# Form 990

Department of the Treasury

Internal Revenue Service

## **Return of Organization Exempt From Income Tax**

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

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information. 2022

OMB No. 1545-0047

Open to Public Inspection

For the 2022 calendar year, or tax year beginning 07-01 , 2022, and ending 06-30 , 2023 В The Advocates For Human Rights D Employer identification number Check if applicable: C Name of organization Address change Doing business as 36-3292374 E Telephone number Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite Initial return 330 South Second Avenue Suite 800 (612)341 - 3302G Gross receipts Final return/terminated City or town, state or province, country, and ZIP or foreign postal code Amended return Minneapolis, MN 55401 4,021,943 Application pending F Name and address of principal officer: H(a) Is this a group return for subordinates? Yes H(b) Are all subordinates included? **X** 501(c)(3) 501(c) ( 4947(a)(1) or 527 ) (insert no.) If "No," attach a list. See instructions Tax-exempt status: www.theadvocatesforhumanrights.org Website: H(c) Group exemption number X Corporation Trust Association Form of organization: 1983 L Year of formation: M State of legal domicile: Part I Summary Briefly describe the organization's mission or most significant activities: To promote and protect human rights in the United States and around the world. Activities & Governance Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 3 25 Number of independent voting members of the governing body (Part VI, line 1b) 4 25 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 5 35 Total number of volunteers (estimate if necessary) 6 1,508 Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 0 8 Contributions and grants (Part VIII, line 1h) 3,483,271 3,309,880 Program service revenue (Part VIII, line 2g) 94,284 473,742 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 42,053 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 101,440 104,591 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 3,678,995 3,930,266 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 Benefits paid to or for members (Part IX, column (A), line 4) 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 2,265,522 1,739,858 Professional fundraising fees (Part IX, column (A), line 11e) 44,676 Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 734,247 1,004,554 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 2,474,105 3,314,752 19 Revenue less expenses. Subtract line 18 from line 12 1,204,890 615,514 Net Assets or --und Balances **Beginning of Current Year** End of Year 20 Total assets (Part X, line 16) 4,488,423 3,226,129 21 Total liabilities (Part X, line 26) 248,656 868,799 22 Net assets or fund balances. Subtract line 21 from line 20 2,977,473 3,619,624 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Signature of officer Date Here Robin Phillips, Executive Director Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN Paid Jennifer Schutz 11-02-2023 P01272516 self-employed Preparer Firm's name Schutz CPA, Firm's EIN Use Only Firm's address PO Box 898 Phone no Stillwater MN 55082 651-439-5990

May the IRS discuss this return with the preparer shown above? See instructions

#### Form 990 (2022) Part III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission: To promote and protect human rights in the United States and around the world. Did the organization undertake any significant program services during the year which were not listed on the If "Yes." describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program Yes If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. ) (Expenses \$ 1,281,396 including grants of \$ Refugee and Immigrant Rights: The Advocates provides free legal representation to asylum seekers, unaccompanied children, trafficking victims, Afghan evacuees, and detained immigrants in the Upper Midwest. With pro bono assistance from hundreds of attorneys, The Advocates is the primary asylum legal service provider in Minnesota, North Dakota and South Dakota. During FY2023, The Advocates provided more than 2,000 people with legal help, including 750 Afghan evacuees through a newly established Afghan Legal Clinic. In addition, The Advocates provided approximately 800 people with pro se materials, information, and other resources to advance their immigration case. In addition to legal services, The Advocates collaborates on the Immigration Court Observer Project to engage hundreds of volunteers in monitoring immigration court hearings. 525,911 including grants of \$ (Code: ) (Revenue Research, Education and Advocacy: Research, Education and Advocacy: The Advocates uses a human rights approach to document abuses, provide training and technical assistance to human rights defenders worldwide, engage people who have experienced human rights violations in advancing policy changes, and increase awareness of human rights. The Advocates is a leader in human rights advocacy at the local, national, and international level on our priority issues including death penalty abolition, violence against women and LGBTIQ+ persons, human trafficking, and the rights of noncitizens. The Advocates brings international human rights principles to the community and classrooms through curricular resources, lesson plans, and training manuals; presentations, lectures, conferences, continuing education courses, and public forums; and through two unique websites. ) (Expenses \$ 473,645 including grants of \$ ) (Revenue Women's Human Rights: The Advocates has 30 years of experience working with partners in Minnesota and around the world to document problems in the government response to violence against women and responding to the needs of women's human rights defenders. The Advocates works to end violence against women by changing laws and their implementation, as well as through trainings, advocacy, and monitoring and documentation of human rights abuses against women and girls. Through the WATCH court monitoring project, we mobilize volunteers to observe cases of violence against women and children and bring the public eye into the courtroom. We work with partners to enhance protections for women and provide training and technical assistance for The Advocates' global women's human rights partners. During FY2023, we undertook research on the anti-gender movement and published a report on the backlash to the Istanbul Convention; we also continue to (Continued on Schedule O) Other program services (Describe on Schedule O.)

) (Revenue \$

(Expenses \$

Total program service expenses

570,845 including grants of \$

2,851,797

Form 990 (2022)
Part IV C 2) The Advocates For Human Rights Checklist of Required Schedules

		_	Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	_		
6	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III  Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	5		X
6	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		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	-		
	complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
ŧ	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	Х	
k	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more	441		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
(	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	110		.,
,	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets	11c		X
•	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	х	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f				
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a				
	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b				
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
4-	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	15		Х
10	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		v
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	10		X
••	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17	х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	<u> </u>		
-	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		х
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		х
k	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	

Form 990 (2022) **Part IV** C The Advocates For Human Rights Checklist of Required Schedules (continued)

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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	Yes	No X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23		
	\$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		Х
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
·	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		Х
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?			
	ff "Yes," complete Schedule L, Part I	25b		х
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 or any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,	_,		
	Part IV, instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If  "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
33	complete Schedule N, Part II	32		Х
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
36	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	35b		Х
30	related organization? If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
Da	19? Note: All Form 990 filers are required to complete Schedule O	38	X	
Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			П
	onesit ii ooneddie o contains a response of note to any fille iii tilis i art v	• • •	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		. 55	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	х	

Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No"

Section A. Governing Body and Management								
	Check if Schedule O contains a response or note to any line in this Part VI		X					
response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.								

			Yes	No
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.			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		Х
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		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe on Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	х	
14	Did the organization have a written document retention and destruction policy?	14	х	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	х	
b	Other officers or key employees of the organization	15b	x	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed  Minnesota			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	▼ Own website ▼ Another's website ▼ Upon request □ Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,			
	and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records.			
	Robin Phillips (612)341-3302, 330 South Second Avenue Suite 800, Minneapolis, MN	55401		

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

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

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

- **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 instructions for the order in which to list the persons above.

Check this box if neither the organization nor any relat	ed organizatio	n com	pens	ate	d any	curre	nt of	fficer, director, or tr	ustee.	
					(C)					
(A) Name and title	(B) Average hours	Position (do not check more than one box, unless person is both an officer and a director/trustee)		( <b>D</b> ) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other				
	per week						,	from the organization (W-2/	from related organizations (W-2/	compensation from the
	hours for o nd ns of Fe m For 109		1099-MISC/ 1099-NEC) 1099-NEC)		organization and related organizations					
(1) Robin Phillips	40.00									
Executive Director				х				120,859	0	14,400
(2) Hiba Al Hasnawi	1.00									
Director		х						0	0	0
(3) Kathy Lenzmeier	1.00									
Director		х						0	0	0
(4) X Kevin Zhao	1.00									
Director		x						0	0	0_
(5) Nancy Speer	2.00									
Director		x						0	0	0_
(6) Dan Supalla	1.00									
Director		х						0	0	0
(7) Emily Wessels	1.00									
Director		x						0	0	0
(8) Jen Miernicki	1.00									
Director		x						0	0	0_
(9) Jill Field	2.00									
Director		x						0	0	0
(10)Jim O'Neal	2.00									
Director		x						0	0	0
(11)Diane B Bratvold	1.00									
Director		x						0	0	0
(12)Hon Tom Fraser	1.00									
Director		x						0	0	0
(13)Howard Meyers III	1.00									
Director		х						0	0	0
(14)David Vander Haar	1.00									
Director		х						0	0	0

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

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

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

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

Check this box if neither the organization nor any relat	ed organization	n com	pens	sated	d any	curre/	nt of	fficer, director, or tr	ustee.		
					(C)						
(A)	(B)	/ale :-			sition	han a		(D)	(E)	(F)	
Name and title	Average	box,	unles	ss pe	rson i	han one s both a	n	Reportable	Reportable	Estimated amount	
	hours per week	offic	er an	d a di	recto	/trustee	)	compensation from the	compensation from related	of other compensation	
	(list any		_		_	о т	_	organization (W-2/	organizations (W-2/	from the	
	hours for	Individual trustee or director	Institutional trustee	Office	Key employee	Highest compensated employee	Former	1099-MISC/ 1099-NEC)	1099-MISC/ 1099-NEC)	organization and related organizations	
	related	dual	ution	er	ompl	est c	<u> </u>	1000 1120)	1000 1120)	Totaloa organizationo	
	organizations below	trus	al trı		oyee	omp					
	dotted line)	tee	stee		_	ensa					
						ted					
(1) Dean_Eyler	1.00										
Director		Х						0	0	0	
(2) Cheryl Olseth	1.00										
Director		Х						0	0	0	
(3) Will Manske	1.00										
Director		Х						0	0	0	
(4) Alison McElroy	1.00										
Director		Х						0	0	0	
(5) Julie H Firestone	1.00										
Director		Х						0	0	0	
(6) Chris Bercaw	2.00										
Director		Х						0	0	0	
(7) Mary Kariuki Ries	1.00										
Director		Х						0	0	0	
(8) Kelly McLain	1.00										
Director		Х						0	0	0	
(9) Bridget Chivimbiso Chigunwe	1.00										
Director		Х						0	0	0	
(10)Bindi Swammi	2.00										
Secretary				X				0	0	0	
(11)Karen Evans	4.00										
Chair				Х				0	0	0	
(12)Peggy Grieve	3.00										
Treasurer				X				0	0	0	
(13)											
(14)											

Form **990** (2022)

	(A) Name and title		box	, unle	Po neck n ss pe	rson i	than one is both a r/trustee	n	(D)  Reportable compensation from the	(E) Reporta compensa	ble ation ited	cor	(F) ated am of other	
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizatior 1099-MI 1099-NE	sc/	orga	rom the nization d organiz	
<u>(15)</u>														
<u>(16)</u>														
<u>(17)</u>														
<u>(18)</u>														
<u>(19)</u>														
<u>(20)</u>														
<u>(21)</u>														
(22)														
(23)														
(24)														
(25)														
1b c	Subtotal													
d	Total (add lines 1b and 1c)								120,859		0		14,4	100
2	Total number of individuals (including but not limite reportable compensation from the organization	ed to those lis	ted ab	ove)	who	rec	eived ı	nore	than \$100,000 of					1
	· operiodice in the organization												Yes	No
3	Did the organization list any <b>former</b> officer, director	•				-								
4	employee on line 1a? <i>If "Yes," complete Schedule</i> For any individual listed on line 1a, is the sum of re								ation from the			3		Х
	organization and related organizations greater than	\$150,000? <i>If</i>	"Yes,"	com	plete	e Sc	hedule	J fo	or such					
-	individual											4		Х
5	Did any person listed on line 1a receive or accrue for services rendered to the organization? If "Yes,"											5		х
Section	on B. Independent Contractors	•												
1	Complete this table for your five highest compensation	•												
	compensation from the organization. Report comp	ensation for t	he cal	enda	ır yea	ar er	nding v	vith o		zation's tax	year.			
	( <b>A</b> ) Name and business addre	99							(B)  Description of service	200		(C) Compens	ation	
	ramo and business dudic								2000ption of oorwi			30porio		
2	Total number of independent contractors (including	-		hose	liste	ed al	bove) v	who						

		Check if Schedule O contains a response or no	ote to any line in this	Part VIII			[
		·	,	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Fundraising events		3,309,880			
Program Service Revenue	b c d e f	Program Service Fees	Business Code 611710 611710	444,697 29,045 473,742	444,697 29,045		
Other Revenue	b c d 7a	Investment income (including dividends, interest, a other similar amounts)  Income from investment of tax-exempt bond proce Royalties  Gross rents  Less: rental expenses  Rental income or (loss)  Net rental income or (loss)  Gross amount from sales of assets other than inventory  (i) Real  6a  6b  (ii) Securities  (ii) Securities	eeds (ii) Personal	42,053			42,053
	c d 8a b	` '	193,141	101,464			101,464
	b c 10a b	Gross sales of inventory, less returns and allowances					
Miscellanous Revenue	b c d		Business Code 900001	3,127	3,127		142 517

#### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a response or note to a	any line in this Part IX		<u>.</u>	<u>x</u>
Do r	ot include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
8b, 9	b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	121,090	106,559	6,055	8,476
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,786,474	1,559,162	144,862	82,450
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	214,208	187,459	18,795	7,954
10	Payroll taxes	143,750	115,151	22,374	6,225
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting	26,822	8,488	18,334	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17 .	44,676			44,676
f	Investment management fees	52,192	49,750	2,442	
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	361,306	358,446	2,860	
12	Advertising and promotion				
13	Office expenses	101,328	41,514	57,701	2,113
14	Information technology				
15	Royalties				
16	Occupancy	265,135	245,031	9,369	10,735
17	Travel	83,644	83,557	60	27
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,162		1,162	
23	Insurance	19,281	18,895	225	161
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A), amount, list line 24e expenses on Schedule O.)				
а	Subscriptions & Resources	20,753	19,320	758	675
b	Postage and Delivery	16,014	14,622	907	485
С	Printing and Duplication	19,686	18,007	976	703
d	Telephone and Technology	18,936	15,700	2,554	682
е	All other expenses	18,295	10,136	6,961	1,198
25	Total functional expenses. Add lines 1 through 24e	3,314,752	2,851,797	296,395	166,560
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation. Check here if				
	following SOP 98-2 (ASC 958-720)				

Form 990 (2022) The Part X Balance Sheet

	_	Check if Schedule O contains a response or note to any line in this Part X			
		•	(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	215,071	1	402,039
	2	Savings and temporary cash investments	2,387,364	2	2,159
	3	Pledges and grants receivable, net	241,992	3	555,084
	4	Accounts receivable, net	291,341	4	30,122
	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	73,204	9	32,978
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 124,537			
	b	Less: accumulated depreciation 10b 123,057	2,642	10c	1,480
	11	Investments - publicly traded securities	4,383	11	2,880,157
	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	10,132	15	584,404
	16	Total assets. Add lines 1 through 15 (must equal line 33)	3,226,129	16	4,488,423
	17	Accounts payable and accrued expenses	140,032	17	216,951
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ies	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
.iab		controlled entity or family member of any of these persons		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	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	108,624	25	651,848
	26	Total liabilities. Add lines 17 through 25	248,656	26	868,799
s		Organizations that follow FASB ASC 958, check here			
Ce		and complete lines 27, 28, 32, and 33.			
ılar	27	Net assets without donor restrictions	2,455,429	27	3,179,405
Be	28	Net assets with donor restrictions	522,044	28	440,219
nuq		Organizations that do not follow FASB ASC 958, check here			
or Fund Balances		and complete lines 29 through 33.			
s o	29	Capital stock or trust principal, or current funds		29	
Net Assets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
As	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net	32	Total net assets or fund balances	2,977,473	32	3,619,624
	33	Total liabilities and net assets/fund balances	3,226,129	33	4,488,423

Uniform Guidance, 2 C.F.R. Part 200, Subpart F?

Х

Х

За

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain on

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the

Schedule O.

#### **SCHEDULE A** (Form 990)

# **Public Charity Status and Public Support**

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

**Employer identification number** 

		vocates For Human Right	s				36-329237	
Pa	rt I	Reason for Public Cha	rity Status. (Al	l organizations mus	t comple	te this p	art.) See instruction	ons.
The	orgar	nization is not a private foundation be	cause it is: (For line	es 1 through 12, check or	ly one box.	)		
1	Ц	A church, convention of churches, or	r association of chur	rches described in <b>sectio</b>	n 170(b)(1	)(A)(i).		
2	Ц	A school described in <b>section 170(k</b>	o)(1)(A)(ii). (Attach	Schedule E (Form 990).)				
3	Ц	A hospital or a cooperative hospital s	•			•		
4	Ш	A medical research organization ope	rated in conjunction	with a hospital described	in <b>section</b>	170(b)(1)	(A)(iii). Enter the	
		hospital's name, city, and state:						
5	Ш	An organization operated for the ber	ŭ	university owned or opera	ited by a go	overnmenta	al unit described in	
_		section 170(b)(1)(A)(iv). (Complete	,			, ,		
6	님	A federal, state, or local government	· ·			` '		
7	X	· • · · · · · · · · · · · · · · · · · ·	•	11	vernmental	unit or fro	m the general public	
_		described in section 170(b)(1)(A)(v		,				
8	片	A community trust described in <b>sect</b> An agricultural research organization			tod in coni	inction with	a a land grant college	
9	Ш	or university or a non-land-grant coll			•		•	
		university:	ege or agriculture (	see instructions). Enter ti	ie name, c	ity, and Sta	tte of the college of	
10	П	An organization that normally receive	ac: (1) more than 3	3 1/3% of its support from	n contributi	one memb	perchip fees, and gross	
	ш	receipts from activities related to its	exempt functions, s	subject to certain exception	ons; and (2	) no more t	than 33 1/3% of its	
		support from gross investment incoracquired by the organization after Ju					from businesses	
11	П	An organization organized and opera	•	` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	,			
12	П	An organization organized and opera	•			. , . ,	carry out the purposes	of
		one or more publicly supported organ	•	•				
		the box on lines 12a through 12d that	at describes the typ	e of supporting organizat	ion and co	nplete line	s 12e, 12f, and 12g.	
á	1	Type I. A supporting organizatio	n operated, supervis	sed, or controlled by its su	pported or	ganization(	s), typically by giving	
		the supported organization(s) th	e power to regularly	y appoint or elect a major	ity of the di	rectors or t	trustees of the	
		supporting organization. You mu	ust complete Part	IV, Sections A and B.				
ŀ	)	Type II. A supporting organization	on supervised or co	ntrolled in connection with	its support	ed organiz	ation(s), by having	
		control or management of the su	upporting organizati	ion vested in the same pe	ersons that	control or	manage the supported	
		organization(s). You must com	plete Part IV, Secti	ions A and C.				
(	;			•				
		its supported organization(s) (se	•	•				
(	t	Type III non-functionally integ						
		that is not functionally integrated	ŭ				nt and an attentiveness	
		requirement (see instructions). Y	-					
•	•	Check this box if the organization				s a Type I,	Type II, Type III	
	_	functionally integrated, or Type I	•	ntegrated supporting orga	anization.			
1		nter the number of supported organization the following information should		onization(a)				• • •
		rovide the following information abou ame of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the or	agnization	(v) Amount of monetary	(vi) Amount of
	(1) 14	arrie or supported organization	(II) LIIV	(described on lines 1-10		r governing	support (see	other support (see
				above (see instructions))	docum	ient?	instructions)	instructions)
					Yes	No	-	
( <b>A</b> )								
(B)								
(C)								
(D)								
(E)								
T-4-								

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section	on A. Public Support	, ,		•		,	
Calen	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	2,446,899	2,202,843	2,093,927	3,483,271	3,309,880	13,536,820
2	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf	3,127					3,127
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
4	<b>Total.</b> Add lines 1 through 3	2,450,026	2,202,843	2,093,927	3,483,271	3,309,880	13,539,947
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)						650,072
6	Public support. Subtract line 5 from line 4 .						12,889,875
	on B. Total Support		4.0040				(D. T. )
	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	( <b>d</b> ) 2021	(e) 2022	(f) Total
7	Amounts from line 4	2,450,026	2,202,843	2,093,927	3,483,271	3,309,880	13,539,947
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from						
9	similar sources	3,030	510	2,287		26,637	32,464
9	activities, whether or not the business						
	is regularly carried on						
10	Other income. Do not include gain or						
10	loss from the sale of capital assets						
	(Explain in Part VI.)	124,093	47,153	296,931	2,862		471,039
11	<b>Total support.</b> Add lines 7 through 10	124,093	47,133	290,931	2,802		14,043,450
12	Gross receipts from related activities, etc	c. (see instruct	ions)			12	14,043,430
13	First 5 years. If the Form 990 is for the o					a section 501(	c)(3)
	organization, check this box and stop he						
Section	on C. Computation of Public Suppo	ort Percentag	ge				
14	Public support percentage for 2022 (line	6, column (f),	divided by line	11, column (f)	))	14	91.79 %
15	Public support percentage from 2021 Sc					15	91.13 %
16a	33 1/3% support test - 2022. If the organ						
	box and <b>stop here.</b> The organization qua						
b	<b>33 1/3% support test - 2021.</b> If the organ						
	this box and <b>stop here.</b> The organization						
17a	10%-facts-and-circumstances test - 20						
	10% or more, and if the organization mee					•	
	Part VI how the organization meets the fa			-	•		· —
	organization						
b	10%-facts-and-circumstances test - 20	-					
	15 is 10% or more, and if the organization					•	•
	in Part VI how the organization meets the			-	•		· · ·
40	organization						
18	<b>Private foundation.</b> If the organization d						_
	instructions						

#### 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>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees	•					
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
·	unrelated trade or business under section 513						
4	Tax revenues levied for the						
7	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
3	furnished by a governmental unit to the						
	organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3						
ı a	received from disqualified persons .						
h	Amounts included on lines 2 and 3						
b							
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
•	or 1% of the amount on line 13 for the year  Add lines 7a and 7b						
C	Public support. (Subtract line 7c from						
8	line 6.)						
Secti	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6	(a) 2010	(b) 2013	(6) 2020	(u) 2021	(6) 2022	(i) Total
э 10а							
IUa	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
h	royalties, and income from similar sources • Unrelated business taxable income (less						
b	, ,						
	section 511 taxes) from businesses						
_	acquired after June 30, 1975 Add lines 10a and 10b						
C							
11	Net income from unrelated business						
	activities not included on line 10b, whether						
40	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
40	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
4.4	and 12.)	raanizationia f	rot occord the	rd fourth and	fth tox year a	a postion FO1/	0)(3)
14	-	-			-		
Coati	organization, check this box and stop her on C. Computation of Public Suppo						· · · · · · <u> </u>
	Public support percentage for 2022 (line 8			12 column /f	1)	15	%
15 16			•		•	16	
16 Secti	Public support percentage from 2021 Schon D. Computation of Investment In					10	70
	Investment income percentage for <b>2022</b> (li			v line 13 colu	mn (f))	17	%
17 18	Investment income percentage for 2022 (in Investment income percentage from 2021			•		18	
18							
19a	33 1/3% support tests - 2022. If the orga 17 is not more than 33 1/3%, check this be						
h	33 1/3% support tests - 2021. If the organization	•					
b							
20	line 18 is not more than 33 1/3%, check this box a <b>Private foundation.</b> If the organization did	•		•			····· ∐ tione □
_20	riivate iouiluation. Ii the organization di	a not oneth a	50A 011 III1E 14,	100, 01 100, 0	HOUR THIS DUX 6	366 111911110	

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

Section	A. AII	Supporting	<b>Organizations</b>

			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 <b>Part VI</b> 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 <b>Part VI</b> 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 <b>Part VI</b> what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If	_		
	"Yes," and if you checked 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 <b>Part VI</b> how the organization had such control and discretion	46		
•	despite being controlled or supervised by or in connection with its supported organizations.  Did the organization support any foreign supported organization that does not have an IRS determination	4b		
С	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes,"</i>	70		
-	answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;			
	(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action			
	was accomplished (such as by amendment to the organizing document).	5a		
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?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited			
	by one or more of its supported organizations, or (iii) other supporting organizations that also support or			
_	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI.</b>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity			
	with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line	8		
9a	7? If "Yes," complete Part I of Schedule L (Form 990).  Was the organization controlled directly or indirectly at any time during the tax year by one or more	•		
эа	disqualified persons, as defined in section 4946 (other than foundation managers and organizations			
	described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which	Ju		
~	the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	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 <b>Part VI</b> .	9с		
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 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			
	determine whether the organization had excess business holdings.)	10b		

Part I	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
	provide detail in <b>Part VI.</b>	11c		
Section	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 <b>Part VI</b> 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 <b>Part</b>			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Section	on C. Type II Supporting Organizations			
ocotic	on or type in oupporting organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		103	140
•	or trustees of each of the organization's supported organization(s)? <i>If "No," describe in <b>Part VI</b> how control</i>			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Section	on D. All Type III Supporting Organizations			
occiic	on b. All Type III Supporting Organizations		Yes	No
1	Did the arganization provide to each of its supported erganizations, but he lost day of the fifth month of the		163	NO
•	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	4		
•	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 <b>Part VI</b> how			
•	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in 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 <b>Part VI</b> the role the organization's			
041-	supported organizations played in this regard.	3		
	on E. Type III Functionally Integrated Supporting Organizations		<b>!</b>	1
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	INSTR	uctioi	ns).
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions	).		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would			
	have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
h	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.

Schedul	The Advocates For Human Rights		36-3292	374	Page 6
Part		rgaı	nizations		
1	Check here if the organization satisfied the Integral Part Test as a qualifying				
	instructions. All other Type III non-functionally integrated supporting organi	izati	ons must complete Section	าร A through	h E.
Secti	ion A - Adjusted Net Income		(A) Prior Year	(B) Curre	
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			
Secti	ion B - Minimum Asset Amount		(A) Prior Year	(B) Curre	
1	Aggregate fair market value of all non-exempt-use assets (see				
	instructions for short tax year or assets held for part of year):				
а	Average monthly value of securities	1a			
b	Average monthly cash balances	1b			
	Fair market value of other non-exempt-use assets	1c			
d	Total (add lines 1a, 1b, and 1c)	1d			
е	Discount claimed for blockage or other factors				
	(explain in detail in <b>Part VI</b> ):				
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			
Secti	ion C - Distributable Amount			Current	t 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			

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

4

5

Enter greater of line 2 or line 3.

Income tax imposed in prior year

Distributable Amount. Subtract line 5 from line 4, unless subject to

Schedule A (Form 990) 2022 EEA

d Excess from 2021e Excess from 2022

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

Schedule A (Form 990) 2022 Page 8 Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part Part VI 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**

OMB No. 1545-0047

**Employer identification number** 

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.

2022

36-3292374 The Advocates For Human Rights Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 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 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions 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

2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Name of organization

The Advocates For Human Rights

Employer identification number 36-3292374

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_1_	Otto Bremer Trust  30 E 7th Street, Suite 2900  Saint Paul MN 55101	\$110,000	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_2_	Lenzmeier Family Foundation  750 S 2nd St Ste 802  Minneapolis MN 55401	\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_ 3	St Paul & Minneapolis Fdn - Greives  101 5th St E Ste 2400  Saint Paul MN 55101	\$100,000	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
Ño.	Name, address, and ZIP + 4	Total contributions	Type of contribution
No.	Name, address, and ZIP + 4  Vera Institute of Justice, Inc.  34 35th Ave, Suite 4-2A	Total contributions	Person Rayroll Noncash (Complete Part II for
No	Name, address, and ZIP + 4  Vera Institute of Justice, Inc.  34 35th Ave, Suite 4-2A  Brooklyn NY 11232  (b)	\$158,226	Type of contribution  Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	Name, address, and ZIP + 4  Vera Institute of Justice, Inc.  34 35th Ave, Suite 4-2A  Brooklyn NY 11232  (b)  Name, address, and ZIP + 4  Minnesota Freedom Fund  825 Nicellet Mall Ste 815	\$ 158,226  (c) Total contributions	Type of contribution  Person

Name of organization Employer identification number

The Advocates For Human Rights

36-3292374

Part I	<b>Contributors</b> (see instructions). Use duplicate copie	s of Part I if additional space is no	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Anomymous  PO Box 9509  Warwick RI 02889	\$150,000	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_8_	YMCA of the North  PO Box 1450  Minneapolis MN 55485	\$\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_ 9	Legal Services Advisory Committee  25 Rev DR Martin Luther King Jr Blv  Saint Paul MN 55155	\$100,000	Person K Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_10	Minnesota Dept of Human Services  444 Layfette Rd  Saint Paul MN 55155	\$\$	Person K Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person

#### SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

### **Supplemental Financial Statements**

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

Attach to Form 990.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization **Employer identification number** The Advocates For Human Rights 36-3292374 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 2 Aggregate value of contributions to (during year) . . . . Aggregate value of grants from (during year) 3 Aggregate value at end of year . . . . . . . . . . . . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 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 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). 1 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 2a Total acreage restricted by conservation easements 2b Number of conservation easements included in (c) acquired after July 25, 2006, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 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 violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 9 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. Part III 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. 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: (i) Revenue included on Form 990, Part VIII, line 1 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: Revenue included on Form 990, Part VIII, line 1 

Par	t III Organizations Maintaining Colle	ections of Art, His	storical Treasure	s, or Oth	er Similar Ass	sets (con	tinued)
3	Using the organization's acquisition, accession, and	d other records, check a	any of the following that	make signifi	cant use of its		
	collection items (check all that apply):						
а	Public exhibition	d	Loan or exchange	program			
b	Scholarly research	e	Other				
c	Preservation for future generations	· ·					
_	Provide a description of the organization's collection	ns and avalain how thay	further the erganization	n'e evemnt n	urnoco in Part		
4		ns and explain now they	Turtiler the organization	irs exempt pi	Jipose III Fait		
_	XIII.			,			
5	During the year, did the organization solicit or received					п.,	п.,
Daw	assets to be sold to raise funds rather than to be m		organization's collectio	n?	<del></del>	Yes	∐ No
Par	t IV Escrow and Custodial Arrange		000 D + 11/4 II	•			
	Complete if the organization answ	wered "Yes" on Fol	rm 990, Part IV, III	ne 9, or re	ported an amo	ount on F	orm
	990, Part X, line 21.						
1a	Is the organization an agent, trustee, custodian or of					_	_
	included on Form 990, Part X?			• • • • • •		Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII and co	omplete the following tab	ole:				
					Amo	unt	
С	Beginning balance						
d	Additions during the year						
е	Distributions during the year			1e			
f	Ending balance			1f			
2a	Did the organization include an amount on Form 99	00, Part X, line 21, for es	scrow or custodial acco	unt liability?		Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII. Checl	k here if the explanation	has been provided on	Part XIII			
Par	t V Endowment Funds.		·				
	Complete if the organization answ	wered "Yes" on Fo	rm 990, Part IV, li	ne 10.			
	(a)	Current year (b) F	Prior year (c) Two ye	ears back (	d) Three years back	(e) Four yea	ars back
1a	Beginning of year balance	, , , , , ,	, , ,		· · · ·	, ,	
b	Contributions						
С	Net investment earnings, gains, and						
	losses						
d	Grants or scholarships						
e	Other expenditures for facilities and						
C	programs						
	Administrative expenses						
t 	-						
g	End of year balance						
2	Provide the estimated percentage of the current year		column (a)) neld as:				
a	Board designated or quasi-endowment	%					
D	Permanent endowment%						
С	Term endowment%						
_	The percentages on lines 2a, 2b, and 2c should eq						
3a	Are there endowment funds not in the possession of	of the organization that a	are held and administer	ed for the			
	organization by:						es No
	(i) Unrelated organizations					3a(i)	
	(ii) Related organizations					3a(ii)	
b	If "Yes" on line 3a(ii), are the related organizations I	•				3b	
4	Describe in Part XIII the intended uses of the organ		nds.				
Par	t VI Land, Buildings, and Equipmer						
	Complete if the organization answ	wered "Yes" on Fo	rm 990, Part IV, li	ne 11a. Se	<u>e ⊦orm 990, l</u>	Part X, Iin	e 10.
	Description of property	(a) Cost or other basis	(b) Cost or other basis		cumulated	(d) Book va	llue
		(investment)	(other)	depi	reciation		
1a	Land						
b	Buildings						
С	Leasehold improvements						
d	Equipment		124,537		123,057	:	L,480
е	Other						
Total.	Add lines 1a through 1e. (Column (d) must equal Fo.	rm 990, Part X, column	(B), line 10c.)			:	L,480

Schedule D (Form 990) 2022 The Advocates For Human Rigi	nts	<b>36-3292374</b> Page 5
Part VII Investments - Other Securities.		
Complete if the organization answered "Yes" on For	m 990, Part IV, lir	ne 11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
<u>(F)</u>		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII Investments - Program Related.  Complete if the organization answered "Yes" on For	m 000 Port IV lin	on 11a San Form 000 Part V line 12
Complete if the organization answered fes on For	ili 990, Part IV, ili	ie 11c. See Form 990, Part A, ilile 13.
(a) Description of investment		
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(a) Description of investment	(b) Book value	
	(b) Book value	
(1)	(b) Book value	
(1) (2)	(b) Book value	
(1) (2) (3)	(b) Book value	
(1) (2) (3) (4)	(b) Book value	
(1) (2) (3) (4) (5)	(b) Book value	
(1) (2) (3) (4) (5) (6)	(b) Book value	
(1) (2) (3) (4) (5) (6) (7) (8) (9)	(b) Book value	
(1) (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)	(b) Book value	
(1) (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		Cost or end-of-year market value
(1) (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		Cost or end-of-year market value
(1) (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		ne 11d. See Form 990, Part X, line 15.  (b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		Cost or end-of-year market value  ne 11d. See Form 990, Part X, line 15.
(1) (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		ne 11d. See Form 990, Part X, line 15.  (b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)  Part IX Other Assets.  Complete if the organization answered "Yes" on Fore (a) Description  (1)Security Deposit (2)Right of Use Asset (3)		ne 11d. See Form 990, Part X, line 15.  (b) Book value  10,132
(1) (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)  Part IX Other Assets.  Complete if the organization answered "Yes" on For (a) Description  (1) Ecurity Deposit (2) Right of Use Asset (3) (4)		ne 11d. See Form 990, Part X, line 15.  (b) Book value  10,132
(1) (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)  Part IX Other Assets.  Complete if the organization answered "Yes" on For (a) Description  (1)Security Deposit (2)Right of Use Asset (3)		ne 11d. See Form 990, Part X, line 15.  (b) Book value  10,132

(a) Description	(b) Book value
(1)Security Deposit	10,132
(2Right of Use Asset	574,272
_ (3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	584,404

#### Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2Lease Liability	651,848
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total, (Column (b) must equal Form 990, Part X, col. (B) line 25.)	651 848

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

Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	Retu	'n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	20,902,630
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	16,972,364
3	Subtract line 2e from line 1	3	3,930,266
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 12.)	5	3,930,266
Part		er Re	turn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	20,260,479
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	-	
b	Prior year adjustments	_	
C	Other losses	_	
d	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d	2e	16,945,727
3		3	3,314,752
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	-	
b	Add lines 4a and 4b	4c	
5	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)	5	2 214 752
Part			3,314,752
	the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part IV, lines 1b and 2b; Part V, line 4; Part IV, lines 1b and 2b; Part V, line 4; Part IV, lines 1b and 2b; Part V, line 4; Part IV, lines 1b and 2b; Part V, line 4; Part IV, lines 1b and 2b; Part V, line 4; Part IV, lines 1b and 2b; Part V, l	rt X line	
	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	, , , , , , ,	
,	,,,,,,,,,,,		

#### **SCHEDULE F** (Form 990)

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

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

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

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Inspection Employer identification number

The Advocates For Human R				36-32923	
		Outside the	United States. Complete it	f the organization answered '	'Yes" on
Form 990, Part IV, lin					
1 For grantmakers. Does the org			_		
other assistance, the grantees'		-			
award the grants or assistance?					x Yes No
O Established Decide to 5	No. 4 N/ Horonomer 2	are de la	and the control of th		
2 For grantmakers. Describe in F	art V the organi	zation's procedur	es for monitoring the use of its g	grants and other assistance	
outside the United States.					
O Astistica nea Design (The faller	in a Daniel line	0 + -			
Activities per Region. (The follow (a) Region	(b) Number	(c) Number of	(d) Activities conducted in the	(e) If activity listed in (d) is	(f) Total
(a) Hogion	of offices in	employees,	region (by type) (such as,	a program service,	expenditures for
	the region	agents, and independent	fundraising, program services, investments, grants to recipients	describe specific type of service(s) in the region	and investments in the region
		contractors in the region	located in the region)		
Europe (including		the region			
(1) Iceland and Greenland)			Program services	Advocacy & Education	22,284
Central America and			riogiam services	Advocacy & Education	22,204
(2) the Caribbean			Program services	Advocacy & Education	626
(-) one daribbean			110gram bervrees	lavoodo, a Eduodoro.	. 020
(3)South Asia			Program services	Education	93,379
					,
(4)					
(5)					
(6)					
(7)					
(8)	-				
(0)					
(9)					
(10)					
(10)					
(11)					
(11)					
(12)					
(1-)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Subtotal		1			116,289
<b>b</b> Total from continuation					
sheets to Part I					
c Totals (add lines 3a and 3b)		1			116.289

The Advocates For Human Rights

Schedule F (Form 990) 2022

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Page 2

36-3292374

(i) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990 (h) Description of noncash assistance Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. (g) Amount of noncash assistance (f) Manner of cash disbursement (e) Amount of cash grant (d) Purpose of grant (c) Region (b) IRS code section and EIN (if applicable) (a) Name of organization Part II 9 Ξ

▲ Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter က (16)

(12)

(13)

(15)

EEA

(14)

Schedule F (Form 990) 2022 Enter total number of other organizations or entities

The Advocates For Human Rights

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. Schedule F (Form 990) 2022 Part III

Page 3

36-3292374

Schedule F (Form 990) 2022 (h) Method of valuation (book, FMV, appraisal, other) (g) Description of noncash assistance (f) Amount of noncash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance (10) Ξ (12) (13) (14) (15) (16) (17) (18) Ξ <u>8</u> ල 4 2 9 8 6 EEA 6

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1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ Yes	<b>⋉</b> No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	☐ Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	☐ Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	☐ Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	☐ Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	☐ Yes	X No

Schedule F (Form 990) 2022

 Schedule F (Form 990) 2022
 Page 5

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

EEA Schedule F (Form 990) 2022

#### **SCHEDULE G** (Form 990)

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

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

Attach to Form 990 or Form 990-EZ.

**Open to Public** 

OMB No. 1545-0047

Internal Revenue Service Name of the organization

Department of the Treasury

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

Inspection

Employer identification number

Part I Fundraising Activities	. Complete if the	_		vered "Yes" on F	36-3292 orm 990, Part IV, li	2 <b>374</b> ine 17.
Form 990-EZ filers are no	t required to cor	nplete this	part.			
1 Indicate whether the organization rais	ed funds through a	any of the follo	owing activitie	es. Check all that app	ly.	
a X Mail solicitations						
				of government grant		
=		_	_		5	
c Phone solicitations		g <u>1</u>	Special fur	ndraising events		
d In-person solicitations						
2a Did the organization have a written or	oral agreement wit	th anv individu	ual (including	officers, directors, tr	ustees.	
or key employees listed in Form 990,	-	-				X Yes No
				_		X res   No
<b>b</b> If "Yes," list the 10 highest paid indivi-	duals or entities (fu	ındraisers) pu	ursuant to ag	reements under whic	h the fundraiser is to be	
compensated at least \$5,000 by the o	organization.					
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody o	draiser have or control of butions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No		coi. (i)	
1Future Funding LLC - Elle	Grant					
645 Pillsbury Ave S MN	writing		х	200,000	24,600	175,400
2Gretchen Piper Consulting	Grant			,	,	,
			.,		20 076	(00.076)
63 Highcroft Rd MN 55391	writing		X		20,076	(20,076)
3						
4						
5						
6						
7						
1						
8						
9						
10						
otal				200,000	44,676	155,324
3 List all states in which the organization						,
_	in io registered of ii	0011000 10 30	non continuat	iono or mao been motil	ica it is exempt from	
registration or licensing.						
Iinnesota						

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events (add col. (a) through HRAD None col. (c)) (event type) (event type) (total number) Revenue Gross receipts . . . . . . 193,141 193,141 Less: Contributions . . . . . 2 Gross income (line 1 minus 193,141 193,141 4 Cash prizes 5 Noncash prizes Direct Expenses Rent/facility costs . . . . . . 26,250 26,250 Food and beverages 23,003 23,003 42,424 Other direct expenses 42,424 Direct expense summary. Add lines 4 through 9 in column (d) 10 91,677 Net income summary. Subtract line 10 from line 3, column (d) 11 101,464 Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) Gross revenue . . . . . . . 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs 5 Other direct expenses Yes No 6 Volunteer labor Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary. Subtract line 7 from line 1, column (d) Enter the state(s) in which the organization conducts gaming activities: 9 Is the organization licensed to conduct gaming activities in each of these states? If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? If "Yes," explain:

#### **SCHEDULE M** (Form 990)

## **Noncash Contributions**

OMB No. 1545-0047

2022

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

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

Par	t   Types of Property							
ı aı	Types of Froperty	(-)	(L)	(c)		(-I)		
		(a) Check if applicable	(b) Number of contributions or items contributed	Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method o			
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded							
10	Securities - Closely held stock							
11	Securities - Partnership, LLC,							
	or trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation							
	contribution - Historic							
	structures							
14	Qualified conservation							
45	contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Collectibles							
18	Food inventory							
19 20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ( Supply and Even )	х		83.843	Estimated	1 FMV		
26	Other (							
27	Other (							
28	Other (							
29	Number of Forms 8283 received by the o	rganization d	uring the tax year for contribution	ons for				
	which the organization completed Form 8	283, Part V,	Donee Acknowledgement		29			
						\	es/	No
30a	During the year, did the organization rece	ive by contrib	oution any property reported in F	Part I, lines 1 through				
	28, that it must hold for at least three yea	rs from the da	ate of the initial contribution, and	d which isn't required to be				
	used for exempt purposes for the entire h		!?			30a		X
b	If "Yes," describe the arrangement in Par							
31								
						31		_X
32a								
						32a		Х
b	If "Yes," describe in Part II.	tin only	) for a time of minoral for the	h column (a) is sheet				
33		ı iri column (0	) for a type of property for which	п соштт (а) із спескей,				
33	If the organization didn't report an amoun describe in Part II.	t in column (d	c) for a type of property for whic	h column (a) is checked,				

# SCHEDULE O (Form 990)

#### Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

The Advocates For Human Rights	36-3292374
01. Form 990 governing body review (Part VI, line 11)	
Reviewed by finance committee and Board of Directors prior to filing	٦.
02. Conflict of interest policy compliance (Part VI, line 12c)	
The Board of Directors members each sign a conflict of interest stat	cement annually. At
each meeting the Board reviews and addresses potential conflicts.	
03. CEO, executive director, top management comp (Part VI, line 15a)	<u>,                                      </u>
The executive director's salary was initially set by, and is regular	aly reviewed by the
Board of Director's Executive Committee and is based upon industry s	standards,
04. Other officer or key employee compensation (Part VI, line 15b	
Salaries are reviewed with the Executive Committee when positions are	re filled and are based
on industry standards. Any changes in compensation are reviewed by t	the finance committee,
Executive Committee, and full Board of Directors as part of the annual committee.	nual budgeting process.
05. Governing documents, etc, available to public (Part VI, line 19)	
Available upon request.	
Mariable upon request.	
06. List of other fees for services expenses (Part IX, line 11g)	
Includes interpretors, court observors, graphic designer, consultant	
staff.	
<u> </u>	
07. Part III, response or note to any other line in Part III	
Continued from Schedule III, 4b	

Schedule O (Form 990) 2022 Page 2

Name of the organization **Employer identification number** The Advocates For Human Rights 36-3292374 facilitate a coalition of 70 human rights defenders to counter the anti-gender movement and protect human rights. In addition, we interviewed Ukrainians to document evidence of war crimes committed during the war in Ukraine for the International Criminal Court prosecutor's investigation. Part III 4d Other Program Services International Justice: The Advocates develops innovative, sustainable strategies to hold governments accountable for human rights abuses and to strengthen institutions in the international justice system. The Advocates engages our clients, diaspora communities, and international human rights partners in monitoring and documenting human rights conditions in countries around the world, and using local, regional, international, and transitional justice mechanisms to improve human rights worldwide. With the assistance of pro bono volunteers, in FY2023 The Advocates partnered with human rights defenders in more than 50 countries on 5 continents to build their capacity to engage in international advocacy to end gender-based violence, the use of the death penalty, and violence and discrimination based on race, religion, ethnicity, national origin, sexual orientation, gender identity, gender expression, and/or sex characteristics. Nepal School Project: Since 1999, The Advocates has partnered with the Sankhu-Palubari community in Nepal to provide the most at-risk children in the area with high-quality education as a genuine alternative to child labor and a pathway to academic success and economic opportunity. The Sanku-Palubari Community School currently provides an entirely free education, including textbooks, uniforms, and a daily meal, to 375 students enrolled in pre-K through grade 10. Fifty-three percent of the students are girls.

EEA Schedule O (Form 990) 2022