Form	990
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EXTENDED TO NOVEMBER 15, 2023 Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

and ending



Department of the Treasury Internal Revenue Service	Go to www.irs.g
A For the 2022 calend	ar vear, or tax vear beginning

Т

Ba	Check if	C Name of organization		D Employer identifi	cation number	
	Addre chang					
	Name Chang		27-0791036			
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite			
F	Final	15 мест Эсти стрет	11TH			
	lreturn, termin ated			G Gross receipts \$	875,561.	
	Amen			H(a) Is this a group re		
				for subordinates		
	pendi	¹⁹ SAME AS C ABOVE		H(b) Are all subordinates in		
	ay.ev	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 52	- `'	list. See instructions	
	Vebsi) 01 [] 02	H(c) Group exemption		
		organization: X Corporation Trust Association Other	I Yea		VI State of legal domicile: NJ	
	art I	Summary	E rou			
		Briefly describe the organization's mission or most significant activities: TO I	DEVELO	P AND IMPLEM	ENT	
Governance	·	PROGRAMS, ACTIVITIES AND/OR MAKE GIFTS,	GRANT	S AND CONTRI	BUTIONS TO	
rna		Check this box if the organization discontinued its operations or disp				
ove		Number of voting members of the governing body (Part VI, line 1a)			5	
Ğ		Number of independent voting members of the governing body (Part VI, line 1b)			5	
Activities &		Total number of individuals employed in calendar year 2022 (Part V, line 2a)			1	
∕iti€		Total number of volunteers (estimate if necessary)			0	
ctiv		Total unrelated business revenue from Part VIII, column (C), line 12			0.	
◄		Net unrelated business taxable income from Form 990-T, Part I, line 11			0.	
				Prior Year	Current Year	
Ð	8	Contributions and grants (Part VIII, line 1h)		630,433.	863,600.	
nu		Program service revenue (Part VIII, line 2g)		4,286.	11,961.	
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	0.	
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.	
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		634,719.	875,561.	
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.	
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.	
ŝ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	47,138.	57,078.	
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.	
xpe	b	Total fundraising expenses (Part IX, column (D), line 25)	0.			
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		647,966.	762,590.	
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	L	695,104.	819,668.	
	19	Revenue less expenses. Subtract line 18 from line 12		-60,385.	55,893.	
et Assets or ad Balances			В	eginning of Current Year	End of Year	
sset	20	Total assets (Part X, line 16)		198,307.	307,172.	
let As und B	21	Total liabilities (Part X, line 26)		0.	52,972.	
Pul	22	Net assets or fund balances. Subtract line 21 from line 20		198,307.	254,200.	
Pa	art II	Signature Block				

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

Sign	Signature of officer			Date				
	THOMAS FLANNERY, TREASURE	R						
	Type or print name and title							
	Print/Type preparer's name	Preparer's signature	Date	Check PTIN				
Paid	JENNYFER LOGRONO			if p02167510				
Preparer	Firm's name MALESARDI, QUACKE). LLC	Firm's EIN 22-1624206				
Use Only	Firm's address 155 NORTH DEAN ST	REET – SUITE 5						
	ENGLEWOOD, NJ 076	31		Phone no. $201 - 567 - 4100$				
May the IF	May the IRS discuss this return with the preparer shown above? See instructions 🛛 🚺 Yes 🛄 No							
232001 12-1	32001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2022)							

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	HURU INTERNATIONAL INC.	27-0791036	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
	TO DEVELOP AND IMPLEMENT PROGRAMS, ACTIVITIES, AND/OR	MAKE GIFTS,	
	GRANTS AND CONTRIBUTIONS TO EDUCATIONAL, SCIENTIFIC OR	OTHER	
	CHARITABLE INSTITUTIONS IN ORDER TO ADVANCE THE EDUCAT		NT,
	WELFARE AND WELL-BEING OF GIRLS LIVING IN KENYA AND EL		-
2	Did the organization undertake any significant program services during the year which were not listed on the		
-	prior Form 990 or 990-EZ?		XNo
	If "Yes," describe these new services on Schedule O.		
2	Did the organization cease conducting, or make significant changes in how it conducts, any program service		XNo
3			
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services,		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to c	thers, the total expenses,	and
	revenue, if any, for each program service reported.	11	0.61
4a			961. ₎
	TO RAISE FUNDS AND ADMINISTER ASSISTANCE FOR HURU KENY		
	CORE MISSION IS TO EMPOWER GIRLS BY PROVIDING THEM WIT		
	RESOURCES THEY NEED TO DEVELOP INTO HEALTHY, ECONOMICA		MEN.
	WITH THIS GOAL IN MIND, HURU KENYA HAS DEVELOPED A KIT	THAT WILL	
	PROVIDE GIRLS WITH THE OTHERWISE DIFFICULT TO OBTAIN R	ESOURCES AND	
	KNOWLEDGE THAT THEY NEED TO MEET THEIR MENSTRUAL NEEDS		
4b	(Code:) (Expenses \$ including grants of \$) (Re	venue \$)
40)
4c	(Code:) (Expenses \$ including grants of \$) (Re	venue \$)
Act	Other program convision (Describe on Schedule O)		
4d	Other program services (Describe on Schedule O.)	Ň	
	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses 691,616.)	
<u>4e</u>	Total program service expenses 691,616.		00 (
		Form 9	90 (2022)

 Form 990 (2022)
 HURU
 INTERNATIONAL
 INC.

 Part IV
 Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		x	
•	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</i>	3		x
4	public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	5		
-	during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
•	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
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		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			v
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	10		x
11	or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,	10		- 21
	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		x
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		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			37
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		XX
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e		A
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)? <i>If "Yes," complete Schedule D, Part X</i>	11f		x
1 2 2	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			- 23
12a	Schedule D, Parts XI and XII	12a	x	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			37
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			v
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		X
16	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		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
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	_		v
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

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Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			v
04-	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 last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete</i>			
		24a		x
b	Schedule K. If "No," go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		
	Did the organization mintain an escrow account other than a refunding escrow at any time during the year to defease	240		
0	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			v
	"Yes," complete Schedule L, Part IV	28a		X X
	A family member of any individual described in line 28a? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28b		Λ
C	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i> "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			37
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			x
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Δ
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			x
07	If "Yes," complete Schedule R, Part V, line 2	36		A
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		x
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	3/		
	Note: All Form 990 filers are required to complete Schedule O	38	х	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 5			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		v	
	(gambling) winnings to prize winners?	1c	Х	

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Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 1		v	
-	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		
	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>	3b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			x
6	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Λ
D	If "Yes," enter the name of the foreign country			
Fo		E a		х
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b		X
b c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	50 50		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	50		
Ua		6a		x
h	any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	Ua		
		6b		
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).	0.0		
'a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	1.0		
	to file Form 8282?	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/	A
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	N/	A
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year? N/A	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966? N/A	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year <u>N/A</u> 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? N/A	40-		
а		13a		
h	Note: See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the			
b	organization is licensed to issue qualified health plans 13b			
с	Enter the amount of reserves on hand			
14a		14a		X
	Did the organization receive any payments for indoor tanning services during the tax year?	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		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		Х
	If "Yes," complete Form 4720, Schedule O.	-		
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953? N/A	17		
	If "Yes," complete Form 6069.			

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HURU INTERNATIONAL INC.

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

	Check if Schedule O contains a response or note to any line in this Part VI			Χ
Sec	tion A. Governing Body and Management			
			Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year 1a 5			
	If there are material differences in voting rights among members of the governing body, or if the governing	1		
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1		
_	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			
0	of officers, directors, trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		X
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
74	more members of the governing body?	7a		х
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	14		
		7b	x	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	10		
		8a	х	
a b	The governing body? Each committee with authority to act on behalf of the governing body?	8b	X	
		uo	- 25	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	9		x
500	organization's mailing address? If "Yes," provide the names and addresses on Schedule O tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	9		Δ
Sec	tion D. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		Yes	Na
10-	Did the exercise the level chapters branches as officience	10a	res	No X
	Did the organization have local chapters, branches, or affiliates?	10a		22
a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	104		
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b 11a	X	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	Па	- 23	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	10.	x	
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	10.	x	
10	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	~	
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?			v
	The organization's CEO, Executive Director, or top management official	15a		X X
b	Other officers or key employees of the organization	15b		Δ
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			37
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NJ , NY			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) availa	able
	for public inspection. Indicate how you made these available. Check all that apply.			
	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	nd fina	ncial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	THE ORGANIZATION - 212-340-7115			
	15 WEST 26TH STREET, 11TH, NEW YORK, NY 10010			

Part VII	Compensation of Officers,	Directors,	Trustees,	Key	Employees,	Highest	Compensated
	Employees, and Independe	ent Contrac	ctors				

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
 Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee)

who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

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

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

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	, unles	ss pe	rson	is bot	h an	compensation	compensation	amount of
	week		cer an	dad	irecto	or/trus	stee)	from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	or dir	e			ated		organization	(W-2/1099-MISC/	from the
	related	Istee	truste		e	pensi		(W-2/1099-MISC/	1099-NEC)	organization
	organizations below	Jal tru	onal		ploye	com ee		1099-NEC)		and related
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) LORNA MACLEOD	37.50			0	\times	Ξə				
PRESIDENT/CEO		Х		Х				53,000.	0.	0.
(2) WILLIAM LIN	1.00									
BOARD MEMBER		Х						0.	0.	0.
(3) NATHAN MEIER	1.00									
BOARD MEMBER		Х						0.	0.	0.
(4) DENNIS PINTO	2.50									0
CHAIRMAN		Х						0.	0.	0.
(5) DEBRA ANN BAKER	2.50	x		x				0.	0.	0
VICE PRESIDENT	3.50	A		A				0.	0.	0.
(6) JAMES A. KOSCH SECRETARY	3.50	x		x				0.	0.	0.
(7) THOMAS J. FLANNERY	3.00	~		Δ				0.	0.	0.
TREASURER	5.00	x		х				0.	0.	0.
		- 23		27						0.

Form 990 (2022)

	990 (2022) HURU INTI									27-07	791()36	Page 8
Par	t VII Section A. Officers, Directors, Trus		oloy	ees,			ghe	st C		1			
	(A) Name and title	(B) (C) Average hours per week (do not check more than one box, unless person is both an officer and a director/trustee)					than is bot	h an	(D) Reportable compensation from	(E) Reportable compensation from related		Estin amou	=) nated unt of ner
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MIS 1099-NEC)		fron organ and r	nsation i the ization elated zations
с		I, Section A							53,000. 0. 53,000.		0.0.0		0.
_ <u>d</u> 2	Total (add lines 1b and 1c) Total number of individuals (including but n compensation from the organization),000 of reportabl			0.
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s								hest compensated emp			3 Y	es No X
4	For any individual listed on line 1a, is the su and related organizations greater than \$150),000? If "Yes,	" CO	mple	ete S	Sche	edule	e J f	for such individual			4	X
5 Sec	Did any person listed on line 1a receive or a rendered to the organization? <i>If "Yes," com</i> tion B. Independent Contractors					-		elat	ed organization or indiv	Idual for services		5	X
1	Complete this table for your five highest co the organization. Report compensation for										pensa	ation fro	m
	(A) Name and business	address	NC	ONE	2				(B) Description of s	services	Сс	(C) ompensa	ation
								_					
2	Total number of independent contractors (i \$100,000 of compensation from the organiz	-	ot lir	nite	d to		se lis	sted	l above) who received n	nore than			

	n 990 (RU INTERNA	TIONAL IN	С.		27-0791	036 Page
Pa	rt VII							
		Check if Schedule O	contains a respons	e or note to any lir	e in this Part VIII (A)	(B)	(C)	(D)
					(A) Total revenue	Related or exempt	Unrelated business revenue	Revenue excluded
nts nts	1 a	Federated campaigns	1 a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues	1b					
ts, (Am	с	Fundraising events	1c					
Gifi ilar	d							
ons, Sim	е	5						
utio Ier (f	All other contributions, gifts,		962 600				
oth		similar amounts not included		863,600.275,171.				
Con	g		lines 1a-1f 1g \$	2/3,1/1.	863,600.			
0.0		Total. Add lines 1a-1f		Business Code	000,000.			
e	2 a	HURU KITS		561499	11,961.	11,961.		
e vic	b					,		
Sel	c							
am	d							
Program Service Revenue	е							
Ā	f	All other program service						
	g	Total. Add lines 2a-2f			11,961.			
	3	Investment income (includ						
	4 5	Income from investment of						
	5	Royalties	(i) Real	(ii) Personal				
	6 a	Gross rents	6a	(.,				
			6b					
	с	Rental income or (loss)	6c					
	d	Net rental income or (loss)					
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	7a					
Ø	b	Less: cost or other basis						
evenue		and sales expenses	7b 7c					
leve		Gain or (loss) Net gain or (loss)						
Other R		Gross income from fundraisi						
Oth	0 4	including \$						
		contributions reported on						
		Part IV, line 18	8	a				
	b			b				
	9 a	Gross income from gamin	-					
		Part IV, line 19						
		Less: direct expenses						
		Net income or (loss) from Gross sales of inventory, l						
	iu a	and allowances		Da				
	b	Less: cost of goods sold		Db				
		Net income or (loss) from	·····	-				
s			,	Business Code				
Miscellaneous Revenue	11 a							
llan.	b							
scel	С							
Mi		All other revenue						
	12	Total. Add lines 11a-11d			875,561.	11,961.	0.	0

27-0791036

Page 9

HURU INTERNATIONAL INC. Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a respons not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.	i otal expenses	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	53,000.	26,500.	26,500.	
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
0	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	4,078.	2,039.	2,039.	
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting	8,500.		8,500.	
d	, , , , , , , , , , , , , , , , , , ,				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	53,438.	45,000.	8,438.	
10	column (A), amount, list line 11g expenses on Sch 0.)	17,774.	17,774.	0,430.	
12 13	Advertising and promotion Office expenses	194,067.	194,067.		
14	Information technology	19170070	19170070		
15	Royalties				
16	Occupancy	6,875.	6,875.		
17	Travel		-		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,763.		1,763.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	IN-KIND DONATION EXPENS	275,171.	195,115.	80,056.	
b	HURU – KENYA STAFF	179,461.	179,461.		
с	DISTRIBUTION	13,711.	13,711.		
d	HURU KITS	11,074.	11,074.		
е	All other expenses	756.		756.	
25	Total functional expenses. Add lines 1 through 24e	819,668.	691,616.	128,052.	0
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				Form 990 (202

33

Total liabilities and net assets/fund balances

HURU	INTERNATIONAL	INC.
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			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	198,307.	1	297,740.
	2	•	190,007.	2	25777100
	3	Savings and temporary cash investments		3	9,432.
	4	Pledges and grants receivable, netAccounts receivable, net		4	5,152.
	5	Loans and other receivables from any current or former officer, director,			
	ľ	trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
	ľ	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
S	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
		Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	198,307.	16	307,172.
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	52,972.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to any current or former officer, director,			
iliti		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons		22	
-	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0.	26	52,972.
ŝ		Organizations that follow FASB ASC 958, check here			
nce		and complete lines 27, 28, 32, and 33.	100 207		254 200
ala	27	Net assets without donor restrictions	198,307.	27	254,200.
d B	28	Net assets with donor restrictions		28	
Fun		Organizations that do not follow FASB ASC 958, check here			
or		and complete lines 29 through 33.			
ets	29	Capital stock or trust principal, or current funds		29	
Net Assets or Fund Balances	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
et ⊿	31	Retained earnings, endowment, accumulated income, or other funds	198,307.	31	254,200.
Ż	32	Total net assets or fund balances	198,307.	32	307 172
	1 1212				

307,172. Form **990** (2022)

198,307. 33

Form 990 (2022)
Part X Balance Sheet

Form	1990 (2022) HURU INTERNATIONAL INC.	27-0791	036	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			61.
2	Total expenses (must equal Part IX, column (A), line 25)	2			68.
3	Revenue less expenses. Subtract line 2 from line 1	3			93.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	19	8,3	07.
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	25	4,2	00.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedul	e 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	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	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	e 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 Scl	nedule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2022)

SCH	EDU	LE A
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(Form 990)	(Form	990)
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Total

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-FZ

	Allacii lu i	01111 990 01 1 01111 990-LZ.	
MAN ire	gov/Form990	for instructions and the latest inform	nat

	2022
	Open to Public Inspection
r	identification number

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name

merr	al Reve	enue Service	(Go to www.irs.gov/	Form990 for instruction	ns and the	e latest in	formation.		Inspection
Nan	ne of	the organizati	on						Employer	identification number
			HURU	INTERNATI	ONAL INC.				2	7-0791036
Pa	irt I	Reason	for Public (Charity Status.	(All organizations must c	omplete th	his part.) S	See instructio	ns.	
The	orgai	nization is not a	ı private found	lation because it is: ((For lines 1 through 12, c	heck only	one box.)			
1		A church, cor	nvention of ch	urches, or associatio	on of churches described	d in sectio	n 170(b)(1)(A)(i).		
2		A school des	cribed in sect i	ion 170(b)(1)(A)(ii).	Attach Schedule E (Forn	n 990).)				
3					anization described in se)(b)(1)(A)(i	ii).		
4					njunction with a hospital				(iii). Enter	the hospital's name,
		city, and state			, ,					· ,
5				or the benefit of a co	llege or university owned	d or operat	ted bv a d	overnmental	unit descrik	ped in
				Complete Part II.)	0 ,	·	, 0			
6					mental unit described in s	section 17	70(b)(1)(A))(v).		
7			-	-	intial part of its support f				the general	public described in
				omplete Part II.)						
8					(1)(A)(vi). (Complete Par	: 11.)				
9		-			in section 170(b)(1)(A)(ed in coniu	unction with a	land-arant	college
		-			ulture (see instructions).				-	-
		university:		,	(,		,	,,		
10	X	· · · _	on that norma	Ilv receives (1) more	than 33 1/3% of its sup	oort from a	contributio	ons, members	ship fees, a	nd gross receipts from
		0			ct to certain exceptions;					o .
					(less section 511 tax) fr	· · /				0
				mplete Part III.)	· · · · · · · · · · · · · · · · · · ·		I	,	5	,
11				, ,	ively to test for public sa	fety. See s	section 5	09(a)(4).		
12		÷	-		ively for the benefit of, to				arry out the	e purposes of one or
		-	-		ed in section 509(a)(1) o					
				-	of supporting organizatio					
а			-		supervised, or controlled				-	/ giving
				•	gularly appoint or elect a	•				
			-	complete Part IV, Se						
b				-	d or controlled in connec	tion with it	ts support	ed organizati	on(s), by ha	aving
					anization vested in the s					-
			-	t complete Part IV,						
с			. ,	-	g organization operated	in connec [.]	tion with,	and functiona	ally integrate	ed with,
					s). You must complete I				, 0	
d			0		oorting organization oper	,		-	orted organi	ization(s)
			-		zation generally must sat				-	. ,
			-		nplete Part IV, Sections	-				
е					written determination fro				e II, Type III	
			-		nally integrated support			51 7 51	, ,	
f	Ent	ter the number			, , , , , , , , , , , , , , , , , , , ,					
g	Pro	ovide the followi	ng informatior	about the supporte						· •
		(i) Name of suppo		(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	inization listed	(v) Amount o	f monetary	(vi) Amount of other
		organization			(described on lines 1-10 above (see instructions))	Yes	No	support (see i	nstructions)	support (see instructions)

Schedule A	(Form	990)	202

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
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.						
	ction B. Total Support						
-	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities	etc. (see instructi	ons)	•		12	
13	First 5 years. If the Form 990 is for th					501(c)(3)	
	organization, check this box and stor						
Sec	ction C. Computation of Publ						
14	Public support percentage for 2022 (line 6, column (f), d	divided by line 11,	column (f))		14	%
15	Public support percentage from 2021					15	%
16 a	33 1/3% support test - 2022. If the					more, check thi	s box and
	stop here. The organization qualifies	as a publicly supp	orted organizatio	n			
b	33 1/3% support test - 2021. If the						
	and stop here. The organization qua	ifies as a publicly	supported organiz	ation			
17a	10% -facts-and-circumstances tes						
	and if the organization meets the fact						
	meets the facts-and-circumstances te					-	
b	10% -facts-and-circumstances tes	-			-		
	more, and if the organization meets the						
	organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization						
18	Private foundation. If the organization						
							A (Form 990) 2022

Schedule A (Form 990) 2022

HURU INTERNATIONAL INC.

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

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

Sec	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")	350,918.	363,402.	659,050.	630,433.	863,600.	2867403.	
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	262,556.	292,934.	48,281.	4,286.	11,961.	620,018.	
2	Gross receipts from activities that				_,	,		
0	are not an unrelated trade or bus-							
	iness under section 513							
л	Tax revenues levied for the organ-							
4	ization's benefit and either paid to							
	or expended on its behalf							
5	The value of services or facilities							
5	furnished by a governmental unit to							
	the organization without charge							
6		613,474.	656,336.	707,331.	634,719.	875,561.	3487421.	
	Total. Add lines 1 through 5	010,114	030,330.	101,331.	054,715.	075,501.	3407421.	
78	Amounts included on lines 1, 2, and						0.	
h	3 received from disqualified persons Amounts included on lines 2 and 3 received						0.	
	from other than disqualified persons that							
	exceed the greater of \$5,000 or 1% of the						0.	
	amount on line 13 for the year						0.	
	Add lines 7a and 7b						3487421.	
	Public support. (Subtract line 7c from line 6.)						340/421.	
			<i>(</i>), , , , , , , , , , , , , , , , , , ,					
	ndar year (or fiscal year beginning in)	(a) 2018 613,474.	(b) 2019 656,336.	(c)2020 707,331.	(d) 2021 634,719.	(e)2022 875,561.	(f) Total 3487421.	
	Amounts from line 6	013,4/4.	000,000.	/0/,331.	034,/19.	0/0,001.	348/421.	
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources							
k	Unrelated business taxable income							
	(less section 511 taxes) from businesses							
	acquired after June 30, 1975							
c	Add lines 10a and 10b							
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.)	613,474.	656,336.	707,331.	634,719.	875,561.	3487421.	
14	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3) organizati	on,	
	check this box and stop here	-						
Se	ction C. Computation of Publ							
15	Public support percentage for 2022 (line 8, column (f), d	livided by line 13,	column (f))		15	100.00 %	
16	Public support percentage from 2021	Schedule A, Part	III, line 15			16	100.00 %	
	ction D. Computation of Inve							
17	Investment income percentage for 20)22 (line 10c, colur	nn (f), divided by li	ne 13, column (f))		17	.00 %	
	Investment income percentage from					18	%	
	33 1/3% support tests - 2022. If the							
							X	
ŀ	more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization							
~	line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization							
20	Private foundation. If the organization		-			-		
			,	,				

HURU INTERNATIONAL INC.

Yes

No

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

1 2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a

Schedule A (Form 990) 2022 HURU INTERNATIONAL	INC.
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Pa	rt IV Supporting Organizations (continued)		_	
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			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		
Sec	tion D. All Type III Supporting Organizations	•		
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations	-	•	

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).
- a ____ The organization satisfied the Activities Test. Complete line 2 below.
- b ____ The organization is the parent of each of its supported organizations. Complete line 3 below.
- c _____ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).
- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- **a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "*No*" provide details in **Part VI**.
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If* "Yes," *describe in* **Part VI** *the role played by the organization in this regard.*

Yes No

Schedule A (Form 990) 2022

	rt V Type III Non-Functionally Integrated 509(a)(3) Support			27-0791030 Page
1	Check here if the organization satisfied the Integral Part Test as a qualify			Part VI) See instructions
	All other Type III non-functionally integrated supporting organizations mu	-		Fart VI). See mot detions
Sect	tion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
ect	tion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
ect	tion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integra	ted Type III supporting or	nanization (see

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

Schedule A (Form 990) 2022

Schedule A (Form 990) 2022

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

Schedule A (Form 990) 2022

Schedule A	(Form 990) 2022	HURU	INTERNATIONAL	INC.	27-0791036 Page 8
Part VI	Supplemental Infor Part IV, Section A, lines 1 line 1; Part IV, Section D,	, 2, 3b, 3c, lines 2 and	4b, 4c, 5a, 6, 9a, 9b, 9c, 11 3; Part IV, Section E, lines 1	quired by Part II, line 10; Part II, line 17 a, 11b, and 11c; Part IV, Section B, lin Ic, 2a, 2b, 3a, and 3b; Part V, line 1; Pa d 6. Also complete this part for any add	a or 17b; Part III, line 12; es 1 and 2; Part IV, Section C, art V, Section B, line 1e; Part V,