990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2022

Open to Public Inspection

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

Do not enter social security numbers on this form as it may be made public.

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

Α	For the	2022 calend	dar year, or tax year beginning	, 2022, a	and ending		_	, 20			
В	Check if	applicable:	C Name of organization Inclus	ive Development Inter	rnationa	1	D Empl	oyer identification number			
	Address	change	Doing business as				82-2	413310			
	Name ch	ange	Number and street (or P.O. box if	mail is not delivered to street address)	Rooi	m/suite	E Telep	hone number			
	Initial ret	urn	9 SW Pack Square,	Suite 302			(828)505-4340			
	Final retu	rn/terminated	City or town, state or province, co	ountry, and ZIP or foreign postal code							
	Amende	d return	Asheville, NC 2880	01			G Gross	receipts \$2,267,659.			
	Applicati	on pending	F Name and address of principal offi	icer:		H(a) Is this a gr	oup return f	or subordinates? Yes No			
			David Pred, 50 South French	h Broad Ave, 3rd FL, Ashevill	e, NC 28801	H(b) Are all s	ubordinat	es included? Yes No			
<u> </u>	Tax-exer	npt status:	X 501(c)(3)) (insert no.)	r 🗌 527	If "No," a	attach a li	st. See instructions.			
J	Website	: www.i	nclusivedevelopment	.net		H(c) Group e	xemption	number			
K	Form of c	organization: 🛚	Corporation Trust Associate	tion Other LY	ear of formatio	n: 2017	M State	of legal domicile: NC			
Р	art I	Summa	ry								
1 Briefly describe the organization's mission or most significant activities: Through research, casework and policy advocacy											
Se				ations, financial institutions							
Jan		rights and environmental responsibilities and works to promote a more just and equitable international economic system.									
/err	2	Check this	box if the organization di	iscontinued its operations or di	sposed of n	nore than 25	5% of it	s net assets.			
9	3	Number of	voting members of the gove	rning body (Part VI, line 1a) .			3	9			
જ	4	Number of	independent voting member	s of the governing body (Part V	/I, line 1b)		4	8			
ties	5	Total numb	oer of individuals employed ir	n calendar year 2022 (Part V, Iir	ne 2a) .		5	16			
Activities & Governance	6	Total numb	per of volunteers (estimate if r	necessary)			6	8			
Ac	7a	Total unrel	ated business revenue from I	Part VIII, column (C), line 12			7a	0.			
	b	Net unrelat	ted business taxable income	from Form 990-T, Part I, line 1	1		7b	0.			
				r	Current Year						
ø	8	Contribution	ons and grants (Part VIII, line	,784.	1,967,785.						
ğ	9	Program se	ervice revenue (Part VIII, line :		,459.	61,066.					
Revenue	10	Investment	t income (Part VIII, column (A), lines 3, 4, and 7d)							
Œ	1		nue (Part VIII, column (A), line			238,808.					
	II .			nust equal Part VIII, column (A),		1,682	32,243. 2,267,6				
		•	d similar amounts paid (Part I)	,		, , , , , , , , , , , , , , , , , , , ,					
	14										
Ø	II .			benefits (Part IX, column (A), line		856	,943.	1,031,393.			
Expenses	II .			olumn (A), line 11e)							
Бe	b	Total fundr	raising expenses (Part IX, colu	umn (D), line 25) 89	,216.						
ũ	1		= :	es 11a-11d, 11f-24e)		607	,368.	862,003.			
	II .			equal Part IX, column (A), line 2		1,464		1,893,396.			
	19	Revenue le	ess expenses. Subtract line 1	8 from line 12		217	,932.	374,263.			
o ses						ginning of Curr	ent Year	End of Year			
Net Assets or Fund Balances	20	Total asset	ts (Part X, line 16)		🗀	1,899	,683.	2,367,849.			
t Ass	21	Total liabili	ties (Part X, line 26)		🗀	120	,873.	214,776.			
훌문	22	Net assets	or fund balances. Subtract li	ne 21 from line 20	🗀	1,778	,810.	2,153,073.			
Pa	art II	Signatu	re Block								
				return, including accompanying schedu				my knowledge and belief, it is			
tru	e, correct	, and complet	e. Declaration of preparer (other than	officer) is based on all information of whether	hich preparer h	as any knowled	dge.				
Si	gn	Signature of	officer			Date	•				
He	ere	Dav	id Pred, Executive D	Director							
_		Type or print	name and title								
Pa	id	Print/Type	e preparer's name	Preparer's signature	Date		Check	if PTIN			
	nu epare	r Eric I			07,	/25/2023	self-em	P00197489			
	epare se Onl			PA	•	Firm's	s EIN	27-1359484			
US	e Uill	Firm's add		OW DR, ASHEVILLE, NC	28805	Phone		28)505-2800			
Ma	v the IE	2S discuss t		shown above? See instructions		'		▼ Vos □ No			

Form 990 (2022)

Part	
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Inclusive Development International works to advance social, economic and environmental justice by supporting
	communities around the world to defend their land, environment and human rights in the face of harmful
	investment projects. Through research, casework, policy building and policy advocacy, we hold corporations, See Part III, Ln 1 statement
2	Did the organization undertake any significant program services during the year which were not listed on the
_	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others.
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 1,052,298. including grants of \$ 0.) (Revenue \$ 1,041,983.)
	CASE WORK AND CAPACITY BUILDING: Upon request from community advocates, our
	researchers follow the money, identify pressure points for advocacy, and share this
	information with impacted communities and their advocates, along with strategic advice. In
	select cases, we support and accompany communities to prevent harms and seek redress
	by leveraging pressure points through sustained, multi-pronged advocacy strategies. At the
	same time, we develop tools and resources to strengthen the movement for corporate
	accountability by building the capacity of local advocates to shape the decisions that affect
	their lives and hold powerful institutions accountable. In 2022, we conducted Follow the
	Money investigations of 49 harmful projects, accompanied more than 100 communities with
	advocacy and legal support, helped 1683 families to secure redress, and trained 194
	See Part III, Ln 4a statement
4b	(Code:) (Expenses \$307,902. including grants of \$0.) (Revenue \$214,475.)
	CHINA GLOBAL PROGRAM: As Chinese companies and financial institutions have expanded
	globally, it has become increasingly important to understand how they operate, how they
	undertake, invest in and secure financing for overseas projects, and what regulations apply.
	Our China Global program supports civil society groups and networks to develop the
	knowledge and tools necessary to effectively engage Chinese companies, banks, and
	Chinese-led development finance institutions in order to increase social and environmental
	accountability in their overseas investments. In 2022, we published a new edition of our
	guide, "How to Hold Chinese Corporations Accountable," helps community advocates
	understand how Chinese investors operate, the standards that apply to their overseas
	operations, and strategies for holding Chinese companies accountable to their
	See Part III, Ln 4b statement
4c	(Code:) (Expenses \$ 234,757. including grants of \$ 0.) (Revenue \$ 125,420.)
	POLICY ADVOCACY: We advocate to strengthen international human rights and environmental
	standards in the spheres of transnational investment and development finance, and we work
	to make these standards more enforceable through effective accountability mechanisms.
	Drawing on our experience working with impacted communities and our knowledge of the
	regulatory and accountability gaps that we encounter through our investment chain research
	and case work, we develop and promote policy solutions to advance a more just and
	equitable global economy.
	<u></u>
	In 2022, we launched our Stop #ESG-washing campaign with an exposé of how the \$40
	trillion ESG (Environmental, Social, Governance) industry has directed billions of dollars in
	See Part III, Ln 4c statement
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
40	Total program convice expenses 1 FOA 0F7

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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	×	140
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	×	
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		×
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? <i>If "Yes," complete Schedule C, Part II</i>	4		×
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		×
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		×
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III	8		×
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		×
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		×
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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, Part VI	11a		×
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		×
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		×
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d	×	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	×	
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		×
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		×
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		×
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		×
14a b	Did the organization maintain an office, employees, or agents outside of the United States? 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	14a		×
15	foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	14b		×
16	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		×
17	assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	16		×
18	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		×
19	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		×
20a	If "Yes," complete Schedule G, Part III	19 20a		×
zua b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		_^
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

Part I	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		×
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		×
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		×
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		×
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		×
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? <i>If "Yes," complete Schedule L, Part II</i>	26		×
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		×
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> "Yes," complete Schedule L, Part IV	28a		×
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		×
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		×
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		×
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30		×
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		×
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		×
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? <i>If</i> "Yes," <i>complete Schedule R, Part I</i>	33		×
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		×
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		×
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	35b 36		×
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 "Yes," complete Schedule R, Part VI</i>	37		×
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	×	^
Part	Statements Regarding Other IRS Filings and Tax Compliance	_ 55	1 **	
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1a b	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		162	140
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	10		

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 16								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .								
3a									
b	· · · · · · · · · · · · · · · · · · ·								
4a									
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		×					
b	If "Yes," enter the name of the foreign country								
5 0	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	Fo		×					
5a b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 5b		×					
C	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		×					
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).								
а	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		×					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b							
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was								
	required to file Form 8282?	7c		×					
d	If "Yes," indicate the number of Forms 8282 filed during the year	7.							
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7e 7f		×					
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g							
9 h	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:								
a	Initiation fees and capital contributions included on Part VIII, line 12								
b 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b Section 501(c)(12) organizations. Enter:	-							
а	Gross income from members or shareholders								
b	Gross income from other sources. (Do not net amounts due or paid to other sources	-							
	against amounts due or received from them.)								
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
а	Is the organization licensed to issue qualified health plans in more than one state?	13a							
	Note: See the instructions for additional information the organization must report on Schedule O.								
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans								
•		-							
с 14а	Enter the amount of reserves on hand	14a		×					
b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> .	14b		<u> </u>					
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							
	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							
	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.								

Part VI

Part	Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. Check if Schedule O contains a response or note to any line in this Part VI	See in	struc	tions.				
Secti	on A. Governing Body and Management							
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.	-	Yes	No				
b 2	Enter the number of voting members included on line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	×					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? .	3		×				
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? . Did the organization have members or stockholders?	4 5 6 7a		× × ×				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		×				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			,				
а	The governing body?	8a	×					
b								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If</i> "Yes," provide the names and addresses on Schedule O	9		×				
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	iue Co	ode.)					
40	D. I.		Yes	No				
10a b	Did the organization have local chapters, branches, or affiliates?	10a		<u>×</u>				
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	×					
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	×					
c b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done.	12b	×					
13	Did the organization have a written whistleblower policy?	13	×					
14 15	Did the organization have a written document retention and destruction policy?	14	×					
а	The organization's CEO, Executive Director, or top management official	15a	×					
b	Other officers or key employees of the organization	15b	×					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		×				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b						
Secti	on C. Disclosure							
17 18	List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of and financial statements available to the public during the tax year.	•		. ,				
20	State the name, address, and telephone number of the person who possesses the organization's books and re Mark Halpert, CPA & Assoc., 2607 Westridge Road, Los Angeles, CA 90049 (50			159				

Form 990 (2022)

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.										
					C)					
(A)	(B)	(do n	Position (do not check more than one				one	(D)	(E)	(F)
Name and title	Average	box,	box, unless person is both an		Reportable	Reportable	Estimated amount			
	hours per week		_		_	or/trust		compensation from the	compensation from related	of other compensation
	(list any	Individual trustee or director	Institutional trustee	Officer	Key employee	High	Former	organization (W-2/	organizations (W-2/	from the
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	below dotted line)	ıstee	trust		ф) Jens				
	ĺ		ee			Highest compensated employee				
(1) David Pred	40.00									
President & Executive Director		×		×				107,153.	0.	11,330.
(2) Mark Gibney	1.00									
Chair		×		×				0.	0.	0.
(3) Joanne Bauer	1.00	1				l				
Vice Chair		×		×		×		0.	0.	0.
(4) Elizabeth Porter Treasurer	1.00	×		×				0.	0.	0.
(5) Jean du Plessis	1.00			<u> </u>				0.	0.	0.
Director		×						0.	0.	0.
(6) Kate Geary	1.00									
Director		×						0.	0.	0.
(7) Bruce Shoemaker	1.00									
Director		×						0.	0.	0.
(8) Sumi Dhanarajan	1.00								_	
Director		×						0.	0.	0.
(9) Bonny Ibhawoh	1.00	×								
Director	1 00							0.	0.	0.
(10) Suki Chung Director	1.00	×						0.	0.	
	1 00	<u> </u>						0.	0.	0.
(11) Jonathan Schneider Director	1.00	×						0.	0.	0.
(12) Natalie Bugalski	40.00							0.	0.	0.
Legal Director	1 10.00	1			×			96,582.	0.	11,378.
(13)								20,002.	3.	
S		1								
(14)										
	†	1								

total (add lines 1b and 1c)	Part	VII Section A. Officers, Directors,	Γrustees,	Key I	Ξm	plo	yee	s, an	d F	lighest Compe	nsated En	nploy	yees (c	continued)
Name and title Name						•	•							
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received more than \$100,000 of compensation from the organization	2							ted to	th	nose listed abov	e) who			

Part VIII Statement of Revenue

		Check if Schedule O contains a response or no	ote to an	y line in this Pa	rt VIII....		\square
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ts,	1a	Federated campaigns 1a					
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues 1b					
عَ ق	С	Fundraising events 1c					
fts	d	Related organizations 1d					
<u>a</u> ≅	е	Government grants (contributions) 1e					
Sir	f	All other contributions, gifts, grants,					
utic			7,785.				
ĕ₽	g	Noncash contributions included in					
on Ind		· · · · · · · · · · · · · · · · · · ·	0,000.				
O B	h	Total. Add lines 1a–1f		1,967,785.			
o l	•	Busine	ss Code				
Š	2a						
Ser iue	b						
Program Service Revenue	C						
Re	d						
Š.	e f	All other program service revenue		61,066.	61,066.	0.	0.
•	g	Total. Add lines 2a–2f		61,066.	01,000.	0.	0.
	3	Investment income (including dividends, interes	st. and	01,000.			
		other similar amounts)					
	4	Income from investment of tax-exempt bond prod	eeds				
	5	Royalties					
		(i) Real (ii) Pe	ersonal				
	6a	Gross rents 6a					
	b	Less: rental expenses 6b					
	С	Rental income or (loss) 6c					
	d	Net rental income or (loss)					
	7a	Gross amount from (i) Securities (ii) (iii)	Other				
		sales of assets					
		other than inventory 7a					
ne	b	Less: cost or other basis					
Revenue		and sales expenses . 7b					
Re		Gain or (loss)					
ē	d	Net gain or (loss)					
Other	ва	Gross income from fundraising events (not including \$					
		of contributions reported on line					
		1c). See Part IV, line 18 8a					
	b	Less: direct expenses 8b					
	c						
	9a	Gross income from gaming					
		activities. See Part IV, line 19 . 9a					
	b	Less: direct expenses 9b					
		Net income or (loss) from gaming activities					
	10a	Gross sales of inventory, less	Ţ				
		returns and allowances 10a					
		Less: cost of goods sold 10b					
	С	Net income or (loss) from sales of inventory					
sne	44.	Busine	ss Code				
Miscellaneous Revenue	11a						
scellaneo Revenue	b						
Sce	c d	All other revenue		238,808.	238,808.	0.	0.
Ξ̈́		Total. Add lines 11a–11d		238,808.	230,000.	0.	0.
	12	Total revenue See instructions	• •	2.267.659	299.874	0	0

Part IX Statement of Functional Expenses

fundraising solicitation. Check here [if

following SOP 98-2 (ASC 958-720)

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX . . . (**D**) Fundraising expenses Do not include amounts reported on lines 6b. 7b. (A) Total expenses Management and general expenses Program service expenses 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 2 individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 203,735. 203,735. 0. 0. 6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . 670,374. 565,012. 42,928. 62,434. Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 2,082. 32,050. 28,715. 1,253. Other employee benefits 70,017. 62,775. 3,015. 9 4,227. 55,217. 10 Payroll taxes 48,585. 2,716. 3,916. Fees for services (nonemployees): 11 341,682. 341,682. 0. 0. 0. Legal 4,420. 50. 4,370. Accounting 44,359. 0. 44,359. 0. Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.) 12 Advertising and promotion 2,062. 2,062. 0. 13 Office expenses 2,232. 0. 2,232. 0. 14 Information technology 63,920. 50,284. 13,636. 0. 15 3,920. Occupancy 47,685. 43,765. 16 0. 117,532. 112,585. 4,947. 17 0. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 0. 19 Conferences, conventions, and meetings . 98,978. 71,295. 27,683. 2,967. 2,924. 43. 0. 20 Payments to affiliates 21 22 Depreciation, depletion, and amortization . 23 3,888. 928. 2,940. 20. Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) Payroll Service Fees 3,129. 2,702. 184. 243. Translation & Interpretation 14,032. 14,032. 0. 0. c Database Licensing 28,809. 0. 28,809. 0. Printing Publication 21,271. 21,271. 0. 0. e All other expenses 65,037. 38,534. 14,327. 12,176. Total functional expenses. Add lines 1 through 24e 25 1,893,396. 1,594,957. 209,223. 89,216. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and

Part X Balance Sheet Check if Schedule O contain

	ai t X	Check if Schedule O contains a response or note to any line in this Pa	rt X		🗆
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	1,186,219.	1	1,419,331.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	699,002.	4	878,089.
	5	Loans and other receivables from 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		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
S	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	14,462.	15	70,429.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	1,899,683.	16	2,367,849.
	17	Accounts payable and accrued expenses	120,873.	17	153,970.
	18	Grants payable	120,073.	18	133,7770.
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
s	22	Loans and other payables to any current or former officer, director,			
tie		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons		22	
Lia	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	0.	24	0.
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	0.	25	60,806.
	26	Total liabilities. Add lines 17 through 25	120,873.	26	214,776.
Ş		Organizations that follow FASB ASC 958, check here			,
Ce		and complete lines 27, 28, 32, and 33.			
ılar	27	Net assets without donor restrictions	727,219.	27	1,070,262.
B	28	Net assets with donor restrictions	1,051,591.	28	1,082,811.
lud		Organizations that do not follow FASB ASC 958, check here			
F		and complete lines 29 through 33.			
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
\ss	31	Retained earnings, endowment, accumulated income, or other funds .		31	
t /	32	Total net assets or fund balances	1,778,810.	32	2,153,073.
ž	33	Total liabilities and net assets/fund balances	1,899,683.	33	2,367,849.
					Form 990 (2022)

Form 990 (2022) Page **12**

Part	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)	2,26	57,6	59.			
2	Total expenses (must equal Part IX, column (A), line 25)	1,89	93,3	96.			
3	Revenue less expenses. Subtract line 2 from line 1	31	74,2	63.			
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4	1,778,810.					
5							
6	Donated services and use of facilities						
7	Investment expenses						
8	Prior period adjustments						
9	Other changes in net assets or fund balances (explain on Schedule O)						
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line						
	32, column (B))	2,1	53,0	73.			
Part	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 Accrual Other	_					
	If the organization changed its method of accounting from a prior year or checked "Other," explain or	י ר					
	Schedule O.						
2a		2a	×				
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or	r					
	reviewed on a separate basis, consolidated basis, or both:						
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?	2b		X			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a	a					
	separate basis, consolidated basis, or both:						
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the guidity review, or compilation of its financial statements and colection of an independent accountant?						
	the audit, review, or compilation of its financial statements and selection of an independent accountant? .	2c	×				
	If the organization changed either its oversight process or selection process during the tax year, explain or Schedule O.	ו ו					
0-							
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			.,			
	·	3a		<u>×</u> _			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.						
	required addit of addits, explain why on schedule of and describe any steps taken to undergo such addits.	3b	200	(0000)			

REV 05/17/23 PRO Form **990** (2022)

Additional Information From Form 990: Return of Organization Exempt from Income Tax

Form 990: Return of Organization Exempt from Income Tax Form 990, Page 2, Part III, Line 1 (continued)

Continuation Statement

Description

financial institutions and development agencies accountable to their human rights and environmental responsibilities and work to promote a more just and equitable global economy.

Form 990: Return of Organization Exempt from Income Tax Form 990, Page 2, Part III, Line 4a (continued)

Continuation Statement

Description advocates and grassroots human rights defenders. In 2022, we: -----Accompanied affected communities in Guinea's Boké and Siquiri regions in mediations with bauxite and gold mining companies to secure fair benefits and remediate harms. -----Worked with communities devastated by Bea Mountain Mining Corporation's goldmining operations in Liberia's Grand Cape Mount County to seek redress from the company and its international financiers, including German, French and Dutch development banks. -----Collaborated with local, regional and international partners on a campaign to stop the development of the East African Crude Oil Pipeline and associated oil extraction in Uganda's ecologically sensitive Albertine basin. 46 major banks and insurance companies have now committed not support this project due to its severe climate, environmental and human rights risks. -----Worked with communities in Cambodia's Ratanakiri and Oddar Meanchey provinces to seek redress for land grabbing by multinational agribusiness companies through transnational civil litigation and alternative dispute resolution processes. In 2022, communities in Cambodia's Koh Kong province that we previously supported with research and legal advocacy reached a monetary settlement agreement with UKbased sugar retailer Tate & Lyle. -----Worked with Indigenous communities in Indonesia's Central Java and North Sumatra provinces secure their right to Free, Prior and Informed Consent vis-a-vis planned limestone and zinc mining operations that threaten their livelihoods, health and safety and that could destroy critical water resources. -----Worked with partners in the Philippines to hold the International Finance Corporation accountable for its role in financing the country's coal boom, which has had devastating impacts on people and the environment. -----Launched FollowingTheMoney.org - a comprehensive and accessible online resource for corporate accountability researchers and advocates, including new open-source data tools for tracking shareholders and development finance.

Thanks in part to a sustained advocacy campaign that we co-led, victims of the 2018 Xe

Form 990: Return of Organization Exempt from Income Tax Form 990, Page 2, Part III, Line 4a (continued)

Continuation Statement

Description

Pian- Xe Namnoy dam collapse in southern Laos were awarded \$55 million in compensation for loss of life and property, along with new houses, infrastructure and farmland.

Form 990: Return of Organization Exempt from Income Tax Form 990, Page 2, Part III, Line 4b (continued)

Continuation Statement

Description

environmental and social responsibilities and commitments. We conducted 4 workshops on the contents of the guide for 110 participants from all over the world. We also contributed content and served on the editorial board of the People's Map of Global China, a collaborative platform for tracking China's international activities, which launched in 2021. The project sources content from civil society organizations, researchers, journalists, and academics, producing profiles on China's bilateral relationships with various countries as well as profiles on specific development projects.

.

The program also worked with partners to advocate for improved standards in overseas Chinese investment projects, including supporting civil society groups to communicate concerns directly to Chinese policy makers and to document and publicize problematic projects. These collaborations have likely contributed to several important developments in 2022, including the adoption of new policies and guidelines by China's state planning agency, commerce and environment ministries, and banking regulator, calling for companies and banks to improve social and environmental performance in overseas projects.

Form 990: Return of Organization Exempt from Income Tax Form 990, Page 2, Part III, Line 4c (continued)

Continuation Statement

Description

investment funds marketed as "ethical" or "sustainable" to companies complicit in gross human rights abuses in Myanmar. We proposed seven policy solutions to combat greenwashing by the industry and restore the original values-based intent of socially responsible investing and we have kept the pressure on regulators through continued media attention to the problem,

.

Additionally, we continued to push the World Bank's private sector arms to adopt a strong policy framework to ensure communities harmed by their investments are able to secure effective remedy and redress. The IFC and MIGA finally responded to these demands by developing an "Approach to Remedial Action," with a public consultation on a draft of the approach set for early 2023.

.

And we continued to engage with key stakeholders in the aluminum industry to improve standards and strengthen accountability of companies involved in mining bauxite. Through ongoing advocacy, informed by our extensive experience working with communities

Form 990: Return of Organization Exempt from Income Tax Form 990, Page 2, Part III, Line 4c (continued)

Continuation Statement

Description

impacted by bauxite mining in Guinea, we have succeeded in bringing increased attention-from major buyers, industry organizations and the news media-to human rights concerns in the aluminum supply chain.

SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

OMB No. 1545-0047

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

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Name	of the organization					Employer identification	number	
Incl	lusive Development Inte					82-2413310		
Par	t I Reason for Public Cha	rity Status. (All	l organizations mus	t comple	ete this p	oart.) See instruction	ons.	
The c	organization is not a private founda		,		-	•		
1	A church, convention of churc					0(b)(1)(A)(i).		
2	A school described in section		,		•			
3	A hospital or a cooperative ho	,	•			,, ,, ,		
4	A medical research organization hospital's name, city, and state	e:					•	
5	An organization operated for section 170(b)(1)(A)(iv). (Com		college or university	owned c	r operate	ed by a government	al unit described in	
6	☐ A federal, state, or local gover	nment or govern	mental unit described	l in secti	on 170(b)	(1)(A)(v).		
7	□ An organization that normally described in section 170(b)(1)			port from	n a gover	nmental unit or from	n the general public	
8	$\hfill \square$ A community trust described i	n section 170(b)	(1)(A)(vi). (Complete	Part II.)				
9	An agricultural research organ or university or a non-land-grauniversity:	nt college of agr	iculture (see instruction	ons). Ente	er the nan	ne, city, and state of	the college or	
10	An organization that normally receives (1) more than 33½% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33½% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2) . (Complete Part III.)							
11	☐ An organization organized and		•		•	•		
12	☐ An organization organized and	•		-			out the purposes of	
	one or more publicly supported							
	the box on lines 12a through 12							
а	☐ Type I. A supporting organ the supported organization	(s) the power to	regularly appoint or e	lect a ma	ijority of t			
	supporting organization. Y		· ·					
b	Type II. A supporting orgal control or management of organization(s). You must	the supporting o	rganization vested in	the same				
С	☐ Type III functionally integ	rated. A suppor	ting organization oper	rated in c			ally integrated with,	
ام	its supported organization(Type III non-functionally		•		-		utad arganization(a)	
d	that is not functionally integree requirement (see instruction	grated. The orga	nization generally mu	st satisfy	a distribu	ıtion requirement an	• • • • • • • • • • • • • • • • • • • •	
е	☐ Check this box if the organ functionally integrated, or ☐						e II, Type III	
f	Enter the number of supported of							
g	Provide the following information	1		T				
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	
				Yes	No			
(A)								
(B)								
(C)								
(D)								
(E)								
Total								

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2018 **(b)** 2019 (c) 2020 (d) 2021 **(e)** 2022 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . 1,182,970. 1,922,728. 1,304,559. 1,629,784. 1,967,785. 8,007,826. Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge **Total.** Add lines 1 through 3 4 1,182,970. 1,922,728. 1,304,559. 1,629,784. 1,967,785. 8,007,826. 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) **Public support.** Subtract line 5 from line 4 8,007,826. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2018 **(b)** 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total 7 1,182,970. 1,922,728. 1,304,559. 1,629,784. 1,967,785. 8,007,826. Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Net income from unrelated business 9 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.) **Total support.** Add lines 7 through 10 11 8,007,826. Gross receipts from related activities, etc. (see instructions) 12 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f)) 100 % 14 Public support percentage from 2021 Schedule A, Part II, line 14 15 % 331/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this X 331/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported

18

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

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.)

Secti	on A. Public Support			, , ,		,	
Calen	dar 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.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the						
-	organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
	on B. Total Support		l	T	ı		
	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.						
b	Unrelated business taxable income (less						
b	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on line 10b, whether or not the business is regularly carried on						
10	3						
12	Other income. Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	•			•		, , , ,
Saat:	organization, check this box and stop he on C. Computation of Public Suppor						· · · <u></u>
15	Public support percentage for 2022 (line 8			13 column (f)		15	%
16	Public support percentage from 2021 Sch						
	on D. Computation of Investment In	come Perce	ntage	<u></u>	<u> </u>	1.5	/0
17	Investment income percentage for 2022 (ov line 13. colu	ımn (f))	17	%
18	Investment income percentage from 2021			-	,		/ 6
19a	33 ¹ / ₃ % support tests—2022. If the organ						
. 54	17 is not more than 33 ¹ / ₃ %, check this box						
b	33 ¹ / ₃ % support tests—2021. If the organiz	_	_	-		-	_
	line 18 is not more than 331/3%, check this l						
20	Private foundation. If the organization di	_	=	=	-		_

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.)

Se

Secti	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	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.	3a		
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.	3b		
С	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.	3c		
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.	4a		
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.	4b		
С	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.	4c		
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).	5a		
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?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с		
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.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with record to a substantial contributor.			
8	with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i> Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line	7		
0	7? If "Yes," complete Part I of Schedule L (Form 990).	8		
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 .	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>	9b		
С	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 .	9c		
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.	10a		
h	Did the organization have any excess business holdings in the tay year? (I se Schedule C. Form 1720, to			

determine whether the organization had excess business holdings.)

Part	Supporting Organizations (continued)			
			Yes	No
11 a	Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
a	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c,</i>	110		
	provide detail in Part VI .	11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Secti	on 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		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instru	ction	s).
a b c 2	 ☐ The organization satisfied the Activities Test. Complete line 2 below. ☐ The organization is the parent of each of its supported organizations. Complete line 3 below. ☐ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity Activities Test. Answer lines 2a and 2b below. 	(see in	struct Yes	
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2 a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3 a	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i> 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? <i>If "Yes" or "No," provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

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

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

Schedule A (Form 990) 2022 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Schedule B (Form 990)

Schedule of Contributors

Attach to Form 990 or Form 990 PE

OMB No. 1545-0047

Employer identification number

2022

Department of the Treasury Internal Revenue Service

Name of the organization

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

Inclusive Development International 82-2413310 Organization type (check one): Filers of: Section: Form 990 or 990-EZ × 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. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% 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

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).

Name of organization
Inclusive Development International

Employer identification number

82-2413310

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is	needed.
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(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1(a)	11th Hour Project 555 Bryant St Ste 370 Palo Alto CA 94301 (b)	\$\$	Person
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2	Bread for the World Evangeliches Wer Fur Diolonie und Wntwicklung Berlin, GM	\$107,101.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	Heinrich Boll Stiftung 32/4 Soi Sukhumvit 53 Klongton Neua, Wattana Bangkok Bangkok, TH	\$57,050.	Person
(2)	(b)	()	4.15
(a) No.	Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
No.	Name, address, and ZIP + 4 Mott Foundation 503 S. Saginaw St., Suite 1200	Total contributions	Person Payroll Noncash (Complete Part II for
No. 4	Mott Foundation 503 S. Saginaw St., Suite 1200 Flint MI 485021851 (b)	\$ 50,000.	Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	Mott Foundation 503 S. Saginaw St., Suite 1200 Flint MI 485021851 (b) Name, address, and ZIP + 4 Oxfam Novib Mauritskade 9	\$ 50,000. (c) Total contributions	Type of contribution Person

Name of organization
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Employer identification number

82-2413310

Part I Co	ontributors ((see instructions)	Use	duplicate	copies	of I	Part I if	additional	space is	needed.
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(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>.7</u>	Radiata Foundation Level 3, 85 Macquarie St	\$102,409.	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	Rights + Resources 2715 M Street NW Ste 900 New York NY 10115	\$49,760.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	RSF Social Finance P.O. Box 2007 San Francisco CA 94126	\$15,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	• •		
No.	Name, address, and ZIP + 4 Sigrid Rausing Trust	Total contributions	Person Payroll Noncash (Complete Part II for
No.	Name, address, and ZIP + 4 Sigrid Rausing Trust 12 Penzance Place (b)	\$ 188,381.	Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.)
10 (a) No.	Name, address, and ZIP + 4 Sigrid Rausing Trust 12 Penzance Place (b) Name, address, and ZIP + 4 Trust for Mutual Understanding TMU 1 Rockefeller Plaza, Room 2500	\$ 188,381. (c) Total contributions	Type of contribution Person

Name of organization
Inclusive Development International

Employer identification number

82-2413310

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is n	needed.
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(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	Fidelity Charitable Trust P.O. Box 77001 Cincinnati OH 452770053	\$ 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
14	Wellspring Philanthropic Foundation 10 Times Square Ste 1600 New York NY 10018	\$200,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
15	Foundation for the Carolinas 220 N. Tryon Street Charlotte NC 28202	\$ 15,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
16 	Name, address, and ZIP + 4 Israelson Family Foundation 900 409 Washington Avenue Towson MD 212044906		
	Israelson Family Foundation 900 409 Washington Avenue	Total contributions	Person Payroll Noncash (Complete Part II for
16 (a)	Israelson Family Foundation 900 409 Washington Avenue Towson MD 212044906 (b)	\$ 15,000.	Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.)
16 (a) No.	Israelson Family Foundation 900 409 Washington Avenue Towson MD 212044906 (b) Name, address, and ZIP + 4 Ripple Foundation/Partners For Equity	\$ 15,000. (c) Total contributions	Type of contribution Person

BAA

Schedule B (Form 990) (2022)

Name of organization

Inclusive Development International

82-2413310

Inclusive Development International Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. Part I (a) (c) (d) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person X 19 Rockefeller Brothers Fund **Payroll** Noncash 475 Riverside Drive, Suite 900 100,000. (Complete Part II for noncash contributions.) New York NY 10115 (a) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) **Total contributions** Type of contribution Name, address, and ZIP + 4 No. Person **Payroll** Noncash (Complete Part II for noncash contributions.) (b) (c) (d) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash

(Complete Part II for noncash contributions.)

Schedule B (Form 990) (2022)

Name of organization

Inclusive Development International

82-2413310

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

Schedule B (Form 990) (2022)

82-2413310 Inclusive Development International Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (c) Use of gift (b) Purpose of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Name of organization

Employer identification number

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number Inclusive Development International 82-2413310 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during year) . 3 Aggregate value of grants from (during year) . . Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose ☐ Yes ☐ No Part II **Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements . . . 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after July 25, 2006, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: \$ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

b Assets included in Form 990. Part X

Part									
3	Using the organization's acquisition, according to the collection items (check all that apply):	ession, and other	record	ls, checl	k any of the	e follow	ving that make si	gnificant u	se of its
а	☐ Public exhibition		d [Loan	or exchange	e progr	am		
b	☐ Scholarly research		е [Other	_				
С	☐ Preservation for future generations								
4	Provide a description of the organization XIII.	's collections and	d explai	n how th	ney further	the org	anization's exem	pt purpos	e in Part
5	During the year, did the organization sol	icit or receive do	nations	of art I	historical tr	easure	s or other simila	r	
	assets to be sold to raise funds rather that	an to be maintaine							☐ No
Part	Complete if the organization an		n Forn	n 990, F	art IV, line	9, or	reported an am	ount on F	orm
	990, Part X, line 21.								
1a	Is the organization an agent, trustee, cu								
	included on Form 990, Part X?							Yes	∐ No
b	If "Yes," explain the arrangement in Part	XIII and complete	the foll	owing ta	able:				
								nount	
C	Beginning balance					1c	_		
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount o								∐ No
	If "Yes," explain the arrangement in Part	XIII. Check here if	the exp	olanation	n has been	provide	ed on Part XIII .		
Par				- 000 -)t. \	. 10			
	Complete if the organization an						(D.T.		
		a) Current year	(b) Prior	year	(c) Two year	s back	(d) Three years back	(e) Four ye	ars back
1a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains, and losses								
d	Grants or scholarships								
е	Other expenditures for facilities and								
	programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the	current year end b	oalance	(line 1g	, column (a))) held a	as:		
а	Board designated or quasi-endowment	%							
b	Permanent endowment %								
С	Term endowment %								
	The percentages on lines 2a, 2b, and 2c s	should equal 1009	%.						
3a	Are there endowment funds not in the po	ossession of the o	organiza	ation tha	t are held	and ad	ministered for the	Э	
	organization by:							Y	es No
	(i) Unrelated organizations							3a(i)	
	(ii) Related organizations							3a(ii)	
b	If "Yes" on line 3a(ii), are the related organ	nizations listed as	require	ed on Sc	hedule R?			3b	
4	Describe in Part XIII the intended uses of	the organization's	s endov	vment fu	ınds.				
Part	VI Land, Buildings, and Equipme	ent.							
	Complete if the organization an	swered "Yes" o	n Forn	า 990, F	Part IV, line	11a.	See Form 990,	Part X, lin	e 10.
	Description of property	(a) Cost or other (investment)		` '	r other basis ther)		Accumulated epreciation	(d) Book	alue
1a	Land								
b	Buildings								
C	Leasehold improvements								
d	Equipment								
e	Other								
	Add lines 1a through 1e. (Column (d) must	t equal Form 990,	Part X,	column	(B), line 10	c.)			

 $\mathsf{B}\mathsf{A}\mathsf{A}$

Part VII	Investments – Other Securities. Complete if the organization answered "Yes" on Fo	rm 990 Part IV line	11b See Form 9	990 Part X line 12
	(a) Description of security or category (including name of security)	(b) Book value	(c) Metho	d of valuation: f-year market value
(1) Financial	derivatives			your market value
	neld equity interests			
(O) Other				
(Λ)				
(D)		-		
(C)				
(D)				
(C)				
(C)				
(G)				
(H)				
	mn (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments – Program Related.		_	
	Complete if the organization answered "Yes" on Fo	rm 990, Part IV, line	11c. See Form 9	90, Part X, line 13.
	(a) Description of investment	(b) Book value		d of valuation:
			Cost or end-of	f-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets.			
	Complete if the organization answered "Yes" on Fo	rm 990, Part IV, line	11d. See Form 9	990, Part X, line 15.
	(a) Description			(b) Book value
(1) Other				10,452
(2) Operat	ting Lease Right of Use			59,977
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	(I) (F) (F) (F) (F) (F) (F) (F) (F) (F) (F			
	mn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities.			70,429
Part X	Complete if the organization answered "Yes" on Foline 25.	rm 990, Part IV, line	11e or 11f. See l	Form 990, Part X,
1.	(a) Description of liability			(b) Book value
(1) Federal ir				(., ===::::::::::::::::::::::::::::::::::
· ,	ting Lease Liability			60,806
(3)				30,000
(4)				
(5)				
(4) (5) (6) (7)				
(5) (6) (7)				
(5) (6)				

Part			Return.
	Complete if the organization answered "Yes" on Form 990, F	Part IV, line 12a.	
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
С	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
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.)		
С	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		
Part			er Return.
	Complete if the organization answered "Yes" on Form 990, F		
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1	
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
С	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
_	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
	A 1 1 P		
С	Add lines 4a and 4b		4c
с 5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line		4c 5
c 5 Part	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information.	e 18.)	5
5 Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.)	5 b; Part V, line 4; Part X, line
5 Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information.	e 18.)	5 b; Part V, line 4; Part X, line
5 Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.)	5 b; Part V, line 4; Part X, line
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Schedule D (Fo	orm 990) 2022	Page \$
Part XIII	Supplemental Information (continued)	

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

Open to Public Inspection

Employer identification number

82-2413310 Inclusive Development International Pt VI, Line 11b: The tax return is prepared by an external CPA. Pt VI, Line 11b: The finance committee of the board is sent a draft of the Pt VI, Line 11b: tax return to be reviewed and examined. Members of the Pt VI, Line 11b: committee at that time can review and, if applicable, Pt VI, Line 11b: discuss any line items in the return with the accountant Pt VI, Line 11b: who has prepared the return. If all items are found Pt VI, Line 11b: acceptable, the treasurer authorizes the external CPA to Pt VI, Line 11b: file the return electronically with the designated Pt VI, Line 11b: government agency by providing the external CPA a signed Pt VI, Line 11b: Form 8879, E-File Authorization. Pt VI, Line 12c: The conflict of interest policy statement is reviewed and Pt VI, Line 12c: signed annually. Pt VI, Line 15a: The Executive Director and Legal Director's compensation is set by the Compensation Committee of the Board of Directors Pt VI, Line 15a: (consisting of three Board members, not including the President, who is the Executive Director). Pt VI, Line 15a: Compensation is based on performance and comparability data on compensation levels paid to leaders of other organizations Pt VI, Line 15a: of a similar size, purpose, level of resources and level of The Executive Director sets compensation levels of other key employees, impact. Pt VI, Line 15a: based on performance and within an organizational compensation scale established by the Compensation Committee, which is based on comparability data. Pt VI, Line 15b: This is described in the answer to Part VI, Line 15a. Pt VI, Line 2: The CEO and a key employee are married.

Form **8879-TE**

IRS e-file Signature Authorization for a Tax Exempt Entity

OMB	NO.	1545-0047	

Department of the Treasury Internal Revenue Service For calendar year 2022, or fiscal year beginning , 2022, and ending , 20

Do not send to the IRS. Keep for your records.

Go to www.irs.gov/Form8879TE for the latest information.

2022

internal ric	3401140 0014100										
Name of f	filer	-						EIN or SSN			
Inclu	sive Deve	lopment Inte	rnation	nal				82-2413	3310		
Name and	d title of officer or	person subject to tax									
David	Pred, Ex	ecutive Dire	ctor								
Part I	Type of	Return and Re	turn Info	rmation							
8038-CF 3a, 4a, 5 3b, 4b, 5	P and Form 53 5a, 6a, 7a, 8a, 5b, 6b, 7b, 8b ,	e return for which 30 filers may enter 9a, or 10a below, 9b, or 10b, which Do not complete m	dollars an and the an ever is app	nd cents. For all ot nount on that line blicable, blank (do	her forms, e	enter whole n being filed	dollars d with t	only. If you	u check as blank,	the box , then lea	on line 1a, 2a, ave line 1b, 2b,
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9a F	Form 5330 che	eck here \square		due (Form 5330, I						9b	
10a F	Form 8038-CP	check here \square	b Amo	ount of credit payn	nent request	ted (Form 80	038-CP,	Part III, line	e 22)	10b	
Part II	Declara	tion and Signa	ture Auth	norization of O	fficer or P	erson Su	bject	to Tax	-		
Jnder p	enalties of per	ury, I declare that	X I am a	an officer of the ab	ove entity or	r 🗌 I am a	a perso	n subject to	o tax wit	th respec	t to (name
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