Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 Inspection

A F	or th	e 202	0 calendar year, or tax year begii	nning		, 2020,	and endi	ng			, 2	0		
R ~		anlin-t-l	C Name of organization						D Employer i	dentifi	cation nun	nber		
D Ch	neck if ap		RAINFOREST ALLIANCE H	OLDING, INC.										
	Addre chang		Doing Business As						82-411	089	7			
	Name	change	Number and street (or P.O. box if mail is	not delivered to street a	address)		Room/suite		E Telephone	numbe	er			
	Initial	return	125 BROAD STREET, 9TH	FLOOR					(212) 677-1900					
	Termi	inated	City or town, state or province, country, a	and ZIP or foreign posta	al code									
	Amen return		NEW YORK, NY 10004						G Gross recei	pts \$				
	Applio pendi	cation	F Name and address of principal officer:	ALIK HINCE	KSON				H(a) Is this a gr subordinate		ırn for	Yes	X No	
			125 BROAD STREET, 9TH	FLOOR, NEW	YORK	, NY 10	0004		H(b) Are all subo		included?	Yes	No	
1	Tax-ex	empt st	atus: X 501(c)(3) 501(c) () (insert no.)		4947(a)(1) c	or 5:	27	If "No," att	ach a lis	st. (see instru	ctions)		
J	Websi	te: 🕨	WWW.RAINFOREST-ALLIANCE	.ORG					H(c) Group exe	mption r	number 🕨			
K	Form (of organ	nization: X Corporation Trust	Association Oth	her 🕨		L Year	of format	tion: 2018 M	State	of legal do	micile:	DE	
Pa	art I	Sui	mmary				'		'					
	1	Briefly	/ describe the organization's mission o	r most significant act	tivities:	RA WOR	RKS AT :	THE I	NTERSECT	ION	OF BUS	SINE	ss,	
ė			ICULTURE & FORESTS TO IN											
anc		TRA	NSFORMING HOW LAND IS US	SED, PRODUCT:	ION	OF GOOD	S & COI	NSUME	R CHOICE	 S.				
ern	2		this box if the organization d											
Governance			er of voting members of the governing	•		•				3			19.	
⋖ŏ			er of independent voting members of t							4			19.	
ties			number of individuals employed in cale							5			0.	
Activities			number of volunteers (estimate if neces							6			19.	
Aci			unrelated business revenue from Part V	.,	12					7a			0	
			nrelated business taxable income from							7b			0	
		14Ct ui	Treated business taxable modifie from	1 0111 000 1, 1110 04				' ' ' ' '	Prior Year	1, 2	Cur	rent Y	ear	
	8	Contri	ibutions and grants (Part VIII, line 1h)		_			,		0.			0	
ıπe	9	Drogr	am service revenue (Part VIII, line 2a)		٠ ٠ ٠	COPY	for			0.			0	
Revenue	10	Invoct	am service revenue (Part VIII, line 2g) ment income (Part VIII, column (A), line	oc 2 1 and 7d)	٠ ٠ ٠	PUBLIC IN	SPECTION			0.			0	
Re	11		revenue (Part VIII, column (A), lines 5,					J		0.			0	
	12		revenue - add lines 8 through 11 (must							0.			0	
										0.			0	
	_		s and similar amounts paid (Part IX, colu							0.			0	
	14		its paid to or for members (Part IX, colu							0.			0	
Expenses			es, other compensation, employee bend							0.			0	
oen	104	Profes	ssional fundraising fees (Part IX, column	n (A), line i ie)						· ·				
EX			fundraising expenses (Part IX, column (0.			0	
			expenses (Part IX, column (A), lines 11							0.			0	
			expenses. Add lines 13-17 (must equal		, line 25	9)		·		0.			0	
- S	19	Rever	nue less expenses. Subtract line 18 fron	n line 12				Pogin	uning of Current		End	l of Voc		
ts o		-	(D) (V); (O)					Degiii	ning of Current	0.	EIIC	l of Yea	0	
sse Bala	20									0.			0	
Net Assets or Fund Balances	21		, , , , , , , , , , , , , , , , , , , ,					.		0.			0	
			ssets or fund balances. Subtract line 21	from line 20		<u></u>	<u></u>	.		0.				
	rt II		gnature Block	to and any to alreading a con-		a dan ar ar alla a alaa	l l -4-4-				l d d	d l-	-11-4 14 1-	
true	ier per e, corre	naities c ect, and	of perjury, I declare that I have examined th complete. Declaration of preparer (other than	is return, including act n officer) is based on al	compan II inform	iying schedu ation of whic	ies and state ch preparer h	ements, a ias any ki	and to the best on nowledge.	or my	knowleage	and be	eliet, it is	
									11/	10/0	1001			
Sig	n		Signature of officer						11/1 Date	L9/2	.021			
Her		'	•			O.F.O			Date					
	•		ALIK HINCKSON			CFO								
			Type or print name and title	Drangraria signatura			Deta			1 1	DTIN			
Paid	ı		Type preparer's name	Preparer's signature		2017	Date	0 /000	Check	」"	PTIN	4055		
	arer	RIC	HARD L RUVELSON	RICHARD L RU	UVELS	SON	11/1	9/202	self-emplo		P0023			
	Only		s name > WITHUMSMITH+BROW	· · · · · · · · · · · · · · · · · · ·					Firm's EIN		-202709			
			address > 4600 EAST WEST HWY 900	•					Phone no.	301	-272-6			
			cuss this return with the preparer show		ictions)				<u> </u>	<u></u>		es	No	
For	Pape	rwork	Reduction Act Notice, see the separat	te instructions.							For	m 99 (0 (2020)	

RAINFOREST ALLIANCE HOLDING, INC. 82-4110897 Form 990 (2020) Page 2 Part III **Statement of Program Service Accomplishments** Check if Schedule O contains a response or note to any line in this Part III 1 Briefly describe the organization's mission: SEE SCHEDULE O 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ______ _ If "Yes," describe these new services on Schedule O. 3 Did the organization cease conducting, or make significant changes in how it conducts, any program If "Yes," describe these changes on Schedule O. 4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. o. including grants of \$ o.) (Revenue \$ 4a (Code:) (Expenses \$ SEE SCHEDULE O **4b** (Code: including grants of \$ 4c (Code:) (Expenses \$ including grants of \$) (Revenue \$

4d Other program services (Describe on Schedule O.)

including grants of \$

4e Total program service expenses ▶ 0.

(Expenses \$

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PAGE 2

) (Revenue \$

Part	Checklist of Required Schedules		¥	N
	In the convenient on described in continue 504(1)(0) on 4047(1)(4) (all on the convenients foundation) 0.15 II)(c. II)		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Х	
•	complete Schedule A	1	Λ	Х
2 3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2		Λ
3	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
7	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	_		
•	assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			v
	complete Schedule D, Part VI	11a		X
D	Did the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more	446		Х
•	of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b		Λ
C	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
Ч	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets	110		21
u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
Δ.	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	1.0		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	Х	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII.	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			3.7
	for any foreign organization? 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			v
4-7	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	4-		Х
18	Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> See instructions Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17		
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	10		- 23
13	If "Yes," complete Schedule G, Part III	19		Х
20 a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX column (A) line 12 If "Ves." complete Schedule I. Parts I and II.	21		Х

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Part	Checklist of Required Schedules (continued)		V	No.
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
22	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
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			X
	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?	240		
Ч	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?			
	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		X
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%			37
0.7	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
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		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	00.		v
20	"Yes," complete Schedule L, Part IV	28c 29		X
29 30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		
00	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		X
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		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	١	v	
25.0	or IV, and Part V, line 1	34	X	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	35a	21	
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		Х
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		Х
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			
Dow's	19? Note: All Form 990 filers are required to complete Schedule O.	38	Х	
Part				
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a		. 03	
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		
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Par	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 0.			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Χ
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		
	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		Х
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		Χ
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	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		Χ
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			
	and services provided to the payor?	7a		Χ
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7с		Χ
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Χ
f		7f		Χ
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities [10b]			
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)	40-		
	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			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	120		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
ı.	Note: See the instructions for additional information the organization must report on Schedule O.			
a	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			
_	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> · · · · · ·	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
1 3	excess parachute payment(s) during the year?	15		Х
	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		Х
. •	If "Yes," complete Form 4720, Schedule O.			
	<u> </u>			

Form 990 (2020) RAINFOREST ALLIANCE HOLDING, INC. 82-4110897 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. See instructions. Check if Schedule O contains a response or note to any line in this Part VI S

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 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.			
b	Enter the number of voting members included on line 1a, above, who are independent 19			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		X
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		X
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	_		3.7
	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	l		37
	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:	0	Χ	
а	The governing body?	8a 8b	X	
b	Each committee with authority to act on behalf of the governing body?	ου	71	
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</i> "Yes," provide the names and addresses on Schedule O	9		Х
Secti	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue	_)	
500t	ion B. 1 ondies (17116 decitor B requeste information about politice not required by the internal Neventae		·/ Yes	No
100	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	Χ	
	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? <i>If "No," go to line 13 </i>	12a	Χ	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
-	rise to conflicts?	12b	Χ	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	Χ	
13	Did the organization have a written whistleblower policy?	13	Χ	
14	Did the organization have a written document retention and destruction policy?	14	Χ	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Χ	
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	466		
Soct	organization's exempt status with respect to such arrangements?	16b		
17 12	List the states with which a copy of this Form 990 is required to be filed ►	(800	tion F	01/2)
18	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	(Sec	1011 3	01(0)
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict or	f inter	est n	olicy
. •	and financial statements available to the public during the tax year.		- J. P	-y ,
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 >		
	ALIK HINCKSON 125 BROAD STREET, 9TH FLOOR NEW YORK, NY 10004 212-677-1900			

Form **990** (2020)

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

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.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, office or direct	unles	nd a director/trustee) from the		Reportable compensation	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations		
	dotted iiile)	Ф	tee			sated				
AN TOURNIES DE SPOOE	1 00									
CEO (THRU 10/1/2020)	1.00						X	0.	292 , 477.	19,723.
(2) ALIK ODINGA HINCKSON	1.00						- 1	0.	232,411.	15,725.
CHIEF FINANCIAL OFFICER	40.00			Χ				0.	266,974.	34,538.
(3) MOLLY STARK	1.00							3,	200,071	01,000.
GEN CNSL & SECY (EFF 4/1/2020)	40.00			Χ				0.	212,531.	10,221.
(4) LESLIE PARK	1.00								,	
SECRETARY (THRU 3/31/20)	40.00			Х				0.	113,274.	6,413.
(5) DANIEL R. KATZ	1.00								-	
BOARD CHAIR, DIRECTOR	1.00	Х		Χ				0.	0.	0.
(6) ANTONIUS VAN DER LAAN	1.00									
VICE BOARD CHAIR, DIRECTOR	1.00	Х		Χ				0.	0.	0.
(7) PETER M. SCHULTE	1.00									
TREASURER, DIRECTOR	1.00	Х		Χ				0.	0.	0.
(8) LABEEB M. ABBOUD	1.00									
DIRECTOR	1.00	Х						0.	0.	0.
(9) TASSO AZEVEDO	1.00									
DIRECTOR	1.00	Х						0.	0.	0.
(10) MARILU HERNANDEZ DE BOSOMS	1.00									
DIRECTOR	1.00	Х						0.	0.	0.
(11) SONILA COOK	1.00									
DIRECTOR	1.00	X						0.	0.	0.
(12) DANIEL J. COUVREUR	1.00									
DIRECTOR	1.00	Х						0.	0.	0.
(13) WENDY GORDON	1.00	,,,							^	
DIRECTOR	1.00	Х						0.	0.	0.
(14) NINA HAASE	1.00	.,							0.	
DIRECTOR	1.00	Х						0.	U .	0 .

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Part VII Section A. Officers, Directors, Tr	ustees, Ke	y En	ıplo	ye	es,	and F	lig	hest Compensat	ed Employees (d	continued)
(A) Name and title	(B) Average hours per week (list any hours for	box,	unles	Pos heck ss pe	erson	e than o is both tor/trust	an ee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of 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
15) DANIEL HOUSER	1.00									
DIRECTOR	1.00	Х						0	0.	0
16) PETER LEHNER	1.00									
DIRECTOR	1.00	X						0	0.	С
17) NALIN K. MIGLANI	1.00									
DIRECTOR	1.00	X						0	0.	С
18) VANUSIA M. CARNEIRO NOGUEIRA	1.00	37								
DIRECTOR 19) DR. ANURAG PRIYADARSHI	1.00	X						0	0.	(
DIRECTOR	1.00	X						0	0.	
20) ERIC ROTHENBERG	1.00	Λ						0	. 0.	
DIRECTOR	1.00	X						0	0.	
21) KERRI A. SMITH	1.00	21							·	
DIRECTOR	1.00	X						0	0.	
22) JUAN ESTEBAN ORDUZ TRUJILLO	1.00									
DIRECTOR	1.00	Х						0	0.	
23) ANNEMIEKE WIJN	1.00									
DIRECTOR	1.00	Х						0	0.	C
1b Sub-total					l			0.	885,256.	70,895.
c Total from continuation sheets to Part VII, S	Section A		• •	• •	• •			0.	0.	0.
d Total (add lines 1b and 1c)	_		: :		: :		•	0.	885,256.	70,895.
Total number of individuals (including but not reportable compensation from the organization)	limited to t		liste				re	eceived more than	\$100,000 of	
3 Did the organization list any former offi employee on line 1a? If "Yes," complete Sched	cer, directo	or, or	tru							Yes No
4 For any individual listed on line 1a, is the organization and related organizations grandividual	reater than	\$15	50,0	00?	? If	"Yes	;"	complete Schedu	le J for such	4 X
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Y										5 X
Section B. Independent Contractors										
1 Complete this table for your five highest concompensation from the organization. Report										

year.

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

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Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶ 0 .

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Part VIII Statement of Revenue

		Check if Schedule O contains a respon	nse or note to an	y line in this Part V	III		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts ts	1a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b					
ڰؚۜڰ	С	Fundraising events 1c					
ffs A	d	Related organizations 1d					
ອັ≅	e	Government grants (contributions) 1e					
Sin	f	All other contributions, gifts, grants,					
er (and similar amounts not included above . 1f					
혈	g	Noncash contributions included in					
달	9		\$				
ခ်္ခ လ	h	Total. Add lines 1a-1f		0.			
		Total Mos Ta III I I I I I I I I	Business Code				
e	20						
Program Service Revenue	2a						
Se	b						
E S	C	-					
P.S.	d						
٠ 2	e	All (I					
_	f g	All other program service revenue Total. Add lines 2a-2f		0.			
	3	Investment income (including dividends,	1				
	"	other similar amounts)		0.			
	4	Income from investment of tax-exempt bond		0.			
	5	Royalties		0.			
		(i) Real	(ii) Personal	**			
	6a	Gross rents 6a					
	١.	Less: rental expenses 6b					
	b	· I I					
	C	Rental income or (loss) 6c		0.			
	d	Net rental income or (loss)	(ii) Other	0.			
	7a	0.000	(ii) Garei				
		sales of assets					
4		other than inventory 7a	 				
evenue	b	Less: cost or other basis					
Ş.		and sales expenses 7b					
~	١.	Gain or (loss)		0.			
Other	d	Net gain or (loss)		<u> </u>			
₽	8a	Gross income from fundraising					
		events (not including \$					
		of contributions reported on line 1c) See Part IV line 18 8a	0.				
	<u>_</u>	1c). See Part IV, line 18 8a Less: direct expenses 8b	0.				
	b	Net income or (loss) from fundraising events		0.			
		Gross income from gaming					
	9a	activities. See Part IV, line 19 9a	0.				
	b	Less: direct expenses 9b	0.				
	C	Net income or (loss) from gaming activities		0.			
	10a	Gross sales of inventory, less					
	· • a	returns and allowances 10a	0.				
	b	Less: cost of goods sold	0.				
	C	Net income or (loss) from sales of inventory		0.			
o		. ,	Business Code				
Miscellaneous Revenue	11a						
ane	b						
ele eve	C						
is R	d	All other revenue					
Σ	l	Total. Add lines 11a-11d		0.			
	12	Total revenue. See instructions		0.			

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Form **990** (2020)

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Part IX Statement of Functional Expenses

	organizations must co			

	Check if Schedule O contains a resp	onse or note to any lir	e in this Part IX		
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	0.			
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	0.			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16	0.			
4	Benefits paid to or for members	0.			
5	Compensation of current officers, directors,				
	trustees, and key employees	0.			
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages	0.			
	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	0.			
9	Other employee benefits	0.			
10	Payroll taxes	0.			
11	Fees for services (nonemployees):				
а	Management	0.			
	Legal	0.			
c	Accounting	0.			
d	Lobbying	0.			
е	Professional fundraising services. See Part IV, line 17.	0.			
f	Investment management fees	0.			
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	0.			
12	Advertising and promotion	0.			
13	Office expenses	0.			
14	Information technology	0.			
15	Royalties	0.			
16	Occupancy	0.			
17	Travel	0.			
18	Payments of travel or entertainment expenses	0.			
	for any federal, state, or local public officials	0.			
19	Conferences, conventions, and meetings	0.			
20	Interest	0.			
21	Payments to affiliates	0.			
22	Depreciation, depletion, and amortization	0.			
23	Insurance	0.			
24	· '				
	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.)				
_					
a					
b					
d					
	All other expenses				
	Total functional expenses. Add lines 1 through 24e	0.			
	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)	0.			

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Part X Balance Sheet

	Check if Schedule O contains a response or note to any line in this Pa	(A)		(B)
		Beginning of year		End of year
	1 Cash - non-interest-bearing	0.	1	0.
	2 Savings and temporary cash investments	0.	2	0.
	3 Pledges and grants receivable, net	0.	3	0.
	4 Accounts receivable, net	0.	4	0.
	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.
ts	7 Notes and loans receivable, net	0.	7	0.
Assets	8 Inventories for sale or use	0.	8	0.
۲	9 Prepaid expenses and deferred charges	0.	9	0.
1	0a Land, buildings, and equipment: cost or other			
	basis. Complete Part VI of Schedule D 10a			
	b Less: accumulated depreciation 10b	0.	10c	0.
1	1 Investments - publicly traded securities	0.	11	0.
	2 Investments - other securities. See Part IV, line 11	0.	12	0.
	3 Investments - program-related. See Part IV, line 11	0.	13	0.
	4 Intangible assets	0.	14	0.
	5 Other assets. See Part IV, line 11	0.	15	0.
	6 Total assets. Add lines 1 through 15 (must equal line 33)	0.	16	0.
	7 Accounts payable and accrued expenses	0.	17	0.
	8 Grants payable	0.	18	0.
	9 Deferred revenue	0.	19	0.
	Tax-exempt bond liabilities	0.	20	0.
	1 Escrow or custodial account liability. Complete Part IV of Schedule D	0.	21	0.
	2 Loans and other payables to any current or former officer, director,	• • • • • • • • • • • • • • • • • • • •	<u> </u>	
Liabilities	trustee, key employee, creator or founder, substantial contributor, or 35%			
ij	controlled entity or family member of any of these persons	0.	22	0.
Lia	3 Secured mortgages and notes payable to unrelated third parties	0.	23	0.
	4 Unsecured notes and loans payable to unrelated third parties	0.	24	0.
	5 Other liabilities (including federal income tax, payables to related third		24	•
	parties, and other liabilities not included on lines 17-24). Complete Part X			
		0.	25	0.
١,	of Schedule D	0.	26	0.
		<u> </u>	26	· ·
Ses	Organizations that follow FASB ASC 958, check here ► X and complete lines 27, 28, 32, and 33.			
au	7 Net assets without donor restrictions	0.	27	0.
Bal	8 Net assets with donor restrictions	0.	28	0.
밑			20	•
교	Organizations that do not follow FASB ASC 958, check here ▶ and complete lines 29 through 33.			
Net Assets or Fund Balances	9 Capital stock or trust principal, or current funds		29	
ts 4	O Paid-in or capital surplus, or land, building, or equipment fund		30	
SS			30	
د اید	Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances	0.	31	0.
S S	3 Total liabilities and net assets/fund balances	0.	32	0.
	Total liabilities and het assets/fully balances	0.	33	Form 990 (2020)

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-om 98	30 (2020)				Pa	ge IZ			
Part	XI Reconciliation of Net Assets								
	Check if Schedule O contains a response or note to any line in this Part XI								
1	Total revenue (must equal Part VIII, column (A), line 12)	1				0.			
2	-								
3	Revenue less expenses. Subtract line 2 from line 1	3				0.			
4									
5 Net unrealized gains (losses) on investments									
6	g ()								
7									
8	Prior period adjustments	8				0.			
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line								
	32, column (B))	10				0.			
Part	<u> </u>								
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>	<u> </u>					
			_		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	xplain	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 cor	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	Х				
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ted or	ı a						
	separate basis, consolidated basis, or both:								
	Separate basis X 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 accounts			2c	X				
	If the organization changed either its oversight process or selection process during the tax year, e	xplain	on						
	Schedule O.								
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set fo	rth in t				v			
	Single Audit Act and OMB Circular A-133?		•••	3a		X			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	_							
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a	udits .		3b					

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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.

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

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization RAINFOREST ALLIANCE HOLDING, INC. Employer identification number 82-4110897

Pai	tΙ	Reason for Public Cha	irity Status. (All o	organizations must (comple	te this p	art.) See instructions	S.
The	org	anization is not a private fou	ndation because it	is: (For lines 1 through	gh 12, ch	eck only	one box.)	
1		A church, convention of chu	urches, or associa	tion of churches desc	ribed in s	ection 1	70(b)(1)(A)(i).	
2		A school described in secti	on 170(b)(1)(A)(ii)	. (Attach Schedule E	(Form 99	90 or 990)-EZ).)	
3		A hospital or a cooperative	hospital service o	rganization described	in sectio	n 170(b)	(1)(A)(iii).	
4		A medical research organiz	zation operated in	conjunction with a hos	spital de	scribed ir	n section 170(b)(1)(A)	(iii). Enter the
		hospital's name, city, and st	tate:	-				
5		An organization operated		a college or universit	y owne	d or ope	rated by a governme	ntal unit described in
		section 170(b)(1)(A)(iv). (C	Complete Part II.)					
6		A federal, state, or local go	vernment or gover	rnmental unit describe	d in sect	ion 170(b)(1)(A)(v).	
7	Χ	An organization that norma	ally receives a sub	stantial part of its su	pport fr	om a go	vernmental unit or fro	om the general public
		described in section 170(b)	(1)(A)(vi). (Compl	ete Part II.)		_		-
8		A community trust describe	ed in section 170(b	o)(1)(A)(vi). (Complete	Part II.)			
9		An agricultural research org			-		I in conjunction with a	land-grant college
		or university or a non-land-	=			-	=	
		university:		,	,			J
10		An organization that norma receipts from activities rela support from gross investr acquired by the organizatio	ited to its exempt facilities to its exempt for the second income and un	unctions, subject to c nrelated business tax	ertain ex able inco	ceptions ome (less	s; and (2) no more thar s section 511 tax) from	n 331/3 % of its
11		An organization organized	and operated exclu	usively to test for publi	c safety.	See sec	tion 509(a)(4).	
12		An organization organized	and operated exclu	usively for the benefit	of, to pe	erform th	e functions of, or to o	arry out the purposes
		of one or more publicly su	pported organizati	ons described in sect	ion 509	(a)(1) or	section 509(a)(2). S	ee section 509(a)(3).
		Check the box in lines 12a t	hrough 12d that d	escribes the type of s	upporting	g organiz	zation and complete lir	nes 12e, 12f, and 12g.
а		$oxedsymbol{oxed}$ Type I. A supporting orga	anization operated	, supervised, or contr	olled by	its supp	orted organization(s),	typically by giving
		the supported organization	on(s) the power to	regularly appoint or e	lect a m	ajority of	the directors or truste	es of the
	_	_ supporting organization. `	You must complet	e Part IV, Sections A	and B.			
b		$oxedsymbol{oxed}$ Type II . A supporting org	anization supervise	ed or controlled in co	nnection	with its	supported organization	on(s), by having
		control or management of	of the supporting o	rganization vested in	the sam	e persor	ns that control or man	age the supported
		organization(s). You must	complete Part IV	, Sections A and C.				
С		Type III functionally integ	grated. A supporti	ng organization opera	ited in c	onnectio	n with, and functional	ly integrated with,
		its supported organization	n(s) (see instruction	s). You must comple	te Part I	V, Sectio	ons A, D, and E.	
d		Type III non-functionally	integrated. A sup	porting organization of	perated	in conne	ection with its suppor	ted organization(s)
		that is not functionally inte	egrated. The organ	nization generally mus	t satisfy	a distrib	oution requirement and	d an attentiveness
		requirement (see instruct	ions). You must co	omplete Part IV, Sect	ions A a	nd D, an	d Part V.	
е		Check this box if the orga	anization received	a written determinatio	n from t	he IRS th	nat it is a Type I, Type I	I, Type III
		functionally integrated, or	Type III non-funct	ionally integrated sup	porting o	organizat	ion.	
f	En	ter the number of supported	l organizations					
g	Pro	ovide the following information	on about the suppo	orted organization(s).				
	(i) N	ame of supported organization	(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)								
Tota	1							

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

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020 Page 2

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support (e) 2020 Calendar year (or fiscal year beginning in) (a) 2016 **(b)** 2017 (c) 2018(d) 2019 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Ω Ω Ω 0. Tax revenues levied for the organization's benefit and either paid to 0. or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 0. Total. Add lines 1 through 3..... 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 0. shown on line 11, column (f). Public support. Subtract line 5 from line 4 0. Section B. Total Support **(b)** 2017 Calendar year (or fiscal year beginning in) (a) 2016 (c) 2018(d) 2019 (e) 2020 (f) Total 0. Gross income from interest, dividends. payments received on securities loans rents, royalties, and income from 0. similar sources Net income from unrelated business activities whether or not the business. 0. 10 Other income. Do not include gain or loss from the sale of capital assets 0. (Explain in Part VI.) 0. 11 Total support. Add lines 7 through 10 . . 12 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Χ Section C. Computation of Public Support Percentage % Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f)) % 16a 331/3% support test - 2020. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this b 331/3% support test - 2019. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported

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

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

					`		
	tion A. Public Support		I	T	T		
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
_	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
_	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
c	organization without charge						
6	Total. Add lines 1 through 5						
ı a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3						
-	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
_	or 1% of the amount on line 13 for the year. Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
•	line 6.)						
Sec	tion B. Total Support				I.		
	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6						
10 a	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties, and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included 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.)						F244 X(2)
14	First 5 years. If the Form 990 is for	-			-		
<u> </u>	organization, check this box and stop here.			<u></u>	<u> </u>		▶ 🔼
	tion C. Computation of Public Supp		•	mn (f))		45	0/
15 16	Public support percentage for 2020 (line 8,		-			15	%
16 Sec	Public support percentage from 2019 Sche tion D. Computation of Investment			<u> </u>		16	%
				13 column (f))		17	%
17 18	Investment income percentage for 2020 (line Investment income percentage from 2019 S						<u>%</u>
18 10 a							
ısa	331/3% support tests - 2020. If the org	-					
h	17 is not more than 331/3%, check this 331/3% support tests - 2019. If the organization		_				
D	line 18 is not more than 331/3 %, check						. \square
20	Private foundation. If the organization d		•	•	. ,		
20	a. iounidudon. Il tile organization d	ing the entreet c	A DON OIL HILD I	i, iou, oi iou,	STOOK LING DUA	and Joe manue	/.IOI IO

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Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in **Part VI**, including (i) the names and 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 79 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 line 10b below.
 - 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.)

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Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		
С	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
2004	detail in Part VI. on B. Type I Supporting Organizations	11c		
secu	on B. Type i Supporting Organizations		Yes	No
			163	NO
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.			
Socti	on C. Type II Supporting Organizations	2		
Jecti	on o. Type ii oupporting organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
•	or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control</i>			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
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? <i>If "No," explain in Part VI how</i>			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
	on E. Type III Functionally Integrated Supporting Organizations	tru coti	000	
1 a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins The organization satisfied the Activities Test. Complete line 2 below.	uucu	oris).	
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (se	e instr	uctions	s).
			Yes	_
2	Activities Test. Answer lines 2a and 2b below.			
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? <i>If "Yes," then in Part VI identify</i>			
	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 line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
•		20		
3	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
а	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3h		

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Pa	art V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	nization	5	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust on	Nov. 20, 1970 (explai	in in Part VI). See
	instructions. All other Type III non-functionally integrated supporting organi	zations n	nust complete Sectio	ns A through E.
Se	ection A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
_7	Other expenses (see instructions)	7		
_8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Se	ection B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI):	1e		
_2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
_6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
_8	Minimum Asset Amount (add line 7 to line 6)	8		
Se	ection C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7			ted Type III supportin	g organization

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Part	Type III Non-Functionally Integrated 509(a)(3)	Supporting Organiza	tions (continued)		
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish ex	xempt purposes		1	
2	Amounts paid to perform activity that directly furthers exer	npt purposes of support	ed		
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organi	zations	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - p	rovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which	the organization is resp	onsive		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount		1	10	
		(i)	(ii)		(iii)

Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2020			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2020			
а	From 2015			
b	From 2016			
С	From 2017			
d	From 2018			
е	From 2019			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2020 distributable amount			
i	Carryover from 2015 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2020 from			
	Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2020 distributable amount			
C	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2020, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2020. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2021. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
a	Excess from 2016			
b	Excess from 2017			
c	Excess from 2018			
d	Excess from 2019			
е	Excess from 2020			

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Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, 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.)

Schedule A (Form 990 or 990-EZ) 2020

JSA

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

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

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

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

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

	e organization answered "Yes," (See separate instructions), the	on Form 990, Part IV, line 5 (Proxy	Tax) (See separate in	nstructions) or Form 990-E	EZ, Part V, line 35c (Prox
•	Section 501(c)(4), (5), or (6) orga				
Nam	e of organization	·		Employer ide	ntification number
RAI	NFOREST ALLIANCE HOI	LDING, INC.		82-4110	0897
Pai	rt I-A Complete if the c	organization is exempt under	section 501(c) or	is a section 527 orgar	nization.
1	Provide a description of the	organization's direct and indirect	political campaign ac	ctivities in Part IV. (See ir	nstructions for
	definition of "political campa			•	
2		xpenditures (See instructions)		▶ \$	
3		campaign activities (See instruction			
	t I-B Complete if the c	organization is exempt under	section 501(c)(3).		
1	Enter the amount of any exc	cise tax incurred by the organizatio	n under section 495	5 ▶ \$	
2	Enter the amount of any exc	cise tax incurred by organization m	anagers under secti	on 4955 ▶ \$	
3		a section 4955 tax, did it file Form			
4a	Was a correction made?				Yes No
	If "Yes." describe in Part IV.				
Par	rt I-C Complete if the c	organization is exempt under	section 501(c), ex	cept section 501(c)(3).
1	Enter the amount directly e	xpended by the filing organization	for section 527 ex	empt function	
	activities			▶\$	
2		g organization's funds contributed			
	527 exempt function activiti	es		▶\$	
3		enditures. Add lines 1 and 2. En			
	line 17b			▶\$	
4	Did the filing organization file	e Form 1120-POL for this year?		507 11111	Yes No
5		and employer identification numb s. For each organization listed, er			
		ributions received that were prom			
		nd or a political action committee (
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(4)	(2) / (23)	(0) =	filing organization's	contributions received and
				funds. If none, enter -0	promptly and directly
					delivered to a separate political organization. If
					none, enter -0
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Ψ)			-		
			+		
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(5) (6)					

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

Schedule C (Form 990 or 990-EZ) 2020

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Pa	rt II-A Complete if the org section 501(h)).	anization	is exem	ot under sectio	on 501(c)(3) and	filed Form 5768 (ele	ction under
Α	Check ▶ if the filing organiz address, EIN, exp		•	0 , \		ach affiliated group mem	ber's name,
В	Check ▶ if the filing organiz	ation check	ed box A	and "limited conti	ol" provisions app	ly.	
		on Lobbyin				(a) Filing	(b) Affiliated
	(The term "expendit	ures" mean	is amount	s paid or incurred	i.)	organization's totals	group totals
	Total lobbying expenditures to in						
b	Total lobbying expenditures to in	nfluence a l	egislative	body (direct lobby	/ing)		
	Total lobbying expenditures (ad		•		_		
	Other exempt purpose expendit						
	Total exempt purpose expenditu						
f	Lobbying nontaxable amount.	Enter the a	amount fro	om the following	table in both		
	columns.						
	If the amount on line 1e, column (a				t is:		
	Not over \$500,000			nount on line 1e.			
	Over \$500,000 but not over \$1,000			s 15% of the exces			
	Over \$1,000,000 but not over \$1,50			s 10% of the exces			
	Over \$1,500,000 but not over \$17,0			s 5% of the excess	over \$1,500,000.		
	Over \$17,000,000		,000,000.				
_	Grassroots nontaxable amount	•	-		_		
n :	Subtract line 1g from line 1a. If				_		
:	Subtract line 1f from line 1c. If z If there is an amount other th					tion file Form 4720	
J							Yes No
	reporting section 4911 tax for the				er Section 501(h)	· · · · · · · · · · · · · · · · · · ·	Tes No
	(Some organizations that					ate all of the five colum	ne helow
	(Joine organizations that				lines 2a through		ms below.
			, 00 pm are		o g	,	
		Lobbyii	ng Expend	litures During 4-	ear Averaging Pe	riod	T
	Calendar year (or fiscal year beginning in)	(a) 20	17	(b) 2018	(c) 2019	(d) 2020	(e) Total
2a	Lobbying nontaxable amount						
b	Lobbying ceiling amount (150% of line 2a, column (e))						
С	Total lobbying expenditures						
d	Grassroots nontaxable amount						
е	Grassroots ceiling amount (150% of line 2d, column (e))						
f	Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2020

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 Schedule C (Form 990 or 990-EZ) 2020
 Page 3

- -	(election under section 501(h)).	(a	1)		(b)	
	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed cription of the lobbying activity.	Yes	No		Amount	
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
a b	Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?.					
c	Media advertisements?					
d	Mailings to members, legislators, or the public?					
e f	Publications, or published or broadcast statements?					
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					
2 a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b C	If "Yes," enter the amount of any tax incurred under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Pai	t III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	, or s	ection		
	501(c)(6).				Yes	N
1	Were substantially all (90% or more) dues received nondeductible by members?			Ī	1	, IN
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2	
3	Did the organization agree to carry over lobbying and political campaign activity expenditures fro				3	
1	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes." Dues, assessments and similar amounts from members			1		
	Section 162(e) nondeductible lobbying and political expenditures (do not include amou					
2		ints (of			
2 a	political expenses for which the section 527(f) tax was paid). Current year			2a		
	political expenses for which the section 527(f) tax was paid).			2a 2b		
а	political expenses for which the section 527(f) tax was paid). Current year			2b 2c		
a b c	political expenses for which the section 527(f) tax was paid). Current year			2b		
a b c	political expenses for which the section 527(f) tax was paid). Current year	 es of th	 	2b 2c		
a b c	political expenses for which the section 527(f) tax was paid). Current year	of the	 	2b 2c		
a b c 3	political expenses for which the section 527(f) tax was paid). Current year	of the	· · · · · · · · · · · · · · · · · · ·	2b 2c 3		
a b c 3 4	political expenses for which the section 527(f) tax was paid). Current year	of the	e e e e e e e e e e e e e e e e e e e	2b 2c 3 4 5		
a b c 3	political expenses for which the section 527(f) tax was paid). Current year	of the	e e e e e e e e e e e e e e e e e e e	2b 2c 3 4 5	-A, lines	1 a
a b c 3 4 Par	political expenses for which the section 527(f) tax was paid). Current year	of the	e e e e e e e e e e e e e e e e e e e	2b 2c 3 4 5	-A, lines	1 a
a b c 3 4 Par	political expenses for which the section 527(f) tax was paid). Current year	of the	e e e e e e e e e e e e e e e e e e e	2b 2c 3 4 5	-A, lines	1 ar
a b c 3 4 Par	political expenses for which the section 527(f) tax was paid). Current year	of the	e e e e e e e e e e e e e e e e e e e	2b 2c 3 4 5	-A, lines	1 ar
a b c 3 4 Par	political expenses for which the section 527(f) tax was paid). Current year	of the	e e e e e e e e e e e e e e e e e e e	2b 2c 3 4 5	-A, lines	11 ar
a b c 3 4 Fai	political expenses for which the section 527(f) tax was paid). Current year	of the	e e e e e e e e e e e e e e e e e e e	2b 2c 3 4 5	-A, lines	1 ar
a b c 3 4 Fai	political expenses for which the section 527(f) tax was paid). Current year	of the	e e e e e e e e e e e e e e e e e e e	2b 2c 3 4 5	-A, lines	1 ar
b c 3 4 Par	political expenses for which the section 527(f) tax was paid). Current year	of the	e e e e e e e e e e e e e e e e e e e	2b 2c 3 4 5	-A, lines	1 ar
a b c 3 4 Fai	political expenses for which the section 527(f) tax was paid). Current year	of the	e e e e e e e e e e e e e e e e e e e	2b 2c 3 4 5	-A, lines	1 ar
a b c 3 4 Fai	political expenses for which the section 527(f) tax was paid). Current year	of the	e e e e e e e e e e e e e e e e e e e	2b 2c 3 4 5	-A, lines	1 ar
a b c 3	political expenses for which the section 527(f) tax was paid). Current year	of the	e e e e e e e e e e e e e e e e e e e	2b 2c 3 4 5	-A, lines	1 ar

Schedule C (Form 990 or 990-EZ) 2020

9066677

Schedule C (Form 990 or 990-EZ) 2020 Page **4**

Part IV Supplemental Information (continued)

Schedule C (Form 990 or 990-EZ) 2020

JSA

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SCHEDULE D (Form 990)

Department of the Treasury

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.

OMB No. 1545-0047 Open to Public Inspection

Internal Revenue Service Name of the organization Employer identification number RAINFOREST ALLIANCE HOLDING, INC. 82-4110897 Organizations Maintaining Donor Advised 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) Funds and other accounts Total number at end of year 1 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) . . Aggregate value at end of year....... Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? Yes Nο Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Yes No Conservation Easements. Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 Held at the End of the Tax Year easement on the last day of the tax year. 2a 2b 2c Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 7/25/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. 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 its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service,

provide the following amounts relating to these items:

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

following amounts required to be reported under FASB ASC 958 relating to these items: ▶ \$

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2020 Schedule D (Form 990) 2020 Page 2

	rt Organizations Maintaini	na Calla	otions of	Art Li	storical Tr	00011100	or Otho	r Similar A	ccotc (c	ontinuad	Page Z
3	Using the organization's acquisition		sion, and o	other re	ecoras, cnec	ж апу о	i the rollo	wing that ma	ake sigi	illicant use	e or its
	collection items (check all that app	ıy):			┌ .						
а	Public exhibition			d			ange progra	am			
b	Scholarly research			е	Other						
С	Preservation for future gene										
4	Provide a description of the organ	nization's	collections	s and e	xplain how	they fur	ther the o	rganization's	exempt	purpose	in Part
	XIII.										
5	During the year, did the organization								_		
	assets to be sold to raise funds rath			ained a	s part of the	organiza	ation's colle	ection?		Yes	No
Pa	rt IV Escrow and Custodial A										
	Complete if the organiza	ition ans	wered "Ye	es" on l	Form 990,	Part IV,	line 9, or	reported an	amour	nt on Forr	n
	990, Part X, line 21.										
1a	Is the organization an agent, trus										
	included on Form 990, Part X?								L	Yes	No
b	If "Yes," explain the arrangement is	n Part XII	I and com	plete the	e following ta	ble:					
									Amount		
С	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an am						or custodia	l account liab	ility?	Yes	No
	If "Yes," explain the arrangement in									 	
	rt V Endowment Funds.				•		· ·				
	Complete if the organiza	tion ans	wered "Ye	es" on	Form 990,	Part IV.	line 10.				
			rent year		Prior year	_	years back	(d) Three ye	ars back	(e) Four ye	ars back
1 2	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains,										
	and losses										
	Grants or scholarships										
е	Other expenditures for facilities										
_	and programs										
t	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage	of the cu	rrent year		ance (line 1g	, column	(a)) held a	s:			
a	Board designated or quasi-endown			_%							
b	Permanent endowment	<u> </u>									
С	Term endowment ▶	% 		4000/							
•	The percentages on lines 2a, 2b, a		-						L .		
3 a	Are there endowment funds not in	tne posse	ession of ti	ne orga	nization that	are nei	a and adm	inistered for t	ne	Ye	s No
	organization by:										3 110
	(i) Unrelated organizations									3a(i)	
	(ii) Related organizations									3a(ii)	
b	If "Yes" on line 3a(ii), are the relate	Ū			•		?			3b	
4	Describe in Part XIII the intended u			tion's e	ndowment fu	ınds.					
Pa	rt VI Land, Buildings, and Equ Complete if the organize	Jipment. ation ans	wered "Y	es" on	Form 990.	Part IV.	line 11a.	See Form	990. Pa	rt X. line	10.
	Description of property	ation and	(a) Cost or			or other ba		ccumulated) Book value	
				stment)		other)	der	preciation	•		
1 a	Land										
b	Buildings	T I									
С	Leasehold improvements										
d	Equipment										
e	Other										
Tota	I Add lines 1a through 1e (Column	(d) must	equal For	n 990 F	Part X colum	n (R) lin	e 10c)				

Schedule D (Form 990) 2020

Page 3 Schedule D (Form 990) 2020

Part VII	Investments - Other Securities. Complete if the organization answered	"Yes" on Form 990	. Part IV. line 11b. See Form 990.	Part X. line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market	on:
(1) Financia	al derivatives			
` '	held equity interests			
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	n (b) must equal Form 990, Part X, col. (B) line 12.) 🔒 🕨			
Part VIII	Investments - Program Related.			
	Complete if the organization answered			·
	(a) Description of investment	(b) Book value	(c) Method of valuati Cost or end-of-year marke	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets. Complete if the organization answered	"Yes" on Form 990	, Part IV, line 11d. See Form 990,	Part X, line 15.
	(a) De	scription		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	man (h) must agual Farm 000 Bart V and (B) I	ino 1E \		
	umn (b) must equal Form 990, Part X, col. (B) I Other Liabilities.	ine 15.)		
Part X	Complete if the organization answered line 25.	l "Yes" on Form 990	, Part IV, line 11e or 11f. See Forr	n 990, Part X,
1.	(a) Descrip	tion of liability		(b) Book value
(1) Feder	al income taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colum	nn (b) must equal Form 990, Part X, col. (B) line 25.)	<u> </u>	▶	
2. Liability fo	or uncertain tax positions. In Part XIII, provide the	text of the footnote to	the organization's financial statements th	at 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 JSA 0E1270 1.000 57060R M998

Schedule D (Form 990) 2020 Page 4

Part >	Reconciliation of Revenue per Audited Financial Statements With Revenue per Returnation Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.	. ago 1
2 a b c	Total revenue, gains, and other support per audited financial statements	1	
e 3 4	Add lines 2a through 2d	2e 3	
b c	Other (Describe in Part XIII.)	4c 5	
1 2 a b c	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	1 2e	
4 a b c	Subtract line 2e from line 1	3 4c 5	
Part > Provide 2; Part	Supplemental Information. the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; FXI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. DULE D PART X, LINE 2	Part V, nation	line 4; Part X, line
	DRGANIZATION HAS EVALUATED UNCERTAIN TAX POSITIONS AND CONCLUDED		
THERE	E ARE NO SUCH POSITIONS AT DECEMBER 31, 2020 AND 2019. THE		
ORGAN	NIZATION HAS OPERATIONS IN OTHER COUNTRIES AND IS SUBJECT TO THE LAWS		
AND F	REGULATIONS OF THOSE COUNTRIES. THE ORGANIZATION DID NOT RECOGNIZE		
ANY I	CAX RELATED INTEREST OR PENALTIES DURING THE PERIODS IN QUESTION.		

Part XIII Supplemental Information (continued)

Schedule D (Form 990) 2020

JSA

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SCHEDULE J (Form 990)

Compensation Information

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

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

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

OMB No. 1545-0047 **Open to Public** Inspection

Department of the Treasury Internal Revenue Service Name of the organization

RAINFOREST ALLIANCE HOLDING, INC.

82-4110897

Employer identification number

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
_	explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:		v	
a	Receive a severance payment or change-of-control payment?	4a	Х	Х
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
С	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	4c		21
	in res to any or lines 44-6, list the persons and provide the applicable amounts for each item in rait in.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
•	compensation contingent on the revenues of:			
а	The organization?	5a		Х
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of:			
а	The organization?	6a		Х
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed	_		Х
c	payments not described on lines 5 and 6? If "Yes," describe in Part III.	7		^
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	0		23
3	Regulations section 53.4958-6(c)?	9		
	··-g			ı

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

Schedule J (Form 990) 2020

82-4110897

Page 2

Schedule J (Form 990) 2020

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

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

) and the second	(f) Base compensation 0. 129, 256. 0. 189, 300. 0. 266, 510.	(ii) Bonus & incentive compensation 0.	(iii) Other		henefits	(B)(i)-(D)	in column (B) reported
(i) (ii) (ii) (iii) (iii	129, 256. 189, 300. 0. 266, 510.	0 0	reportable compensation	other deferred compensation			as deferred on prior Form 990
(i) (ii) (ii) (iii) (iii	129,256. 0. 189,300. 266,510.	000	0	0	0	0	0
(i) (ii) (ii) (iii) (iii	189,300. 266,510.	0	163,221.	19,723.	0	312,200.	0
MSON (I) (II) (II) (II) (II) (II) (II) (II)	189,300.		0	0	0	0	0
(i) (ii) (iii) (ii	266,510.	22,884.	347.	8,926.	1,651.	223,108.	0
	266,510.	0	0	0	0	0	0
		0	464.	13,582.	21,537.	302,093.	0
(i)							
(ii)							
(j)							
10 (ii)							
(i)							
11 (ii)							
(t)							
12 (ii)							
(i)							
13 (ii)							
(9)							
14 (ii)							
(1)							
15 (ii)							
(t)							
16 (ii)							

Schedule J (Form 990) 2020

V 20-7.6F

Schedule J (Form 990) 2020

Page 3

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 AND II

AS A RESULT OF THE MERGER OF RAINFOREST ALLIANCE, INC. WITH STICHTING

THE BOARD AGREED TO AN ASSIGNMENT AGREEMENT THAT RAINFOREST ALLIANCE,

2018, UNDER WHICH JOHANNES DE GROOT, BECAME EFFECTIVE ON MAY 8, WAS ASSIGNED TO RAINFOREST STICHTING RAINFOREST ALLIANCE, THE DIRECTOR OF

ALLIANCE, INC. TO FULFILL HIS ROLE AS CHIEF EXECUTIVE OFFICER OF THE

2019. THE ENTIRE MERGED ORGANIZATION, WHICH ENDED AS OF DECEMBER 31, WAS PAID TO HIM COMPENSATION AND BENEFITS REPORTED ON THE 2020 FORM 990 DIRECTLY FROM STICHTING RAINFOREST ALLIANCE UNTIL HIS TIME OF SEPARATION

FROM STICHTING RAINFOREST ALLIANCE.

IN 2020, JOHANNES DE GOOT RECEIVED A SEVERANCE PAYMENT OF \$163, 221.

Schedule J (Form 990) 2020

V 20-7.6F

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.

OMB No. 1545-0047

2020

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

gov/form990. Inspection
Employer identification number

82-4110897

RAINFOREST ALLIANCE HOLDING, INC.

FORM 990, PART III, LINE 1 - MISSION

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.

- -WE BRING TOGETHER PRODUCERS, BUSINESS, GOVERNMENTS, AND CIVIL SOCIETY TO CREATE A MORE SUSTAINABLE WORLD.
- -OUR STANDARD SETS THE BAR FOR SUSTAINABLE AGRICULTURE.
- -WE TRANSFORM BUSINESS PRACTICES, DRIVE SUPPLY CHAIN INNOVATION, AND ENGAGE CONSUMERS IN POSITIVE CHANGE.
- -WE WORK TO REJUVENATE AGRICULTURAL LANDSCAPES AND PROTECT FORESTS,
 FOSTER SUSTAINABLE LIVELIHOODS AND BUILD CLIMATE RESILIENCE ACROSS
 VULNERABLE REGIONS.

FORM 990, PART III, LINE 4A LANDSCAPES AND COMMUNITIES

THE RAINFOREST ALLIANCE DEVELOPS AND IMPLEMENTS LONG-TERM CLIMATE

CONSERVATION AND COMMUNITY DEVELOPMENT PROGRAMS IN A NUMBER OF CRITICALLY

IMPORTANT TROPICAL LANDSCAPES WHERE COMMODITY PRODUCTION THREATENS

ECOSYSTEM HEALTH AND THE WELL-BEING OF RURAL COMMUNITIES. WE CO-DESIGN

THESE INITIATIVES WITH OUR FRONTLINE COMMUNITY PARTNERS AND FOCUS ON

IMPROVING RURAL LIVELIHOODS THROUGH SUSTAINABLE LOCAL ECONOMIES.

OUR INTEGRATED LANDSCAPE MANAGEMENT APPROACH EXPANDS OUR FOCUS BEYOND A SINGLE FARM OR FOREST TO COVER A FAR WIDER GEOGRAPHICAL AREA THAT ENCOMPASSES PRODUCERS, COMPANIES, COMMUNITIES, LOCAL GOVERNMENTS, AND NON-GOVERNMENTAL ORGANIZATIONS. BY INVOLVING A DIVERSE RANGE OF STAKEHOLDERS IN OUR LANDSCAPE MANAGEMENT PROGRAMS, WE BRING ALL LAND USERS TOGETHER TO DISCUSS COMMON INTERESTS AND DETERMINE COLLECTIVE ACTIONS. TOGETHER WE WORK TO PROTECT FORESTS AND BIODIVERSITY, TAKE ACTION ON CLIMATE, AND PROMOTE THE RIGHTS AND IMPROVE THE LIVELIHOODS OF RURAL PEOPLE.

ELEMENTS OF OUR LANDSCAPE PROGRAMS INCLUDE:

- TRAINING IN LAND MANAGEMENT BEST PRACTICES, INCLUDING CLIMATE-SMART AGRICULTURE AND SUSTAINABLE FORESTRY
- PROVIDING TRAINING OPPORTUNITIES TO RURAL PRODUCERS SO THEY CAN DIVERSIFY THEIR INCOME STREAMS OR ADD VALUE TO THEIR PRODUCTS

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- OPENING ACCESS TO SUSTAINABLE FINANCING THROUGH PARTNERSHIPS WITH
 LENDING INSTITUTIONS AND HELPING RURAL PRODUCERS IMPROVE THEIR FINANCIAL
 MANAGEMENT SKILLS
- FACILITATING PUBLIC-PRIVATE PARTNERSHIPS THAT STIMULATE RELIABLE,
 LONG-TERM MARKET DEMAND FOR MORE SUSTAINABLY PRODUCED GOODS
- CONNECTING FARMERS AND FOREST COMMUNITIES TO NEW MARKETS TO EXPAND SELLING OPPORTUNITIES
- AMPLIFYING THE VOICES OF RURAL PRODUCERS BY STRENGTHENING LOCAL AND REGIONAL REPRESENTATION GROUPS.

HIGHLIGHTS AND MAJOR ACCOMPLISHMENTS IN 2020 INCLUDED:

- IN 2020, RA HAD APPROXIMATELY 85 ACTIVE PROGRAMS EXECUTED IN

APPROXIMATELY 22 COUNTRIES. IN 2020, RA CONTINUED TO WORK WITH A DIVERSE

DONOR BASE TO FURTHER EVOLVE INTEGRATED LANDSCAPE CONSERVATION AND VALUE

CHAIN DEVELOPMENT IN THE AGRICULTURE AND FORESTRY SECTORS IN STRATEGIC

WORKING LANDSCAPES. SOME OF THE LARGEST DONORS WERE THE DUTCH MINISTRY

OF FINANCE, WALMART FOUNDATION, IKEA FOUNDATION, BHP BILLITON FOUNDATION,

USAID, NORWAY'S INTERNATIONAL CLIMATE AND FOREST INITIATIVE, GLOBAL

ENVIRONMENTAL FACILITY, NESCAFE, GREEN CLIMATE FUND AND UK DEPARTMENT FOR

INTERNATIONAL DEVELOPMENT.

- 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 SPANNING 353,000 HA. THAT RATE WAS 20 TIMES LESS THAN IN OTHER PARTS OF THE RESERVE. DESPITE THE CHALLENGES PRESENTED BY THE COVID-19 PANDEMIC, OUR PARTNER COMMUNITIES WERE GRANTED GOVERNMENT PERMISSION TO EXPAND PRODUCTION OF NON-TIMBER FOREST PRODUCTS ACROSS AN AREA COVERING 64,000 HECTARES-ALLOWING COMMUNITIES TO HARVEST MORE XATE LEAF IN 2020.

ADDITIONAL 2020 IMPACTS INCLUDED 1,200 NEW JOBS CREATED BY COMMUNITY OWNED FORESTRY ENTERPRISES, COMBINED REVENUES OF THE 111 COMMUNITY-OWNED FOREST ENTERPRISES IN THE CONCESSIONS TOTALING APPROXIMATELY 7M USD AND 200 HECTARES OF DEGRADED LANDS HAVE COME UNDER PRODUCTIVE LANDSCAPE RESTORATION.

- RA CONTINUED TO LEAD THE ACCOUNTABILITY FRAMEWORK INITIATIVE (AFI),
WHICH WORKS TO ACCELERATE PROGRESS AND IMPROVE ACCOUNTABILITY FOR SUPPLY
CHAINS THAT ARE DEFORESTATION-FREE AND FULLY RESPECT HUMAN RIGHTS. THE
ACCOUNTABILITY FRAMEWORK IS NOW USED ACROSS 68 COUNTRIES TO IMPLEMENT
ETHICAL SUPPLY CHAINS BY COMPANIES WITH TOTAL ANNUAL REVENUES OF MORE
THAN \$1.7 TRILLION. IT HAS ALSO BEEN ADOPTED BY 11 MAJOR INDUSTRY
ASSOCIATIONS AND GUIDES CORPORATE DISCLOSURE ON DEFORESTATION RISK AND
INITIATIVES BY NEARLY 700 COMPANIES. DURING 2020, THE AFI COALITION GREW
FROM 11 TO MORE THAN 20 MEMBERS, INCREASING ITS REACH AND CAPACITY TO
DRIVE FURTHER SCALING-UP OF RESPONSIBLE PRODUCTION AND SOURCING PRACTICES
IN LINE WITH THE ACCOUNTABILITY FRAMEWORK.

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- IN SUMATRA, INDONESIA, WE PARTNERED WITH THOUSANDS OF LOCAL FARMERS WHO ARE NOT ONLY COMMITTED TO MORE SUSTAINABLE WAYS OF GROWING COFFEE, BUT ALSO TO REGENERATING DEFORESTED AREAS. TOGETHER, IN 2020, WE PLANTED AN IMPRESSIVE 124,000 TREE SEEDLINGS IN THE BUFFER ZONES BORDERING THE PARK.
- IN GUATEMALA, HONDURAS, AND MEXICO, WE RESTORED 1,313 HECTARES WITH NATIVE OR AGROFOREST SPECIES THROUGH PARTNERSHIPS WITH LOCAL PRODUCERS AND INDIGENOUS COMMUNITIES.
- WE BEGAN DESIGNING AND IMPLEMENTING MEASURES TO STRENGTHEN RA'S ASSURANCE PROGRAM IN THE COCOA SECTOR, INCLUDING ANNOUNCING OUR AFRICA COCOA FUND - A NEW US\$5 MILLION FUND TO SUPPORT COCOA FARMING COMMUNITIES AND PROTECT NATURE ACROSS WEST AND CENTRAL AFRICA. THE AFRICA COCOA FUND IS AN EXCITING OPPORTUNITY TO HELP FARMERS IN NEED OF ASSISTANCE TO IMPLEMENT KEY REQUIREMENTS OF OUR STRENGTHENED CERTIFICATION PROGRAM. IN 2020, WE SELECTED 8 PROJECTS FOR OUR FIRST DISBURSEMENT TO WORK ON MONITORING SYSTEMS TO TACKLE CHILD LABOR, INCREASING ON-FARM SHADE TREES THROUGH AGROFORESTRY, HARNESSING DIGITAL TECHNOLOGY TO DRIVE SUSTAINABILITY PROGRESS AND DIVERSIFYING RURAL LIVELIHOOD OPPORTUNITIES.
- IN THE WESTERN HIGHLANDS OF CAMEROON AND THE SOUTHERN PERIPHERY OF THE DJA FAUNAL RESERVE, WE HAVE PARTNERED WITH LOCAL FOREST COMMUNITIES TO BREAK DOWN BARRIERS TO BIODIVERSITY PROTECTION AND IMPROVE RURAL

LIVELIHOOD OPPORTUNITIES THROUGH PARTICIPATORY LANDSCAPE MANAGEMENT.

- IN KENYA, ONE OF THE MAJOR DRIVERS OF DEFORESTATION IS THE TEA INDUSTRY WHICH RELIES ON WOODFIRED BOILERS TO WITHER AND DRY BLACK TEA. TO TAKE PRESSURE OFF LOCAL FORESTS, OUR KENYA TEAM IS WORKING CLOSELY WITH THE KENYA TEA DEVELOPMENT AGENCY (WHICH REPRESENTS 630,000 FARMERS) AND SOCIAL ENTERPRISE ENSO IMPACT TO PRODUCE AND PROMOTE BRIQUETTES MADE FROM WASTE MATERIALS, LIKE BAGASSE AND COFFEE HUSKS. IN 2020, 12 TEA FACTORIES HAVE BEGUN A PARTIAL TRANSITION TO RENEWABLE ENERGY, 200+ FACTORY BOILER OPERATORS AND TECHNICAL STAFF HAVE BEEN TRAINED ON BRIQUETTE USE, 24,000 KILOGRAMS OF BRIQUETTES WERE USED PER WEEK, EQUIVALENT TO 60 TREES SAVED EVERY MONTH, 20 FACTORY MANAGERS HAVE BEEN TRAINED ON THE IMPORTANCE OF RENEWABLE ENERGY AND 176,000+ TREE SEEDLINGS WERE PLANTED BY LOCAL FARMERS AND THEIR COMMUNITIES IN 2020.
- IN KENYA, WE PARTNERED WITH IKEA TO HELP ESTABLISH A COMMUNITY-LED LANDSCAPE MANAGEMENT BOARD TO HELP PROTECT THE CRITICAL MOUNT KENYA LANDSCAPE (PRIMARY COURSE OF WATER FOR 7+ MILLION PEOPLE) AND IMPROVE THE LIVELIHOODS OF LOCAL COFFEE AND COCOA FARMERS.
- WHEN LOCKDOWN RESTRICTIONS FORCED MANY OF OUR REGIONAL TEAMS TO SUSPEND FACE-TO-FACE AGRICULTURAL TRAININGS WITH FARMERS, WE NEEDED TO COME UP WITH INNOVATIVE ALTERNATIVES-AND FAST. WE PIVOTED TO ONLINE TRAININGS WHERE POSSIBLE, BUT MANY OF OUR COMMUNITY PARTNERS LIVE IN REMOTE AREAS WITH LIMITED INTERNET ACCESS. THE SOLUTION: WE STARTED RECORDING AUDIO

TRAININGS FOR BROADCAST OVER RADIO AND PUBLIC ADDRESS SYSTEMS. FOR OUR MOST VULNERABLE PARTNERS, THESE BROADCASTS HAVE BEEN VITAL-PROVIDING PRACTICAL GUIDANCE ON HOW TO IMPLEMENT SUSTAINABLE GROWING PRACTICES THAT CAN BOOST YIELDS AND IMPROVE THEIR INCOMES.

FORM 990, PART III, LINE 4B MARKETS TRANSFORMATION

THE MARKETS TRANSFORMATION TEAM WORKS TO INFLUENCE CORPORATE POLICIES,

BEHAVIOR, PRACTICES AND ALLOCATION OF RESOURCES FOR THE BETTERMENT OF

FARMERS AND FOREST COMMUNITIES IN SERVICE OF RAINFOREST ALLIANCE'S

MISSION. WE WORK WITH MORE THAN 5,000 BUSINESSES AND 2 MILLION FARMERS

TO DRIVE MORE SUSTAINABLE AGRICULTURE AND RESPONSIBLE SUPPLY CHAINS.

HIGHLIGHTS AND MAJOR ACCOMPLISHMENTS IN 2020 INCLUDED:

- WE PUBLISHED OUR NEW 2020 SUSTAINABLE AGRICULTURE STANDARD-AN EVOLVED CERTIFICATION PROGRAM BASED ON THE PRINCIPLES OF SHARED RESPONSIBILITY AND SUSTAINABILITY AS A JOURNEY OF CONTINUOUS, DATA-INFORMED IMPROVEMENT.

OUR 2020 CERTIFICATION PROGRAM INTRODUCES NEW REQUIREMENTS FOR COMPANIES TO INVEST IN AND REWARD MORE SUSTAINABLE PRODUCTION. AT THE SAME TIME,

OUR NEW PROGRAM FULLY EMBRACES THE POWER OF DATA-FROM DETAILED

RECORD-KEEPING SYSTEMS TO CUTTING-EDGE GEOSPATIAL ANALYSIS. THIS MEANS EXCITING NEW DIGITAL TOOLS TO HELP FARMERS IMPLEMENT MORE SUSTAINABLE PRACTICES, CLEARER PERFORMANCE INSIGHTS AND RISK ANALYSIS FOR COMPANIES,

AND MORE EFFECTIVE AUDITING PROCESSES TO ENSURE TRANSPARENCY AND

ACCOUNTABILITY. STAKEHOLDER OUTREACH, COLLECTING FEEDBACK AND PROVIDING TRAINING TO FARMERS AND SUPPLY CHAIN ACTORS ACROSS ALL SECTORS WAS A SIGNIFICANT PART OF OUR WORK.

- 2020 SAW THE CONCLUSION OF THE SECTOR PARTNERSHIPS PROGRAMME (SP) - AN 18 MILLION EURO, 5-YEAR LONG GLOBAL STRATEGIC PARTNERSHIP UNDER THE DUTCH MINISTRY OF FOREIGN AFFAIRS. SP FOCUSED ON 3 SECTORS (COFFEE, COCOA AND TEA), COVERED 6 THEMES (SUSTAINABLE PRODUCTION, FARMER GROUP STRENGTHENING, GENDER, CLIMATE CHANGE, LIVING WAGE AND CHILD LABOR) AND WAS IMPLEMENTED IN 9 COUNTRIES (CÔTE D'IVOIRE, GHANA, KENYA, INDONESIA, MALAWI AND UGANDA AND ONE REGIONAL PROGRAM IN CENTRAL AMERICA (HONDURAS, GUATEMALA AND NICARAGUA)). THE PROGRAM SOUGHT AN EVALUATION TO DRIVE POLICY CHANGE BY GOVERNMENTS, COMPANIES AND MULTI-STAKEHOLDER PLATFORMS; INCLUSION OF CIVIL SOCIETY ORGANIZATIONS, (FEMALE) FARMERS, FARM GROUPS AND WORKERS' VOICE, NEEDS AND INTERESTS IN THE POLICIES AND SERVICES PROVIDED BY PUBLIC AND PRIVATE SECTOR, AND; IMPROVED SERVICE DELIVERY FOR (FEMALE) SMALLHOLDERS, FARMERS AND FARM WORKERS BASED ON THEIR NEEDS AND INTERESTS. DURING THE LIFE OF THIS PROGRAM, RA HAS WORKED WITH 131 ORGANIZATIONS AND SUPPORTED 121 PROJECTS AS PART OF SP. THE EVALUATION FOUND SUFFICIENT EVIDENCE THAT THE PROGRAM DROVE EXPECTED OUTCOMES AT THE COUNTRY LEVEL FOCUSING ON FARM-LEVEL ISSUES. A CORE RESULT IS THAT WITH RA'S HELP, THE PROGRAM HAS STRENGTHENED THE CAPACITIES OF SP PARTNERS IN TERMS OF THEIR ORGANIZATIONAL LEGITIMACY, LEADERSHIP, THEMATIC KNOWLEDGE, ACCESS TO AND USE OF EVIDENCE, ADVOCACY SKILLS AND NETWORK RELATIONSHIPS. WITH THIS STRENGTHENED CAPACITY, THE EVALUATION FOUND EVIDENCE THAT

PARTNERS HAVE BECOME MORE ENGAGED WITH SECTOR ACTORS AND TAKEN A MORE
ACTIVE ROLE IN SECTOR FORA AND POLICY DISCUSSIONS. RA'S REPUTATION AND
NETWORK HELPED TO OPEN DOORS FOR PARTNERS TO ACCESS KEY SECTOR ACTORS,
HELPING TO INCREASE THEIR LEGITIMACY AND INCREASE THE EFFECTIVENESS OF
THEIR ADVOCACY ACTIVITIES, BRINGING RA EVEN CLOSER TO THE FARMERS WE
SUPPORT AND TO THE ISSUES THEY FACE.

- A TWO-YEAR COLLABORATION, CALLED PROJECT GUATEMALA, BROUGHT TOGETHER

 SUPERMARKET CHAIN LIDL, THE RAINFOREST ALLIANCE, AND CARE (AN

 ORGANIZATION FOCUSED ON ELIMINATING POVERTY) TO CONDUCT A CLEAR APPROACH

 TO STRENGTHEN THE POSITION OF WOMEN COFFEE FARMERS. FOR 111 WOMEN

 PARTICIPANTS, THIS RESULTED IN MORE DECISION-MAKING POWER, HIGHER

 CONFIDENCE IN PUBLIC, GREATER CONTROL OVER RESOURCES ON THEIR FARMS AND

 IN THEIR HOMES, AND INCREASED DESIRE TO PARTICIPATE IN WORK GROUPS.

 TODAY, 95% OF THE WOMEN LED COFFEE FARMS HAVE SYSTEMS IN PLACE TO

 GUARANTEE BETTER AGRICULTURAL PRACTICES AND ADAPTATION TO CLIMATE CHANGE.

 THIS IS AN EXCITING EXAMPLE THAT DEMONSTRATES THE POSITIVE IMPACTS OF

 INTEGRATED PROGRAMMING OVER A SILOED APPROACH TO GENDER/HUMAN RIGHTS AND

 ENVIRONMENTAL ISSUES.
- WALMART ANNOUNCED THAT 100% OF THEIR PRIVATE LABEL "GREAT VALUE TEA" IS 100% RAINFOREST ALLIANCE CERTIFIED.
- STARBUCKS BEGAN TRACING THEIR RAINFOREST ALLIANCE CERTIFIED TEA SUPPLY
 TO SUPPORT CORPORATE SOCIAL RESPONSIBILITY (CSR) CLAIMS FOR THEIR TEA AND

COCOA PROGRAM. STARBUCKS' COCOA TEAM ALSO AGREED TO BEGIN TRACING A LARGE PORTION OF THEIR COCOA SUPPLY AS RAINFOREST ALLIANCE CERTIFIED IN PLACE OF THEIR IN-HOUSE COCOA ASSURANCE PROGRAM.

- WENDY'S BEGAN LABELING THEIR COFFEE AS RAINFOREST ALLIANCE CERTIFIED.
- WHOLE FOODS MARKET AND ITS ROASTER ALLEGRO BEGAN LABELING SOME OF THEIR PRIVATE LABEL BRANDED (365 BRAND AND THREE BEANS) COFFEE & TEA PRODUCTS.

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 THE
RAINFOREST ALLIANCE'S WORK AROUND THE WORLD. WE ALSO PRODUCE AND PUBLISH
STUDIES FOCUSED ON FORESTRY, AGRICULTURE AND CERTIFICATION. HIGHLIGHTS
AND MAJOR ACCOMPLISHMENTS IN 2020 INCLUDED:

- THE RAINFOREST ALLIANCE LAUNCHED A VIBRANT NEW SEAL IN SEPTEMBER OF 2020-AND WITHIN THREE MONTHS, OUR RE-INVIGORATED LITTLE FROG HAD ALREADY LEAPT ONTO 6,000 NEW PRODUCTS IN MORE THAN 100 DIFFERENT COUNTRIES. THIS NEW SEAL IS A SYMBOL OF OUR VISION FOR ACHIEVING A WORLD WHERE PEOPLE AND NATURE THRIVE IN HARMONY-A VISION ENHANCED AND EXPANDED BY THE 2018 MERGER OF THE RAINFOREST ALLIANCE AND UTZ.
- IN 2020 ONLINE RETAIL GIANT AMAZON BESTOWED A CLIMATE PLEDGE FRIENDLY BADGE UPON ALL RAINFOREST ALLIANCE CERTIFIED PRODUCTS-WHICH MEANS THAT

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CONSUMERS CAN FILTER FOR PRODUCTS THAT BEAR OUR GREEN FROG SEAL WHEN BROWSING AMAZON. THE RAINFOREST ALLIANCE'S CERTIFICATION PROGRAM IS ONE OF ONLY 18 TO EARN THE CLIMATE PLEDGE FRIENDLY BADGE, WHICH HELPS SHOPPERS IN THE US AND EUROPE MAKE CHOICES THAT ARE BETTER FOR PEOPLE AND NATURE.

- OUR ANNUAL FOLLOW THE FROG CAMPAIGN HIGHLIGHTS EVERYDAY ACTIONS-LIKE BUYING PRODUCTS WITH OUR GREEN FROG SEAL-THAT CAN MAKE A POSITIVE DIFFERENCE FOR PEOPLE AND NATURE. SOME OF THE RESULTS OF THE 2020 CAMPAIGN:
- 87 COLLABORATING COMPANY PARTNERS
- 12.8M PEOPLE REACHED ON SOCIAL MEDIA
- 21 INFLUENCERS WITH COMBINED REACH OF 5M PEOPLE
- IN SEPTEMBER 2020, THE RAINFOREST ALLIANCE JOINED #TOGETHER4FORESTS, A CAMPAIGN TO DEMAND A STRONG, NEW EUROPEAN UNION LAW TO PROTECT THE WORLD'S FORESTS AND OTHER ECOSYSTEMS BY KEEPING PRODUCTS ASSOCIATED WITH DEFORESTATION OUT OF THE EU MARKET. OUR ALLIANCE MEMBERS WERE AMONG THE 1.1 MILLION PEOPLE WHO PARTICIPATED IN THE EUROPEAN COMMISSION'S PUBLIC CONSULTATION ON DEFORESTATION, AND THEIR INPUT WAS DELIVERED TO THE EUROPEAN COMMISSION ON DECEMBER 14, 2020. IT WAS THE LARGEST NUMBER OF SUBMISSIONS TO A PUBLIC CONSULTATION ON THE ENVIRONMENT IN THE HISTORY OF THE EUROPEAN UNION.

- IN MARCH 2020, THE COVID-19 PANDEMIC BROUGHT OUR ANNUAL FUNDRAISING
 GALA PLANNING TO AN ABRUPT HALT. AS THE RAINFOREST ALLIANCE DIRECTED ITS
 ENTIRE STAFF TO BEGIN WORKING FROM HOME, THE COMMUNICATIONS AND
 FUNDRAISING TEAMS THREW THEIR TRADITIONAL PLANS OUT THE WINDOW AND
 STARTED FROM SCRATCH. THE RESULT WAS THE MOST INCLUSIVE, INTERNATIONAL
 EVENT IN OUR HISTORY: A 1.5-HOUR LIVESTREAMED VIDEO PROGRAM THAT EMBODIED
 THE VERY BEST OF OUR ALLIANCE. OUR PROGRAM FEATURED A DOCUMENTARY-STYLE
 SEGMENT ON OUR FRONTLINE PARTNERS IN THE AMAZON, A VIDEO POEM BY ACTOR/
 DESIGNER/TEA PURVEYOR WARIS ALHUWALIA, AND INTERVIEWS WITH SOME OF THE
 WORLD'S LEADING YOUTH CLIMATE ACTIVISTS.
- IN CONNECTION WITH LAUNCHING OUR 2020 CERTIFICATION PROGRAM, OUR
 WEBSITE FEATURED WHAT'S NEW IN THE STANDARD, A LIBRARY TO ALL FARM
 CERTIFICATION AND SUPPLY CHAIN CERTIFICATION BINDING DOCUMENTS, ANNEXES,
 GUIDANCES, AND MORE, IN 11 LANGUAGES. WE ALSO BUILT AN ONLINE GLOSSARY
 FOR THE CERTIFICATION PROGRAM AND A TRANSITION TOOL TO HELP STAKEHOLDERS
 MOVE TO OUR NEW 2020 PROGRAM.

FORM 990, PART III, LINE 4D

RA-CERT

DURING Q4 2018, RA SOLD ITS RA-CERT PROGRAM. THIS SALE REPRESENTED A STRATEGIC SHIFT IN RA'S OPERATIONS. RA WILL CONTINUE TO COLLECT REVENUES

82-4110897

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

ANNUAL REVENUES. RA-CERT INCLUDED CERTIFICATION, VERIFICATION AND

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

THESE SERVICES WERE FOCUSED ON CONSERVING BIODIVERSITY AND ENSURING

SUSTAINABLE LIVELIHOODS. RA-CERT WAS SOLD TO PREFERRED BY NATURE

(FORMERLY KNOWN AS 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

SINCE 1998. RA AND PREFERRED BY NATURE CONTINUE TO UPHOLD THEIR

COLLABORATIVE RELATIONSHIP, INCLUDING SYNERGIES ON STANDARDS DEVELOPMENT,

IMPACTS REPORTING, AND CONTINUED INNOVATIONS IN CERTIFICATION DELIVERY.

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.

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

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

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

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 DOES NOT COMPENSATE EMPLOYEES OR OFFICERS. HOWEVER,

DIRECTORS AND OFFICERS OF RELATED ORGANIZATIONS ARE COMPENSATED.

RAINFOREST ALLIANCE INC POLICIES ARE AS FOLLOWS:

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

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THE SALARY RANGE AVERAGES OF COMPARABLE NON-PROFIT ORGANIZATIONS.

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.

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

INC.

RAINFOREST ALLIANCE HOLDING,

Part I

Related Organizations and Unrelated Partnerships

ed "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.	
Part	
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"Yes"	ttach to Form
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OMB No. 1545-0047 2020Inspection

Employer identification number 82-4110897

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

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

(f)
Direct controlling
entity (e) End-of-year assets (**d)** Total income (c)
Legal domicile (state
or foreign country) (b) Primary activity (a) Name, address, and EIN (if applicable) of disregarded entity 9 Ξ 3 4 9 9

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. Part II

(a) Name, address, and EIN of related organization	i related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	13)
							Yes No	
(1) RAINFOREST ALLIANCE INC.	13-3377893							
125 BROAD ST, 9TH FLOOR	NEW YORK, NY 10004	SUSTAINABILIT	NY	501(C)(3)	7	RA HOLDING	×	
(2) STICHTING RAINFOREST ALLIANCE								
DE RUYTERKADE 6	AMSTERDAM, NL 1013 AA	SUSTAINABILIT	NL			RA HOLDING	×	
(3)								
(4)								
(5)								
(9)								
(7)								
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	, see the Instructions for Form 9	90.				Schedule R	Schedule R (Form 990) 2020	20

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Page 2

Schedule R (Form 990) 2020

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. Part III

(k) Percentage ownership											
	٥N									Σ,	
(j) General or managing partner?	Yes					+				Part	ŀ
(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)										on Form 990,	
(h) Disproportionale allocations?	Yes No									"Yes"	
(g) Share of end-of- year assets										nization answere	
(f) Share of total income										lete if the orgar	
(e) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)										s a Corporation or Trust. Complete if the organization answard	
(d) Direct controlling entity										as a Corporation	
(c) Legal domicile (state or foreign	(6,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,									S Taxable	200
(b) Primary activity										ted Organizations	
(a) Name, address, and EIN of related organization										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.	ייייס סיי, ססממסס ייים
N S		(1)	(2)	(3)	(4)		(2)	(9)	(7)	Part IV	

(a)	(p)	. (3)	(D)	(e)		(a)	9	
Name, address, and EIN of related organization	Primary activity	Legal domicile	Direct controlling	Type of entity	Share of total	Share of	Percentage	Section (12(b)(13)
		(state or foreign country)	entity	(C corp, S corp, or trust)		end-or-year assets ownership controlled entity?	ownership	controlled entity?
								Yes No
(1)								
(2)								
(3)								
(4)								
(5)								
(9)								
(2)								
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Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. Part V

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this	, 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 listed in Parts II-IV?	in any of the following transacti	ons with one or more re	lated organizations lis	ted in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	or (iv) rent from a controlled ent	ity				
b Gift, grant, or capital contribution to related organization(s)	anization(s)				1b	\times
	rdanization(s)				1	×
	ization(s)					×
	(s)	· · · · · ·		· · · · · · · · · · · · · · · · · · ·		×
f Dividends from related organization(s)					:	
g Sale of assets to related organization(s)						
					- - - - -	×
i Exchange of assets with related organization(s).					-	×
j Lease of facilities, equipment, or other assets to related organization(s).	related organization(s)				1	×
)					
k Lease of facilities, equipment, or other assets from related organization(s)	om related organization(s)				, ,	×
	Traising solicitations for related on	danization(s)			=	×
m Performance of services or membership or fundraising solicitations by related organization(s)	Iraising solicitations by related orc	ganization(s)			- -	×
	signature potological distributions of the property		· · · ·			×
II SHaring of reinces, equipment, maining lists, of other assets with related organization(s)	otilei assets With leiated organiza	هرارارا(ع <i>)</i>				
o snaring of paid employees with related organization(s)	(s)				2	
					7	×
					- , 	
q Reimbursement paid by related organization(s) for expenses	or expenses					
					•	
 r Other transfer of cash or property to related organization(s) 	anization(s)				:	
 S Other transfer of cash or property from related organization(s). 	organization(s)					×
2 If the answer to any of the above is "Yes," see the instructions		א who must complete th	is line, including cove	for information on who must complete this line, including covered relationships and transaction thresholds.	saction threshol	ds.
(a Nama of relate	(a) Name of related organization		(b) Transaction	(c)	(d) Method of determining	termining
			type (a-s)		amount involved	volved
(1)						
(2)						
(3)						
(4)						
(5)						
(9)						
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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.

(k) Dercentage g ownership																
General or managing partner?																
Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)																
(h) Disproportionate allocations?																
(g) Share of end-of-year assets																
Share of total income																
(e) Are all partners section 501(c)(3) organizations?	3															
Predominant Are all partners income (related, section unrelated, excluded from tax under organizations?																
(c) Legal domicile (state or foreign country)																
(b) Primary activity																
(a) Name, address, and EIN of entity	(1)	(2)	(3)	(4)	(5)	(9)	(7)	(8)	(6)	(10)	(11)	(12)	(13)	(14)	(15)	(16)

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Part VII Supplemental Information

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