

Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047

2007

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2007 calendar year, or tax year beginning **07/01, 2007, and ending 06/30/2008**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization RAINFOREST ALLIANCE, INC.	D Employer identification number 13-3377893
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 665 BROADWAY 500	E Telephone number (212) 677-1900
	City or town, state or country, and ZIP + 4 NEW YORK, NY 10012-2420	F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual Other (specify) ▶
	Please use IRS label or print or type. See Specific Instructions.	

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Website: ▶ **WWW.RAINFOREST-ALLIANCE.ORG****J** Organization type (check only one) ▶ ☒ 501(c) (3) ◀ (Insert no.) 4947(a)(1) or 527

K Check here ☐ If the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

H and I are not applicable to section 527 organizations.

H(a) Is this a group return for affiliates? ☐ Yes ☒ No**H(b)** If "Yes," enter number of affiliates ▶**H(c)** Are all affiliates included? ☐ Yes ☐ No
(If "No," attach a list. See Instructions.)**H(d)** Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No**I** Group Exemption Number ▶**M** Check ☐ If the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).**L** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **27,541,640.****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See the instructions.)

Revenue	1 Contributions, gifts, grants, and similar amounts received:			
	a Contributions to donor advised funds	1a		
	b Direct public support (not included on line 1a)	1b	8,941,779.	
	c Indirect public support (not included on line 1a)	1c		
	d Government contributions (grants) (not included on line 1a)	1d	8,598,725.	
	e Total (add lines 1a through 1d) (cash \$ 17,540,504. noncash \$)	1e	17,540,504.	
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2	8,980,102.	
	3 Membership dues and assessments	3	680,600.	
	4 Interest on savings and temporary cash investments	4	55,664.	
	5 Dividends and interest from securities	5		
	6 a Gross rents	6a		
	b Less: rental expenses	6b		
	c Net rental income or (loss). Subtract line 6b from line 6a	6c		
	7 Other investment income (describe ▶)	7		
	8 a Gross amount from sales of assets other than inventory	(A) Securities	(B) Other	
	b Less: cost or other basis and sales expenses	8a		
	c Gain or (loss) (attach schedule)	8b		
	d Net gain or (loss). Combine line 8c, columns (A) and (B)	8c		
	8d	8d		
	9 Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>			
	a Gross revenue (not including \$ 1,335,608. of STMT 1 contributions reported on line 1b). STMT 2.	9a	180,820.	
	b Less: direct expenses other than fundraising expenses	9b	276,006.	
	c Net income or (loss) from special events. Subtract line 9b from line 9a	9c	-95,186.	
	10 a Gross sales of inventory, less returns and allowances	10a		
	b Less: cost of goods sold	10b		
	c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a	10c		
	11 Other revenue (from Part VII, line 103)	11	103,950.	
	12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12	27,265,634.	
	Expenses	13 Program services (from line 44, column (B))	13	24,555,049.
		14 Management and general (from line 44, column (C))	14	181,585.
15 Fundraising (from line 44, column (D))		15	1,200,039.	
16 Payments to affiliates (attach schedule)		16		
17 Total expenses. Add lines 16 and 44, column (A)		17	25,936,673.	
Net Assets	18 Excess or (deficit) for the year. Subtract line 17 from line 12	18	1,328,961.	
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19	1,755,830.	
	20 Other changes in net assets or fund balances (attach explanation)	20		
	21 Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21	3,084,791.	

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2007)

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the Instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds (attach schedule)	(cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>			SEMT 3	
22b Other grants and allocations (attach schedule)	(cash \$ 2,370,928. noncash \$ _____) If this amount includes foreign grants, check here <input checked="" type="checkbox"/>	2,370,928.	2,370,928.		
23 Specific assistance to individuals (attach schedule)					
24 Benefits paid to or for members (attach schedule)					
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A		1,150,519.	1,150,519.		
25b Compensation of former officers, directors, key employees, etc. listed in Part V-B					
25c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)					
26 Salaries and wages of employees not included on lines 25a, b, and c		8,708,926.	7,944,474.	108,717.	655,735.
27 Pension plan contributions not included on lines 25a, b, and c		117,219.	106,176.		11,043.
28 Employee benefits not included on lines 25a - 27		1,143,767.	1,036,311.	15,064.	92,392.
29 Payroll taxes		412,502.	379,749.	4,592.	28,161.
30 Professional fundraising fees		32,000			32,000
31 Accounting fees		81,709.	81,709.		
32 Legal fees		62,818.	59,146.	3,672.	
33 Supplies		146,138.	139,256.	1,159.	5,723.
34 Telephone		251,631.	240,758.	3,798.	7,075.
35 Postage and shipping		303,530.	200,055.	972.	102,503.
36 Occupancy		1,048,946.	1,014,844.	4,329.	29,773.
37 Equipment rental and maintenance		326,200.	306,168.	867.	19,165.
38 Printing and publications		208,578.	146,443.	6.	62,129.
39 Travel		2,119,344.	2,064,632.	12,595.	42,117.
40 Conferences, conventions, and meetings					
41 Interest					
42 Depreciation, depletion, etc. (attach schedule)		50,974.	39,133.	286.	11,555.
43 Other expenses not covered above (itemize):					
a CONSULTANTS		2,632,000	2,611,232.		23,768.
b CERTIFICATION		3,169,895.	3,167,219.	183.	2,493.
c WORKSHOPS		538,735.	535,212.	235.	3,288.
d OTHER OFFICE EXPENSES		873,916.	777,687.	25,110.	71,119.
e FOREIGN INCOME TAX		183,398.	183,398.		
f					
g					
44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15).		25,936,673.	24,555,049.	181,585.	1,200,039.

Joint Costs. Check ☐ if you are following SOP 98-2.Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____;

(iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? **SEE STATEMENT 8**

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)

a **SEE ATTACHMENT B**

(Grants and allocations \$ **2,370,928.**) If this amount includes foreign grants, check here ☒

24,555,049.

b

(Grants and allocations \$) If this amount includes foreign grants, check here ☐

c

(Grants and allocations \$) If this amount includes foreign grants, check here ☐

d

(Grants and allocations \$) If this amount includes foreign grants, check here ☐

e Other program services (attach schedule)

(Grants and allocations \$) If this amount includes foreign grants, check here ☐

f **Total of Program Service Expenses** (should equal line 44, column (B), Program services)

24,555,049.

Form 990 (2007)

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
Assets	45 Cash - non-interest-bearing	989,735.	45	1,861,565.
	46 Savings and temporary cash investments	1,510,055.	46	1,057,437.
	47a Accounts receivable	47a 2,184,842.		
	b Less: allowance for doubtful accounts	47b	954,350.	47c 2,184,842.
	48a Pledges receivable	48a		48c
	b Less: allowance for doubtful accounts	48b		
	49 Grants receivable	1,612,039.	49	2,073,217.
	50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)		50a	
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)		50b	
	51a Other notes and loans receivable (attach schedule)	51a		
	b Less: allowance for doubtful accounts	51b		51c
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges	STMT 9 185,921.	53	358,113.
	54a Investments - publicly-traded securities	STMT 10 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV 41,481.	54a	33,746.
	b Investments - other securities (attach schedule)	<input type="checkbox"/> Cost <input type="checkbox"/> FMV	54b	
55a Investments - land, buildings, and equipment: basis	55a			
b Less: accumulated depreciation (attach schedule)	55b		55c	
56 Investments - other (attach schedule)		56		
57a Land, buildings, and equipment: basis	STMT 11 57a 666,135.			
b Less: accumulated depreciation (attach schedule)	57b 530,803.	184,621.	57c 135,332.	
58 Other assets, including program-related investments (describe ►)	STMT 12 118,366.	58	118,366.	
59 Total assets (must equal line 74). Add lines 45 through 58	5,596,568.	59	7,822,618.	
Liabilities	60 Accounts payable and accrued expenses	1,003,263.	60	2,103,980.
	61 Grants payable		61	
	62 Deferred revenue	STMT 13 396,253.	62	216,000.
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64a Tax-exempt bond liabilities (attach schedule)		64a	
	b Mortgages and other notes payable (attach schedule)	STMT 14 2,405,128.	64b	2,391,750.
	65 Other liabilities (describe ►)	STMT 15 36,094.	65	26,097.
66 Total liabilities. Add lines 60 through 65	3,840,738.	66	4,737,827.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	-89,153.	67	-275,183.
	68 Temporarily restricted	1,844,983.	68	3,359,974.
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)	1,755,830.	73	3,084,791.
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73	5,596,568.	74	7,822,618.

Yes	No
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	1999	2000

75b	X
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75c		X

75d	x	
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(If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

[illegible]

Yes	No
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76		X

77		x

78a		X
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78b	N/A
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79		X
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80a	X	
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STMT 22

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81b	X
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Part VI Other Information (continued)

		Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	X	
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		
82 b	790,767.		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	N/A	
85 a	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?	N/A	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	N/A	
If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.			
c	Dues, assessments, and similar amounts from members	N/A	
d	Section 162(e) lobbying and political expenditures	N/A	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	N/A	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	N/A	
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	N/A	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	N/A	
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	N/A	
b	Gross receipts, included on line 12, for public use of club facilities	N/A	
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders	N/A	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	N/A	
88 a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	X	
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	X	
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under:		
section 4911 ▶ N/A; section 4912 ▶ N/A; section 4955 ▶ N/A			
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	N/A	
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization	N/A	
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?		X
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?		X
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
90 a	List the states with which a copy of this return is filed ▶ SEE STATEMENT 23		
b	Number of employees employed in the pay period that includes March 12, 2007 (See instructions.)	110	
91 a	The books are in care of ▶ RAINFOREST ALLIANCE, INC.		
Located at ▶ 665 BROADWAY, SUITE 500 NEW YORK, NY			
Telephone no. ▶ 212-677-1900			
ZIP + 4 ▶ 10012-2420			
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	X	
If "Yes," enter the name of the foreign country ▶ SEE STATEMENT 24			
See the Instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			

Part VI Other Information (continued)

- c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c ☒ Yes ☐ No
- If "Yes," enter the name of the foreign country ▶ **SEE STATEMENT 25**
- 92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here ☐ and enter the amount of tax-exempt interest received or accrued during the tax year 92 **N/A**

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a CERTIFICATION FEES					8,980,102.
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					680,600.
95 Interest on savings and temporary cash investments			14	55,664.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events			01	-95,186.	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b OTHER INCOME					103,950.
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				-39,522.	9,764,652.
105 Total (add line 104, columns (B), (D), and (E)) ▶					9,725,130.

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	
	STMT 26

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
STMT 27	%		323,476.	204,191.
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13).

106 Did the reporting organization **make** any transfers **to** a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No
	X

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals				

107 Did the reporting organization **receive** any transfers **from** a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No
	X

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals				

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Yes	No
	X

**Please
Sign
Here**

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.

Signature of officer

Date

Daniel Doucette, VP Finance and Operations

Type or print name and title

**Paid
Preparer's
Use Only**

Preparer's
signature

Date

Check if
self-
employed

Preparer's SSN or PTIN (See Gen. Inst. X)

Firm's name (or yours
if self-employed),
address, and ZIP + 4

WITHUMSMITH+BROWN, P.C.

EIN

Phone no.

P00076779

22-2027092

732-828-1614

ONE SPRING STREET
NEW BRUNSWICK, NJ

08901

Form 990 (2007)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n),
or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information - (See separate instructions.)

► **MUST** be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB No. 1545-0047

2007

Name of the organization

RAINFOREST ALLIANCE, INC.

Employer identification number

13-3377893

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
SEE STATEMENT 28				
Total number of other employees paid over \$50,000 . . . ►		34		

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
SEE STATEMENT 29		
Total number of others receiving over \$50,000 for professional services ►		NONE

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of other contractors receiving over \$50,000 for other services ►		NONE

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

Schedule A (Form 990 or 990-EZ) 2007

Part III Statements About Activities (See page 2 of the instructions.)

Yes No

- 1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ 5,317. (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)

1 X

Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.

- 2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)

- a Sale, exchange, or leasing of property?

2a X

- b Lending of money or other extension of credit?

2b X

- c Furnishing of goods, services, or facilities?

2c X

- d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE 990. PART V-A

2d X

- e Transfer of any part of its income or assets?

2e X

- 3a Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.) STMT 30

3a X

- b Did the organization have a section 403(b) annuity plan for its employees?

3b X

- c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement

3c X

- d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?

3d X

- 4a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g

4a X

- b Did the organization make any taxable distributions under section 4966?

4b

- c Did the organization make a distribution to a donor, donor advisor, or related person?

4c

- d Enter the total number of donor advised funds owned at the end of the tax year ►

- e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ►

- f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the rights to provide advice on the distribution or investment of amounts in such funds or accounts

NONE

- g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year

NONE

Part IV Reason for Non-Private Foundation Status (See pages 4 through 8 of the instructions.)I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5 ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 ☐ A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ☐ _____
- 10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 ☐ 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 charitable, etc., 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). (Also complete the **Support Schedule** in Part IV-A.)
- 13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:
- ☐ Type I ☐ Type II ☐ Type III - Functionally Integrated ☐ Type III - Other

Provide the following information about the supported organizations. (See page 8 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total					

- 14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See page 8 of the instructions.)

Schedule A (Form 990 or 990-EZ) 2007

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) **Use cash method of accounting.****Note:** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	7,012,091.	4,413,427.	4,398,873.	3,816,028.	19,640,419.
16 Membership fees received	642,168.	737,712.	659,969.	468,257.	2,508,106.
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	13,091,592.	9,497,830.	6,743,057.	4,423,777.	33,756,256.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975.	32,124.	6,302.	1,042.	3,523.	42,991.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	STMT 31 139,763.	121,066.	46,809.		307,638.
23 Total of lines 15 through 22	20,917,738.	14,776,337.	11,849,750.	8,711,585.	56,255,410.
24 Line 23 minus line 17.	7,826,146.	5,278,507.	5,106,693.	4,287,808.	22,499,154.
25 Enter 1% of line 23.	209,177.	147,763.	118,498.	87,116.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 449,983.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 835,034.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 22,499,154.
d Add: Amounts from column (e) for lines: 18 42,991. 19					
22 307,638. 26b 835,034.					26d 1,185,663.
e Public support (line 26c minus line 26d total)					26e 21,313,491.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 94.7302 %
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: NOT APPLICABLE (2006) _____ (2005) _____ (2004) _____ (2003) _____ b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2006) _____ (2005) _____ (2004) _____ (2003) _____ c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					27c _____
d Add: Line 27a total, and line 27b total					27d _____
e Public support (line 27c total minus line 27d total)					27e _____
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e)					27f _____
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g _____ %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h _____ %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

Part V Private School Questionnaire (See page 9 of the instructions.)**NOT APPLICABLE**

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30	
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)	31	

32 Does the organization maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d Copies of all material used by the organization or on its behalf to solicit contributions?	32d	
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)		

33 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?	33a	
b Admissions policies?	33b	
c Employment of faculty or administrative staff?	33c	
d Scholarships or other financial assistance?	33d	
e Educational policies?	33e	
f Use of facilities?	33f	
g Athletic programs?	33g	
h Other extracurricular activities?	33h	
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		

34 a Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b Has the organization's right to such aid ever been revoked or suspended?	34b	
If you answered "Yes" to either 34a or b, please explain using an attached statement.		

35 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 11 of the instructions.)(To be completed **ONLY** by an eligible organization that filed Form 5768) **NOT APPLICABLE**Check ☐ **a** If the organization belongs to an affiliated group. Check ☐ **b** If you checked "a" and "limited control" provisions apply.**Limits on Lobbying Expenditures**

(The term "expenditures" means amounts paid or incurred.)

		(a) Affiliated group totals	(b) To be completed for all electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying) . . .	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying) . . .	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount. Enter the amount from the following table -			
If the amount on line 40 is - The lobbying nontaxable amount is -			
Not over \$500,000 20% of the amount on line 40			
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	41		
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			
42 Grassroots nontaxable amount (enter 25% of line 41)	42		
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44		

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.**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 instructions for lines 45 through 50 on page 13 of the instructions.)

	Lobbying Expenditures During 4-Year Averaging Period				
Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
Lobbying nontaxable amount					
45 amount					
Lobbying ceiling amount					
46 (150% of line 45(e))					
47 Total lobbying expenditures					
Grassroots nontaxable amount					
48 amount					
Grassroots ceiling amount					
49 (150% of line 48(e))					
Grassroots lobbying expenditures					
50 expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

	Yes	No	Amount
a Volunteers	<input checked="" type="checkbox"/>		
b Paid staff or management (Include compensation in expenses reported on lines c through h.)	<input checked="" type="checkbox"/>		
c Media advertisements		<input checked="" type="checkbox"/>	
d Mailings to members, legislators, or the public	<input checked="" type="checkbox"/>		2,277.
e Publications, or published or broadcast statements	<input checked="" type="checkbox"/>		607.
f Grants to other organizations for lobbying purposes		<input checked="" type="checkbox"/>	
g Direct contact with legislators, their staffs, government officials, or a legislative body	<input checked="" type="checkbox"/>		2,433.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		<input checked="" type="checkbox"/>	
i Total lobbying expenditures (Add lines c through h.)			5,317.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Schedule B
(Form 990, 990-EZ,
or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

OMB No. 1545-0047

2007

Supplementary Information for
line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

Name of organization

RAINFOREST ALLIANCE, INC.

Employer identification number

13-3377893

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 organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules -

☒ For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3 % support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(i), and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III.)

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to 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 of \$5,000 or more during the year.) ► \$ _____

Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2007)

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

Employer identification number

13-3377893**Part I** Contributors (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	DOEN FOUNDATION 1070 AP AMSTERDAM NETHERLANDS	\$ 162,228.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	RICHARD & RHODA GOLDMAN FUND 211 LINCOLN BOULEVARD SAN FRANCISCO, CA 94129	\$ 125,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	FSC GLOBAL FUND 81 BRIDGE STREET YARMOUTH, ME 04096	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	HEINZ ENDOWMENTS 625 LIBERTY AVENUE PITTSBURGH, PA 15222	\$ 200,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5	KENDEDA FUND 122 PARK AVENUE TAKOMA PARK, MD 20912	\$ 1,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6	ALCOA FOUNDATION (HONDURAS) 201 ISABELLA ST PITTSBURGH, PA 15212-5858	\$ 150,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

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

Employer identification number

13-3377893**Part I Contributors** (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	ALCOA FOUNDATION (MEXICO) 201 ISABELLA ST PITTSBURGH, PA 15212-5858	\$ 125,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
8	CITIGROUP FOUNDATION C/O 665 BROADWAY NEW YORK, NY 10012-2420	\$ 200,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
9	GATES FOUNDATION C/O 665 BROADWAY NEW YORK, NY 10012-2420	\$ 1,081,689.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
10	KRAFT FOODS INC. 120 WHITE PLAINS RD SUITE 500 TARRYTOWN, NY 10591-5598	\$ 810,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
11	INTER AMERICAN DEVELOPMENT BANK C/O 665 BROADWAY NEW YORK, NY 10012	\$ 474,617.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
12	UNITED NATIONS DEVELOPMENT PROGRAMS C/O 665 BROADWAY NEW YORK, NY 10012	\$ 3,060,237.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

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

Employer identification number

13-3377893**Part I** Contributors (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
13	UNITED NATIONS ENVIRONMENTAL PROGRAMS C/O 665 BROADWAY NEW YORK, NY 10012	\$ 466,841.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box ☒ **X**.
Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. You must file original and one copy.

Type or print File by the extended due date for filing the return. See instructions.	Name of Exempt Organization	Employer identification number
	RAINFOREST ALLIANCE, INC.	13-3377893
	Number, street, and room or suite no. If a P.O. box, see instructions.	For IRS use only
	665 BROADWAY	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	NEW YORK, NY 10012-2420	

Check type of return to be filed (File a separate application for each return):

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> Form 8870
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 5227	

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of **RAINFOREST ALLIANCE, INC.**
Telephone No. **212 677-1900** FAX No. _____
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- I request an additional 3-month extension of time until **05/15/2009**.
- For calendar year _____, or other tax year beginning **07/01/2007** and ending **06/30/2008**.
- If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period
- State in detail why you need the extension **AWAITING ADDITIONAL INFORMATION NEEDED TO PREPARE A COMPLETE AND ACCURATE RETURN.**

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	NONE
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$	NONE
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	NONE

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ▶	Title ▶	Date ▶
WITHUMSMITH+BROWN, P.C. ONE SPRING STREET NEW BRUNSWICK, NJ 08901		

Form 8868 (Rev. 4-2008)

FORM 990, PART I - EXCLUDED CONTRIBUTIONS
=====

DESCRIPTION -----	AMOUNT -----
GALA	1,335,608.
TOTAL	----- 1,335,608. =====

FORM 990, PART I - SPECIAL FUNDRAISING EVENTS AND ACTIVITIES

DESCRIPTION -----	GROSS REVENUE -----	DIRECT EXPENSES -----	NET INCOME -----
GALA	180,820.	276,006.	-95,186.
	-----	-----	-----
TOTALS	180,820.	276,006.	-95,186.
	=====	=====	=====

FORM 990, PART II - OTHER GRANTS AND ALLOCATIONS PAID DURING THE YEAR

RECIPIENT NAME AND ADDRESS -----	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT -----	PURPOSE OF GRANT OR CONTRIBUTION -----	AMOUNT -----
<u>GRANTS PAID</u>			
ASOCIACION DE COMUNIDADES FORESTALES DE PETEN 4 AVENDIDA 11 CALLE, ZONA 1 SAN BENITO, PETEN GUATEMALA		FORESTRY	8,800.
AGRO ECO FOUNDATION MOLENSTRAAT 60, PO BOX 63, 6720 AB BENNEKON NETHERLANDS		AGRICULTURE	34,627.
ASOCIACION ALIANZA VERDE CASTILLO DE ARISMENDI ISLA DE FLORES (PETEN) GUATEMALA		AGRICULTURE, TOURISM	52,514.
ALLEGHEMY COLLEGE CTR FOR ECO & ENVIR DEVELOPMENT 520 NORTH MAIN STREET BOX W MEADVILLE, PA 16335		FORESTRY	8,000.
ASOCIACION ECUATORIANA DE ECOTURISMO BAQUERIZO MORENO E9-153 Y TAMAYO QUITO ECUADOR		FORESTRY	120,231.
GAMBOA RAINFOREST RESORT ZONA 5 GAMBOA, PO BOX 7338 GAMBOA PANAMA		AGRICULTURE	10,654.

FORM 990, PART II - OTHER GRANTS AND ALLOCATIONS PAID DURING THE YEAR

RECIPIENT NAME AND ADDRESS -----	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT -----	PURPOSE OF GRANT OR CONTRIBUTION -----	AMOUNT -----
CORPORACION CONSERVACION Y DESARROLLO CARLOS GUARDERAS N47-340 Y GONZALO QUITO ECUADOR		AGRICULTURE, TOURISM	228,521.
CENTRO DE FORMACION PARA LA SUTENTABILIDAD MOXVIQU PERIFERICO NORTE NO4, OJO DE AGUA SAN CRISTOBAL DE LAS CASES CHIIAPAS		AGRICULTURE	10,500.
CHINESE ACADEMY OF FORESTRY RM 429, CHINESE ACADEMY OF FORESTRY WANSHOUSHAN CHINA		FORESTRY	179,832.
CONSERVACION INTERNACIONAL 2501 M STREET NW SUITE 200 WASHINGTON, DC 20037		TOURISM	155,066.
CENTRO INTERNACIONAL DE AGRICULTURA RECTA CALI-PALMIRA KM. 16 CALI COLOMBIA		AGRICULTURE	47,049.
COUNTERPART INTERNATIONAL 2345 CRYSTAL DRIVE SUITE 300 ARLINGTON, VA 22202		AGRICULTURE	17,519.
CATHOLIC RELIEF SERVICES 228 WEST LEXINGTON STREET BALTIMORE, MD 21201		AGRICULTURE	11,610.

FORM 990, PART II - OTHER GRANTS AND ALLOCATIONS PAID DURING THE YEAR

RECIPIENT NAME AND ADDRESS -----	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT -----	PURPOSE OF GRANT OR CONTRIBUTION -----	AMOUNT -----
THE FABRETTO CHILDREN'S FOUNDATION 4039 NORTH 17TH STREET ARLINGTON, VA 22207		FORESTRY	62,500.
FUNDACION COCIBOLCA RESIDENCIAL EL DORADO #127 COSTADO MANGUA NICARAGUA		AGRICULTURE	19,527.
FUNDACION INTERAMERICA DE INVESTIGACION TROPICAL 3 AVE. 16-30 ZONA 2, FINAL ZAPOTE GUATEMALA		AGRICULTURE	21,227.
FUNDACION NATURA COLUMBIA CARRERA 21 N. 39-45 BOGOTA COLOMBIA		AGRICULTURE	286,525.
INSTITUTO PARA LA COOPERACION Y AUTODESARROLLO BARRIO ABAJO, CALLE LAS ACACIAS CAS TEGUCIGALPA HONDURAS		AGRICULTURE	136,452.
INTERNATIONAL INSTITUTE FOR ENVIRONMENT DEVELOPMEN 3 ENDSLEIGH STREET LONDON UNITED KINGDOM		AGRICULTURE	96,508.
IMAFLORA ESTRADA CHICO MENDES 185, BARRIO SE PIRACICABA-SP BRAZIL		FORESTRY, AGRICULTURE	261,979.

FORM 990, PART II - OTHER GRANTS AND ALLOCATIONS PAID DURING THE YEAR

RECIPIENT NAME AND ADDRESS -----	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT -----	PURPOSE OF GRANT OR CONTRIBUTION -----	AMOUNT -----
PROGRAMME FOR BELIZE PO BOX 749 #1 EYRE STREET BELIZE CITY BELIZE		TOURISM	81,276.
PRONATRUA CHIAP A.C. CALLE PEDRO MORENO NO. 1 BARRIO DE SAN CRISOBAL DE LAS CASAS CHIIPAS		AGRICULTURE	5,617.
SALVANATURA 33 AVENUE SUR N 643 COL. FLOR BLANC SAN SALVADOR EL SALVADOR		AGRICULTURE	234,532.
SUSTAINABILITY INSTITUTE 3 LINDEN ROAD HARTLAND, VT 05048		AGRICULTURE	76,369.
TOLEDO INSTITUTE FOR DEVELOPMENT AND ENVIRONMENT 3 LINDEN ROAD HARTLAND, VT 05048		TOURISM	16,655.
OTHER C/O 665 BROADWAY NEW YORK, NY 10012		TOURISM	186,838.

13-3377893

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100 101 102 103 104 105 106 107 108 109 110 111 112 113 114 115 116 117 118 119 120 121 122 123 124 125 126 127 128 129 130 131 132 133 134 135 136 137 138 139 140 141 142 143 144 145 146 147 148 149 150 151 152 153 154 155 156 157 158 159 160 161 162 163 164 165 166 167 168 169 170 171 172 173 174 175 176 177 178 179 180 181 182 183 184 185 186 187 188 189 190 191 192 193 194 195 196 197 198 199 200 201 202 203 204 205 206 207 208 209 210 211 212 213 214 215 216 217 218 219 220 221 222 223 224 225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240 241 242 243 244 245 246 247 248 249 250 251 252 253 254 255 256 257 258 259 260 261 262 263 264 265 266 267 268 269 270 271 272 273 274 275 276 277 278 279 280 281 282 283 284 285 286 287 288 289 290 291 292 293 294 295 296 297 298 299 300 301 302 303 304 305 306 307 308 309 310 311 312 313 314 315 316 317 318 319 320 321 322 323 324 325 326 327 328 329 330 331 332 333 334 335 336 337 338 339 340 341 342 343 344 345 346 347 348 349 350 351 352 353 354 355 356 357 358 359 360 361 362 363 364 365 366 367 368 369 370 371 372 373 374 375 376 377 378 379 380 381 382 383 384 385 386 387 388 389 390 391 392 393 394 395 396 397 398 399 400 401 402 403 404 405 406 407 408 409 410 411 412 413 414 415 416 417 418 419 420 421 422 423 424 425 426 427 428 429 430 431 432 433 434 435 436 437 438 439 440 441 442 443 444 445 446 447 448 449 450 451 452 453 454 455 456 457 458 459 460 461 462 463 464 465 466 467 468 469 470 471 472 473 474 475 476 477 478 479 480 481 482 483 484 485 486 487 488 489 490 491 492 493 494 495 496 497 498 499 500 501 502 503 504 505 506 507 508 509 510 511 512 513 514 515 516 517 518 519 520 521 522 523 524 525 526 527 528 529 530 531 532 533 534 535 536 537 538 539 540 541 542 543 544 545 546 547 548 549 550 551 552 553 554 555 556 557 558 559 560 561 562 563 564 565 566 567 568 569 570 571 572 573 574 575 576 577 578 579 580 581 582 583 584 585 586 587 588 589 590 591 592 593 594 595 596 597 598 599 600 601 602 603 604 605 606 607 608 609 610 611 612 613 614 615 616 617 618 619 620 621 622 623 624 625 626 627 628 629 630 631 632 633 634 635 636 637 638 639 640 641 642 643 644 645 646 647 648 649 650 651 652 653 654 655 656 657 658 659 660 661 662 663 664 665 666 667 668 669 670 671 672 673 674 675 676 677 678 679 680 681 682 683 684 685 686 687 688 689 690 691 692 693 694 695 696 697 698 699 700 701 702 703 704 705 706 707 708 709 710 711 712 713 714 715 716 717 718 719 720 721 722 723 724 725 726 727 728 729 730 731 732 733 734 735 736 737 738 739 740 741 742 743 744 745 746 747 748 749 750 751 752 753 754 755 756 757 758 759 760 761 762 763 764 765 766 767 768 769 770 771 772 773 774 775 776 777 778 779 780 781 782 783 784 785 786 787 788 789 790 791 792 793 794 795 796 797 798 799 800 801 802 803 804 805 806 807 808 809 810 811 812 813 814 815 816 817 818 819 820 821 822 823 824 825 826 827 828 829 830 831 832 833 834 835 836 837 838 839 840 841 842 843 844 845 846 847 848 849 850 851 852 853 854 855 856 857 858 859 860 861 862 863 864 865 866 867 868 869 870 871 872 873 874 875 876 877 878 879 880 881 882 883 884 885 886 887 888 889 890 891 892 893 894 895 896 897 898 899 900 901 902 903 904 905 906 907 908 909 910 911 912 913 914 915 916 917 918 919 920 921 922 923 924 925 926 927 928 929 930 931 932 933 934 935 936 937 938 939 940 941 942 943 944 945 946 947 948 949 950 951 952 953 954 955 956 957 958 959 960 961 962 963 964 965 966 967 968 969 970 971 972 973 974 975 976 977 978 979 980 981 982 983 984 985 986 987 988 989 990 991 992 993 994 995 996 997 998 999 1000 1001 1002 1003 1004 1005 1006 1007 1008 1009 1010 1011 1012 1013 1014 1015 1016 1017 1018 1019 1020 1021 1022 1023 1024 1025 1026 1027 1028 1029 1030 1031 1032 1033 1034 1035 1036 1037 1038 1039 104

AND

AMOUNT

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NAME: _____

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2,370,928.

FORM 990, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE

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THE MISSION OF THE RAINFOREST ALLIANCE IS TO PROTECT ECOSYSTEMS AND THE PEOPLE AND WILDLIFE THAT DEPEND ON THEM BY TRANSFORMING LAND-USE PRACTICES, BUSINESS PRACTICES AND CONSUMER BEHAVIOR. COMPANIES, COOPERATIVES AND LANDOWNERS THAT PARTICIPATE IN OUR PROGRAMS MEET RIGOROUS STANDARDS THAT CONSERVE BIODIVERSITY AND PROVIDE SUSTAINABLE LIVELIHOODS.

FORM 990, PART IV - PREPAID EXPENSES AND DEFERRED CHARGES
=====

DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----
SUBAGREEMENT ADVANCE	77,461.	298,771.
PREPAID EXPENSES	108,460.	59,342.
	-----	-----
TOTALS	185,921.	358,113.
	=====	=====

FORM 990, PART IV - INVESTMENTS - PUBLICLY TRADED SECURITIES

DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----	COST OR FMV -----
SEGREGATED INVESTMENTS	41,481.	33,746.	FMV
TOTALS	41,481.	33,746.	

LAND, BUILDINGS, EQUIPMENT NOT HELD FOR INVESTMENT

FIXED ASSET DETAIL

ACCUMULATED DEPRECIATION DETAIL

ASSET DESCRIPTION	METHOD/ CLASS	BEGINNING BALANCE	ADDITIONS	DISPOSALS	ENDING BALANCE	BEGINNING BALANCE	ADDITIONS	DISPOSALS	ENDING BALANCE
FURN AND EQUIP	SL	487,729.			487,729.	400,267.	19,883.		420,150.
SOFTWARE	SL	132,506.			132,506.	72,302.	26,501.		98,803.
LEASEHOLD IMPROVE	SL	45,900.			45,900.	7,260.	4,590.		11,850.
TOTALS		<u>666,135.</u>			<u>666,135.</u>	<u>479,829.</u>			<u>530,803.</u>

FORM 990, PART IV - OTHER ASSETS

=====

DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----
SECURITY DEPOSITS	118,366.	118,366.
	-----	-----
TOTALS	118,366.	118,366.
	=====	=====

FORM 990, PART IV - DEFERRED REVENUE

DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----
DEFERRED INCOME	396,253.	216,000.
TOTALS	396,253.	216,000.

FORM 990, PART IV - MORTGAGES AND OTHER NOTES PAYABLE
=====

LENDER: MACARTHUR FOUNDATION
ORIGINAL AMOUNT: 1,000,000.
DATE OF NOTE: 04/16/1999
MATURITY DATE: 10/31/2010
REPAYMENT TERMS: PRINCIPAL AMOUNT DUE IN FULL ON 10/31/10
PURPOSE OF LOAN: SUPPORTING SMARTWOOD PROGRAM

BEGINNING BALANCE DUE	956,700.
ENDING BALANCE DUE	956,700.

LENDER: THE FORD FOUNDATION
ORIGINAL AMOUNT: 1,500,000.
DATE OF NOTE: 07/31/1998
MATURITY DATE: 12/31/2010
REPAYMENT TERMS: REPAYMENT PERCENTAGE EACH DECEMBER 31 THROUGH 2010
PURPOSE OF LOAN: SUPPORT OF GLOBAL SMARTWOOD CERTIFICATION PROGRAM

BEGINNING BALANCE DUE	1,448,428.
ENDING BALANCE DUE	1,435,050.

TOTAL BEGINNING MORTGAGES AND OTHER NOTES PAYABLE	2,405,128.
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TOTAL ENDING MORTGAGES AND OTHER NOTES PAYABLE	2,391,750.
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RAINFOREST ALLIANCE, INC.

13-3377893

FORM 990, PART IV - OTHER LIABILITIES

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DESCRIPTION -----	BEGINNING BOOK VALUE -----	ENDING BOOK VALUE -----
DEFERRED RENT LIABILITY	36,094.	26,097.
TOTALS	36,094.	26,097.

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FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS -----	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION -----	COMPENSATION -----	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS -----	EXPENSE ACCT AND OTHER ALLOWANCES -----
DANIEL R. KATZ 665 BROADWAY 500 NEW YORK, NY 10012-2420	CHAIR 1.00	NONE	NONE	NONE
LABEEB ABOUD 665 BROADWAY 500 NEW YORK, NY 10012-2420	DIRECTOR 1.00	NONE	NONE	NONE
BERT AERTS 665 BROADWAY 500 NEW YORK, NY 10012-2420	DIRECTOR 1.00	NONE	NONE	NONE
ADAM ALBRIGHT 665 BROADWAY 500 NEW YORK, NY 10012-2420	DIRECTOR 1.00	NONE	NONE	NONE
NOEL BROWN 665 BROADWAY 500 NEW YORK, NY 10012-2420	DIRECTOR 1.00	NONE	NONE	NONE
KAREN CLARK	DIRECTOR 1.00	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS -----	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION -----	COMPENSATION -----	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS -----	EXPENSE ACCT AND OTHER ALLOWANCES -----
665 BROADWAY 500 NEW YORK, NY 10012-2420				
DANIEL COHEN 665 BROADWAY 500 NEW YORK, NY 10012-2420	DIRECTOR 1.00	NONE	NONE	NONE
ROGER DEROMEDI 665 BROADWAY 500 NEW YORK, NY 10012-2420	DIRECTOR 1.00	NONE	NONE	NONE
DR. FRANK J. DOTTORI 665 BROADWAY 500 NEW YORK, NY 10012-2420	DIRECTOR 1.00	NONE	NONE	NONE
DR. KARL FOSSUM 665 BROADWAY 500 NEW YORK, NY 10012-2420	DIRECTOR 1.00	NONE	NONE	NONE
WENDY GORDON 665 BROADWAY 500	VICE CHAIR 1.00	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS -----	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION -----	COMPENSATION -----	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS -----	EXPENSE ACCT AND OTHER ALLOWANCES -----
NEW YORK, NY 10012-2420				
DIANE JUKOFSKY 665 BROADWAY 500 NEW YORK, NY 10012-2420	DIRECTOR 40.00	90,000.	24,075.	NONE
HENRY JUSZKIEWICZ 665 BROADWAY 500 NEW YORK, NY 10012-2420	DIRECTOR 1.00	NONE	NONE	NONE
SUDHAKAR KESAVAN 665 BROADWAY 500 NEW YORK, NY 10012-2420	DIRECTOR 1.00	NONE	NONE	NONE
MARY STUART MASTERSON 665 BROADWAY 500 NEW YORK, NY 10012-2420	DIRECTOR 1.00	NONE	NONE	NONE
ANTHONY RODALE 665 BROADWAY 500 NEW YORK, NY 10012-2420	DIRECTOR 1.00	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS -----	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION -----	COMPENSATION -----	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS -----	EXPENSE ACCT AND OTHER ALLOWANCES -----
ERIC ROTHENBERG 665 BROADWAY 500 NEW YORK, NY 10012-2420	DIRECTOR 1.00	NONE	NONE	NONE
PETER M. SCHULTE 665 BROADWAY 500 NEW YORK, NY 10012-2420	DIRECTOR 1.00	NONE	NONE	NONE
KERRI A. SMITH 665 BROADWAY 500 NEW YORK, NY 10012-2420	DIRECTOR 1.00	NONE	NONE	NONE
MARTIN TANDLER 665 BROADWAY 500 NEW YORK, NY 10012-2420	DIRECTOR 1.00	NONE	NONE	NONE
ANNEMIEKE WIJN 665 BROADWAY 500 NEW YORK, NY 10012-2420	DIRECTOR 1.00	NONE	NONE	NONE
CHRIS WILLE	CHIEF SUSTAINABLE AGRICULTURE 40.00	87,288.	23,349.	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS -----	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION -----	COMPENSATION -----	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS -----	EXPENSE ACCT AND OTHER ALLOWANCES -----
665 BROADWAY 500 NEW YORK, NY 10012-2420				
MARY WILLIAMS 665 BROADWAY 500 NEW YORK, NY 10012-2420	DIRECTOR 1.00	NONE	NONE	NONE
ALAN WILZIG 665 BROADWAY 500 NEW YORK, NY 10012-2420	DIRECTOR 1.00	NONE	NONE	NONE
HORTENSE WHELAN 665 BROADWAY 500 NEW YORK, NY 10012-2420	EXECUTIVE DIRECTOR 40.00	190,000.	56,560.	NONE
KARIN KREIDER 665 BROADWAY 500 NEW YORK, NY 10012-2420	DEPUTY DIRECTOR 40.00	128,212.	36,200.	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS -----	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION -----	COMPENSATION -----	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS -----	EXPENSE ACCT AND OTHER ALLOWANCES -----
ANA TAVARES 665 BROADWAY 500 NEW YORK, NY 10012-2420	DIR OF DEVELOPMENT 40.00	143,000.	41,073.	NONE
RICHARD DONOVAN 665 BROADWAY 500 NEW YORK, NY 10012-2420	CHIEF OF FORESTRY 40.00	135,040.	38,451.	NONE
DANIEL DOUCETTE 665 BROADWAY 500 NEW YORK, NY 10012-2420	DIR OF FINANCE 40.00	122,840.	34,431.	
	GRAND TOTALS	896,380.	254,139.	NONE

FORM 990, PART VI - NAMES OF RELATED ORGANIZATIONS
=====

RELATED ORGANIZATION NAME: PT SMARTWOOD INDONESIA

EXEMPT: NONEXEMPT: X

RELATED ORGANIZATION NAME: RAINFOREST ALLIANCE MEXICO

EXEMPT: X NONEXEMPT:

RELATED ORGANIZATION NAME: RAINFOREST ALLIANCE S.R.L.

EXEMPT: NONEXEMPT: X

RELATED ORGANIZATION NAME: SUSTAINABLE FARM INTERNATIONAL,
LIMITADA

EXEMPT: NONEXEMPT: X

FORM 990, PART VI, LINE 90A - STATES

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AL,AK,AZ,AR,CA,CO,CT,DE,DC,FL,GA,
HI,ID,IL,IN,IA,KS,KY,LA,ME,MD,MA,MI,MN,MS,MO,MT,NE,NV,NH,NJ,NM,
NY,NC,ND,OH,OK,OR,PA,RI,SC,SD,TN,TX,UT,VT,VA,WA,WV,WI,WY,

FORM 990, PART VI, LINE 91B - FOREIGN COUNTRIES

=====

COSTA RICA
BOLIVIA
GUATEMALA
MEXICO
ECUADOR
NICARAGUA
INDONESIA
SPAIN

FORM 990, PART VI, LINE 91C - FOREIGN COUNTRIES

=====

COSTA RICA
BOLIVIA
GUATEMALA
MEXICO
ECUADOR
NICARAGUA
INDONESIA
SPAIN

FORM 990, PART VIII - ACCOMPLISHMENT OF EXEMPT PURPOSES
=====

LINE NO. ---	EXPLANATION OF HOW EACH ACTIVITY FOR WHICH INCOME IS REPORTED IN COLUMN (E) OF PART VII CONTRIBUTED IMPORTANTLY TO THE ACCOMPLISHMENT OF EXEMPT PURPOSES -----
93A	REVENUE EARNED FROM FORESTRY CERTIFICATION ACTIVITIES THAT ATTEST TO SOUND MANAGEMENT OF FORESTS IN ACCORDANCE WITH STRICT STANDARDS FOR SUSTAINABILITY.
94	DUES FROM INDIVIDUALS TO HELP RAINFOREST ALLIANCES PROGRAMS THAT CONSERVE BIODIVERSITY AND PROVIDE SUSTAINABLE LIVELIHOODS.
103A	REVENUE FROM PRE-CERTIFICATION ACTIVITIES, TRAINING SEMINARS CONSULTING WORK AND SUNDRY ITEMS RELATED TO CONSERVATION AND SUSTAINABILITY.

RAINFOREST ALLIANCE, INC.

13-3377893

FORM 990, PART IX - INFORMATION REGARDING TAXABLE SUBSIDIARIES

NAME AND ADDRESS EMPLOYER IDENTIFICATION NUMBER -----	PERCENTAGE OWNERSHIP INTEREST -----	NATURE OF BUSINESS ACTIVITIES -----	TOTAL INCOME -----	ENDING ASSETS -----
PT SMARTWOOD INDONESIA JL CIUNG WANARA NO.1X RENON DE 80225 BALI INDONESIA			-123,758.	93,303.
RAINFOREST ALLIANCE MEXICO MEXICO			-120,421.	87,790.
RAINFOREST ALLIANCE S.R.L. BOLIVIA			-79,297.	23,098.
			-----	-----
		TOTAL INCOME	-323,476.	204,191.
			=====	=====

SCHEDULE A, PART I - COMPENSATION OF THE FIVE HIGHEST PAID EMPLOYEES

NAME AND ADDRESS -----	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION -----	COMPENSATION -----	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS -----
VERA ZLATARSKI 665 BROADWAY NEW YORK, NY 10012	GENERAL COUNSEL 40.00	100,260.	25,603.
LUIS FELIPE DUCHICELA 665 BROADWAY NEW YORK, NY 10012	REG'L PROJ DIR, ICAA 40.00	111,109.	22,777.
EDWARD MILLARD 665 BROADWAY NEW YORK, NY 10012	SR. MGR FOR SUSTLAND 40.00	96,359.	19,753.
REBECCA BUTTERFIELD 665 BROADWAY NEW YORK, NY 10012	DIR OF EVALUATIONS 40.00	106,807.	29,148.
WOLFRAM PINKER 665 BROADWAY NEW YORK, NY 10012	MANAGING DIRECTOR 40.00	103,000.	27,894.
	TOTAL COMPENSATION	----- 517,535. =====	----- 125,175. =====

SCH. A, PART II-A COMPENSATION OF THE 5 HIGHEST PAID FOR PROF. SERV.
=====

NAME AND ADDRESS -----	TYPE OF SERVICE -----	COMPENSATION -----
BERNWARD GEIER ALEFELD 21 53804 MUCH GERMANY COMMUNICATIONS AND PUBLIC RELATIONS SPECIALIST	PUBLIC RELATIONS	78,639.
MARCUS SVENNSON TEXT I TID DJURO TALLBACKSVAGEN 2 130 40 DJURHAMN SWEDEN COMMUNICATIONS AND PUBLIC RELATIONS SPECIALIST	PUBLIC RELATIONS	64,236.
RICHARD CIPPERLY 8 STONEHURST DRIVE QUEENSBURY, NY 12804	SW CONSULTANT	61,906.
KENT COMMUNICATIONS PO BOX 431 GARRISON, NY 10524	COMM CONSULTANT	58,000.
TOTAL COMPENSATION		----- 262,781. =====

SCHEDULE A, PART III - EXPLANATION FOR LINE 3A

=====

RAINFOREST ALLIANCE, INC. AWARDS A BI-ANNUAL FELLOWSHIP OF \$15,000 PER YEAR TO AN INDIVIDUAL IN SUPPORT OF THEIR RESEARCH RELATED TO NON-TIMBER FOREST PRODUCTS. THE FELLOWSHIP IS ADVERTISED ON RELEVANT INTERNATIONAL LISTSERVICES AND FUNDING DIRECTORIES, AS WELL AS THROUGH INDIVIDUAL CONTACTS. APPLICANTS ARE REQUIRED TO SUBMIT A DETAILED RESEARCH PROPOSAL, CV, AND TWO LETTERS OF REFERENCE. WE GENERALLY RECEIVED BETWEEN 20 AND 30 APPLICANTS. PROPOSALS ARE SCREENED BY A RESEARCH ASSOCIATE WHO CHOOSES THE TOP 10 IN CONSULTATION WITH THE SENIOR DIRECTOR OF EVALUATION AND RESEARCH. SELECTIONS ARE BASED ON THE FOLLOWING CRITERIA:

- SCIENTIFIC MERIT OF THE RESEARCH PROPOSAL
- CANDIDATE'S QUALIFICATIONS AND ABILITY TO CARRY OUT THE PROPOSED RESEARCH
- APPLICABILITY OF PROJECT RESULTS TO OTHER REGIONS OR PRODUCTS
- WRITING/COMMUNICATION SKILLS

THE TOP 10 ARE THEN REVIEWED BY A PANEL OF SEVEN NON-TIMBER FOREST PRODUCTS EXPERTS WHO THEN MEET IN PERSON IN NY TO DISCUSS THE APPLICATIONS AND CHOOSE THE WINNER.

SCHEDULE A, PART IV-A - OTHER INCOME

DESCRIPTION -----	2006 ----	2005 ----	2004 ----	2003 ----	TOTAL -----
OTHER INCOM	139,763.	121,066.	46,809.		307,638.
	-----	-----	-----	-----	-----
TOTALS	139,763.	121,066.	46,809.		307,638.
	=====	=====	=====	=====	=====

Rainforest Alliance, Inc.

Attachment: Schedule A, Part VI-B, Lobbying for Non-Electing Charities

The Rainforest Alliance, along with other NGOs, signed on to letters sent to U.S. legislators in support of the Combat Illegal Logging Act and an amendment to the Lacey Act to combat illegal logging, and prepared communications materials summarizing the Lacey Act amendment after it as passed.

The Rainforest Alliance communicated and met with representatives of an agency in the Netherlands, as well as a member of the Dutch parliament, to comment on proposed Dutch legislation to require that public procurement with respect to vending machines in the Netherlands require Fair Trade products.

55

Description of Program Service One

The Rainforest Alliance works around the globe to create standards that help people protect biodiversity and offer economic opportunities to populations in need. We work primarily in the forestry, agriculture, and tourism sectors, but also in educating consumers and training the media to be more effective advocates of conservation.

Over the last four centuries, half of the world's forests have been cleared. In response to this significant loss, the Rainforest Alliance pioneered forestry certification in 1989 with the launch of **SmartWood**, the first global sustainable forestry certification program. To encourage market-driven, environmentally and socially sound management of forests, tree farms, and forest resources, we issue a seal of approval to operations that follow strict standards for sustainability. SmartWood certification guarantees consumers that any forest product – whether it's a guitar, a bookcase or raw lumber—comes from a forest or tree farm managed to conserve biodiversity and ensure the rights of workers and local people. Our management standards require selective cutting practices, the protection of wildlife habitat, the conservation of biological resources and the minimization of damage to the forest during harvesting. To date, we have certified more than 34 million acres in 50 countries around the world.

To integrate productive agriculture, biodiversity conservation and human development, we developed our Sustainable Agriculture program. After it significantly reduced its use of herbicides, invested in recycling and provided its workers with improved training, housing, health benefits and education, ten years ago we certified our first banana farm. Today, we also stamp our seal of approval on well-managed coffee, cocoa, citrus and cut-flower and fern farms. Through collaboration with farmers, scientists and activists involved in our Sustainable Agriculture Network – a consortium of nine leading conservation groups in Latin America – we are sowing the seeds of change.

Through certification and training, we help land users and businesses produce goods and provide services according to practices that will not deplete resources or negatively impact local communities. The availability of certified products gives consumers the choice to “vote with their dollars” – to influence the corporate commitment to sustainability.

The Rainforest Alliance is also working with other organizations and experts worldwide to develop best management practices for sustainable tourism that help tourism suppliers and consumers effectively contribute to biodiversity conservation and social welfare. As an initial step towards forming an international accreditation body for certifying sustainable tourism operations, we launched the Sustainable Tourism

Network of the Americas, which helps tour operators, governments, civic organizations and travelers share information on benefits and standards for sustainable tourism.

The Rainforest Alliance's success is predicated on the partnerships we establish with local conservation groups and communities around the globe. We collaborate with partner groups in the development of our standards and train them to perform certification assessments. In an effort to change land use practices in biodiversity rich areas, we partner with international conservation organizations and undertake strategic alliances with companies to ensure that their practices are environmentally, socially and economically sustainable.

Worldwide, we work closely with industry leaders, journalists, conservation colleagues and government officials, and we reach tens of thousands of concerned consumers, children, parents and teachers through our publications, special events and Web site (www.rainforest-alliance.org). Our virtual reference library, the **Eco-Index** (www.eco-index.org), helps conservationists and scientists North and South share information and insights. To ensure the success of conservation initiatives around the world, we train journalists overseas on sustainable development reporting. We have also developed an online, multilingual curriculum for elementary school students in order to educate the leaders of tomorrow about global conservation.

	<u>Grants</u>	<u>Expenses</u>
Form 990, Part III, line a	<u>\$ 340,949</u>	<u>\$ 13,795,240</u>