# Form **990**

(Rev.	January 2020)	
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PUBLIC INSPECTION COPY Return of Organization Exempt From Income Tax

Department of the Treasury

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

▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public nspectio

OMB No. 1545-0047

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Inte	rnal Reve	enue Serv	ice	Go to www	w.irs.gov/Form	1990 for in	structions	and the la	atest infor	mation.			Inspec	tion	
A	For th	e 2019	calenda	ar year, or tax year beginning			, 2019,	and end	ing			, 2	0		
			C Name	of organization						D Employe	r identific	ation num	ıber		
в	Check if a	applicable:	RAI	NFOREST ALLIANCE, I	INC.					13-3	337789	93			
	Addre		Doing	business as											
		e change	•	er and street (or P.O. box if mail is	not delivered to s	treet addres	s)	Room/sui	ite	E Telepho	ne numbe	r			
	-	l return	125	BROAD STREET, 9TH	FLOOR					(212)					
	Final	return/		r town, state or province, country, a		postal code	)			( /	677-				
	termi Amer	inated nded		YORK, NY 10004						<b>G</b> Gross re	ceints \$	47	852	,037	
	returi Appli	n cation		and address of principal officer:	ALIK HI	NCKSON				H(a) Is this			Yes	XN	
	pend	ing		BROAD STREET, 9TH				0004		subord	dinates?		Yes		
-	Tax or	empt sta							507	H(b) Are all		a list. (see ins			
<u>+</u>				X 501(c)(3) 501(c) ( AINFOREST-ALLIANCE	)   (inser	t no.)	4947(a)(1)	or	527					'	
J 				[ ] ] ] ]		011-01		LV		<b>H(c)</b> Group tion: 1987	· ·			NY	
K	Part I	-	ization:		Association	Other 🕨		Lite	aronorman		W State	e or regar o	omicile:	111	
				e the organization's mission o				סצכ איד	י יד יד יד	NTFDCF			CINE	<u></u>	
				URE & FORESTS TO IN						NIEROE,		01 00		55,	
nce n				MING HOW LAND IS US						P CHOT					
Activities & Governance					-										
0V6	2		this bo	, ,,,		•	•					I		19.	
ۍ د				ing members of the governing										19.	
es	4			lependent voting members of t											
viti	5			of individuals employed in cale										126.	
\cti	6			of volunteers (estimate if neces										8.	
	10			d business revenue from Part V	. ,									0.	
	b	Net ur	nrelated	business taxable income from	Form 990-T, lin	ne 39			• • • • •						
										Prior Ye			rrent Y		
e	8			and grants (Part VIII, line 1h)					••	16,134	-			,163.	
Revenue	9										20		,855.		
Re	10									497	-		555	,858.	
	11			e (Part VIII, column (A), lines 5,						44 050	0.	1.5		0.	
	12			- add lines 8 through 11 (must						44,858				,876.	
	13			milar amounts paid (Part IX, colu						3,125		3	,534	,637.	
	14			to or for members (Part IX, colu							0.	1.0		0.	
Ses	15			r compensation, employee bene						20,339		17	17,609,77		
Expenses	16a	Profes	ssional f	undraising fees (Part IX, column	n (A), line 11e)				•• –	156	,770.		378	,146.	
a X I	b			ing expenses (Part IX, column (I					_						
_	17			es (Part IX, column (A), lines 11						15,132				,370.	
	18			s. Add lines 13-17 (must equal						38,754				,925.	
	19	Reven	ue less	expenses. Subtract line 18 from	n line 12 💶 💶					6,104	-			,951.	
Net Assets or	5									ning of Cur			d of Yea		
sset	20			Part X, line 16)					📃	24,439				,185.	
Å,	21	Total I	iabilities	(Part X, line 26)						10,146				,405.	
				fund balances. Subtract line 21	from line 20.					14,292	,854.	26	,437	,780.	
	art II		gnature												
Ur	nder per Je. corre	nalties c ect. and	of perjury, complete	I declare that I have examined th . Declaration of preparer (other than	is return, includi officer) is based	ng accompa I on all infor	anying sched mation of whi	ules and st ich prepare	tatements, a er has anv ki	and to the b nowledge.	est of my	knowledg	e and be	elief, it is	
Si	an		ignature												
	ere		-							Date					
		<b>—</b>		HINCKSON			CFO								
				int name and title	Deer / 1	- 1						DTIN			
Pai	id			parer's name	Preparer's signa			Date	10/00-	Check		PTIN			
	eparer	BRAI	BRAD CARUSO BRAD CARUSO 10/13/2020 self-em										24913	34	
	e Only		name	►WITHUMSMITH+BROWN						Firm's EIN					
				ONE TOWER CENTER BLVD 141						Phone no.		-828-1			
_	-			his return with the prepare		-	nstructions)				<u></u>		Yes	No	
Fo	r Pape	rwork	Reducti	on Act Notice, see the separat	e instructions.							Fo	rm 990	0 (2019)	

• CT7 =    =	019)					Page 2
Part III			vice Accomplishm		e Dort III	X
Briefly		organization's mis		ote to any line in this	s Part III	A
	SCHEDULE O	0	551011.			
		-				
Did th	e organizatior	undertake any s	significant program	services during th	ne year which were not listed o	n the
		se new services				
Did th	e organizatio	on cease condu	cting, or make si	gnificant changes	in how it conducts, any pro	gram
						X Yes No
		se changes on S				
					of its three largest program	
					o report the amount of grants	and allocations to others
the tot	ai expenses, a	ind revenue, il an	y, for each progran	a service reported.		
		· /= •				
a (Code:		) (Expenses \$			3,229,077. ) (Revenue \$	1,356,312.)
LANDS	SCAPES AND	COMMUNITIE	S (SEE SCHEDU	LE O)		
b (Code:		) (Expenses \$	9,585,494. inclu	ding grants of \$	305,560. ) (Revenue \$	19,124,113. )
MARKE	TS TRANSF	ORMATION (S	EE SCHEDULE 0	()		
		•				
c (Code:		) (Expenses \$		Jing grants of \$	) (Revenue \$	430)
		) (Expenses \$ (SEE SCHED		ding grants of \$	) (Revenue \$	430)
				ding grants of \$	) (Revenue \$	430)
				Jing grants of \$	) (Revenue \$	430.)
				Jing grants of \$	) (Revenue \$	430.)
				ding grants of \$	) (Revenue \$	430.)
				ding grants of \$	) (Revenue \$	430. <b>)</b>
				ding grants of \$	) (Revenue \$	430)
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				ding grants of \$	) (Revenue \$	430)
				ding grants of \$	) (Revenue \$	430)
				ding grants of \$	) (Revenue \$	(
				ding grants of \$	) (Revenue \$)	)
COMMU	JNICATIONS	ices (Describe on	ULE O)	ding grants of \$	) (Revenue \$)	430)
	JNICATIONS	ices (Describe on	ULE O)	) (Re	) (Revenue \$)	)

Is the organization described in section 501(c)(3) or 4347(a)(1) (other than a private foundation)? // 'Yes' complete Schedule A.         'Yes' and the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public citize? If 'Yes' complete Schedule C, Part I.         'Yes' a 'Ze'           3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public citize? If 'Yes' complete Schedule C, Part I.         'X           4 X         Section 501(c)(3) organization and section to forganization and section to forganization activates on the section that receives membership dues, assessments, or similar amounts as defined in Review Procedure 39-19 // Yes' complete Schedule D, Part I.         'X           9 Did the organization maintain any doora advised lunds or any similar funds or accounts for which doors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which doors have the right to provide advice and the distribution or investment of amounts in such funds or accounts for which doors have the right to provide advice on the distribution or investment or amounts in such funds or accounts for which doors have the right to provide advice on the distribution or provide redit consenses, or other similar asset? If 'Yes' complete Schedule D, Part I.         'X           9 Did the organization report an amount for investments-other assets in doon-restricted endowments or in quasi endowments? If 'Yes' complete Schedule D, Part V.         'I           10 Did the organization report an amount for investments-organ related in Part X, line 12 H hat is 5% or more of its total assets reported in Part X, line 167 H 'Yes', comple	-	990 (2019)		F	Page 3
1         Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A, the organization required to complete Schedule B, Schedule A, Chart M, Schedule A, Schedule A, Chart M, Schedule A, Schedule A, Schedule B, Schedule C, Part I, Schedule C, Part II, Schedule C	Part	IV Checklist of Required Schedules		N	N
complete Schedule A.         1         x           2         1s the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public officer 11 "%s" complete Schedule C. Part I.         3         x           4         Section 501(c)(3) organizations. Bid the organization engage in lobbying activities, or have a section 501(c)         3         x           5         Is the organization asciton 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar and obrar 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 for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts to the environment. Nistoric land areas, or historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part I.         5         x           8         Did the organization maintain celections of works of at, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part I.         7         X           9         Did the organization, directions of works of at, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part I.         7         X           9         Did the organization, directions of accounts to the state organization, choid assets in donor-restricted endowments or in quasi endowments? If 'Yes,' complete Schedule D, Part V.         9         ×		In the experimentian described in section $E(A/a)(a)$ on $A(AZ/a)(A)$ (other then a private foundation) of $W/a$		Yes	No
2         Is the organization required to complete Schedule and Contributors (see instructions)? <ul> <li>Did the organization engage in direct or indirect political campaign activities on behall of or in opposition to candidates for public office? If Yes," complete Schedule C, Part I.</li> <li>Section 501(c)(3) organizations. Bid the organization engage in lobbying activities, or have a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership (best assessments, or similar announts as defined in Revene Proceedure B-169 If Yes," complete Schedule C, Part I.</li> <li>Did the organization maintain any donor advised funds or any similar funds or accounts? If Yes," complete Schedule D, Part II.</li> <li>Did the organization celevice or fold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If Yes," complete Schedule D, Part II.</li> <li>Did the organization celevice or downers of an, historical treasures, or other similar assets? If Yes," complete Schedule D, Part II.</li> <li>Did the organization report an amount for Part X, ino 21, for secrow or custodial account liability, serve as a custodian for amounts not listed in Part X, ino 21, for secrow or custodial account liability, serve as a custodian for amount for linvestments -program related in Part X, line 120 If Yes," complete Schedule D, Part VI.</li> <li>Did the organization report an amount for linvestments-offer securities in Part X, line 120 If Yes," complete Schedule D, Part VI.</li> <li>Did the organization report an amount for linvestments-offer securities in Part X, line 120 If Yes," complete Schedule D, Part VI.</li></ul>	1		1	x	
<ul> <li>3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I.</li> <li>3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year! If "Yes," complete Schedule C, Part I.</li> <li>4 X</li> <li>5 Is the organization anisotic (S)(S) of 501(c)(S), or 501(c)(S) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 94-91? If "Yes," complete Schedule C, Part I.</li> <li>6 Did the organization maintian any donar advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II.</li> <li>7 X</li> <li>9 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV.</li> <li>8 X</li> <li>9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, dabt management, credit repat, or debt neganization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part IV.</li> <li>10 Did the organization report an amount for lands buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V.</li> <li>11 Did the organization report an amount for lands buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V.</li> <li>11 Did the organization report an amount for lands buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V.</li> <li>11 Did the organization report an amount for lancestherest posticad by Part V.</li> <li>11 Did the organization</li></ul>	2		<u> </u>		
candidates for public office? If 'Yes,' complete Schedule C, Part I.       3       X         4       Section 501(c)(3) organizations. Did the organization again in lobbying activities, or have a section 501(in), e10(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 // 'Yes,' complete Schedule C, Part II.       5       X         5       Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the organization maintain any donor advised funds or any similar tunds or accounts for which donors have the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part II.       6       X         7       X       8       Complete Schedule D, Part II.       7       X         8       Did the organization received no anount 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 neganization schedule D, Part IV.       8       X         10       Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part V.       10       X         11       the organization report an amount for investments-other securities in Part X, line 10? If 'Yes,' complete Schedule D, Part VI.       10       X         11       the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more of its tot			-		
<ul> <li>Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year // 'Vex,' complete Schedule D, Part //</li> <li>Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts an defined in Revenue Procedure 98-19? // 'Yes,' complete Schedule D, Part //</li> <li>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? //</li> <li>Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the environment, historic directures? If 'Yes,' complete Schedule D, Part //</li> <li>Did the organization maintain collections of works of ant, historical treasures, or other similar assess? // 'Yes,' complete Schedule D, Part //</li> <li>Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts no listed in Part X, ior provide credit counseling, delt management, credit repair, or debt negrainization, directly or through a related organization, hold assets in donor-restricted endowments? // 'Yes,' complete Schedule D, Part V.</li> <li>Did the organization report an amount for linestiments-other securities in Part X, line 120 // 'Yes,'' complete Schedule D, Part V.</li> <li>Did the organization report an amount for linestiments-other securities in Part X, line 130 // 'Yes,'' complete Schedule D, Part V.</li> <li>Did the organization report an amount for other assatis in Part X, line 130 / Hat is 5% or more of its total assets reported in Part X, line 157 // 'Yes,'' complete Schedule D, Part X.</li> <li>Did the organization report an amount for other assatis in Part X, line 150 // Hat is S% or more of its total assets reported in</li></ul>	-		3		Х
5         Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership duas, assessments, or similar amounts as defined in Revenue Procedure 96-197 // "Yes," complete Schedule D, Part II.         S         X           0         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? //         6         X           7         Did the organization maintain collections of works of art, historical treasures, or other similar assets? // "Yes," complete Schedule D, Part II.         7         X           8         Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodial for amounts not listed in Part X. or provide credit counseling, debt management, credit repair, or debt negonizations encosers // "Yes," complete Schedule D, Part V         9         X           10         Did the organization report an amount for land, buildings, and equipment in Part X, line 107 // "Yes," complete Schedule D, Part V         10         X           11         The organization report an amount for land, buildings, and equipment in Part X, line 107 // "Yes," complete Schedule D, Part V         110         X           11         Did the organization report an amount for land, buildings, and equipment in Part X, line 107 // "Yes," complete Schedule D, Part X         110         X           11         Did the organization spate or consolidated financial statements for that tas essisting on	4				
<ul> <li>assessments, or similar amounts adefined in Revenue Procedure 84-197 // "Yes," complete Schedule 0, Part II.</li> <li>Did the organization maintain any donor advised funds or any similar funds or accounts? // "Yes," complete Schedule 0, Part II.</li> <li>Complete Schedule 0, Part II.</li> <li>Did the organization report an amount in Part X. line 21. for serve or or custodial account liability, serve as a custodian for amounts on listed in Part X. ion 21. for serve or or custodial account liability, serve as a custodian for amounts not listed in Part X. ion 21. for serve or or custodial account liability, serve as a custodian for amounts on listed in Part X. ion 21. for serve or or custodial account liability, serve as a custodian for amounts not listed in Part X. ion 21. for serve or or custodial account liability. serve as a custodian for amount in Part X. ion 21. for serve or or custodial account liability.</li> <li>Did the organization report an amount for land, buildings, and equipment in Part X. line 10? // "Yes," complete Schedule D, Part VI.</li> <li>Did the organization report an amount for land, buildings, and equipment in Part X. line 10? // "Yes," complete Schedule D, Part VI.</li> <li>Did the organization report an amount for therestments-other securities in Part X. line 10? // "Yes," complete Schedule D, Part VI.</li> <li>Did the organization report an amount for therestments chart securities in Part X. line 10? // "Yes," complete Schedule D, Part VI.</li> <li>Did the organization report an amount for therestments chart securities in Part X. line 10? // "Yes," complete Schedule D, Part VII.</li> <li>Did the organization report an amount for therestments program related in Part X. line 10? // "Yes," complete Schedule D, Part VII.</li> <li>Did the organization report an amount for therestments program related in Part X. line 10? // Yes," complete Schedule D, Part VII.</li> <li>Did the organization report an amount for therestments program related in Part X. line 10? // Yes," complete Schedul</li></ul>		election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
<ul> <li>6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advised on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II.</li> <li>7 Did the organization calcules on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II.</li> <li>8 Did the organization maintain collections of works of ant, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II.</li> <li>9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, ine 12, hor exercise or or custodial account liability, serve as a custodian for amounts in Ves," complete Schedule D, Part IV.</li> <li>10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V.</li> <li>11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V.</li> <li>11 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.</li> <li>11 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.</li> <li>11 Did the organization report an amount for land buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.</li> <li>11 Did the organization report an amount for land statements for the tax year? If "Yes," complete Schedule D, Part X.</li> <li>11 Did the organization separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X.</li> <li>12 Did the organization aspearate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Parts X and XII.</li> <li>13 Lis the organization necton a mount fo</li></ul>	5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If		assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
"Yes," complete Schedule D, Part I,       1         7       Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes," complete Schedule D, Part II,       7         8       Did the organization receive or hold a conservation easement, including easements to constitution to anot the instructures? If 'Yes," complete Schedule D, Part II,       8         9       Did the organization report an amount in Part X, Line 21, for escrow or custodial account liabity, serve as a custodian for amounts not listed in Part X, cine role custodian consortestricted endowments or in quasi endowments? If 'Yes," complete Schedule D, Part V.       9       X         10       Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes," complete Schedule D, Part VI.       10       X         11       If the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes," complete Schedule D, Part VI.       11a       X         11       Did the organization report an amount for investments-program related in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes," complete Schedule D, Part X.       11a       X         11       Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes," complete Schedule D, Part X.       11a       X         <	6				
<ul> <li>7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II.</li> <li>7 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, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts on listed in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts on listed in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts of the following questions is 'Yes,' then complete Schedule D, Part VI.</li> <li>8 Did the organization report an amount for linestiments-program related in Part X, line 12, for escrowplete Schedule D, Part VI.</li> <li>9 Did the organization report an amount for investments-program related in Part X, line 13, fut is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part XI.</li> <li>9 Did the organization report an amount for other assets in Part X, line 13, fut is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part X.</li> <li>10 Did the organization report an amount for other assets in Part X, line 13, fut is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part X.</li> <li>11 Did the organization assets and the organization maintain ander the Yes,' complete Schedule D, Part X.</li> <li>12 Did the organization assets and the organization maintain andifice metry is a solutised of the united States, o</li></ul>					
the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.       7       ×         8       Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"       8       ×         9       Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, ine 12, into the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V.       9       ×         10       Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.       10       X         11       The organization report an amount for investments-order securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI.       11a       X         11       Did the organization report an amount for other assets in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       11a       X         11       Did the organization separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X       11a       X         12       Did the organization included in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule D, Part X       11a       X         13       Is the organization meth an offl	_		6		X
<ul> <li>B Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes," complete Schedule D, Part II.</li> <li>D Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes," complete Schedule D, Part V.</li> <li>D Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If 'Yes," complete Schedule D, Part V.</li> <li>I If the organization services and the following questions is 'Yes," then complete Schedule D, Part VI, VII, VIII, IX, or X as applicable.</li> <li>a Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes," complete Schedule D, Part VI.</li> <li>c Did the organization report an amount for threstments-orber securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes," complete Schedule D, Part VI.</li> <li>c Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes," complete Schedule D, Part X X.</li> <li>d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in consolidated financial statements for the tax year? If 'Yes," complete Schedule D, Part X X.</li> <li>D Was the organization report on Part IX, column (A), line 3, more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States?</li> <li>b Did the organization report non Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for foreign individuals? If 'Yes, 'complete Schedule D, Part X and XI.</li> <li>10 dit the o</li></ul>	7		-		v
complete Schedule D, Part II       8       X         9       Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt neganization services? If 'Yes,' complete Schedule D, Part V.       9       X         10       Did the organization, directly or through a related organization, hold assets in donor-restricted endowments? If 'Yes,' complete Schedule D, Part V.       10       X         11       If the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI.       10       X         12       Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VI.       11a       X         13       Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part X.       11a       X         14       X       11d       X       11d       X         15       Did the organization included in consolidated financial statements for the ax year in duve do total assets reported in action answered 'No' to line 12.       11d       X         14       X       11d       X       11d       X         14       Did the organization inc	0				
<ul> <li>9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt neogatization, directly or through a related organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V</li> <li>10 Did the organization's answer to any of the following questions is 'Yes," then complete Schedule D, Part VI, VII, VIII, IX, or X as applicable.</li> <li>a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI</li> <li>b Did the organization report an amount for investments-program related in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI</li> <li>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? If "Yes," complete Schedule D, Part VI</li> <li>b Did the organization report an amount for other liabilities the Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X</li> <li>b Did the organization report an amount for other lassities in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X</li> <li>b Did the organization report an amount for other liability or uncertain tax positions under FIN 48 (ASC 740)? If Yes," complete Schedule D, Part X</li> <li>b Was the organization neyort on Part IX, column (A), line 3, more than \$10,000 from grantmaking, fundraising, busieses, investment, and program service activities outside the United States?,</li></ul>	o	-	0		x
custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV       y         10       Did the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V, VII, VII, IV, II, X, or X as applicable.       10       X         11       If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V       11a       X         11       If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V       11a       X         11       Did the organization report an amount for investments-orgar neleted in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI       11a       X         11       Did the organization report an amount for other lassitiance last tatements for the tax year include a footnote that addresses the organization separate or consolidated financial statements for the tax year include a footnote that addresses the organization included in occonsolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Part X       11a       X         12a       Did the organization neord on Part IX, column (A), line 3, more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States?       114a       X         13       It do organ	9		-		
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<ul> <li>b) Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII</li> <li>c) Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII</li> <li>d) Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII</li> <li>d) Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X</li> <li>11d X</li> <li></li></ul>	а				
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Schedule D, Parts XI and XII,       12a       X         b Was the organization included in consolidated, independent audited financial statements for the tax year? If       "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       13       Is the organization asked the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       13       X         14a Did the organization maintain an office, employees, or agents outside of the United States?       13       X         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? If "Yes," complete Schedule F, Parts I and IV       14a       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of agaregate grants or other assistance to or for any foreign individuals? If "Yes," complete Schedule F, Parts II and IV       15       X         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16       X         17       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)       17       X         18       Did the organization report more t			11f	Х	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If       "12b         "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       13         13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E,	12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
<ul> <li>"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</li> <li>13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.</li> <li>14a Did the organization maintain an office, employees, or agents outside of the United States?</li> <li>b Did the organization have aggregate revenues or expenses of more than \$10,000 form grantmaking, fundraising, business, investment, and program service activites outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV</li> <li>15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for roreign individuals? If "Yes," complete Schedule F, Parts III and IV</li> <li>16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV</li> <li>17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions).</li> <li>18 Did the organization report more than \$15,000 of gross income and contributions on Part VIII, line 9a? If "Yes," complete Schedule G, Part II.</li> <li>20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H.</li> <li>20a Did the organization report more than \$5,000 of grants or other assistance to any domestic organization organization organization attach a copy of its audited financial statements to this return?</li> <li>20b</li> </ul>			12a	X	
<ul> <li>13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E</li></ul>	b				
14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         14       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         14       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?       14a       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       14b       X         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV       15       X         17       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions).       17       X         18       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?       18       X         19       Did the organization operate one or more hospital facilities? If "Yes," c			-	X	
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fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       15       X         16       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)       17       X         18       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II       18       X         19       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         20a       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or       19       X         20a       Did the organization perfort more than \$5,000 of grants or other assistance to any domestic organization or       20a       X         17       X       18       X       19       X         20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H </td <td></td> <td></td> <td>14a</td> <td>X</td> <td></td>			14a	X	
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Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II       18       X         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?       19       X         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?       19       X         20 a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or       X		Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	X	
19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III       19       X         20 a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or       X	18				
If "Yes," complete Schedule G, Part III.       19       X         20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or       1       1			18	X	
20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20 a       X         b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20 b       20 b         21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or       X       20 b	19				37
bIf "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?20b21Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or20b			<u> </u>		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or					~
			ZUD		
domestic government on Part IX, column (A) line 1? If "Yes" complete Schedule I Parts Land II	21	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	x	

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Form 9	990 (2019)
Par	t IV Checklist of Required Schedules (continued)
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the

23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J.	23	Х	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
с	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34	Х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2.	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note: All Form 990 filers are required to complete Schedule O.	38	Х	
Part				<b></b>
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		X
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable <b>1a</b> 61 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable <b>1b</b> 0.			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	4-	Х	
	reportable gaming (gambling) winnings to prize winners?	1c	Δ	

Yes No

Х

22

Form	990 (2019)		F	Page 5							
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)										
			Yes	No							
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax										
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 126										
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X								
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)										
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X							
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b									
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,										
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X								
b	If "Yes," enter the name of the foreign country										
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).										
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a									
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X							
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c									
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the										
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X							
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or										
	gifts were not tax deductible?	6b									
7	Organizations that may receive deductible contributions under section 170(c).										
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	_	v								
	and services provided to the payor?	7a	X X								
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Λ								
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7.		х							
	required to file Form 8282?	7c									
	If "Yes," indicate the number of Forms 8282 filed during the year	7e		х							
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?										
	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?										
-	<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?										
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.	7h									
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the	8									
9	sponsoring organization have excess business holdings at any time during the year?										
-	Did the sponsoring organization make any taxable distributions under section 4966?	9a									
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b									
	Section 501(c)(7) organizations. Enter:										
	Initiation fees and capital contributions included on Part VIII, line 12										
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b										
11	Section 501(c)(12) organizations. Enter:										
	Gross income from members or shareholders										
	Gross income from other sources (Do not net amounts due or paid to other sources										
~	against amounts due or received from them.)										
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a									
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year										
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1									
а	Is the organization licensed to issue qualified health plans in more than one state?	13a									
	Note: See the instructions for additional information the organization must report on Schedule O.										
b	Enter the amount of reserves the organization is required to maintain by the states in which										
	the organization is licensed to issue qualified health plans										
с	Enter the amount of reserves on hand										
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х							
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b									
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or										
	excess parachute payment(s) during the year?	15		X							
	If "Yes," see instructions and file Form 4720, Schedule N.										
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X							
	If "Yes," complete Form 4720, Schedule O.										

Form 9	990 (2019) RAINFOREST ALLIANCE, INC. 13-3377	893	F	Page 6
Part	VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below,	and	for a	"No"
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.			
	Check if Schedule O contains a response or note to any line in this Part VI			Х
Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year <b>1a</b> 19	-		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	2		x
2	any other officer, director, trustee, or key employee?			
3	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:		Х	
a	The governing body?	8a 8b	X	
	Each committee with authority to act on behalf of the governing body?	00		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses on Schedule O</i>	9		x
Secti	on <b>B. Policies</b> (This Section B requests information about policies not required by the Internal Revenue	-	.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Х	
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? .	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	4.04	Х	
	rise to conflicts?	12b	Λ	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12c	Х	
40	describe in Schedule O how this was done	120	X	
13 14	Did the organization have a written whistleblower policy?	14	Х	
14 15	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	166		
Secti	ion C. Disclosure	16b		1
	List the states with which a copy of this Form 990 is required to be filed $\blacktriangleright$ ATTACHMENT 1			
17 18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T	(See	tion 5	501(a)
10	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.         X       Own website    Another's website X Upon request Other (explain on Schedule O)	(380		ο r(C)
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict o and financial statements available to the public during the tax year.	f inter	est p	oolicy,
20	State the name, address, and telephone number of the person who possesses the organization's books and record ALIK HINCKSON 125 BROAD STREET, 9TH FLOOR NEW YORK, NY 10004 212-677-1900	s 🕨		

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Part VII	Compensation	of	Officers,	Directors,	Trustees,	Key	Employees,	Highest	Compensated	Employees,	and
	Independent Co	ontra	actors								

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

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

		(C)								
(A)	(B)			Pos	ition			(D)	(E)	(F)
Name and title	Average					e than c		Reportable	Reportable	Estimated amount
	hours					is both		compensation	compensation	of other
	per week (list any					or/trust	<u> </u>	from the organization	from related organizations	compensation from the
	hours for	Individual trustee or director	Institutional trustee	Officer	Key employee	High	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and
	related	/idua	tutio	ĕr	emp	est loye	ler			related organizations
	organizations below	or tr	nal		loye	eom				
	dotted line)	Istee	trust		õ	pen				
	,		ee			Highest compensated employee				
						<u>a</u>				
(1)NIGEL SIZER	40.00									
CHIEF PROGRAM OFFICER	0.				X			348,490.	0.	46,293.
(2) JOHANNES DE GROOT	40.00									
CHIEF EXECUTIVE OFFICER	1.00			Х				357,164.	0.	21,939.
(3) ALIK ODINGA HINCKSON	40.00									
CHIEF FINANCIAL OFFICER	1.00			Х				261,280.	0.	33,241.
(4) LESLIE PARK	40.00									
GENERAL COUNSEL & SECRETARY	1.00			Х				253,669.	0.	24,877.
(5) SUSAN TRESSLER	40.00									
CHIEF EXT REL OFFICER	0.				Х			241,092.	0.	35,101.
(6) SUSAN ARNOT HEANEY	40.00									
DIR OF MARKETING(THRU 11/5/19)	0.					Х		158,992.	0.	29,662.
(7) ALEX MORGAN	40.00									
CHIEF MARKETS OFFICER	0.				Х			157,956.	0.	18,504.
(8) JACQUELYN PETERS LEVY	40.00									
DIRECTOR, GLOBAL ACCOUNTING	0.					Х		124,249.	0.	39,921.
(9) MICHAEL IRA BROWN	40.00									
DIRECTOR OF INST. RELATIONS	0.					Х		141,813.	0.	18,560.
(10)RIA STOUT	40.00									
CHIEF REGIONAL OFFICER	0.				Х			160,079.	0.	0.
(11) <sup>MIGUEL</sup> ZAMORA	40.00									
DIRECTOR, MARKETS TRANSF-CORE	0.					Х		135,635.	0.	17,389.
(12) MOLLY STARK	40.00									
ASSOCIATE GENERAL COUNSEL	0.					Х		132,077.	0.	7,912.
(13) DANIEL R. KATZ	1.00									
DIRECTOR, BOARD CHAIR	1.00	X		Х				0.	0.	0.
(14) ANTONIUS VAN DER LAAN	1.00									
DIRECTOR, VICE CHAIR	1.00	X		Х				0.	0.	0.

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(A) Name and title	(B) Average hours per week (list any hours for	box, office	unles er and	Pos neck s pe d a d	erson lirect	e than of is both or/truste	an ee)	<b>(D)</b> Reportable compensation from the	(E) Reportable compensation fror related organizations	other compensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC	) from the organization and related organizations
) PETER M. SCHULTE DIRECTOR, TREASURER	1.00	x		x				0.	0	
) WENDY GORDON DIRECTOR	1.00	x						0.	0	
) LABEEB M. ABBOUD DIRECTOR	1.00	x						0.	0	
) TASSO AZEVEDO DIRECTOR	1.00	X						0.	0	•
DIRECTOR	1.00 1.00	x						0.	0	•
)) DANIEL COUVREUR DIRECTOR	1.00	X						0.	0	
) MARILU HERNANDEZ DE BOSOMS DIRECTOR	1.00 1.00	x						0.	0	
2) PETER LEHNER DIRECTOR	1.00	x						0.	0	
)) ERIC ROTHENBERG DIRECTOR	1.00	x						0.	0	
DIRECTOR	1.00	x						0.	0	
) ANNEMIEKE WIJN DIRECTOR	1.00	Х						0.	0	
<ul> <li>b Sub-total</li> <li>c Total from continuation sheets to Part VII, \$</li> <li>d Total (add lines 1b and 1c)</li> </ul>				•••	· ·	· · ·		2,472,496. 0. 2,472,496.	_	
Total number of individuals (including but not reportable compensation from the organizatio Did the organization list any <b>former</b> offi employee on line 1a? <i>If "Yes," complete Sched</i>	on ► cer, directo	23 or, or	3 tru	iste	e,	key e	mp	loyee, or highest	compensated	Yes N 3 2
For any individual listed on line 1a, is the organization and related organizations grindividual. Did any person listed on line 1a receive or	eater than	\$15 	50,00	00?	. If	"Yes	," (	complete Schedu	le J for such	<b>4</b> X
for services rendered to the organization? <i>If "</i> Y section <b>B. Independent Contractors</b>										5 2
Complete this table for your five highest con compensation from the organization. Report year.										
(A) Name and business ad	dress							(B) Description of se	rvices	(C) Compensation
							+			

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Form	000	(2019)	

(A)	(B)	ľ	•	yee (0				(D)	(E)		(F)
Name and title	Average hours per week (list any	Average hours per veek (list any         Position         Reportable compensation         Repo compensation           box, unless person is both an         from         relation				Reportab compensatior related	sation from other other				
	hours for related organizations below dotted line)	of Individual trustee or director	and Institutional trustee	a Officer			e) Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)		compensation from the organization and related organizations
) DR. ANURAG PRIYADARSHI DIRECTOR	1.00	x						0.		0.	
) DAN HOUSER	1.00										
DIRECTOR	1.00	х						0.		0.	
) JUAN ESTEBAN ORDUZ TRUJILLO	1.00										
DIRECTOR	1.00	Х						0.		0.	
) NALIN K. MIGLANI	1.00							-			
DIRECTOR )) NINA HAASE	1.00	X					-	0.		0.	
DIRECTOR	1.00	x						0.		ο.	
) ANA PAULA DE SOUSA NIMPUNO	1.00						+	0.		••	
DIRECTOR (THRU 8/2019)	1.00	x						0.		0.	
2) STEFANIE MILTENBURG	1.00						$\uparrow$				
DIRECTOR (THRU 8/2019)	1.00	Х						0.		0.	
3) VANUSIA M. CARNEIRO NOGUEIRA	1.00										
DIRECTOR	1.00	Х						0.		0.	
DIRECTOR (THRU 1/2019)	1.00	37						0.		0.	
		X								0.	
b Sub-total							▶	0.		0.	
c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c)	-			•••	•••						
Total number of individuals (including but not reportable compensation from the organizatio		hose 23		d al	bove	e) who	rec	ceived more than	\$100,000 of		
Did the organization list any former offic employee on line 1a? If "Yes," complete Sched											Yes N 3 2
For any individual listed on line 1a, is the organization and related organizations gr	sum of rep eater than	ortab \$15	le c 0,0	om 00?	pen If	sation <i>"Yes,</i>	an "c	d other compens complete Schedu	ation from the J for su	the <i>uch</i>	
individual Did any person listed on line 1a receive or for services rendered to the organization? <i>If</i> "Y	accrue co	mpen	satio	on f	from	n any	unr	elated organizatio	on or individ	ual	4 X 5 2
Section B. Independent Contractors	,										
Complete this table for your five highest com compensation from the organization. Report or year.											
(A) Name and business ad	dress							<b>(B)</b> Description of se	rvices	С	<b>(C)</b> ompensation

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 ►

-

		Check if Schedule O c	contains a respor	nse or note to ar	ny line in this Part \	/		
					(A) Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ល ល	1a	Federated campaigns	1a					
ant	b	Membership dues						
Contributions, Gifts, Grants and Other Similar Amounts		Fundraising events		471,598.				
	C .	-						
	d	Related organizations		7,600,000.				
s,	e	Government grants (contrib	outions) 1e	7,090,714.				
Sig	f	All other contributions, gifts,	, grants,					
her		and similar amounts not include	ed above . 1f	10,505,851.				
oti Oti	g	Noncash contributions inclu	uded in					
but		lines 1a-1f.	1g	\$ 46,026.				
สี บั	h	Total. Add lines 1a-1f			25,668,163.			
				Business Code				
e	2a	CONTRACT INCOME		541900	2,079,553.	2,079,553.		
ž		PARTICIPATION AGREEMENT	REVENUE / ROYALTI		18,318,143.	18,318,143.		
Sel	b	OTHER PROGRAM INCOME	111 1 11101 / 11011111	900099	83,159.	83,159.		
E S	c			900099	05,159.	03,139.		
gra Re	d							
Program Service Revenue	е							
Ф.	f	All other program service re		L				
	g	Total. Add lines 2a-2f		<u></u>	20,480,855.			
	3	Investment income (inclu	uding dividends,	interest, and				
		other similar amounts)		•	22,852.			22,852
	4	Income from investment of	f tax-exempt bond	proceeds .	0.			
	5	Royalties		· <b>▶</b>	0.			
			(i) Real	(ii) Personal				
	6a	Gross rents 6a	684,965.					
	b	Less: rental expenses 6b	684,965.					
		Rental income or (loss) 6c						
	C L			<b></b>	0.			
	d	Net rental income or (loss)	(i) Securities	(ii) Other	0.			
	7a	Gross amount from	(I) Securities					
		sales of assets	16.005	500.000				
		other than inventory 7a	46,026.	533,882.				
an	b	Less: cost or other basis						
Revenue		and sales expenses 7b	46,902.					
ev	с	Gain or (loss) 7c	-876.	533,882.				
	d	Net gain or (loss)			533,006.			533,006.
Other	8a	Gross income from	fundraising					
õ		events (not including \$						
		of contributions reported						
		•		415,294.				
		1c). See Part IV, line 18	· · · · · ·	415,294.				
	b	Less: direct expenses	•••••		0.			
	С	Net income or (loss) from f	-	· · · · · · · · · · · · · · · · · · ·	0.			
	9a	Gross income from	gaming	_				
		activities. See Part IV, line 1		0.				
	b	Less: direct expenses		0.				
	c	Net income or (loss) from	gaming activities	<u>▶</u>	0.			
	10a	Gross sales of inven	tory, less					
		returns and allowances		0.				
	b	Less: cost of goods sold		0.				
	c	Net income or (loss) from sa	ales of inventory		0.			
6		. ,		Business Code				
sino 🤹	44-							
ne	11a							
ella ver	b							+
Miscellaneous Revenue	C							
Miŝ	d	All other revenue		Ļ				
_	е	Total. Add lines 11a-11d .			0.			
	12	Total revenue. See instructi	ions	🕨	46,704,876.	20,480,855.		555,858.

#### 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 (C) Management and (A) Total expenses (B) Program service (D) Fundraising Do not include amounts reported on lines 6b. 7b. 8b. 9b. and 10b of Part VIII. general expenses expenses expenses 1 Grants and other assistance to domestic organizations 529,062 529,062 and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic 25,000 25,000 individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 2,980,575 2,980,575. 0 4 Benefits paid to or for members 5 Compensation of current officers, directors, 1,798,025. 651,175. 1,146,850 trustees, and key employees 6 Compensation not included above to disgualified persons (as defined under section 4958(f)(1)) and 0 persons described in section 4958(c)(3)(B) 11,779,908 9,065,122. 1,267,572. 1,447,214. 7 Other salaries and wages 8 Pension plan accruals and contributions (include 375,418. 268,647. 66,757 40,014. section 401(k) and 403(b) employer contributions) 2,748,051 488,657 292,903. 1,966,491. 9 Other employee benefits 96,819. 908,370. 650,025. 161,526 Payroll taxes 10 11 Fees for services (nonemployees): 0 a Management 230,865. 153,328 62,521 15,016. b Legal 55,522 50,135. 1,376. 4,011. c Accounting 0 d Lobbying 378,146 378,146. e Professional fundraising services. See Part IV, line 17. 0 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column 33,856. 4,240,340. 3,682,809. 523,675. (A) amount, list line 11g expenses on Schedule O.) $\ensuremath{ATCH}\xspace{-3}$ 179,135 822 112,604. 292,561. 12 Advertising and promotion 997,299. 1,174,680. 172,913. 4,468. 13 Office expenses 982,342. 796,725. 42,887. 142,730. 14 Information technology 0 15 Royalties 1,474,762. 1,263,025. 91,132 120,605. Occupancy 16 2,229,301. 49,487. 2,118,879. 60,935. 17 Travel Payments of travel or entertainment expenses 18 0 for any federal, state, or local public officials 88,611. 80,986 6,271 1,354. 19 Conferences, conventions, and meetings 0 Interest 20 0 21 Payments to affiliates 922,862. 913,919. 899 8,044. Depreciation, depletion, and amortization 22 271,728. 240,807. 7,811. 23,110. Insurance 23 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) AWORKSHOPS 892,854. 926,879. 31,100 2,925. hMEMBERSHIP/DUES/SUBSCRIPTION 184,278 153,996 5,736 24,546. -87,146. cBAD DEBT EXPENSE -80,624 6,522 dOTHER EXPENSES 168,263. 124,946. 1,525. 41,792. e All other expenses 34,684,925 27,697,794. 3,967,594 3,019,537. 25 Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the 26 organization reported in column (B) joint costs from a combined educational campaign and

0

fundraising solicitation. Check here

following SOP 98-2 (ASC 958-720)

if

rm 990 ( <b>Part X</b>				Page <b>11</b>
	Check if Schedule O contains a response or note to any line in this F	Part X		
		(A) Beginning of year		<b>(B)</b> End of year
1	Cash - non-interest-bearing	7,614,181.	1	8,989,606
2	Savings and temporary cash investments.	521,404.	2	26,971
3	Pledges and grants receivable, net	4,582,895.	3	4,984,363
4	Accounts receivable, net.	6,819,561.	4	7,957,600
5	Loans and other receivables from any current or former officer, director,			
	trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons	0.	5	0
6	Loans and other receivables from other disqualified persons (as defined			
	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0.	6	0
2 7 8 8	Notes and loans receivable, net	0.	7	0
8	Inventories for sale or use	0.	8	0
<sup>2</sup> 9	Prepaid expenses and deferred charges	666,289.	9	861,776
10 a	Land, buildings, and equipment: cost or other			
	basis. Complete Part VI of Schedule D 10a 1,735,991.			
b	Less: accumulated depreciation <b>10b</b> 1,094,639.	362,211.		641,352
11	Investments - publicly traded securities	2,661,689.		10,900,674
12	Investments - other securities. See Part IV, line 11	26,946.	12	29,224
13	Investments - program-related. See Part IV, line 11	0.	10	0
14	Intangible assets	800,000.		0
15	Other assets. See Part IV, line 11	384,474.	-	363,619
16	Total assets. Add lines 1 through 15 (must equal line 33)	24,439,650.	16	34,755,185
17	Accounts payable and accrued expenses	5,931,142.		5,904,709
18	Grants payable	945,931.		462,704
19	Deferred revenue.	1,656,341.	19	1,297,291
20	Tax-exempt bond liabilities	0.	20	C
21	Escrow or custodial account liability. Complete Part IV of Schedule D.	0.	21	U
22	Loans and other payables to any current or former officer, director,			
	trustee, key employee, creator or founder, substantial contributor, or 35%	0.		0
22	controlled entity or family member of any of these persons	0.		0
23 24	Secured mortgages and notes payable to unrelated third parties	0.	25	0
24 25	Unsecured notes and loans payable to unrelated third parties		24	0
25	parties, and other liabilities not included on lines 17-24). Complete Part X			
	of Schedule D	1,613,382.	25	652,701
26	Total liabilities. Add lines 17 through 25.	10,146,796.	25	8,317,405
	Organizations that follow FASB ASC 958, check here 🕨 🛛 🛛		20	0,01,100
07	and complete lines 27, 28, 32, and 33.	0 669 200	07	20,716,952
27 28	Net assets without donor restrictions	9,668,290. 4,624,564.	27	5,720,828
20	Organizations that do not follow FASB ASC 958, check here ►	1,021,301.	28	5,720,020
27 28 29 30 31 32 23	and complete lines 29 through 33.			
29	Capital stock or trust principal, or current funds		29	
30	Paid-in or capital surplus, or land, building, or equipment fund.		30	
2 31	Retained earnings, endowment, accumulated income, or other funds		31	
32	Total net assets or fund balances	14,292,854.	32	26,437,780
33	Total liabilities and net assets/fund balances	24,439,650.	33	34,755,185

Form 9	90 (2019)				Pa	ige <b>12</b>
Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1			04,8	
2	Total expenses (must equal Part IX, column (A), line 25)	2				925.
3	Revenue less expenses. Subtract line 2 from line 1	3				951.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1			354.
5	Net unrealized gains (losses) on investments	5		1	35,	770.
6	Donated services and use of facilities	6				0.
7	Investment expenses	7				0.
8	Prior period adjustments	8				0.
9	Other changes in net assets or fund balances (explain on Schedule O)	9		-	10,	795.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10	2	26,4	37,3	780.
Part						
	Check if Schedule O contains a response or note to any line in this Part XII					
			-		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplair	in			
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?.			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were con	npiled	or			
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audi	ted o	na			
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	-		-	37	
	the audit, review, or compilation of its financial statements and selection of an independent accounta			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, ex	kplain	on			
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for	rth in	the		v	
	Single Audit Act and OMB Circular A-133?		••••  -	3a	X	<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	•			х	
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a	udits		3b	~~~~	

SCHEDULE A (Form 990 or 990-EZ)

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.

OMB No. 1545-0047 2 Q

		nt of the Treasury evenue Service	•	Go to www.irs.go	//Form990 for instruction	ons and t	he latest i	nformation.	Inspection
Nam	e of t	he organization						Employer identifi	cation number
RA	INF	OREST ALLI						13-33778	
	rt I			•	rganizations must c			,	
	orga		•		is: (For lines 1 throug		-	,	
1					tion of churches desci				
2					. (Attach Schedule E				
3					rganization described				
4			•		conjunction with a hos	spital de	scribed in	n section 170(b)(1)(A)	(iii). Enter the
_		hospital's nan							
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in <b>section 170(b)(1)(A)(iv).</b> (Complete Part II.)							
6		-			rnmental unit describe	d in <b>soct</b>	ion 170(	b)(1)(A)(y)	
6 7	X								om the general public
'		-		(1)(A)(vi). (Compl	-	pport in	om a go		on the general public
8					)(1)(A)(vi). (Complete	Part II )			
9				-	ed in section 170(b)(1	-		l in conjunction with a	land-grant college
•		-	-		riculture (see instruct		-	-	
		university:		g		,.		·······	
10 11		receipts from support from acquired by th	activities rela gross investm ne organizatio	ted to its exempt f lent income and u n after June 30, 1	ore than 331/3 % of its unctions - subject to ( nrelated business tax 975. See <b>section 509</b> usively to test for publi	certain e able inco ( <b>a)(2).</b> (0	exception ome (less Complete	s, and (2) no more tha s section 511 tax) from Part III.)	n 331/3% of its
12		•	•	•	•	-			carry out the purposes
		of one or mo	re publicly su	pported organizati	ons described in sect	ion 509	<b>(a)(1)</b> or	section 509(a)(2). S	See section 509(a)(3).
		Check the box	in lines 12a t	hrough 12d that d	escribes the type of s	upporting	g organiz	ation and complete li	nes 12e, 12f, and 12g.
а		<b>Туре I.</b> A su	upporting orga	anization operated	, supervised, or contr	olled by	its supp	orted organization(s),	typically by giving
		the supporte	ed organizatio	on(s) the power to	regularly appoint or e	lect a m	ajority of	the directors or truste	es of the
	_	_ supporting of	organization. N	/ou must complet	e Part IV, Sections A	and B.			
b				-	ed or controlled in co				
			-		rganization vested in	the sam	e persor	is that control or man	age the supported
		-		-	Sections A and C.				
С		•••			ng organization opera				lly integrated with,
			-		s). You must comple				
d			-		porting organization o	-			
					nization generally mus mplete Part IV, Sect	-		-	an allentiveness
е					a written determinatio				
C			-		ionally integrated sup				п, туре п
f	En						Jiganiza		
g				•	orted organization(s).				
		ame of supported	-	(ii) EIN	(iii) Type of organization		organization	(v) Amount of monetary	(vi) Amount of
					(described on lines 1-10 above (see instructions))		ur governing ment?	support (see instructions)	other support (see instructions)
						Yes	No		
(A)									
(B)									
(C)									
(D)									
(E)									
Tot	al								
		work Peduction	Act Notice son the	e Instructions for Form	990 or 990-E7			Schodula A	(Form 990 or 990-EZ) 2019
1.01	i aper	WORK REQUCTION P	ioi nonce, see m	= manucuolis ioi roffi	330 UI 330-EZ.			Scheudle A	onin 330 of 330-EZI 2019

#### Schedule A (Form 990 or 990-EZ) 2019

Page 2

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.)

<u>Sec</u>	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2015	<b>(b)</b> 2016	(c) 2017	<b>(d)</b> 2018	<b>(e)</b> 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	19,551,286.	19,137,168.	8,983,915.	16,134,969.	25,668,163.	89,475,501.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	19,551,286.	19,137,168.	8,983,915.	16,134,969.	25,668,163.	89,475,501.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						11,259,293.
6	Public support. Subtract line 5 from line 4						78,216,208.
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2015	<b>(b)</b> 2016	(c) 2017	<b>(d)</b> 2018	(e) 2019	(f) Total
7	Amounts from line 4	19,551,286.	19,137,168.	8,983,915.	16,134,969.	25,668,163.	89,475,501.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	58,202.	90,777.	47,483.	127,348.	22,852.	346,662.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0.
11	Total support. Add lines 7 through 10						89,822,163.
12	Gross receipts from related activities, etc. (s	ee instructions) .				12	98,182,335.
13	First five years. If the Form 990 is for organization, check this box and stop here	<u></u>	<u></u>				
	tion C. Computation of Public Sup	•	-				
14	Public support percentage for 2019 (lin						87.08%
15	Public support percentage from 2018					15	90.64 <b>%</b>
16a	331/3% support test - 2019. If the org	-					
	box and stop here. The organization qu						
b	331/3% support test - 2018. If the org						
	this box and stop here. The organization	-		-			
17a	10%-facts-and-circumstances test - 2	-					
	10% or more, and if the organization					-	
	Part VI how the organization meets t			-	-		
	organization						
b	10%-facts-and-circumstances test - 2	-					
	15 is 10% or more, and if the orga						•
	Explain in Part VI how the organization				•	•	
4.0	supported organization						
18	Private foundation. If the organization						
	instructions						<u> 🟲 🖂</u>

Schedule A (Form 990 or 990-EZ) 2019

## Schedule A (Form 990 or 990-EZ) 2019

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

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

Sec	tion A. Public Support						
	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
•	unrelated trade or business under section 513 .						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
Ŭ	furnished by a governmental unit to the						
	organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
	5						
<i>i</i> a	Amounts included on lines 1, 2, and 3 received from disgualified persons						
h	Amounts included on lines 2 and 3						
2	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
<u> </u>	line 6.)						
		(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(a) 2019	(f) Total
	ndar year (or fiscal year beginning in) ►	(a) 2015	(b) 2010	(6) 2017	(d) 2018	(e) 2019	
9 10 a	Amounts from line 6 Gross income from interest, dividends,						
IVa	payments received on securities loans,						
	rents, royalties, and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is f	-					
	organization, check this box and stop here						<u></u> ▶
Sec	tion C. Computation of Public Sup						
15	Public support percentage for 2019 (line 8					15	%
16	Public support percentage from 2018 Sche					16	%
Sec	tion D. Computation of Investmen						
17	Investment income percentage for 2019 (li					17	%
18	Investment income percentage from 2018					18	%
19 a	331/3% support tests - 2019. If the or	rganization did r	ot check the bo	ox on line 14, a	nd line 15 is mo	ore than 331/3%	, and line
	17 is not more than 331/3%, check th	is box and <b>sto</b>	<b>here.</b> The org	anization qualifie	s as a publicly	supported organ	ization . 🕨 📃
b	331/3% support tests - 2018. If the org	anization 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 331/3 %, check	this box and st	t <b>op here.</b> The or	ganization qualifi	es as a publicly	supported organ	ization 🕨 📃
20	Private foundation. If the organization of	did not check a	a box on line 1	4, 19a, or 19b,			
JSA 9E122	1 1.000				S	Schedule A (Form 9	990 or 990-EZ) 2019
	27637U M998						PAGE 1

Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

### Part IV Supporting Organizations

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

# Section A. All Supporting Organizations

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

10b Schedule A (Form 990 or 990-EZ) 2019

	RAINFOREST ALLIANCE, INC. 13-337	/893		
_	ule A (Form 990 or 990-EZ) 2019			Page 5
Part	V Supporting Organizations (continued)		I	
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Secti	ion B. Type I Supporting Organizations			
			Yes	No
1	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? If "No," describe in <b>Part VI</b> 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.	1		
•		•		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part</i>			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Saati	ion C. Type II Supporting Organizations	2		
Seci			Vac	No
			165	NO
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control			
	or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).			
		1		
Secti	ion D. All Type III Supporting Organizations			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	No
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior			
	tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of			
	the organization's governing documents in effect on the date of notification, to the extent not previously			
	provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (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? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Secti	ion E. Type III Functionally Integrated Supporting Organizations	-		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in	structi	ons).	
а	The organization satisfied the Activities Test. Complete line 2 below.		/	
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see	instru	ctions)	
Ŭ				No
2	Activities Test. Answer (a) and (b) below.		100	
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described 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? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
h	Did the organization exercise a substantial degree of direction over the policies programs and activities of each			

**b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.* 

<sup>3</sup>b Schedule A (Form 990 or 990-EZ) 2019

Page 6

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga			
1 Check here if the organization satisfied the Integral Part Test as a qualifyin	•		,
instructions. All other Type III non-functionally integrated supporting organ Section A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (optional)
1 Net short-term capital gain	1		(optional)
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
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 Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in <b>Part VI</b> ):			
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		
<ul><li>6 Multiply line 5 by .035.</li><li>7 Recoveries of prior-year distributions</li></ul>	7		
	8		
8 Minimum Asset Amount (add line 7 to line 6)	0		
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		
<b>6 Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

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

Schedule A (Form 990 or 990-EZ) 2019

Secti	V Type III Non-Functionally Integrated 509(a)(3) \$ ion D - Distributions		, , ,	Current Year
1	Amounts paid to supported organizations to accomplish ex	empt purposes		
2	Amounts paid to perform activity that directly furthers exen		ed	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organiz	zations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in <b>Part VI</b> ). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	the organization is resp	onsive	
	(provide details in <b>Part VI</b> ). See instructions.	5		
9	Distributable amount for 2019 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-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
С	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from			
•	Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if			
5	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in <b>Part VI.</b> See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			
5	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
1	and 4c.			
8	Breakdown of line 7:			
-	Excess from 2015			
<u>а</u> ь				
b	Excess from 2016			
С	Excess from 2017			
d	Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2019

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part II, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Intern	rtment of the Treasury al Revenue Service		Go to www.irs.gov/Form990 for	instructions and the	atest information.	Inspection
If the	organization answere		n Form 990, Part IV, line 3, or Form		6 (Political Campaign Activit	
			omplete Parts I-A and B. Do not comp			
			501(c)(3)) organizations: Complete I	Parts I-A and C below. I	Do not complete Part I-B.	
	Section 527 organization	•	te Part I-A only.	000-E7 Part VI line /	7 (Lobbying Activities) then	
			at have filed Form 5768 (election un			
			at have NOT filed Form 5768 (electi		•	•
			n Form 990, Part IV, line 5 (Proxy	Tax) (see separate in	nstructions) or Form 990-E	Z, Part V, line 35c (Prox
	(see separate instruction $501(c)(4)$ (5)		zations: Complete Part III.			
_	e of organization	or (0) organiz			Employer ider	ntification number
	NFOREST ALLIAN	CE, INC			13-3377	
_			ganization is exempt under	section 501(c) or	is a section 527 organ	nization.
	•		ganization's direct and indirect p	· · /	•	
	definition of "politica		•	1.3		
2	•		enditures (see instructions)		▶\$	
3	Volunteer hours for	political ca	impaign activities (see instruction	ns)		
Par			ganization is exempt under			
1			e tax incurred by the organizatio			
2			e tax incurred by organization m			
3			ection 4955 tax, did it file Form			
				• • • • • • • • • • • •		Yes No
	If "Yes," describe in I t I-C Complete		ganization is exempt under	agentian E01(a) as	(a a b b)	N
Par 1			ended by the filing organization			<i>J</i> .
2			organization's funds contributed			
3	•	•	ditures. Add lines 1 and 2. Ent			
4			Form 1120-POL for this year?			
5	Enter the names, ac organization made p the amount of politi	ddresses ar payments. ical contrib	nd employer identification numb For each organization listed, en outions received that were prom or a political action committee (	per (EIN) of all section ofter the amount paid aptly and directly de	on 527 political organiza d from the filing organiz livered to a separate po	ations to which the filing ation's funds. Also ente litical organization, such
	(a) Name	<u></u>	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(a) Name		(b) Address			contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)				-		
(2)				-		
(3)				-		
(4)				-		
(5)				-		
(6)						
(6)				-		

#### **Political Campaign and Lobbying Activities** SCHEDULE C (Form 990 or 990-EZ)

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. ire /E/ m000 for instr .... d the let at inf .





Schedule C (Folm 990 of 990-EZ) 2019	JABJI ADDIANCE, INC.	10 00	Faye
Part II-A Complete if the organizat section 501(h)).	ion is exempt under section 501(c)(3) and	l filed Form 5768 (elec	tion under
	elongs to an affiliated group (and list in Part IV e and share of excess lobbying expenditures).	ach affiliated group memb	per's name,
B Check ► if the filing organization cl	necked box A and "limited control" provisions ap	oly.	
	bying Expenditures leans amounts paid or incurred.)	(a) Filing organization's totals	<b>(b)</b> Affiliated group totals
1a Total lobbying expenditures to influence	e public opinion (grassroots lobbying)		
<b>b</b> Total lobbying expenditures to influence	e a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines	la and 1b)		
d Other exempt purpose expenditures		34,724,095.	
e Total exempt purpose expenditures (ac	ld lines 1c and 1d)	34,724,095.	
f Lobbying nontaxable amount. Enter t	ne amount from the following table in both		
columns.		1,000,000.	
If the amount on line 1e, column (a) or (b) is	: The lobbying nontaxable amount is:		
Not over \$500,000	20% of the amount on line 1e.		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
Over \$17,000,000	\$1,000,000.		
g Grassroots nontaxable amount (enter 2	5% of line 1f)	250,000.	
h Subtract line 1g from line 1a. If zero or	ess, enter -0-	0.	0
i Subtract line 1f from line 1c. If zero or l	ess, enter -0-	0.	0
j If there is an amount other than zero	on either line 1h or line 1i, did the organiza	ation file Form 4720	
reporting section 4911 tax for this year	?		Yes No

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period						
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2016	<b>(b)</b> 2017	<b>(c)</b> 2018	<b>(d)</b> 2019	<b>(e)</b> Total	
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.	
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000.	
c Total lobbying expenditures						
<b>d</b> Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.	
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.	
f Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2019

Page	3
	_

Schedule C (Form 990 or 990-EZ) 2019 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NC	T		5700	Page
Part II-B Complete if the organization is exempt under section 501(c)(3) and has NC (election under section 501(h)).			5/68	
For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(;	a)	(	(b)
description of the lobbying activity.	Yes	No	Am	ount
<ul> <li>During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:</li> <li>a Volunteers?</li> <li>b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?</li> </ul>				
<ul> <li>b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?</li> <li>c Media advertisements?</li> </ul>				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j Total. Add lines 1c through 1i				
<ul> <li>Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?</li> <li>If "Yes," enter the amount of any tax incurred under section 4912</li> </ul>				
<ul> <li>c If "Yes," enter the amount of any tax incurred by organization managers under section 4912</li> </ul>		_		
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organization is exempt under section 501(c)(4), section 50		, or se	ction	
501(c)(6).				
				Yes N
1 Were substantially all (90% or more) dues received nondeductible by members?			1	
<ul> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobby and political campaign activity expenditures from the organization agree to carry over lobby and political campaign activity expenditures from the organization agree to carry over lobby and political campaign activity expenditures from the organization agree to carry over lobby a</li></ul>			•••	
Part III-B Complete if the organization is exempt under section 501(c)(4), section 50'				
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No"				e 3, is
answered "Yes."				
1 Dues, assessments and similar amounts from members		•••	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amo	unts	of		
political expenses for which the section 527(f) tax was paid).			20	
a Current year		•••	2a 2b	
b Carryover from last year.			20 2c	
<ul> <li>c Total</li></ul>		•••	3	
<ul> <li>Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du</li> <li>If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion</li> </ul>		•••	-	
excess does the organization agree to carryover to the reasonable estimate of nondeductible				
and political expenditure next year?		•	4	
5 Taxable amount of lobbying and political expenditures (see instructions)			5	
Part IV Supplemental Information				

Part IV Supplemental Information (c	(continued)
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SCHEE	DULE D
(Form	990)

Department of the Treasury

Internal Revenue Service

# Supplemental Financial Statements ► Complete if the organization answered "Yes" on Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.

**Open to Public** Inspection Employer identification number

13-3377893

(b) Funds and other accounts

20

OMB No. 1545-0047

19

No

Nam	e of the organization		Employer id
RA	INFOREST ALLIANCE, INC.		13-33
Pa	art I Organizations Maintaining Donor Adv	ised Funds or Other Similar Funds or	Accounts.
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 6.	
		(a) Donor advised funds	<b>(b)</b> Fun
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?	Yes	L
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?				s 🔄 No
Pa	rt II Conservation Easements.				
	Complete if the organization answered "Yes" on Form 990, Part IV	/, line 7.			
1	Purpose(s) of conservation easements held by the organization (check all that app	ply).			
	Preservation of land for public use (for example, recreation or education)	Preservation of	f a historically ir	nportant la	and area
	Protection of natural habitat	Preservation of	f a certified hist	oric structu	ure
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualified conservation co	ontribution in <u>t</u>	he form of a co	nservation	
	easement on the last day of the tax year.		Held at th	e End of th	e Tax Year
а	Total number of conservation easements	L	2a		
b	Total acreage restricted by conservation easements		2b		
с	Number of conservation easements on a certified historic structure included in (a)	ı) L	2c		
d	Number of conservation easements included in (c) acquired after 7/25/06, and				
	historic structure listed in the National Register		2d		
3	Number of conservation easements modified, transferred, released, extinguished	ed, or termin	ated by the or	ganization	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 monitori	ing, inspectio	on, handling of		
	violations, and enforcement of the conservation easements it holds?			Yes	s 🗌 No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, ar			ments duri	ng the year
	▶	-			
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and	d enforcing cor	nservation ease	nents duri	ng the year
	▶\$	-			
8	Does each conservation easement reported on line 2(d) above satisfy the requirement	ents of section	n 170(h)(4)(B)(i)		
	and section 170(h)(4)(B)(ii)?			Yes	s 🗌 No
9	In Part XIII, describe how the organization reports conservation easements in its				
	balance sheet, and include, if applicable, the text of the footnote to the organizat	tion's financia	I statements tha	t describes	s the
	organization's accounting for conservation easements.				
Pa	rt III Organizations Maintaining Collections of Art, Historical Treasure		Similar Assets	3.	
	Complete if the organization answered "Yes" on Form 990, Part IV	/, line 8.			
1a	If the organization elected, as permitted under FASB ASC 958, not to report in	n its revenue	statement and	balance s	sheet works
	of art, historical treasures, or other similar assets held for public exhibition, service, provide in Part XIII the text of the footnote to its financial statements that	t describes the	ese items.	unneranc	
b	If the organization elected, as permitted under FASB ASC 958, to report in its				
	art, historical treasures, or other similar assets held for public exhibition, educa provide the following amounts relating to these items:	ation, or resea	arch in furthera	ice of put	olic service,

	Revenue included on Form 990, Part VIII, line 1.	
	following amounts required to be reported under FASB ASC 958 relating to these items:	
2	If the organization received or held works of art, historical treasures, or other similar assets for f	inancial gain, provide the
	(ii) Assets included in Form 990, Part X	▶ \$
	(i) Revenue included on Form 990, Part VIII, line 1	▶ \$
	provide the following amounts relating to these items:	

Sche	dule D (Form 990) 2019		,						Page <b>2</b>
Pa	rt III Organizations Maintainin	-						,	
3	Using the organization's acquisition		ther recor	ds, check	c any of th	ne follow	ving that make sigr	nificant use	e of its
	collection items (check all that apply	):	_	-					
а	Public exhibition		d	-	or exchang	ge progra	m		
b	Scholarly research		e	Other					
С	Preservation for future genera								
4	Provide a description of the organi	zation's collections	and expla	ain how t	hey furthe	er the or	ganization's exemp	t purpose i	in Part
_	XIII.								
5	During the year, did the organization						_		<b></b>
	assets to be sold to raise funds rathe		ained as pa	art of the c	organizatio	on's collec	ction?	Yes	No
Pa	rt IV Escrow and Custodial Ar		o" on For		Oort IV/ lin	0.0 or r	oparted op amou	t on Form	_
	Complete if the organizati 990, Part X, line 21.	ion answered re	SONFOR	m 990, P	ant iv, im	e 9, 01 1	eponed an amour		1
1a	Is the organization an agent, trustee	e. custodian or othe	er intermed	liarv for c	ontributior	s or othe	r assets not		
	included on Form 990, Part X?			-			_	Yes	No
b	If "Yes," explain the arrangement in								
							Amount		
с	Beginning balance				10	:			
d	Additions during the year								
е	Distributions during the year								
f	Ending balance								
2a	Did the organization include an amo	unt on Form 990, I	Part X, line	21, for e	scrow or o	custodial	account liability?	Yes	No
b	If "Yes," explain the arrangement in	Part XIII. Check he	ere if the e	xplanation	has been	provided	on Part XIII	[	
Pa	rt V Endowment Funds.								
	Complete if the organizat	ion answered "Ye	s" on For	m 990, F	Part IV, lin	e 10.			
		(a) Current year	<b>(b)</b> Pric	or year	<b>(c)</b> Two ye	ears back	(d) Three years back	(e) Four yea	ars back
1a	Beginning of year balance	1,047,611.	1,10	2,551.	1,09	8,637.	1,149,731.	1,13	9,962.
b	Contributions								
с	Net investment earnings, gains,								
	and losses	31,761.	-	9,850.	1	2,929.	-5,065.	2	7,935.
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs	41,237.	4	5,090.		9,015.	46,029.	1	8,166
f	Administrative expenses								
g	End of year balance	1,038,135.	1,04	7,611.	1,10	2,551.	1,098,637.	1,14	9,731.
2	Provide the estimated percentage of			e (line 1g,	column (a	)) held as	:		
а	Board designated or quasi-endowme		_%						
b	Permanent endowment  96.33								
С	Term endowment ► 3.6700 %								
-	The percentages on lines 2a, 2b, ar								
3a	Are there endowment funds not in th	ne possession of th	e organiza	ation that	are held a	nd admir	nistered for the	Ye	s No
	organization by:							3a(i)	x
	(i) Unrelated organizations							3a(i) 3a(ii)	X
h	(ii) Related organizations If "Yes" on line 3a(ii), are the related							3b	
D A	Describe in Part XIII the intended us	•	•					50	
4 Da									
Γa	Complete if the organizat	tion answered "Ye	es" on Fo	rm 990, F	Part IV, lir	ne 11a. S	See Form 990, Pa	rt X, line 1	10.
	Description of property	(a) Cost or (invest	other basis	(b) Cost c	or other basis ther)	(c) Acc		) Book value	
1a	Land			,0		depi			
b	Buildings								
c	Leasehold improvements			1,0	73,136.	. 5	83,855.	489	,281.
d	Equipment.				.99,098		91,730.		,368.
	Other			4	63,757	. 3	19,054.		,703.
	I. Add lines 1a through 1e. (Column (		n 990, Part	X, columr	n (B), line :				,352.

Schedule D (Form 990) 2019

Schedule D (Form 990) 2019 Page 3 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 (b) Book value (c) Method of valuation: (including name of security) Cost or end-of-year market value (1) Financial derivatives (2) Closely held equity interests (3) Other (A) (B) (C) (D) (E) (F) (G) (H) Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) Investments - Program Related. Part VIII 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) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) Other Assets. Part IX 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) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes DEFERRED RENT LIABILITY 553,396. (2) (3) TENANT SECURITY DEPOSIT 99,305 (4)(5) (6)(7)(8) (9) 652,701. Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ► . . . . . . . . . . . . . . .

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Х

Schedu	le D (Form 990) 2019				Page 4
Part				n.	
	Complete if the organization answered "Yes" on Form 990, Part IV				40 020 260
1	Total revenue, gains, and other support per audited financial statements			1	48,238,369.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а		2a	135,770.		
b	Donated services and use of facilities	2b	1,130,601.		
С	$\perp$	2c			
d	Other (Describe in Part XIII.)	2d	-10,795.		
е	Add lines 2a through 2d			2e	1,255,576.
3	Subtract line 2e from line 1			3	46,982,793.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а		4a			
b		4b	-277,917.		
с	Add lines 4a and 4b			4c	-277,917.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) .			5	46,704,876.
Part				ırn.	
	Complete if the organization answered "Yes" on Form 990, Part IV	, line	e 12a.		
1	Total expenses and losses per audited financial statements			1	36,093,443.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а		2a	1,130,601.		
b	Prior year adjustments	2b			
c		2c			
d		2d			
e	Add lines 2a through 2d			2e	1,130,601.
3	Subtract line 2e from line 1			3	34,962,842.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	- í			
a		4a			
b		4b	-277,917.		
c				4c	-277,917.
5	Total expenses. Add lines <b>3</b> and <b>4c</b> . ( <i>This must equal Form 990, Part I, line 18.</i> ).			5	34,684,925.
-	XIII Supplemental Information.			-	
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; P	art IV	/ lines 1b and 2b; F	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 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.

### 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 THE ACCOMPANYING CONSOLIDATED FINANCIAL STATEMENTS. RA HAS EVALUATED UNCERTAIN TAX POSITIONS WITH RESPECT TO ITS U.S. OPERATIONS AND CONCLUDED THERE ARE NO SUCH POSITIONS AT DECEMBER 31, 2019 AND 2018. RA HAS OPERATIONS IN OTHER COUNTRIES AND IS SUBJECT TO THE LAWS AND REGULATIONS OF THOSE COUNTRIES. DURING THE YEARS ENDED DECEMBER 31, 2019 AND 2018, RA PAID APPROXIMATELY \$36,000 AND \$12,000, RESPECTIVELY, IN FOREIGN INCOME TAXES IN ADDITION TO VAT TAXES TO FOREIGN JURISDICTIONS. RA DID NOT RECOGNIZE ANY TAX RELATED INTEREST OR PENALTIES DURING THE PERIOD IN QUESTION.

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

A FOREIGN EXCHANGE LOSS OF \$(10,795) 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.

FORM 990, SCHEDULE D, PART XI, LINE 4B

- \$ (238,747) SPECIAL EVENT EXPENSES DIRECT
  - (39,170) SALE OF RA CERT ACTIVITY

\_\_\_\_\_

### \$ (277,917)

FORM 990, SCHEDULE D, PART XII, LINE 4B

Part XIII Supplemental Information (continued)

- \$ (238,747) SPECIAL EVENT EXPENSES DIRECT
- (39,170) SALE OF RA CERT ACTIVITY

\_\_\_\_\_

\$ (277,917)

SCHEDULE F	Statement of Activities Outside the United St	ates	OMB No. 1545-0047			
(Form 990)		Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.				
► Attach to Form 990. Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.			Open to Public Inspection			
Name of the organization	Name of the organization Employer i					
RAINFOREST ALLIA	NCE, INC.	13-33	77893			
Part I General Information on Activities Outside the United States. Complete if the organizati Form 990, Part IV, line 14b.			on answered "Yes" on			
0	Does the organization maintain records to substantiate the amount of its the grantees' eligibility for the grants or assistance, and the selection crite or assistance?	ria used to				

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

<u> </u>	3 Activities per Region. (The following Fart 1, line 5 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 the region	(d) Activities conducted in the region (by type) (such as, 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 the region	(f) Total expenditures for and investments in the region			
(1)	CENTRAL AMERICA/CARIBBEAN	5.	77.	PROGRAM SERVICES	SEE PART V	3,127,874.			
(2)	SOUTH AMERICA	2.	11.	PROGRAM SERVICES	SEE PART V	1,602,211.			
(3)	EAST ASIA AND THE PACIFIC	4.	22.	PROGRAM SERVICES	SEE PART V	1,223,268.			
(4)	EUROPE	1.	22.	PROGRAM SERVICES	SEE PART V	1,545,213.			
(5)	SUB-SAHARAN AFRICA	3.	22.	PROGRAM SERVICES	SEE PART V	1,972,941.			
(6)	NORTH AMERICA	1.	30.	PROGRAM SERVICES	SEE PART V	3,233,191.			
(7)	SOUTH ASIA	0.	0.	PROGRAM SERVICES	SEE PART V	286,282.			
(8)									
(9)									
<u>(10)</u>									
<u>(11)</u>									
<u>(12)</u>									
<u>(13)</u>									
<u>(14)</u>									
<u>(</u> 15)									
<u>(16)</u>									
<u>(17)</u> 3a	Subtotal	16.	184.			12,990,980.			
b	Total from continuation sheets to Part I					12,550,500.			
с	Totals (add lines 3a and 3b)	16.	184.			12,990,980.			

For Paperwork Reduction Act Notice, see the Instructions for Form 990. JSA 9E1274 1.000 27637U M998

Schedule F (Form 990) 2019 Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part II

1	(a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	<b>(c)</b> Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other
(1)			SOUTH AMERICA	CONSERVATION	780,000.	EFT			
(2)			CENTRAL AMERICA	CONSERVATION	42,041.	EFT			
				SUSTAINABLE					
(3)			EUROPE	AGRICULTURE	134,412.	EFT			
				SUSTAINABLE					
(4)			SUB-SAHARAN AFRICA	AGRICULTURE	166,255.	EFT			
(5)					26.622				
(5)			SUB-SAHARAN AFRICA	CONSERVATION	36,638.	EFT			
(6)			SOUTH AMERICA	SUSTAINABLE	34,209.	EFT			
(6)			SOUTH AMERICA	SUSTAINABLE	54,209.	EF I			
(7)			SUB-SAHARAN AFRICA	AGRICULTURE	107,090.	EFT			
				SUSTAINABLE					
(8)			SOUTH ASIA	AGRICULTURE	18,175.	EFT			
				SUSTAINABLE					
(9)			SUB-SAHARAN AFRICA	AGRICULTURE	249,905.	EFT			
				SUSTAINABLE					
(10)			SOUTH AMERICA	AGRICULTURE	35,811.	EFT			
				SUSTAINABLE					
(11)			SOUTH ASIA	AGRICULTURE	25,800.	EFT			
				SUSTAINABLE					
(12)			SUB-SAHARAN AFRICA	AGRICULTURE	28,045.	EFT			
				SUSTAINABLE					
(13)			SUB-SAHARAN AFRICA	AGRICULTURE	290,455.	EFT			
(14)			SOUTH AMERICA	M&E	15,105.	EFT			
()				SUSTAINABLE	,_00.	_			
(15)			EUROPE	AGRICULTURE	53,112.	EFT			
				SUSTAINABLE					
(16)			SOUTH AMERICA	AGRICULTURE	28,370.	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

Schedule F (Form 990) 2019

►

Page 2

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	<b>(e)</b> Amount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
				SUSTAINABLE					
(1)			SOUTH ASIA	AGRICULTURE	216,689.	EFT			
				SUSTAINABLE					
(2)			SOUTH ASIA	AGRICULTURE	54,876.	EFT			
(3)			NORTH AMERICA	CONSERVATION	93,992.	EFT			
				SUSTAINABLE					
(4)			SOUTH AMERICA	AGRICULTURE	164,600.	EFT			
(5)			NORTH AMERICA	CONSERVATION	355,167.	EFT			
(6)			SOUTH ASIA	CONSERVATION	15,000.	EFT			
				SUSTAINABLE					
(7)			SOUTH ASIA	AGRICULTURE	10,000.	EFT			
(0)				SUSTAINABLE	9,637.				
(8)			EUROPE	AGRICULTURE	9,037.	EFT			
(9)			SUB-SAHARAN AFRICA	CONSERVATION	6,000.	EFT			
(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

Schedule F (Form 990) 2019 Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part II Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

RAINFOREST ALLIANCE, INC.

13-3377893

Page 2

3. Schedule F (Form 990) 2019

22.

(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 noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) KLEINHANS FELLOWSHIP	NORTH AMERICA	1.	10,000.	EFT			
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

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

Schedule F (Form 990) 2019

Schedule F (Form 990) 2019						
Part	IV Foreign Forms					
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No			
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No			
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No			
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? <i>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)</i>	Yes	X No			
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No			
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No			

Schedule F (Form 990) 2019

#### Part V Supplemental Information

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

#### 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 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 THE TEAM PROVIDES SUBGRANTEE MONITORING TRAINING TO RA PROGRAM TEAM.

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Schedule F (Form 990) 2019

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

PERSONNEL, AND PROVIDES COMPLIANCE AND OTHER TRAINING TO ACTUAL

SUBGRANTEES. THEY UNDERTAKE REGULAR COMPLIANCE REVIEWS AND REPORT

FINDINGS TO PROGRAM AND RA MANAGEMENT.

SCHEDULE F, PART I, LINE 3(E)

FOR EACH OF THE REGIONS LISTED BELOW, THE "LANDSCAPES & COMMUNITIES",

"COMMUNICATIONS", AND "MARKETS TRANSFORMATION" PROGRAM ACTIVITIES WERE

ACTIVE IN:

CENTRAL AMERICA/CARIBBEAN

EAST ASIA AND THE PACIFIC

EUROPE

NORTH AMERICA

SOUTH AMERICA

SUB-SAHARAN AFRICA

SOUTH ASIA

SCHEDULE F, PART III, LINE 1

IN 2019, THE KLEINHANS FELLOWSHIP WAS AWARDED TO AN INDIVIDUAL WHOSE WORKED WILL STUDY THE GOVERNANCE OF RURAL FORESTS IN VERACRUZ, A HIGHLY DEFORESTED STATE IN MEXICO.

SCHEDULE G	Supplemental I						OMB No. 1545-0047
(Form 990 or 990-EZ)	Complete if th	ne organization answe	red "Yes" on more than \$1	Form 990, F 5,000 on For	Part IV, line 17, 18, or 1 rm 990-EZ, line 6a.	9, or if the	2019
Department of the Treasury	Open to Public						
Internal Revenue Service	G	o to www.irs.gov/Forn	1990 for instr	uctions and	the latest information.		Inspection
Name of the organization						Employer identificati	on number
RAINFOREST ALLIA		Lata if the annual				13-3377893	7
Form 990-	g Activities. Comp EZ filers are not re	quired to comple	ete this pa	irt.			7.
	the organization rais	•		•			
a X Mail solicita		e			non-government g		
	email solicitations	f			government grants	S	
c X Phone solici		g		ciai fundra	ising events		
2a Did the organiza		oral agreement v	vith any ind	dividual (in	cluding officers, d	lirectors, trustees,	
or key employee	s listed in Form 990,	Part VII) or entity	in connec	tion with p	professional fundra	ising services?	X Yes No
	10 highest paid indiv		(fundraise	rs) pursua	int to agreements	under which the	fundraiser is to be
compensated at	least \$5,000 by the c	organization.					
						(v) Amount paid to	
(i) Name and addr		(ii) Activity		draiser have or control of	(iv) Gross receipts	(or retained by)	(vi) Amount paid to (or retained by)
or entity (fu	ndraiser)			outions?	from activity	fundraiser listed in col. (i)	organization
1			Yes	No			
ATTACHMENT 1							
<b>2</b>							
3							
4							
5							
6							
7							
1							
8							
9							
10							
				<u> </u>		378,146	
3 List all states in registration or lic	which the organizat	ion is registered (	or licensed	d to solicit	contributions or	has been notified	it is exempt from
AL, AK, AR, CA, CO, C	-						
KS, KY, ME, MD, MA, N			ND,OH,				
OK, OR, PA, RI, SC,			, /				

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Sche	edule G (Form 990 or 990-EZ) 2019	REST ALLIANCE, IN	vc.	13-	-3377893 Page <b>2</b>
Pa	rt II Fundraising Events. Complete more than \$15,000 of fundra events with gross receipts gree	aising event contribut			
		(a) Event #1 GALA	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
~		(event type)	(event type)	(total number)	col. <b>(c)</b> )
Revenue	1 Gross receipts	886,892.			886,892
R	2 Less: Contributions	471,598.			471,598
	3 Gross income (line 1 minus line 2)	415,294.			415,294
	4 Cash prizes				
	5 Noncash prizes				
səsue	6 Rent/facility costs	158,964.			158,964
<b>Direct Expenses</b>	7 Food and beverages	17,583.			17,583
Direc	8 Entertainment	2,350.			2,350
	9 Other direct expenses	236,397.			236,397
	<ol> <li>Direct expense summary. Add lin</li> <li>Net income summary. Subtract li</li> </ol>	es 4 through 9 in colu ne 10 from line 3. colu	mn (d) umn (d)		415,294
	rt III Gaming. Complete if the org \$15,000 on Form 990-EZ, lin	anization answered "	Yes" on Form 990,	Part IV, line 19, or	reported more than
Revenue		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Rev	1 Gross revenue				
sesu	2 Cash prizes				
Expen	3 Noncash prizes				
Direct Expe	4 Rent/facility costs				
Ц	5 Other direct expenses				
	6 Volunteer labor	Yes %	No%	⊌Yes% No	
	7 Direct expense summary. Add lin	es 2 through 5 in colu	mn (d)	►	

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

Is the organization licensed to conduct gaming activities in each of these states? а Yes No If "No," explain: b

8 Net gaming income summary. Subtract line 7 from line 1, column (d)

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

Schedule G (Form 990 or 990-EZ) 2019

►

RAINFOREST ALLIANCE, INC.

Sched	lule G (Form 990 or 990-EZ) 2019	Page 3
11	Does the organization conduct gaming activities with nonmembers?	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?	No
13	Indicate the percentage of gaming activity conducted in:	
а	The organization's facility 13a	%
b	An outside facility	%
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?	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 $\blacktriangleright$ \$	
С	If "Yes," enter name and address of the third party:	
	Name	
	Address ►	
16	Coming manager information:	
16	Gaming manager information:	
	Name	
	Gaming manager compensation ► \$	
	Description of services provided ►	
	Director/officer Employee Independent contractor	
17	Mandatory distributions:	
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to	
	retain the state gaming license?	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 <b>&gt;</b> \$	
Par	t 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).	

Schedule G (Form 990 or 990-EZ) 2019

13-3377893

ATTACHMENT 1

990, SCHE	EDULE G,	PART	Ι·	-	HIGHEST	PAID	FUNDRAISER
-----------	----------	------	----	---	---------	------	------------

NAME AND ADDRESS OF FUNDRAISER	ACTIVITY	DID FUNDRAISER HAVE CUSTODY OR CONTROL OF CONTRIBUTIONS? YES NO	GROSS RECEIPTS FROM ACTIVITY	AMOUNT PAID TO (OR RETAINED BY FUNDRAISER	AMOUNT PAID TO (OR RETAINED BY ORGANIZATION
LARA KORITZKE-NAVARRE 25 HALFORD AVENUE TORONTO ONTARIO CA M6S 4G1	CONSULTING	Х		31,800.	
BRODERICKHAIGHT CONSULTIN 141 BRODERICK ST. #5 SAN FRANCISCO CA 94117	CONSULTING	Х		6,080.	
MILO SYBRANT LLC 232 HOYT STREET #3 BROOKLYN NY 11217-2913	CONSULTING	Х		204,509.	
RISING TIDE DIRECT, LLC 233 NEEDHAM STREET #300 NEWTON MA 02464	CONSULTING	Х		44,293.	
C MADDEN PRODUCTIONS 10 PARK AVENUE #2E NEW YORK NY 10016	CONSULTING	Х		12,000.	

ATTACHMENT 1 (CONT'D)

THE JFM GROUP LLC

CONSULTING

Х

79,464.

629 FIFTH AVE #106 PELHAM NY 10803

SCHEDULE I				Assistance t			ŀ	OMB No. 1545-0047		
(Form 990)	990) Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.									
		2019 Open to Public								
Department of the Treasury										
Internal Revenue Service		► Go	to www.irs.gov	Form990 for the l	atest information	1.	E	Inspection		
Name of the organization							Employer identif			
RAINFOREST ALL		nd Appintance	•				13-337	/893		
	nformation on Grants a									
	zation maintain records to									
	teria used to award the gra							X Yes No		
	: IV the organization's proce			<u> </u>						
Part II Grants an	nd Other Assistance to	Domestic Or	ganizations a	nd Domestic Gov	vernments. Con	nplete if the organiz	ation answered	I "Yes" on Form 990,		
Part IV, li	ne 21, for any recipient	that received	more than \$5	,000. Part II can I	be duplicated if	additional space is r	needed.			
	d address of organization government	<b>(b)</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 noncash assistant			
(1) MERIDIAN INSTITUT	ΓE							SUSTAINABLE		
	E DILLON, CO 80435	84-1435420	501(C)(3)	205,000.				AGRICULTURE		
(2) SOCIAL ACCOUNTABL	ILITY INT'L							SUSTAINABLE		
9 E 27TH ST FL 10	) NEW YORK, NY 10016	13-3960591	501(C)(3)	23,627.				AGRICULTURE		
(3) VERITE INC								SUSTAINABLE		
44 BELCHERTOWN RC	DAD AMHERST, MA 01002	04-3304538	501(C)(3)	10,948.				AGRICULTURE		
(4) SWEDISH POSTCODE	FOUNDATION									
BOX 193, 101 23 S	STOCKHOLM SW			6,000.				LANDSCAPE		
(5) VERRA								SUSTAINABLE		
1 THOMAS CIRCLE N	WW WASHINGTON, DC 20005	27-0566795	501(C)(3)	245,319.				AGRICULTURE		
(6) CONSERVATIONAL IN	NT'L FOUNDATION							SUSTAINABLE		
2011 CRYSTAL DRIV	/E ARLINGTON, VA 22202	52-1497470	501(C)(3)	18,168.				AGRICULTURE		
_(7)		_								
(8)		_								
(9)		_								
(10)										
(11)										
(12)										
2 Enter total numb	per of section 501(c)(3) and	d government (	I organizations lie	ted in the line 1 tak	l de			► 5.		
	per of other organizations li	-	-							

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

Schedule I (Form 990) (2019)

# Part III Grants and Other Assistance to Domestic Individuals. 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>(b)</b> Number of recipients	(c) Amount of cash grant	<b>(d)</b> Amount of non-cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
KLEINHANS FELLOWSHIP	1.	15,000.			
- 					
3					
4					
5					
6					
7					
Part IV Supplemental Information. Provide information.	de the information re	equired in Part I,	line 2, Part III, o	column (b); and any o	ther additional

SCHEDULE I, PART I, LINE 2

THE KLEINHANS FELLOWSHIP 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.

Page 2

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#### Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III 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	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
l					
2					
3					
4					
5					
6					
7					
art IV Supplemental Information. Provide information.	e the information re	equired in Part I,	line 2, Part III, o	column (b); and any c	ther additional

SCHEDULE I, PART III, LINE 1

IN 2019, THE KLEINHANS FELLOWSHIP WAS AWARDED TO AN INDIVIDUAL WHOSE

WORKED ENTAILED IMPROVING COMMUNITY FOREST ENTERPRISE GOVERNANCE IN THE

MAYA BIOSPHERE RESERVE LOCATED IN GUATEMALA.

Page 2

SCH			isa	tion Information	L	OMB No	. 1545-(	047
(For	n 990)			s, Trustees, Key Employees, and Highest		୬ଜ	<b>10</b>	
				nsated Employees nswered "Yes" on Form 990, Part IV, line	23.		JIJ	)
	nent of the Treasury	▶	Atta	ch to Form 990. or instructions and the latest information		Open		
_	Revenue Service of the organization		99010	or instructions and the latest information	Employer identifica		oectio	n
	0	LIANCE, INC.			13-33778			
Part		is Regarding Compensation						
r ar e		······································					Yes	No
1a	Check the app	propriate box(es) if the organization pro	ovide	d any of the following to or for a per-	son listed on Fo	rm		
	990, Part VII,	Section A, line 1a. Complete Part III to	prov	ide any relevant information regardin	g these items.			
	First-cla	ss or charter travel	X	Housing allowance or residence for	personal use			
		or companions		Payments for business use of perso	nal residence			
	X Tax inde	emnification and gross-up payments		Health or social club dues or initiati	on fees			
	Discretio	onary spending account		Personal services (such as maid, ch	auffeur, chef)			
b	If any of the	boxes on line 1a are checked, did the ment or provision of all of the ex	ne or	rganization follow a written policy r	egarding payme	ent		
						1b	X	
2	-	anization require substantiation prior						
		stees, and officers, including the CEC						
						. 2	X	_
3		n, if any, of the following the organization						
	related organ	CEO/Executive Director. Check all the ization to establish compensation of the	e CE	O/Executive Director, but explain in F				
	· ·	nsation committee	X	Written employment contract				
		dent compensation consultant	X	Compensation survey or study				
		00 of other organizations	Х	Approval by the board or compensation				
4	organization of	ar, did any person listed on Form 990, or a related organization:			-			
а		verance payment or change-of-control p	-				-	X
b	-	, or receive payment from, a suppleme					-	X
С	•	, or receive payment from, an equity-ba				. 4c		X
	If "Yes" to an	y of lines 4a-c, list the persons and p	rovid	le the applicable amounts for each i	tem in Part III.			
	Only section	501(c)(3), 501(c)(4), and 501(c)(29) of	raan	izations must complete lines 5-9				
5	•	listed on Form 990, Part VII, Secti	-	-	av or accrue a	anv		
•	•	n contingent on the revenues of:			.,	,		
а	•	ion?				. 5a		Х
b	-	rganization?						Х
		e 5a or 5b, describe in Part III.						
6		listed on Form 990, Part VII, Section contingent on the net earnings of:	ion /	A, line 1a, did the organization pa	ay or accrue a	any		
а	-	ion?				. 6a		Х
b		rganization?						Х
	-	e 6a or 6b, describe in Part III.						
7		listed on Form 990, Part VII, Section described on lines 5 and 6? If "Yes," d						x
8		ounts reported on Form 990, Part VII,				-		
		I contract exception described in				ibe		
			-					Х
9		ine 8, did the organization also fol						
	Regulations s	ection 53.4958-6(c)?		<u></u>		. 9		

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

Schedule J (Form 990) 2019

#### Page 2

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

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

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

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
ALIK ODINGA HINCKSON	(i)	260,920.	0.	360.	13,297.	20,502.	295,079.	0.
1 <sup>CHIEF FINANCIAL OFFICER</sup>	(ii)	0.	0.	0.	0.	0.	0.	0.
LESLIE PARK	(i)	253,294.	0.	375.	12,817.	12,544.	279,030.	0.
2 GENERAL COUNSEL & SECRETARY	(ii)	0.	0.	0.	0.	0.	0.	0.
JOHANNES DE GROOT	(i)	257,416.	0.	99,748.	0.	0.	357,164.	0.
3 <sup>CHIEF EXECUTIVE OFFICER</sup>	(ii)	0.	0.	0.	21,939.	0.	21,939.	0.
NIGEL SIZER	(i)	347,938.	0.	552.	14,000.	33,593.	396,083.	0.
CHIEF PROGRAM OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
SUSAN TRESSLER	(i)	239,483.	0.	1,609.	10,250.	24,851.	276,193.	0.
5 <sup>CHIEF EXT REL OFFICER</sup>	(ii)	0.	0.	0.	0.	0.	0.	0.
ALEX MORGAN	(i)	157,821.	0.	135.	7,944.	10,560.	176,460.	0.
6 CHIEF MARKETS OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
RIA STOUT	(i)	137,350.	0.	22,729.	Ο.	0.	160,079.	0.
7 <sup>CHIEF REGIONAL OFFICER</sup>	(ii)	0.	0.	0.	0.	0.	0.	0.
MICHAEL IRA BROWN	(i)	141,696.	0.	117.	7,250.	12,810.	161,873.	0.
BURECTOR OF INST. RELATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
SUSAN ARNOT HEANEY	(i)	158,261.	0.	731.	8,290.	24,456.	191,738.	0.
DIR OF MARKETING(THRU 11/5/19) 9	(ii)	0.	0.	0.	0.	0.	0.	0.
MIGUEL ZAMORA	(i)	135,527.	0.	108.	6,829.	10,560.	153,024.	0.
10 <sup>DIRECTOR, MARKETS TRANSF-CORE</sup>	(ii)	0.	0.	0.	0.	0.	0.	0.
JACQUELYN PETERS LEVY	(i)	124,140.	0.	109.	6,928.	38,833.	170,010.	0.
11	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

Schedule J (Form 990) 2019

JSA

#### Part ||| Supplemental Information

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, LINES 1A AND PART II, LINE 3

AS A RESULT OF THE MERGER OF RAINFOREST ALLIANCE, INC. WITH STICHTING RAINFOREST ALLIANCE, THE BOARD AGREED TO AN ASSIGNMENT AGREEMENT THAT BECAME EFFECTIVE ON MAY 8, 2018, UNDER WHICH JOHANNES DE GROOT, THE DIRECTOR OF THE STICHTING RAINFOREST ALLIANCE, WAS ASSIGNED TO RAINFOREST ALLIANCE, INC. TO FULFILL HIS ROLE AS CHIEF EXECUTIVE OFFICER OF THE MERGED ORGANIZATION. THE AGREEMENT IS FOR A PERIOD OF 3 YEARS AND STIPULATED THAT MR. DE GROOT WOULD RELOCATE TO NEW YORK, NY USA. HOWEVER, MR. DE GROOT WAS NOT COMPENSATED FROM RAINFOREST ALLIANCE, INC. IN 2019. HIS BASE COMPENSATION AND BENEFITS PRESENTED IN 2019 INCLUDES \$357,164 THAT WAS NOT PAID TO MR. DE GROOT, BUT WAS REQUIRED SOLELY FOR THE PURPOSE OF CALCULATING WITHHOLDING TAXES THAT RAINFOREST ALLIANCE, INC. WAS RESPONSIBLE FOR PAYING ON HIS BEHALF. \$255,413 OF HIS COMPENSATION AND BENEFITS ABOVE WAS PAID TO HIM DIRECTLY FROM STICHTING RAINFOREST ALLIANCE AND WILL CONTINUE TO BE PAID FROM THERE FOR THE DURATION OF THE ASSIGNMENT AGREEMENT.

SCHEDULE J, PART III

THE ORGANIZATION'S BOARD OF DIRECTORS HAS ADOPTED A WRITTEN EXECUTIVE

#### Part III Supplemental Information

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.

COMPENSATION PHILOSOPHY WHICH IT FOLLOWS WHEN IT REVIEWS AND APPROVES THE COMPENSATION AND BENEFITS OF THE ORGANIZATION'S SENIOR MANAGEMENT, INCLUDING THE CEO 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 CEO 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 BODY "ADEOUATELY DOCUMENTED THE BASIS FOR ITS DETERMINATION" CONCURRENTLY WITH MAKING THAT

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JSA

Page 3

Schedule J (Form 990) 2019

#### Part III Supplemental Information

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.

DETERMINATION. THE MEMBERS OF THE BOARD OF DIRECTORS EACH ARE INDEPENDENT AND ARE FREE FROM ANY CONFLICTS OF INTEREST WITH RESPECT TO EXECUTIVE COMPENSATION. 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 CEO AND CFO. THE COMPENSATION AND BENEFITS OF CERTAIN OTHER INDIVIDUALS CONTAINED IN THIS FORM 990 ARE REVIEWED ANNUALLY BY THE CEO 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.

### SCHEDULE M (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047

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.

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

20**19**Open to Public
Inspection

Name of the organization

RAINFOREST ALLIANCE, INC.

Employer identification number
13-3377893

Par	t I Types of Property						
		<b>(a)</b> Check if applicable	<b>(b)</b> Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d Method of c noncash contril	leterminir	
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	9.	46,026.	SELLING PR	ICE	
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 22	Taxidermy Historical artifacts						
22	Scientific specimens						
23 24	Archeological artifacts						
25	Other ►()						
26	Other ►()           Other ►()						
27	Other ►()						
28	Other $\blacktriangleright$ ( )						
29	Number of Forms 8283 received	by the ora	anization during the tax v	ear for contributions for			
_•	which the organization completed I		• •		29		
		,	,			Yes	No
30a	During the year, did the organizat	ion receive	by contribution any prope	rty reported in Part I, line	s 1 through		
	28, that it must hold for at least the	hree years f	rom the date of the initial	contribution, and which is	sn't required		
	to be used for exempt purposes for	the entire h	olding period?		3	0a	X
b	If "Yes," describe the arrangement i	n Part II.					
31	Does the organization have a	gift accept	tance policy that require	es the review of any	nonstandard		
	contributions?				· · · · · · · · ⊢	31 X	
32a	Does the organization hire or use	e third parti	es or related organization	s to solicit, process, or s	sell noncash		
	contributions?				3	2a	X
b	If "Yes," describe in Part II.						
33	If the organization didn't report an describe in Part II.	amount in c	olumn (c) for a type of pro	perty for which column (a)	) is checked,		

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

Schedule M (Form 990) 2019

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Schedule M (Form 990) (2019)



**Supplemental Information.** 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.

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

# 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.



 

 Department of the Treasury Internal Revenue Service
 Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

 Name of the organization
 Employer ide

 RAINFOREST ALLIANCE, INC.
 13-33'

Employer identification number

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 OVER 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.

RAINFOREST ALLIANCE HOLDING, INC. WAS FORMED ON JANUARY 1, 2018 TO SERVE AS THE COMMON NON-PROFIT PARENT CORPORATION PROVIDING CENTRALIZED GOVERNANCE AND OVERSIGHT OVER 2 WHOLLY-OWNED NON-PROFIT ENTITIES: 1) RAINFOREST ALLIANCE, INC, A NEW YORK CORPORATION AND SECTION 501(C)(3) PUBLIC CHARITY AND 2) STICHTING RAINFOREST ALLIANCE, A TAX-EXEMPT DUTCH FOUNDATION.

FORM 990, PART III, LINE 3 EVALUATION & RESEARCH WAS INTERGRATED INTO THE LANDSCAPES AND COMMUNITIES PROGRAM SERVICE IN 2019.

#### FORM 990, PART III, LINE 4A

LANDSCAPES AND COMMUNITIES

THE LANDSCAPES AND COMMUNITIES PROGRAM ADVANCES LONG-TERM INITIATIVES TO SUPPORT SUSTAINABLE, COMMUNITY-BASED DEVELOPMENT ACROSS REGIONS THAT ARE VULNERABLE TO ECOLOGICAL DEGRADATION AND ECONOMIC STRESSES. THESE INITIATIVES INCLUDE SUPPORT TO FARMERS AND COMMUNITY FOREST MANAGERS TO APPLY BEST PRACTICES IN ENVIRONMENTAL PROTECTION, SOCIAL EQUITY, AND ECONOMIC VIABILITY ON THEIR LAND. THE PROGRAM WORKS WITH SMALLHOLDER FARMERS AND FOREST COMMUNITIES TO DEVELOP AND STRENGTHEN SMALL AND MEDIUM ENTERPRISES BASED ON SUSTAINABLE MANAGEMENT PRACTICES. RA DESIGNS AND IMPLEMENTS LANDSCAPE-SCALE PROJECTS TO FOSTER SUSTAINABLE SUPPLY CHAINS, RESILIENCE TO CLIMATE CHANGE AND IMPROVED RURAL LIVELIHOODS. RA MONITORS, EVALUATES, AND COMMUNICATES ITS IMPACTS. THIS PROGRAM PROVIDES SCIENTIFIC AND TECHNICAL INPUTS TO RA'S STANDARD-SETTING PROCESSES, THOUGHT LEADERSHIP, ADVOCACY, COMMUNICATIONS, SECTOR STRATEGIES, AND OTHER INITIATIVES. HIGHLIGHTS AND MAJOR ACCOMPLISHMENTS IN 2019 INCLUDED:

Employer identification number 13-3377893

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- IN 2019, RA HAD APPROXIMATELY 70 ACTIVE PROGRAMS EXECUTED IN APPROXIMATELY 18 COUNTRIES. IN 2019, RA SECURED 31 NEW GRANTS TOTALING OVER 15M USD FROM A DIVERSE DONOR BASE (I.E. DFID, BHP FOUNDATION, OVERBROOK FOUNDATION, WALMART FOUNDATION, PACKARD FOUNDATION, USAID, UNDP) TO FURTHER EVOLVE INTEGRATED LANDSCAPE CONSERVATION AND VALUE CHAIN DEVELOPMENT IN THE AGRICULTURE AND FORESTRY SECTORS IN STRATEGIC WORKING LANDSCAPES.

- IN LATIN AMERICA, NINE FOREST COMMUNITIES IN GUATEMALA'S MAYA BIOSPHERE RESERVE MAINTAINED A NEAR-ZERO DEFORESTATION RATE IN THE VAST "WORKING FOREST" CONCESSIONS THEY HAVE MANAGED FOR ALMOST 20 YEARS. THAT RATE WAS 20 TIMES LESS THAN OTHER PARTS OF THE RESERVE. IN 2019, THE RAINFOREST ALLIANCE HELD BRIEFINGS AND CONSULTATIONS WITH THE LOCAL AND NATIONAL GOVERNMENT AGENCIES TO ENCOURAGE THE EXTENSION OF THE COMMUNITY LAND LEASES. AT THE END OF 2019, WE CELEBRATED THE NEWS THAT THE FIRST COMMUNITY LEASE UP FOR CONSIDERATION, CARMELITA, RECEIVED A 25-YEAR EXTENSION - A HOPEFUL SIGN THAT THE OTHER COMMUNITIES WILL ALSO BE ABLE TO CONTINUE THEIR SUPERB FOREST MANAGEMENT INTO THE FUTURE. - IN RESPONSE TO THE DEVASTATING AMAZON FIRES IN 2019, WE LAUNCHED A FUNDRAISER TO RAISE FUNDS FOR AMAZON-BASED ORGANIZATIONS FIGHTING THE CRISIS ON THE GROUND. WE RAISED MORE THAN US \$1.2 MILLION - 100% OF WHICH WENT DIRECTLY TO THE FRONTLINE ORGANIZATIONS - SIX IN BRAZIL, TWO IN PERU, TWO IN COLOMBIA, AND THE INDIGENOUS LEADERSHIP FEDERATION REPRESENTING ALL NINE AMAZON NATIONS - ALL OF WHICH BECAME PART OF OUR NEW PAN-AMAZON ALLIANCE. THE INITIATIVE FACILITATED A MORE CLOSELY

Schedule O (Form 990 or 990-EZ) 2019		Page <b>2</b>
Name of the organization	Employer identification number	
RAINFOREST ALLIANCE, INC.	13-3377893	

COORDINATED CRISIS RESPONSE ACROSS THIS IMMENSE REGION.

-WE HAVE SCALED UP OUR GROUND-BREAKING INITIATIVE FARMGROW. FARMGROW AIMED TO BRING AGRICULTURAL EXPERTS TOGETHER WITH FARMERS, TRADERS, AND MANUFACTURERS TO CREATE SEVEN-YEAR PLANS TAILORED TO MEET THE SPECIFIC NEEDS OF A FARM BY LEVERAGING MOBILE TECHNOLOGY. IN 2019, FARMGROW EXPANDED FROM 1,200 COCOA-FARMING HOUSEHOLDS IN INDONESIA TO INCLUDE 3,300 MORE IN GHANA AND CÔTE D'IVOIRE.

-IN CÔTE D'IVOIRE, TAÏ NATIONAL PARK IS THE LAST REMAINING PRIMARY RAINFOREST IN WEST AFRICA. WE PARTNERED WITH SUSTAINABILITY ORGANIZATION IMPACTUM TO HOLD BRIEFINGS AND CONSULTATIONS WITH THE GOVERNMENT, LOCAL NGOS, AND LOCAL COMMUNITIES ON THE NATIONAL FORESTRY CODE. THIS WILL ENABLE FARMERS TO EARN EXTRA INCOME BY PLANTING FRUIT-BEARING TREES, WHICH PROTECT COCOA TREES, BUILD RESILIENCE AGAINST DROUGHT, AND GENERALLY IMPROVE LOCAL ECOSYSTEM HEALTH. THE CODE ALSO REQUIRED THE INCLUSION OF WOMEN IN LOCAL GOVERNANCE, AS WELL AS FOREST AND NATURAL RESOURCE MANAGEMENT.

-RA'S GLOBAL PROGRAMS EXPANDED SIGNIFICANTLY TO DEVELOP TWO MULTI-STAKEHOLDER INITIATIVES: THE ACCOUNTABILITY FRAMEWORK, AN INITIATIVE TO BRING GREATER CLARITY AND CONSISTENCY TO DIFFERENT COMMITMENTS TO SOCIAL AND ENVIRONMENTAL SUPPLY CHAIN MANAGEMENT; AND LANDSCALE, A MEASUREMENT SYSTEM FOR CHANGE AT A LANDSCAPE SCALE. -RA WAS A FOUNDER MEMBER OF A NEW INITIATIVE, THE INDIAN SUSTAINABLE PALM OIL COALITION, TO PROMOTE THE COMMITMENT OF COMPANIES TO BUY PALM OIL FROM SUSTAINABLE SOURCES. INDIA IS THE WORLD'S LARGEST IMPORTER OF PALM OIL.

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FORM 990, PART III, LINE 4B MARKETS TRANSFORMATION

MARKETS TRANSFORMATION HELPS ORGANIZATIONS ACROSS THE FORESTRY AND AGRICULTURE VALUE CHAINS TO SUCCESSFULLY INTEGRATE SUSTAINABILITY INTO THEIR BUSINESS PRACTICES FROM SUSTAINABLE PRODUCTION TO SUSTAINABLE CONSUMPTION. HIGHLIGHTS AND MAJOR ACCOMPLISHMENTS IN 2019 INCLUDED: -MCDONALD'S USA REACHED ITS 100% SUSTAINABLE SOURCING GOAL FOR COFFEE, THE MAJORITY OF WHICH IS RAINFOREST ALLIANCE AND UTZ CERTIFIED. -SMUCKER'S COMMITTED TO SOURCING AND LABELING RAINFOREST ALLIANCE CERTIFIED COFFEE FOR ITS ICONIC 1850 BRAND.

-LOBLAW (CANADA) COMMITTED TO SOURCING RAINFOREST ALLIANCE CERTIFIED COFFEE FOR BOTH ITS PRIVATE LABEL PRESIDENT'S CHOICE SINGLE ORIGIN AND BLENDED COFFEES.

-WAWA INC. CONVERTED ALL OF ITS COFFEE TO RAINFOREST ALLIANCE CERTIFIED. -WE CONTINUED WORK DESIGNING OUR NEW CERTIFICATION STANDARD TO INCENTIVIZE A CONSISTENT FLOW OF INFORMATION ALONG THE SUPPLY CHAIN, INCLUDING A KIND OF "SMART METER". THIS WAY, PRODUCERS AND COMPANIES CAN LEARN FROM THE SUCCESSES AND CHALLENGES OF THEIR PEERS. 'REIMAGINING CERTIFICATION' IS OUR LONG TERM VISION, BASED ON A SET OF CORE PRINCIPLES CONTINUEOUS IMPROVEMENT, DATA-POWERED, RISK-BASED ASSURANCE,

CONTECTUALIZATION, AND SHARED RESPONSIBILITY.

-WE BEGAN DESIGNING AND IMPLEMENTING MEASURES TO STRENGTHEN RA'S ASSURANCE PROGRAM IN THE COCOA SECTOR.

-WE DEVELOPED A NOVEL CERTIFICATION-PLUS APPROACH IN PALM THAT WILL HELP US BRING OUR UNIQUE SKILLSET IN COMMUNITY ENTERPRISE DEVELOPMENT AND RESOURCE MANAGEMENT FROM OUR FLAGSHIP PROGRAM IN PETEN TO INDEPENDENT

#### SMALL HOLDERS.

-IN ASIA, WE CONTINUED TO BUILD PARTNERSHIPS WITH COMPANIES. UNILEVER AND KIRIN (A JAPANESE DRINKS COMPANY) INVESTED IN CERTIFIED TEA IN SRI LANKA AND KIRIN ANNOUNCED AN EXTENSION TO COFFEE IN VIETNAM. WE ASSESSED RISK AND DESIGNED IMPROVEMENT PROGRAMS WITH JDE (WORLD'S SECOND LARGEST COFFEE COMPANY). WE WORKED WITH NESCAFÉ (LARGEST COFFEE COMPANY) TO MEASURE RESULTS OF ITS SUSTAINABILITY WORK.

#### FORM 990, PART III, LINE 4C

#### COMMUNICATIONS

THE COMMUNICATIONS PROGRAM IS RESPONSIBLE FOR OUTREACH AND EDUCATION OF THE PUBLIC ON CERTIFICATION STANDARDS, SUSTAINABLE PRACTICES AND RA'S WORK AROUND THE WORLD. WE ALSO CONTINUED PRODUCING AND PUBLISHING STUDIES FOCUSED ON FORESTRY, AGRICULTURE AND CERTIFICATION. HIGHLIGHTS AND MAJOR ACCOMPLISHMENTS IN 2019 INCLUDED:

-CREATED AND EXECUTED A NEW SOCIAL ENGAGEMENT CAMPAIGN FOR FOLLOW THE FROG, AN ANNUAL CONSUMER AWARENESS CAMPAIGN DEVELOPED IN COLLABORATION WITH THE MARKETING TEAM.

-CONCEPTUALIZED AND PRODUCED WEEKLY IMPACT STORIES FROM THE FIELD, INCLUDING ARTICLES, VIDEOS, AND INTERACTIVE FEATURES (ESRI STORYMAPS) PUSHED TO VARIOUS AUDIENCES THROUGH SOCIAL MEDIA CHANNELS. Page 2

Page 2

FORM 990, PART V, LINE 4B THE ORGANIZATION HAD SIGNATURE AUTHORITY OVER BANK ACCOUNTS IN THE FOLLOWING COUNTRIES: BOLIVIA, CANADA, CAMEROON, COSTA RICA, GHANA, GUATEMALA, HONDURAS, INDONESIA, KENYA, MEXICO, PERU, UNITED KINGDOM.

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

THE RAINFOREST ALLIANCE HAS AN EXECUTIVE COMMITTEE CONSISTING OF EIGHT 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

Schedule O (Form 990 or 990-EZ) 2019				
Name of the organization	Employer identification number			
RAINFOREST ALLIANCE, INC.	13-3377893			

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 CEO, CFO AND THE GENERAL COUNSEL, AND ARE REPORTED ON A PERIODIC 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 CEO, 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.

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Name of the organization	Employer identification number	_
RAINFOREST ALLIANCE, INC.	13-3377893	

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 CEO 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 2019.

#### 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, 990'S, 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 HAS INCLUDED THESE AS EXPENSES AS OTHER EMPLOYEE BENEFITS IN THE

Page 2

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. FOR THE TAX YEAR ENDED DECEMBER 31, 2019, \$10,795 OF FOREIGN CURRENCY EXCHANGE LOSSES WERE INCURRED.

#### 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. THE ORGANIZATION HAS NOT RECEIVED 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.

#### FINANCIAL STATEMENTS

THE FINANCIAL STATEMENTS ARE PREPARED ON A CONSOLIDATED BASIS TO INCLUDE ALL OF THE ASSETS, LIABILITIES, NET ASSETS, REVENUES AND EXPENSES OF ALL BRANCHES AND AFFILIATES, WHICH FOR TAX PURPOSES ARE DISREGARDED ENTITIES, OF THE RAINFOREST ALLIANCE, INC.

THESE SERVICES WERE FOCUSED ON CONSERVING BIODIVERSITY AND ENSURING					
SUSTAINABLE LIVELIHOODS. RA-CERT WAS SOLD TO NEPCON, AN INTERNATIONAL					
NON-PROFIT ORGANIZATION THAT PROMOTES AND DELIVERS SUSTAINABILITY					
CERTIFICATION SERVICES AND HAS BEEN WORKING COLLABORATIVELY ON					
CERTIFICATION AND OTHER INITIATIVES WITH RA SINC					
FORM 990, PART VI, LINE 17 - STATES	ATTACHM				
AL, AK, AR, CA, CO, CT,					
FL,GA,HI,IL,KS,KY,ME,MD,MA,MI,					
MN , $MS$ , $NV$ , $NH$ , $NJ$ , $NM$ , $NY$ , $NC$ , $ND$ , $OH$ , $OK$ , $OR$ , $PA$ ,					
RI, SC, TN, UT, VA, WA, WV, WI,					
	ATTACHM	<u>جەرىب 2</u>			
990, PART VII- COMPENSATION OF THE FIVE HIGHEST					
NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION			
CHAINPOINT BV	INFO. TECHNOLOGY	309,858.			
MR. E.N. VAN KLEFFENSSTRAAT 12 ARNHEM					
NETHERLANDS 6842 CV					
FUTERRA SUSTAINABILITY COMM. LTD. 39 TABERNACLE STREET	MARKETING CONSULTING	280,412.			
LONDON UNITED KINGDOM EC2A 4AA					
EARLY, CASSIDY, & SCHILLING, LLC	BUS. MGMT CONSULTING	256,094.			
	200. MARI CONDULTING	250,091.			
JSA	Schedu	ule O (Form 990 or 990-EZ) 2019			
9E1228 1.000 27637U M998		PAGE 70			

# Schedule O (Form 990 or 990-EZ) 2019 Employer identification number Name of the organization 13-3377893

FORM 990, PART III - CHANGE IN PROGRAM SERVICES

DURING Q4 2018, RA SOLD ITS RA-CERT PROGRAM. THIS SALE REPRESENTED A

EACH YEAR OF THE 5-YEAR SALE TERM BASED ON A PERCENTAGE OF APPLICABLE

ANNUAL REVENUES. RA-CERT INCLUDED CERTIFICATION, VERIFICATION AND

STRATEGIC SHIFT IN RA'S OPERATIONS. RA WILL CONTINUE TO COLLECT REVENUES

VALIDATION ACTIVITIES IN THE AREAS OF FORESTRY, AGRICULTURE, AND TOURISM.

Page **2** 

Schedule O (Form 990 or 990-EZ) 2019		Page 2
Name of the organization	Employer identification number	
RAINFOREST ALLIANCE, INC.	13-3377893	

### ATTACHMENT 2 (CONT'D)

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

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
15200 OMEGA DRIVE SUITE #100 ROCKVILLE, MD 20850		
MICROSOFT CORPORATION 1950 N STEMMONS FWY #5010 DALLAS, TX 75207	INFO TECHNOLOGY	202,130.
ACCENTURE INTL LTD 1 GRAND CANAL SQUARE DUBLIN IRELAND D02 P820	CONSULTING	189,794.

ATTACHMENT 3

# FORM 990, PART IX - OTHER FEES

	(A) TOTAL	(B) PROGRAM	(C) MANAGEMENT	(D) FUNDRAISING
DESCRIPTION	FEES	SERVICE EXP.	AND GENERAL	EXPENSES
OTHER	4,240,340.	3,682,809.	523,675.	33,856.
TOTALS	4,240,340.	3,682,809.	523,675.	33,856.

		ATTACHMENT 4	
FORM 990, PART X - INVESTMENTS - PUBLIC	LY TRADED SECURITIES		
DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE	COST OR FMV
EQUITY ETF	4,049.	4,688.	FMV
US TREASURY BILLS	2,657,640.	10,895,986.	FMV
TOTALS	2,661,689.	10,900,674.	

# **Related Organizations and Unrelated Partnerships**

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

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

Attach to Form 990.



13-3377893

Department of the Treasury Internal Revenue Service

SCHEDULE R

(Form 990)

Part I

Name of the organization

RAINFOREST ALLIANCE, INC.

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

(a) Name, address, and EIN (if appl	icable) of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	<b>(d)</b> Total income	<b>(e)</b> End-of-year assets	(f) Direct controlling entity
(1) RAINFOREST ALLIANCE MEXICO-A	ALIANZA 98-1051195					
GARDENIAS #817 COLONIA REFORMA	, OAXACA MX 68050	L&L	MX	1,497,098.	697,920.	RA
(2) RAINFOREST ALLIANCE S.R.L.	98-1051465					
CALLE ASUNCION #180, LIBERTAD	SANTA CRUZ, BL	RA CERT	BL	0.	21,397.	RA
(3) RAINFOREST ALLIANCE LTD	98-1051166					
WARNFORD COURT 29 THROGMORTON	LONDON, UK EC2N 2AT	L&L/MARKETS	UK	1,703,761.	113,186.	RA
(4) RAINFOREST ALLIANCE (GHANA)	98-1051463					
HSE NO. 36 ABOTSI STREET	EAST LEGON, ACCRA, GH	L&L/RE CERT	GH	386,868.	23,479.	RA
(5) PT RAINFOREST ALLIANCE	98-1051106					
JI BATURSARI NO.31, MEDURA	DENPASAR SELATAN, BALI ID	RE CERT/L&L	ID	87,963.	1,441,753.	RA
(6) RAINFOREST ALLIANCE CANADA	98-1051454					
285 MCLEOD STREET	OTTAWA, ONTARIO CA K2P1A1	RA CERT	CA	0.	36,901.	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>(b)</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	Section 5 contr enti	olled
						Yes	No
(1) RAINFOREST ALLIANCE HOLDING, INC. 82-4110897							
125 BOARD STREET, 9TH FLOOR NEW YORK, NY 10004	SUSTAINABILIT	DE	501(C)(3)	7	N/A		Х
(2) STICHTING RAINFOREST ALLIANCE							
DE RUYTERKADE 6 AMSTERDAM, NL 1013 AA	SUSTAINABILIT	NL			RA HOLDING		Х
(3)	_						
(4)							
(5)							
(6)							
(7)							

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

Schedule R (Form 990) 2019

JSA

OMB No. 1545-0047

Open to Public

Inspection

9

2

Employer identification number

13-3377893

#### SCHEDULE R (Form 990)

# **Related Organizations and Unrelated Partnerships**

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

Attach to Form 990.

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

Department of the Treasury Internal Revenue Service Name of the organization

Part I

RAINFOREST ALLIANCE, INC.

#### 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>(b)</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)					
(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>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	<b>(e)</b> Public charity status (if section 501(c)(3))	<b>(f)</b> Direct controlling entity	(g Section 5 contr enti	512(b)(13)
						Yes	No
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

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

Schedule R (Form 990) 2019

JSA

Page **2** 

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.

because it had one of more related organizations treated as a partnership during the tax year.													
	(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	<b>(d)</b> Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of- year assets	Disprop	h) portionate ations?	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		<b>(k)</b> Percentage ownership
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													

# 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.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	<b>(d)</b> Direct controlling entity	<b>(e)</b> Type of entity (C corp, S corp, or trust)	(f) Share of total income	<b>(g)</b> Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)( controll entity
(1)								Yes N
(2)								
(3)								
(4)								
(5)								
(6)								

Schedule R (Form 990) 2019

Part	V Transactions With Related Organizations. Complete if the organization answered "Ye	es" on Form 990, Par	t 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							
1	During the tax year, did the organization engage in any of the following transactions with one or more	related organizations list	ted in Parts II-IV?										
	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				_	X							
	Gift, grant, or capital contribution to related organization(s)					X							
	Gift, grant, or capital contribution from related organization(s).												
d													
е	Loans or loan guarantees by related organization(s)				9	X							
	Dividends from related organization(s)				_	X							
	Sale of assets to related organization(s)					X X							
h													
i	Exchange of assets with related organization(s).												
j	Lease of facilities, equipment, or other assets to related organization(s)			1	j	X							
						X							
	Lease of facilities, equipment, or other assets from related organization(s)												
	Performance of services or membership or fundraising solicitations for related organization(s)												
	Performance of services or membership or fundraising solicitations by related organization(s).												
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)												
0	Sharing of paid employees with related organization(s)				5	X							
р	Reimbursement paid to related organization(s) for expenses			1	o	X							
q	Reimbursement paid by related organization(s) for expenses			1	9	X							
r	Other transfer of cash or property to related organization(s)			1	_	X							
S	Other transfer of cash or property from related organization(s).	<u></u>				X							
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete t		· · · · · · · · · · · · · · · · · · ·		lds.								
	(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	<b>(c)</b> Amount involved	(d Method of d amount i		ng							
(1)	STICHTING RA	С	7,600,000.	FMV									
(2)													
(3)													
(4)													
(5)													
(6)													
JSA		1	Sci	hedule R (For	m <b>990)</b>	2019							
9E1309	<sup>1.000</sup> 27637U M998			PAGE	75								

13-3377893

# 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>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	from tax under	organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		amount in box 20 of Schedule K-1	(j) General or managing partner?		(k) Percentage ownership
			sections 512-514)	Yes	No			Yes	No	(	Yes	No	
	_												
													1
	_												
													+
													+
													+
													+
			(state or toreign country)	(state or toreign country)     income (related, unrelated, excluded from tax under sections 512-514)	(state or toreign country)         income (related, sections \$12-514)         income (related, solution rom ax under sections \$12-514)         income (related, solution rom ax under section \$12-514)         income (rela	(state or breign country)       income (related, botto)       sections botto)	(state or foreign country)     (norme (leided), soften)     (norme (leide	Income (related being)     Income (relat	Income (related or foreign country)       Income (related, country)       Strong)       Income (related, country)       Strong)       Income (related, country)       Yes       No       Yes       Yes		$ \begin{array}{ c c c c c } \hline  c c c c c c c c c c c c c c c c c c $	$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$	$ \left  \begin{array}{c c c c c c c c c c c c c c c c c c c $

Schedule R (Form 990) 2019

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 Part VII
 Supplemental Information

 Provide additional information for responses to questions on Schedule R. See instructions.