Form **990**

Return of Organization Exempt From Income Tax

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

► Do not enter Social Security numbers on this form as it may be made public.
► Information about Form 990 and its instructions is at www.irs.gov/form990.

2013

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Α	For the 2	2013 calen	dar year, or tax				, 20)13, and	d endin	g		,				
В	Check if app	olicable:	C Name of organiz	ation Rain	forest	Trust				******	D Emplo	yer Identifi	cation Number			
	Addres	s change	Doing Business								12-	35006	Λο.			
	X Name	ū	Number and stre		mail is not delive	ered to street a	ddress)		Room/s	ruito	E Teleph					
	H	•				0,00 10 01,001 0	1441000)		T COOM S	suite						
	Initial re		25 Horner						<u></u>		(800) 456-4930					
	Termin	ated	City or town, stat	te or province, co	ountry, and ZIP o	r foreign postal	code									
	Amend	led return	Warrenton				, ,	/A 20	0186		G Gross	receipts \$	4,840,489			
	Applica	ation pending	F Name and addre	ss of principal of	ficer:					H(a) Is this a	group retur	n for subord	linates? Yes	XNo		
			Paul Salama	n 25 Horn	er Street	. Warrer	nton	VA 20	1186	H(b) Are all if 'No,' a	subordinates	included?	Yes	No		
Ī	Tax-exer	npt status	X 501(c)(3)	501(c) (sert no.)	4947(a)(1		527	If 'No,' a	attach a list.	(see instruc	tions)			
J	Websit	·			/ \	501(110.)	+ / + / (α)(1, 01	1327			. •				
K		rganization:	w.rainfore			>		11. 1/		H(c) Group	<u>-</u>					
	The state of the s			Trust	Association	Other -		L Year	of formation	on: 1989	9 IVI	State of leg	al domicile: VA	1		
Fa	CONTRACTOR OF THE PARTY OF THE	Summar				<i>c</i>										
			e the organization		_			<u>The</u>	<u>miss</u>	<u>ion of</u>	the P	<u>ainfo</u>	rest_Tru	st		
9S			rchase thr							ngered	l_wild.	<u>life </u>				
Governance	<u>tr</u>	rough	community_	engageme	<u>ent_and</u>	<u>local</u>	<u>partne</u>	<u>rshi</u> ţ	os	-						
er																
õ		eck this bo		rganization o								ssets.				
			ting members of									3		14		
S			lependent voting									4		14		
:≝			of individuals em									5		12		
Activities &			of volunteers (es									6		10		
Ă			d business reven									7a		0.		
	b Ne	t unrelated	business taxable	income fron	n Form 990-	T, line 34						7b				
										Р	rior Year		Current Y	ear		
a)			and grants (Part								,986,	164.	4,602	,994.		
Revenue	9 Pro	ogram serv	ice revenue (Parl	t VIII, line 2g))											
eVe	10 Inv	estment in	come (Part VIII, c	column (A), li	nes 3, 4, and	d 7d)					1,8	301.	2	,496.		
ď	11 Oth	ner revenue	e (Part VIII, colun	nn (A), lines !	5, 6d, 8c, 9c	, 10c, and 1	l1e)					203.				
	12 To	tal revenue	- add lines 8 th	rough 11 (mi	ust equal Pa	rt VIII, colui	mn (A), lin	e 12) .		1	,991,1		4,605	,490.		
	13 Gra	ants and si	milar amounts pa	id (Part IX, c	olumn (A), li	nes 1-3) .					885,3			,122.		
	14 Benefits paid to or for members (Part IX, column (A), line 4)												-,	,		
			r compensation,				257	,678.								
Expenses							307,	107.	337	, 676.						
ens		a Professional fundraising fees (Part IX, column (A), line 11e)														
걊	b Tot	tal fundrais	ing expenses (Pa	art IX, columi	n (D), line 25	⁵⁾ ► _		93,	383.							
	17 Oth	her expens	es (Part IX, colur	nn (A), lines	11a-11d, 11	f-24e)				162,251.			245,988.			
	18 To	tal expense	es. Add lines 13-1	17 (must equ	al Part IX, co	olumn (A), I	ine 25) .			1	,355,0	096.	4,277	,788.		
	19 Re	venue less	expenses. Subtr	act line 18 fr	om line 12						636,0	072.	327	,702.		
9 0										Beginnir	ng of Curre		End of Y			
set alai	20 To	tal assets (Part X, line 16) .							<u> </u>	,567,6		1.917	,452.		
Net Assets Fund Balan	21 To	tal liabilities	s (Part X, line 26)								21,			,890.		
ξŠ	22 Ne	t accate or	fund balances. S	Subtract line 1	21 from line	20				1	,545,8			,562.		
D-	Accesses to commence the	Signatur		abtract line 2	ET HOITIMIC A	20				1 7	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	300.1	1,073	, 302.		
com	er penaities d plete. Declara	of perjury, I dec ation of prepare	clare that I have examiner (other than officer) is	ned this return, in s based on all inf	cluding accompa ormation of whic	anying schedul h preparer has	es and staten any knowled	nents, and ge.	to the bes	st of my know	ledge and be	ellet, it is true	e, correct, and			
			7/	James						Ī0	6/05/1	Λ				
e:		Signatu	re of officer							Da		L "I				
Siç He	jii									27.0						
ne	16		l Salaman print name and title.							CEO						
	·····		•	r	111.	angles and a second					,	1	TINI			
			reparer's name		Preparer's signa	rure \	111	Da			Check	if P	TIN			
Pa	id	Marith	n L. Fisher	r ,	V/ Ed	141	1	<u></u>	6/05/	14	self-employ	ed F	00105648			
	eparer	Firm's name	► Kronze	k, Fish	er & Lor	pez, PL	LC									
	e Only	Firm's addre	. —	d Stree							Firm's EIN	52-	1864182			
	-		Washin			····	DC 20	0002-	4909		Phone no.	(202)		27		
May	the IRS	discuss this	s return with the	_	wn above? (see instruc			-		<u> </u>		X Yes	No		
	,	un	5 , 5 Com 1 William 110	p. opa. 01 0110	42070: (JJO HISTIAC							21 163			

) (Revenue \$

including grants of

4,064,735.

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

4 e Total program service expenses >

(Expenses

Form 990 (2013) Rainforest Trust Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

2112	tive Onceknist of Required ocheanes (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>			37
		23		Х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25a	24a		Х
k	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
c	I Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
t	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		X
20	Piddle consists and decrease and PANE 5.00 and the first state of the			
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		X,
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV.	28b		Х
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	Х	i
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M			
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	30 31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete	31		25
JZ	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled			
	entity within the meaning of section 512(b)(13)? If Yes, complete Schedule R, Part V, line 2	35b		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
RAA		Form	990 (2	2013)

Form **990** (2013)

				1.,	
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1 a	5	Yes	No
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		ăl .		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and (gambling) winnings to prize winners?	I reportable gaming	1 c		Х
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2 a 1			
b	olf at least one is reported on line 2a, did the organization file all required federal employment tax re		2 b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructi	ons)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3 a	**************************************	Х
b	o If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule $O \dots \dots \dots$		3 b		
	At any time during the calendar year, did the organization have an interest in, or a signature or oth financial account in a foreign country (such as a bank account, securities account, or other financial	ner authority over, a al account)?	4 a		Х
k	olf 'Yes,' enter the name of the foreign country: ►				
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Finance				
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year		5 a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transfer of the control of		5 b	1	Х
C	s If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	• • • • • • • • • • • • • • • • • • • •	5 c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and disolicit any contributions that were not tax deductible as charitable contributions?	d the organization	6 a		Х
b	olf 'Yes,' did the organization include with every solicitation an express statement that such contribution of tax deductible?	utions or gifts were	6 b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly a services provided to the payor?	or goods and	7 a		X
b	olf 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7 b	ļ	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which i		7 c		Х
c	I If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benef	it contract?	7 e	Lar artisticaes	Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit co	ontract?	7 f		Х
ç	If the organization received a contribution of qualified intellectual property, did the organization file as required?	Form 8899	7 g		
r	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organ Form 1098-C?	nization file a	7 h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization, or a donor advised fund maintained by a sponsoring organization, have a holdings at any time during the year?	ng organizations. Did the excess business	8		Х
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the organization make any taxable distributions under section 4966?	· · · · · · · · · · · · · · · · · · ·	9 a		X
- Ł	Did the organization make a distribution to a donor, donor advisor, or related person?		9 b		Х
10	Section 501(c)(7) organizations. Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10 a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10 b			
11	Section 501(c)(12) organizations. Enter:				
â	Gross income from members or shareholders	11 a			
t	o Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)....................................	11 b			
12 a	s Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of F	orm 1041?	12 a		
	olf 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.				
ŧ	Is the organization licensed to issue qualified health plans in more than one state?		13 a		2
	Note. See the instructions for additional information the organization must report on Schedule O.				
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13 b			
	Enter the amount of reserves on hand	13 c			
	Did the organization receive any payments for indoor tanning services during the tax year?		14 a		Х
Ŀ	olf 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedu	ıle O	14 b	4	

Pa	Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below	v an	d for						
	a ivo response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes	in	u 101						
	Scriedule O. See instructions.								
Sec	Check if Schedule O contains a response or note to any line in this Part VI		• • •	. Х					
	Cuton A. Governing Body and Management		T						
1	a Enter the number of voting members of the governing body at the end of the tax year 1 a		Yes	No					
	If there are material differences in voting rights among members								
	of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.								
	h Enter the number of voting members included in line 4- shows when the state of th								
2									
	officer, director, trustee or key employee?	2		X					
3	Did the organization delegate control over management duties customarily performed by or under the direct customarily performed by the direct custo			1					
	of officers, directors or trustees, or key employees to a management company or other person?								
4	Did the organization make any significant changes to its governing documents								
	since the prior Form 990 was filed?	4		Х					
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х					
6	Did the organization have members or stockholders?	6		Х					
7 :	a 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?	7 a		Х					
	b Are any governance decisions of the organization reserved to (or subject to approval by) members,								
_	stockholders, or other persons other than the governing body?	7 b		Х					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
	a The governing body?								
	b Each committee with authority to act on behalf of the governing body?	8 a	Х						
a '		8 b	Х						
,	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 in Schedule O	9		v					
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Reven		- d - \	Х					
	The second of the second of the second information about policies not required by the internal Neven	ue C	Yes	No					
10:	a Did the organization have local chapters, branches, or affiliates?	10 a	162	X					
	b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their	iva							
	operations are consistent with the organization's exempt purposes?	10 b							
11 :	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	X						
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		100	l					
	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a	Х						
	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise		- 11						
	to conflicts?	12 b	Χ						
•	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in		·						
40	Schedule O how this was done	12 c	Х						
13	Did the organization have a written whistleblower policy?	13	Х						
14	Did the organization have a written document retention and destruction policy?	14	Χ	00-10 DE 000-16					
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	4-							
	b Other officers of key employees of the organization	15 a	X						
•	If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)	15 b	Χ						
16.	· · · · · · · · · · · · · · · · · · ·								
102	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a		V					
	b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its	IVa		Х					
	participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16 b							
Sec	ction C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed ► See Form 990, Page 6, Line 17 (continued)								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	 for pu	 blic						
	inspection. Indicate how you make these available. Check all that apply.	ioi pu	DIIC						
	Own website								
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available the public during the tax year.	e to							
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organizatio	ո։							
1	the organization 25 Horner Street Warrenton VA 20186 (80		156-4	1930					
DAA									

Form 990 (2013) R	ainforest Trus	s t
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13-3500609

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

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

				(0	>)					
(A) Name and Title	(B) Average hours per	one bo	x, unl	ess p	erson	more the is both trustee	an	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) John_Mitchell	0.50									
Board Chair		Х		Χ				0.	0.	0.
(2) Gerard Bertrand	0.50									
Vice Chair		Χ		Х				0.	0.	0.
(3) Sally Davidson	0.50									
Treas.		Х		Х		-		0.	0.	0.
(4) William Wayt Thomas	0.50									
Secretary		Х		Х				0.	0.	0.
(5) Robert Giles	0.50									
Board Member		Х						0.	0.	0.
_(6) Nancy Weiss	0.50									
Board Member		Х						0.	0.	0.
_(7) Brett Byers	0.50									
Board Member		Χ						0.	0.	0.
(8) Sommer Chatwin	0.50									
Board Member		Х						0.	0.	0.
(9) Melissa Trotter	0.50									
Board Member		Х						0.	0.	0.
(10) Leslie Danoff	0.50									
Board Member		X						0.	0.	0.
(11) Jeff Mundy	0.50							1		
Board Member		Х						0.	0.	0.
(12) Jeffrey Zack	0.50									
Board Member		X						0.	0.	0.
(13) Edith McBean	0.50							,		
Board Member		Х						0.	0.	0.
(14) Dr. Thomas Lovejoy	0.50									
Board Member		Х						0.	0.	0.

Part VII Section A. Officers, Directors, Trus		Key	En			es,	and	d Highest Con	pensated Emp	loyees (continued)
	(B)			•	C) ition					
(A) Name and title	Average hours per week	box	, unle	ss pe	rson i directo	than o s both or/truste	an ee)	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	(list any hours for related organiza - tions	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
	below dotted line)	stee	ustee			ensated				
(15) Dr. Paul Salaman CEO	40.00			Х				87,980.	0.	4,588
(16)										
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)		ļ							· · · · · · · · · · · · · · · · · · ·	
1 b Sub-total							•	87 , 980.	0.	4,588
d Total (add lines 1b and 1c)							<u>►</u>	87,980.	0.	4,588
2 Total number of individuals (including but not limited from the organization ►	to those	listed	abo	ove)	who	rece	ivec	d more than \$100,0	000 of reportable cor	mpensation
3 Did the organization list any former officer, director, on line 1a? If 'Yes,' complete Schedule J for such ind										Yes No
4 For any individual listed on line 1a, is the sum of report the organization and related organizations greater the	an \$150,	000?	If 'Y	'es' (com	olete	Sch	nedule J for		
5 Did any person listed on line 1a receive or accrue con	npensat	ion fr	om a	any i	unre	lated	ora	anization or individ	lual	. 4 X
for services rendered to the organization? If 'Yes,' con Section B. Independent Contractors	npiete S	cnea	uie .	J TOP	suc	n per	son			. 5 X
1 Complete this table for your five highest compensated compensation from the organization. Report compensation.	d indepe sation fo	nden r the	t cor cale	ntrac ndai	ctors r yea	that ir end	rece ding	eived more than \$1 with or within the	00,000 of organization's tax ye	ar.
(A) Name and business addres	s							(B) Description o		(C) Compensation
			•			-				
Total number of independent contractors (including by	ut not lin	nited	to th	050	lista	d ah	OVE,) who received mo	re than	
\$100,000 of compensation from the organization								, 10001460 11101	o alan	
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Statement of Revenue

		Check if Schedule O c	ontains a respons	e or note to any lir	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	b c d e	Federated campaigns . Membership dues Fundraising events Related organizations . Government grants (contributions, gifts, graimilar amounts not included a	1 b 1 c 1 d 2 ns)	34,325. 4,568,669.				
E S		Noncash contributions include		234,999.			Participation	
	h	Total. Add lines 1a-1f .	· · · · · · · · · · · ·		4,602,994.			140
PROGRAM SERVICE REVENUE	2 a b c			Business Code				
S	u							
GRAI	f	All other program service	revenue					
ğ		Total. Add lines 2a-2f .	L.,.,					
	3	Investment income (inclu other similar amounts) . Income from investment	of tax-exempt bon	d proceeds ►	1,919.	0.	0.	1,919.
	5	Royalties						
		Gross rents Less: rental expenses	(i) Real	(ii) Personal				
		Rental income or (loss)						
		` ' !			77 (200)			
	u	Net rental income or (loss	(i) Securities	(ii) Other				
		Gross amount from sales of assets other than inventory .	235,576.	(ii) Other		200 (100 m) 200 (
		Less: cost or other basis and sales expenses Gain or (loss)	234,999. 577.					
İ		Net gain or (loss)			577.	0.	0.	577.
ENUE		Gross income from fundr (not including \$	aising events					311.
OTHER REVEN	h	of contributions reported See Part IV, line 18 Less: direct expenses .	a					
9		Net income or (loss) from						
		Gross income from gami See Part IV, line 19	Г					
	b	Less: direct expenses .	b			Friday (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		
	С	Net income or (loss) from	gaming activities					:
		Gross sales of inventory, and allowances	a					
		Less: cost of goods sold	L L			The second second		
	С	Net income or (loss) from		-				
	44:	Miscellaneous Revenu	le	Business Code				
	11a							
	b			· · · · · · · · · · · · · · · · · · ·				
	r H	All other revenue						
		Total. Add lines 11a-11d	L					
		Total revenue. See instr			4,605,490.	0.	0.	2,496.
					, , ,	, 0.		· -1 1 7 V •

Part IX | Statement of Functional Expenses

	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	1,599,518.	1,599,518.	Friedmann Strategie (1977) Strategie (1977) Stategie (1977)	
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	2,074,604.	2,074,604.		
4 5	Benefits paid to or for members Compensation of current officers, directors.				
3	trustees, and key employees	97,554.	84,464.	5,621.	7,469.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7	Other salaries and wages	221,305.	105,929.	58,547.	56,829.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	1,272.	261.	547.	464.
9	Other employee benefits	12,569.	6,784.	3,218.	2,567.
10	Payroll taxes	24,978.	14,641.	5,361.	4,976.
11	Fees for services (non-employees):		, ∪ . ⊥ .	<u> </u>	.,,,,,,,
a	Management				
t	Legal	2,010.	0.	2,010.	0.
	: Accounting	16,122.	1,155.	11,259.	3,708.
C	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
g	Other. (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	44,980.	31,853.	12,011.	1,116.
12	Advertising and promotion	23,464.	18,686.	1,673.	3,105.
13	Office expenses	66,475.	44,257.	11,731.	10,487.
14	Information technology				
15	Royalties				
16	Occupancy	21,743.	20,778.	539.	426.
17	Travel	37,339.	35,676.	728.	935.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,950.	1,900.	916.	134.
20	Interest				
21	Payments to affiliates		-		
22	Depreciation, depletion, and amortization	620.	0.	620.	0.
23 24	Insurance	1,553.	1,491.	35.	27.
24	covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	Conservation outreach	14,070.	14,070.	0.	0.
	Website	12,446.	8,389.	4,054.	3.
	Miscellaneous_expense	2,216.	279.	800.	1,137.
•	e All other expenses				
25	Total functional expenses. Add lines 1 through 24e.	4,277,788.	4,064,735.	119,670.	93,383.
26	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 ► if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		Check if Schedule O contains a response or note to a	ny line	in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing			647,538.	1	365,026.
	2	Savings and temporary cash investments			904,960.	2	1,528,130.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	16,020.
	5	Loans and other receivables from current and former offi trustees, key employees, and highest compensated emp Part II of Schedule L		5			
	6	Loans and other receivables from other disqualified pers section 4958(f)(1)), persons described in section 4958(c) employers and sponsoring organizations of section 501(d beneficiary organizations (see instructions). Complete Pa		6			
A S E T S	7	Notes and loans receivable, net		7			
E	8	Inventories for sale or use				8	
S	9	Prepaid expenses and deferred charges			898.	9	3,945.
		Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10 a	6,075.			
	b	Less: accumulated depreciation	10 b	3,044.	2,302.	10 c	3,031.
	11	Investments – publicly traded securities			10,643.	11	0.
	12	Investments - other securities. See Part IV, line 11				12	
	13	Investments - program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			1,300.	15	1,300.
	16	Total assets. Add lines 1 through 15 (must equal line 34)		1,567,641.	16	1,917,452.
	17	Accounts payable and accrued expenses			21,781.	17	43,890.
	18	Grants payable				18	
	19	Deferred revenue		19			
Ŀ	20	Tax-exempt bond liabilities		20			
I A	21	Escrow or custodial account liability. Complete Part IV o		21			
ABILITIES	22	Loans and other payables to current and former officers, key employees, highest compensated employees, and d Complete Part II of Schedule L	isquali	fied persons.		22	
1	23	Secured mortgages and notes payable to unrelated third				23	
S	24	Unsecured notes and loans payable to unrelated third pa	•	1		24	
	25	Other liabilities (including federal income tax, payables to and other liabilities not included on lines 17-24). Complete	relate	ed third parties.	,	25	
	26	Total liabilities. Add lines 17 through 25			21,781.	26	43,890.
NET A		Organizations that follow SFAS 117 (ASC 958), check lines 27 through 29, and lines 33 and 34.					
ASSETS	27	Unrestricted net assets			277,837.	27	442,334.
Ę	28	Temporarily restricted net assets			1,268,023.	28	1,431,228.
	29	Permanently restricted net assets		<u></u>		29	
OR F		Organizations that do not follow SFAS 117 (ASC 958) and complete lines 30 through 34.	, chec	k here ▶ 📗			
ドンズロ	30	Capital stock or trust principal, or current funds		30			
	31	Paid-in or capital surplus, or land, building, or equipment		31			
Ļ	32	Retained earnings, endowment, accumulated income, or		32			
田々上々20世の	33	Total net assets or fund balances		L.	1,545,860.	33	1,873,562.
E S	34	Total liabilities and net assets/fund balances		,	1,567,641.	34	1,917,452.
DΛ							-, -, -, -, -, -, -, -, -, -, -, -, -, -

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Form 990 (2013)	Rainforest	Trust

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Pa	rt 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	4	,60	5,4	90.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4	,27	7,7	88.
3	Revenue less expenses. Subtract line 2 from line 1	3			7,7	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1		5,8	
. 5	Net unrealized gains (losses) on investments	5		-		
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 in Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	1	,87	3,5	<u>62.</u>
Pa	rt 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: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				\$1	
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?			2 a		Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
	b Were the organization's financial statements audited by an independent accountant?			2 b	Х	4.153074(2017.207)
	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: X Separate basis					
	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the aud review, or compilation of its financial statements and selection of an independent accountant?			2 c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.					
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	:		3 a		Х
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required a	udit				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3 b		
BA			F	orm S	990 (2	2013

SCHEDULE A (Form 990 or 990-EZ)

Name of the organization

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.

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2013

Open to Public Inspection

Employer identification number

		rest Trust							13-35	00609)		
Par	t I	Reason for Publ	ic Charity Status	(All organizations r	must co	mplete	this p	art.) S	ee inst	ruction	S.		
				is: (For lines 1 through									
1		A church, convention	of churches or associat	ion of churches describ	ed in sec	tion 170	D(b)(1)(A	A)(i).					
2		A school described in	section 170(b)(1)(A)(ii	i). (Attach Schedule E.)									
3		A hospital or a cooper	ative hospital service o	rganization described in	section	170(b)(1)(A)(iii)).					
4	П	A medical research or	ganization operated in	conjunction with a hosp	ital descr	ibed in s	ection	170(b)(1)(A)(iii).	Enter th	e hospital's		
		name, city, and state:											
5		An organization opera 170(b)(1)(A)(iv). (Con	ted for the benefit of a mplete Part II.)	college or university ow	ned or or	perated b	oy a gov	ernment	al unit de	escribed	in section		
6				rnmental unit described									
7	X	in section 170(b)(1)(A	\)(vi). (Complete Part l			governn	nental ur	nit or fro	m the ge	neral pu	blic describe	ed	
8	Ц	A community trust des	scribed in section 170 (l	b)(1)(A)(vi). (Complete	Part II.)								
9		from activities related investment income an June 30, 1975. See see	to its exempt functions d unrelated business ta ection 509(a)(2). (Com	. ,	ceptions, tion 511	and (2) itax) from	no more n busine:	than 33 sses acc	-1/3% of	its supp	ort from aro	SS	
10		An organization organ	ized and operated excl	usively to test for public	safety. S	See sect	ion 509	(a)(4).					
11		more publicly supporte	ed organizations descri	usively for the benefit of bed in section 509(a)(1) and complete lines 116	or section	on 509(a	unctions)(2). See	of, or ca e sectio	arry out f n 509(a)	he purpe (3). Che	oses of one ck the box t	or nat	
		a Type I b	Type II c	Type III — Function	ally integ	rated	c	T k	ype III -	- Non-fu	nctionally in	tegrate	ed
е		By checking this box, other than foundation section 509(a)(2).	I certify that the organiz managers and other th	zation is not controlled d an one or more publicly	lirectly or supporte	indirectl ed organ	y by one izations	e or more describe	e disqua ed in sec	lified per tion 509	sons (a)(1) or		
f		If the organization rec	eived a written determi	nation from the IRS that	is a Typ	e I, Type	II or Ty	pe III su	pporting	organiza	ation,		
g		Since August 17, 2000	3, has the organization	accepted any gift or co	ntribution	from ar	ny of the	followin	g persor	ıs?			
												Yes	No
		below, the gove	rning body of the suppo	rols, either alone or toge orted organization?							11 g (i)		
		(ii) A family member	r of a person described	l in (i) above?							. 11 g (ii)		
		(iii) A 35% controlle	d entity of a person des	scribed in (i) or (ii) above	e?						· 11 g (iii)		
h		Provide the following i	nformation about the si	upported organization(s).						11		•
		(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is organiza column (i) your gov docun	ition in listed in rerning	(v) Did yo the organi column (i) supp	zation in of your	(vi) Is organiza colum organized U.S	ition in n (i) I in the	(vii) Amount sup		etary
					Yes	No	Yes	No	Yes	No			
(A)													
(B)													
(C)													
(D)													
<u>(E)</u>							-400						
Total			200						100				

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.)

Sec	tion A. Public Support						
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	1,975,859.	2,098,977.	3,002,614.	1,986,164.	4,602,994.	13,666,608.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	1,975,859.	2,098,977.	3,002,614.	1,986,164.	4,602,994.	13,666,608.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						2,946,560.
	Public support. Subtract line 5 from line 4				SIGNIFICATION CONTROL OF THE PROPERTY OF THE P		10,720,048.
Sec	tion B. Total Support	1		-	1		
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	1,975,859.	2,098,977.	3,002,614.	1,986,164.	4,602,994.	13,666,608.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	6,805.	608.	2,886.	1,252.	1,919.	13,470.
9	Net income from unrelated business activities, whether or not the business is regularly carried on	,		=,000		2,020	2071101
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	672.	0.	431.	3,203.		4,306.
11	Total support. Add lines 7 through 10						13,684,384.
12	Gross receipts from related activit	ies, etc (see instru	ctions)			12	23,980.
13	First five years. If the Form 990 i organization, check this box and s	s for the organizati	on's first, second,	third, fourth, or fifth	ı tax year as a sec	ion 501(c)(3)	
	tion C. Computation of Pu						
	Public support percentage for 201						78.34 %
15	Public support percentage from 20	012 Schedule A, P	art II, line 14			15	75.13 %
16 a	33-1/3% support test — 2013. If and stop here. The organization of	the organization di qualifies as a public	d not check the bo cly supported orga	x on line 13, and the nization	he line 14 is 33-1/3	3% or more, check	this box ▶ X
ŀ	o 33-1/3% support test — 2012. If to and stop here. The organization	the organization did qualifies as a publi	d not check a box o cly supported orga	on line 13 or 16a, a nization	and line 15 is 33-1/	3% or more, check	this box
17 a	10%-facts-and-circumstances to or more, and if the organization m the organization meets the 'facts-a	eets the 'facts-and	-circumstances' te:	st, check this box a	and stop here. Exp	olain in Part IV how	<i>'</i>
	10%-facts-and-circumstances to organization meets the 'facts-and-	eets the 'facts-and circumstances' tes	-circumstances' te t. The organizatior	st, check this box a n qualifies as a pub	and stop here. Exp plicly supported org	olain in Part IV how Janization	the ▶
18	Private foundation. If the organiz	ation did not checl	c a box on line 13,	16a, 16b, 17a, or	17b, check this box	and see instruction	ons ►
RΔΔ					Col	adula A (Form 90	0 or 000 E7) 2012

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
Calen	dar year (or fiscal yr beginning in) -	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include any unusual grants.')						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	·					
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
5	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
_	organization without charge						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year			·			
С	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)		AMALIAN CONTRACTOR OF THE CONT				
Sec	tion B. Total Support						
Calen	dar year (or fiscal yr beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
10 a	Amounts from line 6						
	taxes) from businesses acquired after June 30, 1975 : Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total Support. (Add Ins 9,10c, 11 and 12.)						
14	First five years. If the Form 990 is organization, check this box and s	for the organization	on's first, second, t	hird, fourth, or fifth	tax year as a sect	ion 501(c)(3)	▶ □
Sec	tion C. Computation of Pul			2.01			
15	Public support percentage for 2013	3 (line 8, column (f) divided by line 13	3, column (f))		15	96
16	Public support percentage from 20	12 Schedule A, Pa	art III, line 15			16	%
Sec	tion D. Computation of Inv	estment Incor	ne Percentage	9		· · · · · · · · · · · · · · · · · · ·	
17	Investment income percentage for		<u></u>))	17	왕
18	Investment income percentage from			, ,	•		
	33-1/3% support tests — 2013. If is not more than 33-1/3%, check the	the organization d	id not check the bo	ox on line 14, and li	ine 15 is more than	1 33-1/3%, and line	17
b	33-1/3% support tests - 2012. If	the organization d	id not check a box	on line 14 or line 1	9a, and line 16 is	more than 33-1/3%	and
20	line 18 is not more than 33-1/3%, or Private foundation. If the organization					-	<u> </u>

Schedule A	(Form 990 or 99	90-EZ) 2013	Rain:	forest Tr	ust			13-3500609	Page 4
Part IV	Supplemen or 17b; and (See instruc	Part III, Iir	nation. Pr ne 12. Also	rovide the e complete t	xplanations his part for a	required by any addition	/ Part II, line 10 nal information)· Part II line 17a	
Pt_II_L	i <u>ne 10:</u> De	e <u>script</u> i	i <u>on:</u> Oth	er_income	<u> </u>				
<u>Pt_II_L</u>	i <u>ne 10: 2(</u>	0 <u>09:_ 67</u> 2	2						
<u>Pt_II_L</u>	i <u>ne 10: 2(</u>	010:_0.							
Pt_II_L	i <u>ne 10: 2(</u>	0 <u>11:_ 4</u> 31	l <u>. </u>						
<u>Pt_II_L</u>	i <u>ne 10: 2(</u>) <u>12:_ 32</u> (03		-			·	
								- 	
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SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 2013

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection Employer identification number

	nforest Trust			13-3500609	
Par	Organizations Maintaining Done Complete if the organization answ	or Advised Funds or Othe vered 'Yes' to Form 990, Par	r Similar Funds t IV, line 6.	or Accounts.	
		(a) Donor advised fun	ds	(b) Funds and other accou	nts
1	Total number at end of year				
2	Aggregate contributions to (during year)				
3	Aggregate grants from (during year)				
4	Aggregate value at end of year	•			
5	Did the organization inform all donors and donor are the organization's property, subject to the or	r advisors in writing that the assets ganization's exclusive legal control	held in donor advise ?	d funds	No
6	Did the organization inform all grantees, donors, for charitable purposes and not for the benefit of impermissible private benefit?	the donor or donor advisor, or for	any other purpose co	onferring	□No
Par	t II Conservation Easements.				
<u>, u,</u>	Complete if the organization answ	rered 'Yes' to Form 990. Par	t IV. line 7.		
1	Purpose(s) of conservation easements held by t				
	Preservation of land for public use (e.g., rec	- , , , , , , , , , , , , , , , , , , ,	ı .	nistorically important land area	
	Protection of natural habitat	,	1	ertified historic structure	
	Preservation of open space		J		
2	Complete lines 2a through 2d if the organization last day of the tax year.	held a qualified conservation cont	ribution in the form of	a conservation easement on	the
				Held at the End of the	Tax Year
ā	Total number of conservation easements			2 a	
ł	Total acreage restricted by conservation easeme	ents		2 b	
(Number of conservation easements on a certifie	d historic structure included in (a)		2 c	
(Number of conservation easements included in structure listed in the National Register	(c) acquired after 8/17/06, and not	on a historic	2 d	
3	Number of conservation easements modified, tratax year ►	ansferred, released, extinguished,	or terminated by the	organization during the	
4	Number of states where property subject to cons	servation easement is located 🕨			
5	Does the organization have a written policy rega and enforcement of the conservation easements	ording the periodic monitoring, insp	ection, handling of vie	olations,	No
6	Staff and volunteer hours devoted to monitoring.			<u></u>	
7	Amount of expenses incurred in monitoring, insp ▶ \$	pecting, and enforcing conservation	easements during the	ne year	
8	Does each conservation easement reported on land section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requirem	nents of section 170(n)(4)(B)(i) · · · · · Yes	No
9	In Part XIII, describe how the organization repor include, if applicable, the text of the footnote to t conservation easements.	ts conservation easements in its re he organization's financial stateme	venue and expense nts that describes the	statement, and balance sheet, a organization's accounting for	and
Par	Organizations Maintaining Colle Complete if the organization answ	ections of Art, Historical T vered 'Yes' to Form 990, Par	reasures, or Oth t IV, line 8.	ner Similar Assets.	
1 2	If the organization elected, as permitted under S art, historical treasures, or other similar assets h in Part XIII, the text of the footnote to its financia	eld for public exhibition, education	or research in furthe	ent and balance sheet works c erance of public service, provid	of de,
ł	b If the organization elected, as permitted under S historical treasures, or other similar assets held following amounts relating to these items:	FAS 116 (ASC 958), to report in its for public exhibition, education, or	s revenue statement research in furtheran	and balance sheet works of ar ce of public service, provide th	t, ne
	(i) Revenues included in Form 990, Part VIII, li	ne 1		▶ \$	
	(ii) Assets included in Form 990, Part X			▶ \$	
2	If the organization received or held works of art, amounts required to be reported under SFAS 11	6 (ASC 958) relating to these item	S:		
á	Revenues included in Form 990, Part VIII, line 1			▶ \$	
t	Assets included in Form 990, Part X			▶ \$	

Part III Organizations Maintaining Colle	ections of Art, Hist	orical Treasures, or	Other Similar Ass	ets (continued)
3 Using the organization's acquisition, accession, a items (check all that apply):	and other records, check	any of the following that a	are a significant use of its	collection
a Public exhibition	d Loan	or exchange programs		
b Scholarly research	e Other	•		
c Preservation for future generations				
4 Provide a description of the organization's collect Part XIII.	tions and explain how th	ey further the organization	's exempt purpose in	
5 During the year, did the organization solicit or re- to be sold to raise funds rather than to be mainta	ined as part of the orgar	ization's collection?		Yes No
Part IV Escrow and Custodial Arranger line 9, or reported an amount on F			vered 'Yes' to Form	990, Part IV,
1 a Is the organization an agent, trustee, custodian, on Form 990, Part X?		• • • • • • • • • • • • • • • • • • • •	ets not included	Yes No
b If 'Yes,' explain the arrangement in Part XIII and	complete the following to	able:	[····	
				Amount
c Beginning balance				
d Additions during the year				
e Distributions during the year				
f Ending balance				
2 a Did the organization include an amount on Form b If 'Yes,' explain the arrangement in Part XIII. Che			L	Yes No
Part V Endowment Funds. Complete if	the organization ans	swered 'Yes' to Form	990 Part IV line 10)
(a) Current			(d) Three years back	(e) Four years back
1 a Beginning of year balance	your (b) i nor you	(c) Two years back	(a) Three years back	(c) Four years back
b Contributions				
c Net investment earnings, gains, and losses				
d Grants or scholarships				
e Other expenditures for facilities and programs				
f Administrative expenses				
g End of year balance				
2 Provide the estimated percentage of the current	year end balance (line 1	g, column (a)) held as:		
a Board designated or quasi-endowment	%			
b Permanent endowment ►	5			
c Temporarily restricted endowment				
The percentages in lines 2a, 2b, and 2c should e	equal 100%.			
3 a Are there endowment funds not in the possession organization by:	on of the organization tha	at are held and administere	ed for the	Yes No
(i) unrelated organizations				3a(i)
(ii) related organizations				3a(ii)
b If 'Yes' to 3a(ii), are the related organizations list				. 3b
4 Describe in Part XIII the intended uses of the org				<u> </u>
Part VI Land, Buildings, and Equipmen				
Complete if the organization answ		990, Part IV, line 11a	a. See Form 990, Pa	rt X, line 10.
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land				
b Buildings				
c Leasehold improvements				
d Equipment		6,075.	3,044.	3,031.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equ	al Form 990, Part X, colu	ımn (B), line 10(c).)		3,031.
RAA		1. (ule D (Form 990) 2013

Rainforest Trust		13-3500609	raye.
Part VII Investments — Other Securities. Complete if the organization answered 'Y	es' to Form 990,	Part IV, line 11b. See Form 990, Part X, line 1	2.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market valu	
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)	-		
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
(I)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.) . ▶			
Part VIII Investments - Program Related.	'as' to Earm 000	Part IV, line 11c. See Form 990, Part X, line 1	2
(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market	
	(b) Book value	(c) Wethod of Valuation. Cost of end-of-year market	value
(1)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)			
Part IX Other Assets.	·······		
Complete if the organization answered 'Y		Part IV, line 11d. See Form 990, Part X, line 1	
(a) Des	cription	(b) Book v	/alue
(1) (2)	· · · · · · · · · · · · · · · · · · ·		
(3)			
(4)			
(5)			
(6)	_		
(7)			
(8)			-
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B), li	ne 15.)		
Part X Other Liabilities.	orm 000 Dart IV line	110 or 11f Soo Form 000 Part V line 25	
Complete if the organization answered 'Yes' to Fo (a) Description of liability	(b) Book value		
(1) Federal income taxes	(b) Book Valu		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) (10)			
(10) (11)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)			
TOTAL (COMMIN (D) MUST EQUAL FORM 990, MAIT A, COMMIN (D) HITE 23.)	- 1		

Schedule D (Form 990) 2013 Rainforest Trust	13-3500609	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	r Return.	
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	4,605,490.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	4,605,490.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4 a		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b	4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		4,605,490.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses p	per Return.	
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	4,277,788.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2e	
3 Subtract line 2e from line 1	3	4,277,788.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b		
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	4,277,788.
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 add	ditional information	ı.
Pt X Line 2 The organization is exempt from income taxes under		
Pt X Line 2Internal Revenue Code 501 (c) (3) and applicable DC	<u>statutes.</u>	
Pt X Line 2 No provision for income taxes is required at December 1.	<u>er </u>	
Pt X Line 231, 2013, as the Organization had no net unrelated		
Pt X Line 2 business income.		
Pt X Line 2 The organization follows FASB ASC 740 Income Taxes		
Pt_X_Line_2the_authoritative_guidance_relating_to_accounting_	· 	
Pt X Line 2 for uncertainty in income taxes. These provisions		
BAA	Schedule D (F	Form 990) 2013

Schedule F (Form 990)

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. ► See separate instructions.

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

OMB No. 1545-0047 2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Rainforest Trust				13-35006	09
Part I General Informat on Form 990, Part	ion on Activiti :IV, line 14b.	es Outside the	e United States. Complet	e if the organization	answered 'Yes'
1 For grantmakers. Does the	organization main	tain records to sub nce, and the selec	stantiate the amount of its grantition criteria used to award the gr	s and other assistance, ants or assistance?	XYes No
2 For grantmakers. Describe United States.	in Part V the orgar	nization's procedur	res for monitoring the use of its g	rants and other assistanc	e outside the
3 Activities per Region. (The f	ollowing Part I, line	3 table can be du	plicated if additional space is nee	eded.)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) South America	0	0	grantmaking	grants to recipients	1,778,532.
(2) Europe	0	. 0	grantmaking	grant to recipient	296,072.
(3)					
(4)					
(5)		·			
(6)	·				
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3 a Sub-total	0	0		The second secon	2,074,604.
b Total from continuation sheets to Part I				The state of the s	
c Totals (add lines 3a and 3b) .	0	. 0			2,074,604.

Schedule F (Form 990) 2013 Rainforest Trust

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)		South America	Program support	104,816.	Check/Wire	0.	N/A	Actual
(2)		South America	Program support	112,935.	Check/Wire	0.	N/A	Actual
(2)		South America	Program support	336,781.	Check/Wire	.0	N/A	Actual
(b)		South America	Program support	275,900.	Check/Wire	.0	N/A	Actual
(5)		South America	Program support	83,501.	Check/Wire	.0	N/A	Actual
(6)		South America	Program support	568,954.	Check/Wire	.0	N/A	Actual
(£)		South America	Program support	96,500.	Check/Wire	0.	N/A	Actual
(8)		South America	Program support	119,500.	Check/Wire	0.	N/A	Actual
(6)		America	Program support	19,964.	Check/Wire	0	N/A	Actual
(o.)		South America	Program support	13,000.	Check/Wire	.0	N/A	Actual
(m)	part dent	South America	Program support	16,000.	Check/Wire	0.	N/A	Actual
(12)		Europe	Program support	296,072.	Check/Wire	0.	N/A	Actual
(13)								
(14)								
(15)								
(16)								
2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	tions listed above that a ection 501(c)(3) equiva	are recognized as chalency letter	arities by the fore	ign country, recogn	zed as tax-exempt	by the IRS, or for w	hich	12
3 Enter total number of other organizations or entities BAA	s or entities						Schedule F	Schedule F (Form 990) 2013

Page 3

13-3500609

Rainforest Trust

Schedule F (Form 990) 2013

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

(h) Method of valuation (book, FMV, appraisal, other) Schedule F (Form 990) 2013 (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance BAA (14) (15) (17) (18) ε 8 <u>ල</u> <u>4</u> (2) 9 8 (11) (12) (13) (16) (7) 6) (10)

	dule F (Form 990) 2013 Rainforest Trust	13-3500609	Page 4
Pai	t IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If 'Yes,' the organization may be required to file Form 3520, Annual Return To Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)		X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	· · · · · Tyes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If 'Yes,' the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	· · · · · \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If 'Yes,' the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	Yes	∑ No

6

X No

Open to Public Inspection OMB No. 1545-0047 2013 Employer identification number 13-3500609 Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22. ► Attach to Form 990. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, Part I General Information on Grants and Assistance Rainforest Trust Department of the Treasury Internal Revenue Service Name of the organization SCHEDULE I (Form 990)

 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 	s to substantiate the arr grants or assistance? procedures for monitorir	nount of the grants o	le grants or assistance, the grantees eligibility for the grants or assistance, and the control of the control of grant funds in the United States.	s eligibility for the grants	or assistance, and		⊠ Yes No
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to 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.	ance to Governme or any recipient that	nts and Organi at received more	Organizations in the United States. Complete if the organization answered more than \$5,000. Part II can be duplicated if additional space is needed.	ed States. Comple can be duplicated	te if the organizati if additional space	on answered 'Ye is needed.	s' to
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) American Bird Conservancy	52-1501259		1,384,518.				Program Suppor
(2) Global Wildlife Conservan PO Box 129	26-2887967		215,000.				Program Suppor
<u>(4)</u>	`						
<u></u>							
(8)							
2 Enter total number of section 501(c)(3) and government organizations	and government orgar	==	sted in the line 1 table				
3 Enter total number of other organizations listed in the line 1 table.	ins listed in the line 1 ta	-					

Schedule I (Form 990) (2013)

TEEA3901 07/12/13

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

Page 2

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. 13-3500609 Part III

(a) Type of grant or assistance	600	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
-						
2						
n						
4						
ro.				-		
9			-			
7						
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	rmation. Provid	e the information re	equired in Part I, Iir	ie 2, Part III, columr	ι (b), and any other ado	litional information.
Pt_Line_2RFT	Leguires a	ll grant recip	ients to submi	t_complete_nar	RFT_requires all grant_recipients to submit_complete_narrative_and_financial	ial
Pt_Line_2rep	ports_to_acc	reports to account for funds granted.	granted.			

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Schedule I (Form 990) (2013)

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Noncash Contributions

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

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

OMB No. 1545-0047

2013

Open To Public Inspection

Employer identification number

Rainforest Trust 13-3500609 Part I Types of Property (a) Check if (b) (c) (d) Method of determining Number of Noncash contribution applicable contributions or amounts reported noncash contribution amounts items contributed on Form 990, Part VIII, line 1g Art — Works of art Art - Historical treasures Art — Fractional interests 4 Clothing and household goods 5 Cars and other vehicles 6 Boats and planes...... 7 Intellectual property. 8 Securities - Publicly traded 9 Χ 14 234,999 Securities - Closely held stock...... 10 11 Securities - Partnership, LLC, or trust interests. . Securities – Miscellaneous 12 Qualified conservation contribution -13 Historic structures Qualified conservation contribution — Other. . . . 14 15 Real estate - Commercial 16 Real estate - Other 17 Collectibles 18 19 Food inventory Drugs and medical supplies 20 21 Historical artifacts 22 Scientific specimens 23 24 Archeological artifacts 25 26 Other > 27 Other > 28 Other ► 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the 29

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

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

Schedule M (Form 990) 2013

Schedule	M (Form 990) 2013 Rainforest Trust	13-3500609	Page 2
Part II	Supplemental Information. Provide the information required by Part I, lines 30b, the organization is reporting in Part I, column (b), the number of contributions, the received, or a combination of both. Also complete this part for any additional information of both in the complete this part for any additional information.	32b, and 33, and whe number of items mation.	ther
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No. 1545-0047 2013

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

Rainforest Trust [13-3500609
Pt VI, Line 11b The Board reviews the Form 990 and receives comments before
Pt_VI, Line 11b _ the form is filed.
Pt_VI, Line 12c _ The Board is asked regularly to disclose to the others on
Pt_VI, Line 12cthe Board their business and personal interests to
Pt_VI, Line 12cdetermine if there are any conflicts.
Pt_VI, Line 15aThe compensation process for the Executive Director and
Pt VI, Line 15a other key employees is determined by non-profit coordinating
Pt VI, Line 15a agencies. The pay range is set by compensation rates for
Pt VI, Line 15a comparable positions for non-profit organizations in the
Pt VI, Line 15a region of hire; other factors considered include: training
Pt VI, Line 15a experience, past performance and performance evaluations.
Pt VI, Line 15b See not above for Part VI, Line 15a
Pt VI, Line 19 The organization's Form 990 is available on other websites
Pt VI, Line 19 as well as our own website. Other governing documents are
Pt VI, Line 19available upon request
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Rainforest Trust 13-3500609

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 4a (continued)

Accomplishments for 2013: Santa Anita Reserve purchase of 14,827 acres in Bolivia; initial funding of the purchase of 389 acres to establish an Orangutan corridor in Borneo; finalization of the 10-acre expansion of Yanacocha Reserve in Ecuador; purchase of 57 acres to expand Ayampe Reserve in Ecuador; purchase of 6,100-acre Antisanilla ranch to expand the Antisana protected area in Ecuador; purchase of 684 acres to expand the Buenaventura Reserve in Ecuador; funding the first phases of creating a 20,558-acre reserve in Madagascar; purchasing 28 acres to expand Podocarpus Park in Ecuador; funding the first phases of creating an 80,000 acre reserve in Palawan; the purchase of private properties totaling 5,671 acres to establish the Titi Nature Reserve Columbia; purchasing 688 acres to expand Las Tangaras Reserve in Columbia; and the purchase of 148 acres to expand Rio Pucuno Reserve in Ecuador.

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 6, Line 17 (continued)

New York	
Ohio	
Virginia	
California	