

Form **990**

**Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

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

**2024**

Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

**A** For the **2024** calendar year, or tax year beginning **JUL 1, 2024** and ending **JUN 30, 2025**

<b>B</b> Check if applicable:  Address change Name change Initial return Final return/terminated Amended return Application pending	<b>C</b> Name of organization <b>RAINFOREST TRUST</b>		<b>D</b> Employer identification number <b>13-3500609</b>	
	Doing business as		<b>E</b> Telephone number <b>800-456-4930</b>	
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	<b>G</b> Gross receipts \$ <b>157,143,726.</b>	
	<b>6801 KENNEDY RD SUITE 100B</b>		<b>H(a)</b> Is this a group return for subordinates? ..... Yes <input checked="" type="checkbox"/> No	
City or town, state or province, country, and ZIP or foreign postal code <b>WARRENTON, VA 20187</b>		<b>H(b)</b> Are all subordinates included? Yes No		
<b>F</b> Name and address of principal officer: <b>DR. JAMES C. DEUTSCH</b> <b>SAME AS C ABOVE</b>		If "No," attach a list. See instructions		
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or 527				
<b>J</b> Website: <b>WWW.RAINFORESTTRUST.ORG</b>				
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation Trust Association Other				
<b>L</b> Year of formation: <b>1989</b>			<b>M</b> State of legal domicile: <b>VA</b>	

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>RAINFOREST TRUST SAVES ENDANGERED WILDLIFE AND OUR PLANET BY CREATING PROTECTED RESERVES.</b>
	<b>2</b> Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a) <b>3</b> <b>13</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) <b>4</b> <b>13</b>
	<b>5</b> Total number of individuals employed in calendar year 2024 (Part V, line 2a) <b>5</b> <b>49</b>
	<b>6</b> Total number of volunteers (estimate if necessary) <b>6</b> <b>61</b>
	<b>7 a</b> Total unrelated business revenue from Part VIII, column (C), line 12 <b>7a</b> <b>0.</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11 <b>7b</b> <b>0.</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h) <b>15,658,699.</b> <b>Prior Year</b> <b>37,788,078.</b> <b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g) <b>0.</b> <b>0.</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) <b>2,843,571.</b> <b>4,679,609.</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) <b>42.</b> <b>0.</b>
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) <b>18,502,312.</b> <b>42,467,687.</b>
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3) <b>14,467,251.</b> <b>37,740,034.</b>
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) <b>0.</b> <b>0.</b>
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) <b>2,134,303.</b> <b>4,373,874.</b>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) <b>0.</b> <b>0.</b>
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) <b>2,132,940.</b>
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) <b>1,005,013.</b> <b>2,355,015.</b>
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) <b>17,606,567.</b> <b>44,468,923.</b>
<b>19</b> Revenue less expenses. Subtract line 18 from line 12 <b>895,745.</b> <b>-2,001,236.</b>	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16) <b>122,718,026.</b> <b>Beginning of Current Year</b> <b>122,130,159.</b> <b>End of Year</b>
	<b>21</b> Total liabilities (Part X, line 26) <b>398,257.</b> <b>522,295.</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20 <b>122,319,769.</b> <b>121,607,864.</b>

**Part II Signature Block**

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

<b>Sign Here</b>	Signature of officer <i>[Signature]</i>		Date <b>05/11/2026</b>	
	DR. JAMES C. DEUTSCH, CEO Type or print name and title			
<b>Paid Preparer Use Only</b>	Preparer's name <b>LUDMILA RENDLEMAN</b>	Preparer's signature <b>LUDMILA RENDLEMAN</b>	Date	Check if self-employed <input type="checkbox"/>
	Firm's name <b>SIKICH LLC</b>	Firm's EIN <b>36-3168081</b>	PTIN <b>P02490560</b>	Phone no. (703) 836-1350
Firm's address <b>333 JOHN CARLYLE STREET, SUITE 500</b>		<b>ALEXANDRIA, VA 22314</b>		

May the IRS discuss this return with the preparer shown above? See instructions  Yes  No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
RAINFOREST TRUST SAVES ENDANGERED WILDLIFE AND PROTECTS OUR PLANET BY CREATING RAINFOREST RESERVES THROUGH PARTNERSHIPS, COMMUNITY ENGAGEMENT, AND DONOR SUPPORT.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No
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 services? [ ] Yes [X] No
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.

4a (Code: ) (Expenses \$ 40,987,256. including grants of \$ 37,740,034. ) (Revenue \$ )
WORLD LAND AND NATURE CONSERVATION: SINCE 1988, RAINFOREST TRUST HAS CONSERVED AREAS IN THE TROPICS AND SUBTROPICS THROUGH PARTNERSHIPS WITH LOCAL ORGANIZATIONS WHICH YIELD
1) GOVERNMENT DESIGNATION OF NEW PROTECTED AREAS,
2) THE PURCHASE OF LAND FOR PRIVATE NATURE RESERVES, OR
3) STRENGTHENING LAND-TENURE AND GUARDIANSHIP OF INDIGENOUS PEOPLE AND LOCAL COMMUNITIES. BY PERMANENTLY PROTECTING CRITICAL HABITAT THIS WORK SAVES SPECIES AND VITAL ECOSYSTEMS FROM EXTINCTION.

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services (Describe on Schedule O.)
(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 40,987,256.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and schedules.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question, Yes, No. Rows 22-38 detailing various organizational requirements and compliance checks.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question, Yes, No. Rows 1a-1c regarding Form 1096, Forms W-2G, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No columns. Includes questions 2a through 17 regarding employee counts, tax returns, gross income, foreign accounts, prohibited transactions, and charitable contributions.

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 [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 13; 1b Enter the number of voting members included... 13; 2 Did any officer, director, trustee, or key employee have a family relationship... X; 3 Did the organization delegate control over management duties... X; 4 Did the organization make any significant changes to its governing documents... X; 5 Did the organization become aware during the year of a significant diversion of the organization's assets... X; 6 Did the organization have members or stockholders... X; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body... X; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body... X; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? X; b Each committee with authority to act on behalf of the governing body? X; 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? If "Yes," provide the names and addresses on Schedule O... X

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? X; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X; 11b Describe on Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done X; 13 Did the organization have a written whistleblower policy? X; 14 Did the organization have a written document retention and destruction policy? X; 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? a The organization's CEO, Executive Director, or top management official X; b Other officers or key employees of the organization X; 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? X; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed AL, AK, AR, CA, CO, FL, HI, IL, KS, KY, ME, MD
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [X] Another's website [X] Upon request [ ] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
MELISSA HOHIMER, CFOO - 800-456-4930
6801 KENNEDY RD SUITE 100B, WARRENTON, VA 20187

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

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

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

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
  - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
  - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
  - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

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 line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JAMES DEUTSCH CEO	40.00			X				260,843.	0.	19,685.
(2) MELISSA HOHIMER CFO/COO	40.00			X				183,117.	0.	6,772.
(3) JODI HUBBLE (UNTIL 02/06/25) VICE PRESIDENT, PHILANTHROPY	40.00				X			174,017.	0.	15,805.
(4) JAMES LEWIS VICE PRESIDENT, CONSERVATION	40.00					X		146,397.	0.	14,231.
(5) KIRA SEIBEL DIRECTOR OF MARKETING & COMMUNICATIO	40.00				X			105,425.	0.	8,617.
(6) BELINDA VILLANUEVA CONTROLLER	40.00				X			100,989.	0.	13,047.
(7) STEVE BERNACKI (UNTIL 11/22/24) DIRECTOR OF CONSERVATION STRATEGY	40.00				X			106,640.	0.	3,776.
(8) DR. BERNIE TERSHY CHAIRMAN	2.00	X		X				0.	0.	0.
(9) DR. CULLEN GEISELMAN VICE CHAIR	2.00	X		X				0.	0.	0.
(10) JEFFREY ZACK (AS OF 06/25) SECRETARY	2.00	X		X				0.	0.	0.
(11) PATRICIA KOVAL (UNTIL 06/25) SECRETARY	2.00	X		X				0.	0.	0.
(12) SARAH GILLMAN TREASURER	2.00	X		X				0.	0.	0.
(13) EDITH MC BEAN (AS OF 06/25) DIRECTOR	2.00	X						0.	0.	0.
(14) KIM STEWART DIRECTOR	2.00	X						0.	0.	0.
(15) ANN KAUPP DIRECTOR	2.00	X						0.	0.	0.
(16) DR. ROBERT S. RIDGELY DIRECTOR	2.00	X						0.	0.	0.
(17) DAVID QUAMMEN DIRECTOR	2.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) KIM LUNDGREN DIRECTOR	2.00	X						0.	0.	0.
(19) YOLANDA KAKABADSE (AS OF 06/25) DIRECTOR	2.00	X						0.	0.	0.
(20) JOHN GRANDY (AS OF 06/25) DIRECTOR	2.00	X						0.	0.	0.
(21) CARLOS SOUZA, JR. (AS OF 06/25) DIRECTOR	2.00	X						0.	0.	0.
(22) GEOFFREY CHEN (UNTIL 06/25) DIRECTOR	2.00	X						0.	0.	0.
(23) ERIC GOODE (UNTIL 06/25) DIRECTOR	2.00	X						0.	0.	0.
<b>1b Subtotal</b> .....								1,077,428.	0.	81,933.
<b>c Total from continuation sheets to Part VII, Section A</b> .....								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b> .....								1,077,428.	0.	81,933.

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 7

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
INTERACTIVE STRATEGIES, LLC, 1133 CONNECTICUT AVENUE NW STE 600, WASHINGTON,	WEBSITE DESIGN AND DIGITAL MARKETING	116,657.

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 1

**Part VIII Statement of Revenue**

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

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	<b>1 a</b>	Federated campaigns .....	<b>1a</b>					
	<b>b</b>	Membership dues .....	<b>1b</b>					
	<b>c</b>	Fundraising events .....	<b>1c</b>					
	<b>d</b>	Related organizations .....	<b>1d</b>					
	<b>e</b>	Government grants (contributions) .....	<b>1e</b>					
	<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above ...	<b>1f</b>	37,788,078.				
	<b>g</b>	Noncash contributions included in lines 1a-1f	<b>1g</b>	\$ 4,187,572.				
	<b>h</b>	<b>Total.</b> Add lines 1a-1f .....		37,788,078.				
Program Service Revenue	<b>2 a</b>	_____	<b>Business Code</b>					
	<b>b</b>	_____						
	<b>c</b>	_____						
	<b>d</b>	_____						
	<b>e</b>	_____						
	<b>f</b>	All other program service revenue .....						
	<b>g</b>	<b>Total.</b> Add lines 2a-2f .....						
Other Revenue	<b>3</b>	Investment income (including dividends, interest, and other similar amounts) .....		1,277,597.			1277597.	
	<b>4</b>	Income from investment of tax-exempt bond proceeds .....						
	<b>5</b>	Royalties .....						
	<b>6 a</b>	Gross rents .....	<b>6a</b>	(i) Real				
				(ii) Personal				
	<b>b</b>	Less: rental expenses ...	<b>6b</b>					
	<b>c</b>	Rental income or (loss)	<b>6c</b>					
	<b>d</b>	Net rental income or (loss) .....						
	<b>7 a</b>	Gross amount from sales of assets other than inventory .....	<b>7a</b>	(i) Securities				
				(ii) Other				
					118,078,051.			
	<b>b</b>	Less: cost or other basis and sales expenses .....	<b>7b</b>	114,676,039.				
<b>c</b>	Gain or (loss) .....	<b>7c</b>	3,402,012.					
<b>d</b>	Net gain or (loss) .....		3,402,012.			3402012.		
<b>8 a</b>	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 .....	<b>8a</b>						
<b>b</b>	Less: direct expenses .....	<b>8b</b>						
<b>c</b>	Net income or (loss) from fundraising events .....							
<b>9 a</b>	Gross income from gaming activities. See Part IV, line 19 .....	<b>9a</b>						
<b>b</b>	Less: direct expenses .....	<b>9b</b>						
<b>c</b>	Net income or (loss) from gaming activities .....							
<b>10 a</b>	Gross sales of inventory, less returns and allowances .....	<b>10a</b>						
<b>b</b>	Less: cost of goods sold .....	<b>10b</b>						
<b>c</b>	Net income or (loss) from sales of inventory .....							
Miscellaneous Revenue	<b>11 a</b>	_____	<b>Business Code</b>					
	<b>b</b>	_____						
	<b>c</b>	_____						
	<b>d</b>	All other revenue .....						
	<b>e</b>	<b>Total.</b> Add lines 11a-11d .....						
<b>12</b>	<b>Total revenue.</b> See instructions .....			42,467,687.	0.	0.	4679609.	

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	4,935,246.	4,935,246.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	32,804,788.	32,804,788.		
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	653,609.	208,198.	326,257.	119,154.
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	3,040,401.	1,604,489.	443,510.	992,402.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	65,848.	35,249.	8,623.	21,976.
<b>9</b> Other employee benefits	286,189.	143,226.	55,262.	87,701.
<b>10</b> Payroll taxes	327,827.	161,332.	67,546.	98,949.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management				
<b>b</b> Legal	75,238.	47,279.	19,588.	8,371.
<b>c</b> Accounting	30,580.		30,580.	
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees	89,554.		89,554.	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	640,380.	448,394.	112,591.	79,395.
<b>12</b> Advertising and promotion	403,995.	69,450.		334,545.
<b>13</b> Office expenses	296,058.	155,786.	61,211.	79,061.
<b>14</b> Information technology	336,045.	108,416.	69,458.	158,171.
<b>15</b> Royalties				
<b>16</b> Occupancy	23,824.	12,465.	4,137.	7,222.
<b>17</b> Travel	365,113.	203,187.	43,898.	118,028.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings				
<b>20</b> Interest				
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	66,246.	35,110.	11,653.	19,483.
<b>23</b> Insurance	27,982.	14,641.	4,859.	8,482.
<b>24</b> Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
<b>a</b> _____				
<b>b</b> _____				
<b>c</b> _____				
<b>d</b> _____				
<b>e</b> All other expenses _____				
<b>25</b> Total functional expenses. Add lines 1 through 24e	44,468,923.	40,987,256.	1,348,727.	2,132,940.
<b>26</b> 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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	2,227,502.	<b>1</b>	1,833,304.
	<b>2</b> Savings and temporary cash investments .....	30,487,431.	<b>2</b>	17,496,434.
	<b>3</b> Pledges and grants receivable, net .....	3,945,643.	<b>3</b>	1,814,731.
	<b>4</b> Accounts receivable, net .....	626,717.	<b>4</b>	886,620.
	<b>5</b> 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 .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....	254.	<b>7</b>	254.
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	200,627.	<b>9</b>	272,309.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 333,363.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 207,852.	134,300.	<b>10c</b> 125,511.
	<b>11</b> Investments - publicly traded securities .....	85,092,989.	<b>11</b>	99,698,367.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	2,563.	<b>15</b>	2,629.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	122,718,026.	<b>16</b>	122,130,159.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	396,768.	<b>17</b>	520,709.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....	1,489.	<b>25</b>	1,586.
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	398,257.	<b>26</b>	522,295.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	11,881,886.	<b>27</b>	14,203,921.
	<b>28</b> Net assets with donor restrictions .....	110,437,883.	<b>28</b>	107,403,943.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> Total net assets or fund balances .....	122,319,769.	<b>32</b>	121,607,864.
<b>33</b> Total liabilities and net assets/fund balances .....	122,718,026.	<b>33</b>	122,130,159.	

**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	42,467,687.
2	Total expenses (must equal Part IX, column (A), line 25)	2	44,468,923.
3	Revenue less expenses. Subtract line 2 from line 1	3	-2,001,236.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	122,319,769.
5	Net unrealized gains (losses) on investments	5	1,289,331.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	121,607,864.

**Part XII Financial Statements and Reporting**

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2b	Were the organization's financial statements audited by an independent accountant?	X	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:			
<input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

Form 990 (2024)

**SCHEDULE A**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
Attach to Form 990 or Form 990-EZ.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2024**

Open to Public Inspection

<b>Name of the organization</b> RAINFOREST TRUST	<b>Employer identification number</b> 13-3500609
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**Part I Reason for Public Charity Status.** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2  A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9  An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: \_\_\_\_\_
- 10  An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations .....
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
<b>Total</b>						

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	70056206.	40281791.	41407870.	15660699.	37788078.	205194644
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	70056206.	40281791.	41407870.	15660699.	37788078.	205194644
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) .....						72833651.
<b>6 Public support.</b> Subtract line 5 from line 4.						132360993

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
<b>7</b> Amounts from line 4 .....	70056206.	40281791.	41407870.	15660699.	37788078.	205194644
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	317,725.	1001995.	3985029.	2851440.	1277597.	9433786.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....	2,224.	272.	3,090.	42.		5,628.
<b>11 Total support.</b> Add lines 7 through 10						214634058
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f)) .....	<b>14</b>	61.67 %
<b>15</b> Public support percentage from 2023 Schedule A, Part II, line 14 .....	<b>15</b>	59.86 %
<b>16a 33 1/3% support test - 2024.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2023.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2024.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2023.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		<input type="checkbox"/>

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.)

Section A. Public Support

Table with 7 columns: (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support.

Section B. Total Support

Table with 7 columns: (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on; 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.); 13 Total support.

14 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) organization, check this box and stop here

Section C. Computation of Public Support Percentage

Table with 2 columns: Description, Percentage. Row 15: Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f)) 15%. Row 16: Public support percentage from 2023 Schedule A, Part III, line 15 16%.

Section D. Computation of Investment Income Percentage

Table with 2 columns: Description, Percentage. Row 17: Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f)) 17%. Row 18: Investment income percentage from 2023 Schedule A, Part III, line 17 18%.

19a 33 1/3% support tests - 2024. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2023. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

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

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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? Row 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?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? Row 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? Row 3: By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year?

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, b.

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):		
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	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 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	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	<b>Total annual distributions.</b> Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2024 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1	Distributable amount for 2024 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2024 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2024		
a	From 2019		
b	From 2020		
c	From 2021		
d	From 2022		
e	From 2023		
f	<b>Total</b> of lines 3a through 3e		
g	Applied to under distributions of prior years		
h	Applied to 2024 distributable amount		
i	Carryover from 2019 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2024 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2024 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2024, 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 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	<b>Excess distributions carryover to 2025.</b> Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2020		
b	Excess from 2021		
c	Excess from 2022		
d	Excess from 2023		
e	Excess from 2024		

Schedule A (Form 990) 2024

**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, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:**

**MISCELLANEOUS**

2020 AMOUNT: \$ 2,224.  
 2021 AMOUNT: \$ 272.  
 2022 AMOUNT: \$ 3,090.  
 2023 AMOUNT: \$ 42.  
 2024 AMOUNT: \$ 0.

**SCHEDULE D**  
**(Form 990)**

(Rev. December 2024)

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

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

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**Open to Public  
Inspection**

Name of the organization **RAINFOREST TRUST** Employer identification number **13-3500609**

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate value of contributions to (during year) .....		
3 Aggregate value of grants from (during year) .....		
4 Aggregate value at end of year .....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that 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

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included on line 2a .....	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register .....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year \_\_\_\_\_

4 Number of states where property subject to conservation easement is located \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year \_\_\_\_\_

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

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.

b 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.

(i) Revenue included on Form 990, Part VIII, line 1 ..... \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X ..... \$ \_\_\_\_\_

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ..... \$ \_\_\_\_\_

b Assets included in Form 990, Part X ..... \$ \_\_\_\_\_

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

Schedule D (Form 990) (Rev. 12-2024)

LHA 432051 01-02-25

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).
- a**  Public exhibition **d**  Loan or exchange program
- b**  Scholarly research **e**  Other \_\_\_\_\_
- c**  Preservation for future generations
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

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

- 1a** Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- |  | Amount    |
|--|-----------|
| <b>c</b> Beginning balance .....             | <b>1c</b> |
| <b>d</b> Additions during the year .....     | <b>1d</b> |
| <b>e</b> Distributions during the year ..... | <b>1e</b> |
| <b>f</b> Ending balance .....                | <b>1f</b> |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance .....	560,609.	552,964.	581,832.	1,915,080.	1,709,466.
<b>b</b> Contributions .....			25,000.	1,361.	4,085.
<b>c</b> Net investment earnings, gains, and losses .....	28,544.	7,644.	55,912.	-355,429.	201,529.
<b>d</b> Grants or scholarships .....					
<b>e</b> Other expenditures for facilities and programs .....	25,000.		109,780.	979,180.	
<b>f</b> Administrative expenses .....					
<b>g</b> End of year balance .....	564,153.	560,609.	552,964.	581,832.	1,915,080.

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment 0.0000 %
- b** Permanent endowment 0.0000 %
- c** Term endowment 100 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |   | Yes | No       |
|---|-----|----------|
| <b>(i)</b> Unrelated organizations? .....   |     | <b>X</b> |
| <b>(ii)</b> Related organizations? .....  |     | <b>X</b> |
| <b>b</b> If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? ..... |     |          |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land .....				
<b>b</b> Buildings .....				
<b>c</b> Leasehold improvements .....				
<b>d</b> Equipment .....		333,363.	207,852.	125,511.
<b>e</b> Other .....				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B)) .....				125,511.

**Part VII Investments - Other Securities**

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

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

**Part VIII Investments - Program Related.**

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

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

**Part IX Other Assets**

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

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

**Part X Other Liabilities**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) <b>LEASE LIABILITY FOR FINANCING LEASE</b>	<b>1,586.</b>
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, line 25, col. (B))	<b>1,586.</b>

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

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

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements	<b>1</b>	43,710,064.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>	1,289,331.
<b>b</b>	Donated services and use of facilities	<b>2b</b>	42,600.
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	
<b>e</b>	Add lines 2a through 2d	<b>2e</b>	1,331,931.
<b>3</b>	Subtract line 2e from line 1	<b>3</b>	42,378,133.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	89,554.
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	
<b>c</b>	Add lines 4a and 4b	<b>4c</b>	89,554.
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)	<b>5</b>	42,467,687.

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

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

<b>1</b>	Total expenses and losses per audited financial statements	<b>1</b>	44,421,969.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities	<b>2a</b>	42,600.
<b>b</b>	Prior year adjustments	<b>2b</b>	
<b>c</b>	Other losses	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	
<b>e</b>	Add lines 2a through 2d	<b>2e</b>	42,600.
<b>3</b>	Subtract line 2e from line 1	<b>3</b>	44,379,369.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	89,554.
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	
<b>c</b>	Add lines 4a and 4b	<b>4c</b>	89,554.
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)	<b>5</b>	44,468,923.

**Part XIII Supplemental Information**

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

**PART X, LINE 2:**

THE ORGANIZATION IS EXEMPT FROM FEDERAL AND LOCAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND A SIMILAR PROVISION OF STATE LAW. THE ORGANIZATION IS NOT CLASSIFIED AS A PRIVATE FOUNDATION.

THE ORGANIZATION IS NOT AWARE OF ANY ACTIVITIES THAT WOULD JEOPARDIZE THEIR TAX-EXEMPT STATUS THAT WOULD REQUIRE RECOGNITION IN THE ACCOMPANYING FINANCIAL STATEMENTS. GENERALLY, TAX RETURNS ARE SUBJECT TO EXAMINATION BY TAXING AUTHORITIES FOR UP TO THREE YEARS FROM THE DATE A COMPLETED RETURN IS FILED. IF MATERIAL OMISSIONS OF INCOME EXIST, TAX RETURNS MAY BE SUBJECT TO EXAMINATION FOR UP TO SIX YEARS. THE ORGANIZATION IS NO LONGER SUBJECT TO U.S. FEDERAL OR STATE EXAMINATIONS BY TAX AUTHORITIES FOR TAX YEARS PRIOR TO 2021.



**SCHEDULE F  
(Form 990)**

(Rev. December 2024)  
Department of the Treasury  
Internal Revenue Service

**Statement of Activities Outside the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**Open to Public  
Inspection**

Name of the organization

**RAINFOREST TRUST**

Employer identification number

**13-3500609**

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

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

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
CENTRAL AMERICA AND THE CARRIBEAN	0	2	CONSERVATION PROGRAM SERVICES	LAND CONSERVATION AND CONSERVATION PROGRAM MANAGEMENT	3,280.
EAST ASIA & THE PACIFIC	0	1	CONSERVATION PROGRAM SERVICES	LAND CONSERVATION AND CONSERVATION PROGRAM MANAGEMENT	5,219,134.
EUROPE	0	1	CONSERVATION PROGRAM SERVICES	LAND CONSERVATION AND CONSERVATION PROGRAM MANAGEMENT	121,857.
NORTH AMERICA	0	1	CONSERVATION PROGRAM SERVICES	LAND CONSERVATION AND CONSERVATION PROGRAM MANAGEMENT	465,340.
SOUTH AMERICA	0	3	CONSERVATION PROGRAM SERVICES	LAND CONSERVATION AND CONSERVATION PROGRAM MANAGEMENT	19,376,792.
SOUTH ASIA	0	0	CONSERVATION PROGRAM SERVICES	LAND CONSERVATION AND CONSERVATION PROGRAM MANAGEMENT	204,231.
SUB-SAHARAN AFRICA	0	3	CONSERVATION PROGRAM SERVICES	LAND CONSERVATION AND CONSERVATION PROGRAM MANAGEMENT	7,976,526.
<b>3 a Subtotal</b> .....	0	11			33,367,160.
<b>b Total from continuation sheets to Part I</b> .....	0	0			0.
<b>c Totals</b> (add lines 3a and 3b) .....	0	11			33,367,160.

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

Schedule F (Form 990) (Rev. 12-2024)

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	PROGRAM SUPPORT	334,262.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		EAST ASIA AND THE PACIFIC	PROGRAM SUPPORT	158,102.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		EAST ASIA AND THE PACIFIC	PROGRAM SUPPORT	98,946.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		EAST ASIA AND THE PACIFIC	PROGRAM SUPPORT	89,450.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		EAST ASIA AND THE PACIFIC	PROGRAM SUPPORT	7,622.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		EAST ASIA AND THE PACIFIC	PROGRAM SUPPORT	20,000.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		EAST ASIA AND THE PACIFIC	PROGRAM SUPPORT	1115053.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		EAST ASIA AND THE PACIFIC	PROGRAM SUPPORT	173,642.	WIRE	0.		ACTUAL AMOUNT DISBURSED

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ..... 115

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

<b>Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.</b> (Schedule F (Form 990), Part II, line 1)								
<b>1</b> <b>(a)</b> Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	<b>(c)</b> Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of non-cash assistance	<b>(h)</b> Description of non-cash assistance	<b>(i)</b> Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	PROGRAM SUPPORT	19,895.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		EAST ASIA AND THE PACIFIC	PROGRAM SUPPORT	35,100.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		EAST ASIA AND THE PACIFIC	PROGRAM SUPPORT	128,485.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		EAST ASIA AND THE PACIFIC	PROGRAM SUPPORT	43,760.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		EAST ASIA AND THE PACIFIC	PROGRAM SUPPORT	109,831.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		EAST ASIA AND THE PACIFIC	PROGRAM SUPPORT	209,712.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		EAST ASIA AND THE PACIFIC	PROGRAM SUPPORT	170,000.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		EAST ASIA AND THE PACIFIC	PROGRAM SUPPORT	9,000.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		EAST ASIA AND THE PACIFIC	PROGRAM SUPPORT	57,817.	WIRE	0.		ACTUAL AMOUNT DISBURSED

<b>Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.</b> (Schedule F (Form 990), Part II, line 1)								
<b>1</b> <b>(a)</b> Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	<b>(c)</b> Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of non-cash assistance	<b>(h)</b> Description of non-cash assistance	<b>(i)</b> Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	PROGRAM SUPPORT	246,450.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		EAST ASIA AND THE PACIFIC	PROGRAM SUPPORT	68,104.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		EAST ASIA AND THE PACIFIC	PROGRAM SUPPORT	490,325.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		EAST ASIA AND THE PACIFIC	PROGRAM SUPPORT	44,985.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		EAST ASIA AND THE PACIFIC	PROGRAM SUPPORT	548,457.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		EAST ASIA AND THE PACIFIC	PROGRAM SUPPORT	442,320.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		EAST ASIA AND THE PACIFIC	PROGRAM SUPPORT	231,962.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		EAST ASIA AND THE PACIFIC	PROGRAM SUPPORT	57,843.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		EAST ASIA AND THE PACIFIC	PROGRAM SUPPORT	108,410.	WIRE	0.		ACTUAL AMOUNT DISBURSED

<b>Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.</b> (Schedule F (Form 990), Part II, line 1)								
<b>1</b> <b>(a)</b> Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	<b>(c)</b> Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of non-cash assistance	<b>(h)</b> Description of non-cash assistance	<b>(i)</b> Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	PROGRAM SUPPORT	59,028.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		EUROPE (INCLUDING ICELAND & GREENLAND)	PROGRAM SUPPORT	91,974.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		EUROPE (INCLUDING ICELAND & GREENLAND)	PROGRAM SUPPORT	20,000.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		NORTH AMERICA	PROGRAM SUPPORT	193,824.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		NORTH AMERICA	PROGRAM SUPPORT	139,128.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		NORTH AMERICA	PROGRAM SUPPORT	48,154.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	516,438.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	56,496.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	683,265.	WIRE	0.		ACTUAL AMOUNT DISBURSED

<b>Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.</b> (Schedule F (Form 990), Part II, line 1)								
<b>1</b> <b>(a)</b> Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	<b>(c)</b> Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of non-cash assistance	<b>(h)</b> Description of non-cash assistance	<b>(i)</b> Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	PROGRAM SUPPORT	186,761.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	19,170.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	181,865.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	44,338.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	5953128.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	44,355.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	100,000.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	372,628.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	613,241.	WIRE	0.		ACTUAL AMOUNT DISBURSED

<b>Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.</b> (Schedule F (Form 990), Part II, line 1)								
<b>1</b> <b>(a)</b> Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	<b>(c)</b> Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of non-cash assistance	<b>(h)</b> Description of non-cash assistance	<b>(i)</b> Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	PROGRAM SUPPORT	498,608.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	47,600.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	20,000.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	20,000.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	65,893.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	364,125.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	41,150.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	14,495.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	1377368.	WIRE	0.		ACTUAL AMOUNT DISBURSED

<b>Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.</b> (Schedule F (Form 990), Part II, line 1)								
<b>1</b> <b>(a)</b> Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	<b>(c)</b> Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of non-cash assistance	<b>(h)</b> Description of non-cash assistance	<b>(i)</b> Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	PROGRAM SUPPORT	828,783.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	220,000.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	50,000.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	254,777.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	1169756.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	186,989.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	505,514.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	34,353.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	1358478.	WIRE	0.		ACTUAL AMOUNT DISBURSED

<b>Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.</b> (Schedule F (Form 990), Part II, line 1)								
<b>1</b> <b>(a)</b> Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	<b>(c)</b> Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of non-cash assistance	<b>(h)</b> Description of non-cash assistance	<b>(i)</b> Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	PROGRAM SUPPORT	73,735.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	60,000.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	308,912.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	700,080.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	211,009.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	267,689.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	425,880.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	34,412.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	582,685.	WIRE	0.		ACTUAL AMOUNT DISBURSED

<b>Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.</b> (Schedule F (Form 990), Part II, line 1)								
<b>1</b> <b>(a)</b> Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	<b>(c)</b> Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of non-cash assistance	<b>(h)</b> Description of non-cash assistance	<b>(i)</b> Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	PROGRAM SUPPORT	510,934.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	162,170.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH AMERICA	PROGRAM SUPPORT	41,700.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH ASIA	PROGRAM SUPPORT	81,438.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH ASIA	PROGRAM SUPPORT	30,700.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH ASIA	PROGRAM SUPPORT	67,265.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH ASIA	PROGRAM SUPPORT	14,828.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SOUTH ASIA	PROGRAM SUPPORT	10,000.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	359,463.	WIRE	0.		ACTUAL AMOUNT DISBURSED

<b>Part II</b> Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
<b>1</b> <b>(a)</b> Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	<b>(c)</b> Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of non-cash assistance	<b>(h)</b> Description of non-cash assistance	<b>(i)</b> Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	200,940.3	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	65,110.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	111,141.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	326,098.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	20,000.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	188,610.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	50,000.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	19,870.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	19,999.	WIRE	0.		ACTUAL AMOUNT DISBURSED

<b>Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.</b> (Schedule F (Form 990), Part II, line 1)								
<b>1</b> <b>(a)</b> Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	<b>(c)</b> Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of non-cash assistance	<b>(h)</b> Description of non-cash assistance	<b>(i)</b> Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	88,200.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	103,248.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	20,000.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	124,592.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	7,936.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	88,740.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	74,500.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	108,600.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	343,981.	WIRE	0.		ACTUAL AMOUNT DISBURSED

<b>Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.</b> (Schedule F (Form 990), Part II, line 1)								
<b>1</b> <b>(a)</b> Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	<b>(c)</b> Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of non-cash assistance	<b>(h)</b> Description of non-cash assistance	<b>(i)</b> Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	32,820.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	50,000.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	30,000.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	125,306.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	217,200.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	232,853.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	357,799.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	138,539.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	384,828.	WIRE	0.		ACTUAL AMOUNT DISBURSED

<b>Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.</b> (Schedule F (Form 990), Part II, line 1)								
<b>1</b> <b>(a)</b> Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	<b>(c)</b> Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of non-cash assistance	<b>(h)</b> Description of non-cash assistance	<b>(i)</b> Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	500,130.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	275,229.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	72,902.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	55,212.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	117,682.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	903,082.	WIRE	0.		ACTUAL AMOUNT DISBURSED
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	195,363.	WIRE	0.		ACTUAL AMOUNT DISBURSED



**Part IV Foreign Forms**

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

**Part V Supplemental Information**

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

**PART I, LINE 2:**

RAINFOREST TRUST PERFORMS DUE DILIGENCE AT SEVERAL STAGES TO ENSURE THAT WE WORK WITH STRONG GRANTEEES WHO ARE OPERATING LEGALLY AND RESPONSIBLY IN-COUNTRY. DURING THE INITIAL REVIEWS OF CONCEPT NOTES, CONSERVATION STAFF INVESTIGATE THE PROSPECTIVE GRANTEE, INCLUDING REVIEWING THE ORGANIZATION'S WEBSITE AND MISSION AND VISION STATEMENTS, TO ENSURE THAT THEY ALIGN WITH RAINFOREST TRUST. ONCE A CONCEPT NOTE IS APPROVED, THE RESPECTIVE PROJECT LEAD AND REGIONAL TEAMS PERFORM FULL GRANTEE VETTING THAT INCLUDES THE REQUEST FOR ORGANIZATIONAL DOCUMENTS, INCLUDING PROOF OF AUTHORIZATION TO WORK IN COUNTRY, AS WELL AS THE MOST RECENT FINANCIAL AUDIT, IF APPLICABLE. ADDITIONALLY, WE REQUEST THE NAMES OF THREE PROFESSIONAL REFERENCES AND MAJOR FINANCIAL SUPPORTERS FROM THE PROSPECTIVE GRANTEE, WITH WHOM WE FOLLOW UP WITH QUERIES ABOUT THE GRANTEE'S CAPACITY AND PERFORMANCE. THESE ARE RECORDED IN OUR DATABASE SYSTEM. BEFORE PROJECT PROPOSALS ARE SUBMITTED FOR APPROVAL, THEY ARE REVIEWED BY EXPERTS IN THE FIELD AND/OR REGION. ONCE PROPOSED PROJECTS ARE APPROVED, THE RAINFOREST TRUST PROJECT OFFICER WORKS CLOSELY WITH THE GRANTEE TO ENSURE THAT THE PROJECT IS IMPLEMENTED EFFECTIVELY. THE PROJECT LEAD CONTACTS THE GRANTEE ON A REGULAR BASIS AND THE GRANTEE IS REQUIRED TO SUBMIT TECHNICAL PROGRESS AND FINANCIAL REPORTS ON A PREDETERMINED BASIS. FINANCIAL REPORTS MUST SHOW FUNDS ARE SPENT AS AGREED TO IN THE APPROVED BUDGET. TECHNICAL PROGRESS REPORTS MUST DEMONSTRATE THAT THE PROJECT IS ADVANCING TOWARD THE ESTABLISHMENT OF A PROTECTED OR CONSERVED AREA AT A SATISFACTORY PACE BEFORE ADDITIONAL TRANCHES OF FUNDING ARE RELEASED. ADDITIONALLY, WHERE POSSIBLE, RAINFOREST TRUST STAFF VISIT THE GRANTEE AND PROJECT SITE TO ENSURE THAT CHALLENGES ARE ADDRESSED AND THAT THE PROJECT IS PROGRESSING WELL. PROJECTS THAT INCLUDE LAND PURCHASES TYPICALLY REQUIRE LEGAL LAND DOCUMENTS, INCLUDING LAND SALE AGREEMENTS, TITLE AND OTHER CUSTOMARY SEARCHES, SURVEY MAPS, DRAFT DEEDS, AND TITLE OR USE RESTRICTIONS, IF ANY, PRIOR TO THE TRANSFER OF FUNDS. AFTER THE PURCHASE HAS BEEN COMPLETED, THE GRANTEE IS REQUIRED TO PROVIDE DOCUMENTATION SHOWING THE SUCCESSFUL COMPLETION OF THE PURCHASE AND A COPY OF THE LAND TITLE, AS APPLICABLE. OUR SCIENCE AND MONITORING TEAM USES A CUSTOM SATELLITE DATA MONITORING PLATFORM TO ASSESS DEFORESTATION AND OTHER ENVIRONMENTAL THREATS, SUCH AS FIRES, AT PROJECT SITES.

**SCHEDULE I  
(Form 990)**

(Rev. December 2024)

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  
Attach to Form 990.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**Open to Public  
Inspection**

Name of the organization **RAINFOREST TRUST** Employer identification number **13-3500609**

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

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
CONSERVATION INTERNATIONAL - BOLIVIA - 2011 CRYSTAL DRIVE - ARLINGTON, VA 22202	52-1497470	501(C)3	775,054.	0.	ACTUAL AMOUNT DISBURSED		IN SUPPORT OF CONSERVATION EFFORTS
DIAN FOSSEY GORILLA FUND 800 CHEROKEE AVE SE ATLANTA, GA 30315	52-1118866	501(C)3	226,479.	0.	ACTUAL AMOUNT DISBURSED		IN SUPPORT OF CONSERVATION EFFORTS
FRANKFURT ZOOLOGICAL SOCIETY 3810 ARGYLE TERRACE NW WASHINGTON, DC 20011	30-0457102	501(C)3	128,769.	0.	ACTUAL AMOUNT DISBURSED		IN SUPPORT OF CONSERVATION EFFORTS
GORILLA REHABILITATION AND CONSERVATION EDUCATION CENTER - PO BOX 504 - NIWOT, CO 80544	46-2308758	501(C)3	520,726.	0.	ACTUAL AMOUNT DISBURSED		IN SUPPORT OF CONSERVATION EFFORTS
INTERNATIONAL CONSERVATION CAUCUS FOUNDATION (ICCF) - 1200 POTOMAC STREET NW - WASHINGTON, DC 20007	83-0449176	501(C)3	7,000.	0.	ACTUAL AMOUNT DISBURSED		IN SUPPORT OF CONSERVATION EFFORTS
KTK-BELT, INC. 51 LARCH DR HYDE PARK, NY 11040	47-2166334	501(C)3	314,602.	0.	ACTUAL AMOUNT DISBURSED		IN SUPPORT OF CONSERVATION EFFORTS

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 12.
- 3 Enter total number of other organizations listed in the line 1 table \_\_\_\_\_

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

Schedule I (Form 990) (Rev. 12-2024)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MONGABAY ORG CORP 1259 EL CAMINO REAL 150 MENLO PARK, CA 94025	45-3714703	501(C)3	20,000.	0.	ACTUAL AMOUNT DISBURSED		IN SUPPORT OF CONSERVATION EFFORTS
NATURA BOLIVIA FOUNDATION 10685 HAZELHURST DR STE B PMP 23792 HOUSTON, TX 77043	45-3337460	501(C)3	771,856.	0.	ACTUAL AMOUNT DISBURSED		IN SUPPORT OF CONSERVATION EFFORTS
NEW VENTURE FUND 1828 L STREET NW 300-A WASHINGTON, DC 20036	20-5806345	501(C)3	20,024.	0.	ACTUAL AMOUNT DISBURSED		IN SUPPORT OF CONSERVATION EFFORTS
PANTHERA CORPORATION 8 WEST 40TH STREET, 18TH FLOOR NEW YORK, NY 10018	20-4668756	501(C)3	653,238.	0.	ACTUAL AMOUNT DISBURSED		IN SUPPORT OF CONSERVATION EFFORTS
RARE 1310 N. COURTHOUSE ROAD STE 110 ARLINGTON, VA 22201	23-7380563	501(C)3	431,610.	0.	ACTUAL AMOUNT DISBURSED		IN SUPPORT OF CONSERVATION EFFORTS
WILDLIFE CONSERVATION SOCIETY 2300 SOUTHERN BOULEVARD BRONX, NY 10460	13-1740011	501(C)3	1,065,888.	0.	ACTUAL AMOUNT DISBURSED		IN SUPPORT OF CONSERVATION EFFORTS

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

**Part IV** **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

**PART I, LINE 2:**

RAINFOREST TRUST PERFORMS DUE DILIGENCE BY VETTING GRANTEES AND PROJECT PROPOSALS THROUGH OUR ADVISORY COUNCIL AS WELL AS INDEPENDENT CONSERVATION SCIENTISTS AND PRACTITIONERS SERVING AS REVIEWERS. WE ALSO CONTACT OTHER FUNDERS TO REQUEST CONFIDENTIAL EVALUATIONS OF THE GRANTEES' GOVERNANCE, INSTITUTIONAL STABILITY, ABILITY TO EXECUTE THE PROJECT, AND ABILITY TO MANAGE THE GRANT. ONCE THE PROJECT IS APPROVED, WE WORK CLOSELY WITH GRANTEES TO MAKE SURE THE PROJECT IS IMPLEMENTED EFFECTIVELY. THE PROJECT OFFICER CHECKS IN WITH EACH GRANTEE TO MONITOR PROGRESS AND OFFER ADVICE ON OVERCOMING ANY CHALLENGES. PAYMENTS ARE DISBURSED ON A PREDETERMINED BASIS, CONTINGENT ON SATISFACTORY TECHNICAL PROGRESS AND FINANCIAL REPORTS AND THE COMPLETION OF PROJECT MILESTONES, AS APPLICABLE. PROGRESS REPORTS MUST DEMONSTRATE THAT THE PROJECT IS ADVANCING TOWARDS THE CREATION OF A NEW PROTECTED AREA AT A SATISFACTORY PACE AND FINANCIAL REPORTS MUST SHOW FUNDS ARE BEING SPENT AS SPECIFIED IN THE APPROVED BUDGET. IF NECESSARY, A RAINFOREST TRUST TEAM MEMBER WILL VISIT THE SITE TO ASSESS AND/OR TROUBLESHOOT CHALLENGES THAT AFFECT THE PROJECT. LASTLY, OUR GEOGRAPHIC INFORMATION SYSTEMS SPECIALIST USES SATELLITE DATA TO MONITOR DEFORESTATION

**Part IV** Supplemental Information

AND FIRES WITHIN PROJECT SITES.

**SCHEDULE J  
(Form 990)**

(Rev. December 2024)  
Department of the Treasury  
Internal Revenue Service

**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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization <b>RAINFOREST TRUST</b>	Employer identification number <b>13-3500609</b>
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**Part I Questions Regarding Compensation**

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

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

**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? .....

**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.

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

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

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

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

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

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" 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:

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

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

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

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

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

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

Schedule J (Form 990) (Rev. 12-2024)

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) JAMES DEUTSCH CEO	(i)	260,843.	0.	0.	7,995.	11,690.	280,528.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) MELISSA HOHIMER CFO/COO	(i)	183,117.	0.	0.	5,494.	1,278.	189,889.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JODI HUBBLE (UNTIL 02/06/25) VICE PRESIDENT, PHILANTHROPY	(i)	174,017.	0.	0.	5,393.	10,412.	189,822.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) JAMES LEWIS VICE PRESIDENT, CONSERVATION	(i)	146,397.	0.	0.	4,541.	9,690.	160,628.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**Part III Supplemental Information**

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

**PART I, LINE 4A:**

VICE-PRESIDENT - SEVERANCE OF \$37,782.71

Multiple horizontal lines for supplemental information.

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2024**

Open to Public Inspection

Complete if the organizations answered "Yes" on Form 990, Part IV, line 29 or 30.  
Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

Name of the organization

**RAINFOREST TRUST**

Employer identification number

**13-3500609**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	117	4,187,572.	FMV
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ( )				
26 Other ( )				
27 Other ( )				
28 Other ( )				

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

29

30a During the year, did the organization receive by contribution any property reported on Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?

	Yes	No
30a		X
31	X	
32a		X

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

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

Schedule M (Form 990) 2024

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

Lined area for supplemental information.

**SCHEDULE O  
(Form 990)**

(Rev. December 2024)

Department of the Treasury  
Internal Revenue Service

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

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

Attach to Form 990 or Form 990-EZ.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**Open to Public  
Inspection**

Name of the organization

**RAINFOREST TRUST**

Employer identification number

**13-3500609**

**FORM 990**

THIS FORM 990 IS FILED FOR THE ORGANIZATION'S FIRST FULL FISCAL YEAR FOLLOWING THE TRANSITION OF ITS YEAR-END FROM DECEMBER 31ST TO JUNE 30TH. IN THE PRIOR FILING YEAR, THE ORGANIZATION REPORTED ON A SHORT TAX YEAR COVERING JANUARY 1, 2024 - JUNE 30, 2024 TO FACILITATE THIS CHANGE. AS A RESULT, CERTAIN AMOUNTS PRESENTED IN THIS RETURN MAY NOT BE DIRECTLY COMPARABLE TO THOSE REPORTED IN THE PRIOR YEAR DUE TO THE ABBREVIATED REPORTING IN THE TRANSITION YEAR. READERS OF THIS FORM SHOULD KEEP THIS IN MIND WHEN MAKING YEAR-OVER-YEAR COMPARISONS. THE CHANGE IN FISCAL YEAR WAS IMPLEMENTED TO IMPROVE OPERATIONAL EFFICIENCY, STREAMLINE PLANNING CYCLES, AND ENHANCE THE QUALITY OF OUR REPORTING.

**FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:**

RAINFOREST TRUST RESERVES CURRENTLY PROVIDE CRITICAL HABITAT FOR 39% OF ALL IUCN RED LIST THREATENED TERRESTRIAL MAMMAL SPECIES AND 46% OF THREATENED TERRESTRIAL BIRDS. WE HAVE PERMANENTLY AND LEGALLY PROTECTED MORE THAN 58 MILLION ACRES OF CRITICAL HABITAT. MORE THAN 95% OF OUR PROJECTS SUCCEED IN PROTECTING LAND, AND 98.3% OF THE FORESTS WE HAVE PROTECTED REMAIN STANDING.

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

THE BOARD RECEIVES THE FORM 990 FOR REVIEW BEFORE IT IS FILED.

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

THE BOARD IS ASKED REGULARLY TO DISCLOSE TO THE OTHERS ON THE BOARD THEIR BUSINESS AND PERSONAL INTEREST TO DETERMINE IF THERE ARE ANY CONFLICTS.

**FORM 990, PART VI, SECTION B, LINE 15:**

THE COMPENSATION PROCESS FOR THE CHIEF EXECUTIVE OFFICER IS DETERMINED BY THE BOARD OF DIRECTORS AFTER CONSIDERING THE RECOMMENDATION OF THE COMPENSATION COMMITTEE. ANNUALLY, THE COMMITTEE REVIEWS THE PERFORMANCE OF THE CEO, RELEVANT ECONOMIC CONDITIONS, AND COMPENSATION DATA AS AVAILABLE FROM REPUTABLE SOURCES (SUCH AS FORMS 990, GUIDESTAR, AND OTHER NON-PROFIT SURVEY DATA). THE CEO, IN COLLABORATION WITH THE HUMAN RESOURCES TEAM, DETERMINES COMPENSATION FOR OTHER KEY EMPLOYEES OF THE ORGANIZATION AFTER CONSIDERING SIMILAR CRITERIA INCLUDING PERFORMANCE, ECONOMIC CONDITIONS, AND MARKET DATA FROM REPUTABLE SOURCES.

**FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:**

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

**FORM 990, PART VI, SECTION C, LINE 18:**

THE ORGANIZATION'S FORM 990 IS AVAILABLE ON OTHER WEBSITES AS WELL AS OUR OWN WEBSITE. OTHER GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST.

**FORM 990, PART VI, SECTION C, LINE 19:**

THE ORGANIZATION PUBLISHES ITS BY-LAWS, FINANCIAL STATEMENTS AND FORM 990S ON ITS WEBSITE. THE CONFLICT OF INTEREST POLICY IS AVAILABLE UPON REQUEST.

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

Schedule O (Form 990) (Rev. 12-2024)

LHA 432211 01-15-25

