

All Copy

Form **990**

Department of the Treasury  
Internal Revenue Service

# Return of Organization Exempt From Income Tax

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

- ▶ Do not enter Social Security numbers on this form as it may be made public.
- ▶ Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

# 2015

Open to Public Inspection

**A** For the 2015 calendar year, or tax year beginning 07/01, 2015, and ending 06/30, 2016

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <u>RAINFOREST ALLIANCE, INC.</u>			<b>D</b> Employer identification number <u>13-3377893</u>	
	Doing Business As			<b>E</b> Telephone number <u>(212) 677-1900</u>	
	Number and street (or P.O. box if mail is not delivered to street address)		Room/suite		
	<u>233 BROADWAY, 28TH FLOOR</u>				
City or town, state or province, country, and ZIP or foreign postal code <u>NEW YORK, NY 10279</u>			<b>G</b> Gross receipts \$ <u>40,362,768.</u>		
<b>F</b> Name and address of principal officer: <u>ALIK HINCKSON</u> <u>233 BROADWAY, 28TH FLOOR NEW YORK, NY 10279</u>			<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
			<b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No		
			If "No," attach a list. (see instructions)		
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			<b>H(c)</b> Group exemption number ▶		
<b>J</b> Website: ▶ <u>WWW.RAINFOREST-ALLIANCE.ORG</u>					
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			<b>L</b> Year of formation: <u>1987</u> <b>M</b> State of legal domicile: <u>NY</u>		

## Part I Summary

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <u>THE RAINFOREST ALLIANCE WORKS TO CONSERVE BIODIVERSITY AND ENSURE SUSTAINABLE LIVELIHOODS BY TRANSFORMING LAND-USE PRACTICES, BUSINESS PRACTICES, AND CONSUMER BEHAVIOR.</u>			
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<u>3</u> 18.		
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<u>4</u> 18.		
	<b>5</b> Total number of individuals employed in calendar year 2015 (Part V, line 2a)	<u>5</u> 180.		
	<b>6</b> Total number of volunteers (estimate if necessary)	<u>6</u> 69.		
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<u>7a</u> 0.		
<b>7b</b> Net unrelated business taxable income from Form 990-T, line 34	<u>7b</u> 0.			
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<u>26,690,309.</u>	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	<u>20,961,782.</u>		
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u>48,224.</u>		
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u>4,290.</u>		
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<u>47,704,605.</u>		
	<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<u>5,423,748.</u>	
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		<u>0.</u>		
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		<u>24,196,983.</u>		
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		<u>81,465.</u>		
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>4,681,674.</u>				
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		<u>16,949,758.</u>		
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		<u>46,651,954.</u>		
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	<u>1,052,651.</u>			
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	<u>22,866,540.</u>	<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>21</b> Total liabilities (Part X, line 26)	<u>9,931,788.</u>		
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	<u>12,934,752.</u>		

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## Part II Signature Block

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

<b>Sign Here</b>	Signature of officer		Date		
	<u>ALIK HINCKSON</u> Type or print name and title		<u>05/03/2017</u>		
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	<u>CATHERINE BENDALL</u>				<u>P00521196</u>
	Firm's name ▶ <u>WITHUMSMITH+BROWN, PC</u>	Firm's EIN ▶ <u>22-2027092</u>		Phone no. <u>732-828-1614</u>	

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2015)

Part 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:

THE RAINFOREST ALLIANCE WORKS TO CONSERVE BIODIVERSITY AND ENSURE SUSTAINABLE LIVELIHOODS BY TRANSFORMING LAND-USE PRACTICES, BUSINESS PRACTICES AND CONSUMER BEHAVIOR.

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 11,144,642. including grants of \$ ) (Revenue \$ 10,529,883. ) RAINFOREST ALLIANCE CERTIFICATION - RA CERT (SEE SCHEDULE O)

4b (Code: ) (Expenses \$ 8,051,463. including grants of \$ 3,276,715. ) (Revenue \$ ) (TR)AINING, (E)XTENSION, (E)NTERPRISES AND (S)OURCING (TREES) SUSTAINABLE FORESTRY (SEE SCHEDULE O)

4c (Code: ) (Expenses \$ 6,599,687. including grants of \$ ) (Revenue \$ 8,792,708. ) MARKETS TRANSFORMATION (SEE SCHEDULE O)

4d Other program services (Describe in Schedule O.) ATTACHMENT 1 (Expenses \$ 9,239,824. including grants of \$ 944,029. ) (Revenue \$ 60,372. )

4e Total program service expenses 35,035,616.

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i> . . . . .	X	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? . . . . .	X	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i> . . . . .		X
<b>4 Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II.</i> . . . . .	X	
<b>5</b> 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 Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III.</i> . . . . .		X
<b>6</b> 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? <i>If "Yes," complete Schedule D, Part I.</i> . . . . .		X
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II.</i> . . . . .		X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i> . . . . .		X
<b>9</b> 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? <i>If "Yes," complete Schedule D, Part IV.</i> . . . . .	X	
<b>10</b> Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i> . . . . .	X	
<b>11</b> 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.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i> . . . . .	X	
<b>b</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? <i>If "Yes," complete Schedule D, Part VII.</i> . . . . .		X
<b>c</b> 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? <i>If "Yes," complete Schedule D, Part VIII.</i> . . . . .		X
<b>d</b> Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i> . . . . .		X
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> . . . . .	X	
<b>f</b> 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> . . . . .	X	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII.</i> . . . . .	X	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.</i> . . . . .		X
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i> . . . . .		X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? . . . . .	X	
<b>b</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 or more? <i>If "Yes," complete Schedule F, Parts I and IV.</i> . . . . .	X	
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV.</i> . . . . .	X	
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i> . . . . .		X
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions). . . . .	X	
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i> . . . . .	X	
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i> . . . . .		X

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, and Yes/No checkboxes. Rows include questions 20a through 38 regarding hospital facilities, financial statements, grants, compensation, tax-exempt bonds, and organizational transactions.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V [X]

Table with columns for line numbers (1a-14b), descriptions, and Yes/No checkboxes. Includes entries for Form 1096, Form W-2G, Form W-3, Form 990-T, Form 8886-T, Form 8282, Form 8899, Form 1098-C, Form 990, Form 720, and Form 709.

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 in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include 1a (18), 1b (18), 2, 3, 4, 5, 6, 7a, 7b, 8, 8a, 8b, 9.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ATTACHMENT 2
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 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 in Schedule O)
19 Describe in 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: NIGEL SIZER 233 BROADWAY, 28TH FLOOR NEW YORK, NY 10279 212-677-1900

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

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

**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 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 and/or Box 7 of Form 1099-MISC) 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DANIEL R. KATZ DIRECTOR, BOARD CHAIR	1.00 0.	X		X				0.	0.	0.
(2) LABEEB ABOUD DIRECTOR	1.00 0.	X						0.	0.	0.
(3) ROGER DEROMEDI DIRECTOR, VICE CHAIR	1.00 0.	X		X				0.	0.	0.
(4) WENDY GORDON DIRECTOR, VICE CHAIR	1.00 0.	X		X				0.	0.	0.
(5) ERIC ROTHENBERG DIRECTOR	1.00 0.	X						0.	0.	0.
(6) PETER M. SCHULTE DIRECTOR, TREASURER	1.00 0.	X		X				0.	0.	0.
(7) KERRI A. SMITH DIRECTOR	1.00 0.	X						0.	0.	0.
(8) ANNEMIEKE WIJN DIRECTOR	1.00 0.	X						0.	0.	0.
(9) AMAURY DE PORET DIRECTOR	1.00 0.	X						0.	0.	0.
(10) LAWRENCE LUNT DIRECTOR	1.00 0.	X						0.	0.	0.
(11) DAVID S. ROSS DIRECTOR	1.00 0.	X						0.	0.	0.
(12) MARILU HERNANDEZ DE BOSOMS DIRECTOR	1.00 0.	X						0.	0.	0.
(13) TASSO AZEVEDO DIRECTOR	1.00 0.	X						0.	0.	0.
(14) SONILA COOK DIRECTOR	1.00 0.	X						0.	0.	0.



**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
15) SETH COHEN DIRECTOR	1.00 0.	X					0.	0.	0.	
16) DANIEL COUVREUR DIRECTOR	1.00 0.	X					0.	0.	0.	
17) PETER LEHNER DIRECTOR	1.00 0.	X					0.	0.	0.	
18) WILLIAM SARNI DIRECTOR	1.00 0.	X					0.	0.	0.	
19) HORTENSE WHELAN PRESIDENT (UNTIL 9/11/2015)	40.00 0.			X			355,274.	0.	22,954.	
20) ANA PAULA TAVARES EXECUTIVE VICE PRESIDENT	40.00 0.			X			273,958.	0.	21,276.	
21) LESLIE PARK GENERAL COUNSEL & SECRETARY	40.00 0.			X			220,637.	0.	25,336.	
22) NIGEL SIZER PRESIDENT (FROM 2/1/2016)	40.00 0.			X			0.	0.	0.	
23) RICHARD DONOVAN SENIOR VP/VP OF FORESTRY	40.00 0.				X		173,634.	0.	7,336.	
24) LISA GAUCHEY VP OF HUMAN RESOURCES	40.00 0.				X		187,368.	0.	24,755.	
25) JOSHUA TOSTESON SVP, PROGRAMS, PLANNING	40.00 0.				X		187,358.	0.	16,405.	
<b>1b Sub-total</b>							0.	0.	0.	
<b>c Total from continuation sheets to Part VII, Section A</b>							2,243,757.	0.	210,874.	
<b>d Total (add lines 1b and 1c)</b>							2,243,757.	0.	210,874.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **20**

	Yes	No
3 Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 3		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **9**

**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
26) ANIKA RAHMAN VICE PRESIDENT DEVELOPMENT	40.00 0.				X			167,656.	0.	3,039.
27) DIANE JUKOFSKY VP, COMM., MKTG., EDUCATION	40.00 0.					X		154,316.	0.	23,791.
28) YEVGENIY KOGAN DIRECTOR, IT & KNOWLEDGE MGMT	40.00 0.					X		148,737.	0.	15,382.
29) JON JICKLING DIRECTOR, RA CERT	40.00 0.					X		125,946.	0.	24,853.
30) MICHELLE BUCKLES DIRECTOR, SUSTAINABLE FINANCE	40.00 0.					X		127,726.	0.	25,252.
31) JEFFREY HAYWARD VICE PRESIDENT, DESIGN & INNOV	40.00 0.					X		121,147.	0.	495.
<b>1b Sub-total</b> .....										
<b>c Total from continuation sheets to Part VII, Section A</b> .....										
<b>d Total (add lines 1b and 1c)</b> .....										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **20**

	Yes	No
3 Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> .....		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> .....	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> .....		X

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

**Part VIII Statement of Revenue**

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns . . . . .	<b>1a</b>						
	<b>b</b> Membership dues . . . . .	<b>1b</b>						
	<b>c</b> Fundraising events . . . . .	<b>1c</b>	932,611.					
	<b>d</b> Related organizations . . . . .	<b>1d</b>						
	<b>e</b> Government grants (contributions) . . . . .	<b>1e</b>	11,301,790.					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above . . . . .	<b>1f</b>	7,316,885.					
	<b>g</b> Noncash contributions included in lines 1a-1f: \$ . . . . .		36,700.					
	<b>h Total.</b> Add lines 1a-1f . . . . .			19,551,286.				
	<b>Program Service Revenue</b>	<b>2a</b> <u>CERTIFICATION FEES</u>			541900	9,977,677.	9,977,677.	
<b>b</b> <u>CONTRACT INCOME</u>			541900	633,299.	633,299.			
<b>c</b> <u>PARTICIPATION AGREEMENT REVENUE/ROYALTY</u>			900099	8,334,894.	8,334,894.			
<b>d</b> <u>TRAINING FEES</u>			541900	18,415.	18,415.			
<b>e</b> <u>OTHER PROGRAM INCOME</u>			900099	418,678.	418,678.			
<b>f</b> All other program service revenue . . . . .								
<b>g Total.</b> Add lines 2a-2f . . . . .				19,382,963.				
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts). ATTACHMENT 4 . . . . .			58,202.			58,202.	
	<b>4</b> Income from investment of tax-exempt bond proceeds . . . . .			0.				
	<b>5</b> Royalties . . . . .			0.				
	<b>6a</b> Gross rents . . . . .	(i) Real	(ii) Personal					
		<b>b</b> Less: rental expenses . . . . .						
		<b>c</b> Rental income or (loss) . . . . .						
		<b>d</b> Net rental income or (loss) . . . . .			0.			
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other					
		<b>b</b> Less: cost or other basis and sales expenses . . . . .						
		<b>c</b> Gain or (loss) . . . . .			37.			
		<b>d</b> Net gain or (loss) . . . . .			37.			37.
	<b>8a</b> Gross income from fundraising events (not including \$ 932,611. of contributions reported on line 1c). See Part IV, line 18 . . . . .	<b>a</b>	ATTCH 5	258,341.				
		<b>b</b> Less: direct expenses . . . . .	<b>b</b>	258,341.				
		<b>c</b> Net income or (loss) from fundraising events. ATTCH 6 . . . . .			0.			
<b>9a</b> Gross income from gaming activities. See Part IV, line 19 . . . . .	<b>a</b>							
	<b>b</b> Less: direct expenses . . . . .	<b>b</b>						
	<b>c</b> Net income or (loss) from gaming activities . . . . .			0.				
<b>10a</b> Gross sales of inventory, less returns and allowances . . . . .	<b>a</b>							
	<b>b</b> Less: cost of goods sold . . . . .	<b>b</b>						
	<b>c</b> Net income or (loss) from sales of inventory . . . . .			0.				
<b>Miscellaneous Revenue</b>			<b>Business Code</b>					
<b>11a</b> _____								
	<b>b</b> _____							
		<b>c</b> _____						
	<b>d</b> All other revenue . . . . .							
<b>e Total.</b> Add lines 11a-11d . . . . .				0.				
<b>12 Total revenue.</b> See instructions. . . . .				38,992,488.	19,382,963.		58,239.	

**Part IX Statement of Functional Expenses**

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

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

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . . . .	0.			
2 Grants and other assistance to domestic individuals. See Part IV, line 22 . . . . .	10,000.	10,000.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 . . . . .	4,210,744.	4,210,744.		
4 Benefits paid to or for members . . . . .	0.			
5 Compensation of current officers, directors, trustees, and key employees . . . . .	2,697,147.	898,137.	1,363,200.	435,810.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .	0.			
7 Other salaries and wages . . . . .	14,734,504.	10,420,032.	2,310,411.	2,004,061.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	370,873.	285,025.	33,592.	52,256.
9 Other employee benefits . . . . .	4,801,369.	4,211,813.	46,561.	542,995.
10 Payroll taxes . . . . .	775,709.	713,428.	6,316.	55,965.
11 Fees for services (non-employees):				
a Management . . . . .	0.			
b Legal . . . . .	182,111.	163,085.	3,679.	15,347.
c Accounting . . . . .	195,445.	171,348.	5,715.	18,382.
d Lobbying . . . . .	0.			
e Professional fundraising services. See Part IV, line 17.	226,141.			226,141.
f Investment management fees . . . . .	0.			
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) <u>ATCH 7</u>	7,049,193.	6,611,410.	26,936.	410,847.
12 Advertising and promotion . . . . .	54,915.	28,516.	10.	26,389.
13 Office expenses . . . . .	1,041,164.	710,697.	10,353.	320,114.
14 Information technology . . . . .	565,797.	489,597.	12,157.	64,043.
15 Royalties . . . . .	0.			
16 Occupancy . . . . .	2,107,321.	1,875,081.	33,823.	198,417.
17 Travel . . . . .	2,162,298.	1,986,951.	81,469.	93,878.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings . . . . .	115,638.	106,794.	633.	8,211.
20 Interest . . . . .	0.			
21 Payments to affiliates . . . . .	0.			
22 Depreciation, depletion, and amortization . . . . .	155,352.	141,871.	1,973.	11,508.
23 Insurance . . . . .	222,331.	195,576.	5,584.	21,171.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <u>WORKSHOPS</u> . . . . .	477,055.	470,694.	1,754.	4,607.
b <u>MEMBERSHIP / DUES / SUBSCRIPTION</u> . . . . .	359,223.	233,585.	1,436.	124,202.
c <u>BAD DEBT EXPENSE</u> . . . . .	155,126.	150,920.	4,206.	
d <u>OTHER EXPENSES</u> . . . . .	1,000,933.	950,312.	3,291.	47,330.
e All other expenses . . . . .				
<b>25 Total functional expenses.</b> Add lines 1 through 24e	43,670,389.	35,035,616.	3,953,099.	4,681,674.
<b>26 Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) . . . . .	0.			

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing	11,014,021.	<b>1</b>	4,396,511.
	<b>2</b> Savings and temporary cash investments	1,914,814.	<b>2</b>	2,612,764.
	<b>3</b> Pledges and grants receivable, net	4,612,344.	<b>3</b>	2,317,131.
	<b>4</b> Accounts receivable, net	2,395,114.	<b>4</b>	2,432,250.
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0.	<b>5</b>	0.
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0.	<b>6</b>	0.
	<b>7</b> Notes and loans receivable, net	0.	<b>7</b>	0.
	<b>8</b> Inventories for sale or use	0.	<b>8</b>	0.
	<b>9</b> Prepaid expenses and deferred charges <span style="float: right;">ATCH. 8</span>	515,115.	<b>9</b>	647,248.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	1,305,059.		
	<b>b</b> Less: accumulated depreciation	619,863.		
		840,547.	<b>10c</b>	685,196.
	<b>11</b> Investments - publicly traded securities <span style="float: right;">ATCH. 9</span>	832,769.	<b>11</b>	3,624,288.
	<b>12</b> Investments - other securities. See Part IV, line 11	385,599.	<b>12</b>	62,715.
	<b>13</b> Investments - program-related. See Part IV, line 11	0.	<b>13</b>	0.
	<b>14</b> Intangible assets	0.	<b>14</b>	0.
<b>15</b> Other assets. See Part IV, line 11	356,217.	<b>15</b>	363,137.	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34)	22,866,540.	<b>16</b>	17,141,240.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses	7,923,158.	<b>17</b>	6,142,660.
	<b>18</b> Grants payable	596,718.	<b>18</b>	77,998.
	<b>19</b> Deferred revenue <span style="float: right;">ATCH. 10</span>	75,000.	<b>19</b>	249,250.
	<b>20</b> Tax-exempt bond liabilities	0.	<b>20</b>	0.
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D	718,266.	<b>21</b>	1,840,674.
	<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0.	<b>22</b>	0.
	<b>23</b> Secured mortgages and notes payable to unrelated third parties	0.	<b>23</b>	0.
	<b>24</b> Unsecured notes and loans payable to unrelated third parties	0.	<b>24</b>	0.
	<b>25</b> 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	618,646.	<b>25</b>	658,416.
	<b>26 Total liabilities.</b> Add lines 17 through 25	9,931,788.	<b>26</b>	8,968,998.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets	2,381,452.	<b>27</b>	2,354,744.
	<b>28</b> Temporarily restricted net assets	9,553,300.	<b>28</b>	4,817,498.
	<b>29</b> Permanently restricted net assets	1,000,000.	<b>29</b>	1,000,000.
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds		<b>32</b>	
<b>33</b> Total net assets or fund balances	12,934,752.	<b>33</b>	8,172,242.	
<b>34</b> Total liabilities and net assets/fund balances	22,866,540.	<b>34</b>	17,141,240.	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	38,992,488.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	43,670,389.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	-4,677,901.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	12,934,752.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	31,955.
<b>6</b>	Donated services and use of facilities	<b>6</b>	0.
<b>7</b>	Investment expenses	<b>7</b>	0.
<b>8</b>	Prior period adjustments	<b>8</b>	0.
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	-116,564.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	8,172,242.

**Part XII Financial Statements and Reporting**

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

- 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 in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant? .....  
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? .....  
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:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in 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 Single Audit Act and OMB Circular A-133? .....
- 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 in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
<b>2a</b>		X
<b>2b</b>	X	
<b>2c</b>	X	
<b>3a</b>	X	
<b>3b</b>	X	

Form **990** (2015)

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**

**Open to Public Inspection**

<b>Name of the organization</b> RAINFOREST ALLIANCE, INC.	<b>Employer identification number</b> 13-3377893
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**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
<b>Total</b>						

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

Schedule A (Form 990 or 990-EZ) 2015

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.)

Section A. Public Support

Table with 7 columns: (a) 2011, (b) 2012, (c) 2013, (d) 2014, (e) 2015, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2011, (b) 2012, (c) 2013, (d) 2014, (e) 2015, (f) Total. Rows include: 7 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; 10 Other income. Do not include gain or loss from the sale of capital assets; 11 Total support. Add lines 7 through 10; 12 Gross receipts from related activities, etc. (see instructions); 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Rows include: 14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) 91.99%; 15 Public support percentage from 2014 Schedule A, Part II, line 14 92.11%; 16a 33 1/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization [X]; 16b 33 1/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization; 17a 10%-facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization; 17b 10%-facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization; 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.



Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 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.)

Section A. Public Support

Table with 7 columns: (a) 2011, (b) 2012, (c) 2013, (d) 2014, (e) 2015, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 7c Add lines 7a and 7b; 8 Public support.

Section B. Total Support

Table with 7 columns: (a) 2011, (b) 2012, (c) 2013, (d) 2014, (e) 2015, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b; 12 Other income. Do not include gain or loss from the sale of capital assets; 13 Total support; 14 First five years.

Section C. Computation of Public Support Percentage

Table with 3 columns: Description, 2015, 2014. Row 15: Public support percentage for 2015; Row 16: Public support percentage from 2014 Schedule A, Part III, line 15.

Section D. Computation of Investment Income Percentage

Table with 3 columns: Description, 2015, 2014. Row 17: Investment income percentage for 2015; Row 18: Investment income percentage from 2014 Schedule A, Part III, line 17.

19a 33 1/3% support tests - 2015. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

19b 33 1/3% support tests - 2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and 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 did not check a box on line 14, 19a, or 19b, check this box and see instructions

**Part IV Supporting Organizations**

(Complete only if you checked a box in line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
<b>b</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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.</i>		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
<b>c</b> 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)? <i>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.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) 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).</i>		
<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> 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? <i>If "Yes," provide detail in Part VI.</i>		
<b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>9a</b> 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))? <i>If "Yes," provide detail in Part VI.</i>		
<b>b</b> Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>10a</b> 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)? <i>If "Yes," answer 10b below.</i>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	<b>11 a</b>	
<b>b</b> A family member of a person described in (a) above?	<b>11 b</b>	
<b>c</b> A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>	<b>11 c</b>	

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>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 directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>	<b>1</b>	
<b>2</b> 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? <i>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.</i>	<b>2</b>	

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> 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)? <i>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).</i>	<b>1</b>	

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?	<b>1</b>	
<b>2</b> 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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>	<b>2</b>	
<b>3</b> By reason of the relationship described in (2), 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>	<b>3</b>	

**Section E. Type III Functionally-Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):			
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
<b>2</b> Activities Test. Answer (a) and (b) below.		Yes	No
<b>a</b> 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? <i>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.</i>	<b>2a</b>		
<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>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.</i>	<b>2b</b>		
<b>3</b> Parent of Supported Organizations. Answer (a) and (b) below.			
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	<b>3a</b>		
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>	<b>3b</b>		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section 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	<b>Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)	8	
Section 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):			
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e <b>Discount</b> 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 1-1/2% 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 .035	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 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	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 <b>Total annual distributions.</b> Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2015:			
a			
b			
c			
d From 2013 . . . . .			
e From 2014 . . . . .			
f <b>Total</b> of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2015 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 <b>Excess distributions carryover to 2016.</b> Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c Excess from 2013 . . . . .			
d Excess from 2014 . . . . .			
e Excess from 2015 . . . . .			

**Part VI** **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

ATTACHMENT 1

SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2011	2012	2013	2014	2015	TOTAL
OTHER INCOME	195,461.	12,954.	21,385.	4,290.		234,090.
<b>TOTALS</b>	<u>195,461.</u>	<u>12,954.</u>	<u>21,385.</u>	<u>4,290.</u>		<u>234,090.</u>

**Schedule of Contributors**

**2015**

▶ **Attach to Form 990, Form 990-EZ, or Form 990-PF.**  
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

<b>Name of the organization</b> RAINFOREST ALLIANCE, INC.	<b>Employer identification number</b> 13-3377893
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**Organization type** (check one):

**Filers of:**

**Section:**

- Form 990 or 990-EZ  501(c)(3) (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization
- Form 990-PF  501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year . . . . . ▶ \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization **RAINFOREST ALLIANCE, INC.**

Employer identification number  
13-3377893

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 6,824,405.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 803,638.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 420,160.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ 1,397,286.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5		\$ 510,068.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6		\$ 1,058,297.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization **RAINFOREST ALLIANCE, INC.**

Employer identification number  
13-3377893

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 502,343.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8		\$ 500,929.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization RAINFOREST ALLIANCE, INC.

Employer identification number

13-3377893

**Part II** Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____	\$ _____	_____

Name of organization RAINFOREST ALLIANCE, INC.

Employer identification number  
13-3377893

**Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor.** Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ► \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____ _____ _____		_____ _____ _____	
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____ _____ _____		_____ _____ _____	
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____ _____ _____		_____ _____ _____	
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____ _____ _____		_____ _____ _____	

**SCHEDULE C**  
**(Form 990 or 990-EZ)**

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2015**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

**For Organizations Exempt From Income Tax Under section 501(c) and section 527**  
 ▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**  
 ▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

**If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then**

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

**If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then**

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

**If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then**

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization RAINFOREST ALLIANCE, INC.	Employer identification number 13-3377893
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**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures . . . . . ▶ \$ \_\_\_\_\_
- 3 Volunteer hours . . . . . \_\_\_\_\_

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 . . . . . ▶ \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 . . . . . ▶ \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? . . . . .  Yes  No
- 4a Was a correction made? . . . . .  Yes  No
- b If "Yes," describe in Part IV.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities . . . . . ▶ \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities . . . . . ▶ \$ \_\_\_\_\_
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b . . . . . ▶ \$ \_\_\_\_\_
- 4 Did the filing organization file **Form 1120-POL** for this year? . . . . .  Yes  No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(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 Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2015

**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

**A** Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

**B** Check  if the filing organization checked box A and "limited control" provisions apply.

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
<b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying) . . . . .			
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . .		2,460.	
<b>c</b> Total lobbying expenditures (add lines 1a and 1b) . . . . .		2,460.	
<b>d</b> Other exempt purpose expenditures . . . . .		43,667,929.	
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) . . . . .		43,670,389.	
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.		1,000,000.	
<b>If the amount on line 1e, column (a) or (b) is:</b>		<b>The lobbying nontaxable amount is:</b>	
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.	
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f) . . . . .		250,000.	
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0- . . . . .		0.	0.
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0- . . . . .		0.	0.
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? . . . . .		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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.)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
<b>2a</b> Lobbying nontaxable amount		1,000,000.	1,000,000.	1,000,000.	3,000,000.
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					4,500,000.
<b>c</b> Total lobbying expenditures		5,741.	4,350.	2,460.	12,551.
<b>d</b> Grassroots nontaxable amount		250,000.	250,000.	250,000.	750,000.
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					1,125,000.
<b>f</b> Grassroots lobbying expenditures		2,249.	750.		2,999.

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

Table with 3 main columns: Description, (a) Yes/No, and (b) Amount. Rows include questions about lobbying activities like influencing legislation, using volunteers, media, mailings, etc.

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

Table with 3 rows of questions and 3 columns: Question, Yes, No. Questions relate to dues, lobbying expenditures, and carryover.

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

Table with 5 rows of questions and 3 columns: Question, Yes, No. Questions relate to dues, non-deductible lobbying expenditures, and carryover.

Part IV Supplemental Information

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.

Horizontal lines for providing supplemental information.

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**Part IV** Supplemental Information *(continued)*

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SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

Employer identification number

RAINFOREST ALLIANCE, INC.

13-3377893

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Revenue, Assets. Rows include: 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. 1b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included in Form 990, Part VIII, line 1, (ii) Assets included in Form 990, Part X. 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included in Form 990, Part VIII, line 1, b Assets included in Form 990, Part X.

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

Schedule D (Form 990) 2015

JSA 5E1268 1.000



Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
a Public exhibition
b Scholarly research
c Preservation for future generations
d Loan or exchange programs
e Other
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?
b If "Yes," explain the arrangement in Part XIII and complete the following table:
Table with columns: Amount, 1c Beginning balance, 1d Additions during the year, 1e Distributions during the year, 1f Ending balance
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows include: 1a Beginning of year balance, b Contributions, c Net investment earnings, gains, and losses, d Grants or scholarships, e Other expenditures for facilities and programs, f Administrative expenses, g End of year balance.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment %
b Permanent endowment 86.9800 %
c Temporarily restricted endowment 13.0200 %
The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

Table with 2 columns: Yes, No. Rows include: (i) unrelated organizations, (ii) related organizations, b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Table with 5 columns: (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows include: 1a Land, b Buildings, c Leasehold improvements, d Equipment, e Other, Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives . . . . .		
(2) Closely-held equity interests . . . . .		
(3) Other _____		
(A) _____		
(B) _____		
(C) _____		
(D) _____		
(E) _____		
(F) _____		
(G) _____		
(H) _____		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

**Part IX Other Assets.**

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

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

**Part X Other Liabilities.**

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

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2) DEFERRED RENT LIABILITY	656,316.	
(3) TENANT SECURITY DEPOSIT	2,100.	
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	658,416.	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .		<b>1</b>	40,091,860.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>	31,955.	
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>	1,183,981.	
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.) . . . . .	<b>2d</b>	-116,564.	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	1,099,372.	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	38,992,488.	
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>		
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.) . . . . .	<b>5</b>	38,992,488.	

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total expenses and losses per audited financial statements . . . . .		<b>1</b>	44,854,370.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>	1,183,981.	
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>		
<b>c</b>	Other losses . . . . .	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.) . . . . .	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	1,183,981.	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	43,670,389.	
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>		
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.) . . . . .	<b>5</b>	43,670,389.	

**Part XIII Supplemental Information.**

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SEE PAGE 5

**Part XIII** Supplemental Information (continued)

FORM 990, SCHEDULE D, PART X, LINE 2

RA IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE UNITED STATES INTERNAL REVENUE CODE AND NO PROVISION FOR SUCH INCOME TAX HAS BEEN REFLECTED IN RA'S FINANCIAL STATEMENTS. RA HAS EVALUATED UNCERTAIN TAX POSITIONS WITH RESPECT TO ITS U.S. OPERATIONS AND CONCLUDED THERE ARE NO SUCH POSITIONS AT JUNE 30, 2016 AND 2015. RA HAS OPERATIONS IN OTHER COUNTRIES AND IS SUBJECT TO THE LAWS AND REGULATIONS OF THOSE COUNTRIES. DURING THE YEARS ENDED JUNE 30, 2016 AND 2015, RA HAS PAID FOREIGN INCOME TAXES OF \$279,000 AND \$147,000, RESPECTIVELY, WHICH ARE INCLUDED IN FOREIGN TAX EXPENSE IN RA'S STATEMENT OF FUNCTIONAL EXPENSES, IN ACCORDANCE WITH REQUIRED LOCAL TAX LAWS IN VARIOUS FOREIGN JURISDICTIONS. RA DID NOT RECOGNIZE ANY TAX RELATED INTEREST OR PENALTIES DURING THE PERIOD IN QUESTION.

FORM 990, SCHEDULE D, PART IV, LINE 2B

FSC FUNDS ARE COLLECTED ON BEHALF OF THE FOREST STEWARDSHIP COUNCIL (FSC) AS PART OF THE CERTIFICATION PROCESS BY RAINFOREST ALLIANCE. THESE FUNDS ARE THEN REMITTED QUARTERLY TO FSC.

SAN FUNDS ARE COLLECTED ON BEHALF OF RED DE AGRICULTURA SOSTENIBLE, A.C. (SAN) AND THEN REMITTED BACK TO THE ORGANIZATION.

FORM 990, SCHEDULE D, PART XI, LINE 2D

A FOREIGN EXCHANGE LOSS OF \$116,564 RELATED TO CURRENCY LOSSES ON REVENUE TRANSACTIONS WAS INCLUDED AS A REDUCTION OF TOTAL REVENUE ON THE AUDIT REPORT BUT WAS INCLUDED IN PART XI LINE 9 ON FORM 990.

**Part XIII** Supplemental Information *(continued)*

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FORM 990, SCHEDULE D, PART V, LINE 4

THE KLEINHANS ENDOWMENT FUND WAS SET UP TO SUPPORT RA'S MISSION BY  
FUNDING RESEARCH AND RELATED ACTIVITIES REGARDING NON-TIMBER FOREST  
PRODUCTS.

**SCHEDULE F  
(Form 990)**

**Statement of Activities Outside the United States**

OMB No. 1545-0047

**2015**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.
- ▶ Attach to Form 990.
- ▶ Information about Schedule F (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

Employer identification number

RAINFOREST ALLIANCE, INC.

13-3377893

**Part I** **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

**1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . .  **Yes**  **No**

**2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

**3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
<b>(1)</b> CENTRAL AMERICA/CARIBBEAN	5.	58.	PROGRAM SERVICES	SEE PART V	7,064,286.
<b>(2)</b> EAST ASIA AND THE PACIFIC	1.	39.	PROGRAM SERVICES	SEE PART V	2,546,532.
<b>(3)</b> EUROPE	1.	24.	PROGRAM SERVICES	SEE PART V	3,438,701.
<b>(4)</b> NORTH AMERICA	4.	36.	PROGRAM SERVICES	SEE PART V	3,132,662.
<b>(5)</b> SOUTH AMERICA	2.	14.	PROGRAM SERVICES	SEE PART V	2,421,996.
<b>(6)</b> SOUTH ASIA			PROGRAM SERVICES	SEE PART V	296,759.
<b>(7)</b> SUB-SAHARAN AFRICA	4.	10.	PROGRAM SERVICES	SEE PART V	2,027,559.
<b>(8)</b>					
<b>(9)</b>					
<b>(10)</b>					
<b>(11)</b>					
<b>(12)</b>					
<b>(13)</b>					
<b>(14)</b>					
<b>(15)</b>					
<b>(16)</b>					
<b>(17)</b>					
<b>3a</b> Sub-total . . . . .	17.	181.			20,928,495.
<b>b</b> Total from continuation sheets to Part I . . . . .					
<b>c Totals</b> (add lines 3a and 3b)	17.	181.			20,928,495.

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

Schedule F (Form 990) 2015

**Part II** **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			CENT. AMERICA/CARIBBEAN	CONSERVATION	157,674.	EFT			
(2)			CENT. AMERICA/CARIBBEAN	CONSERVATION	179,896.	EFT			
(3)			SUB-SAHARAN AFRICA	AGRICULTURE	17,000.	EFT			
(4)			CENT. AMERICA/CARIBBEAN	CONSERVATION	7,296.	EFT			
(5)			CENT. AMERICA/CARIBBEAN	CONSERVATION	65,477.	EFT			
(6)			SOUTH AMERICA	LIVELIHOODS	116,252.	EFT			
(7)			CENT. AMERICA/CARIBBEAN	CONSERVATION	105,310.	EFT			
(8)			CENT. AMERICA/CARIBBEAN	CONSERVATION	63,247.	EFT			
(9)			CENT. AMERICA/CARIBBEAN	CONSERVATION	46,697.	EFT			
(10)			SUB-SAHARAN AFRICA	AGRICULTURE	281,502.	EFT			
(11)			SUB-SAHARAN AFRICA	FORESTRY	16,200.	EFT			
(12)			CENT. AMERICA/CARIBBEAN	CONSERVATION	755,103.	EFT			
(13)			SOUTH AMERICA	LIVELIHOODS	81,037.	EFT			
(14)			CENT. AMERICA/CARIBBEAN	CONSERVATION	40,236.	EFT			
(15)			CENT. AMERICA/CARIBBEAN	CONSERVATION	127,312.	EFT			
(16)			SOUTH ASIA	M&E	158,916.	EFT			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter. . . . . ▶ \_\_\_\_\_

3 Enter total number of other organizations or entities. . . . . ▶ \_\_\_\_\_

**Part II** Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			CENT. AMERICA/CARIBBEAN	CONSERVATION	78,231.	EFT			
(2)			CENT. AMERICA/CARIBBEAN	CONSERVATION	38,222.	EFT			
(3)			SOUTH AMERICA	AGRICULTURE	40,160.	EFT			
(4)			EAST ASIA/PACIFIC	N/A	44,655.	EFT			
(5)			NORTH AMERICA	AGRICULTURE	118,630.	EFT			
(6)			SOUTH AMERICA	AGRICULTURE	7,864.	EFT			
(7)			SUB-SAHARAN AFRICA	FORESTRY	19,122.	EFT			
(8)			SUB-SAHARAN AFRICA	M&E	38,517.	EFT			
(9)			CENT. AMERICA/CARIBBEAN	CONSERVATION	28,475.	EFT			
(10)			CENT. AMERICA/CARIBBEAN	CONSERVATION	346,762.	EFT			
(11)			CENT. AMERICA/CARIBBEAN	CONSERVATION	142,397.	EFT			
(12)			EAST ASIA/PACIFIC	AGRICULTURE	39,945.	EFT			
(13)			CENT. AMERICA/CARIBBEAN	CONSERVATION	296,531.	EFT			
(14)			CENT. AMERICA/CARIBBEAN	CONSERVATION	68,587.	EFT			
(15)			CENT. AMERICA/CARIBBEAN	CONSERVATION	333,604.	EFT			
(16)			NORTH AMERICA	N/A	7,500.	EFT			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter. . . . . ▶ \_\_\_\_\_

3 Enter total number of other organizations or entities. . . . . ▶ \_\_\_\_\_



**Part II** **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SOUTH AMERICA	N/A	6,784.	EFT			
(2)			SOUTH AMERICA	N/A	5,200.	EFT			
(3)			EAST ASIA/PACIFIC	SUSTAINABLE	58,454.	EFT			
(4)			EAST ASIA/PACIFIC	N/A	73,062.	EFT			
(5)			SUB-SAHARAN AFRICA	N/A	46,767.	EFT			
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter. . . . . **25.**

3 Enter total number of other organizations or entities. . . . . **12.**

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

**Part IV Foreign Forms**

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

**Part V Supplemental Information**

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

SCHEDULE F, PART I, 3(E)

FOR EACH OF THE REGIONS, PROGRAM ACTIVITIES INCLUDE THE FOLLOWING:

CENTRAL AMERICA/CARIBBEAN - ALL PROGRAMS OPERATED BY RA

EAST ASIA AND THE PACIFIC - RA CERT & SUSTAINABLE AGRICULTURE

EUROPE - SUSTAINABLE AGRICULTURE & MARKETS TRANSFORMATION

NORTH AMERICA - ALL PROGRAMS OPERATED BY RA

SOUTH AMERICA - RA CERT, TREES, SUSTAINABLE AGRICULTURE & CLIMATE PROGRAM

SUB-SAHARAN AFRICA - RA CERT, TREES & SUSTAINABLE AGRICULTURE SOUTH ASIA

- SUSTAINABLE AGRICULTURE

SCHEDULE F, PART I, LINE 2

PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS OUTSIDE THE U.S.

PRIOR TO THE AWARDING OF A SUBGRANT, PROSPECTIVE AWARD RECIPIENTS COMPLETE A PRE-AWARD RISK SURVEY, ALLOWING RA TO DESIGN MONITORING ACTIVITIES BASED UPON THE SUBRECIPIENT'S RISK LEVEL. THESE MONITORING ACTIVITIES AND ANY DONOR-SPECIFIC ADDITIONAL REPORTING REQUIREMENTS ARE INCORPORATED INTO SUBGRANT CONTRACTS AND/OR ARE DOCUMENTED WITHIN THE SUBGRANT FILE. SUBRECIPIENTS ARE CONTRACTUALLY OBLIGATED TO PROVIDE PERIODIC SUBSTANTIVE FINANCIAL AND NARRATIVE REPORTS FOR COST REIMBURSIBLE AWARDS. FOR FIXED OBLIGATION GRANTS, SUBRECIPIENTS ARE OBLIGATED TO SUBMIT PROJECT MILESTONES AND ASSOCIATED VERIFICATION FOR PAYMENT. PROJECT REPORTS AND ASSOCIATED BACKUP DOCUMENTATION AND CONTRACTS, INCLUDING DONOR CONTRACTS, ARE ELECTRONICALLY ARCHIVED. RA PROGRAM PERSONNEL - US-BASED AND INTERNATIONAL - ACTIVELY MAINTAIN AND

**Part V Supplemental Information**

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

MANAGE RELATIONSHIPS WITH SUBRECIPIENTS, MAKE SITE VISITS AS REQUIRED OR  
NEEDED, REVIEW FINANCIAL AND NARRATIVE REPORTS, MONITOR ADDITIONAL  
REPORTING AND OTHER AWARD/SUBRECIPIENT-SPECIFIC REQUIREMENTS, AND  
PROVIDE FEEDBACK TO SUB GRANTEES AND RA MANAGEMENT. RA'S EVALUATION  
& RESEARCH TEAM ANALYZES REPORTS AS REQUIRED/NEEDED. ALL SITE VISITS ARE  
RECORDED AND DOCUMENTED WITHIN THE SUBGRANT FILE. RELEASE OF FURTHER  
SUB-GRANT FUNDING DISTRIBUTIONS IS CONTINGENT ON RA'S ACCEPTANCE OF  
REPORTS AND OTHER VERIFICATION DOCUMENTATION, AND COMPLIANCE WITH  
ADDITIONAL REPORTING AND OTHER AWARD/SUBRECIPIENT-SPECIFIC REQUIREMENTS.  
INTERNAL AND EXTERNAL SUBGRANT COMPLIANCE IS MONITORED BY THE CONTRACTS &  
GRANTS ADMINISTRATION TEAM. THE TEAM PROVIDES SUBGRANTEE MONITORING  
TRAINING TO RA PROGRAM PERSONNEL, AND PROVIDES COMPLIANCE AND OTHER  
TRAINING TO ACTUAL SUBGRANTEES. THEY UNDERTAKE REGULAR COMPLIANCE REVIEWS  
AND REPORT FINDINGS TO PROGRAM AND RA MANAGEMENT.

**SCHEDULE G  
(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information Regarding Fundraising or Gaming Activities**

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**

**Open to Public  
Inspection**

Name of the organization

RAINFOREST ALLIANCE, INC.

Employer identification number

13-3377893

**Part I**

**Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

**1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a  Mail solicitations
- b  Internet and email solicitations
- c  Phone solicitations
- d  In-person solicitations
- e  Solicitation of non-government grants
- f  Solicitation of government grants
- g  Special fundraising events

- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  **Yes**  **No**
- b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1	ATTACHMENT 1						
2							
3							
4							
5							
6							
7							
8							
9							
10							
<b>Total</b> .....						226,141.	

**3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

AL, AK, AR, CA, CO, CT, FL, GA, HI, IL,  
 KS, KY, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND, OH,  
 OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI,

**Part II Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		GALA (event type)	(event type)	(total number)	(add col. (a) through col. (c))
Revenue	1	Gross receipts . . . . .	1,190,952.		1,190,952.
	2	Less: Contributions . . . . .	932,611.		932,611.
	3	Gross income (line 1 minus line 2) . . . . .	258,341.		258,341.
Direct Expenses	4	Cash prizes . . . . .			
	5	Noncash prizes . . . . .			
	6	Rent/facility costs . . . . .	54,082.		54,082.
	7	Food and beverages . . . . .	115,298.		115,298.
	8	Entertainment . . . . .	33,549.		33,549.
	9	Other direct expenses . . . . .	55,412.		55,412.
	10	Direct expense summary. Add lines 4 through 9 in column (d) . . . . . ▶			258,341.
	11	Net income summary. Subtract line 10 from line 3, column (d) . . . . . ▶			

**Part III Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1	Gross revenue . . . . .			
Direct Expenses	2	Cash prizes . . . . .			
	3	Noncash prizes . . . . .			
	4	Rent/facility costs . . . . .			
	5	Other direct expenses . . . . .			
	6	Volunteer labor . . . . .	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
	7	Direct expense summary. Add lines 2 through 5 in column (d) . . . . . ▶			
	8	Net gaming income summary. Subtract line 7 from line 1, column (d) . . . . . ▶			

9 Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_

a Is the organization licensed to conduct gaming activities in each of these states?  Yes  No

b If "No," explain: \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  Yes  No

b If "Yes," explain: \_\_\_\_\_

- 11 Does the organization conduct gaming activities with nonmembers?  Yes  No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No
- 13 Indicate the percentage of gaming activity conducted in:
 

a The organization's facility	<b>13a</b>	%
b An outside facility	<b>13b</b>	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ▶ \$ \_\_\_\_\_.
- c If "Yes," enter name and address of the third party:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

16 Gaming manager information:

Name ▶ \_\_\_\_\_

Gaming manager compensation ▶ \$ \_\_\_\_\_

Description of services provided ▶ \_\_\_\_\_

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ \_\_\_\_\_

**Part IV** **Supplemental Information.** Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

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990, SCHEDULE G, PART I - HIGHEST PAID FUNDRAISER

NAME AND ADDRESS OF FUNDRAISER	ACTIVITY	DID FUNDRAISER HAVE CUSTODY OR CONTROL OF CONTRIBUTIONS?		GROSS RECEIPTS FROM ACTIVITY	AMOUNT PAID TO (OR RETAINED BY) FUNDRAISER	AMOUNT PAID TO (OR RETAINED BY) ORGANIZATION
		YES	NO			
SANKY COMMUNICATIONS, INC  599 11TH AVE NEW YORK NY 10036	CONSULTING		X		226,141.	

**SCHEDULE I  
(Form 990)**

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**

OMB No. 1545-0047

**2015**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

RAINFOREST ALLIANCE, INC.

Employer identification number

13-3377893

**Part I General Information on Grants and Assistance**

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

3 Enter total number of other organizations listed in the line 1 table ▶

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

Schedule I (Form 990) (2015)

**Part III Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.  
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 AMANDA SHAY KAESER	1.	10,000.			
2					
3					
4					
5					
6					
7					

**Part IV Supplemental Information.** Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

SCHEDULE I, PART I, LINE 2

THE KLEINHANS ENDOWMENT WAS SET UP TO SUPPORT RAINFOREST ALLIANCE'S MISSION BY FUNDING RESEARCH AND RELATED ACTIVITIES REGARDING NON-TIMBER FOREST PRODUCTS. THIS FUNDING IS PERIODICALLY AWARDED TO A RESEARCH FELLOW.

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

RAINFOREST ALLIANCE, INC.

**Compensation Information**

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

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

▶ Information about Schedule J (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**

**Open to Public Inspection**

Employer identification number

13-3377893

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |  |  |
|--|--|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees   |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?

**3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- |   |   |
|---|---|
| <input type="checkbox"/> Compensation committee                         | <input type="checkbox"/> Written employment contract                                |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input type="checkbox"/> Form 990 of other organizations                | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
  - b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
  - c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
  - b** Any related organization?
- If "Yes" to line 5a or 5b, describe in Part III.

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
  - b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described on lines 5 and 6? If "Yes," describe in Part III.

**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.

**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
<b>1a</b>		
<b>1b</b>		
<b>2</b>		
<b>3</b>		
<b>4a</b>	X	
<b>4b</b>		X
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>		X
<b>8</b>		X
<b>9</b>		

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

Schedule J (Form 990) 2015

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 HORTENSE WHELAN PRESIDENT (UNTIL 9/11/2015)	(i)	262,671.	0.	92,603.	18,000.	4,954.	378,228.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2 ANA PAULA TAVARES EXECUTIVE VICE PRESIDENT	(i)	273,958.	0.	0.	13,250.	8,026.	295,234.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
3 RICHARD DONOVAN SENIOR VP/VP OF FORESTRY	(i)	173,634.	0.	0.	0.	7,336.	180,970.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
4 LISA GAUCHEY VP OF HUMAN RESOURCES	(i)	187,368.	0.	0.	18,000.	6,755.	212,123.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
5 DIANE JUKOFSKY VP, COMM., MKTG., EDUCATION	(i)	154,316.	0.	0.	15,680.	8,111.	178,107.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
6 JOSHUA TOSTESON SVP, PROGRAMS, PLANNING	(i)	187,358.	0.	0.	10,156.	6,249.	203,763.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
7 LESLIE PARK GENERAL COUNSEL & SECRETARY	(i)	220,637.	0.	0.	18,000.	7,336.	245,973.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
8 YEVGENIY KOGAN DIRECTOR, IT & KNOWLEDGE MGMT	(i)	148,737.	0.	0.	6,798.	8,584.	164,119.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
9 JON JICKLING DIRECTOR, RA CERT	(i)	125,946.	0.	0.	18,000.	6,853.	150,799.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
10 MICHELLE BUCKLES DIRECTOR, SUSTAINABLE FINANCE	(i)	127,726.	0.	0.	18,000.	7,252.	152,978.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
11 ANIKA RAHMAN VICE PRESIDENT DEVELOPMENT	(i)	167,656.	0.	0.	0.	3,039.	170,695.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

**Part III Supplemental Information**

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

## SCHEDULE J, PART III

THE ORGANIZATION'S BOARD OF DIRECTORS HAS ADOPTED A WRITTEN EXECUTIVE COMPENSATION PHILOSOPHY WHICH IT FOLLOWS WHEN IT REVIEWS AND APPROVES THE COMPENSATION AND BENEFITS OF THE ORGANIZATION'S SENIOR MANAGEMENT, INCLUDING THE PRESIDENT AND CFO. A REVIEW OF THE TOTAL COMPENSATION FOR EACH INDIVIDUAL IS MADE ON AT LEAST AN ANNUAL BASIS AND ENSURES THAT THE TOTAL COMPENSATION OF SENIOR MANAGEMENT OF THE ORGANIZATION IS REASONABLE. THE ACTIONS TAKEN BY THE EXECUTIVE COMMITTEE ENABLE THE ORGANIZATION TO RECEIVE THE REBUTTABLE PRESUMPTION OF REASONABLENESS FOR PURPOSES OF INTERNAL REVENUE CODE SECTION 4958 WITH RESPECT TO THE TOTAL COMPENSATION OF CERTAIN MEMBERS OF THE SENIOR MANAGEMENT TEAM, INCLUDING BUT NOT LIMITED TO THE PRESIDENT AND CFO. THE THREE FACTORS WHICH MUST BE SATISFIED IN ORDER TO RECEIVE THE REBUTTABLE PRESUMPTION OF REASONABLENESS ARE THE FOLLOWING: 1. THE COMPENSATION ARRANGEMENT IS APPROVED IN ADVANCE BY AN "AUTHORIZED BODY" OF THE APPLICABLE TAX-EXEMPT ORGANIZATION WHICH IS COMPOSED ENTIRELY OF INDIVIDUALS WHO DO NOT HAVE A "CONFLICT OF INTEREST" WITH RESPECT TO THE COMPENSATION ARRANGEMENT; 2. THE AUTHORIZED BODY OBTAINED AND RELIED UPON "APPROPRIATE DATA AS TO COMPARABILITY" PRIOR TO MAKING ITS DETERMINATION; AND 3. THE AUTHORIZED

**Part III Supplemental Information**

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

BODY "ADEQUATELY DOCUMENTED THE BASIS FOR ITS DETERMINATION" CONCURRENTLY WITH MAKING THAT DETERMINATION. THE MEMBERS OF THE BOARD OF DIRECTORS EACH ARE INDEPENDENT AND ARE FREE FROM ANY CONFLICTS OF INTEREST. THE COMMITTEE ADEQUATELY DOCUMENTED ITS BASIS FOR ITS DETERMINATION THROUGH THE TIMELY PREPARATION OF WRITTEN MINUTES OF THE MEETINGS DURING WHICH THE EXECUTIVE COMPENSATION AND BENEFITS WAS REVIEWED AND SUBSEQUENTLY APPROVED. THE ACTIONS OUTLINED ABOVE WITH RESPECT TO THE BOARD AND THE ESTABLISHMENT OF THE REBUTTABLE PRESUMPTION OF REASONABLENESS ONLY APPLIES TO CERTAIN SENIOR MANAGEMENT PERSONNEL, INCLUDING BUT NOT LIMITED TO THE PRESIDENT AND CFO. THE COMPENSATION AND BENEFITS OF CERTAIN OTHER INDIVIDUALS CONTAINED IN THIS FORM 990 ARE REVIEWED ANNUALLY BY THE PRESIDENT WITH ASSISTANCE FROM OTHER STAFF IN CONJUNCTION WITH THE INDIVIDUAL'S JOB PERFORMANCE DURING THE YEAR AND IS BASED UPON OTHER OBJECTIVE FACTORS DESIGNED TO ENSURE THAT REASONABLE AND FAIR MARKET VALUE COMPENSATION IS PAID BY THE ORGANIZATION. OTHER OBJECTIVE FACTORS INCLUDE SALARY DATA FOR COMPARABLE POSITIONS, PERSONNEL REVIEWS AND EVALUATIONS.

**Part III Supplemental Information**

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE J, PART I, LINE 4A

UPON VOLUNTARY RESIGNATION FROM RAINFOREST ALLIANCE, INC., TENSIE WHELAN

RECEIVED A PAYMENT OF \$92,603 WHICH RELATED TO ACCRUED SALARY BETWEEN

SEPTEMBER 12, 2015 AND DECEMBER 31, 2015.



**SCHEDULE L**  
**(Form 990 or 990-EZ)**

**Transactions With Interested Persons**

OMB No. 1545-0047

**2015**

**Open To Public Inspection**

Department of the Treasury  
Internal Revenue Service

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.**

▶ **Attach to Form 990 or Form 990-EZ.**

▶ **Information about Schedule L (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

Name of the organization

RAINFOREST ALLIANCE, INC.

Employer identification number

13-3377893

**Part I Excess Benefit Transactions** (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 . . . . . ▶ \$ \_\_\_\_\_

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization. . . . . ▶ \$ \_\_\_\_\_

**Part II Loans to and/or From Interested Persons.**

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
			(1)									
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
<b>Total</b> . . . . . ▶						\$						

**Part III Grants or Assistance Benefiting Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

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

Schedule L (Form 990 or 990-EZ) 2015

**Part IV Business Transactions Involving Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) EMILY DONOVAN	KEY EMPLOYEE - FAMILY	67,674.	EMPLOYMENT - REPORTABLE COMP		X
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

**Part V Supplemental Information**

Provide additional information for responses to questions on Schedule L (see instructions).

BUSINESS RELATIONSHIPS

RA IS A FOUNDING MEMBER OF THE RED DE AGRICULTURA SOSTENIBLE, A.C. (SAN), A MEXICO-REGISTERED ORGANIZATION WHICH FOCUSES ON SUSTAINABILITY STANDARDS. RA COLLECTS AND REMITS FUNDS ON BEHALF OF THE SAN: NIGEL SIZER CURRENTLY SERVES ON THE BOARD OF THE SAN. -TENSIE WHELAN SERVED ON THE BOARD OF SAN THROUGH THE END OF FY16. -JOSH TOSTESON SERVED ON THE BOARD OF THE SAN. -ANDRE DE FREITAS SERVED AS EXECUTIVE DIRECTOR OF SAN, WHILE EMPLOYED BY RA, THROUGH THE END OF FY16. RA AND NEPCON, A DENMARK-REGISTERED ORGANIZATION, CONTRACT WITH EACH OTHER TO PERFORM CERTAIN CERTIFICATION AND VALIDATION SERVICES: -JON JICKLING WAS A NEPCON BOARD MEMBER DURING PART OF FY16. TENSIE WHELAN SERVED ON THE FOLLOWING ADVISORY BOARDS: -UNILEVER, SUSTAINABLE SOURCING ADVISORY BOARD -NESPRESSO, SUSTAINABILITY ADVISORY BOARD RA RECEIVES REVENUE FROM UNILEVER AND NESPRESSO.

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2015**

**Open To Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

RAINFOREST ALLIANCE, INC.

Employer identification number

13-3377893

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art . . . . .				
2 Art - Historical treasures . . . . .				
3 Art - Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities - Publicly traded . . . . .	X	16.	36,700.	SELLING PRICE
10 Securities - Closely held stock . . . . .				
11 Securities - Partnership, LLC, or trust interests . . . . .				
12 Securities - Miscellaneous . . . . .				
13 Qualified conservation contribution - Historic structures . . . . .				
14 Qualified conservation contribution - Other . . . . .				
15 Real estate - Residential . . . . .				
16 Real estate - Commercial . . . . .				
17 Real estate - Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ▶ ( _____ )				
26 Other ▶ ( _____ )				
27 Other ▶ ( _____ )				
28 Other ▶ ( _____ )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . . **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? . . . . .		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .		X
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) (2015)

JSA

5E1298 1.000

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**Part II** **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

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**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

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

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

OMB No. 1545-0047

**2015**

**Open to Public  
Inspection**

Name of the organization

RAINFOREST ALLIANCE, INC.

Employer identification number

13-3377893

FORM 990, PART III, LINE 1

FOUNDED IN 1987, THE RAINFOREST ALLIANCE'S MISSION IS TO CONSERVE BIODIVERSITY AND ENSURE SUSTAINABLE LIVELIHOODS BY TRANSFORMING LAND-USE PRACTICES, BUSINESS PRACTICES, AND CONSUMER BEHAVIOR. WE ENVISION A WORLD WHERE PEOPLE CAN THRIVE AND PROSPER IN HARMONY WITH THE LAND. THE CORE OF OUR APPROACH LIES IN LEVERAGING MARKET DEMAND FOR SUSTAINABLE PRODUCTS TO CONSERVE BIODIVERSITY AND ENHANCE LOCAL LIVELIHOODS. FROM LARGE MULTINATIONAL CORPORATIONS TO SMALL, COMMUNITY-BASED COOPERATIVES, WE INVOLVE PRODUCERS, BUSINESSES AND CONSUMERS ALL ALONG THE VALUE CHAIN IN EFFORTS TO BRING RESPONSIBLY PRODUCED GOODS AND SERVICES TO A GLOBAL MARKETPLACE IN WHICH THE DEMAND FOR SUSTAINABILITY IS GROWING STEADILY. SINCE OUR FIRST EFFORTS IN CENTRAL AMERICA NEARLY 30 YEARS AGO, THE RAINFOREST ALLIANCE HAS GROWN INTO A GLOBAL INNOVATOR OF MARKET-BASED SOLUTIONS FOR CONSERVATION AND ECONOMIC DEVELOPMENT, AND WE ARE CURRENTLY WORKING IN MORE THAN APPROXIMATELY 80 COUNTRIES. THE RAINFOREST ALLIANCE IS ACTIVE IN MULTIPLE SECTORS - INCLUDING FORESTRY, AGRICULTURE, TOURISM AND CARBON/CLIMATE - PROVIDING TECHNICAL ASSISTANCE AND CERTIFICATION SERVICES TO PRODUCERS, WHILE WORKING WITH BOTH LOCAL ENTERPRISES AND DOMESTIC AND INTERNATIONAL BUYERS TO INCREASE THE COMPETITIVENESS OF SUSTAINABLE BUSINESS.

INITIATIVES:

CLIMATE, NATURE AND COMMUNITIES IN GUATEMALA (CNCG) - IN THE THIRD YEAR OF THIS CROSS-PROGRAMMATIC PROJECT, THE RAINFOREST ALLIANCE CONTINUES TO

Name of the organization

RAINFOREST ALLIANCE, INC.

Employer identification number

13-3377893

BUILD ON ITS LONG TRACK RECORD OF ACHIEVEMENT IN GUATEMALA, COLLABORATING WITH SMALL-AND MEDIUM-SIZED FORESTRY ENTERPRISES AND OTHER NGOS TO HELP HALT THE COUNTRY'S DEFORESTATION CRISIS. WITH FUNDING FROM USAID, CNCG HAS ACHIEVED MANY OF ITS PROJECT OBJECTIVES, INCLUDING INCREASING SALES IN PRODUCTION FORESTRY VALUE CHAINS BY \$13.38 MILLION USD; FACILITATING \$66 MILLION USD WORTH OF SALES OF TIMBER AND NON-TIMBER FOREST PRODUCTS BY SMALL- AND MEDIUM-SIZED FORESTRY ENTERPRISES; AND PROMOTING THE SUSTAINABLE MANAGEMENT OF 476,415 HECTARES (HA) OF LAND. ADDITIONALLY, CNCG ASSISTED SMALL- TO MEDIUM- SIZED FORESTRY ENTERPRISES IN OBTAINING \$1.6 MILLION IN BANK LOANS, SUBSTANTIALLY EXCEEDING TARGETS.

OVER THE PAST YEAR, THE PROJECT HAS BEEN PIVOTAL IN FORGING A PARTNERSHIP BETWEEN CHIQUITA BANANA AND A GROUP OF INDIGENOUS MAYA SMALLHOLDER COOPERATIVES (FEDECOVERA) IN GUATEMALA'S VERAPACES REGION. AS A RESULT, CHIQUITA IS NOW SOURCING CERTIFIED PINEWOOD PALLETS THAT ARE GROWN, HARVESTED, AND PROCESSED BY FEDECOVERA. THIS DEAL IS IMPORTANT NOT ONLY FOR THIS PARTICULAR GROUP OF COOPERATIVES, BUT ALSO BECAUSE IT PROVES THAT SMALLHOLDER FORESTRY OPERATIONS CAN MEET THE DEMAND OF GLOBAL BRANDS LIKE CHIQUITA.

CLAIMS, TRACEABILITY & TRADEMARKS (CTT)

IN COLLABORATION WITH THE SUSTAINABLE AGRICULTURE NETWORK (SAN), CTT ROLLED OUT A NEW CHAIN-OF-CUSTODY (COC) POLICY ON OCTOBER 1, 2015. TO PARTICIPATE IN THE RAINFOREST ALLIANCE CERTIFICATION SCHEME, ALL COMPANIES (EXCEPT PRODUCERS) WERE REQUIRED TO FILE AN APPLICATION. BY THE

Name of the organization RAINFOREST ALLIANCE, INC.	Employer identification number 13-3377893
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END OF THE FISCAL YEAR, CTT HAD RECEIVED MORE THAN 1,500 APPLICATIONS, A 300% INCREASE IN THE NUMBER OF COMPANIES IN COMPLIANCE WITH OUR COC POLICY FOR TRACKING CERTIFIED PRODUCT THROUGH THE SUPPLY CHAIN.

#### EVALUATION & RESEARCH (E&R)

E&R RELEASED THE FIRST SAN/RAINFOREST ALLIANCE IMPACTS REPORT. THE REPORT SUMMARIZES THE EFFECTS OF SAN/RAINFOREST ALLIANCE FARMER TRAINING AND CERTIFICATION THROUGH A REVIEW OF NEARLY TWO-DOZEN SCIENTIFIC STUDIES AND AUDIT DATA FROM OVER 200 CERTIFIED FARMS AND FARMER GROUPS. FURTHERMORE, E&R AND THE SAN COLLECTIVELY AGREED ON A CONCRETE SET OF ACTIONS FOR FY17 TO ADVANCE SYSTEMS AND PROCESSES THAT WILL VASTLY IMPROVE SYSTEM-WIDE MONITORING, EVALUATION, AND ASSURANCE OVER THE LONG TERM. OTHER NOTABLE FY16 ACHIEVEMENTS INCLUDE THE FOLLOWING: AS PART OF THE SCHERMAN FOUNDATION PROJECT IN RWANDA, PRELIMINARY WATER-QUALITY MEASUREMENTS HAVE CONFIRMED THAT THE SAN/RA CERTIFICATION SYSTEM IS IMPROVING WATER QUALITY THERE.

#### COMMUNICATIONS

COMMUNICATIONS HELPED THE RAINFOREST ALLIANCE'S FORESTRY TEAM PUBLISH TEN COMMUNITY-FORESTRY CASE STUDIES, AS WELL AS EDITING AND PRODUCING THE SAN IMPACTS REPORT, AND DEVELOPING MESSAGING AND CONTENT TO SUPPORT THE UPCOMING PUBLICATION AND ROLLOUT OF THE 2017 SAN STANDARD.

FORM 990, PART V, LINE 4B

THE ORGANIZATION HAD SIGNATURE AUTHORITY OVER BANK ACCOUNTS IN THE FOLLOWING COUNTRIES:

Name of the organization RAINFOREST ALLIANCE, INC.	Employer identification number 13-3377893
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BOLIVIA, CANADA, CAMEROON, COSTA RICA, ECUADOR, GHANA, GUATEMALA,  
INDONESIA, KENYA, MEXICO, NICARAGUA, PERU, UNITED KINGDOM.

FORM 990, PART VI, SECTION A, LINE 1A

THE RAINFOREST ALLIANCE HAS AN EXECUTIVE COMMITTEE CONSISTING OF SEVEN DIRECTORS OF THE BOARD OF DIRECTORS (THE "BOARD"). PURSUANT TO THE BYLAWS, THE CHAIR OF THE BOARD SERVES AS THE CHAIR OF THE EXECUTIVE COMMITTEE. DURING THE TIME BETWEEN BOARD MEETINGS, THE EXECUTIVE COMMITTEE CAN EXERCISE ALL POWERS OF THE BOARD THAT MAY BE DELEGATED IN CONNECTION WITH THE MANAGEMENT OF THE BUSINESS AFFAIRS AND PROPERTY OF RAINFOREST ALLIANCE, EXCEPT AS RESTRICTED BY LAW OR THE CERTIFICATE OF INCORPORATION. THE EXECUTIVE COMMITTEE MEETS AT THE DISCRETION OF THE CHAIR OF THE BOARD AND REPORTS ALL ACTIONS TO THE BOARD.

FORM 990, PART VI, SECTION B, LINE 11B

THE CFO INITIALLY REVIEWS THE ORGANIZATION'S DRAFT FORM 990. THE GENERAL COUNSEL REVIEWS THE DRAFT 990 WITH RESPECT TO ANY QUESTIONS INVOLVING LEGAL MATTERS. THE DRAFT FORM 990 IS DISTRIBUTED TO EACH OF THE ORGANIZATION'S OFFICERS AND DIRECTORS IN ADVANCE OF FILING. EACH OFFICER AND DIRECTOR IS ASKED TO REVIEW THE DRAFT FORM 990 AND RAISE ANY QUESTIONS OR COMMENTS. THE CFO OVERSEES ANY REVISIONS BEFORE THE FINAL FORM 990 IS FILED.

FORM 990, PART VI, SECTION B, LINE 12C

A COPY OF OUR CONFLICT OF INTEREST POLICY, ALONG WITH A CONFLICT OF



Name of the organization RAINFOREST ALLIANCE, INC.	Employer identification number 13-3377893
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INTEREST DISCLOSURE STATEMENT, IS FURNISHED TO EACH DIRECTOR, OFFICER AND STAFF MEMBER OF THE RAINFOREST ALLIANCE UPON UNDERTAKING THE DUTIES OF SUCH OFFICE, AND ANNUALLY THEREAFTER FOR THE TERM OF SUCH PERSON'S SERVICE TO THE ORGANIZATION. ANY DISCLOSURES ARE REVIEWED BY AN INTERNAL COMMITTEE MADE UP OF THE PRESIDENT, CFO AND THE GENERAL COUNSEL, AND ARE REPORTED ON A QUARTERLY BASIS TO THE AUDIT AND RISK COMMITTEE. THE AUDIT AND RISK COMMITTEE HAS AMONG ITS RESPONSIBILITIES THE DUTY OF REVIEWING AND MAKING DETERMINATIONS WITH RESPECT TO ALL TRANSACTIONS, AGREEMENTS, OR ARRANGEMENTS INVOLVING DIRECTORS, OFFICERS, AND KEY EMPLOYEES. IN ADDITION, A DETAILED FORM 990 DISCLOSURE STATEMENT IS DISTRIBUTED ANNUALLY TO MEMBERS OF THE COMMITTEE THAT AWARDS KLEINHANS FELLOWSHIPS AND THE RAINFOREST ALLIANCE'S DIRECTORS, OFFICERS AND KEY EMPLOYEES. IT REQUESTS DISCLOSURES THAT ARE REQUIRED TO BE REPORTED ON FORM 990 ABOUT ANY TRANSACTIONS BETWEEN THE ORGANIZATION AND THOSE WHO SERVE IT IN VARIOUS VOLUNTEER AND PAID CAPACITIES, AND ABOUT ANY TRANSACTIONS AMONG THOSE PERSONS.

FORM 990, PART VI, SECTION B, LINE 15A & 15B

THE ORGANIZATION HAS DEVELOPED SALARY ADMINISTRATION GUIDELINES (THE "GUIDELINES") THAT APPLY IN SETTING THE COMPENSATION OF ALL OF ITS EMPLOYEES, INCLUDING ITS PRESIDENT, OFFICERS, AND KEY EMPLOYEES. UNDER THE GUIDELINES, THE ORGANIZATION UTILIZES SEVERAL SALARY SURVEYS WITH SIMILARLY SIZED, INTERNATIONAL NON-PROFIT ORGANIZATIONS TO ENSURE THAT ITS SALARIES ARE WITHIN THE RANGE OF THOSE OF COMPARABLE ORGANIZATIONS. GENERALLY, THE MIDPOINT OF THE ORGANIZATION'S SALARY RANGES FALLS WITHIN THE SALARY RANGE AVERAGES OF COMPARABLE NON-PROFIT ORGANIZATIONS.

Name of the organization RAINFOREST ALLIANCE, INC.	Employer identification number 13-3377893
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PERFORMANCE REVIEWS ARE THEN USED TO ESTABLISH AN INDIVIDUAL EMPLOYEE'S COMPENSATION WITHIN THE RANGE SET BY COMPARABILITY DATA. THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS APPROVES MODIFICATION OF COMPENSATION THAT EXTENDS TO SUBSTANTIALLY ALL EMPLOYEES. THE GUIDELINES ALSO REQUIRE THE EXECUTIVE COMMITTEE TO REVIEW AND APPROVE SEPARATELY THE COMPENSATION OF THE PRESIDENT AND CFO, UNLESS SUCH INDIVIDUALS RECEIVE A MODIFICATION OF COMPENSATION THAT EXTENDS TO SUBSTANTIALLY ALL EMPLOYEES. TO ENSURE RA PAY SCALES ARE CONSISTENT, FAIR AND COMPETITIVE, RA REGULARLY ENGAGES THE MERCER GROUP TO CONDUCT A GLOBAL REVIEW OF ITS DOMESTIC AND INTERNATIONAL PAY SCALES. THE MOST RECENT REVIEW WAS COMPLETED IN 2014, WITH THE NEXT REVIEW EXPECTED TO OCCUR IN THE NEXT FISCAL YEAR.

FORM 990, PART VI, SECTION C, LINE 19

THE ORGANIZATION'S GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON WRITTEN REQUEST TO MANAGEMENT. IN ADDITION, THE ORGANIZATION'S AUDITED FINANCIAL STATEMENTS, 990S, CONFLICT OF INTEREST AND WHISTLEBLOWER POLICIES, AND SUMMARIES OF ALL OF ITS POLICIES AND PROCEDURES TO ENSURE INDEPENDENCE, ARE AVAILABLE ON ITS WEBSITE.

FORM 990, PART IX, LINE 9

FUNCTIONAL EXPENSES - OTHER EMPLOYEE BENEFITS - THERE ARE CERTAIN COUNTRIES IN WHICH RAINFOREST ALLIANCE OPERATES THAT MANDATE EMPLOYER CONTRIBUTIONS FOR PENSION BENEFITS AND FOR THE COST OF THE HEALTH CARE FOR EMPLOYEES THAT ARE CITIZENS OF THAT COUNTRY. THESE ARE PAID AS PART OF THE EMPLOYER TAXES AND CONTRIBUTIONS. GIVEN THAT THE AMOUNTS ARE PAID AS PART OF PAYROLL TAXES, BUT REPRESENTS BENEFITS TO THE EMPLOYEES, RA

Name of the organization RAINFOREST ALLIANCE, INC.	Employer identification number 13-3377893
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HAS INCLUDED THESE AS EXPENSES AS OTHER EMPLOYEE BENEFITS IN THE STATEMENT OF FUNCTIONAL EXPENSES.

FORM 990, PART XI, LINE 9

OTHER CHANGES IN NET ASSETS - THE ORGANIZATION OPERATES IN SEVERAL COUNTRIES AND INCURS FOREIGN TRANSLATION GAINS/LOSSES. INCLUDED IN LINE 9 IS \$116,564 OF FOREIGN TRANSACTION LOSSES.

FORM 8858

FOREIGN DISREGARDED ENTITIES - THE ORGANIZATION FILED A FORM 8832 FOR DISREGARDED ENTITY STATUS WITH RESPECT TO ALL ITS FOREIGN SUBSIDIARIES. THE INTERNAL REVENUE SERVICE HAS APPROVED THE ELECTION FOR TREATMENT OF DISREGARDED ENTITY STATUS ON THE FOLLOWING ENTITIES: RAINFOREST ALLIANCE LTD (UK) - EIN # 98-1051166 RAINFOREST ALLIANCE TRADING LTD (UK) - EIN # 98-1069583 RAINFOREST ALLIANCE (GHANA) - EIN # - 98-1051463 FOUNDATION RAINFOREST ALLIANCE (SPAIN) - EIN # 98-1051394. THE ORGANIZATION HAS NOT RECEIVE A DETERMINATION WITH RESPECT TO THE REMAINING FOREIGN SUBSIDIARIES. THE ORGANIZATION WILL CONTINUE TO TREAT THEM AS FOREIGN DISREGARDED ENTITIES WITHIN FORM 990, INCLUDING THE FILING OF FORM 8858 FOR EACH ONE.

FORM 990, PART III, LINE 4A

RA-CERT HAS CERTIFIED NEARLY 5,000 ACRES (2,004 HA) OF BANANA FARMS IN BELIZE, A PARTICULARLY SIGNIFICANT ACHIEVEMENT BECAUSE THE PLANTATIONS IN QUESTION ARE LOCATED IN A PART OF THE COUNTRY WHERE THE NATURAL ECOSYSTEMS ARE HEAVILY THREATENED DUE TO LAND PRESSURES. THE

Name of the organization RAINFOREST ALLIANCE, INC.	Employer identification number 13-3377893
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CERTIFICATION AREA FOR MELON AND WATERMELON ALSO GREW BY 1,483 ACRES (600 HA) IN THE FIRST QUARTER OF THE FISCAL YEAR.

IN COLOMBIA, OUR WORK WITH A LOCAL NGO (THE FOUNDATION) IS HELPING US TO ADVANCE SUSTAINABLE TOURISM IN THE COUNTRY, INCLUDING CONDUCTING OUR FIRST TOURISM TRAINING THERE. RA-CERT EXPANDED ITS WORK IN AFRICA.

FORM 990, PART III, LINE 4B

THE RAINFOREST ALLIANCE HAS PIONEERED SUSTAINABLE FORESTRY ON A GLOBAL SCALE THROUGH THE PROMOTION AND IMPLEMENTATION OF SUSTAINABLE MANAGEMENT PRACTICES. THESE ACTIVITIES HAVE HELPED TO MAKE WORKING FORESTS SUSTAINABLE, AND TO SUSTAIN AND ENHANCE THE LIVELIHOODS THAT ARE DERIVED FROM THEM. OUR TREES SUSTAINABLE FORESTRY PROGRAM WORKS WITH FOREST COMMUNITIES AND SMALL- AND MEDIUM-SIZED ENTERPRISES (SMES) TO HELP THEM HARVEST AND PRODUCE FOREST PRODUCTS IN A SUSTAINABLE WAY, AND SELL THOSE GOODS TO CONSCIENTIOUS CONSUMERS IN THE GLOBAL MARKETPLACE. AS THE PROGRAM NAME INDICATES, WE DO THIS BY FOCUSING ON (TR)AINING, (E)XTENSION, (E)NTERPRISES AND (S)OURCING ACTIVITIES (TREES).

IN THE PAST YEAR, TREES SUCCESSFULLY CLOSED OUT OUR FLAGSHIP EFFORT IN SUPPORT OF COMMUNITY FORESTRY IN LATIN AMERICA- A COMPLEX AND FAR-REACHING PROJECT THAT WAS FUNDED BY THE MULTILATERAL INVESTMENT FUND/INTER-AMERICAN DEVELOPMENT BANK. THE PROJECT ENGAGED MORE THAN 100 SMES IN MEXICO, GUATEMALA, HONDURAS, NICARAGUA AND PERU, AND RESULTED IN THE PUBLICATION OF 10 IMPORTANT CASE STUDIES-BOTH IN ENGLISH AND SPANISH-THAT EXAMINED VARIOUS FACETS OF COMMUNITY FORESTRY IN THE REGION.

Name of the organization RAINFOREST ALLIANCE, INC.	Employer identification number 13-3377893
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IN PARTICULAR, THE REPORTS LOOKED AT FOREST CONSERVATION THROUGH CERTIFICATION, MARKET DEVELOPMENT, AND THE STRENGTHENING OF SMALL- AND MEDIUM-SIZED FOREST ENTERPRISES. THE CASE STUDIES BUTTRESS OUR COMMUNITY FORESTRY MODEL, WHICH AIMS TO EMPOWER LOCAL COMMUNITIES TO MANAGE THEIR FORESTS FOR SUSTAINABILITY AND PROFITABILITY.

OTHER NOTABLE FY16 ACHIEVEMENTS INCLUDE THE FOLLOWING:

THE AVERY DENNISON SUSTAINABLE FORESTRY PROJECT IN HONDURAS CREATED NEARLY 200 JOBS AND GENERATED MORE THAN \$149,000 USD IN SALES FROM THE PRODUCTION OF GUITAR NECKS FOR NORTH AMERICA WOOD PRODUCTS, A US-BASED COMPANY.

OUR TREES PROGRAM WORKED HAND IN HAND WITH EJIDO CAOBA, A FORESTRY COOPERATIVE IN THE MEXICAN STATE OF QUINTANA ROO, TO HELP ITS MEMBERS NEGOTIATE AND COMPLETE THEIR FIRST DIRECT SALE OF CERTIFIED WOOD TO EUROPE. A SHIPMENT OF MAHOGANY WAS SOLD TO A SPANISH COMPANY THAT FABRICATES PARTS FOR HIGH-QUALITY MUSICAL INSTRUMENTS, AND WE SUPPORTED THIS SALE BY PROVIDING CAOBA DAY-TO-DAY ADVICE AND THE SERVICES OF A CONSULTANT TO ENSURE THAT THE EJIDO'S CERTIFIED MAHOGANY WAS MILLED ACCORDING TO THE COMPANY'S SPECIFICATIONS. THE DEAL PROVIDES A NEW MODEL FOR BUILDING AN ECONOMICALLY ROBUST FOREST ECONOMY IN A REGION THAT HAS SEEN A WORRISOME DECLINE IN INCOME OVER THE LAST DECADE. AT THE VERY END OF THE FISCAL YEAR, WE ALSO HELPED CAOBA REACH A SIMILAR DEAL WITH AN AMERICAN COMPANY THAT WILL EARN THE CO-OP 2.5 TO 4.2 TIMES MORE FOR ITS CERTIFIED MAHOGANY THAN WHAT IT WOULD HAVE RECEIVED IF IT HAD BEEN SOLD LOCALLY.

Name of the organization RAINFOREST ALLIANCE, INC.	Employer identification number 13-3377893
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FORM 990, PART III, LINE 4C

ARCOS DORADOS, THE COMPANY THAT OWNS AND OPERATES 2,021 MCDONALD'S RESTAURANTS IN LATIN AMERICA, HAS AGREED TO USE ITS ALREADY SUCCESSFUL RAINFOREST ALLIANCE CERTIFIED COFFEE PROGRAM IN BRAZIL AS A MODEL, AND REPLICATE IT IN COLOMBIA, COSTA RICA, ECUADOR, MEXICO, PANAMA, PERU, PUERTO RICO, AND VENEZUELA-SOURCING 100% OF ITS COFFEE FROM RAINFOREST ALLIANCE CERTIFIED FARMS.

OTHER NOTABLE FY16 ACHIEVEMENTS INCLUDE THE FOLLOWING:

THE FIRST LABELED 100% RAINFOREST ALLIANCE CERTIFIED BEEF PRODUCT-BY THE DUTCH FIRM ZANDBERGEN WORLD'S FINEST MEAT-WAS LAUNCHED IN COLOGNE AT ANUGA, EUROPE'S LARGEST TRADE FAIR.

RAINFOREST ALLIANCE CERTIFIED HAMBURGERS BECAME AVAILABLE IN THE WEB SHOP OF THE NETHERLAND'S LARGEST RETAILER, ALBERT HEIJN, AS WELL AS IN ONE OF THE COMPANY'S STORES.

KROGER AGREED TO SOURCE CERTIFIED ROSES FOR THE KENTUCKY DERBY GARLAND.

EDEKA GERMAN RETAIL LAUNCHED 100% RAINFOREST ALLIANCE CERTIFIED ORANGE JUICE, A FIRST FOR THE RAINFOREST ALLIANCE.

LIDL INTRODUCED ITS OWN BRAND OF RAINFOREST ALLIANCE CERTIFIED ORANGE JUICE IN DECEMBER.

RAINFOREST ALLIANCE CERTIFIED BANANAS ARE NOW AVAILABLE IN THREE ADDITIONAL DUTCH SUPERMARKETS: DEKAMARKT, DIRK VAN DEN BROEK, AND SUPERUNIE.

WE FINALIZED DANONE'S 2020 SUSTAINABLE-FRUIT STRATEGY.

ROYAL CUP AGREED TO ROAST A 100% RAINFOREST ALLIANCE CERTIFIED COFFEE

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BLEND FOR THE RITZ-CARLTON.

DUTCH RAILWAYS NOW HAS 100% CERTIFIED COFFEE IN BOOTHS IN ALL RAILWAY STATIONS.

ZOEGAS, NESTLÉ'S ROAST AND GROUND COFFEE BRAND, WILL GO RAINFOREST ALLIANCE CERTIFIED ON ALL OF THEIR PRODUCTS IN THE NORDICS.

RICKY'S, A CANADIAN RESTAURANT CHAIN, HAS DECIDED TO SWITCH TO RAINFOREST ALLIANCE CERTIFIED COFFEE IN ALL 75 OF ITS LOCATIONS.

TIFFANY & CO. SIGNED ON FOR A GRANT FOR A SMART SOURCE WOOD-PRODUCT PROJECT.

WE COLLABORATED WITH PATAGONIA TO HELP THE COMPANY SOURCE CERTIFIED NATURAL RUBBER FOR USE IN ITS WETSUITS.

FORM 990, PART III, LINE 4D

4D LINE 1 - SUSTAINABLE AGRICULTURE

THE SUSTAINABLE AGRICULTURE PROGRAM IS THE LEADING MODEL FOR THE EFFECTIVE IMPLEMENTATION OF SOCIAL AND ENVIRONMENTAL BEST MANAGEMENT PRACTICES ON FARMS. OUR GOAL IS TO PROMOTE SUSTAINABLE AGRICULTURE WORLDWIDE THROUGH AN INTERNATIONALLY CREDIBLE, PROACTIVE, AND RESPONSIVE CERTIFICATION SYSTEM THAT REMAINS ACCESSIBLE TO BOTH LARGE AGRIBUSINESSES AND SMALL FARMERS ALIKE.

THE SAN STANDARD FOR SUSTAINABLE AGRICULTURE, WHICH FORMS THE BASIS OF RAINFOREST ALLIANCE CERTIFICATION, IS UPDATED PERIODICALLY TO ENSURE THAT IT KEEPS UP WITH THE LATEST SCIENTIFIC FINDINGS, FARMING PRACTICES, AND TECHNOLOGICAL ADVANCES. TO UPDATE THE STANDARD, THE SAN AND THE

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RAINFOREST ALLIANCE UNDERTAKE AN EXHAUSTIVE PROCESS THAT INVOLVES SEVERAL ROUNDS OF PUBLIC CONSULTATION AND FIELD-TESTING, AS WELL AS INPUT FROM HUNDREDS OF STAKEHOLDERS AROUND THE WORLD. IN MARCH 2016, THE SAN GENERAL ASSEMBLY APPROVED THE 2017 SAN STANDARD, WHICH WILL BE ROLLED OUT IN FY17 VIA A TRAINING PROGRAM THAT'S DESIGNED TO INFORM THE ONE-MILLION-PLUS FARMERS IN OUR NETWORK ABOUT THE REVISIONS.

OTHER NOTABLE FY16 ACHIEVEMENTS INCLUDE THE FOLLOWING:

OUR WORK IN PALM OIL CONTINUES TO EXPAND: A NEW CONSORTIUM KNOWN AS CORE-WHICH WAS FOUNDED OUT OF THE UNILEVER/PROFOREST PROJECT ON PALM OIL INDONESIA-PROVIDES THE RAINFOREST ALLIANCE WITH A CHANCE TO TURN PALM AND OTHER COMMODITIES AWAY FROM DESTRUCTIVE ACTIVITY. WE SUPPORTED AND FACILITATED THE ROUNDTABLE ON SUSTAINABLE PALM OIL'S (RSPO) APPROVAL OF A HIGH CONSERVATION VALUE APPROACH IN ITS PRINCIPLES AND CRITERIA, AND THE PRESENTATION OF OUR PALM STRATEGY DURING A REGIONAL RSPO MEETING IN COSTA RICA HAS GENERATED NEW INTEREST IN PALM (AND COFFEE) CERTIFICATION AMONG AREA FARMERS.

SEVERAL SMALLHOLDER GROUPS AND ESTATES THAT WERE TRAINED UNDER THE UNILEVER TEA "GLOBAL ORIGINS" PROJECT" ACHIEVED RAINFOREST ALLIANCE CERTIFICATION. ONE PARTICULARLY NOTEWORTHY EXAMPLE IS KALIBOJA, THE FIRST GROUP OF INDONESIAN TEA SMALLHOLDERS TO EARN A CERTIFICATE.

UNDER AN AGREEMENT WITH TEA COMPANY TEEKANNE, WE WORKED WITH HERBAL TEA SUPPLIERS ACROSS ALBANIA, CHILE, CHINA, NIGERIA, SENEGAL, TURKEY, AND THE US. THESE ACTIVITIES EXPANDED THE REACH OF OUR WORK BY TAKING US INTO VERY DRY ENVIRONMENTS, WHICH REQUIRE US TO REINFORCE THE SOIL-MANAGEMENT



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ASPECTS OF OUR TRAINING, AND MAKE SURE THAT PRODUCERS HAVE THE KNOWLEDGE AND TOOLS THEY NEED TO IMPROVE SOIL FERTILITY, STRUCTURE, AND MOISTURE. OUR PRESENCE IN WEST AFRICA HAS BEEN STRENGTHENED THROUGH OUR PARTICIPATION IN VARIOUS GEF/UNEP COCOA-RELATED FORA IN CÔTE D'IVOIRE, GHANA, AND NIGERIA. WE HAVE ALSO BEEN IMPLEMENTING A CLIMATE-SMART AGRICULTURE PROJECT IN GHANA WITH GREAT SUCCESS.

AS PART OF THE \$8.5-MILLION THREE-YEAR MILLENNIUM CHALLENGE ACCOUNT (MCA) COCOA REVOLUTION PROJECT IN INDONESIA, WE CARRIED OUT A HUGELY SUCCESSFUL LANDSCAPE-LIFESCAPE ASSESSMENT. THE RESULTS HAVE LED TO INNOVATIONS THAT WILL PROVIDE IMPORTANT INSIGHTS ON THE ECONOMIC SYSTEMS OF COCOA PRODUCERS AND THEIR RELIANCE ON THE NATURAL LANDSCAPE, AS WELL AS INCREASING THE INCLUSION OF WOMEN AND THE POOR IN THESE INITIATIVES. IT HAS BECOME A MODEL TO BE REPLICATED IN NEW PROJECTS AND PROPOSALS.

#### 4D LINE 2 - COMMUNICATIONS AND EDUCATION PROGRAM

THE RAINFOREST ALLIANCE'S EDUCATION PROGRAM WORKS TO PREPARE THE NEXT GENERATION TO BE GOOD GLOBAL CITIZENS AND STEWARDS OF THE PLANET. WE DEVELOP INNOVATIVE LEARNING MATERIALS AND PROVIDE PROFESSIONAL DEVELOPMENT TO HELP TEACHER LEADERS IMPLEMENT OUR ENVIRONMENTAL EDUCATION CURRICULA AT LOCAL SCHOOLS AROUND THE WORLD.

#### FY16 HIGHLIGHTS INCLUDE:

DURING THE 2015-2016 SCHOOL YEAR, THE RAINFOREST ALLIANCE'S EDUCATION PROGRAM ENGAGED MORE THAN 125 TEACHERS AND 1,900 STUDENTS IN THE UNITED

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STATES, GUATEMALA, AND MEXICO.

THE RAINFOREST ALLIANCE'S LEARNING SITE RECEIVED 3.69 MILLION PAGE VIEWS DURING FY16, BRINGING OUR LIFETIME TOTAL TO 28.3 MILLION VIEWS.

WE SHARED OUR CLIMATE EDUCATOR GUIDE WITH TEACHERS IN COMMUNITIES IN CHIAPAS AND OAXACA, MEXICO, WHERE WE CONDUCTED ON-SITE TRAININGS ABOUT THE IMPORTANT ROLE THAT THEIR COMMUNITY AND LOCAL FORESTS PLAY IN CLIMATE CHANGE.

WE WORKED WITH YOUNG PEOPLE WHO LIVE IN FOREST COMMUNITIES IN CALAKMUL, MEXICO, TO BUILD CAPACITY AND LEADERSHIP SKILLS.

4D LINE 3 - CLIMATE PROGRAM

THE RAINFOREST ALLIANCE CONTINUES TO BE A GLOBAL THOUGHT LEADER AND CHANGE-MAKER ON THE ISSUE OF CLIMATE CHANGE AND THE WAYS THAT IT IS LINKED TO DEFORESTATION AND OTHER UNSUSTAINABLE LAND-USE PRACTICES. WE WORK WITH RURAL COMMUNITIES, BUSINESSES, AND GOVERNMENTS AROUND THE WORLD TO ADVANCE CLIMATE-SMART LAND MANAGEMENT AND SUSTAINABLE ECONOMIC DEVELOPMENT THROUGH TRAINING, CARBON PROJECT VALIDATION/VERIFICATION, AND PARTICIPATION IN INTERNATIONAL CLIMATE FRAMEWORKS LIKE REDD+. OUR AIM IS TO HELP INDIVIDUALS, COMMUNITIES, AND BUSINESSES REDUCE GREENHOUSE-GAS EMISSIONS, ADAPT TO THE CLIMATE IMPACTS THAT ARE ALREADY BEING FELT, AND FOSTER CLIMATE-SMART ECONOMIC DEVELOPMENT IN FOREST COMMUNITIES AROUND THE WORLD.

A FEW HIGHLIGHTS FROM FY16:

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THE RAINFOREST ALLIANCE HOSTED AND/OR PRESENTED AT 10 EVENTS AT THE UNFCCC'S COP 21 (THE HISTORIC GLOBAL CLIMATE-CHANGE CONFERENCE HELD IN PARIS IN LATE 2015), IN PARTNERSHIP WITH MORE THAN 30 ORGANIZATIONS. OUR INVOLVEMENT IN COP21 SHOWCASED OUR DECADES OF EXPERIENCE IN THE LAND-USE SECTOR, AND FOCUSED ON THE IMPORTANCE OF ENGAGING BUSINESSES, COMMUNITIES, AND GOVERNMENTS TO PROMOTE SUSTAINABLE LAND MANAGEMENT, CLIMATE-SMART AGRICULTURE, AND LANDSCAPE APPROACHES TO REDUCE DEFORESTATION. AMONG THE EVENTS WAS A PANEL THAT LOOKED AT OUR GUATECARBON REDD+ PROJECT IN GUATEMALA'S MAYA BIOSPHERE RESERVE AS AN EXAMPLE OF HOW PARTNERSHIPS CAN STRENGTHEN BIODIVERSITY CONSERVATION, AND HOW THE MODEL OF COMMUNITY-BASED FOREST CONCESSIONS ON GOVERNMENT LAND COULD WORK IN OTHER COUNTRIES. WE ALSO SUPPORTED THE UN GLOBAL COMPACT'S "CARING FOR CLIMATE" PROGRAM, SERVING AS THE TECHNICAL EDITOR FOR A PUBLICATION OF CASE STUDIES ON BUSINESS ADAPTATION.

THROUGH THE M-REDD+ PROJECT IN MEXICO, THE RAINFOREST ALLIANCE ADVANCED PARTNERSHIPS WITH THE CHIHUAHUA AND OAXACA GOVERNMENTS, HELPING THEM WITH THEIR STATE-LEVEL REDD+ STRATEGIES. SOME KEY OUTPUTS FROM OUR LEARNING COMMUNITIES INCLUDE STRATEGIC DOCUMENTS THAT WILL ASSIST IN IMPLEMENTATION OF THESE STRATEGIC PLANS. THE M-REDD+ PROJECT HAS ALSO BEEN DEVELOPING A SUITE OF TOOLS AND CAPACITY-BUILDING APPROACHES ON LOW-EMISSIONS LAND MANAGEMENT AND STAKEHOLDER COORDINATION.

FORM 990, PART III, LINE 4D

4D LINE 5 - SUSTAINABLE FINANCE

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SMALL- AND MEDIUM-SCALE FARMS AND FORESTRY ENTERPRISES TYPICALLY NEED LOANS IN ORDER TO MAKE THE RENOVATIONS OR IMPROVEMENTS NECESSARY TO MEET THE SAN OR FSC STANDARDS, AND/OR TO MAINTAIN THESE CERTIFICATIONS ONCE THEY ACHIEVE THEM. THE RAINFOREST ALLIANCE HELPS THESE PRODUCERS IDENTIFY THEIR FINANCIAL NEEDS AND SUPPORTING THEM WITH TECHNICAL ASSISTANCE IN BUSINESS AND FINANCIAL MANAGEMENT. WE ALSO WORK TO EDUCATE FINANCIAL INSTITUTIONS ABOUT THE INVESTMENT NEEDS OF SUSTAINABLE PRODUCERS.

THIS PAST YEAR, WITH FUNDING FROM ALTERFIN, RESPONSABILITY, AND SECO, WE SUCCESSFULLY LAUNCHED A FINANCE PROJECT WITH SMALLHOLDER COCOA FARMERS IN CÔTE D'IVOIRE TO HELP WITH COCOA FARM RENOVATION AND REHABILITATION. THIS PROJECT IS ALLOWING US TO TEST THE DELIVERY OF CAPACITY-BUILDING SERVICES TAILORED TO PROVIDING PRODUCERS WITH FINANCING PACKAGES, AS WELL AS IMPROVING TRAINING IN RECORD-KEEPING. THE PROJECT IS A SMALL-SCALE EXAMPLE OF HOW BLENDED FINANCE SOLUTIONS CAN TRANSFORM PRODUCTIVE LANDSCAPES.

ADDITIONAL FY16 ACHIEVEMENTS IN SUSTAINABLE FINANCE:

WE PRESENTED OUR TECHNICAL END-OF-PROJECT EVALUATION ON THE MULTILATERAL INVESTMENT FUND/INTER-AMERICAN DEVELOPMENT BANK (FOMIN/BID) SUSTAINABLE FORESTRY PROJECT. ONE OF THE CASE STUDIES THAT WAS PUBLISHED AS PART OF THIS PROJECT EXAMINED OUR EFFORTS TO EXPAND ACCESS TO FINANCE AMONG SUSTAINABLE FORESTRY CONCESSIONS IN GUATEMALA'S PETÉN REGION. THE STUDY FOUND THAT COMMUNITY FORESTRY ENTERPRISES CAN SUCCESSFULLY APPLY FOR, EXECUTE, AND REPAY CREDITS, PROVIDED THEY ARE SUPPORTED TO MAKE

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FOUNDATIONAL IMPROVEMENTS IN THE AREAS OF LEGAL COMPLIANCE, TRANSPARENCY, ACCOUNTING SYSTEMS, AND OVERALL FINANCIAL ADMINISTRATION.

FOUR NEW SUSTAINABLE FINANCE-TRAINING MODULES WERE INTEGRATED INTO THE RAINFOREST ALLIANCE'S SERVICE PACKAGES.

FINANCIAL TRAINING AND FINANCING NEEDS WERE DOCUMENTED FOR 50 ENTERPRISES AND 1,000 PRODUCERS IN THE RAINFOREST ALLIANCE'S NETWORKS.

COMMITMENTS WERE SECURED FROM FOUR CORPORATE PARTNERS TO IMPROVE ACCESS TO FINANCE AND/OR SUPPORT FINANCIAL SKILL-BUILDING WITHIN THEIR SUPPLY CHAINS.

#### 4D LINE 6 - SUSTAINABLE TOURISM

THE RAINFOREST ALLIANCE'S SUSTAINABLE TOURISM PROGRAM IS WORKING TO HELP TOURISM ENTREPRENEURS CONSERVE THEIR ENVIRONMENTS AND CONTRIBUTE TO LOCAL LIVELIHOODS. WE ARE LEADING A GLOBAL EFFORT TO HELP DEFINE, STANDARDIZE AND SCALE UP SUSTAINABLE TOURISM, AND WE PROMOTE HIGHER ENVIRONMENTAL AND SOCIAL STANDARDS FOR THE TOURISM INDUSTRY AND GOVERNMENT TOURISM POLICY BY PARTNERING WITH INDUSTRY ASSOCIATIONS, NONPROFITS, AND GOVERNMENT AGENCIES. WE HAVE ALSO BEEN WORKING WITH SMALL AND MEDIUM-SIZED BUSINESSES, AS WELL AS INDIGENOUS AND COMMUNITY GROUPS IN LATIN AMERICA, TO EDUCATE THEM ON THE OPPORTUNITIES THAT EXIST TO INCORPORATE ON-SITE CONSERVATION MEASURES INTO THEIR OPERATIONS, THEREBY MINIMIZING THEIR IMPACT ON LOCAL WILDLIFE AND LANDSCAPES.

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## FY16 HIGHLIGHTS:

WE PROVIDED SUPERVISION AND TECHNICAL SUPPORT FOR THE CONCLUSION OF ACTIVITIES UNDER THE MITSUBISHI FOUNDATION PROJECT IN MEXICO.

WE OFFERED ON-SITE TECHNICAL ASSISTANCE TO 46 TOURISM OPERATIONS IN COSTA RICA AS PART OF THE CONCLUSION OF A CITI FOUNDATION PROJECT. THE PROJECT REACHED MORE THAN 140 MICRO- AND SMALL ENTERPRISES, HELPING THEM BECOME MORE COMPETITIVE BY CONSERVING WATER, ENERGY, AND BIODIVERSITY; IMPROVING THE SERVICE OPTIONS THEY PROVIDE; AND RESPECTING LOCAL CULTURES.

IN HONDURAS, WE PROVIDED TECHNICAL SUPPORT TO THE MESOAMERICAN REEF TOURISM INITIATIVE (MARTI), TO HELP THEM DEVELOP FIVE NEW DIAGNOSTIC TOOLS SPECIFICALLY TAILORED TO THE NEEDS OF TOURISM OPERATIONS IN THE BAY ISLANDS INCLUDING PROVIDERS OF DIVING SERVICES, MARINE TOURS, FOOD, AND ACCOMMODATIONS. THE APPLICATION OF THESE TOOLS WILL ALLOW THESE TOURISM BUSINESSES TO UNDERSTAND THEIR LEVEL OF COMPLIANCE WITH LOCALLY ENDORSED GOOD PRACTICES, AND TRACK THEIR IMPROVEMENTS OVER TIME. WE ALSO TRAINED EIGHT LOCAL LEADERS WHO WILL BE ABLE TO ASSESS THE ENTERPRISES' COMPLIANCE IN FUTURE YEARS.

AT THE TOURISM & BIODIVERSITY SEMINAR IN THE DOMINICAN REPUBLIC IN NOVEMBER 2015, WE LED A PANEL THAT INCLUDED SEVERAL RAINFOREST ALLIANCE CERTIFIED BUSINESSES.

AS PART OF THE UN'S 10-YEAR FRAMEWORK ON SUSTAINABLE CONSUMPTION AND PRODUCTION, WE PARTICIPATED IN UNEP'S REGIONAL STAKEHOLDER OUTREACH MEETINGS AIMED AT CREATING NETWORKS WITH KEY PLAYERS IN SUSTAINABLE TOURISM. WE ALSO DELIVERED PRESENTATIONS ABOUT OUR WORK AT VARIOUS

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EVENTS, INCLUDING A BROWN-BAG STAFF EVENT AT UNEP IN PARIS, AN EVENT AT GEORGE WASHINGTON UNIVERSITY IN WASHINGTON DC, AND ANOTHER GATHERING AT ITB IN GERMANY.

ATTACHMENT 1

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES

<u>DESCRIPTION</u>	<u>GRANTS</u>	<u>EXPENSES</u>	<u>REVENUE</u>
SUSTAINABLE AGRICULTURE	863,538.	4,806,776.	26,487.
COMMUNICATIONS/EDUCATION PROGRAM	11,775.	1,772,689.	
CLIMATE PROGRAM		1,249,704.	26,815.
SPECIAL PROJECTS	48,517.	886,502.	
SUSTAINABLE FINANCE	20,199.	357,961.	
SUSTAINABLE TOURISM		166,192.	7,070.
TOTALS	<u>944,029.</u>	<u>9,239,824.</u>	<u>60,372.</u>

ATTACHMENT 2

FORM 990, PART VI, LINE 17 - STATES

AL, AK, AR, CA, CO, CT,  
FL, GA, HI, IL, KS, KY, ME, MD, MA, MI,  
MN, MS, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA,  
RI, SC, TN, UT, VA, WA, WV, WI,

ATTACHMENT 3

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
HOS MARCUS & KARIN SCHAEFER AB TALLBACKSVÄGEN 2 DJURHAMN SWEDEN	COMM. CONSULTANT	171,387.

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ATTACHMENT 3 (CONT'D)

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
BEMPORAD BARANOWSKI 20 JAY STREET, SUITE 1012 BROOKLYN, NY 11201	COMM. CONSULTANT	175,000.
RELATIONS GESELLSCHAFT MÖRFELDER LANDSTRASSE 72 FRANKFURT AM MAIN GERMANY 60598	PR CONSULTANT	192,117.
ACCREDITATION SERVICES FRIEDRICH-EBERT-ALLEE 69 BONN GERMANY 53113	ACCREDITATION SVCS	198,350.
WITHUMSMITH+BROWN PC 1 SPRING STREET NEW BRUNSWICK, NJ 08901	FINANCIAL SERVICES	157,200.

ATTACHMENT 4

FORM 990, PART VIII - INVESTMENT INCOME

<u>DESCRIPTION</u>	(A) <u>TOTAL</u> <u>REVENUE</u>	(B) <u>RELATED OR</u> <u>EXEMPT REVENUE</u>	(C) <u>UNRELATED</u> <u>BUSINESS REV.</u>	(D) <u>EXCLUDED</u> <u>REVENUE</u>
INTEREST INCOME	58,202.			58,202.
TOTALS	<u>58,202.</u>			<u>58,202.</u>

ATTACHMENT 5

FORM 990, PART VIII - EXCLUDED CONTRIBUTIONS

<u>DESCRIPTION</u>	<u>AMOUNT</u>
GALA	932,611.
TOTAL	<u>932,611.</u>



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ATTACHMENT 6

FORM 990, PART VIII - FUNDRAISING EVENTS

<u>DESCRIPTION</u>	<u>GROSS INCOME</u>	<u>DIRECT EXPENSES</u>
GALA	258,341.	258,341.
TOTALS	<u>258,341.</u>	<u>258,341.</u>

ATTACHMENT 7

FORM 990, PART IX - OTHER FEES

<u>DESCRIPTION</u>	<u>(A) TOTAL FEES</u>	<u>(B) PROGRAM SERVICE EXP.</u>	<u>(C) MANAGEMENT AND GENERAL</u>	<u>(D) FUNDRAISING EXPENSES</u>
CONSULTANTS	7,049,193.	6,611,410.	26,936.	410,847.
TOTALS	<u>7,049,193.</u>	<u>6,611,410.</u>	<u>26,936.</u>	<u>410,847.</u>

ATTACHMENT 8

FORM 990, PART X - PREPAID EXPENSES AND DEFERRED CHARGES

<u>DESCRIPTION</u>	<u>BEGINNING BOOK VALUE</u>	<u>ENDING BOOK VALUE</u>
PREPAID EXPENSES	515,115.	647,248.
TOTALS	<u>515,115.</u>	<u>647,248.</u>

ATTACHMENT 9

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

<u>DESCRIPTION</u>	<u>BEGINNING BOOK VALUE</u>	<u>ENDING BOOK VALUE</u>	<u>COST OR FMV</u>
CORPORATE BONDS	832,769.		FMV

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ATTACHMENT 9 (CONT'D)FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

<u>DESCRIPTION</u>	<u>BEGINNING BOOK VALUE</u>	<u>ENDING BOOK VALUE</u>	<u>COST OR FMV</u>
INTERMEDIATE TERM BONDS		1,182,458.	FMV
EQUITY ETF		2,441,830.	FMV
TOTALS	<u>832,769.</u>	<u>3,624,288.</u>	

ATTACHMENT 10FORM 990, PART X - DEFERRED REVENUE

<u>DESCRIPTION</u>	<u>BEGINNING BOOK VALUE</u>	<u>ENDING BOOK VALUE</u>
DEFERRED REVENUE	75,000.	249,250.
TOTALS	<u>75,000.</u>	<u>249,250.</u>

**SCHEDULE R  
(Form 990)**

**Related Organizations and Unrelated Partnerships**

OMB No. 1545-0047

**2015**

**Open to Public  
Inspection**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Department of the Treasury  
Internal Revenue Service

Name of the organization

RAINFOREST ALLIANCE, INC.

Employer identification number

13-3377893

**Part I Identification of Disregarded Entities** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) RAINFOREST ALLIANCE MEXICO-ALIANCIA 98-1051195 MATIAS ROMERO 216	TREES	MX	1,631,948.	830,621.	RA
(2) RAINFOREST ALLIANCE S.R.L. 98-1051465 CALLE ASUNCION #180, LIBERTAD SANTA CRUZ, BL	RA CERT	BL	66,565.	48,346.	RA
(3) RAINFOREST ALLIANCE LTD 98-1051166 WARNFORD COURT 29 THROGMORTON LONDON, UK EC2N 2AT	AG/MARKETS	UK	2,100,315.	43,946.	RA
(4) RAINFOREST ALLIANCE (GHANA) 98-1051463 HSE NO. 36 ABOTSI STREET EAST LEGON, ACCRA, GH	TREES/RA CERT	GH	459,206.	27,818.	RA
(5) PT RAINFOREST ALLIANCE 98-1051106 JALAN LETDA TANTULAR BARAT 88 DENPASAR BALI, ID 80114	RA CERT/AG	ID	1,055,666.	1,470,146.	RA
(6) RAINFOREST ALLIANCE CANADA 98-1051454 285 MCLEOD STREET OTTAWA, ONTARIO CA K2P1A1	RA CERT	CA	1,510,829.	858,432.	RA

**Part II Identification of Related Tax-Exempt Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

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

Schedule R (Form 990) 2015

**SCHEDULE R  
(Form 990)**

**Related Organizations and Unrelated Partnerships**

OMB No. 1545-0047

**2015**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**

▶ **Attach to Form 990.**

▶ **Information about Schedule R (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

Name of the organization

RAINFOREST ALLIANCE, INC.

Employer identification number

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**Part I Identification of Disregarded Entities** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) RAINFOREST ALLIANCE TRADING LTD 98-1069583 WARNFORD COURT 29 THROGMORTON LONDON, ENGLAND UK EC2N 2A	INACTIVE	UK	0.	0.	RA
(2) SUSTAINABLE FARM CERTIFICATION INTL LTDA 98-1051467 APARTADO 11029-1100 SAN JOSE, CS	RA CERT	CS	0.	0.	RA
(3)					
(4)					
(5)					
(6)					

**Part II Identification of Related Tax-Exempt Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

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

Schedule R (Form 990) 2015

**Part III Identification of Related Organizations Taxable as a Partnership** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

Table with 11 columns: (a) Name, address, and EIN of related organization; (b) Primary activity; (c) Legal domicile; (d) Direct controlling entity; (e) Predominant income; (f) Share of total income; (g) Share of end-of-year assets; (h) Disproportionate allocations? (Yes/No); (i) Code V-UBI amount; (j) General or managing partner? (Yes/No); (k) Percentage ownership. Rows 1-7 are empty.

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

Table with 10 columns: (a) Name, address, and EIN of related organization; (b) Primary activity; (c) Legal domicile; (d) Direct controlling entity; (e) Type of entity; (f) Share of total income; (g) Share of end-of-year assets; (h) Percentage ownership; (i) Section 512(b)(13) controlled entity? (Yes/No). Rows 1-7 are empty.

**Part V Transactions With Related Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
<b>1</b> During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
<b>a</b> Receipt of <b>(i)</b> interest, <b>(ii)</b> annuities, <b>(iii)</b> royalties, or <b>(iv)</b> rent from a controlled entity . . . . .	<b>1a</b>	
<b>b</b> Gift, grant, or capital contribution to related organization(s) . . . . .	<b>1b</b>	
<b>c</b> Gift, grant, or capital contribution from related organization(s) . . . . .	<b>1c</b>	
<b>d</b> Loans or loan guarantees to or for related organization(s) . . . . .	<b>1d</b>	
<b>e</b> Loans or loan guarantees by related organization(s) . . . . .	<b>1e</b>	
<b>f</b> Dividends from related organization(s) . . . . .	<b>1f</b>	
<b>g</b> Sale of assets to related organization(s) . . . . .	<b>1g</b>	
<b>h</b> Purchase of assets from related organization(s) . . . . .	<b>1h</b>	
<b>i</b> Exchange of assets with related organization(s) . . . . .	<b>1i</b>	
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) . . . . .	<b>1j</b>	
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) . . . . .	<b>1k</b>	
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) . . . . .	<b>1l</b>	
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) . . . . .	<b>1m</b>	
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . . . .	<b>1n</b>	
<b>o</b> Sharing of paid employees with related organization(s) . . . . .	<b>1o</b>	
<b>p</b> Reimbursement paid to related organization(s) for expenses . . . . .	<b>1p</b>	
<b>q</b> Reimbursement paid by related organization(s) for expenses . . . . .	<b>1q</b>	
<b>r</b> Other transfer of cash or property to related organization(s) . . . . .	<b>1r</b>	
<b>s</b> Other transfer of cash or property from related organization(s) . . . . .	<b>1s</b>	

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

**Part VI** Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

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**Part VII** **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

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