Form	990
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** PUBLIC DISCLOSURE COPY ** Return of Organization Exempt From Income Tax

OMB No. 1545-0047 nnr <u>.</u>_ ublic ion

For	m J	J U	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue C			
Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.					Open to Public Inspection	
-			ar year, or tax year beginning and e			Inspection
	Check if applicab		organization		D Employer identifica	tion number
â						
	Addre		H DAY NETWORK INC			
	Name chang	ge Doing bu	isiness as		13-3798288	3
	Initial	Number		Room/suite	E Telephone number	
	Final return		-	00	(202) 518-	
_	termin ated		own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	8,150,797.
	returr Appli	WASH.	INGTON, DC 20036		H(a) Is this a group retu	
	tion pendi	F Name ar	nd address of principal officer: KATHLEEN ROGERS		for subordinates? H(b) Are all subordinates inclu	
<u> </u>	Tay.ov	empt status:		527	If "No," attach a lis	
	Websi			JZ1	H(c) Group exemption	
		f organization:		L Year o	of formation: 1994 M	
	art I	Summary			I	
	1	Briefly describ	e the organization's mission or most significant activities: $\ \underline{ ext{THE}} \ \ ext{M}$	ISSIO	N OF EARTH DA	Y
Activities & Governance			, INC. IS TO BROADEN AND DIVERSIFY			
rna	2	Check this box	if the organization discontinued its operations or dispose	d of more	than 25% of its net asset	
ove	3	12				
5	4		ependent voting members of the governing body (Part VI, line 1b) \dots			12
es	5		of individuals employed in calendar year 2022 (Part V, line 2a)			28
iviti	6		of volunteers (estimate if necessary)			0
Act	7a					0.
	b	Net unrelated	business taxable income from Form 990-T, Part I, line 11	<u></u>	Prior Year	Current Year
		Contributions	and grants (Dart)/III line 1b)		3,653,830.	7,449,938.
ani	8		and grants (Part VIII, line 1h) ce revenue (Part VIII, line 2g)		0.	0.
Revenue	10	0	ome (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, and 7d)		193.	37,764.
Re	11		(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		174,173.	663,095.
	12		add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,828,196.	8,150,797.
	13		nilar amounts paid (Part IX, column (A), lines 1-3)		244,299.	950,550.
	14		o or for members (Part IX, column (A), line 4)		0.	0.
ø	15		compensation, employee benefits (Part IX, column (A), lines 5-10)		2,021,319.	1,796,710.
penses	16a	Professional fu	Indraising fees (Part IX, column (A), line 11e)		0.	0.
			ng expenses (Part IX, column (D), line 25) 191, 25	7.		
ш	17	Other expense	s (Part IX, column (A), lines 11a-11d, 11f-24e)		1,411,865.	2,030,707.
	18	Total expenses	s. Add lines 13-17 (must equal Part IX, column (A), line 25)		3,677,483.	4,777,967.
	19	Revenue less e	expenses. Subtract line 18 from line 12		150,713.	3,372,830.
Net Assets or				Beg	ginning of Current Year	End of Year
Sset	20	Total assets (P			1,412,741.	5,461,221.
et A	21		(Part X, line 26)		323,462.	1,006,278.
Ż; P:	<u>22</u> art II	Net assets or f	und balances. Subtract line 21 from line 20		1,089,279.	4,454,943.
		-	dealars that I have examined this rature including accompanying schedules a	and atatama	nto and to the heat of my kr	owledge and helief it is

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Т

Sign	Signature of officer	Date			
-	LINDA MOORE, DIRECTOR OF FINANCE				
	Type or print name and title				
	Print/Type preparer's name Preparer's signature ///	Check PTIN			
Paid	SCOTT E. HALLBERG, CPA Just E. Hulby CPA 11/1	4/23 self-employed P01081188			
Preparer	Firm's name CALIBRE CPA GROUP, PLLC	Firm's EIN 47-0900880			
Use Only	Firm's address 7501 WISCONSIN AVENUE, SUITE 1200 WEST				
	BETHESDA, MD 20814	Phone no. 202-331-9880			
May the IRS discuss this return with the preparer shown above? See instructions					
232001 12-1	LHA For Paperwork Reduction Act Notice, see the separate instructions.	Form 990 (2022)			
q	SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION				

MISSION STATEMENT CONTINUAT

rm	990 (2022) EARTH DAY NETWORK IN		13-3798288 F	-age 2
Par	t III Statement of Program Service Accomplishme	ents		
	Check if Schedule O contains a response or note to any line	e in this Part III		X
	Briefly describe the organization's mission:	TNO TO DO DOADEN AND		
	THE MISSION OF EARTH DAY NETWORK, ENVIRONMENTAL MOVEMENT WORLDWIDE,			<u> </u>
	EFFECTIVE VEHICLE FOR PROMOTING A			<u>-</u>
	PURSUES THE MISSION THROUGH A COM	-		
	Did the organization undertake any significant program services d			
			Yes 2	No
	If "Yes," describe these new services on Schedule O.			
	Did the organization cease conducting, or make significant chang	es in how it conducts, any program services?	Yes Z	X No
	If "Yes," describe these changes on Schedule O.			
	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	t the amount of grants and allocations to othe	ers, the total expenses, and	
	revenue, if any, for each program service reported.			
		grants of \$) (Reve)
	EARTH DAY PROGRAM - ORGANIZE EVEN			0
	EDUCATE THE GENERAL PUBLIC AND CH			
	INTERNATIONALLY ABOUT THE POLLUTI			
	EARTH AND THE QUALITY OF ITS RESO			
	NEEDS. ORGANIZE AND CONDUCT THE A		TOR	
	ENVIRONMENTAL AWARENESS AROUND TH	OD AND WULLD.		
	(Code:) (Expenses \$ 285,500. including	grants of \$) (Reve	nue \$)
	CLIMATE LITERACY PROGRAM - DEVELO		JUM FOR SCHOOL	,
	CHILDREN TO ASSIST THEM IN UNDERS	TANDING THE ENVIRONMENT	AND THEIR	
	IMPACT ON IT. DELIVER THE PROGRAM	S TO TEACHERS FOR CLASS	SROOM USE.	
	ASSIST IN THE CONVERSION OF SCHOO		SCHOOLS" BY	
	PROVIDING MATERIALS AND EXPERTISE			
	PROVIDE EDUCATION TO THE INTERNAT			1D
	THE ACTIONS TO TAKE TO CURB DAMAG	E TO THE WORLD'S ECO-SY	STEMS.	
	(Code:) (Expenses \$1,265,453. including	grants of \$ 950,550.) (Reve	^	``
	(Code:) (Expenses \$1,205,453 including CANOPY PROGRAM - EARTH DAY NETWOR			<u> </u>
			ING ALLOWED	,
			IEIR	
	COMMUNITIES. BY PLANTING THE TREE			
		THE QUALITY OF THE AIF		
		X		
	Other program services (Describe on Schedule O.)			
	(Expenses \$ 1,063,435. including grants of \$) (Revenue \$)	
	Total program service expenses 4,064,740).		
			Form 990	(2022)
2	12-13-22	2		
1				1054
T	17 712177 71254 2	022.05000 EARTH DAY NET	WORK INC 7	1254

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Form 990 (2022) EARTH DAY NETWORK INC
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	L
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X 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 X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			37
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			77
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or 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			x
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, 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,	11a	х	
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total		- 13	<u> </u>
D		11b		x
~	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
C	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
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			
ŭ	Part X, line 16? If "Yes," complete Schedule D, Part IX	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	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
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	L
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		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	X 000	000
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 EARTH DAY NETWORK INC

 Part IV
 Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes, " complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 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	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 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
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>	00-		v
h	"Yes," complete Schedule L, Part IV	28a 28b		X X
	A family member of any individual described in line 28a? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	200		- 23
U	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		x
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
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	Х	
	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		X X
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? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i>	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	20	х	
Par	Note: All Form 990 filers are required to complete Schedule O t V Statements Regarding Other IRS Filings and Tax Compliance	38	11	I
	Check if Schedule O contains a response or note to any line in this Part V			
		<u></u>	Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 21			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b			
	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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Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
29	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		res	NO
24	filed for the calendar year ending with or within the year covered by this return 2a 28			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	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 Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	7.		v
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		<u> </u>
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		х
d		70		
e u		7e		х
f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	79 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
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:			
	Gross income from members or shareholders 11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	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.	10-		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
h	Enter the amount of reserves the organization is required to maintain by the states in which the			
U	organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		x
	If "Yes," has it filed a Form 720 to report these payments? <i>If</i> "No," <i>provide an explanation on Schedule O</i>	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
-	excess parachute payment(s) during the year?	15		х
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	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 activities			
	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
 Page

 to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

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

X		
	Х	

Sec	tion A. Governing Body and Management					
4		1.	12		Yes	No
та	Enter the number of voting members of the governing body at the end of the tax year	<u>1a</u>	12			
	If there are material differences in voting rights among members of the governing body, or if the governing					
b	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.	4	12			
-	Enter the number of voting members included on line 1a, above, who are independent	-	1			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship			2		х
2	officer, director, trustee, or key employee?			2		
3	Did the organization delegate control over management duties customarily performed by or under the of officers, directors, trustees, or key employees to a management company or other person?					x
4	Did the organization make any significant changes to its governing documents since the prior Form 9		s filod?	3		X
4 5	Did the organization become aware during the year of a significant diversion of the organization's ass			5		X
5 6	Did the organization become aware during the year of a significant diversion of the organization s ass Did the organization have members or stockholders?			6		X
0 7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap					- 23
14	more members of the governing body?	•		7a		x
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, st			14		
~	persons other than the governing body?			7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the yea			1.0		
	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 read					
•	organization's mailing address? If "Yes." provide the names and addresses on Schedule O			9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Code)			
		Vonuo	0000.)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such ch					
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body			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	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? // "Y	/es," d	escribe			
	on Schedule O how this was done			12c	X	
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 approva	l by in	dependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
	The organization's CEO, Executive Director, or top management official			15a		X
b	Other officers or key employees of the organization			15b		X
	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 arrangen	nent w	ith a			37
_	taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat		•			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	izatior	ı's			
<u> 600</u>	exempt status with respect to such arrangements?			16b		
	tion C. Disclosure	<u> </u>				
17	List the states with which a copy of this Form 990 is required to be filed <u>SEE SCHEDULE</u>		T (ال با من		
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar	10 990	-1 (section 501(c)(3)s	oniy)	avallat	bie
	for public inspection. Indicate how you made these available. Check all that apply.					
10	Own website Another's website X Upon request Other (explain		,	finer		
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co		or interest policy, and	man	JIdl	
20	statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's boo	ake on	d rocorde			
20	THE ORGANIZATION - (202) 518-0044	uns and	LIECOIUS			
	1752 N STREET, NW, 700, WASHINGTON, DC 20036					
020000				Form	990	(2022)
232006	12-13-22 7			1011		(2022)

2022.05000 EARTH DAY NETWORK INC

Form 990	(2022)
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Part VII	Compensation of Officers,	Directors, Trustees,	, Key Employees,	Highest C	ompensated
	Employees, and Independe	ent Contractors			

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

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

• 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.

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do		Pos	ition) than c		Reportable	Reportable	Estimated
	hours per	box,	, unles	ss per	rson i	s both	n an	compensation	compensation	amount of
	week		cer an I	d a d	irecto	r/trus [:]	tee)	from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	or dir	e			ated		organization	(W-2/1099-MISC/	from the
	related	ustee	truste		e	pensi		(W-2/1099-MISC/	1099-NEC)	organization
	organizations below	ual tri	ional		ploye	t com		1099-NEC)		and related organizations
	line)	ndividual trustee or director	nstitutional trustee	Officer	ƙey employee	Highest compensated employee	Former			organizations
(1) KATHLEEN ROGERS	40.00			0	×	1 0	ш			
PRESIDENT		1		х				213,908.	0.	14,148.
(2) SUSAN BASS	40.00									
SR. VICE PRESIDENT				Х				144,112.	0.	22,210.
(3) THOMAS COSGROVE	40.00									
CHIEF CONTENT OFFICER						X		128,934.	0.	18,449.
(4) GERALD TORES	1.00									
CHAIRMAN		Х		Х				0.	0.	0.
(5) DENIS HAYES	1.00									_
BOARD MEMBER		Х						0.	0.	0.
(6) NATHAN HURST	1.00									
BOARD MEMBER		Х						0.	0.	0.
(7) LOUIS SCHWARTZBERG	1.00									_
BOARD MEMBER		Х						0.	0.	0.
(8) JUSTIN KAMINE	1.00									_
BOARD MEMBER		Х						0.	0.	0.
(9) MOLLY O. ROSS	1.00									_
BOARD MEMBER		Х						0.	0.	0.
(10) LISE VAN SUSTEREN	1.00									_
BOARD MEMBER		Х						0.	0.	0.
(11) TROY WISEMAN	1.00									_
BOARD MEMBER		Х						0.	0.	0.
(12) SCOTT WEBB	10.00									-
CFO				X				0.	0.	0.
(13) DORCETA TAYLOR	1.00									-
BOARD MEMBER		Х						0.	0.	0.
(14) LYDIA CAMARILLO	1.00									•
BOARD MEMBER		Х						0.	0.	0.
(15) JAMES LEITNER	1.00									•
BOARD MEMBER	1	Х						0.	0.	0.
(16) PRESIDENT TARJA HALONEN	1.00								•	<u>^</u>
BOARD MEMBER		X				-		0.	0.	0.
										Form 990 (2022)

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Form 990 (2022)

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2022.05000 EARTH DAY NETWORK INC

	990 (2022) EARTH DAY	NETWOR	K	IN	C					13-379	9828	8 F	Page 8
Par	t VII Section A. Officers, Directors, Trus		oloy	ees,			ghes	t C	ompensated Employee	s (continued)			
	Name and title Average hours per box, unless person is both an or per Position (do not check more than one box, unless person is both an other card of director (firsten) Reportable compensation Rep								(E) Reportable compensation from related		(F) Estimat amount other	of	
		(list any hours for related organizations below line)	In dividual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC 1099-NEC)	/ c	mpens from th rganiza and rela ganizat	ne tion ted
1b	Subtotal								486,954.	().	54,8	07.
	Total from continuation sheets to Part VII Total (add lines 1b and 1c) Total number of individuals (including but n	, Section A	· · · · · · ·	· · · · · · · · · · · · · · · · · · ·					0 • 486,954 • eceived more than \$100.	().	54,8	0.
	compensation from the organization				-		,					Yes	3 No
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for se	uch individual									. 3		X
4 5	For any individual listed on line 1a, is the su and related organizations greater than \$150 Did any person listed on line 1a receive or a	,000? If "Yes,	" со	mple	ete S	Sche	edule	J f	or such individual		4	x	
Sec	rendered to the organization? <i>If "Yes," com</i> tion B. Independent Contractors	plete Schedule	e J fo	or su	ich p	oers	on .				5		X
1													
	(A) Name and business	address	NC	ONE	2			_	(B) Description of s	ervices	Com	(C) pensatio	on
2	Total number of independent contractors (ir \$100,000 of compensation from the organiz	•	ot lin	nitec	l to t	thos (ted	above) who received me	ore than	For	ո 990	(2022)

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		2022) EARTH DAY NET	WORK INC			13-3798	288 Page 9
Par	t VII	Statement of Revenue					
		Check if Schedule O contains a response of	or note to any lin		(5)	(2)	
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
υß	1 a	Federated campaigns 1a					
rant		Membership dues 1b					
, Mo							
ar A		Related organizations 1d					
is, (е	Government grants (contributions) 1e					
rior S	f	All other contributions, gifts, grants, and					
Contributions, Gifts, Grants and Other Similar Amounts			449,938.				
ont nd (g	Noncash contributions included in lines 1a-1f		7,449,938.			
<u></u>	n	Total. Add lines 1a-1f	Business Code	7,449,930.			
	2 a		Busiliess Code				
vice	b						
Ser	c						
am eve	d						
Program Service Revenue	е						
۲ ۲	f	All other program service revenue					
	g						
	3	Investment income (including dividends, intere		37,764.			27 761
	4	other similar amounts)		57,704.			37,764.
	4 5	Income from investment of tax-exempt bond por Royalties					
	5	(i) Real	(ii) Personal				
	6 a	Gross rents					
	b						
	с	Rental income or (loss) 6c					
	d	(, , , , , , , , , , , , , , , , , , ,					
	7 a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a					
•	b	Less: cost or other basis					
venue	•	and sales expenses 7b Gain or (loss) 7c					
Reve		Net gain or (loss)					
er H		Gross income from fundraising events (not					
Other	• •	including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18					
		Less: direct expenses					
		Net income or (loss) from fundraising events					
	9 a	Gross income from gaming activities. See					
	h	Part IV, line 19 9a Less: direct expenses 9b					
		Net income or (loss) from gaming activities	1				
		Gross sales of inventory, less returns					
		and allowances <u>10a</u>	1,340.				
	b	Less: cost of goods sold 10b					
	с	Net income or (loss) from sales of inventory		1,340.	1,340.		
S			Business Code				
eou	11 a		900099	651,142.	651,142.		
scellaneo <u>Revenue</u>		MISCELLANEOUS	900099	10,613.	10,613.		
Miscellaneous Revenue	с С						
Ξ		All other revenue	L	661,755.			
I	12	Total revenue. See instructions		8,150,797.	663,095.	0.	37,764.
232009				-	-		Form 990 (2022)

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 Form 990 (2022)
 EARTH DAY NETWORK INC

 Part IX
 Statement of Functional Expenses

	Section 501(c)(3) and 501(c)(4) organization	s must complete all columns. A	All other organizations must complete co	olumn (A).
--	--	--------------------------------	--	------------

0000	on 501(c)(3) and 501(c)(4) organizations must comp				
	Check if Schedule O contains a respons		his Part IX	(0)	
	not include amounts reported on lines 6b,	(A) Total expenses	(P) Program service	Management and	(D) Fundraising
7b,	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	108,800.	108,800.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
3	Ũ				
	organizations, foreign governments, and foreign	841,750.	0/1 750		
	individuals. See Part IV, lines 15 and 16	041,750.	841,750.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	430,736.	334,845.	41,777.	54,114.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,114,273.	916,656.	107,173.	90,444.
8	Pension plan accruals and contributions (include				· · · ·
5	section 401(k) and 403(b) employer contributions)	48,309.	38,739.	5,127.	4 443
•		82,782.	66,679.	17,534.	4,443.
9	Other employee benefits	120,610.	97,642.	12,349.	10,619.
10	Payroll taxes	120,010.	51,042.	14,343.	10,019.
11	Fees for services (nonemployees):	0.000			
а	Management	2,862.		2,862.	
b	Legal	90,874.		90,874.	
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g					
Ŭ	column (A), amount, list line 11g expenses on Sch 0.)	398,711.	367,241.	5,220.	26,250.
12	Advertising and promotion		,	- /	
	-	12,170.	2,775.	9,395.	
13	Office expenses	136,081.	82,691.	53,380.	10.
14	Information technology	130,001.	02,091.		10•_
15	Royalties		171 000		
16	Occupancy	217,255.	171,802.	45,453.	4 1 1 1 0
17	Travel	215,165.	198,315.	12,678.	4,172.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	72,643.	72,643.		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	59,558.		59,558.	
23	Insurance	,		,	
24	Other expenses. Itemize expenses not covered				
24	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A),				
	amount, list line 24e expenses on Schedule 0.)	717 600	716 247	1 261	
a	EVENT EXPENSE	717,608.	716,247.	1,361.	
b	TELEPHONE AND COMMUNICA	47,325.	42,062.	5,263.	
С	MISCELLANEOUS	30,987.	5,543.	25,444.	
d	BOOKS, DUES AND SUBSCRI	16,868.	310.	13,922.	2,636.
е	All other expenses	12,600.		12,600.	
25	Total functional expenses. Add lines 1 through 24e	4,777,967.	4,064,740.	521,970.	191,257.
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)				
					Earm 990 (2022)

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Form 990 (2022) 11

Form 990 (2022)
Part X Balance Sheet EARTH DAY NETWORK INC

		Check if Schedule O contains a response or note to any line in	this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1,033,511.	1	3,180,450.
	2	Savings and temporary cash investments		118,455.	2	1,401,006.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	2,468.
	5	Loans and other receivables from any current or former officer,	director,			
		trustee, key employee, creator or founder, substantial contribut	tor, or 35%			
		controlled entity or family member of any of these persons \dots			5	
	6	Loans and other receivables from other disqualified persons (as	s defined			
		under section 4958(f)(1)), and persons described in section 495	i8(c)(3)(B)		6	
sts	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use		4	8	
<	9	Prepaid expenses and deferred charges		15,700.	9	18,145.
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D 10a	395,697. 263,094.	100 202		120 602
				172,383.	10c	132,603.
	11	Investments - publicly traded securities		37,032.	11	29,866.
	12	Investments - other securities. See Part IV, line 11		14,490.	12	14,616.
	13	Investments - program-related. See Part IV, line 11			13	
	14	Intangible assets		21 170	14	692 067
	15	Other assets. See Part IV, line 11		<u>21,170.</u> 1,412,741.	15	<u>682,067.</u> 5,461,221.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	73,454.	16	152,827.	
	17	Accounts payable and accrued expenses	/3,434.	17 18	132,027.	
	18 19	Grants payable		10		
	20	Deferred revenue			20	
	20 21	Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Sche			20	
	22	Loans and other payables to any current or former officer, direct			21	
Liabilities	LL	trustee, key employee, creator or founder, substantial contribut				
bili					22	
Lia	23	Secured mortgages and notes payable to unrelated third partie			23	
	24	Unsecured notes and loans payable to unrelated third parties	l l l l l l l l l l l l l l l l l l l		24	
	25	Other liabilities (including federal income tax, payables to relate				
		parties, and other liabilities not included on lines 17-24). Compl				
		of Schedule D		250,008.	25	853,451.
	26	Total liabilities. Add lines 17 through 25		323,462.	26	1,006,278.
		Organizations that follow FASB ASC 958, check here	X			
Sec		and complete lines 27, 28, 32, and 33.				
and	27	Net assets without donor restrictions		169,022.	27	1,444,629.
Ba	28	Net assets with donor restrictions		920,257.	28	3,010,314.
pur		Organizations that do not follow FASB ASC 958, check here	•			
Ľ		and complete lines 29 through 33.				
s	29	Capital stock or trust principal, or current funds			29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund			30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other	funds	4 000 075	31	
Ne	32	Total net assets or fund balances		1,089,279.	32	4,454,943.
	33	Total liabilities and net assets/fund balances		1,412,741.	33	5,461,221.

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Form	1990 (2022) EARTH DAY NETWORK INC	13-3798	3288	Pag	_{ge} 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)		<u>8,150</u>				
2	Total expenses (must equal Part IX, column (A), line 25)		1,777				
3	Revenue less expenses. Subtract line 2 from line 1		3,372				
4							
5							
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
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 4	4,454	1,94	<u>43.</u>		
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: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.					
2a			2a		X		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a					
	separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis			37			
b	Were the organization's financial statements audited by an independent accountant?		2b	X	<u> </u>		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,					
	consolidated basis, or both:						
	X Separate basis Consolidated basis Both consolidated and separate basis				-		
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	-			v		
	review, or compilation of its financial statements and selection of an independent accountant?		2c		X		
-	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				v		
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required						
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		<u> </u>		

Form **990** (2022)

SCHEDULE A	١
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Department of the Treasury Internal Revenue Service

(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.

OMB No. 1545-0047
2022
Open to Public Inspection

Name of the o	organization
---------------	--------------

Nan	ne of t	the organization							identification number	
De			H DAY NETW						3-3798288	
Pa		Reason for Public (ee instruction:	S		
	organ	ization is not a private found		•		,				
1		A church, convention of ch				on 170(b)(1	l)(A)(i).			
2		A school described in sect								
3	\square	A hospital or a cooperative					•		41 1 ¹ 4 - 1 ¹	
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,								
_		city, and state:								
5		An organization operated for		liege or university owned	or operat	ed by a go	ivernmental ur	lit describe	ed in	
~		section 170(b)(1)(A)(iv).		e e stel u veit else suite sel in		70(1-)(4)(4)	(.)			
6 7	X	A federal, state, or local gov	-							
'		An organization that norma	-	mai part of its support i	ion a gove	ernmental	unit of from th	e general j	Sublic described in	
8		section 170(b)(1)(A)(vi). (C A community trust describe		(1)(A)(vi) (Complete Der	+ 11 \					
9	H	An agricultural research org				ad in coniu	inction with a	land-grant	college	
3		or university or a non-land-	•			-		-	-	
		university:	grant concyc or agrici			name, eny		ine conege		
10		An organization that norma	Ilv receives (1) more	than 33 1/3% of its supr	ort from c	ontributior	ns, membershi	p fees, and	d aross receipts from	
		activities related to its exer								
		income and unrelated busir		-					•	
		See section 509(a)(2). (Con		· · · · · · · · · · · · · · · · · · ·		•	, ,		,	
11		An organization organized a	and operated exclusi	ively to test for public sa	fety. See	section 50)9(a)(4).			
12		An organization organized a	and operated exclusi	ively for the benefit of, to	perform t	he functio	ns of, or to car	ry out the	purposes of one or	
		more publicly supported or	ganizations describe	d in section 509(a)(1) o	or section	509(a)(2).	See section 5	6 09(a)(3). (Check the box on	
		lines 12a through 12d that	describes the type of	f supporting organization	n and com	plete lines	12e, 12f, and	12g.		
а		Type I. A supporting orga	anization operated, s	upervised, or controlled	by its supp	ported org	anization(s), ty	pically by	giving	
		the supported organization	on(s) the power to reg	gularly appoint or elect a	majority c	of the direc	tors or trustee	es of the su	upporting	
		organization. You must o	complete Part IV, Se	ections A and B.						
b		Type II. A supporting org	anization supervised	or controlled in connec	tion with it	s supporte	ed organizatior	n(s), by hav	ving	
		control or management o			ame perso	ns that co	ntrol or manag	e the supp	ported	
	_	organization(s). You mus								
с		J Type III functionally inte						y integrate	ed with,	
	_	its supported organization								
d		J Type III non-functionally						-		
		that is not functionally int			•		-	an attentiv	/eness	
		requirement (see instructi	-	-						
е		Check this box if the orga functionally integrated, or					турет, турет	i, iype iii		
f	Ente	er the number of supported of	51	nany integrated support	ng organiz	ation.				
q		vide the following information	•	d organization(s)						
		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	anization listed ng document?	(v) Amount of	monetary	(vi) Amount of other	
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see in	structions)	support (see instructions)	
Tota	al									

Schedule A (Form 990) 2022

EARTH DAY NETWORK INC

13-3798288 Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization

fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support		Section A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total			
1	Gifts, grants, contributions, and									
	membership fees received. (Do not									
	include any "unusual grants.")	3176653.	3764161.	3310572.	3653830.	7449938.	21355154.			
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 \dots									
4	Total. Add lines 1 through 3	3176653.	3764161.	3310572.	3653830.	7449938.	21355154.			
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)						6516244.			
	Public support. Subtract line 5 from line 4.						14838910.			
Sec	ction B. Total Support									
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total			
7	Amounts from line 4	3176653.	3764161.	3310572.	3653830.	7449938.	21355154.			
8	Gross income from interest,									
	dividends, payments received on									
	securities loans, rents, royalties,									
	and income from similar sources \dots	25,308.	132,199.	125,634.	125,225.	37,764.	446,130.			
9	Net income from unrelated business									
	activities, whether or not the									
	business is regularly carried on									
10	Other income. Do not include gain									
	or loss from the sale of capital									
	assets (Explain in Part VI.)			6,576.	4,826.	661,755.	673,157.			
11	Total support. Add lines 7 through 10						22474441.			
12	Gross receipts from related activities,		,			12	88,507.			
13	First 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third, f	fourth, or fifth tax y	/ear as a section 5	01(c)(3)				
_	organization, check this box and stor									
	ction C. Computation of Publi		-			Г Г				
	Public support percentage for 2022 (I					14	<u>66.03 %</u>			
	Public support percentage from 2021					15	78.06 %			
16a	33 1/3% support test - 2022. If the o	•			14 is 33 1/3% or m	ore, check this bo				
	stop here. The organization qualifies		-							
b	33 1/3% support test - 2021. If the c				line 15 is 33 1/3%	or more, check th	is box			
	and stop here. The organization qual		•••							
17a	10% -facts-and-circumstances test									
	and if the organization meets the fact			-	-	VI how the organiz	zation			
	meets the facts-and-circumstances te	-		• • • •	-					
b	10% -facts-and-circumstances test	-					10% or			
	more, and if the organization meets th									
	organization meets the facts-and-circu		-		• •					
18	Private foundation. If the organizatio	n did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	o, check this box a					
						Schedule A	(Form 990) 2022			

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EARTH DAY NETWORK INC

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.)

See	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	2 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to						
-	or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to						
•	the organization without charge						
	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3 received from disqualified persons						
Ľ	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	2 (f) Total
	Amounts from line 6						
	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						
c	Add lines 10a and 10b						
	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.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	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	501(c)(3) orgai	nization,
		- 0					
	ction C. Computation of Public					<u> </u>	
	Public support percentage for 2022 (-	column (f))		15	%
	Public support percentage from 2021					16	%
	ction D. Computation of Inves					. _	
	Investment income percentage for 20					17	<u>%</u>
18	Investment income percentage from					18	%
198	33 1/3% support tests - 2022. If the						
F	more than 33 1/3%, check this box as 33 1/3% support tests - 2021. If the						
L.	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						
	23 12-09-22						dule A (Form 990) 2022
2020			16			001100	

EARTH DAY NETWORK INC

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes No

Part IV Supporting Organizations

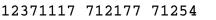
(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and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

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Schedule A (Form 990) 2022

2022.05000 EARTH DAY NETWORK INC

Schedule A	(Form 990) 2022	EARTH	DAY	NETWORK	INC
Part IV	Supporting Organi	zations (co	ntinuer	4)	

1

2

1

Yes No

		Yes	s 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?	1	
b	A family member of a person described on line 11a above? 11	,	
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide		
	detail in Part VI.	:	
Sec	tion B. Type I Supporting Organizations		
		Yes	s No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,		

	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
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

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	

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)*

Section D	. All Type III	Supporting	Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organizat	tion used to satisfy the Int	tegral Part Test during the v	ear (see instructions).
•	Check the box hext to the method that the organizat		legial Fait Test during the y	

- 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.*

- 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.* 232025 12-09-22

3b | | Schedule A (Form 990) 2022

2a

2b

3a

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Yes No

1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.				
	All other Type III non-functionally integrated supporting organizations mu	ist complete	Sections A through E.	T	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1			
2	Recoveries of prior-year distributions	2			
_3	Other gross income (see instructions)	3			
4	Add lines 1 through 3.	4			
5	Depreciation and depletion	5			
6	Portion of operating expenses paid or incurred for production or				
	collection of gross income or for management, conservation, or				
	maintenance of property held for production of income (see instructions)	6			
7	Other expenses (see instructions)	7			
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8			
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)	
1	Aggregate fair market value of all non-exempt-use assets (see				
	instructions for short tax year or assets held for part of year):				
а	Average monthly value of securities	1a			
b	Average monthly cash balances	1b			
	Fair market value of other non-exempt-use assets	1c			
d	Total (add lines 1a, 1b, and 1c)	1d			
е	Discount claimed for blockage or other factors				
	(explain in detail in Part VI):				
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
3	Subtract line 2 from line 1d.	3			
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,				
	see instructions).	4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by 0.035.	6			
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sect	ion C - Distributable Amount			Current Year	
1	Adjusted net income for prior year (from Section A, line 8, column A)	1			
2	Enter 0.85 of line 1.	2			
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3			
4	Enter greater of line 2 or line 3.	4			
5	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to				
	emergency temporary reduction (see instructions).	6			
7	7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see				

 Schedule A (Form 990) 2022
 EARTH DAY NETWORK INC

 Part V
 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

instructions).

Schedule A (Form 990) 2022

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Schedule A (Form 990) 2022

EARTH DAY NETWORK INC

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Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (continu	ued)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		1	
2	Amounts paid to perform activity that directly furthers exempt	ot purposes of supported			
	organizations, in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purpose	6	3		
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pr	ovide details in Part VI)		5	
6	Other distributions (<i>describe in</i> Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	he organization is responsive			
	(provide details in Part VI). See instructions.	5		8	
9	Distributable amount for 2022 from Section C, line 6			9	
	Line 8 amount divided by line 9 amount			10	
		(i)	(ii)		(iii)
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2022	ns	Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
а	From 2017				
b	From 2018				
с	From 2019				
d	From 2020				
е	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
i	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
-	line 7: \$				
a	Applied to underdistributions of prior years				
	Applied to 2022 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
	Remaining underdistributions for years prior to 2022, if				
J	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				
0	-				
	and 4b from line 1. For result greater than zero, <i>explain in</i>				
-	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
	Breakdown of line 7:				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
е	Excess from 2022				

Schedule A (Form 990) 2022

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Schedule A	(Form 990) 2022 EART	H DAY NETWOF	K INC	13-3798288 Page 8
Part VI	Supplemental Information Part IV, Section A, lines 1, 2, 3b, 3d	c, 4b, 4c, 5a, 6, 9a, 9b, 9 d 3; Part IV, Section E,	ines 1c, 2a, 2b, 3a, and 3b; Part IV, Se	t II, line 17a or 17b; Part III, line 12; ction B, lines 1 and 2; Part IV, Section C, /, line 1; Part V, Section B, line 1e; Part V, for any additional information.
	<u> </u>			
232028 12-09-2	2			Schedule A (Form 990) 2022
			21	

** PUBLIC DISCLOSURE COPY

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

Employer identification number

13-3798288

Schedule	В
(Form 990)	

Department of the Treasury

Name of the organization

Filers of:	Section:
Form 990 or 990-EZ	$\fbox{3}$ 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

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.

EARTH DAY NETWORK INC

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

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

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).

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

Schedule B (Form 990) (2022)



Internal Revenue Service

Organization type (check one):

EARTH DAY NETWORK INC

Name of organization

Employer identification number

13-3798288

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (d) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 1 X Person Payroll 109,090. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** 2 X Person Payroll 700,000. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 3 X Person Payroll 2,250,837. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 4 X Person Payroll 100,000. Noncash \$ (Complete Part II for noncash contributions.) (d) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 5 X Person Payroll 2,200,000. Noncash \$ (Complete Part II for noncash contributions.) (b) (c) (d) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 6 X Person Payroll 200,000. Noncash \$ (Complete Part II for noncash contributions.) 223452 11-15-22 Schedule B (Form 990) (2022)

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Schedule B (Form 990) (2022)

Name of organization

Employer identification number

13-3798288

EARTH DAY NETWORK INC

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
7		\$150,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
8_		\$129,980.	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	
9_		\$100,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
<u> 10</u>		\$100,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$100,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)	
223452 11-15	-22 25		Schedule B (Form 990) (2022)	

Page 2

2022.05000 EARTH DAY NETWORK INC

12371117 712177 71254

Name of organization

Page **3**

Employer identification number

13-3798288

EARTH DAY NETWORK INC

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
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(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
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(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
		 \$	

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12371117 712177 71254

2022.05000 EARTH DAY NETWORK INC

71254__1

Name of o	rganization			Employer identification number		
EARTH	DAY NETWORK INC			13-3798288		
Part III		ns to organizations described in sec	tion 501(c)(7), (8), or (10) t			
	completing Part III, enter the total of exclusively religious, cl Use duplicate copies of Part III if additional s	naritable, etc., contributions of \$1,000 or le	ess for the year. (Enter this info.	once.) \$		
(a) No.						
`from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held		
		(e) Transfer of gift				
	Transferee's name, address, an	d ZIP + 4	Relationship of tra	ansferor to transferee		
		[
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held		
Part I	(b) Fulpose of gift					
		(a) Transfor of with				
		(e) Transfer of gift				
	Transferee's name, address, and ZIP + 4		Relationship of tra	ansferor to transferee		
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			1			
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held		
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	(e) Transfer of gift					
	Transferee's name, address, and ZIP + 4 Relationship			ansferor to transferee		
(a) No. from						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held		
	(e) Transfer of gift					
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
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223454 11-15	5-22	1		Schedule B (Form 990) (2022)		
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2022.05000 EARTH DAY NETWORK INC 71254_1

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Partial Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) 3 Using the organization accession, and other records, check any of the following that make significant use of its continued of the control of the organization's occurs of the similar assets (continued) a Proble schibtion d Loan or exchange program b Scholarly research 0 Other The organization's collections and explain how they further the organization's observation to fur organization's observation of the organization's observation of the organization's observation of the organization's observation answered "Yes" on Form 990, Part XII. Partial is constrained as part of the organization's collection? Yes No Partial is constrained as part of the organization's collection? Yes No Partial is constrained as part of the organization's collection? Yes No Partial is the organization and partial is a completer the organization answered "Yes" on Form 990, Part XI, Ine 2, Ine 2	Sche		AY NETWORK						13-37	98288	3 Ра	age 2
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a Public exhibition d Can or exchange program b Scholary research e Other	3	Using the organization's acquisition, accessi	on, and other record	s, check a	ny of the f	ollowing that	make s	ignificant ι	use of its			
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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 solid to receive donations of art, historical treasures, or other similar assets 1 During the year, did the organization solid art muste, 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. 1 Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1 Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1 Is the organization include an amount on Form 990, Part X, line 21. 2 Both or organization include an amount on Form 990, Part X, line 21. for escrow or custodial account liability? 2 Did the organization include an amount on Form 990, Part X, line 21. for escrow or custodial account liability? 2 Did the organization include an amount on Form 990, Part X, line 21. for escrow or custodial account liability? 3 Did the organization include an amount on Form 990, Part X, line 21. for escrow or custodial account liability? 4 Ford Marma Error Mark S. Complete if the organization has been provided on Part XIII 4	а	Public exhibition	d									
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tops old to raise funds rather than to be maintained as part of the organization's collection? Yes No. 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. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 980, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 980, Part X, line 21. Amount Is a list the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Is a list the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Is a list the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Is a list the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Is a list the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Is a list the organization answered 'Yes' on Form 990, Part IV, line 10. Part V Endowment FundS. Complete if the organization answered 'Yes' on Form 990, Part IV, line 10. Image: stack (d) Three years back (e) Four years back id and organization answered 'Yes' on Form 990, Part IV, line 10. Ia Beginning of year balance Image: stack id and administered for the organization is the organization answered 'Yes' on Form 990, Part IV, line 10. Image: stack id and administered for	4	Provide a description of the organization's co	ollections and explair	n how they	/ further th	e organizatic	n's exer	npt purpo	se in Part	XIII.		
Part W 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 (ine 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X (ine 21. Ves No b If "Yes," explain the arrangement in Part XIII and complete the following table: Image: Complete intervention of the corganization is liste	5	During the year, did the organization solicit of	or receive donations of	of art, histo	orical treas	sures, or othe	er similar	assets		_		_
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? No b If 'Yes,' explain the arrangement in Part XIII and complete the following table: Amount 1d 1d 1d 1d 1d 1d 2 Didthouting the year 1d 1d 2 Didthouting the year 1f 1d 2 Didthouting the arrangement in Part XIII. Check here if the expanization has been provided on Part XIII Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (c) Two years back (c) Four years back and programs 1a Administrative expenses 1d 1d 1a Beginning of year balance (a) Current year end balance (line 1g, column (a) held as: 1d 1a Administrative expenses 1d 1d 1d 1b Administrative expenses 56 1	_			<u>u</u>		lection?				_		No
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Ves No b If 'Yes,'' explain the arrangement in Part XIII and complete the following table: Amount Image: Complete the following table: Amount c Beginning balance Image: Complete the following table: Amount Image: Complete the following table: Image: Complete the following table: Amount Image: Complete the comparison answered "Ves" on form 990, Part IX, line 10. Image: Complete the comparison answered "Ves" on form 990, Part IX, line 10. Image: Complete the comparison answered "Ves" on form 990, Part IX, line 10. Image: Complete the comparison answered "Ves" on form 990, Part IX, line 10. Image: Complete the comparison answered "Ves" on form 990, Part IX, line 10. Image: Complete the comparison answered "Ves" on form 990, Part IX, line 10. Image: Complete the comparison answered "Ves" on form 990, Part IX, line 10. Image: Complete the comparison answered "Ves" on form 990, Part IX, line	Par			ete if the o	organizatio	n answered '	'Yes" on	Form 990), Part IV, I	ine 9, or		
on Form 990, Part X? Yes No b If 'Yes,'' explain the arrangement in Part XIII and complete the following table: Amount c Beginning balance 1d d Additions during the year 1d e Detributions during the year 1d d Additions during the year 1d d Editions during the year 1d d Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes D bit Pres, "explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Part V Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part IV, line 10. (e) Four years back (e) Four years back if (e) Four years ba		•										
b If "Yes," explain the arrangement in Part XIII and complete the following table:	1 a								_	-		-
c Beginning balance Id d Additions during the year Id e Distributions during the year Id a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Ves No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Im Im Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990. Part XIII. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (e) Four years 1a Controbutions (a) Current year (b) Prior year (c) Two years back (e) Four years 1a Controbutions (b) Cont or ther (c) Two years back (e) Four year (f									L	Yes		No
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d Additions during the year 1d e Distributions during the year 1d 1 1 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No Dif '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 IV, line 10. a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back a Contributions (a) Current year (b) Prior year (c) Two years back (d) Four years back (e) Four years back a Grants or scholarships (a) Current year end balance (line 1g, column (a)) held as: (a) Contributions (a) Current year end balance (line 1g, column (a)) held as: (a) Eadignated or quasi-endowment % b Permanent endowment % % % (b) Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: (a) Cost end the organization by: (f) Unrelead organizations (g) (a) (a) (a) (a) (a) (a) (a) (a) (a) (a										Amount		
e Distributions during the year 1e f Ending balance 1f 2a 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 IV, line 10. f Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back b Contributions (b) Prior year (c) Two years back (d) Three years back (e) Four years back c Not investment earnings, gains, and losses (d) Current year (e) Two years back (d) Three years back (e) Four years back d Grants or scholarships (d) Current year (e) Two years back (e) Two years back (e) Four years back c Not other expenditures for facilities (d) Grant so r scholarships (e) Four years (f) Administrative expenses (f) Four years (f) Four years adak (f) Four years (f)												
f Ending balance												
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account lability? Ves No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Ves No Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (e) Four years back (d) Three years back (e) Four years back (e) Fouryears back four hat years back												
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(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance	_											
1a Beginning of year balance									ears hack	(e) Four	vears	hack
b Contributions	10	Paginning of year balance	(u) ourient you	(3) 1 1	or your	(0) 1 100 your	o buok	(G) 11100)		(0) 1 001	youro	buok
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 % b Permanent endowment % 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 b f Yes No 3a(i) 3a Are there endowment funds not in the possession of the organization that are held and administered for the organizations (ii) Inelated organizations 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 b b Buildings c Leasehold	la b											
d Grants or scholarships	U O											
e Other expenditures for facilities and programs	с d											
and programs												
f Administrative expenses	e											
g End of year balance	f											
2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment% b Permanent endowment% c Term endowment% 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 organizations by: (i) Unrelated organizations (ii) Related organizations (iii) Related organizations (iii) Related organizations (iii) Related organizations isted as required on Schedule R? (i) 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) basis (investment) basis (other) basis (other) (b) Cost or other basis (other) basis (other) (c) Accumulated depreciation 1a Land												
a Board designated or quasi-endowment% b Permanent endowment% c Term endowment% 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:			rent year end balance	e (line 1 a	column (a)) held as:						
b Permanent endowment% c Term endowment% 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					column (a)	/ 11010 23.						
c Term endowment % 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 (ii) Related organizations (ii) Related organizations (iii) Related organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (c) Accumulated depreciation (d) Book value basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (d) Book value (d) Cost or other basis (other) (d)	b	.										
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 (ii) Related organizations (iii) Related organizations (iii) Related organizations (iii) Related organizations (iii) Related organizations (iiii) Related organizations (iii) Related organizations (iii) Related organizations (iiii) Related organizations (iii) Related organizations (iiii) Related organizations (iii) Related organizations (iiii) Related organizations (iii) Related organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (c) Accumulated depreciation (d) Book value (ii) All (ii) All (iii) All	c											
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 (ii) Related organizations (ii) Related organizations (iii) Complete in the related organization's endowment funds. Part VI Land, Buildings, and Equipment. (c) Accumulated depreciation (d) Book value (d) Book value (d) Book value (e) Lasehold improvements (f) Oso (f) Oso (f) Oso (f) Oso (f) (f) Oso (f) Oso (f) O	•		-									
organization by: Yes No (i) Unrelated organizations 3a(i) 3b 3c	3a			ation that a	are held ar	nd administer	ed for th	ne				
(ii) Related organizations 3a(ii) b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 3b 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) Cost or other basis (other) (c) Accumulated depreciation 1a Land		· · · ·	0							ſ	Yes	No
(ii) Related organizations 3a(ii) b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 3b 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) Cost or other basis (other) (c) Accumulated depreciation 1a Land		(i) Unrelated organizations								3a(i)		
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 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) Cost or other basis (other) (c) Accumulated depreciation 1a Land										3a(ii)		
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) Cost or other basis (other) (c) Accumulated depreciation 1a Land	b	If "Yes" on line 3a(ii), are the related organiza	ations listed as requir	ed on Sch	edule R?					3b		
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land	4											
Description of property(a) Cost or other basis (investment)(b) Cost or other basis (other)(c) Accumulated depreciation(d) Book value1a Land	Par	t VI Land, Buildings, and Equipm	ient.									
basis (investment) basis (other) depreciation 1a Land		Complete if the organization answere	d "Yes" on Form 990), Part IV, I	line 11a. S	ee Form 990	, Part X,	line 10.				
b Buildings 248,630. 116,027. 132,603. c Leasehold improvements 110,399. 110,399. 0. e Other 36,668. 36,668. 0.		Description of property			• •		• •		ed	(d) Bool	k value	Э
b Buildings 248,630. 116,027. 132,603. c Leasehold improvements 110,399. 110,399. 0. e Other 36,668. 36,668. 0.	1a	Land										
c Leasehold improvements 248,630. 116,027. 132,603. d Equipment 110,399. 110,399. 0. e Other 36,668. 36,668. 0.	-											
d Equipment 110,399. 110,399. 0. e Other 36,668. 36,668. 0.	с									132	2,60	
e Other												
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)					3	6,668.		36,6	68.		-	
	Total	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	<u>X. column</u>	<u>(B), line 1</u>	<u>))</u>				132	2,60	03.

Schedule D (Form 990) 2022

232052 09-01-22

Schedule D) (Form 990) 2022 (EARTH	DAY	NETWORK	INC

Part VII Investments - Other Securities. 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) (c) Method of valuation: Cost or end-of-year market value (b) Book value (1) Financial derivatives (2) Closely held equity interests (3) Other (A) (B) (C) (D) (E) (F) (G) (H) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related. Complete if the organization answered "Yes" 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-of-year market value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13. Part IX Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value SECURITY DEPOSIT 21,170 (1) RIGHT OF USE ASSET - OPERATING LEASE 660,897 (2) (3) (4) (5) (6) (7) (8) (9) 682,067 Total. (Column (b) must equal Form 990, Part X, col. (B) 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, line 25. (a) Description of liability (b) Book value 1 (1) Federal income taxes 853,451 OPERATING LEASE (2)(3) (4) (5) (6) (7) (8)

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

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

Schedule D (Form 990) 2022

853,451.

232053 09-01-22

(9)

Sche	dule D (Form 990) 2022 EARTH DAY NETWORK INC			13-3	3798288	Page 4
	t XI Reconciliation of Revenue per Audited Financial Statemer	nts With F	Revenue per Re			<u> </u>
	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	8,143	,631.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a	-7,166.			
b	Donated services and use of facilities					
с	Recoveries of prior year grants					
d						
е	Add lines 2a through 2d			2e	-7	,166.
3	Subtract line 2e from line 1			3	8,150	<u>,797.</u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b				
с	Add lines 4a and 4b			4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	8,150	,797.
Pa	t XII Reconciliation of Expenses per Audited Financial Stateme		Expenses per l	Returr	1.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total expenses and losses per audited financial statements			1	4,777	,967.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	2a		_		
b	Prior year adjustments	2b		_		
С	Other losses	2c		_		
d	Other (Describe in Part XIII.)	2d				
е	Add lines 2a through 2d			2e		0.
3	Subtract line 2e from line 1			3	4,777	<u>,967.</u>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b				
с	Add lines 4a and 4b			4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	4,777	,967.
Pa	rt 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.

232054 09-01-22

Name of the organization					Employer ident	ification number
EARTH DAY NETWO	RK INC				13-37982	88
		ctivities Out	side the United States. Compl	ete if the organ	ization answered '	Yes" on
Form 990, Part IV						
		n maintain recor	ds to substantiate the amount of its gra	ants and other	assistance,	
the grantees' eligibility for	or the grants or a	assistance, and	the selection criteria used to award the	grants or assis	stance?	Yes X No
	ribe in Part V the	e organization's	procedures for monitoring the use of its	s grants and ot	her assistance out	side the
United States.						
			an be duplicated if additional space is r	1		
(a) Region	(b) Number of offices	(c) Number of employees,	(d) Activities conducted in the region (by type) (such as, fundraising, pro-		vity listed in (d) gram service,	(f) Total expenditures
	in the region	agents, and independent	gram services, investments, grants to		e specific type	for and
		contractors	recipients located in the region)		(s) in the region	investments in the region
		in the region				
				ACTIVITIES	SURROUNDING	
EAST ASIA AND THE				THE ANNUAL		
PACIFIC			PROGRAM SERVICES	EVENTS		702,950.
EUROPE (INCLUDING						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
ICELAND & GREENLAND)				ACTIVITIES	SURROUNDING	
- ALBANIA, ANDORRA,				THE ANNUAL		
AUSTRIA, BELGIUM			PROGRAM SERVICES	EVENTS		10,500.
NORTH AMERICA -						,
CANADA AND MEXICO,				ACTIVITIES	SURROUNDING	
BUT NOT THE UNITED				THE ANNUAL	EARTH DAY	
STATES			PROGRAM SERVICES	EVENTS		5,000.
SOUTH AMERICA -						
ARGENTINA, BOLIVIA,				ACTIVITIES	SURROUNDING	
BRAZIL, CHILE,				THE ANNUAL	EARTH DAY	
COLUMBIA, ECUADOR,			PROGRAM SERVICES	EVENTS		20,000.
SUB-SAHARAN AFRICA -						
ANGOLA, BENIN,					SURROUNDING	
BOTSWANA, BURKINA				THE ANNUAL	EARTH DAY	
FASO,			PROGRAM SERVICES	EVENTS		103,300.
3 a Subtotal	0	0				841,750.
b Total from continuation						
sheets to Part I	0	0				٥.
c Totals (add lines 3a						
and 3b)	0	0				841,750.

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

232071 10-17-22

Schedule F (Form 990) 2022

Complete if the organization answered "Yes" on Form 990, Part IV, I
Attach to Form 990.

OMB No. 1545-0047 **Statement of Activities Outside the United States** ine 14b, 15, or 16. **Open to Public** Inspection

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

Department of the Treasury Internal Revenue Service

SCHEDULE F (Form 990)

Page 2

Schedule F (Form 990) 2022

Part II 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) IRS code section and EIN (if applicable)	(c) 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)
		SUB-SAHARAN						
		AFRICA - ANGOLA,	TREE PLANTING IN					
		BENIN, BOTSWANA,	INDIA FOR CANOPY					
		BURKINA FASO	PROJECT	93,300.	WIRE	Ο.		
		EUROPE (INCLUDING						
		ICELAND &						
		GREENLAND) -	TREE PLANTING IN 10					
		ALBANIA, ANDORRA,	EUROPEAN CITIES	10,500.	WIRE	Ο.		
		SOUTH AMERICA -						
		ARGENTINA,	TREE PLANTING IN					
		BOLIVIA, BRAZIL,	MEXICO FOR CANOPY					
		CHILE, COLUMBIA,	PROJECT	10,000.	WIRE	Ο.		
			TREE PLANTING IN					
		EAST ASIA AND	INDIA FOR THE CANOPY					
		PACIFIC	PROJECT	680,150.		0.		
		SOUTH AMERICA -						
		ARGENTINA,	TREE PLANTING IN					
		BOLIVIA, BRAZIL,	BRAZIL FOR THE CANOPY					
		CHILE, COLUMBIA,	PROJECT	10,000.		0.		
			TREE PLANTING IN					
		EAST ASIA AND	BANGLADESH FOR CANOPY					
		PACIFIC	PROJECT	22,800.		0.		
. .		I			I			
			recognized as charities by the		-			
exempt 501(c)(3) orga 3 Enter total number of			or counsel has provided a sect	tion 501(c)(3) equ	uivalency letter	🕨 _		

(h) Method of valuation (book, FMV, appraisal, other) (a) Type of grant or assistance (b) Region recipients cash grant cash disbursement noncash noncash assistance assistance

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Schedule F (Form 990) 2022

(c) Number of

(d) Amount of

Part III can be duplicated if additional space is needed.

Schedule F (Form 990) 2022

EARTH DAY NETWORK INC

(f) Amount of

(g) Description of

(e) Manner of

Page 3

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If</i> "Yes," <i>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)</i>	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? <i>If</i> "Yes," <i>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)</i>	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? <i>If</i> "Yes," <i>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)</i>	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? <i>If</i> "Yes," <i>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)</i>	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," <i>the organization may be required to separately file Form 5713, International Boycott Report (see</i> <i>Instructions for Form 5713; don't file with Form 990)</i>	Yes	X No

Schedule F (Form 990) 2022

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2:

THE ORGANIZATION RECEIVES GRANT PROPOSALS FROM THE GRANTEES AND UPON

ACCEPTANCE THE GRANTEE IS REQUIRED TO PROVIDE A REPORT ON THE USE OF

FUNDS AND AREAS THAT WERE PLANTED UNDER GRANTS. MANY GRANTS ARE PAID ON

A PROGRESS OF WORK BASIS AFTER THE REPORT IS RECEIVED.

Schedule F (Form 990) 2022

232075 10-17-22

SCHEDULE I (Form 990)	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.										
	Compl	ete if the organization			rt IV, line 21 or 22.						
Department of the Treasury Internal Revenue Service											
ame of the organization Employer identification number											
	EARTH DAY NETWORK INC 13-3798288										
Part I General Information on Grants a											
1 Does the organization maintain records	1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection										
criteria used to award the grants or assi	stance?						X Yes No				
2 Describe in Part IV the organization's pr	ocedures for monit	oring the use of grant	funds in the United	States.							
Part II Grants and Other Assistance to	-				anization answered "Y	es" on Form 990, Part	IV, line 21, for any				
recipient that received more than	1	-	-		(f) Method of	() >	(1) 2 (1)				
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance				
TREES FOR THE FUTURE											
PO BOX 7027	50 1644060	501 (7) (2)	102.000				TREE PLANTING FOR CANOPY				
SILVER SPRING, MD 20907	52-1644869	501(C)(3)	103,800.	0.			PROJECT				
2 Enter total number of section 501(c)(3) a	nd government or	ganizations listed in the	e line 1 table				2.				

2 Enter total number of section 50 (c)(3) and government organizations listed in the
 3 Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2022

Schedule | (Form 990) 2022 EARTH DAY NETWORK INC

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 non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

THE ORGANIZATION RECEIVES GRANT PROPOSALS FROM THE GRANTEES AND UPON

ACCEPTANCE THE GRANTEE IS REQUIRED TO PROVIDE A REPORT ON THE USE OF FUNDS

AND AREAS THAT WERE PLANTED UNDER GRANTS. MANY GRANTS ARE PAID ON A

PROGRESS OF WORK BASIS AFTER THE REPORT IS RECEIVED.

13-3798288

SC	HEDULE J	Compensation Information	1	OMB No. 1	1545-004	47
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		20	20	
		Compensated Employees		20	22	-
Dopo	tmont of the Treesury	Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.		Open to	Publ	ic
	tment of the Treasury al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe	ction	
Nam	e of the organization	1	Employer id			mber
		EARTH DAY NETWORK INC	13-3	79828	8	
Pa	rt I Question	s Regarding Compensation				
					Yes	No
1a	Check the appropri	ate box(es) if the organization provided any of the following to or for a person listed on Form	990,			
	Part VII, Section A,	line 1a. Complete Part III to provide any relevant information regarding these items.				
	First-class or c	harter travel Housing allowance or residence for perso	nal use			
	Travel for com	panions Payments for business use of personal re	sidence			
	_	ation and gross-up payments	S			
	Discretionary	spending account Personal services (such as maid, chauffer	ur, chef)			
b	•	on line 1a are checked, did the organization follow a written policy regarding payment or				
		provision of all of the expenses described above? If "No," complete Part III to explain		1b		
2		n require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2		
~	he alter da sudatada ditera					
3		ny, of the following the organization used to establish the compensation of the organization's				
		ector. Check all that apply. Do not check any boxes for methods used by a related organizati	Shito			
	establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Written employment contract					
	·	a committee Written employment contract				
	·	ther organizations X Approval by the board or compensation of	ommittoo			
			Ommittee			
4	During the year did	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
•	organization or a re					
а	•	e payment or change-of-control payment?		4a		x
b		eive payment from a supplemental nonqualified retirement plan?				X
с	•	eive payment from an equity-based compensation arrangement?		4.		X
		nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
	,					
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5	For persons listed of	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n			
	contingent on the r	evenues of:				
а	The organization?			5a		X
		ation?				X
		or 5b, describe in Part III.				
6	For persons listed of	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n			
	contingent on the r	et earnings of:				
а	The organization?			6a		X
		ation?				X
	If "Yes" on line 6a o	or 6b, describe in Part III.				
7		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments				
		nes 5 and 6? If "Yes," describe in Part III		7		X
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	ıe			
				8		X
9		id the organization also follow the rebuttable presumption procedure described in				
		1 53.4958-6(c)?				
LHA	For Paperwork R	eduction Act Notice, see the Instructions for Form 990.	Sched	ule J (Forn	n 990)	2022

232111 10-18-22

13-3798288

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

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

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

(A) Name and Title		(B) Breakdown of W	/-2 and/or 1099-MIS compensation	C and/or 1099-NEC	other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) KATHLEEN ROGERS	(i)	213,908.	0.	0.	12,587.	1,561.	228,056.	0.
PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) SUSAN BASS	(i)	144,112.	0.	0.	9,392.	12,818.	166,322.	0.
SR. VICE PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2022

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Schedule J (Form 990) 2022

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.



EARTH DAY NETWORK INC

13-3798288

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

WORLDWIDE, AND TO MOBILIZE IT AS THE MOST EFFECTIVE VEHICLE FOR

PROMOTING A HEALTHY, SUSTAINABLE ENVIRONMENT.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

AND CONSUMER ACTIVISM CAMPAIGNS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

VARIOUS OTHER PROGRAMS TO PROMOTE THE MISSION OF EDN

EXPENSES \$ 1,063,435. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

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

THE ORGANIZATION CIRCULATES FORM 990 TO THE FINANCE COMMITTEE OF THE BOARD

OF DIRECTORS FOR INITIAL REVIEW. THEN, PRIOR TO THE SUBMISSION OF THE

RETURN IT IS CIRCULATED TO ALL MEMBERS OF THE BOARD OF DIRECTORS.

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

AT LEAST ANNUALLY, THE ORGANIZATION POLLS BOARD MEMBERS, OFFICERS AND KEY

STAFF MEMBERS ON THE EXISTENCE OF ANY CONFLICTING INTERESTS.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, AR, CA, CT, FL, GA, HI, IL, KS, KY, MA, MD, MI, MN, MS, NC, NH, NJ, NY, OH, OK, OR, PA, RI, SC

TN,UT,VA,WA,WI,WV

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION POSTS ITS FINANCIAL STATEMENTS ON ITS WEBSITE AND MAKES

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Schedule O (Form 990) 2022 Name of the organization	Page 2 Employer identification number
EARTH DAY NETWORK INC	13-3798288
OTHER DOCUMENTS AVAILABLE UPON REQUEST.	
<u> </u>	
232212 10-28-22 43	Schedule O (Form 990) 2022

2022.05000 EARTH DAY NETWORK INC 71254_1

SCHEDULE F	R
(Form 990)	

(Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

OMB No. 1545-0047

2022 Open to Public Inspection

Employer identification number 13 - 3798288

Department of the Treasury Internal Revenue Service

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

Name of the organization

EARTH DAY NETWORK INC

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity		3) o12(b)(13) olled ity?
				501(c)(3))		Yes	No
VOTE EARTH ACTION FUND - 85-0909874							
1752 N STREET, NW, SUITE 700							
WASHINGTON, DC 20036	SOCIAL WELFARE	DISTRICT OF COLUMBIA	501(C)(4)		EARTH DAY NETWORK	Х	
	_						
	_						
	_						

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

Schedule R (Form 990) 2022

Schedule R (Form 990) 2022 EARTH DAY NETWORK INC

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)											
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	e Direct controlling entity	I Direct controlling or entity	Direct controlling entity	l Direct controlling or entity	Direct controlling entity	Direct controlling entity	egal nicile ate or Direct controlling entity	gal icile e or Direct controlling entity	Direct controlling entity	Legal domicile (state or fewtor	Legal domicile state or total	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Predominant income (related, unrelated, income voluded from tax under	Share of end-of-year assets	Disproportionate allocations?		Code V-UBI amount in box 20 of Schedule		or Percentage ownership
		country)		sections 512-514)		400010	Yes	No	K-1 (Form 1065)	Yes	10											
	-																					
	-																					
	-																					
	1																					
	1																					
	{																					
	4																					

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(C) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Sec 512(l contr ent	(i) ction (b)(13) trolled tity?
		country)		0				Yes	No
									\square

Schedule R (Form 990) 2022 EARTH DAY NETWORK INC

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Not	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Х
	Gift, grant, or capital contribution to related organization(s)	1b		Х
	Gift, grant, or capital contribution from related organization(s)	1c		Х
	Loans or loan guarantees to or for related organization(s)	1d		Х
	Loans or loan guarantees by related organization(s)	1e		X
f	Dividends from related organization(s)	1f		X
g		1g		X
h	Purchase of assets from related organization(s)	1h		X
i	Exchange of assets with related organization(s)	1i		Х
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		X
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		X
I.	Performance of services or membership or fundraising solicitations for related organization(s)	11		Х
	Performance of services or membership or fundraising solicitations by related organization(s)	1m		Х
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X	
	Sharing of paid employees with related organization(s)	10	X	
р	Reimbursement paid to related organization(s) for expenses	1p		Х
q	Reimbursement paid by related organization(s) for expenses	1q		X
r	Other transfer of cash or property to related organization(s)	1r		X
S	Other transfer of cash or property from related organization(s)	1s		Х
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.			

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
<u>(3)</u>				
<u>(4)</u>				
(5)				
(6)				

Schedule R (Form 990) 2022 EARTH DAY NETWORK INC

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a)	(b)	(c)	(d)	(e)		(f)	(g)	(n)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income	(e) Are a partners 501(c) orgs.	ill sec	Share of			opor-	Code V-UBI	General o	Percentage
of entity	· ······	(state or foreign	Predominant income (related, unrelated, excluded from tax under sections 512-514)	501(c)	(3) 2	total	end-of-year	tio alloca	ropor- nate tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managin	ownership
		country)	sections 512-514)	Yes I		income			No	(Form 1065)	Yes No	1
			,								100 110	
												+
					-							+
									-			
					-				-			

Schedule R (Form 990) 2022

EARTH DAY NETWORK INC

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

Schedule R (Form 990) 2022

232165 09-14-22