b> 11										
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Х								
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3		Х							
4	Did the organization make any significant changes to its governing documents										
	since the prior Form 990 was filed?	4 5		X X							
5 6	6 Did the organization have members or stockholders?										
7a	7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?										
b	• Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		x							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:										
а	a The governing body?	8a	Х								
	a 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 reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		х							
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Re	veni	ie Co	ode.)							
			Yes	No							
	a Did the organization have local chapters, branches, or affiliates?	10a		Х							
	• If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	1 <b>0</b> b									
	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х								
	Describe on Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O										
	a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х								
	• Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х								
c	bid the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done See. Schedule . Q.	12c	Х								
13	Did the organization have a written whistleblower policy?	13	Х								
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 approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?										
a	a The organization's CEO, Executive Director, or top management official. See Schedule. 0	15a	Х								
b	o 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	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Х							
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b									
Sec	ction C. Disclosure			<u> </u>							
17											
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 50 available for public inspection. Indicate how you made these available. Check all that apply.			ly)							
	X     Own website     X     Upon request     Other (explain on Schedule O)										
19	the public during the tax year. See Schedule O	ble to									
20	State the name, address, and telephone number of the person who possesses the organization's books and records.										

Form 990 (2022) Earth Force Inc.

52-1830873

Page 6

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and	brce Inc. 52-1830873	Page 7
Independent Contractors	of Officers, Directors, Trustees, Key Employees, Highest Compensated Emplo ontractors	ees, and
Check if Schedule O contains a response or note to any line in this Part VII	) contains a response or note to any line in this Part VII	
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees	ctors, Trustees, Key Employees, and Highest Compensated Employees	
<b>1a</b> Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.		

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• 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 nor any related organization compensated any current officer, director, or trustee.

			(C)								
	(A) Name and title	(B) Average hours	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	<b>(F)</b> Estimated amount of other
		per week (list any hours for related organiza- tions below dotted line)	ğğ	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099- MISC/1099-NEC)	(W-2/1099- (W-2/1099-NEC)	compensation from the organization and related organizations
(1)	VINCE MELDRUM	40									
	President/CEO	0	Х		Х				116,358.	0.	18,823.
_(2)	SARAH_PACHECO	40									
	Secretary	0			Х				85,770.	0.	10,281.
(3)	CHRISTOPHER AMBROSE	1									
	Treasurer	0	Х		Х				0.	0.	0.
_(4)	ANNA BROWN	1									
	Vice Chair	0	Х		Х				0.	0.	0.
_(5)	AMELIA BERNSTEIN	1									
	Director	0	Х						0.	0.	0.
_(6)	SUBAH_SACHDEVA	1									
	Director	0	Х						0.	0.	0.
_(7)	JESSE_SUTZ	1									
	Board Chair	0	Х		Х				0.	0.	0.
(8)	BRIDGET BARON	0									
	Director	0	Х						0.	0.	0.
<u>(9)</u>	MICHAEL EVANS	1									
	DIRECTOR	0	Х						0.	0.	0.
(10)	BRIAN BRADY	1									
	Director	0	Х						0.	0.	0.
(11)	MATT_SMITH	1									
	Director	0	Х						0.	0.	0.
(12)	JOHN VOGEL II	1									
	Director	0	Х						0.	0.	0.
(13)	ANA HUMPHREY	1									
	DIRECTOR	0	Х						0.	0.	0.
(14)											
BAA		TEEAO	1071	09/01	122						Form <b>990</b> (2022)

BAA

#### Form 990 (2022) Earth Force Inc.

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Pa	t VII Section A. Officers, Directors, Tru	stees,	Key	En	ıplo	oye	es, a	anc	d Highest Com	pensated Emp	loyees	(continued)
		(B)			(0	•						
	(A) Name and title	Average hours per week	box,	, unle	ess pe	erson	e than is both or/trus	n an tee)	(D) Reportable compensation from	(E) Reportable compensation from related organizations	Estima	(F) ited amount f other
			Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099- MISC/1099-NEC)	(W-271099- MISC/1099-NEC)	comper the or and	nsation from ganization I related nizations
(15)												
(16)												
(17)												
(18)												
(19)												
(20)												
(21)												
(22)		-										
(23)												
(24)												
(25)												
	Subtotal							• •	202,128.	0.		29,104.
	Total from continuation sheets to Part VII, Section								0.	0.		0.
2	Total (add lines 1b and 1c).         Total number of individuals (including but not limited from the organization 1								202,128. more than \$100,00	0. 0 of reportable comp		<u>29,104.</u>
3	Did the organization list any <b>former</b> officer, direct on line 1a? If "Yes, "complete Schedule J for such	tor, truste h <i>individu</i>	e, ke al	ey ei	mple	oyee	e, or	high	nest compensated	employee	. 3	Yes No
4	For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual	r than \$1	50,00	)0?	lf "`	Yes,	" con	nple	ete Schedule J for		4	X
5	Did any person listed on line 1a receive or accrude for services rendered to the organization? If "Yes	e compen	satio	n fr	om	anv	unre	late	d organization or	individual		X
	tion B. Independent Contractors											
1	Complete this table for your five highest compensation from the organization. Report compen-	sated inde sation for	epeno the ca	dent alen	t coi dar j	ntra year	ctors endii	tha ng v	It received more the with or within the or	nan \$100,000 of ganization's tax yea	r.	
	(A) Name and business addr	ress							(B) Description o	of services	<b>(C</b> Compe	<b>;)</b> nsation
_			_							<u> </u>		
2	Total number of independent contractors (including b \$100,000 of compensation from the organization	ut not limi 0	ited to	o tho	ose l	listeo	d abo	ve)	who received more	than		

# Form 990 (2022) Earth Force Inc. Part VIII Statement of Revenue

Page 9

Par	t VI	<b>Statement of Revenue</b> Check if Schedule O contains a res	sponse or note to any	y line in this Part VI	11		
				<b>(A)</b> Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants, and Other Similar Amounts		Federated campaigns   1a     Manufacture   11					
Gran		Membership dues 1b					
ĽÅ,		Fundraising events     1c       Related organizations     1d					
, Git nilai		Government grants (contributions) 1e					
Sin S		All other contributions, gifts, grants, and	133,358.				
her ut		similar amounts not included above 1f	804,261.				
10th		Noncash contributions included in lines 1a-1f					
and	h	Total. Add lines 1a-1f		937,619.			
			Business Code	5517015.			
ven	2a						
Program Service Revenue	b						
vice	С						
Sen	d		_				
am	е		-				
ogr		All other program service revenue					
ā	-	Total. Add lines 2a-2f					
	3	Investment income (including dividends, other similar amounts)	interest, and	8,915.			8,915.
	4	Income from investment of tax-exem		0,913.			0,913.
	5	Royalties		16,155.			16,155
		(i) Real	(ii) Personal	10/100.			10/100
	6a	Gross rents 6a					
		Less: rental expenses 6b					
		Rental income or (loss) 6c					
	d	Net rental income or (loss)					
	7a	Gross amount from (i) Securities	(ii) Other				
		sales of assets other than inventory <b>7a</b>					
	b	Less: cost or other basis					
	_	and sales expenses <b>7b</b>					
		Gain or (loss)					
		E E E					
enu	8a	Gross income from fundraising events (not including \$					
vel		of contributions reported on line 1c).					
Other Revenue		See Part IV, line 18	8a				
ler	b	Less: direct expenses	8b				
5	С	Net income or (loss) from fundraising	events				
	9a	Gross income from gaming activities.					
		See Part IV, line 19	9a				
		·	9b				
		Net income or (loss) from gaming act					
	10a	Gross sales of inventory, less returns and allowances	<b>0a</b> 26.150.				
		_	<b>0</b> a <u>26,150</u> . <b>0</b> b				
		Net income or (loss) from sales of inv		26,150.	26,150.		
	-		Business Code	20,100.	20,100.		
ð	11a	MISCELLANEOUS	900099	1,092.	1,092.		
Revenue	b						
eve	С						
Revenue	u	All other revenue					
		Total. Add lines 11a-11d		1,092.			
	12	Total revenue. See instructions		989,931.	27,242.	0.	25,070.

	Check if Schedule O contains a r				
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	147,063.	147,063.		·
2	Grants and other assistance to domestic individuals. See Part IV, line 22	6,525.	6,525.		
3	Grants and other assistance to foreign organizations, foreign governments, and for- eign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	231,232.	155,527.	57,645.	18,060.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described				
-	in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	368,649.	305,793.	10,964.	51,892.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	14,217.	11,489.	1,691.	1,037.
9	Other employee benefits	52,251.	42,223.	6,215.	3,813.
10	Payroll taxes				
11	Fees for services (nonemployees):	45,994.	37,167.	5,471.	3,356.
	Management				
	Legal				
	Accounting	8,300.	6,806.	996.	498.
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule 0.)	21,740.	21,725.	15.	
12	Advertising and promotion.	11,353.	11,353.		
13	Office expenses	55,100.	51,523.	2,301.	1,276.
14	Information technology	8,857.	4,457.	3,756.	644.
15	Royalties		- / - • • •		
16	Occupancy	4,094.	3,571.	314.	209.
17	Travel	16,707.	14,820.	534.	1,353.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	10,707	11/0201		1,000.
19	Conferences, conventions, and meetings	3,949.	3,949.		
20	Interest	,	,		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	11,049.	9,060.	1,326.	663.
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 O.).				
a b	MISC_EXPENSE	3,422.	130.		3,292.
с С	+				
d					
-	+				
	All other expenses.	1 010 502	022 101	01 000	0.000
25	Total functional expenses. Add lines 1 through 24e	1,010,502.	833,181.	91,228.	86,093.
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)				
BVV					Form 990 (2022)

## Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX...

Page 11

Form 990 (2022) Earth Force Inc. 52-1830873 Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X ..... (A) Beginning of year (B) End of year Cash – non-interest-bearing. 1 395,272. 1 1,018,913 Savings and temporary cash investments..... 2 231,724. 2 3,114. Pledges and grants receivable, net..... 3 3 156,756 123,921. Accounts receivable, net ..... 4 4 Loans and other receivables from any current or former officer, director, 5 controlled entity or family member of any of these persons 5 Loans and other receivables from other disqualified persons (as defined under 6 section 4958(f)(1)), and persons described in section 4958(c)(3)(B) ..... 6 7 Notes and loans receivable, net. 7 Inventories for sale or use..... 8 8 Assets Prepaid expenses and deferred charges..... 9 11,174 10,280. 9 Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D ..... 10a 10a 10c Investments – publicly traded securities. 11 406,454. 11 12 Investments – other securities. See Part IV, line 11..... 12 13 Investments – program-related. See Part IV, line 11..... 13 14 10,430. 14 Intangible assets..... 15 Other assets. See Part IV, line 11..... 15 1,189,957. 16 1,178,081. 16 Total assets. Add lines 1 through 15 (must equal line 33).... 17 Accounts payable and accrued expenses ..... 31,282 17 28,633 18 18 Grants payable ..... 19 Deferred revenue 19 13,613. 14,573. 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D..... 21 Liabilities 22 Loans and other 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 ..... 22 Secured mortgages and notes payable to unrelated third parties ..... 23 23 Unsecured notes and loans payable to unrelated third parties..... 24 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 25 25 10,384. Total liabilities. Add lines 17 through 25..... 26 44,895 26 53,590. Organizations that follow FASB ASC 958, check here Х Fund Balances and complete lines 27, 28, 32, and 33. Net assets without donor restrictions 1,031,893 27 27 1,084,940. Net assets with donor restrictions 28 28 113,169 39,551. Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 5 29 Capital stock or trust principal, or current funds..... 29 Net Assets Paid-in or capital surplus, or land, building, or equipment fund..... 30 30

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31 32

33

TEEA0111L 09/01/22

Retained earnings, endowment, accumulated income, or other funds.....

Total net assets or fund balances.....

Total liabilities and net assets/fund balances.

1,178,081. Form 990 (2022)

1,124,491.

31

32

33

1,145,062

1,189,957.

Form	990 (	(2022)	Earth Force Inc. 52-1	830873		Pa	age <b>12</b>
Par	t XI	Reco	nciliation of Net Assets				
_		Check	if Schedule O contains a response or note to any line in this Part XI				
1	Total	revenue	e (must equal Part VIII, column (A), line 12)	1	9	89,9	€31.
2	Total	expense	es (must equal Part IX, column (A), line 25)	2	1,0	10,5	502.
3	Reve	nue less	expenses. Subtract line 2 from line 1	3	-	20,5	571.
4	Net a	issets or	fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,1	45,0	)62.
5	Net u	inrealize	d gains (losses) on investments	5			
6			ices and use of facilities	6			
7			xpenses	7			
8			adjustments	8			
9	Other	r change	is in net assets or fund balances (explain on Schedule O)	9			0.
10			fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,	10	1,1	24,4	191.
Par	t XII	Finan	cial Statements and Reporting				
		Check	if Schedule O contains a response or note to any line in this Part XII				
						Yes	No
1	Acco	unting m	nethod used to prepare the Form 990: Cash X Accrual Other				
	If the on So	organiza chedule	tion changed its method of accounting from a prior year or checked "Other," explain O.				
2a	Were	the org	anization's financial statements compiled or reviewed by an independent accountant?		2a		Х
		rate bas	k a box below to indicate whether the financial statements for the year were compiled or reviewed s, consolidated basis, or both: te basis Consolidated basis Both consolidated and separate basis	d on a			
b	Were	the ora	anization's financial statements audited by an independent accountant?		2b	Х	
-	lf "Ye	es," cheo , consol	k a box below to indicate whether the financial statements for the year were audited on a separat idated basis, or both: te basis Consolidated basis Both consolidated and separate basis	te			
c	lf "Ye reviev	s" to line w, or co	2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, mpilation of its financial statements and selection of an independent accountant?		2c	Х	
	on So	chedule					
	Guida	ance, 2 (	a federal award, was the organization required to undergo an audit or audits as set forth in the UC.F.R Part 200, Subpart F?		3a		Х
b			e organization undergo the required audit or audits? If the organization did not undergo the required audi plain why on Schedule O and describe any steps taken to undergo such audits		3b		
BAA			TEEA0112L 09/01/22		Form	<b>990</b> (	(2022)

SCHEDULE A (Form 990)

## **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

2022	
Open to Public Inspection	

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Ν

	-							
Name of the organization					Employer identifica			
Earth Force Inc. 52-1830873           Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.								
Part I Reason for Public Cha The organization is not a private found		<b>v</b>			1 1	ctions.		
, Ĕ	•	<b>0</b>		-	,			
1 A church, convention of church 2 A school described in sectio				D)(T)(A)(	ı <i>)</i> .			
3 A hospital or a cooperative h		•		0/6//1//	(Viii)			
4 A medical research organiza						ntor the bespital's		
name, city, and state:			rescribe			inter the hospital s		
5 An organization operated for section 170(b)(1)(A)(iv). (Co								
6 A federal, state, or local gov	ernment or governme	ental unit described in <b>s</b>	ection 1	<b>70(b)(</b> 1)	(A)(∨).			
7 X An organization that normally in section 170(b)(1)(A)(vi).	receives a substantial p Complete Part II.)	part of its support from a	governm	ental un	t or from the general pul	blic described		
8 A community trust described								
9 An agricultural research organ or university or a non-land-gra university:								
10 An organization that normall from activities related to its investment income and unre June 30, 1975. See section	exempt functions, sub lated business taxabl	oject to certain exception e income (less section	ns; and	(2) no r	nore than 33-1/3% of i	ts support from gross		
11 An organization organized a	nd operated exclusive	ely to test for public safe	ety. See	sectior	n 509(a)(4).			
12 An organization organized a or more publicly supported c lines 12a through 12d that d	organizations describe	ed in <b>section 509(a)(1)</b> o	ir <b>sectio</b>	n 509(a)	)(2). See section 509(a	ut the purposes of one <b>)(3).</b> Check the box on		
a Type I. A supporting organizati organization(s) the power to re complete Part IV, Sections A	on operated, supervise					g the supported on. <b>You must</b>		
b Type II. A supporting organiz management of the supporting must complete Part IV, Sect	organization vested in	ontrolled in connection the same persons that c	with its ontrol or	support manage	ed organization(s), by the supported organizat	having control or ion(s). <b>You</b>		
c Type III functionally integrated organization(s) (see instruct	. A supporting organizations). You must com	ion operated in connectio	n with, ai <b>A. D. an</b>	nd functio	onally integrated with, its	supported		
d Type III non-functionally integrated. The functionally integrated. The instructions). You must com	rated A supporting or	anization operated in cor	naction	with ite e	supported organization(c)	) that is not		
e Check this box if the organiz integrated, or Type III non-fu	ation received a writt	en determination from	he IRS					
f Enter the number of supported								
g Provide the following information	n about the supported	d organization(s).	Γ			i		
(i) Name of supported organization	<b>(ii)</b> EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) I organizat in your g docur	overning	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
			Yes	No				
(A)								
(B)								
<u>(</u> C)								
<u>(</u> D)								
<u>(E)</u>								
Total								

Par	t II Support Schedule for						(vi)		
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)									
Sec	tion A. Public Support								
begi	ndar year (or fiscal year nning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	<b>(c)</b> 2020	<b>(d)</b> 2021	<b>(e)</b> 2022	<b>(f)</b> Total		
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	923,082.	761,877.	1,449,706.	979,730.	937,619.	5,052,014.		
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.		
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.		
4	Total. Add lines 1 through 3	923,082.	761,877.	1,449,706.	979,730.	937,619.	5,052,014.		
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)						0.		
6	Public support. Subtract line 5 from line 4						5,052,014.		
Sec	tion B. Total Support								
begi	ndar year (or fiscal year nning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	<b>(c)</b> 2020	<b>(d)</b> 2021	<b>(e)</b> 2022	<b>(f)</b> Total		
7	Amounts from line 4	923,082.	761,877.	1,449,706.	979,730.	937,619.	5,052,014.		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	22,445.	20,139.	25,254.	29,440.	18,616.	115,894.		
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.		
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) See Part VI	12,492.	9,249.	10,017.	3,786.	1,092.	36,636.		
11	Total support. Add lines 7 through 10						5,204,544.		
12	Gross receipts from related activ	ities, etc. (see ins	tructions)				0.		
13	First 5 years. If the Form 990 is organization, check this box and								
Sec	tion C. Computation of Pul Public support percentage for 20	blic Support P	ercentage			1 1			
14 15	Public support percentage for 20 Public support percentage from 2	22 (line 6, column 2021 Schedule A	i (f), divided by li Part II_line 14	ne 11, column (f))			<u>97.07 %</u> 93.58 %		
	33-1/3% support test-2022. If the	he organization did	d not check the b	oox on line 13, and	d line 14 is 33-1/3	% or more, check	this box		
b	and stop here. The organization qualifies as a publicly supported organization.       X         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 stop here. The organization qualifies as a publicly supported organization								
17a	<b>10%-facts-and-circumstances te</b> or more, and if the organization the organization meets the facts	meets the facts-ar	nd-circumstances	s test. check this b	box and stop here	. Explain in Part \	√I how		
	<b>10%-facts-and-circumstances te</b> or more, and if the organization organization meets the facts-and	meets the facts-ar I-circumstances te	nd-circumstances st. The organizat	s test, check this b tion qualifies as a	ox and stop here publicly supported	Explain in Part	√I how the		
18	Private foundation. If the organiz	zation did not cheo	ck a box on line	13, 16a, 16b, 17a,	or 17b, check this	s box and see ins	tructions		
BAA						Schedule	A (Form 990) 2022		

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Schedule 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.)

Sec	tion A. Public Support						
	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions,						
	and membership fees received. (Do not include						
	any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities						
	furnished in any activity that is						
	related to the organization's tax-exempt purpose						
3	Gross receipts from activities						
•	that are not an unrelated trade						
	or business under section 513.						
4	Tax revenues levied for the organization's benefit and						
	either paid to or expended on						
_	its behalf						
5	The value of services or facilities furnished by a						
	governmental unit to the						
	organization without charge						
	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from						
	disqualified persons.						
b	Amounts included on lines 2						
	and 3 received from other than						
	disqualified persons that exceed the greater of \$5,000 or						
	1% of the amount on line 13						
	for the year						
-	Add lines 7a and 7b.						
8	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6	(4) 2010	(0) 2010	(0) 2020	(4) 2021		(i) Fotor
-	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from similar sources						
b	Unrelated business taxable						
-	income (less section 511						
	taxes) from businesses acquired after June 30, 1975						
c	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.)						
13	Total support. (Add lines 9,						
	10c, 11, and 12)	L					
14	First 5 years. If the Form 990 is organization, check this box and	for the organization stop here	on's first, second,	third, fourth, or	hitth tax year as a	section 501(c)(3)	
Sec	tion C. Computation of Pul						
-	Public support percentage for 20		•	ne 13, column (f	))	15	00
	Public support percentage from 2	•			•		00
	tion D. Computation of Inv						
17	Investment income percentage f				umn (f))	17	010
18	Investment income percentage f	•		-			010
	33-1/3% support tests-2022. If t						
	is not more than 33-1/3%, check	this box and sto	p here. The organ	nization qualifies	as a publicly supp	orted organization	
b	33-1/3% support tests-2021. If t						
~~	line 18 is not more than 33-1/3%		•	- '			
20	Private foundation. If the organized	zation aid not che	ск а box on line	14, 19a, or 19b, o	CRECK THIS BOX AND	i see instructions	

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 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

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3	a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
I	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 <b>Part VI</b> when and how the organization made the determination.	3b		
(	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 <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
4;	a 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.	4a		
I	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
	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 <b>Part VI</b> 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.	4c		
5	a 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 <b>Part VI</b> , 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).	5a		
I	<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
(	c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
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? <i>If "Yes," provide detail in <b>Part VI</b>.</i>	6		
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? <i>If "Yes," complete Part I of Schedule L (Form 990)</i> .	7		
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).	8		
9	a 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 <b>Part VI</b> .	9a		
I	<b>b</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? <i>If "Yes," provide detail in <b>Part VI.</b></i>	9b		
	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 <b>Part VI.</b>	9c		
10;	a 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.	10a		
I	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.)	10b		

Part IV Supporting Organizations (continued)		_	
		Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?			
a 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>b</b> A family member of a person described on line 11a above?	11b		
C A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.	11c		

#### Section B. Type I Supporting Organizations

Schedule A (Form 990) 2022

1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? *If "No," describe in Part VI how the supported organization 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.* 

Earth Force Inc.

2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.* 

#### Section 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

#### Section D. All Type III Supporting Organizations

		Yes	NO			
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 <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).						
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 voor 2 (f "Xos " describe in <b>Port V</b> the relative provident of the organization's income or assets at						
in this regard.						
C V C I E V C I	brganization'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? 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? <i>If "No," explain in Part VI how</i> <i>the organization maintained a close and continuous working relationship with the supported organization(s).</i> By reason of the relationship described on line 2, above, did the organization's supported organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played</i>	programization'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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i> 2         By reason of the relationship described on line 2, above, did the organization's supported organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played</i>	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? 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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i> By reason of the relationship described on line 2, above, did the organization's supported organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played</i>			

#### Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete line 3 below.*
- c The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions).

#### 2 Activities Test. Answer lines 2a and 2b below.

- a 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.
- 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.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a 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.
- **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.

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Yes

1

2

No

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	ganizati	ons	
1 Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizat	ust on No ions mus	v. 20, 1970 (explain ir t complete Sections A	n Part VI). <b>See</b> through E.
Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section 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 shor tax year or assets held for part of year):	ť		
a Average monthly value of securities	1a		
<b>b</b> Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
<b>3</b> Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C – Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 <b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

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Schedule A (Form 990) 2022

Pa	t V Type III Non-Functionally Integrated 509(a)(3) Su	pporting Organiza	tions (continued	d)	<u> </u>
Sec	tion D – Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exempt put	1			
2	Amounts paid to perform activity that directly furthers exempt purposes of in excess of income from activity	of supported organization	S,	2	
3	Administrative expenses paid to accomplish exempt purposes of su	pported organizations		3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - provide	details in <b>Part VI</b> )		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the organization in <b>Part VI</b> ). See instructions.	on is responsive (provide	details	8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sec	tion E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2022	ons	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reasonable cause required – <i>explain in Part VI</i> ). See instructions.				
3	Excess distributions carryover, if any, to 2022				
â	From 2017				
Ł	PFrom 2018				
C	From 2019				
	From 2020				
	e From 2021				
	f Total of lines 3a through 3e				
ç	Applied to underdistributions of prior years				
ł	Applied to 2022 distributable amount				
	i Carryover from 2017 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D, line 7: \$				
â	Applied to underdistributions of prior years				
Ł	Applied to 2022 distributable amount				
	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, <i>explain in <b>Part VI</b></i> . See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j and 4c.				
8	Breakdown of line 7:				
2	Excess from 2018				
t	Excess from 2019				
C	Excess from 2020				
	Excess from 2021				
e	Excess from 2022				

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Schedule A (Form 990) 2022

### Part II, Line 10 - Other Income

Nature and Source	2022	2021	2020	2019	2018
Total	\$ 1,092. \$ 1,092.	<u>\$ 3,786.</u> <u>\$ 3,786.</u>	\$ 10,017. \$ 10,017. \$	9,249. \$ 9,249. \$	12,492. 12,492.

SCHEDULE D (Form 990)		Sun	plemental Financial S	tatements			OMB No	o. 1545-0047
		Complet	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.					
Department of the Treasury Internal Revenue Service Go to www.irs.			Attach to Form 990. gov/Form990 for instructions ar	nd the latest inform	nation.		Open Inspe	to Public ction
	e of the organization					Employer id	dentification	
_								
	rth Force In					52-183		
Pa			nor Advised Funds or Otl "Yes" on Form 990, Part IV, line 6		ias or A	ccounts	•	
	oompiete		(a) Donor advised fu		<b>(b)</b> F	unds and	other acco	ounts
1	Total number at e	end of year		1105	(5)			5411(5
2		ntributions to (during year)						
3	Aggregate value of gra	ants from (during year)						
4	Aggregate value	at end of year						
5	Did the organizat are the organizat	ion inform all donors and do ion's property, subject to the	nor advisors in writing that the a organization's exclusive legal c	ssets held in donc	r advised	funds	Yes	No
6	for charitable pur	poses and not for the benefi	rs, and donor advisors in writing t of the donor or donor advisor,	or for any other pl	irpose cor	nferring _		No
Pa			· · · · · · · · · · · · · · · · · · ·				Yes	
га		vation Easements. if the organization answered	"Yes" on Form 990, Part IV, line 2	7.				
1			y the organization (check all tha					
	Preservation of	of land for public use (for exam	ple, recreation or education)	Preservation	of a histo	rically imp	ortant lan	id area
	Protection of	natural habitat		Preservation	of a certit	fied histori	c structur	е
		of open space						
2	Complete lines 2a last day of the ta		held a qualified conservation contri	bution in the form o	f a conser	vation ease	ement on th	ne
					ŀ	leld at the	End of th	ne Tax Year
i	<b>a</b> Total number of o	conservation easements			2a			
l	<b>b</b> Total acreage res	stricted by conservation ease	ments		2 b			
	c Number of conse	rvation easements on a certi	fied historic structure included in	ו (a)	2 c			
	historic structure	listed in the National Registe	n (c) acquired after July 25, 200 ar		2 d			
3	Number of conserv tax year	vation easements modified, trai	nsferred, released, extinguished, or	r terminated by the	organizatio	on during th	e	
4			onservation easement is located					
5	and enforcement	of the conservation easeme	garding the periodic monitoring, nts it holds?				Yes	No
6	Staff and voluntee	r hours devoted to monitoring,	inspecting, handling of violations,	and enforcing conse	ervation ea	sements di	iring the ye	ear
7	Amount of expense	es incurred in monitoring, inspe	ecting, handling of violations, and e	enforcing conservati	on easeme	ents during	the year	
8	Does each conse and section 170(h	rvation easement reported o )(4)(B)(ii)?	n line 2(d) above satisfy the req	uirements of section	on 170(h)(	(4)(B)(i)	Yes	No
9	In Part XIII, descuinclude, if application conservation easily application of the second seco	able, the text of the footnote	oorts conservation easements in to the organization's financial st	its revenue and e atements that des	xpense st cribes the	atement a organizati	nd balanc on's acco	e sheet, and unting for
Pa	rt III Organiz	zations Maintaining Co	llections of Art, Historical	Treasures, or	Other S	Similar A	ssets.	
	Complete	if the organization answered	"Yes" on Form 990, Part IV, line 8	3.				
1	historical treasure	es, or other similar assets he	r FASB ASC 958, not to report i Id for public exhibition, educatio al statements that describes thes	n, or research in f	ement and urtherance	balance s e of public	heet work service, p	s of art, provide in
ļ	historical treasures	s, or other similar assets held f s relating to these items:	r FASB ASC 958, to report in its or public exhibition, education, or r	esearch in furtherar	nce of publ	ic service,	provide the	e
	(i) Revenue incl	uded on Form 990, Part VIII,	line 1			\$		
~	(ii) Assets includ	led in Form 990, Part X				Ş		
2	If the organization amounts required	received or held works of art, I I to be reported under FASB	nistorical treasures, or other simila ASC 958 relating to these items	r assets for financia ::	I gain, pro	vide the fol	lowing	

<b>b</b> Assets included in Form 990, Part X		
BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	TEEA3301L 07/06/22	Sch

a Revenue included on Form 990, Part VIII, line 1.....

1

Schedule D (Form 990) 2022

\$

\$

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Schedule D (Form 990) 2022 Earth Fo			<b>.</b> .	52-183	-
Part III Organizations Maintain	ing Collectio	ns of Art, His	torical Treasures,	or Other Similar As	sets (continued)
3 Using the organization's acquisition, acc items (check all that apply):	ession, and other	records, check ar	ny of the following that n	nake significant use of its	collection
a Public exhibition			or exchange program		
b Scholarly research		e Other			
<b>c</b> Preservation for future generation					
4 Provide a description of the organization Part XIII.		1	Ū		
5 During the year, did the organization to be sold to raise funds rather than t	solicit or receive o be maintained	e donations of art	, historical treasures, or reanization's collection	or other similar assets	Yes No
Part IV Escrow and Custodial A reported an amount on Form 9	Arrangement	s. Complete if th			t IV, line 9, or
1 a Is the organization an agent, trustee, on Form 990, Part X?	custodian or oth	ner intermediary	for contributions or oth	er assets not included	Yes No
<b>b</b> If "Yes," explain the arrangement in Part				[	
					Amount
<b>c</b> Beginning balance				1c	
<b>d</b> Additions during the year					
<b>e</b> Distributions during the year					
f Ending balance					
2 a Did the organization include an amou					
<b>b</b> If "Yes," explain the arrangement in F	Part XIII. Check	nere if the explai	nation has been provid		
Part V Endowment Funds. Com	nlete if the orga	nization answered	Ves" on Form 990 Pa	art IV line 10	
	(a) Current year	(b) Prior year	1		(e) Four years back
1 a Beginning of year balance					
<b>b</b> Contributions					
c Net investment earnings, gains, and losses					
<b>d</b> Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
<b>g</b> End of year balance					
2 Provide the estimated percentage of t	-	end balance (lin	e 1g, column (a)) held	as:	
a Board designated or quasi-endowmer		%			
<b>b</b> Permanent endowment	0				
c Term endowment The percentages on lines 2a, 2b, and 2c	0	20/			
<b>3a</b> Are there endowment funds not in the po organization by:	ossession of the o	organization that a	re held and administered	d for the	Yes No
(i) Unrelated organizations					3a(i)
(ii) Related organizations					3a(ii)
<b>b</b> If "Yes" on line 3a(ii), are the related	organizations lis	sted as required	on Schedule R?		3b
4 Describe in Part XIII the intended use	s of the organiz	ation's endowme	nt funds.		
Part VI Land, Buildings, and Ed	quipment.				
Complete if the organization a	nswered "Yes" or	n Form 990, Part	IV, line 11a. See Form S	990, Part X, line 10.	
Description of property	<b>(a)</b> Cos (ir	t or other basis vestment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1 a</b> Land					
<b>b</b> Buildings					
c Leasehold improvements					
<b>d</b> Equipment					
e Other					-
Total. Add lines 1a through 1e. (Column (d)	) must equal Foi	m 990, Part X, c	oiumn (B), line 10c.)		0.

Schedule D (Form 990) 2022

BAA

Schedule D	(Form 990) 2022 Earth Force Inc.		52-1	830873	Page 3
Part VII	Investments – Other Securities.	Forme 000 Dout IV line	N/A 11h Cas Form 000 Dart V Line 10		
(a) Descri	Complete if the organization answered "Yes" on ption of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or er		110
• •	al derivatives	(b) Dook value		iu-or-year market var	ue
	held equity interests.				
(3) Other	4				
(A)					
(B)					
(C)					
(D)					
(E)					
<u>(F)</u>					
<u>(G)</u> (H)					
(l)					
	n (b) must equal Form 990, Part X, column (B) line 12.)				
Part VIII	Investments – Program Related.		N/A		
	Complete if the organization answered "Yes" on (a) Description of investment		11c. See Form 990, Part X, line 13.		atualua
(1)	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	nd-or-year mark	et value
(1) (2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10) Total (Colum	n (b) must equal Form 990, Part X, column (B) line 13.)				
Part IX	Other Assets.	N/A			
	Complete if the organization answered "Yes" on		11d. See Form 990, Part X, line 15.		
(1)	(a) Des	scription		(b) Book	value
(2)					<u> </u>
(3)					
(4)					
(5) (6)					<u> </u>
(7)					
(8)					
(9)					
(10)					<u> </u>
	umn (b) must equal Form 990, Part X, column (E	3) line 15.)			
Part X	Other Liabilities. Complete if the organization answered "Yes" on	Form 990, Part IV, line	11e or 11f. See Form 990. Part X. lir	ne 25.	
1.		ption of liability		(b) Book v	value
	al income taxes				
	SE COMMITMENTS - OPERATING LEAS	SE		1	0,384.
(3) (4)					
(5)					
(6)					
(7)					
(8)					
(9) (10)					
(10)					
	n (b) must equal Form 990, Part X, column (B) line 25.)			1	0,384.
	uncertain tay positions. In Part XIII, provide the text of the for				

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

Schedule D (Form 990) 2022 Earth Force Inc.	52-1830873	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	er Return.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	989,931.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments 2a		
b Donated services and use of facilities 2b		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.) 2d		
e Add lines <b>2a</b> through <b>2d</b>	2e	
3 Subtract line 2e from line 1	3	989,931.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		,
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	989,931.
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.	•	
1 Total expenses and losses per audited financial statements	1 ·	1,010,502.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		1,010,002.
a Donated services and use of facilities		
b Prior year adjustments.		
c Other losses.		
d Other (Describe in Part XIII.)		
e Add lines <b>2a</b> through <b>2d</b>	2e	
3 Subtract line 2e from line 1.		1,010,502.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		1,010,302.
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	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		1,010,502.
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.

### Part X - FASB ASC 740 Footnote

Earth Force, Inc. is exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code, except on net income derived from unrelated business activities. During 2023, the Organization had no unrelated business activities and believes that it has appropriate support for any tax positions taken, and as such, does not have any uncertain tax positions that are material to the financial statements. The Organization's federal tax return (Form 990) for 2023 is subject to

examination by the IRS, generally for three years after the return is filed. BAA Schedule D (Form 990) 2022

SCHEDULE I	EDULE I Grants and Other Assistance to Organizations,			OMB No. 1545-0047				
(Form 990)	Governments, and Individuals in the United States					2022		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Attach to Form 990.						Open to Public	
Department of the Treasury Internal Revenue Service		Go to www.irs.gov/Form990 for the latest information.						Inspection
Name of the organization	•						Employer identifi	
Earth Force In							52-18308	73
Part I General In								
the selection crite	eria used to award t	he grants or assistance	e?	assistance, the grantees				X Yes No
				inds in the United States.				
				and Domestic Gov more than \$5,000. I				
<b>1 (a)</b> Name and add or gove	ress of organization ernment	<b>(b)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Brightways Lear	ning							
3700 S. Russell								RISE Challenge
Missoula, MT 59		45-0492824		42,847.	0.			subaward
(2) Environmental E								DICE Challenge
<u>1505 N Broadway</u> Urbana, IL 6180		36-2837731		46,990.	0.			RISE Challenge subaward
(3)		30 2037731		40,550.	0.			Subawara
<u>(4)</u>								
(5)								
(5)								
(6)								
(7)								
(8)								
(0)								
2 Enter total number	er of section 501(c)	(3) and government or	ganizations listed	in the line 1 table		<u> </u>		2
3 Enter total number	er of other organizat	tions listed in the line	1 table		· · · · · · · · · · · · · · · · · · ·	<u></u>	<u></u>	0
			/					

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

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OMB No. 1545-0047

52-1830873

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 Stipends	58	6,525.			
2					
3					
4					
5					
6					
7					
Part IV Supplemental Information. Provi	de the information	n required in Part I	, line 2; Part III, co	lumn (b); and any oth	er additional information.

#### Part IV - Additional Supplemental Information

We hold an annual financial training webinar for subgrantees. We require quarterly

financial status reports and conduct periodic documentation/compliance checks.

Onen to Bublic
Open to Public
Inspection

OMB No. 1545-0047

2022

Earth Force Inc.

#### Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, Directors, Etc.

Vince Meldrum is an investor in the company owned by Michael Evans.

#### Form 990, Part VI, Line 11b - Form 990 Review Process

The 990 is provided to all board members for comment prior to filing.

#### Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

The Organization has an explicit conflict of interest policy in its employee

handbook and for board members. Issues raised around a conflict of interest are

taken to the person's supervisor for determination, or to the board.

#### Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management

The CEO receives an annual performance review by the board executive committee who

may collect information from the staff, board members, the CEO's self-evaluation,

and salary surveys of other national nonprofit CEOs. This review is used to assess

compensation, with the board approving any compensation adjustment.

#### Form 990, Part VI, Line 17 - List of States which this Return is Filed

CA CO DE DC FL IL KS KY MA ME MD MI MN NJ NM NY OH PA TN VA WA WV WI AL AR RI CT GA SC MS UT NC OR OK ND NH

#### Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

Documents are available on the Organizations website or upon request by email or on-site.