#### \*\* PUBLIC DISCLOSURE COPY \*\*

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

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

A	For the	2022 calendar year, or tax year beginning and end	ding							
В	Check if applicable	C Name of organization		D Employer identific	cation number					
Г	Addres	GoodWeave International								
	Name change			52-20420	14					
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	om/suite	E Telephone numbe	r					
	Final return/ termin-	inal 1111 14+b C+ $\infty$ 0+ NTW   020   /202\ 224								
_	ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	1,828,342.					
Ļ	Ameno	Washington, DC 20005 5010		H(a) Is this a group re						
	Application pending			for subordinates						
	-	same as C above		<b>H(b)</b> Are all subordinates in						
		empt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or L	527	· ·	list. See instructions					
	Websit			H(c) Group exemptio						
		organization: X Corporation Trust Association Other	<b>L</b> Year o	of formation: 1996 N	State of legal domicile: DC					
Р		Summary		works to st	on ahild					
Se	1 1	Briefly describe the organization's mission or most significant activities: ${ t GoodWe} \ { t labor in global supply chains. Permanently}$	ave	WOLKS TO ST	op chila					
Jan				# OFO/ -f # +						
Activities & Governance		Check this box if the organization discontinued its operations or disposed Number of voting members of the governing body (Part VI, line 1a)			14					
ဗွ		Number of voting members of the governing body (Part VI, line 1a)  Number of independent voting members of the governing body (Part VI, line 1b)			14					
<u>დ</u>		Total number of individuals employed in calendar year 2022 (Part V, line 2a)		·····	15					
iţi		Total number of volunteers (estimate if necessary)			14					
냚		Total unrelated business revenue from Part VIII, column (C), line 12			0.					
⋖		Net unrelated business taxable income from Form 990-T, Part I, line 11			0.					
				Prior Year	Current Year					
Φ	8	Contributions and grants (Part VIII, line 1h)	🗀	2,149,831.	1,005,470.					
Revenue		Program service revenue (Part VIII, line 2g)		911,102.	819,321.					
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		2,899.	2,805.					
Œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-131,420.	746.					
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,932,412.	1,828,342.					
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		444,494.	161,304.					
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.					
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) $\dots$		1,456,622.	1,428,329.					
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	<u> </u>	21,042.	4,782.					
Ϋ́	þ.	Total fundraising expenses (Part IX, column (D), line 25) 68,142		1 507 104	1 745 000					
	17 '	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,507,104.						
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		-496,850 <b>.</b>	3,340,217. -1,511,875.					
- 2	19	Revenue less expenses. Subtract line 18 from line 12		ginning of Current Year	End of Year					
Net Assets or	<u> </u>	Total assets (Part X, line 16)	<u> </u>	6,013,211.	4,387,152.					
ASS	20			864,301.	346,372.					
Net	22	Total liabilities (Part X, line 26)  Net assets or fund balances. Subtract line 21 from line 20		5,148,910.	4,040,780.					
P	art II	Signature Block		0 / = = 0 / 0 = 0 0						
		Ities of perjury, I declare that I have examined this return, including accompanying schedules an	nd stateme	ents, and to the best of m	y knowledge and belief, it is					
		t, and complate. Perfaration of preparer (other than officer) is based on all information of which								
		The ACC		08/14/2	2023					
Sig	jn	Signature of officer		Date						
He		Nina Smith, Chief Executive Officer								
		Type or print name and title								
		Print/Type preparer's name  Preparer's signature  Preparer's signature		Date Check	PTIN					
Pai		Tolig Zilalig, CPA	ng 0	8/07/23 if self-employ	P01249785					
		Firm's name Rogers & Company PLLC		Firm's EIN 5	8-2676261					
Use	Only	Firm's address 8300 Boone Boulevard, Suite 600		,_	021 002 0202					
		Vienna, VA 22182		Phone no. (7	03) 893-0300					
Ma	v the IF	RS discuss this return with the preparer shown above? See instructions			X Yes No					

Pa	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	GoodWeave works to stop child labor in global supply chains.
	Permanently.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
3	0
_	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:)(Expenses \$ 728,166. including grants of \$) (Revenue \$) GoodWeave is disrupting the cycle of child labor, slavery, illiteracy
	GoodWeave is disrupting the cycle of child labor, slavery, illiteracy
	and poverty through the following interrelated strategies:
	Harness Market Forces:
	From the garment factories of Bangladesh to the artisanal cobalt mines
	of the Democratic Republic of the Congo, there are 160 million child
	laborers today. GoodWeave employs a demand driven model to end child
	labor.
	See Schedule O for Continuation
4b	(Code: ) (Expenses \$ 975,590 • including grants of \$ 5,504 • ) (Revenue \$ 819,321 • )
	Establish Transparent and Clean Supply Chains:
	Inspection, Monitoring and Certification:
	GoodWeave certification offers the best assurance that rug, home
	textile, and apparel and fashion jewelry products are made without the
	use of child labor. GoodWeave's inspection system is the only one that
	reaches all levels of the supply chain in an informal manufacturing
	sector. In 2022, GoodWeave's national inspection teams in South Asia
	reached 93,293 workers through monitoring visits to facilities, which
	also resulted in more than 3.9 million rugs and home textiles certified
	as child-labor-free.
	as child-labor-liee.
	Gas Gabadula O for Combinuation
	See Schedule O for Continuation
4c	(Code:) (Expenses \$ 575,546. including grants of \$ 146,936. ) (Revenue \$)
	Create Educational Opportunities for Children:
	In 2022, GoodWeave directly provided access to education for 20,598
	children with another 27,640 indirectly benefiting from schooling
	initiatives. GoodWeave teams in India and Nepal have continued to
	innovate program design, introducing education programs ranging from
	daycare and early childhood education programs in Nepal to establishing
	entire "child-friendly" communities throughout North India's informal
	worker regions. While the implementation model, scope and scale from
	community to community varies, the strategy behind doing this remains
	the same.
	cite same.
	Geo Gebedule O for Combinuetica
	See Schedule O for Continuation
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 690,610 • including grants of \$ 8,864 •) (Revenue \$ )
4e	Total program service expenses 2,969,912.
	Form <b>990</b> (2022)

# Form 990 (2022) GoodWeave International Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
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			, v
	public office? If "Yes," complete Schedule C, Part I	3		X
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i>	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			٠,,
	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			X
•	Schedule D, Part III  Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	8		Α.
9	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		x
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		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			l
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			7.7
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
a	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110		
-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	4.41-	Х	
15	or more? If "Yes," complete Schedule F, Parts I and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b	21	
13	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	04		<sub>v</sub>
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	L	X

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			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	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	05-		$ _{\mathbf{x}}$
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Cabadida I Dort I	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		<del></del>
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		х
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		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?//			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	20		x
31	contributions? If "Yes," complete Schedule M	30 31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		<del></del>
UZ.	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		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
35 a	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 controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			,,
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		Х	
Par	Note: All Form 990 filers are required to complete Schedule O	38	Λ	
· ai	Check if Schedule O contains a response or note to any line in this Part V			
	Shook is Contidual Contidual a response of flote to any line in this fact v		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 13		. 03	
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	

#### O22) GoodWeave International Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

			Yes	No
<b>2</b> a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	_		
		5	77	
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		X	- V
	Did the organization have unrelated business gross income of \$1,000 or more during the year?		-	Х
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	-	-
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	١.		x
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		
D	If "Yes," enter the name of the foreign country  See instructions for filing requirements for FinCFN Form 114. Penant of Favoign Penk and Financial Accounts (FRAR)			
<b>5</b> 0	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	5a		Х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		1	X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	30		
ou	any contributions that were not tax deductible as charitable contributions?	6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
-	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor	? 7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
_	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	0-		
			1	-
т 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:	9b		
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans	_		
	Enter the amount of reserves on hand	4.4		V
	Did the organization receive any payments for indoor tanning services during the tax year?		1	X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	+	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.	13		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.	.5		
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a 8b or 10b below describe the circumstances, processes, or changes on Schedule O. See instructions

	to line 6a, 6b, or 10b below, describe the circumstances, processes, or changes on schedule 6. See instructions.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			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 on line 1a, above, who are independent 1b 14			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			37
	officer, director, trustee, or key employee?	2		<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			3,7
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		
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		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
•	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		v	
_	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			x
800	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Λ
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		Vaa	Na
100	Did the examination have lead chanters branches as offiliated?	10a	Yes	No X
	Did the organization have local chapters, branches, or affiliates?	IUa		
b	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
112	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	1 IG		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	12.0		
·	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	
	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed CT, DC, FL, IL, MD, MA, NJ, NY, NC	,OH	, PA	,RI
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	availa	able
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X 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, an	d finar	ncial	
	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			
	Cyndi Janetzko, CFO - (202) 234-9050			
	1111 14th Street, NW Suite 820, Washington, DC 20005-5610			

#### Form 990 (2022)

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

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

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

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

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

Check this box if neither the organization	nor any related	orga	aniza	ation	COI	npe	nsat	ed any current officer, o	director, or trustee.	
(A)	(B)				<b>C</b> )			(D)	(E)	(F)
Name and title	Average	(do	not c	Pos heck			one	Reportable	Reportable	Estimated
	hours per	box	, unle cer an	ss pe	rson	is bot	h an	compensation	compensation	amount of
	week		CCI all	lu a u	liecio	)/ ii us	100)	from	from related	other
	(list any	irecto						the	organizations	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	truste	al trus		yee	mpen		1099-NEC)	1000 (120)	and related
	below	Individual trustee or director	Institutional trustee	_	Key employee	est co	er			organizations
	line)	Indiv	Instit	Officer	Key e	Highest compensated employee	Form			
(1) Nina Smith	40.00									
Chief Executive Officer				Х				148,748.	0.	14,775.
(2) Micaela Vivero	40.00								_	
Vice President of Communications						Х		128,220.	0.	13,436.
(3) Elisabeth Bystrom	40.00								_	
Senior Director Of Programs						Х		130,000.	0.	3,863.
(4) Cynthia Janetzko	32.00								_	
Chief Financial Officer				Х				102,796.	0.	11,864.
(5) Sandra Holmberg	40.00								_	_
Senior Manager, Capacity Building						Х		109,400.	0.	0.
(6) Daniel Cady	40.00								_	
Assistant Controller						Х		101,675.	0.	6,128.
(7) Edward Millard	1.00								_	_
Chair		Х		Х				0.	0.	0.
(8) Marc Triaureau	1.00	ļ								
Treasurer		X		Х				0.	0.	0.
(9) Michelle Cross Fenty	1.00	ļ								
Secretary		X		Х				0.	0.	0.
(10) Siddharth Kara	1.00	ļ								
Director		X						0.	0.	0.
(11) Regatte Venkat Reddy	1.00	ļ								
Director	1 00	X						0.	0.	0.
(12) Alissandra Aronow	1.00	ļ								•
Director	1 00	Х						0.	0.	0.
(13) Chip Lyons	1.00	ļ								•
Director	1 00	Х						0.	0.	0.
(14) Pat Zerega	1.00	ļ								•
Director	1 00	Х						0.	0.	0.
(15) Jacqui Larson	1.00	١						_		•
Director	1 00	Х						0.	0.	0.
(16) Kul Gautam	1.00	1						_		_
Emeritus Director	1 1 00	Х		_				0.	0.	0.
(17) Pharis Harvey	1.00	,,						_		_
Emeritus Director		Х						0.	0.	0.

Part VII   Section A. Officers, Directors, Trus		ploy	/ees			ighe	st C						
(A)	(B)			Pos	C)	1		(D)	(E)		_	(F)	
Name and title	Average hours per		not c	heck	more	than		Reportable compensation	Reportable compensation			stimate	
	week					is bot or/trus		from	from related		اما	nount o	וכ
	(list any	ctor						the	organization		com	pensa	tion
	hours for	or dire	يو			ated		organization	(W-2/1099-MIS			om the	
	related organizations	Individual trustee or director	Institutional trustee		g.	suadı		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)		ı ~	anizati d relate	
	below	dualtr	tional		nploye	st con	_	1099-NEC)				u relati anizatio	
	line)	Individ	Institu	Officer	Key employee	Highest compensated employee	Forme						
(18) Claude Fontheim	1.00												
Former Chair		Х						0.		0.			0.
(19) Dan Viederman	1.00	l								•			_
Director	1 00	Х						0.		0.			0.
(20) Barbara Hawthorn	1.00									0			Λ
Director		Х			-	-		0.		0.			0.
		1											
					$\vdash$								
		ł											
		1											
		1											
								720 020		_		0 0	
1b Subtotal								720,839.		0.	) 3	0,0	0.
c Total from continuation sheets to Part V								720,839.		0.	5	0,0	
d Total (add lines 1b and 1c)								-	000 of reported			0,0	00.
compensation from the organization	ot ilmited to tr	iose	IISLE	eu a	DOV	e) wi	10 1	eceived more than \$100	,000 or reportab	ie			6
compensation from the organization												Yes	No
3 Did the organization list any <b>former</b> officer,	director, trust	ee. I	kev (	ame	love	e. o	r hic	ahest compensated emp	olovee on				
line 1a? If "Yes," complete Schedule J for s	•		•		•		_		•		3		Х
4 For any individual listed on line 1a, is the su													
and related organizations greater than \$15	0,000? If "Yes,	" co	mpl	ete S	Sch	edul	e J t	for such individual			4	Х	
5 Did any person listed on line 1a receive or a	accrue compe	nsat	ion 1	from	n any	y uni	relat	ted organization or indivi	dual for services	;			
rendered to the organization? If "Yes," com	plete Schedul	e J t	for s	uch	pers	son .					5		X
Section B. Independent Contractors									•				
1 Complete this table for your five highest co										npens	ation	rom	
the organization. Report compensation for (A)	trie caleridar y	ear	enai	ing v	MILII	Or W	1	(B)	year.			<b>C)</b>	
Name and business	address	N	INC	E				Description of s	ervices	C		nsatior	า
							_						
2 Total number of independent contractors (i	ncluding but n	ot li	mite	ed to	tho	se li	l ster	d above) who received m	nore than				
\$100,000 of compensation from the organi						0							
, , series and a series of garm	-										Eorm	990 (2	2022)

ı u	IL VI	Check if Schedule O contains a response	or note to any lir	ne in this Part VIII			
		Oncer ii Gonedale o contains a response t	or note to any in	(A)  Total revenue	(B) Related or exempt function revenue	(C) Unrelated	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	All other contributions, gifts, grants, and similar amounts not included above 1f		1,005,470.			
Program Service Revenue	2 a b c d d e f	Marketing partner fees Contract  All other program service revenue	Business Code 900099 900099 900099	778,209. 34,499. 6,613.	778,209. 34,499. 6,613.		
	3 4 5	Total. Add lines 2a-2f  Investment income (including dividends, intere other similar amounts)  Income from investment of tax-exempt bond p Royalties	roceeds	2,805.			2,805.
	6 a	Gross rents (i) Real 6a	(ii) Personal				
ər	7 a	Net rental income or (loss)  Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses  (i) Securities  7a  7a	(ii) Other				
her Revenue	d	Gain or (loss)  Net gain or (loss)  Gross income from fundraising events (not					
Ð	С	including \$ of contributions reported on line 1c). See  Part IV, line 18 8a  Less: direct expenses 8b  Net income or (loss) from fundraising events  Gross income from gaming activities. See					
	С	Part IV, line 19 9a Less: direct expenses 9b Net income or (loss) from gaming activities Gross sales of inventory, less returns and allowances 10a					
aneous anue	С	Net income or (loss) from sales of inventory  other income	Business Code 900099	746.			746.
Miscellaneous Revenue	c d			746. 1,828,342.	819,321.	0.	3,551.

# Form 990 (2022) GoodWeave International 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).

3601	Charle if Sahadula Chartains a reason		-	impiete columni (A).	X
Da	Check if Schedule O contains a respor not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, 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	161,304.	161,304.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	270 104	222 020	25 774	0 470
_	trustees, and key employees	278,184.	233,938.	35,774.	8,472.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	995,721.	837,349.	128,045.	30,327.
7 8	Other salaries and wages Pension plan accruals and contributions (include	999,141.	031,343.	140,040	50,541.
ð	section 401(k) and 403(b) employer contributions)	8,661.	7,284.	1,113.	264.
9	Other employee benefits	51,682.	43,461.	6,647.	1,574.
10	Payroll taxes	94,081.	79,117.	12,098.	2,866.
11	Fees for services (nonemployees):	2 - 7 - 0 - 0	,==		
	Management				
	Legal	68,495.	68,495.		
	Accounting	80,440.		80,440.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17	4,782.			4,782.
f	Investment management fees	175.		175.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch O.)	806,142.	789,166.	14,578.	2,398.
12	Advertising and promotion	20,629.	20,059.	516.	54.
13	Office expenses	50,794.	45,191.	3,983.	1,620.
14	Information technology	3,960.	3,546.	283.	131.
15	Royalties	C2 000	F7 201	4 577	2 1 2 1
16	Occupancy	63,999.	57,301.	4,577.	2,121.
17	Travel	63,577.	60,499.	945.	2,133.
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	13,520.	13,520.		
19	Conferences, conventions, and meetings Interest	13,320•	13,320•		
20 21	Payments to affiliates				
22	Depreciation, depletion, and amortization	56,777.	50,835.	4,061.	1,881.
23	Insurance	8,928.	,	8,928.	=,
24	Other expenses. Itemize expenses not covered			, -	
-	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),				
	amount, list line 24e expenses on Schedule 0.)				
а	Social program support	425,881.	425,881.		
b	Membership/compliance	82,485.	72,966.		9,519.
С					
d					
е	All other expenses	2 242 245	0.060.010	200 150	60 112
25	Total functional expenses. Add lines 1 through 24e	3,340,217.	2,969,912.	302,163.	68,142.
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)				
	Uneck nere if following SOP 98-2 (ASC 958-720)				Eorm <b>990</b> (2022)

Form 990 (2022)
Part X Balance Sheet

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or	note to a	ny line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			1,645,040.	1	549,349.
	2	Savings and temporary cash investments	533,473.	2	536,025.		
	3	Pledges and grants receivable, net	1,732,398.	3	1,308,089.		
	4	Accounts receivable, net	507,892.	4	361,635.		
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, su					
		controlled entity or family member of any of t	sons		5		
	6	Loans and other receivables from other disqu	alified p	ersons (as defined			
		under section 4958(f)(1)), and persons descri	bed in se	ection 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ř	9	Prepaid expenses and deferred charges			9,091.	9	26,712.
	10a	Land, buildings, and equipment: cost or other	r				
		basis. Complete Part VI of Schedule D	10a				
	b	Less: accumulated depreciation	. 10b	152,256.	9,218.	10c	3,617. 105,486.
	11	Investments - publicly traded securities			114,941.	11	105,486.
	12	Investments - other securities. See Part IV, lin	ie 11			12	
	13	Investments - program-related. See Part IV, lin			13		
	14	Intangible assets		1,455,472.	14	1,420,019.	
	15	Other assets. See Part IV, line 11			5,686.	15	76,220.
	16	Total assets. Add lines 1 through 15 (must e	qual line	33)	6,013,211.	16	4,387,152.
	17	Accounts payable and accrued expenses	114,833.	17	69,713.		
	18	Grants payable		138,174.	18	85,166.	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Comple	te Part I\	/ of Schedule D		21	
es	22	Loans and other payables to any current or for	ormer of	ficer, director,			
Liabilities		trustee, key employee, creator or founder, su	bstantia	I contributor, or 35%			
jab		controlled entity or family member of any of t		_		22	
_	23	Secured mortgages and notes payable to un				23	
	24	Unsecured notes and loans payable to unrela				24	
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on lin	nes 17-2	4). Complete Part X	611 204		101 402
		of Schedule D			611,294. 864,301.	25	191,493. 346,372.
	26	Total liabilities. Add lines 17 through 25			804,301.	26	340,372.
Se		Organizations that follow FASB ASC 958, o	check he	ere 🔼			
ŭ		and complete lines 27, 28, 32, and 33.			2,308,373.		2,328,775.
3ala	27	Net assets without donor restrictions			2,840,537.	27	1,712,005.
<u>a</u>	28	Net assets with donor restrictions			2,040,337.	28	1,712,003.
Ē		Organizations that do not follow FASB ASC	958, CI	neck nere			
<u>p</u>		and complete lines 29 through 33.	-1-				
Net Assets or Fund Balances	29	Capital stock or trust principal, or current fun				29	
Ass	30	Paid-in or capital surplus, or land, building, or				30	
et /	31	Retained earnings, endowment, accumulated		<b>-</b>	5,148,910.	31	4,040,780.
Z	32	Total net assets or fund balances			6,013,211.	32	4,387,152.
	33	Total liabilities and net assets/fund balances			0,013,411.	33	Form <b>990</b> (2022)

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)		1,82		
2	Total expenses (must equal Part IX, column (A), line 25)		3,34		
3	Revenue less expenses. Subtract line 2 from line 1	3 -	1,51	1,8	75.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	5,14		
5	Net unrealized gains (losses) on investments	5	-	9,4	55.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9	41	3,2	00.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	4,04	0,7	80.
Pa	rt XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scl	nedule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2022)

#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

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

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

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Employer identification number

GoodWeave International 52-2042014 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other ì your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	3,382,968.	5,131,636.	3,021,729.	2,149,831.	1,005,470.	14,691,634.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	3,382,968.	5,131,636.	3,021,729.	2,149,831.	1,005,470.	14,691,634.
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)						6,583,947.
	Public support. Subtract line 5 from line 4.						8,107,687.
	etion B. Total Support	( ) 22/2	" > 00 + 0	( ) 0000	( 11 000 )		<u> </u>
	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 4	3,382,968.	5,131,636.	3,021,729.	2,149,831.	1,005,470.	14,691,634.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	710 060	715,104.	671,668.	880,044.	781,014.	2 766 900
_	and income from similar sources	719,009.	713,104.	0/1,000.	000,044.	701,014.	3,766,899.
9	Net income from unrelated business						
	activities, whether or not the						
40	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital	218 919	105,781.	125.	5,924.	746	331,495.
44	assets (Explain in Part VI.)	210,515.	103,701.	125.	3,524.	740.	18,790,028.
12	Gross receipts from related activities,	oto (soo instructio	one)			12	162,308.
13	First 5 years. If the Form 990 is for the	=		fourth or fifth tax			102/3001
.0	organization, check this box and <b>stor</b>	-					
Sec	etion C. Computation of Publ						
	Public support percentage for 2022 (			column (f))		14	43.15 %
15	Public support percentage from 2021					15	43.55 %
	33 1/3% support test - 2022. If the o						
	stop here. The organization qualifies	•		•		•	
b	33 1/3% support test - 2021. If the						
	and <b>stop here.</b> The organization qual	-					
17a	10% -facts-and-circumstances tes						
	and if the organization meets the fact	_					
	meets the facts-and-circumstances to						
b	10% -facts-and-circumstances tes	•	•				
	more, and if the organization meets the	_					
	organization meets the facts-and-circ	umstances test. Th	ne organization qu	alifies as a publicly	y supported organ	ization	
18	Private foundation. If the organization						

Schedule A (Form 990) 2022

#### Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support	olow, ploade com	proto r arr m,				
	endar 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						
J	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5							
3	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and		+		<del> </del>		
,,	3 received from disqualified persons						
ŀ	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support		•		•	•	
Cale	endar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6		, ,	, ,	1	`,'	,,
	a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	ne organization's f	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organizat	ion,
	check this box and stop here			·····			
<u>Se</u>	ction C. Computation of Publ	ic Support Pe	ercentage				
15	Public support percentage for 2022 (I	ine 8, column (f),	divided by line 13,	column (f))		15	%
	Public support percentage from 2021					16	%
<u>Se</u>	ction D. Computation of Inves	stment Incom	e Percentage				
17	Investment income percentage for 20	22 (line 10c, colur	mn (f), divided by I	ine 13, column (f))		17	%
18	Investment income percentage from 2	<b>2021</b> Schedule A,	Part III, line 17			18	%
19	a 33 1/3% support tests - 2022. If the	organization did r	not check the box	on line 14, and line	e 15 is more than	33 1/3%, and line	17 is not
	more than 33 1/3%, check this box a						
ŀ	o 33 1/3% support tests - 2021. If the	•			•	•	
_	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check the	his box and see in	structions	

#### Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
		103	140
	1		
	2		
	20		
	3a		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b		
	5с		
	6		
	7		
	8		
	9a		
	9b		
	9c		
	10a		
	10b		
dule	A (Forn	n 990)	2022

Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in <b>Part VI</b> .	11c		
Sec	tion B. Type I Supporting Organizations			
	<i>y</i> , 1, 0 0		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
•	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported	•		
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			<u> </u>
000	tion of Type it Supporting Organizations		Yes	No
	Managarania, af the conscinction's disease of the characteristic of the disease.		res	NO
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	4		
800	the supported organization(s). tion D. All Type III Supporting Organizations	1		<u> </u>
360	tion b. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	-		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	_		
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
0	supported organizations played in this regard.	3		
	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions)	•		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	structio		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
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		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			1

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Pa	rt V   Type III Non-Functionally Integrated 509(a)(3) Support	ting Orgai	nizations			
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.					
	All other Type III non-functionally integrated supporting organizations m	ust complete	Sections A through E.	•		
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)		
1	Net short-term capital gain	1				
2	Recoveries of prior-year distributions	2				
3	Other gross income (see instructions)	3				
4	Add lines 1 through 3.	4				
5	Depreciation and depletion	5				
6	Portion of operating expenses paid or incurred for production or					
	collection of gross income or for management, conservation, or					
	maintenance of property held for production of income (see instructions)	6				
7	Other expenses (see instructions)	7				
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8				
	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)		
1	Aggregate fair market value of all non-exempt-use assets (see					
	instructions for short tax year or assets held for part of year):					
а	Average monthly value of securities	1a				
b	Average monthly cash balances	1b				
С	Fair market value of other non-exempt-use assets	1c				
d	Total (add lines 1a, 1b, and 1c)	1d				
e	Discount claimed for blockage or other factors					
	(explain in detail in Part VI):					
2	Acquisition indebtedness applicable to non-exempt-use assets	2				
3	Subtract line 2 from line 1d.	3				
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,					
	see instructions).	4				
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
6	Multiply line 5 by 0.035.	6				
7	Recoveries of prior-year distributions	7				
8	Minimum Asset Amount (add line 7 to line 6)	8				
Sect	ion C - Distributable Amount			Current Year		
1	Adjusted net income for prior year (from Section A, line 8, column A)	1				
2	Enter 0.85 of line 1.	2				
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3				
4	Enter greater of line 2 or line 3.	4				
5	Income tax imposed in prior year	5				
6	Distributable Amount. Subtract line 5 from line 4, unless subject to					
	emergency temporary reduction (see instructions).	6				
7	Check here if the current year is the organization's first as a non-function	nally integrat	ed Type III supporting org	anization (see		

Schedule A (Form 990) 2022

instructions).

Part V Type III Non-Functionally Integrated	509(a)(3) Supporting Orga	nizations (continued)	<u> </u>		
Section D - Distributions			Current Year		
1 Amounts paid to supported organizations to accomplis	h exempt purposes	1			
2 Amounts paid to perform activity that directly furthers e	exempt purposes of supported				
organizations, in excess of income from activity		2			
3 Administrative expenses paid to accomplish exempt pu	urposes of supported organization	s <b>3</b>			
4 Amounts paid to acquire exempt-use assets		4			
5 Qualified set-aside amounts (prior IRS approval required	d - provide details in Part VI)	5			
6 Other distributions (describe in Part VI). See instruction	IS.	6			
7 Total annual distributions. Add lines 1 through 6.		7			
8 Distributions to attentive supported organizations to wh	nich the organization is responsive				
(provide details in Part VI). See instructions.	(provide details in Part VI). See instructions.				
9 Distributable amount for 2022 from Section C, line 6					
Line 8 amount divided by line 9 amount					
Seation E. Distribution Allocations (see instructions)	(ii) Underdistributions	(iii) Distributable			

Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2022 (reason-			
	able cause required - explain in Part VI). See instructions.			
_3	Excess distributions carryover, if any, to 2022			
а	From 2017			
b	From 2018			
c	From 2019			
d	From 2020			
e	From 2021			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2022 distributable amount			
i	Carryover from 2017 not applied (see instructions)			
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2022 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
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:			
a	Excess from 2018			
	Excess from 2019			
c	Excess from 2020			
	Excess from 2021			
<u>e</u>	Excess from 2022			

Schedule A (Form 990) 2022

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.) Schedule A, Part II, Line 10, Explanation for Other Income: Other Income 218,919. 2018 Amount: \$ 2019 Amount: 105,781. 2020 Amount: 125. 5,924. 2021 Amount: 746. 2022 Amount: \$

21

### Schedule B

#### Schedule of Contributors

OMB No. 1545-0047

2022

Department of the Treasury Internal Revenue Service

Name of the organization

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

GoodWeave International

Employer identification number

52-2042014

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 totaling \$5,000 or more during the year \$\_\_\_\_\_\_\$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

 $\ \, \text{LHA} \ \, \text{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$ 

Schedule B (Form 990) (2022)

Name of organization

Employer identification number

#### GoodWeave International

52-2042014

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		\$\$	Person X Payroll					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
2		\$\$55,000.	Person X Payroll					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
3		\$ 100,050.	Person X Payroll					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
4	Hame, address, and Zn + +	\$ 124,348.	Person X Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
5		\$ 446,729.	Person X Payroll					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)					

#### GoodWeave International

52-2042014

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

Name of organization Employer identification number GoodWeave International 52-2042014 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Inspection

Name of the organization

GoodWeave International

Employer identification number 52-2042014

Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts.Complete if the
	organization answered "Yes" on Form 990, Part IV, lir	ne 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be	e used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	e conferring
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).	
	Preservation of land for public use (for example, recrea	ation or education) Preservation o	f a historically important land area
	Protection of natural habitat	Preservation o	f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired		
	historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by th	e organization during the tax
	year		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe		
	violations, and enforcement of the conservation easements in		
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cor	nservation easements during the year
_			
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserv	ation easements during the year
	Does each conservation easement reported on line 2(d) above	us satisfy the requirements of section 17	O/6\/4\/D\/i\
8		-	
9	and section 170(h)(4)(B)(ii)?		
9	balance sheet, and include, if applicable, the text of the foot	·	
	organization's accounting for conservation easements.	note to the organization's illiancial staten	nerits that describes the
Pai	t III Organizations Maintaining Collections o	f Art. Historical Treasures. or C	Other Similar Assets.
	Complete if the organization answered "Yes" on Form		
	If the organization elected, as permitted under FASB ASC 95		and balance sheet works
	of art, historical treasures, or other similar assets held for pul		
	service, provide in Part XIII the text of the footnote to its fina		
b	If the organization elected, as permitted under FASB ASC 95		
-	art, historical treasures, or other similar assets held for public		
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		\$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tre		
_	the following amounts required to be reported under FASB A		a. 3a, p. 61100
а	Revenue included on Form 990, Part VIII, line 1		\$
h	Assets included in Form 990, Part Y		Φ

Par	t III Organizations Maintaining Col	ections of Ar	t, Hist	orical Tr	easures, c	r Other	Similar Ass	sets(contir	nued)
3	Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its								
	collection items (check all that apply):								
а	Public exhibition	d		_oan or exc	hange progra	ım			
b	Scholarly research	е		Other					
С	Preservation for future generations								
4	Provide a description of the organization's collection	ctions and explain	n how th	ey further t	he organizatio	on's exemp	ot purpose in F	art XIII.	
5	During the year, did the organization solicit or re								
	to be sold to raise funds rather than to be maint							Yes	☐ No
Par	t IV Escrow and Custodial Arrange							V, line 9, or	
	reported an amount on Form 990, Part X			Ü			,	,	
1a	Is the organization an agent, trustee, custodian	or other intermed	liary for	contribution	ns or other as	sets not in	cluded		
	on Form 990, Part X?		-				[	Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII and								
	, ,							Amount	t
С	Beginning balance						1c		
	Additions during the year						1d		
е	Distributions during the year						1e		
f	Ending balance						1f		
2a	Did the organization include an amount on Form						?	Yes	□ No
	If "Yes," explain the arrangement in Part XIII. Ch					-			
Par									
	(8	a) Current year	<b>(b)</b> P	rior year	(c) Two year	s back (d)	Three years ba	k (e) Four	years back
1a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains, and losses								
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the current	year end balanc	e (line 1	g, column (a	a)) held as:				
а	Board designated or quasi-endowment	,	%		,,				
b	Permanent endowment	%	_						
С	Term endowment %	_							
	The percentages on lines 2a, 2b, and 2c should	equal 100%.							
За	Are there endowment funds not in the possession		ation tha	t are held a	ınd administe	red for the			
	organization by:	· ·						[	Yes No
	(i) Unrelated organizations							3a(i)	
	(ii) Related organizations								
b	If "Yes" on line 3a(ii), are the related organization								
4	Describe in Part XIII the intended uses of the org								
Par	t VI Land, Buildings, and Equipmer								
	Complete if the organization answered "	es" on Form 990	), Part IV	, line 11a. S	See Form 990	, Part X, lin	ne 10.		
	Description of property	(a) Cost or of	ther	(b) Cost	or other	(c) Accı	umulated	(d) Bool	k value
		basis (investn	nent)	basis	(other)	depre	eciation		
1a	Land								
	Buildings								
	Leasehold improvements				3,283.		3,283.		0.
	Equipment			7	2,590.	6	8,973.		3,617.
	Other								
	. Add lines 1a through 1e (Column (d) must equa		X colun	n (R) line 1	10c)				3,617.

Schedule D (Form 990) 2022

Part VII	Investments - Other Securities.

Part VII Investments - Other Securities.		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	
(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)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(0)		

#### Part IX Other Assets.

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
<b>(1)</b>	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

#### Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) License fees payable	113,830.
(3) Lease liability - operating lease	77,663.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	191,493.

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... X

Pa	וג א	Reconciliation of Revenue per Audited Financial Sta		tn Revenue per R	eturr	1.
		Complete if the organization answered "Yes" on Form 990, Part IV, li				0 760 051
1		revenue, gains, and other support per audited financial statements			1	2,769,251.
2		unts included on line 1 but not on Form 990, Part VIII, line 12:	1 1	0 455		
а		nrealized gains (losses) on investments		-9,455.		
b		ted services and use of facilities		537,339.		
С		veries of prior year grants		412 000		
d		(Describe in Part XIII.)		413,200.		0.44 0.04
е		ines 2a through 2d			2e	941,084.
3		ract line 2e from line 1			3	1,828,167.
4		unts included on Form 990, Part VIII, line 12, but not on line 1:		455		
а	Inves	tment expenses not included on Form 990, Part VIII, line 7b	4a	175.		
b		(Describe in Part XIII.)				
С		ines <b>4a</b> and <b>4b</b>			4c	175.
5	Total	revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12	2.)		5	1,828,342.
Pa	rt XII	Reconciliation of Expenses per Audited Financial St	tatements W	ith Expenses per	Retu	ırn.
		Complete if the organization answered "Yes" on Form 990, Part IV, li	ne 12a.			
1	Total	expenses and losses per audited financial statements			1	3,877,381.
2	Amou	unts included on line 1 but not on Form 990, Part IX, line 25:				
а	Dona	ted services and use of facilities	2a	537,339.		
b	Prior	year adjustments	2b			
С		losses				
d		(Describe in Part XIII.)				
		ines 2a through 2d			2e	537,339.
3		ract line <b>2e</b> from line <b>1</b>			3	3,340,042.
4		unts included on Form 990, Part IX, line 25, but not on line 1:				
а		tment expenses not included on Form 990, Part VIII, line 7b	4a	175.		
		(Describe in Part XIII.)				
		ines <b>4a</b> and <b>4b</b>			4c	175.
		expenses. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 1			5	3,340,217.
		Supplemental Information.				
		descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	4: Part IV. lines	1b and 2b: Part V. line	4: Part	X. line 2: Part XI.
		d 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a			.,	, , =,,
100	20 011	a 45, and rate Mi, into 2d and 45.7 100 complete the part to provide t	arry additional in	orriation.		
Pa	rt. X	K, Line 2:				
<u> </u>		., 1110 11				
Mai	nade	ement has evaluated GoodWeave's tax	position	ns and concl	11100	d that
iia.	iage	mene hab evaluated documents b can	PODICIOI	ib dila collei	uuc	<del>a chac</del>
GO	od₩e	eave's financial statements do not i	include a	ny uncertai	n t	ax
000	Jane	dave b lindhelal beatements do not l	incruae e	iny directed	11 (	un
no	ei+i	ons.				
<u>po.</u>	3101	.ons.				
Da:	~+ V	XI, Line 2d - Other Adjustments:				
ra.	LLA	11, line 2d - Other Adjustments:				
т 🕳		an Eoroian Currenau				44 700
ьο	SS C	on Foreign Currency				-44,780.
Grand 11 abiliary of Grand Decemble						457 000
Cai	nceı	lation of Grant Payable				457,980.
m - '	L _ 1	to Cabadala D. Dant WT. Time 04				412 202
T.O.	Lal	to Schedule D, Part XI, Line 2d				413,200.

Schedule D (Form 990) 2022	GoodWeave International	52-2042014 Page 5
Schedule D (Form 990) 2022  Part XIII   Supplemental	Information (continued)	
<u> </u>		

#### 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.

OMB No. 1545-0047
2022

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the organization **Employer identification number** GoodWeave International 52-2042014 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? \_\_\_\_\_X Yes \_\_\_\_\_No 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (e) If activity listed in (d) (b) Number of (f) Total (a) Region (c) Number of (d) Activities conducted in the region émployees, expenditures offices (by type) (such as, fundraising, prois a program service, agents, and for and in the region gram services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in the region in the region in the region Program development, standards compliance. licensing activities in Europe (Including Iceland & Greenland) 2 Program Services Europe, and consumer 107,089. Child-labor-free certification and supply South Asia chain monitoring. 1,065,395. 12 Program Services Grants to recipients 0 located in the region South Asia 161,304. 3 a Subtotal 14 1,333,788. **b** Total from continuation 0. sheets to Part I ....... c Totals (add lines 3a 1,333,788. and 3b)

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

See Part V for Column (e) descriptions

Schedule F (Form 990) 2022

recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. 1 (b) IRS code section (g) Amount of (h) Description (i) Method of (d) Purpose of (f) Manner of (e) Amount (a) Name of organization (c) Region of noncash noncash valuation (book, FMV, and EIN (if applicable) grant of cash grant cash disbursement assistance assistance appraisal, other) Subgrant to support GoodWeave's program South Asia service activities 13,991.Wire 0.N/AN/A Subgrant to support GoodWeave's program service activities South Asia 41,525.Wire 0.N/A N/A Subgrant to support GoodWeave's program South Asia service activities 6,975.Wire 0.N/AN/A Subgrant to support GoodWeave's program 98,813.Wire South Asia service activities 0.N/AN/A 2 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 **3** Enter total number of other organizations or entities

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any

52-2042014

Schedule F (Form 990) 2022

Schedule F (Form 990) 2022

Part II

### Schedule F (Form 990) 2022 Part IV Foreign Forms

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

#### 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.

(commence of the position), as approached the part to provide any additional members of
Part I, Line 2:
For grants and subgrants issued to international partners, GoodWeave
enters into agreements which stipulate the use of funds. Monitoring of
the funds is ensured through individual contact with grantees and
financial/programmatic reporting provided by grantees.
Part I, line 3:
Foreign expenditures are directly tracked and accounted for on the
accrual method of accounting.
Part I, Line 3, Column (e):
Region: Europe (Including Iceland & Greenland)
(e) Specific Types of Services in Region: Program development, standards
compliance, licensing activities in Europe, and consumer awareness
building.

#### SCHEDULE J (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

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

GoodWeave International

Employer identification number 52-2042014

Pa	art I Questions Regarding Compensation			
			Yes	No
<b>1</b> a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel  Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account  Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant  X Compensation survey or study			
	Form 990 of other organizations  Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:	4-		х
	Receive a severance payment or change-of-control payment?  Participate in or receive payment from a supplemental nonqualified retirement plan?	4a 4b		X
	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
C	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	+0		
	The story of lines 42.0, list the persons and provide the applicable amounts for each item in a tim.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		Х
	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		Х
	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			37
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2022

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

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

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

(A) Name and Title		(B) Breakdown of W	J-2 and/or 1099-MIS compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) Nina Smith	(i)	148,748.	0.	0.	4,570.	10,205.	163,523.	0.
Chief Executive Officer	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(ii)							
	(i) (ii)							
							1	
	(i) (ii)							
	[(II)							

Schedule J (Form 990) 2022	GoodWeave International	52-2042014	Page 3
Part III Supplemental Informat	ion		
Provide the information, explanation	on, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and	for Part II. Also complete this part for any additional informatio	n.

#### SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

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

Name of the organization

GoodWeave International

**Employer identification number** 52-2042014

Form 990, Part III, Line 4a: Harness Market Forces: By establishing partnerships with brands and retailers, and increasing consumer preference for certified products, the organization is able to inspect more supply chains and protect more children. Efforts within the "Harness Market Power" category include building corporate partnerships and consumer awareness activities that increase market adoption of child-labor-free products in North America and Europe and other consumer markets worldwide.

GoodWeave inspects the production supply chains of participating manufacturers and importers. To be certified and thus eligible to display the GoodWeave label, manufactures sign a legally binding agreement to: (1) Produce products free from child, forced and bonded labor; (2) Register all production sites with GoodWeave and allow random, surprise inspections; and (3) Pay license fees that support restoring freedom to children, rehabilitation and education in India and Nepal.

This year GoodWeave's apparel pilot project transitioned to being a formal part of our standard and certification program with apparel, fashion jewelry and accessories companies able to take part in our licensing scheme. Two apparel brands signed to become licensees under the newly launched program in 2022.

In 2022, carpet, home textile and apparel programming resulted in 16 new import and retail companies in seven countries joining, bringing LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Name of the organization GoodWeave International Employer identification number 52-2042014

the total number of importer licensees globally to 192. This year 24.9% of the global market for handmade rugs carried the GoodWeave certification label.

GoodWeave also initiated a new project funded by Netherlands Enterprise

Agency's (RVO) Fund Against Child Labor (FBK). The project entitled

"Child Labor Free Supply Chains - Deep Due Diligence for Dutch

Companies" supports GoodWeave's work to eliminate child labor in carpet supply chains in India and Nepal, as well as an expanded effort to grow

GoodWeave's presence in the Dutch market.

Form 990, Part III, Line 4b: ESTABLISH TRANSPARENT AND CLEAN SUPPLY CHAINS:

In 2022, GoodWeave restored freedom to 758 children across all program

categories and laid the groundwork to expand its reach into the Cobalt

mines of the Democratic Republic of the Congo.

Every child found is offered rehabilitation, counseling services,
schooling and other critical services. In addition - and this is the
most powerful point of impact - unannounced, random inspections of
workshops, factories, and private homes in artisan and producer
villages prevent thousands of children from ever being exploited.

GoodWeave is ISEAL Code Compliant. Our system has been independently

evaluated against ISEAL's Codes of Good Practice -- a

globally-recognized framework for effective, credible sustainability

systems. More information is available at isealalliance.org.

These programs are designed with input from survivors and those proximate to needs, either to serve child trafficking survivors and/or address the root causes.

GoodWeave restores freedom to children being exploited, reunites them
with their families when possible, and offers them a home when not.

Rehabilitation can take years and includes psychological counseling in
addition to health care and education. Freed children are supported
until grade 10 or age 18, whichever comes first.

Form 990, Part III, Line 4d, Other Program Services:

#### Other Programs:

Improve Conditions for all Workers and Promote Best Practice:

Addressing child labor effectively requires more than simply

prohibiting the practice as a matter of law, policy or standard. One

important part of the equation is ensuring that adult workers are

better compensated and better treated within their workplaces.

GoodWeave seeks to improve conditions for workers, and in 2022,

extended rights and a range of other services, such as health and

financial literacy through its programming in supply chains to 93,293

workers.

The organization also promotes best practices and builds capacity
within other organizations based on our model. Additionally, we conduct
research and serve as a thought-leader to help inform and educate
companies, governments and other supply chain actors about how to
address child labor and its root causes effectively.

Name of the organization

GoodWeave International

Employer identification number 52-2042014

In 2022, GoodWeave participated in numerous high-level events and advocacy platforms to promote the importance of ending child labor and modern slavery through deep due diligence practices that include full supply chain mapping, application of strong human rights standards, ensuring remedy to rights holders and addressing root causes. These included speaking roles or side events at conferences such as the Global Freedom from Slavery Forum, the ILO's 5th Global Conference on the Elimination of Child Labor, and the North America and Europe Regional Freedom from Slavery Forum 2022.

GoodWeave successfully ended a nearly three-year project funded by the

Netherlands Enterprise Agency's (RVO) Fund Against Child Labor (FBK)

entitled "Partnership to End Child Labour in Apparel Supply Chains,"

carried out in collaboration with Fair Wear Foundation. The project

addressed child labor in the apparel and textile supply chains of two

brands in Northern India, with a focus on activities surrounding

subcontracting, embellishment and those carried out by home-based

workers.

In 2022, GoodWeave also initiated a new four-year project funded by FBK entitled "Child Labor in Subcontracted Ready-Made Garment Supply Chains in Bangladesh: From impact assessment to holistic due diligence."

Partnering with apparel brands C&A and Delta Galil, as well as the Bangladesh Labor Foundation, the goal is to research the presence, risk and root causes of child labor in subcontracted ready-made-garment supply chains in Bangladesh.

GoodWeave International

Humanity United and Global Fairness Initiative transferring our methodologies to the brickmaking sector in Nepal, where the rate of forced and child labor is staggering. GoodWeave focused on establishing sustainable structures and building the capacity of key stakeholders to ensure good labor practices are demonstrated and shared throughout the brick industry, and that the positive impacts the Better Brick Nepal program continue beyond the close of the project in 2023.

including grants of \$ 8,864. Revenue \$ 0.

#### Form 990, Part VI, Section A, line 1a:

Expenses \$ 690,610.

The Executive Committee shall consist of a Chair and such additional directors as designated by the Board; and except as otherwise provided by the By-laws or by resolution of the Board, the Executive Committee shall have and may exercise all of the powers and authority of the Board in the management of the Corporation, including the roles of the other committees specified in the By-laws but not constituted, including specifically the authority to act on behalf of the Board between meetings of the Board except that the Executive Committee may not reverse any action taken by the Board.

#### Form 990, Part VI, Section B, line 11b:

The Audit/Finance Committee of the organization reviews the form 990 prior to filing. Once reviewed by this committee, the return is signed by the President and filed. Prior to filing the return, a copy of the return as it will be filed is provided to each Board member electronically.

#### Form 990, Part VI, Section B, Line 12c:

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#### GoodWeave International

and requires annual certification by Board members, including the disclosure of any actual or potential conflicts of interest. The Board of Directors and management monitor this process and, in general, no business transactions (purchase of goods or services, loans, etc.) with Board members or their employers are permitted other than the normal transactions between a nonprofit and its Board members such as contributions and payment of program service revenue to the organization for participation in various programs.

Form 990, Part VI, Section B, Line 15:

The compensation of the President is established by the Board of Directors, who are independent of the President. The compensation level for the President is established by the Board of Directors based on knowledge of current salary levels for executives of similar organizations, performance of the President, and budgetary constraints. As a result, the salary levels trend towards amounts lower than current market levels in the Washington, DC metropolitan area might indicate. Notification of any change in the President's salary is made to the organization's third party accountant by an officer of the Board of Directors.

Board officers are not compensated in their role as officers or Board members.

Form 990, Part VI, Line 17, List of States receiving copy of Form 990: CT, DC, FL, IL, MD, MA, NJ, NY, NC, OH, PA, RI, VA, WA

Form 990, Part VI, Section C, Line 18:

GoodWeave makes available to the public all documents required under

Name of the organization  GoodWeave International	Employer identification number 52-2042014
current Internal Revenue Service Treasury Regulations.	
Form 990, Part VI, Section C, Line 19:	
Governing documents such as Articles of Incorporation and	l Bylaws, internal
policy documents, and audited and unaudited financial sta	tements would be
made available on a case by case basis to individuals or	organizations
which have an interest in those documents at the discreti	on of the
organization's Board of Directors and management.	
Form 990, Part IX, Line 11g, Other Fees:	
Consultants and contracted services:	
Program service expenses	789,166.
Management and general expenses	14,578.
Fundraising expenses	2,398.
Total expenses	806,142.
Total Other Fees on Form 990, Part IX, line 11g, Col A	806,142.
Form 990, Part XI, line 9, Changes in Net Assets:	
Loss on Foreign Currency	-44,780.
Cancellation of Grant Payable	457,980.
Total to Form 990, Part XI, Line 9	413,200.
Form 990, Part XII, Line 2c:	
No change from the prior year.	