Depa	rtment o	f the Treasury		ter social security			•		•		Open to Public
		nue Service		vww.irs.gov/Form9	90 for instruction						Inspection
	For th	e 2022 calenc	dar year, or tax year beg	-			, 2022, a			06	-30,2023
		applicable:	C Name of organization E	lectronic Reg	gistration	Infor	mation	Center	r Inc.	D Emplo	yer identification number 45–5389681
H	Address	change									
Ц	Name ch	nange	Number and street (or P.O.	box if mail is not delivered	to street address)			Room/su	ite I	E Telepho	one number
Ц	Initial ret	nitial return 1201 Connecticut Ave NW 600									(202) 695-3464
Ц	Final ret										receipts
Ц	Amended return Washington, DC 20036								I	\$	1,544,943
	Applicati	on pending	F Name and address of princi	H(a) Is this a gr							
			Same as C abo	ove	<u> </u>				H(b) Are all su	ubordinate	s included? Yes No
<u> </u>	Tax-exer	npt status: 🛛 🗙	501(c)(3) 501(c) () (insert no.)	4947(a)(1) or	52	7		lf "No," a	ttach a list	. See instructions
J	Website		v.ericstates.org						H(c) Group ex	kemption n	umber
		-		ssociation Other		L	Year of formati	ion: 201	L2 M SI	ate of lega	I domicile: DE
Ра	rt I	Summar	,								
	1	-	ribe the organization's mis	-							ion consisting
9		<u>of state</u>	election offici	als working t	together to	impr	ove the	accui	racy of	state	voter
Governance		<u>registra</u>	tion lists and e	ducate eligib	ole citizen	s on	how to	regist	ter to v	ote.	
ern											
Š	2		oox 📋 if the organization	•	•						
∞ ∞	3		oting members of the gov	0,0	,					3	27
es	4		ndependent voting memb		• •	,				4	27
Activities &	5	Total numbe	r of individuals employed	in calendar year 20	22 (Part V, line 2	a)				5	3
Vcti	6	Total numbe	r of volunteers (estimate	if necessary)						6	32
4	7a	Total unrelat	ed business revenue fror	n Part VIII, column (C), line 12 ••					7a	0
	b	Net unrelate	d business taxable incom	e from Form 990-T,	Part I, line 11 .					7b	0
									Prior Year		Current Year
	8	Contribution	s and grants (Part VIII, lir	e 1h) •••••					1,059	,625	1,544,823
anı	9	Program ser	rvice revenue (Part VIII, li	ne 2g) •••••							0
Revenue	10	Investment i	ncome (Part VIII, column	(A), lines 3, 4, and 7	7d)					127	120
Re	11	Other reven	ue (Part VIII, column (A),	lines 5, 6d, 8c, 9c, 1	l0c, and 11e) •						0
	12	Total revenu	e - add lines 8 through 11	(must equal Part V	III, column (A), li	ne 12)			1,059	,752	1,544,943
	13	Grants and s	ts and similar amounts paid (Part IX, column (A), lines 1-3)								0
	14	Benefits paid	d to or for members (Part		0						
	15	Salaries, oth	alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)								458,286
Expenses	16a	Professional	l fundraising fees (Part IX	, column (A), line 11	e)						0
ben	b	Total fundrai	ising expenses (Part IX, c	olumn (D), line 25)			0				
Ä	17	Other expen	ises (Part IX, column (A),	lines 11a-11d, 11f-2	4e)				736	,773	1,004,137
	18	Total expens	ses. Add lines 13-17 (mu	st equal Part IX, colu	umn (A), line 25)				1,164	,961	1,462,423
	19	Revenue les	s expenses. Subtract lin	e 18 from line 12 .					(105	,209)	82,520
ŗ	S							Begi	nning of Curre	nt Year	End of Year
Net Assets or	20	Total assets	(Part X, line 16) • • •						892	,461	1,108,959
Ass	21	Total liabilitie	es (Part X, line 26) ••						138	,024	272,002
L Net	22	Net assets o	or fund balances. Subtrac	t line 21 from line 20	0				754	,437	836,957
Pa	rt II	Signatu	ire Block								
			clare that I have examined this re eclaration of preparer (other than						owledge and be	lief, it is	
uue	correct,	and complete. De		onicer) is based on an inic	officiation of which pre-	parer nas a	any knowledge	•			
<u>.</u>		Shan	e Hamlin								
Sig	n	Signature of officer								Date	•
He	е	Shan	e Hamlin, Execut	ive Director							
		Type or print na	me and title								
		Print/Type pre	eparer's name	Preparer's signature			Date		Check	if if	PTIN
Pai		John Mu	llins	John Mullins	5		5-14-20	24	self-emp	loyed	P01429307
	pare		Mullins	, PC				F	irm's EIN		
Us	e Onl	y Firm's addres	ss 7625 Wi	sconsin Aven	ue			F	hone no.		
			Bethese	la MD 20814						<u> 202-7</u>	70-6371
May	the IR	S discuss this	return with the preparer		instructions .						X Yes No

Return of Organization Exempt From Income Tax

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

Form **990**

OMB No. 1545-0047

2022

	1990 (2022) Electronic Registration Information Center Inc.	45-5389681	. Page 2
Par	rt 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:		
	ERIC is a membership organization consisting of state election officials work	ing togethe	er to
	improve the accuracy of state voter registration lists and educate eligible c	itizens on	how to
	register to vote.		
2	Did the organization undertake any significant program services during the year which were not listed on the	_	_
	prior Form 990 or 990-EZ?	🗌 Yes	X No
	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	<u>x</u> No
	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 measure	-	
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to ot	hers,	
	the total expenses, and revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$1,264,483 including grants of \$) (Revenue	\$ 1,54	4,823)
	See SERVICES page for a description of this program service.		
4b	(Code:) (Expenses \$ including grants of \$) (Revenue	\$)
40	(Code:) (Evenence () (Devenue	¢	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue	\$)
	Other program convices (Describe on Schodule O.)		
4d	Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)	
40)	
4e	Total program service expenses 1,264,483		

Form 990 (2	.022)	Electronic	Registration	Information	Center	Inc.
Part IV	Checklist of	Required So	chedules			

			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	~	v
2	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			х
3				
	candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in 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		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III • • • • • • • • • • • • • • • • •	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
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 assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	x	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D. Parts XI and XII	12a	x	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
-	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		x
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		x
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	1-70		~
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		v
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			х
15	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		v
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	15		x
10		16		v
17	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	10		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	47		
10	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	40		
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		х
20 a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
EEA		Forn	n 990 (2022)

Ves No 2 Did the organization report more than \$5.000 of grants or other assistance to or for domestic individuals on Part IX. column (A), ine 2? If "Ves," complete Schedule (, Part I and III and formation answer" here a bar Ves account of the organization of the organization's current and former officers, directors, trustees, layer employees, and highest compensated microprocess? If "Ves," complete Schedule -1 21 x 240 Did the organization how a two-exempt bond bayers and the Docember 3.100201 /f "Ves," answer lines 240 through 24d and complete Schedule -1 24a 24a<	Form 990 (2022) Electronic Registration Information Center Inc. 45-538968					age 4
22 Dit the organization report more than 55.000 of grants or other assistance to of odmestic individuals on Part X. Count of X. Sectors A, Line 3.4, or 3 shoul compensation of the organization answer "Yes" to Part VI. Sectors A, Line 3.4, or 3 shoul compensation of the organization invest any resumption biologies, and highest compensation of the organization invest any resumption biologies and these with an outstanding priorical amount of more than 300,000 as of the last sign of the yes. That was issued after Desember 31, 2002? If "Yes," answer lines 240 through 244 and complete Schedule K. If Yis," go to line 25a - Mark Schedule J, Sc	Pa	rt IV Checklist of Required Schedules (continued)				
Part R. column (A), line 2? If "Yes," complete Schedule (. Part I and II. 12 x Did the organization asset "Part VI. Sector A line 3.4, of a shout compensation of the organization's current and former officer, director, trustes, key employees, and highest compensated employees? If "Yes," complete Schedule J. 23 x 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the lest day of the year. That was issued also Decomber 31.2002? If "Yes," answer fines 24b 24a x 24b Did the organization materian an excrew account of them 25s 24a x 24c Did the organization materian an excrew account of them 25s 24a x 24b Did the organization materian an excrew account of them 25s 24a x 24c Did the organization acts an "or them a relunding at any time during the year? 24d x 24c Did the organization acts an "or them a relunding at any time during the year? 24d x 24d Did the organization acts an "or them a relunding at any time during the year? 24d x 24d Did the organization proves any annet on party Trives." complete Schedule 1, Part I x x 24d Did the organization proves any annet or party Trives." complete Schedule 1, Part I x x					Yes	No
23 Did the organization answer "Ver to Part VIL Section A, Jine 3.4, or G about compensation of the organization conflores, directors, unitees, Ney employees, and higher compensated employees? If "Ves," complete Schedule J. 23 x 24a Did the organization invest any part, that was issued after December 31, 2002? If "Yes," answer lines 24b 24a x 24b Did the organization invest any part, that was issued after December 31, 2002? If "Yes," answer lines 24b x 24c Did the organization invest any part, that was issued after December 31, 2002? If "Yes," answer lines 24b x 24d Did the organization invest any parts bonds beyond a temporary period exception? 24d 25d Bection 50(16(2)), 86(10(4), and 50(1(2)) and partstation. Did the organization and as an "on behal of Pissure for bonds outshanding at any time during the year? 24d 25d Section 50(16(2)), 86(10(4), and partstation. Did the organization organization and partstation register in a not behal of Pissure for forms 900 or 990-027? 2b 25d He organization avare that the angead na nexcess benefit transaction with a disqualified person in a prof rom spore forms 900 or 990-027? 2b 27 M ''''ss_c complete Schedule L, Part I 2c5 x 27 M '''ss_c complete Schedule L, Part I 2c5 x 28 Did the organization orochar assistance to any current or former	22					
organization's current and former officers, directors, trustees, key employees, and highest compensated 21 240 Diff the organization have a tax-exempt bond suce with an outstanding principal anount of more than 24a 241 Diff the organization invest any proceeds of the exempt bonds beyond a temporary period exception? 24a 242 Diff the organization maintain an encrow account of the tark an and funding at any time during the year? 24d 245 Section 501(c)(3), 601(c)(4), and 501(c)(2) organization. Did the organization angage in an excess benefit trunsaction with a disquilified period on any of the organization principal society. 24d 245 Section 501(c)(3), 601(c)(4), and 501(c)(2) organization. Did the organization principal society. 24d 246 Did the organization report any mount on Part X, line 5 or 22, for receivables from an page in an excess benefit trunsaction with a disquilified period. 24d 247 Did the organization report any mount on Part X, line 5 or 22, for receivables from or payolites because the period. 26 247 To the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or foundry, substanial contribution (2) and principal society. 26 247 X X X X 248 Use organization provide a grant or other assistrance to any current or former officer, director, trus	~~			22		X
employees? If Yes," complete Schedule J 23 x 43 Did the organization have at a complete Schedule J. 243 x 44 Did the organization have at a complete Schedule F. If 'No.' go to file 25a 243 x 45 Did the organization invest any proceeds of flax exempt bonds beyond a temporary period exception? 246 246 46 Did the organization animatian an encow account other than a refunding encow at any time during the year? 246 246 47 Did the organization acts an 'To therial of issuer for bonds outstanding at any time during the year? 246 246 47 Did the organization acts an in 'To therial of issuer for bonds outstanding at any time during the year? 246 246 58 Section 50(163), 56(1(41), 46(3), 56(1(41), 46(3), 56(1(41), 26(23	-				
24. Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than 3100.000 as the last day of the year. In the vision stand after December 31, 2002 ***** answer (ins. 240 ***********************************						
\$100,000 act of the last day of the year. that was issued after December 31, 2022 H "Yes," answer lines 240 249 x b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 246 x c Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 246 x d Did the organization and at any of the state for bonds outstanding at any time during the year? 246 x d Did the organization and at any at one state for bonds outstanding at any time during the year? 244 x d Did the organization and at any at lengaged in an excess benefit transaction with a disqualified person in an prore regarization. Such the transaction with a disqualified person in an prore regarization and the time tangaged in an excess benefit transaction with a disqualified person in prore regarization regarizations. Did the organization comparises benefit transaction with a disqualified person in any cress benefit transaction with a disqualified person in any and out on Part X, line 5 or 22, for receivables from or psyables to any current or former officer, director, trustee, key employee, creator or founder, a guart at schedule. J. Part II. 28 x 27 Did the organization orpatication approved the assistance to any current or former officer, director, trustee, key employee, creator or founder, a guart aschedul current or former officer, director, trustee, key employee, creator or founder, and exception 27 28 28 Was the organi	.			23		<u>x</u>
through 34d and complete Schedule I, 11 No.* go to line 250 24a x b Did the organization meant proceeds of lax-secure thords beyond a temporary period exception? 24d c Did the organization matriation and exam account other than a refunding escrow at any time during the year 24d d Did the organization matriation and exam on behalf of issuer for bonds outstanding at any time during the year? 24d d Did the organization act as in "on behalf of issuer for bonds outstanding at any time during the year? 24d d Did the organization act as in "on behalf of issuer for bonds outstanding at any time during the year? 24d d Did the organization act as in "on behalf of issuer for bonds outstanding at any time during the year? 24d d Did the organization provide a grow of the organization provide a campotary period exceeption? 24d d Did the organization provide a grow of the organization provide a campotary period exceeption? 25d d Did the organization provide a graw of the rassistance to any out error toriner officer, director, trustee, key employse, creator or former officer, director, trustee, key employse, creator or founder, substantial contributor, or 35% 26d d A current or a graw of beas amployse, breador or family member of any of these person? 27 x e and action provide a graw or or here assistance to any our error officer, director, trustee, key employse, creator or founder, substantial contributor, or 35% 27	24a					
b Did the organization minest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization marked and escretive account other than a refunding escrew at any time during the year? 24c d Did the organization acta as an "on behalf of" issuer for bonds outstanding at any time during the year? 24c d Did the organization acta as an "on behalf of" issuer for bonds outstanding at any time during the year? 24c d Did the organization acta as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d d Did the organization access benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organizations prior Forms 900 or 900-E27 17 Ves." complete Schedule L, Part I 28 d Did the organization may that the transaction that not been reported on any of these persons? If "res." complete Schedule L, Part I 28 x d Did the organization private a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or agoint period as agrant or other assistance to any otheres organization. Each of any otheres periods. 27 X 20 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part I) 28 x 21 Did the organization cealer						
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24d d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?. 24d 25 Section 501(c)(3), 801(c)(4), and 501(c)(23) organizations. Did the organization argage 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 prior Forms 590 or 90-E2? 7 ************************************						<u>x</u>
to defease any lax-exempt bonds? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? 25a 25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction than a othexenses benefit transaction with a disqualified person in a prior year, and that the transaction than a othexense benefit transaction with a disqualified person in a prior generatization expected by any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, creator or founder, substantial contributor, or 35W, controlled entity (including an employee thered) or family member of any of these persons? If "Yes," complete Schedule L, Part II. 26 x 27 Did the organization aparty to a business transaction with one of the following parties (see the Schedule L, Part II. 27 28 28 Was the organization receive more than 325,000 in non-cash contributions? If "Yes," complete Schedule L, Part II. 28 x 29 Did the organization receive more than 252,000 in non-cash contributions? If "Yes," complete Schedule L, Part II. 28 x 20 Did the organization receive more than 250.001 i				240		
d Did the organization act as an 'on behalf of 'issuer for bonds outstanding at any time during the year? 224 258 Section 501(c)(3), 501(c)(4), and 501(c)(2) organizations. Dub the organizations mean engage 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 organizations provide 3090-EZ? 259 x b is the organization. Explore the organizations. Dub the organizations provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%, controlled entity including an 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 II. 26 x 27 Was 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 individual described in line 28a / 11 ''es, "complete Schedule L, Part II. 27 x a A anny member of any individual described in line 28a / 11 ''es, "complete Schedule L, Part II. 28a x 30 Did the organization providue as and/or organization described in line 28a / 11 ''es, "complete Schedule L, Part II. 28a x 31 X Complete Schedule L, Part II. 28a x	С					
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2? If Yes, "complete Schedule L, Part I Z5a X 25 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, truste, key employee, creator or founder. substantial contributor, or 35%, controlled entity or these persons? If "Yes," complete Schedule L, Part II. Z6b X 26 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 any solutions: on the organization aparty to a business transaction with one of the following parties (see the Schedule L, Part II). Z6 X 28 Was the organization receive yee mployee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV. Z8b X 28 Was the organization receive wore than \$25,000 in non-cash contribution? If "Yes," complete Schedule L, Part IV. Z8b X 29 Did the organization receive wore than \$25,000 in non-cash contribution? If "Yes," complete Schedule M. Z8c X 29 Did the organization receive wore than \$25,000 in non-cash contribution? If "Yes," complete Schedule M. Z8c X 30 Did the organi						
transaction with a disqualified person during the year? If Yes," complete Schedule L, Part I. 25a x b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior 25b x b is the organization reported on any of the organization's prior Forms 990 or 90-022? if Yes," complete Schedule L, Part I 25b x controlled entity or family member or any of these persons? If Yes," complete Schedule L, Part II. 26c x 2 Do the organization provide a grant or other assistance to any current or former offleer, director, trustee, key employee, creator or founder, substantial contributor, or 35%, controlled entity including an employee thereof, a grant selection committee member, or to a 35%, controlled entity including an employee, creator or founder, substantial contributors, and exceptions): 27 x 2 A urrent or former officer, director, trustee, key employee, creator or founder, substantial contributors, and exceptions): A current or former officer, director, trustee, key employee, creator or substantial contributor? If 28e x 2 Was the organization provide the selectule L, Part III. 28e x 28e x 2 A 35% controlled entity ordene or more individual sectibed in line 28a or 28b? If 7%e; complete Schedule L, Part IV. 28e x 2 D the organization neceive tome than 325, 000 in non				240		
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		reportable gaming (gambling) winnings to prize winners?		1c	х	

2a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax. 2a 3 3b If all least one is reported on ine 2a, did the organization file all required federal employment tax returns? 3a 3b Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b 3b Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other atthority over, at a functial accounts for filing requirements for FINCEN Form 114, Report of Foreign Bark and Financial accounts (FBAR). 4a 5a Did any taxable party notify the organization in thit was or is a party to a prohibited tax shelter transaction? 5b 5b Did any taxable party notify the organization in thit was or is a party to a prohibited tax shelter transaction? 5c 6c Does the organization include with every solicitation an express statement that such contributions or gifts were not lax deductible form 380-72. 5c 7b Organization energive a payment is a solicit any contributions that were not lax deductible express. 7c 7b Organization nelux deductible form 380-72. 7b 7c Mit the organization nexpress datement that such contributions or gints were not lax dedu		0 (2022) Electronic Registration Information Center Inc. 45-53896	81	F	Page 5
Statements, field for the calendar year ending with or within the year covered by this return 2a 3 b if at least one is reported on line 2a, did the organization file all required fedral employment tax returns? 2b 3 b if the expanization have unnelated business gross income of \$1,000 or more during the year? 3a b if "Yes," has if field a form 90.1 for this year? if "No't one 3b, provide an explanation on Schedule 0 3b b if "Yes," has if field a form 90.1 for this year? if "No't one 3b, provide an explanation on Schedule 0 3b b if "Yes," here the name of the forgin country (such as a bark account, securities account, or other financial accounts (FBAR). 5a 5a Was he organization have nonauly gross receipts that are normally greater than \$100,000, and did the organization have nonauly gross receipts that are normally greater than \$100,000, and did the organization have nonauly gross receipts that are normally greater than \$100,000, and did the organization have end tax deductible as charitable contributions or glifs were not tax deductible as payment in excess \$157 made party as a 'contributions or glifs were not tax deductible contributions under section 170(c). 6a b If "Yes," indicate the number of forms \$222 field during the year? 7c 7d c Ho organization neave a payment in excess \$157 made payment in excess albeenft contract? 7f 7d d H'Yes," full the organization neave of the value of the goods or services provided? 7b 7d 7d <	art V	Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
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3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a bit "Yes," has it field a Form 990-T for this year? If No" to line 3b, provide an explanation on Schedule O 3b constraints 3b dit A tary time during the calendary year, dit the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bark account, ecount, ecount, or other financial account)? 4a dit If Yes," the life the name of the foreign, country (such as a bark account, securities account, or other financial Accounts (FBAR). 5a dit any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 6b Do bes the organization approximation and provide an explemation tax ty ime during the xy year? 5a Do bes the organization they was not into the organization file form 8080-f? 6a Do bes the organization they was not into the organization into was indeparity as a contributions or gifts were not tax deductible contributions and express statement that such contributions or gifts were not tax deductible contributions under section 170(c). 7a Did the organization neceive a payment in access of 376 made parity as a contribution and parity for goods and services provided to the payor? 7b Did the organization neceive a payment in access of 376 made parity as a contribution and parity for goods and services provided to the payor? 7c Did the	Sta	atements, filed for the calendar year ending with or within the year covered by this return			
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6a Dees the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as chartable contributions or glfs were not tax deductible? 6a 7 Organization include with every solicitation an express statement that such contributions or glfs were not tax deductible? 6b 7 Organization receive a payment in excess of \$76 made partly as a contribution and partly for goods and services provided to the payor? 7a 8 If "Yes," did the organization notify the donor of the value of the goods or services provided? 7d 9 If wes," did the organization notify the donor of the value of the goods or services provided? 7d 9 If wes," did the organization receive any functs, directly or indirectly, to pay premiums on a personal benefit contract? 7c 9 If did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7g 9 If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7g 9 If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7g 9 If the organization receive any funds, directly or indirectly, to a personal benefit contract? 7g 9 If the organization receive any payment in a dowised funds. Did a donor av) Dic	d any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		x
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15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or		the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			<u> </u>
excess parachute payment(s) during the year?			15		x
If "Yes," see the instructions and file Form 4720, Schedule N.					
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?			16		x
If "Yes," complete Form 4720, Schedule O.					
17 Section 501(c)(21) organizations. Did the trust, or any 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.					

	m 990 (2022) Electronic Registration Information Center Inc. 45-53		P	age 6
Pa	Int VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and the second	or a "No"		
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructi	ons.		
	Check if Schedule O contains a response or note to any line in this Part VI			x
Se	ction 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	27		
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b	27		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	. 2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, trustees, or key employees to a management company or other person?	. 3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	. 4	x	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	. 5		х
6	Did the organization have members or stockholders?	. 6		х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	. 7a		х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	. 7b	x	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?		x	
b	Each committee with authority to act on behalf of the governing body?	. 8b	х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	. 9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a		- 10a		x
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	. <u>11a</u>	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a			X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	. <u>12b</u>	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe on Schedule O how this was done		X	
13	Did the organization have a written whistleblower policy?		x	
14	Did the organization have a written document retention and destruction policy?	. 14	X	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official		X	<u> </u>
b	Other officers or key employees of the organization	- 15b	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a		40		
	with a taxable entity during the year?	- 16a		x
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			
		166		
Sec	organization's exempt status with respect to such arrangements?	. 16b	1	L
17	List the states with which a copy of this Form 990 is required to be filed Oregon			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	X 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,			
	and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records.			
	The Organization (202)695-3464, 1201 Connecticut Ave NW, Suite 600, Washington, 1	DC 2003	86	

1 01111 0000 (202		42-220300T	I uge I
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Co	ompensated Employe	es, 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 Er	mployees	

mation Conton Inc

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Dage 7

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.

Desistantion Infor

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

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

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

· List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

· List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Form 000 (2022)

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

	ited organiza		inpo	1130	icu a	any cu	non		liusice.	
				((C)					
(A)	(B)				sition			(D)	(E)	(F)
Name and title	Average					han one s both a		Reportable	Reportable	Estimated amount
	hours			•		/trustee		compensation	compensation	of other
	per week							from the organization (W-2/	from related organizations (W-2/	compensation from the
	(list any hours for	or In	Ins	Office	Ке	em	Fo	1099-MISC/	1099-MISC/	organization and
	related	lividu	tituti	icer	y en	ghes Iploy	Former	1099-NEC)	1099-NEC)	related organizations
	organizations	Individual trustee or director	Institutional trustee		Key employee	'ee				
	below	uste	trus		ee	nper				
	dotted line)	e	tee			Highest compensated employee				
						ğ				
(1) Ericka Haas	40.00									
Systems Engineer & Technical Liaiso						х		119,948	0	28,424
(2) Shane Hamlin	40.00									
Executive Director				х				126,009	0	10,110
(3) Howard Knapp	1.00									
Director		х						0	0	0
(4) Lauren Zyriek	1.00									
Director		х						0	0	0
(5) Ryan_Cowley	1.00									
Director		х						0	0	0
(6) Mark Wlaschin	<u>1.00</u>									
Director		х						0	0	0
(7) Monica Evans	<u>1.00</u>									
Director		х						0	0	0
(8) Karen Sellers	<u>1.00</u>									
Director		х						0	0	0
(9) Molly Woon	1.00									
Director		х						0	0	0
(10)Peggy_Reeves	1.00									
Director		х						0	0	0
(11)Susan_Beals	<u>1.00</u>									
Director		х						0	0	0
(12)Melissa Packard	<u>1.00</u>									
Director		х						0	0	0
(13)Carol_Beecher	<u>1.00</u>									
Director		х						0	0	0
(14)Christina Adkins	1.00									
Director		х						0	0	0
EEA										Form 990 (2022)

1 01111 330 (202	-2) Electronic Registration information center inc.	40-00001	T age T
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Co	ompensated Employee	s, 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 E	mployees	

mation Conton Inc

46 6200601

Dage 7

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.

aistustion Info

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

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

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

· List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

· List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Form 000 (2022)

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

	or any related organiza		mpe	1150		any ou			1 1100100.	
				((C)					
(A)	(B)		Position (do not check more than one				(D)	(E)	(F)	
Name and title	Average					han one s both ai		Reportable	Reportable	Estimated amount
	hours					/trustee)		compensation	compensation	of other
	per week							from the organization (W-2/	from related organizations (W-2/	compensation from the
	(list any hours for	or of Ind	Ins	Officer	Ke	em Hig	For	1099-MISC/	1099-MISC/	organization and
	related	direc	tituti	icer	y em	ploy	Former	1099-NEC)	1099-NEC)	related organizations
	organizations	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee				
	below	uste	trus		ee	nper				
	dotted line)	O O	fee			Isate				
						ă				
(1) Colleen Connor	<u>1.00</u>									
Director		х						0	0	0
(2) Michelle Tassinari	1.00									
Director		х						0	0	0
(3) Linda Lamone	1.00									
Director		х						0	0	0
(4) Mandy Vigil	<u>1.00</u>									
Director		х						0	0	0
(5) Judd_Choate	<u>1.00</u>									
Director		х						0	0	0
(6) Jonathan Marks	<u>1.00</u>									
Director		х						0	0	0
(7) Rob Rock	<u>1.00</u>									
Director		х						0	0	0
(8) Anthony Albence	<u>1.00</u>									
Director		х						0	0	0
(9) Bernadette Matthews	<u>1.00</u>									
Director		х						0	0	0
(10)Meagan Wolfe	1.00									
Director		х						0	0	0
(11)Will Senning	1.00									
Director		х						0	0	0
(12)Stuart Holmes	2.00									
Treasurer		х		x				0	0	0
(13)Jonathan Brater	2.00]]						
Chair		х		х				0	0	0
(14)David Maeda	2.00		ΙĪ]						
Secretary		х		х				0	0	0
FFA										Form 990 (2022)

Form 9			ration I	nfor	mat	io	n C	ente	r :	Inc.	45-5389	681 Page 8
Part		Section A. Officers, Directors, 1	rustees,	Key	Em	plo	yee	es, ar	nd	Highest Comp	ensated Emp	loyees (continued)
		(A) Name and title	(B) Average hours per week	box	, unles	Po: eck n ss pe	rson i	han one s both a /trustee	n	(D) Reportable compensation from the organization (W-2/	(E) Reportable compensation from related organizations (W-2/	(F) Estimated amount of other compensation from the
			(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former		1099-NEC)	organization and related organizations
Vice		lvansr	2 .00	x		x				0	0	0
<u>(16)</u>												
<u>(17)</u>												
<u>(18)</u>												
<u>(19)</u>												
<u>(20)</u>												
(21)												
(22)												
(23)												
(24)												
(25)												
1b c	Subto Total	tal • • • • • • • • • • • • • • • • • • •	tion A	 	· · 	• •	· ·	 	•			
		(add lines 1b and 1c) • • • • • • • • • •								245,957	0	38,534
2		number of individuals (including but not limit able compensation from the organization	ed to those li	isted a	bove	e) wi	no re	eceive	d mo	ore than \$100,000	of	2
3		e organization list any former officer, direct		•	-				-			Yes No
4		yee on line 1a? <i>If "Yes," complete Schedule</i> y individual listed on line 1a, is the sum of r										3 X
	organ	zation and related organizations greater tha	an \$150,000?	? If "Ye	es," c							4 X
5		y person listed on line 1a receive or accrue				y un	rela	ted or	gani	zation or individual		
Socti		vices rendered to the organization? If "Yes, Independent Contractors	" complete S	Schedu	ıle J	for s	such	perso	n			5 X
1		lete this table for your five highest compens	ated indeper	ndent	contr	acto	ors th	nat rec	eive	ed more than \$100,	000 of	
	comp	ensation from the organization. Report com	pensation for	the ca	alenc	dar y	ear	ending	g wit	-	anization's tax year.	
		(A) Name and business addre	ss							(B) Description of servio	es	(C) Compensation
		rtunity Capital, 400 South A								Services		353,622
Hang.	ley A	ronchick Segal Pudlin, One I	logan Squ	are,	2	/ T.N			цес	gal Services		186,927
2		number of independent contractors (includir ed more than \$100,000 of compensation fro	-			se lis	sted	above) wh	יי <u>סו</u>	2	

	00 (2022) Electronic Registration Informat	ion Center 2	Inc.	45-53896	5 81 Page 9
Part	VIII Statement of Revenue				
	Check if Schedule O contains a response or note to any line in the	is Part VIII • • • (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns 1a b Membership dues 1b 1,544,823 c Fundraising events 1c 1d d Related organizations 1d 1e e Government grants (contributions) 1e 1f f All other contributions, gifts, grants, and similar amounts not included above 1f g Noncash contributions included in lines 1a-1f 1g \$	1,544,823			
Program Service Revenue	2a Business Code b Image: Comparison of the second of the				
	g Total. Add lines 2a-2f				
	 3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties 	120			120
	6a Gross rents (i) Real (ii) Personal 6a 6a 6a b Less: rental expenses 6b c Rental income or (loss) 6c				
	d Net rental income or (loss)				
Other Revenue	b Less: cost or other basis and sales expenses 7b c Gain or (loss) 7c d Net gain or (loss)				
Other I	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18				
	b Less: direct expenses 8b c Net income or (loss) from fundraising events 9a Gross income from gaming				
	activities, See Part IV, line 19 9a b Less: direct expenses 9b c Net income or (loss) from gaming activities				
	10a Gross sales of inventory, less returns and allowances 10a b Less: cost of goods sold 10b				
	c Net income or (loss) from sales of inventory Business Code				
Miscellanous Revenue	11a				
Mis	d All other revenue	1.544 943	0	0	120

Electronic Registration Information Center Inc. **Statement of Functional Expenses**

Do no	Check if Schedule O contains a response or note to a ot include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
3b, 9l	b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
Ļ	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	126,009	112,259	13,750	
5	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	238,999	212,920	26,079	
3	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	21,991	19,591	2,400	
)	Other employee benefits	42,106	37,512	4,594	
D	Payroll taxes	29,181	25,997	3,184	
I	Fees for services (nonemployees):				
а	Management				
b	Legal	307,628	239,391	68,237	
с	Accounting	18,345	14,276	4,069	
d	Lobbying	50,000	50,000	,	
е	Professional fundraising services. See Part IV, line 17	,	, 		
	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25, column				
•	(A) amount, list line 11g expenses on Schedule O.)	97,124	64,490	32,634	
2	Advertising and promotion	- /	,	- /	
3	Office expenses	25,808	12,646	13,162	
4	Information technology	331,495	331,495		
5	Royalties	,			
6	Occupancy				
7	Travel	29,610	22,016	7,594	
	Payments of travel or entertainment expenses			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	for any federal, state, or local public officials				
	Conferences, conventions, and meetings	14,154		14,154	
)		11/101			
	Payments to affiliates				
2	Depreciation, depletion, and amortization	3,751		3,751	
3	Insurance	5,824	1,492	4,332	
	Other expenses. Itemize expenses not covered	5,024	1,172		
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A), amount, list line 24e expenses on Schedule O.)				
а	Software license	120,398	120,398		
b		120,330	120,330		
c					
d					
	All other expenses				
	Total functional expenses. Add lines 1 through 24e	1 460 400	1 264 402	107 040	
	Joint costs. Complete this line only if the	1,462,423	1,264,483	197,940	
	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here 🔲 if				

Par		Check if Schedule O contains a response or not	a to a	ny line in this Part V			Г
					(A) Beginning of year	<u></u>	(B) End of year
	1	Cash - non-interest-bearing			472,525	1	673,452
	2	Savings and temporary cash investments			300,633	2	300,753
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			50,000	4	2,500
	5	Loans and other receivables from any current or former					2,300
	-	trustee, key employee, creator or founder, substantial co					
		controlled entity or family member of any of these perso		,		5	
	6	Loans and other receivables from other disqualified per		as defined			
		under section 4958(f)(1)), and persons described in sec				6	
	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use		t i i i i i i i i i i i i i i i i i i i		8	
Ass	9	Prepaid expenses and deferred charges		[46,520	9	99,409
	10a	Land, buildings, and equipment: cost or other			,		,
		basis. Complete Part VI of Schedule D	10a	565,673			
	b	Less: accumulated depreciation • • • • • • • • • •	10b	532,828	22,783	10c	32,845
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line 11 .		[12	
	13	Investments - program-related. See Part IV, line 11 .		[13	
	14	Intangible assets		[14	
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equal line 33			892,461	16	1,108,959
	17	Accounts payable and accrued expenses			83,875	17	64,430
	18	Grants payable		18			
	19	Deferred revenue			54,149	19	207,572
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV o	f Sche	dule D · · · · · ·		21	
ies	22	Loans and other payables to any current or former office	er, dire	ctor,			
iliti		trustee, key employee, creator or founder, substantial co	ontribu	tor, or 35%			
Liabilities		controlled entity or family member of any of these perso	ns			22	
-	23	Secured mortgages and notes payable to unrelated third		t i i i i i i i i i i i i i i i i i i i		23	
	24	Unsecured notes and loans payable to unrelated third p		t i i i i i i i i i i i i i i i i i i i		24	
	25	Other liabilities (including federal income tax, payables t					
		parties, and other liabilities not included on lines 17-24).	Comp	olete Part X			
		of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			138,024	26	272,002
ø		Organizations that follow FASB ASC 958, check here	e X				
Ce	07	and complete lines 27, 28, 32, and 33.				07	
alar	27				754,437	27	836,957
ñ B	28					28	
oun		Organizations that do not follow FASB ASC 958, che	еск пе	re 📋			
Net Assets or Fund Balances	20	and complete lines 29 through 33.				20	
tsc	29	Capital stock or trust principal, or current funds		t i i i i i i i i i i i i i i i i i i i		29	
sse	30	Paid-in or capital surplus, or land, building, or equipmen		t i i i i i i i i i i i i i i i i i i i		30 31	
tAŝ	31 32	Retained earnings, endowment, accumulated income, c Total net assets or fund balances		t i i i i i i i i i i i i i i i i i i i	754 407	31	026 057
Ne	32	Total liabilities and net assets/fund balances			754,437		836,957
	33		• • •		892,461	33	1,108,959

Electronic Registration Information Center Inc.

EEA

Form 990 (2022)

Form 990 (2022)

45-5389681

Page 11

		45-5389681	L	Pa	age 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,	544,	943
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,	462,	423
3	Revenue less expenses. Subtract line 2 from line 1	3		82,	520
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		754,	437
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10		836,	957
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: 🗌 Cash 🛛 🕱 Accrual 🔲 Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on				
	Schedule O.				
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 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	х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
EEA			Form	990 ((2022)

SCHEDULE	A
(Form 990)	

Public Charity Status and Public Support

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

Ipport nexempt charitable trust. formation formation

OMB No. 1545-0047

					Open to Public				
Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. Inspec					Inspection				
Name	of the orga	anization						Employer identification	on number
Elec			tration Infor					45-538968	
Par	tl F	Reason	for Public Cha	rity Status. (Al	l organizations mus	st comple	ete this p	oart.) See instruc	tions.
The c	organizatio	on is not a	private foundation b	ecause it is: (For lir	nes 1 through 12, check	only one b	ox.)		
1	🗌 A chu	urch, conv	ention of churches,	or association of ch	urches described in sec t	tion 170(b)(1)(A)(i).		
2	🗌 A sch	nool descr	ibed in section 170 ((b)(1)(A)(ii). (Attach	Schedule E (Form 990)	.)			
3	🗌 A hos	spital or a	cooperative hospita	l service organizatio	on described in section 1	170(b)(1)(A	A)(iii).		
4	🗌 A me	edical rese	arch organization op	perated in conjunction	on with a hospital describ	oed in sect	ion 170(b)	(1)(A)(iii). Enter the	
	hospi	ital's name	e, city, and state:						
5	🗌 An or	rganizatio	n operated for the be	enefit of a college o	r university owned or ope	erated by a	a governme	ental unit described in	
	secti	ion 170(b)	(1)(A)(iv). (Complet	e Part II.)					
6	🗌 A fed	leral, state	, or local governmer	nt or governmental	unit described in section	170(b)(1)	(A)(v).		
7	X An or	rganizatio	n that normally recei	ves a substantial pa	art of its support from a g	jovernmen	tal unit or f	rom the general publi	с
	descr	ribed in se	ction 170(b)(1)(A)(vi). (Complete Part	II.)				
8	🗌 A cor	mmunity tr	ust described in sec	tion 170(b)(1)(A)(v	/i). (Complete Part II.)				
9	🗌 An ag	gricultural	research organizatio	on described in sec	tion 170(b)(1)(A)(ix) ope	erated in co	onjunction	with a land-grant colle	ege
	or un	iversity or	a non-land-grant co	llege of agriculture	(see instructions). Enter	the name,	, city, and s	tate of the college or	
	_ unive	ersity:							
10	receij suppo	pts from a ort from g	ctivities related to its ross investment inco	s exempt functions, ome and unrelated l	33 1/3% of its support fro subject to certain except business taxable income section 509(a)(2). (Com	tions; and (less sect	(2) no mor ion 511 tax	e than 33 1/3% of its	oss
11	An or	rganizatio	n organized and ope	rated exclusively to	test for public safety. Se	e section	509(a)(4).		
12	🗌 An or	rganizatio	n organized and ope	erated exclusively fo	or the benefit of, to perfor	m the fund	ctions of, or	to carry out the purp	oses of
	one c	or more pu	blicly supported org	anizations describe	d in section 509(a)(1) or	section 5	509(a)(2) . ද	Gee section 509(a)(3)	. Check
	the b	ox on line	s 12a through 12d th	nat describes the ty	pe of supporting organiza	ation and o	complete lir	nes 12e, 12f, and 12g	
а	_ 🗌 т	Type I. A s	upporting organizati	on operated, super	vised, or controlled by its	supported	d organizat	ion(s), typically by giv	ing
	tł	he suppor	ted organization(s) t	he power to regular	rly appoint or elect a maj	ority of the	directors of	or trustees of the	
	s	supporting	organization. You n	nust complete Par	t IV, Sections A and B.				
b	т 🗌 т	Type II. A	supporting organizat	tion supervised or c	ontrolled in connection w	vith its supp	ported orga	nization(s), by having]
	С	control or r	nanagement of the s	supporting organiza	tion vested in the same	persons th	at control o	or manage the suppor	ted
	_ 0	organizatio	n(s). You must cor	nplete Part IV, Sec	tions A and C.				
С	Г	Гуре III fu	nctionally integrate	ed. A supporting org	anization operated in co	nnection w	/ith, and fu	nctionally integrated w	<i>v</i> ith,
	it	ts support	ed organization(s) (s	see instructions). Yo	ou must complete Part	IV, Sectio	ns A, D, ar	nd E.	
d	⊔т	Type III no	n-functionally inte	grated. A supportin	g organization operated	in connect	ion with its	supported organization	on(s)
			, ,	0	n generally must satisfy a		•	nent and an attentiver	iess
	_				te Part IV, Sections A a				
е					en determination from the			I, Type II, Type III	
				-	integrated supporting or	ganization			
f			r of supported organ						
<u> </u>	Provide	e the follov	ving information abo		ganization(s).				1
	(i) Name of s	supported or	ganization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the o listed in you docum	ir governing	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

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

Schedul	e A (Form 990) 2022 Electronic	Registrati	on Informat	ion Center	Inc.	45-538968	1 Page 2
Part	II Support Schedule for Organiz	ations Desc	ribed in Sec	tions 170(b)	(1)(A)(iv) and	d 170(b)(1)(A	.)(vi)
	(Complete only if you checked the						alify under
	Part III. If the organization fails to	o qualify und	er the tests lis	sted below, p	lease comple	ete Part III.)	
	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	907,558	1,220,680	971,091	1,059,625	1,544,823	5,703,777
2	Tax revenues levied for the						
	organization'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	907,558	1,220,680	971,091	1,059,625	1,544,823	5,703,777
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	Public support. Subtract line 5 from line 4						5,703,777
Secti	on B. Total Support		1	I	1	L	
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	907,558	1,220,680	971,091	1,059,625	1,544,823	5,703,777
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from						
	similar sources	90	234	153	127	120	724
9	Net income from unrelated business	30	234	155	127	120	/24
5	activities, whether or not the business						
	is regularly carried on						
10	Other income. Do not include gain or						
10	loss from the sale of capital assets						
	(Explain in Part VI.)						
44	· · · /						
11 12	Total support. Add lines 7 through 10					42	5,704,501
12	Gross receipts from related activities, etc					12	(a)(2)
13	First 5 years. If the Form 990 is for the o						
Saati	organization, check this box and stop he						· · · · · · L
	on C. Computation of Public Suppo			11 a a lumana (f))			
14 15	Public support percentage for 2022 (line (.,	-	(, ,		14 15	99.99 %
15	Public support percentage from 2021 Sch						99.99 %
16a	33 1/3% support test - 2022. If the organ						_
	box and stop here . The organization qua		• • • •	-			
b	33 1/3% support test - 2021. If the organ						
	this box and stop here . The organization	•		•			
17a	10%-facts-and-circumstances test - 20	•					
	10% or more, and if the organization mee					•	
	Part VI how the organization meets the fa			-	-		ported
	organization						· · · · · · □
b	10%-facts-and-circumstances test - 20	21. If the organ	nization did no	check a box o	on line 13, 16a	, 16b, or 17a, a	and line
	15 is 10% or more, and if the organization						
	in Part VI how the organization meets the	facts-and-circ	cumstances tes	t. The organiz	ation qualifies	as a publicly s	upported
	organization						
18	Private foundation. If the organization d	id not check a	box on line 13	16a, 16b, 17a	a, or 17b, chec	k this box and	see
	instructions						[]

	If the organization fails to qualify	under the te	sts listed bel	ow, please co	omplete Part I	l.)	
Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
•	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Secti	on B. Total Support		•				
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on						
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 or	•	rst, second, th	ird, fourth, or f	ifth tax year as	a section 501	(c)(3)
	organization, check this box and stop her						
-	on C. Computation of Public Support					1 - 1	
15	Public support percentage for 2022 (line 8		•	13, column (f))		15	%
16	Public support percentage from 2021 Sch					16	%
	on D. Computation of Investment In					1 4 -1	
17	Investment income percentage for 2022 (I		.,	-		17	%
18	Investment income percentage from 2021					18	%
19a	33 1/3% support tests - 2022. If the orga						
	17 is not more than 33 1/3%, check this b	-	-	-			- –
b	33 1/3% support tests - 2021. If the organizatio						۱ –
20	line 18 is not more than 33 1/3%, check this box	-	-	• •	• • • •	-	
20	Private foundation. If the organization die	и пот спеск а	box on line 14	, 19a, or 19b, (STRECK LITIS DOX &	and see instru	

Im 990) 2022Electronic Registration Information Center Inc.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.

Schedule A (Form 990) 2022

Part III

Schedule A (Form 990) 2022

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Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 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 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 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.)

No

Yes

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Part	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		
- C	A 35% controlled entity of a person described on 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
Ŭ	provide detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations	110		
<u></u>			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or		103	
•				
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
<u></u>			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		103	
•				
	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 in line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (se	e ins	tructi	ons).
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 government entity (see instruction	ons).		
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			
		20		
L	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			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
EEA	Schedu	le A (F	orm 990	0) 2022

 Schedule A (Form 990) 2022
 Electronic Registration Information Center Inc.
 45-5389681
 Page 5

 Part IV
 Supporting Organizations (continued)
 Figure 100 (Continued)
 Figure 100 (Continued)
 Figure 100 (Continued)

	Check have if the experimentian estistical the Interval Dout Test as a qualificing		han Nav. 00 1070 (av.	alain in David VIII Oan
1	Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organi			
ecti	on A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (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		
ecti	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
ecti	on 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		

Schedule A (Form 990) 2022

	e A (Form 990) 2022 Electronic Registration I	nformation Center	Inc. 45-5		9681 Page 7
Part	V Type III Non-Functionally Integrated 509(a)(Supporting Organ	izations (continue	ed)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish e			1	
2	Amounts paid to perform activity that directly furthers exe	mpt purposes of suppor	ted		
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orgar	nizations	3	
	Amounts paid to acquire exempt-use assets			4	
	Qualified set-aside amounts (prior IRS approval required)	-	t VI)	5	
6	Other distributions (describe in Part VI). See instructions.			6	
	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which	n the organization is res	ponsive	•	
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	(:::)
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2022	ns	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022				
	(reasonable cause required - <i>explain in Part VI</i>). See				
	instructions.				
3	Excess distributions carryover, if any, to 2022				
a	From 2017				
b	From 2018				
C	From 2019				
d	From 2020				
e	From 2021				
f	Total of lines 3a through 3e				
	Applied to underdistributions of prior years			_	
	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2022 from				
4					
	Section D, line 7: \$ Applied to underdistributions of prior years				
	Applied to underdistributions of phor years			_	
C	Remainder. Subtract lines 4a and 4b from line 4.				
- 5	Remaining underdistributions for years prior to 2022, if				
Ũ	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, <i>explain in Part VI</i> . See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
•	and 4b from line 1. For result greater than zero, <i>explain in</i>				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2018				
b	Excess from 2019				
С	Excess from 2020				
d	Excess from 2021				
е	Excess from 2022				
EEA					Schedule A (Form 990) 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 II, 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.)

SCHE			Political Campaign a	nd Lobbvin	a Activities		OMB No. 1545-0047
(Form	(Form 990) For Organizations Exempt From Income Tax Under section 501(c) and section 527				,	2022	
							Open to Public
Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.						Inspection	
If the o	rganization answ	ered "Yes,'	' on Form 990, Part IV, line 3, or Form	990-EZ, Part V, line	e 46 (Political Campai	gn Activit	ies), then
			Complete Parts I-A and B. Do not comp				
	.,.		n 501(c)(3)) organizations: Complete Pa	arts I-A and C below.	Do not complete Part	-B.	
	ction 527 organizat		lete Part I-A only. ' on Form 990, Part IV, line 4, or Form	990 EZ Dart VI lin	o 47 (Lobbying Activ	itios) thor	
	-		nat have filed Form 5768 (election unde				
			nat have NOT filed Form 5768 (election				
	-		' on Form 990, Part IV, line 5 (Proxy 1	ax) (See separate i	nstructions) or Form	990-EZ, Pa	art V, line 35c (Proxy
	ee separate instru	•					
	ction 501(c)(4), (5), of organization	, or (6) orga	nizations: Complete Part III.		Employe	r identific	ation number
	0	tration	Information Center In		45-538		
Part			e organization is exempt und	ler section 501			ganization.
1	Provide a descrip	tion of the o	rganization's direct and indirect politica	l campaign activities	in Part IV. See instruct	ions for	_
	definition of "politi						
2			penditures. See instructions				
3 Part			ampaign activities. See instructions e organization is exempt und			•	
1			se tax incurred by the organization under			. \$	
2			se tax incurred by organization manage				
3			section 4955 tax, did it file Form 4720 f				
4a							🗌 Yes 🔄 No
b Part	If "Yes," describe		e organization is exempt und	ler section 501	c) excent sectio	n 501(c)(3)
1	•		ended by the filing organization for sec			11 00 1(0	/(0).
-		• •				- \$	
2		•	organization's funds contributed to othe	•			
			3 • • • • • • • • • • • • • • • • • • •			• \$	
3			litures. Add lines 1 and 2. Enter here ar			¢	
4			Form 1120-POL for this year?				
5			and employer identification number (EII				
	organization made	e payments	. For each organization listed, enter the	amount paid from th	e filing organization's f	unds. Also	enter
			outions received that were promptly and	-			
	as a separate seg	gregated fun	d or a political action committee (PAC).	If additional space is	s needed, provide infor	mation in F	Part IV.
	(a) Name		(b) Address	(c) EIN	(d) Amount paid fro filing organization's funds. If none, enter	;	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
For Pap EEA	erwork Reduction A	ct Notice, se	e the Instructions for Form 990 or 990-EZ			So	chedule C (Form 990) 2022

		istration Information Center Inc.	45-53896	
Pa		n is exempt under section 501(c)(3) and fil	ed Form 5768 (ele	ection under
	section 501(h)).			
Α (heck if the filing organization belongs to an	affiliated group (and list in Part IV each affiliated group me	ember's name, address,	
	EIN, expenses, and share of excess lo	obbying expenditures).		
B (heck 🔄 if the filing organization checked box A	and "limited control" provisions apply.	, ,	
		/ing Expenditures	(a) Filing	(b) Affiliated
	(The term "expenditures" me	eans amounts paid or incurred.)	organization's totals	group totals
1a	Total lobbying expenditures to influence public of	opinion (grassroots lobbying) • • • • • • • • • • • • • •		
I	Total lobbying expenditures to influence a legisl	ative body (direct lobbying) • • • • • • • • • • • • • • •	62,679	
	Total lobbying expenditures (add lines 1a and 1	b) • • • • • • • • • • • • • • • • • • •	62,679	
	Other exempt purpose expenditures		1,399,744	
	 Total exempt purpose expenditures (add lines 1 	c and 1d) • • • • • • • • • • • • • • • • • • •	1,462,423	
1	Lobbying nontaxable amount. Enter the amount	t from the following table in both		
	columns.		221,242	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e.		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.		
9	Grassroots nontaxable amount (enter 25% of lin	ne 1f) • • • • • • • • • • • • • • • • • • •	55,311	
I	Subtract line 1g from line 1a. If zero or less, ent	er -0		
i	Subtract line 1f from line 1c. If zero or less, enter	er -0- • • • • • • • • • • • • • • • • • •		
j	If there is an amount other than zero on either li	ne 1h or line 1i, did the organization file Form 4720		
	reporting section 4911 tax for this year?		[Yes X No

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

	Lobbying Expenditures During 4-Year Averaging Period								
	Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total			
2a	Lobbying nontaxable amount		180,359	191,496	221,242	593,097			
b	Lobbying ceiling amount (150% of line 2a, column (e))					889,646			
c	Total lobbying expenditures		818	46	62,679	63,543			
d	Grassroots nontaxable amount		45,090	47,874	55,311	148,275			
е	Grassroots ceiling amount (150% of line 2d, column (e))					222,413			
f	Grassroots lobbying expenditures								

EEA

Schedule C (Form 990) 2022

Schedule C (Form	990) 2022	Electronic	Registration	Information	Center	Inc.	45-5389681	Page 3
Part II-B	Complete i	f the organiz	ation is exemp	t under sectio	on 501(c))(3) and has NO	T filed Form 5768	
	(election u	nder section	501(h)).					

Eoro	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed	(a)		(b)	
	iption of the lobbying activity.	Yes	No	А	mount	
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total. Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5), or s	sectio	n	
	501(c)(6).					
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3 Dort	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501			3	<u> </u>	
Fart	III-B Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No"					
	answered "Yes."		J) Fa	rt III- <i>P</i>	, inte	: 3,
1	Dues, assessments and similar amounts from members	• •	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of					
	political expenses for which the section 527(f) tax was paid).					
a	Current year		2a			
b	Carryover from last year	••	2b			
С	Total		2c			

Part	IV Supplemental Information		
5	Taxable amount of lobbying and political expenditures. See instructions	5	
	and political expenditures next year?	4	
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
С	lotal	2C	

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SCH	EDULE D	Supplement	al Financial Statements		OMB No. 1545-0047		
(Form 990)			2022				
			anization answered "Yes" on Form 990, 0, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.		2022		
Department of the freasury			Attach to Form 990.	Open to Public			
Internal Revenue Service Go to www.irs.gov/Form990 for			90 for instructions and the latest informat		Inspection		
	of the organization			Employer identifica			
Elect Pa		tration Information Center		45-53896	81		
Га		te if the organization answered "Yes"	Funds or Other Similar Funds or Ac	counts.			
	Complet		(a) Donor advised funds	(b) Funds	s and other accounts		
1	Total number at e	end of year					
2		of contributions to (during year) • • • •					
3	00 0	of grants from (during year)					
4	Aggregate value	at end of year					
5	Did the organiza	tion inform all donors and donor advisors in	writing that the assets held in donor advised	1			
	funds are the org	ganization's property, subject to the organization	ation's exclusive legal control?		🗌 Yes 🗌 No		
6	Did the organiza	tion inform all grantees, donors, and donor	advisors in writing that grant funds can be us	sed			
	only for charitabl	e purposes and not for the benefit of the do	onor or donor advisor, or for any other purpos	e			
Der					🗌 Yes 🗌 No		
Par		rvation Easements.					
	· · · · ·	te if the organization answered "Yes"					
1	_	nservation easements held by the organiza		ninterio alle importo	nt land area		
	-	of land for public use (for example, recreation natural habitat	on or education)	, ,			
	H	of open space			uciule		
2	—		lified conservation contribution in the form of	a conservation			
-		e last day of the tax year.			at the End of the Tax Year		
а							
b	Total acreage res	stricted by conservation easements		2b			
с			ructure included in (a)				
d	Number of conse	ervation easements included in (c) acquired	l after July 25, 2006, and not on a				
	historic structure	listed in the National Register • • • • •		2d			
3	Number of conse	ervation easements modified, transferred, re	eleased, extinguished, or terminated by the c	organization during	the		
	tax year						
4		s where property subject to conservation ea					
5	-	zation have a written policy regarding the pe	• · · •				
•			it holds?				
6	Staff and Volunte	eer nours devoted to monitoring, inspecting,	, handling of violations, and enforcing conser	vation easements	during the year		
7	Amount of exper		dling of violations, and enforcing conservatio	n essements durir	a the year		
'	Amount of exper	ises incurred in monitoring, inspecting, nar		in easements dum	ig the year		
8	Does each conse	— ervation easement reported on line 2(d) abo	ove satisfy the requirements of section 170(h)(4)(B)(i)			
-1				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	🗌 Yes 🗌 No		
9			tion easements in its revenue and expense s				
	balance sheet, a	nd include, if applicable, the text of the foot	note to the organization's financial statement	s that describes th	e		
		ccounting for conservation easements.					
Par			of Art, Historical Treasures, or (Other Similar	Assets.		
	· · · · ·	te if the organization answered "Yes" o					
1a	-		58, not to report in its revenue statement and		orks		
			ublic exhibition, education, or research in furt	herance of public			
_			ancial statements that describes these items.				
b	-	•	58, to report in its revenue statement and ba				
		· · · ·	ic exhibition, education, or research in furthe	rance of public ser	vice,		
	•	wing amounts relating to these items:		¢			
2			easures, or other similar assets for financial				
-	-	ts required to be reported under FASB ASC		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
а	•			\$			

b	Assets included in Form 990, Part X	•
For Pa	perwork Reduction Act Notice, see the Instructions for Form 990.	Ī

Schedule D (Form 990) 2022

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Schedul	e D (Form 990) 2022 Electronic Regi t III Organizations Maintaining					. or Ot	45-538 her Similar /		Page 2
3	Using the organization's acquisition, access								/
	collection items (check all that apply):		,	,	0	·			
а	Public exhibition		d	Loan o	r exchange pi	rogram			
b	Scholarly research		е	=	0 1	-			
с	Preservation for future generations								
4	Provide a description of the organization's c	ollections and expla	in how the	/ further th	e organizatio	n's exen	npt purpose in Pa	nrt	
	XIII.				-				
5	During the year, did the organization solicit of	or receive donations	of art, hist	orical treas	sures, or othe	r similar			
	assets to be sold to raise funds rather than t	o be maintained as	part of the	organizatio	on's collectior	ı? 		. 🗌 Yes	🗌 No
Par									
	Complete if the organization 990, Part X, line 21.	answered "Yes'	' on Forr	n 990, F	art IV, line	9, or 1	reported an a	mount on	Form
1a	Is the organization an agent, trustee, custod	lian or other interme	diary for co	ontributions	s or other ass	ets not			
	included on Form 990, Part X?		-					🗌 Yes	🗌 No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing tal	ole:				_	—
							A	mount	
с	Beginning balance					. 1c			
d	Additions during the year					. 1d			
е	Distributions during the year					. 1e			
f	Ending balance					. 1f			
2a	Did the organization include an amount on F	Form 990, Part X, lin	e 21, for es	scrow or cu	ustodial accou	unt liabili	ity?	. 🗌 Yes	No
b	If "Yes," explain the arrangement in Part XIII	. Check here if the e	explanation	has been	provided on I	Part XIII			
Par									
	Complete if the organization	answered "Yes'	on Forr	n 990, F	art IV, line	10.			
		(a) Current year	(b) Pri	or year	(c) Two years	back	(d) Three years bac	k (e) Foury	ears back
1a	Beginning of year balance								
b	Contributions								
C	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 cur	rent year end balan	ce (line 1g,	column (a	i)) held as:				
а	Board designated or quasi-endowment	%							
b	Permanent endowment%								
С	Term endowment%								
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.							
3a	Are there endowment funds not in the posse	ession of the organiz	ation that a	are held ar	nd administere	ed for th	e	-	
	organization by:								Yes No
	(i) Unrelated organizations							• • 3a(i)	
	(ii) Related organizations							• • 3a(ii)	
b	If "Yes" on line 3a(ii), are the related organiz	•						. 3b	
4	Describe in Part XIII the intended uses of the		owment fu	nds.					
Par	· • • • • •		. –	000 F					10
	Complete if the organization	answered "Yes"	on Forr	n 990, P	art IV, line	11a. S	see ⊢orm 990), Part X, I	ne 10.
	Description of property	(a) Cost or oth (investme			r other basis other)		Accumulated epreciation	(d) Book	value
1a	Land								
b	Buildings								
с	Leasehold improvements								
d	Equipment				12,757		11,733		1,024
е	Other				552,916		521,095		31,821
Total.	Add lines 1a through 1e. (Column (d) must ed	qual Form 990, Part	X, column						32,845

	Complete if the organization answered "Yes" on Fo			
	 (a) Description of security or category (including name of security) 	(b) Book value		ethod of valuation: d-of-year market value
(1) Financial d	erivatives			
(2) Closely-he	ld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)	(h) must squal Form 000 Port X col. (P) line 12)			
Part VIII	(b) must equal Form 990, Part X, col. (B) line 12.)			
i uit viii	Complete if the organization answered "Yes" on Fo	rm 990, Part IV, lir	ne 11c. See Form	n 990, Part X, line 13.
	(a) Description of investment	(b) Book value		ethod of valuation: d-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9) Tatal (Calumn				
Part IX	(b) must equal Form 990, Part X, col. (B) line 13.) • • • • • • • • • • • • • • • • • • •			
. are be		rm 990 Part IV lir	e 11d. See Form	990 Part X line 15
	Complete if the organization answered "Yes" on Fo	rm 990, Part IV, lir	ne 11d. See Form	
		rm 990, Part IV, lir	ne 11d. See Form	n 990, Part X, line 15. (b) Book value
	Complete if the organization answered "Yes" on Fo	rm 990, Part IV, lir	ne 11d. See Form	
 	Complete if the organization answered "Yes" on Fo	rm 990, Part IV, lir	ne 11d. See Form	
(1) (2) (3)	Complete if the organization answered "Yes" on Fo	rm 990, Part IV, lir	ne 11d. See Form	
(1) (2) (3) (4)	Complete if the organization answered "Yes" on Fo	rm 990, Part IV, lir	ne 11d. See Form	
(1) (2) (3) (4) (5)	Complete if the organization answered "Yes" on Fo	rm 990, Part IV, lir	ne 11d. See Form	
(1) (2) (3) (4) (5) (6)	Complete if the organization answered "Yes" on Fo	rm 990, Part IV, lir	ne 11d. See Form	
(1) (2) (3) (4) (5) (6) (7)	Complete if the organization answered "Yes" on Fo	rm 990, Part IV, lir	ne 11d. See Form	
(1) (2) (3) (4) (5) (6) (7) (8)	Complete if the organization answered "Yes" on Fo	rm 990, Part IV, lir	ne 11d. See Form	
(1) (2) (3) (4) (5) (6) (7) (8) (9)	Complete if the organization answered "Yes" on Fo		ne 11d. See Form	
(1) (2) (3) (4) (5) (6) (7) (8) (9)	Complete if the organization answered "Yes" on Fo (a) Description		ne 11d. See Form	
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column	Complete if the organization answered "Yes" on Fo (a) Description (b) must equal Form 990, Part X, col. (B) line 15.)			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column	Complete if the organization answered "Yes" on Fo (a) Description (b) must equal Form 990, Part X, col. (B) line 15.)			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column	Complete if the organization answered "Yes" on Fo (a) Description (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Fo			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X	Complete if the organization answered "Yes" on Fo (a) Description (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Fo line 25. (a) Description of liability (b) Book			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X	Complete if the organization answered "Yes" on Fo (a) Description (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Fo line 25. (a) Description of liability (b) Book			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X 1. (1) Federal in	Complete if the organization answered "Yes" on Fo (a) Description (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Fo line 25. (a) Description of liability (b) Book			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X 1. (1) Federal in (2)	Complete if the organization answered "Yes" on Fo (a) Description (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Fo line 25. (a) Description of liability (b) Book			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X 1. (1) Federal in (2) (3)	Complete if the organization answered "Yes" on Fo (a) Description (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Fo line 25. (a) Description of liability (b) Book			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X 1. (1) Federal in (2) (3) (4)	Complete if the organization answered "Yes" on Fo (a) Description (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Fo line 25. (a) Description of liability (b) Book			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X 1. (1) Federal in (2) (3) (4) (5)	Complete if the organization answered "Yes" on Fo (a) Description (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Fo line 25. (a) Description of liability (b) Book			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X 1. (1) Federal in (2) (3) (4) (5) (6) (7) (8)	Complete if the organization answered "Yes" on Fo (a) Description (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Fo line 25. (a) Description of liability (b) Book			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X 1. (1) Federal in (2) (3) (4) (5) (6) (7)	Complete if the organization answered "Yes" on Fo (a) Description (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Fo line 25. (a) Description of liability (b) Book			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) (9) Total. (Column (b)	Complete if the organization answered "Yes" on Fo (a) Description (a) Description (b) must equal Form 990, Part X, col. (B) line 15.) (b) must equal Form 990, Part X, col. (B) line 15.) (c) Other Liabilities. Complete if the organization answered "Yes" on Fo line 25. (a) Description of liability (b) Book frome taxes (c) (c) must equal Form 990, Part X, col. (B) line 25.) (c) must equal Form 990, Part X, col. (B) line 25.)	rm 990, Part IV, lir		(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (2) (9) Total. (Column (2) (9) Total. (Column (2) (9)	Complete if the organization answered "Yes" on Fo (a) Description (a) Description (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered "Yes" on Fo line 25. (a) Description of liability (b) Book ncome taxes	rm 990, Part IV, Iir	ne 11e or 11f. Se	(b) Book value

 Schedule D (Form 990) 2022
 Electronic Registration Information Center Inc.
 45-5389681

 Part VII
 Investments - Other Securities.
 45-5389681

Page 3

Schedul Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue per		89681 Page 4 Irn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	1,544,943
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	1,544,943
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.) ••••••••••••••••••••••••••••••••••		
C	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c . (<i>This must equal Form 990, Part I, line 12.</i>).	5	1,544,943
Part		er Re	eturn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	1,462,423
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a	-	
b	Prior year adjustments	4	
C	Other losses	-	
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	1,462,423
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b · · · · · · · 4a	4	
b	Other (Describe in Part XIII.) ••••••••••••••••••••••••••••••••••		
C	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c . (<i>This must equal Form 990, Part I, line 18.</i>)	5	1,462,423
Part	••		
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; I	Part X,	line
	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.		
<u>01. F</u>	ootnote for uncertain tax position under FIN 48 (Part X)		
	accounting standard on accounting for uncertainty in income taxes addresses wer tax benefits claimed or expected to be claimed on a tax return should b		
finan	icial statements. Under that guidance, ERIC may recognize the tax benefit f	rom	an uncertain tax
posit	ion only if it is more likely than not that the tax position will be susta	ined	on examination
by ta	xing authorities based on the technical merits of the position. Examples o	of ta	x positions
inclu	de the tax-exempt status of ERIC and various positions related to the pote	entia	l sources of
unrel	ated business taxable income (UBIT).		
<u>The</u> t	ax benefits recognized in the financial statements from such a position ar	e me	asured based on
the l	argest		

01. Footnote for uncertain tax position under FIN 48 (Part X)

benefit that has a greater than 50% likelihood of being realized upon ultimate settlement. There

were no unrecognized tax benefits identified or recorded as liabilities at year end.

ERIC's policy would be to recognize interest and penalties, if any, on tax positions related to its

unrecognized tax benefits in income tax expense in the financial statements. No interest and

penalties were assessed or recorded during the year. ERIC's IRS Forms 990 that have been filed are

subject to examination by the Internal Revenue Service, generally for three years after they were

filed.

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization Electronic Registration Information Center Inc. Employer identification number 45-5389681

01. Organizational document changes (Part VI, line 4)

Since the prior Form 990 was filed, the Organization amended its bylaws to eliminate

non-voting seats on the Board of Directors.

02. Governing body decisions (Part VI, line 7b)

All members of the Organization have a right but not the obligation to appoint a

representative to the Board of Directors. This means a member may choose not to put a

representative on the Board, and, as such, the size of the Board may or may not equal the

size of the membership. Accordingly, the organization has a two-tiered governance model,

meaning that some decisions are allocated to members and others to the Board of Directors.

For example, the members and not the Board have the power to approve the dues schedule,

and amend the bylaws, membership agreement, and certificate of incorporation.

03. Form 990 governing body review (Part VI, line 11)

The Form 990 was reviewed by the Executive Committee, Finance Committee, full Board of

Directors, Executive Director, an outside accountant, and counsel.

04. Conflict of interest policy compliance (Part VI, line 12c)

The Organization's Conflict of Interest Policy (" Policy") requires all Covered Persons

to assess for possible covered transactions on an ongoing basis and, if they become aware

of a possible conflict, to promptly disclose it in accordance with the Policy. In

addition, annually, Directors are required to complete a conflict-of-interest disclosure

form. In accordance with the Policy, the Board, any committee thereof, and the Executive

Director review disclosures of covered transactions to determine if they meet the standard

for approval; maintain documentation as may be necessary and appropriate to document the

Schedule O (Form 990) 2022	Page 2
Name of the organization	Employer identification number
Electronic Registration Information Center Inc.	45-5389681
review of Form 990, Part VI, covered transactions; and, in the case of a c	ommittee or the
Executive Director, report to the Board on any covered transaction approve	d in accordance
with the Policy.	
05. CEO, executive director, top management comp (Part VI, line 15a)	
To determine the Executive Director's compensation, the Executive Committe	e of the Board
conducts a performance review of the Executive Director and, in consultati	on with the
Finance Committee, reviews comparability data and information from similar	organizations
from IRS Form 990s; a comprehensive non-profit compensation report; and ot	her benchmarking
information. This decision is documented contemporaneously in writing. The	full Board is
apprised of the Executive Committee's review and determination and votes o	n the
Organization's annual budget, including the Executive Director's compensat	ion. The
Executive Director, who is an ex officio, non-voting member of the Executi	ve Committee and

06. Other officer or key employee compensation (Part VI, line 15b

The Organization does not have any other compensated officers or key employees. The

the Board recuses himself from all discussions relating to his compensation.

Executive Director conducts an annual performance review of other employees and makes a

compensation determination. This determination is presented to the full Board as part of

its annual review and approval of Organization's budget.

07. Governing documents, etc, available to public (Part VI, line 19)

The Organization's governing documents (bylaws and membership agreement), Form 990s,

audited financial statements, and conflict-of-interest policy are available on its

website. Its Form 1023 is available upon request.

Statement of Program Service Accomplishments

Name(s) as shown on return

Electronic Registration Information Center Inc.

Form 990-Part III(a) Statement of Service Accomplishment

Program Service Code	
Program Service Expenses	\$1264483
Grants and allocations included in above expense	\$0
Program Services Revenue	\$1544823

Explanation

To improve the accuracy of America's voting rolls, ERIC provided its members with access to information on voter registration records that were inaccurate or out-of-date due to voters changing residences. Members contacted these voters via mail in order to correct the inaccuracy or obtain information sufficient to inactivate or update the voter's record. ERIC also provided information on voters who appeared to be deceased based on official death data from the Social Security Administration. To help identify and prosecute illegal voting, ERIC provided members with reports that flagged voters in the 2022 General Election who may have voted more than once in their state, voted in more than one state (among ERIC members), or voted on behalf of a deceased voter. To increase participation in elections, ERIC identified potentially eligible but unregistered residents in member states. Members contacted these individuals via a mailing that included instructions for how to best register to vote. The mailing included the eligibility requirements and voter registration deadlines. Summary statistics of these efforts are available at www.ericstates.org. ERIC experiences a decrease in membership. As of June 30, 2023, 26 states and the District of Columbia were members of ERIC.

2022 PG01 Your Social Security Number

Statement #4

45-5389681