aa Form

Department of the Treasury Internal Revenue Service

## **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.



AF	or th	e 2023 calendar year, or tax year beginning and	ending				
B c	heck if pplicab	e: C Name of organization	D Employer identific	cation number			
	Addre	RAINFOREST FOUNDATION, INC.					
	Name Chang	Doing business as		95-16229	45		
	Initial	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number			
	Final	P.O. BOX 26908		(212) 43	1-9098		
_	termii ated			G Gross receipts \$	9,437,359.		
	Amer	BROOKLIN, NI 11202		H(a) Is this a group re			
	Appli tion pend			for subordinates	? Yes 🗶 No		
		SAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No		
		empt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1)	or 🛄 527	If "No," attach a	list. See instructions		
	Vebsi			H(c) Group exemption			
	_	f organization: X Corporation Trust Association Other	L Year (	of formation: 1988 N	State of legal domicile: CA		
Pa	art I	Summary					
e	1	Briefly describe the organization's mission or most significant activities: THE	RAINFO	REST FOUNDA	PION US		
Activities & Governance		PROVIDES FINANCIAL AND TECHNICAL SUPPORT					
/ern	2	Check this box if the organization discontinued its operations or dispos	sed of more		sets. 8		
ğ	3				8		
<u>مە</u>	4	Number of independent voting members of the governing body (Part VI, line 1b)			31		
ties	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)		8			
tivi	6	Total number of volunteers (estimate if necessary)			<u> </u>		
Ac		Total unrelated business revenue from Part VIII, column (C), line 12			0.		
	a	Net unrelated business taxable income from Form 990-T, Part I, line 11		Prior Year	Current Year		
		Contributions and grants (Dort )/III line 1b)		11,111,171.	9,246,811.		
anc	8	Contributions and grants (Part VIII, line 1h)		0.	0.		
Revenue	10	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)		52,077.	166,441.		
Å	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		118.	0.		
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		11,163,366.			
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		3,647,180.	2,947,390.		
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.		
s	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,919,099.	3,017,657.		
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.		
be		Total fundraising expenses (Part IX, column (D), line 25) 1,040,5	77.				
ñ		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		3,362,288.	3,868,539.		
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		8,928,567.	9,833,586.		
	19	Revenue less expenses. Subtract line 18 from line 12		2,234,799.	-420,334.		
or			Be	ginning of Current Year	End of Year		
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		10,319,736.	9,702,463.		
t As Nd B	21	Total liabilities (Part X, line 26)		2,571,795.	2,315,475.		
		Net assets or fund balances. Subtract line 21 from line 20		7,747,941.	7,386,988.		
Pa	art 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.

Sign	Signature of officer	Date								
	SUZANNE PELLETIER, EXECUT									
	Type or print name and title									
	Print/Type preparer's name	Preparer's signature	Date	Check PTIN						
Paid	JENNIFER COATES			if perfemployed P02247728						
Preparer	Firm's name LUTZ AND CARR, CP		Firm's EIN 13-1655065							
Use Only	Firm's address 551 FIFTH AVENUE,	SUITE 400								
	NEW YORK, NY 1017	6		Phone no. 212 - 697 - 2299						
May the I	May the IRS discuss this return with the preparer shown above? See instructions 🛛 🚺 Yes 🛄 No									
LHA For	HA For Paperwork Reduction Act Notice, see the separate instructions. 332001 12-21-23 Form 990 (2023)									

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Par	090 (2023) RAINFOREST FOUNDATION, INC. 95-1622945 Page 1622945
	III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: THE MISSION OF THE RAINFOREST FOUNDATION IS TO SUPPORT INDIGENOUS AND
	TRADITIONAL PEOPLES OF THE WORLD'S RAINFORESTS IN THEIR EFFORTS TO
	PROTECT THEIR ENVIRONMENT AND FULFILL THEIR RIGHTS BY ASSISTING THEM
	IN:
2	Did the organization undertake any significant program services during the year which were not listed on the
	orior Form 990 or 990-EZ?
	f "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?
	f "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 \$ 7,926,940. including grants of \$ 2,947,390. ) (Revenue \$
	RAINFOREST FOUNDATION US'S (RFUS) PROGRAMS ARE TACKLING THE WORLD'S
	MOST URGENT CHALLENGES: BIODIVERSITY LOSS, CLIMATE CHANGE, AND HUMAN
	RIGHTS. WE PARTNER WITH INDIGENOUS PEOPLES AND LOCAL COMMUNITIES TO
	PROTECT VITAL RAINFOREST ECOSYSTEMS AND ADDRESS THE CLIMATE CRISIS. WH
	PROVIDE FINANCIAL AND TECHNICAL SUPPORT TO INDIGENOUS AND LOCAL
	COMMUNITIES AND ORGANIZATIONS TO SECURE THEIR RIGHTS TO THEIR
	TRADITIONAL LANDS AND PROTECT THEIR FORESTS AND LIVELIHOODS. WE WORK
	PROTECT THE TROPICAL RAINFORESTS OF CENTRAL AND SOUTH AMERICA, AND IN
	2022 WE WORKED IN THE COUNTRIES OF PERU, GUYANA, PANAMA, AND BRAZIL.
	OUR PROGRAMS FOCUS ON DELIVERING THE FOLLOWING THREE SERVICES: LAND
	TITLING, LEGAL DEFENSE AND ADVOCACY.
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$
łc	Code:         ) (Expenses \$
łc	Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	Code:) (Expenses \$ including grants of \$) (Revenue \$)
łc	Code:) (Expenses \$ including grants of \$) (Revenue \$)
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4c	Code:      ) (Expenses \$) (Revenue \$)
łc	Code:      ) (Expenses \$) (Revenue \$)
łc	Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	Code:      ) (Expenses \$) (Revenue \$)
4c	Code:      ) (Expenses \$) (Revenue \$)
	Dther program services (Describe on Schedule O.)
4d	Other program services (Describe on Schedule O.)
4d	Other program services (Describe on Schedule O.)         (Expenses \$ including grants of \$ ) (Revenue \$ )         Total program service expenses
4d 4e	Other program services (Describe on Schedule O.)         (Expenses \$ including grants of \$ ) (Revenue \$ )         Total program service expenses         7,926,940.         Form 990 (2
4d 4e	Other program services (Describe on Schedule O.)       (Expenses \$ including grants of \$ ) (Revenue \$ )       Total program service expenses

Form 990 (2023)

RAINFOREST FOUNDATION, INC. 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)?		37	
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			v
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			x
E	during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4		
5	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	5		
U	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
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		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
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	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			37
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
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		v	
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X X	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
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)? <i>If "Yes," complete Schedule D, Part X</i>	11f		x
122	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			- 23
120	Schedule D, Parts XI and XII	12a	х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	120		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or 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		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			<b>v</b>
	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			x
00-	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a 20b		
р 21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
21	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
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Form 990 (	2023)	RAINFOREST	FOUNDATION,	INC.					
Part IV Checklist of Required Schedules (continued)									

RAINFOREST FOUNDATION, INC.

	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
	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</i> "Yes," <i>complete</i>			
	Schedule J	23	x	
	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? <i>If "Yes," answer lines 24b through 24d and complete</i>			x
	Schedule K. If "No," go to line 25a	24a 24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	2-10		
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
	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
	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	1		
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
	"Yes, " complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?lf "Yes," complete Schedule L, Part IV	28c		x
	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	Х	
0	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		x
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?If "Yes," complete Schedule N, Part II	32		X
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		X
	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	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		
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		x
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			_
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	38	x	
Parl	Note: All Form 990 filers are required to complete Schedule O	30		
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	N
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	2		
	I I I ^			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b C	4		
b c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1		
b c		1c	990	(20

2023)	RAINFOREST	FOUNDATION,	INC.
Sta	tements Regarding Other	IRS Filings and Ta	x Compliance (continued)

Form 990 (2023)

			Yes	No				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,							
	filed for the calendar year ending with or within the year covered by this return 2a 31							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X				
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b						
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			l				
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X				
b	If "Yes," enter the name of the foreign country							
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	_		v				
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X X				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b 5c						
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	90						
Ua	any contributions that were not tax deductible as charitable contributions?	6a		x				
b	<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts							
~	were not tax deductible?							
7	Organizations that may receive deductible contributions under section 170(c).							
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b						
с								
	to file Form 8282?	7c		X				
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d							
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X X				
f								
g								
h	5							
8								
9	sponsoring organization have excess business holdings at any time during the year?							
b								
10								
а	Initiation fees and capital contributions included on Part VIII, line 12 10a							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b							
11	Section 501(c)(12) organizations. Enter:							
а	Gross income from members or shareholders 11a							
b	Gross income from other sources. (Do not net amounts due or paid to other sources against							
	amounts due or received from them.)							
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		L				
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	10-						
а	Is the organization licensed to issue qualified health plans in more than one state?	13a						
b	<b>Note:</b> 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							
U	organization is licensed to issue qualified health plans							
с	Enter the amount of reserves on hand							
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X				
	<b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O							
15								
	excess parachute payment(s) during the year?	15		X				
	If "Yes," see the instructions and file Form 4720, Schedule N.							
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X				
	If "Yes," complete Form 4720, Schedule O.							
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			1				
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		-				
	If "Yes," complete Form 6069.	Form	000	(2023)				
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Form 990 (2023)
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RAINFOREST FOUNDATION, INC.

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

X

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.

		1.1			Yes	╞		
	Enter the number of voting members of the governing body at the end of the tax year	1a	8					
	If there are material differences in voting rights among members of the governing body, or if the governing					l		
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.							
b	Enter the number of voting members included on line 1a, above, who are independent	1b	8			ļ		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	ip with any ot	her					
	officer, director, trustee, or key employee?			2				
3	Did the organization delegate control over management duties customarily performed by or under the	he direct supe	ervision					
	of officers, directors, trustees, or key employees to a management company or other person?			3				
4	Did the organization make any significant changes to its governing documents since the prior Form	990 was filed	?	4				
5	Did the organization become aware during the year of a significant diversion of the organization's as	ssets?		5				
6	Did the organization have members or stockholders?			6				
	Did the organization have members, stockholders, or other persons who had the power to elect or a							
	<ul> <li>more members of the governing body?</li> <li>b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?</li> </ul>							
				7a		1		
				7b				
						1		
	The governing body?	-	-	8a	х	l		
	Each committee with authority to act on behalf of the governing body?			8b	X			
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re							
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9				
	ion B. Policies (This Section B requests information about policies not required by the Internal F			•				
			7		Yes			
0a	Did the organization have local chapters, branches, or affiliates?			10a				
	If "Yes," did the organization have written policies and procedures governing the activities of such o			.54				
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b				
	Has the organization provided a complete copy of this Form 990 to all members of its governing bo			11a	Х			
				iid				
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			12a	Х	l		
	Did the organization have a written conflict of interest policy? <i>If</i> " <i>No</i> ," <i>go to line 13</i>							
				12b	Х	┨		
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "			10-	х			
	on Schedule O how this was done			12c 13	X			
	Did the organization have a written whistleblower policy?				X	+		
	Did the organization have a written document retention and destruction policy?			14	Λ			
	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?			4-	х	ļ		
	The organization's CEO, Executive Director, or top management official			15a	A X	+		
	Other officers or key employees of the organization			15b	Λ			
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.							
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange							
	taxable entity during the year?			16a				
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate		ation			ļ		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	anization's				ļ		
	exempt status with respect to such arrangements?			16b				
	ion C. Disclosure							
	List the states with which a copy of this Form 990 is required to be filed <u>CA, NY, NJ</u>							
	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, a	and 990-T (se	ction 501(c)(3)	s only	) avail	la		
	for public inspection. Indicate how you made these available. Check all that apply.							
	X Own website Another's website X Upon request Other (explain		,					
9	Describe on Schedule O whether (and if so, how) the organization made its governing documents, c	onflict of inte	rest policy, an	d finar	ncial			
:	statements available to the public during the tax year.							
	State the name, address, and telephone number of the person who possesses the organization's b	ooks and reco	ords					
	THE ORGANIZATION - 212-431-9098							
	50 COURT STREET, SUITE 712, BROOKLYN, NY 11201							
	<u>JU COORT DIREET, DUITE /12, DROORDIN, NI 1</u> 1201			_				

Part VII	Compensation of Officers,	<b>Directors</b> , Trus	stees, Key Em	nployees, Highest	Compensated
	Employees, and Independe	ent 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)	(B)	(C)					(D)	(F)		
Name and title	Average	Position (do not check more than one				one	Reportable	Reportable	Estimated	
	hours per	box	, unless person is both an cer and a director/trustee)				h an	compensation	compensation	amount of
	week		er ar		lirecto	n/trus	lee)	from	from related	other
	(list any hours for	Individual trustee or director						the	organizations	compensation from the
	related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	organization
	organizations	truste	al trus		yee	mper		1099-NEC)	1000 1120/	and related
	below	idual	nstitutional trustee	5	Key employee	est co oyee	er	,		organizations
	line)	Indiv	Instit	Officer	Keye	Highest compensated employee	Former			
(1) JOHN COPELAND	1.00									
CHAIRMAN		Х		X				0.	0.	0.
(2) TODD CRIDER	1.00									
VICE CHAIRMAN		Х		X				0.	0.	0.
(3) BRETT ODOM	1.00									
TREASURER		Х		Х				0.	0.	0.
(4) S. JAMES ANAYA	1.00									
BOARD MEMBER		Х						0.	0.	0.
(5) ROBERT CURRAN	1.00									
BOARD MEMBER		Х						0.	0.	0.
(6) STEVEN KEMLER	1.00									
BOARD MEMBER		Х						0.	0.	0.
(7) CHRISTIAN LELONG	1.00									
BOARD MEMBER		Х						0.	0.	0.
(8) JENNY SPRINGER	1.00									
BOARD MEMBER		Х						0.	0.	0.
(9) BECKY YANG	1.00									
BOARD MEMBER		Х						0.	0.	0.
(10) SUZANNE PELLETIER	40.00									
EXECUTIVE DIRECTOR				Х				193,333.	0.	30,022.
(11) CHRISTINE HALVORSON	40.00									
PROGRAM DIRECTOR						Х		213,735.	0.	94,334.
(12) JOSHUA LICHTENSTEIN	40.00									
PROGRAM MANAGER						Х		189,445.	0.	16,628.
(13) KIM CHAIX	40.00									
DIRECTOR OF STRATEGIC IMPA						Х		139,396.	0.	29,866.
(14) JAMES CAMERON ELLIS	40.00									
FIELD SCIENCES DIRECTOR						Х		131,668.	0.	29,376.
(15) JULIE HUDSON	40.00									
DIRECTOR OF DEVELOPMENT						Х		161,609.	0.	9,705.
										<b>– – – – – – – – – –</b>

332007 12-21-23

Form 990 (2023)

10001114 759420 8392

2023.05000 RAINFOREST FOUNDATION, INC. 8392\_\_\_1

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	Form 990 (2023) RAINFOREST FOUNDATION, INC. 95-1622945 Page &											ge <b>8</b>		
Par	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
	(A) Name and title	<b>(B)</b> Average hours per week (list any hours for	box, offic	not cl unles cer an	ss per	nore rson i irecto	than d is both r/trus	n an tee)	(D) Reportable compensation from the organization	(E) Reportable compensatio from related organizations (W-2/1099-MIS	in I S	Esti amo o comp	(F) mated bunt c ther ensat m the	of tion
		related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC/ 1099-NEC)	1099-NEC)		-	nizatio relate iizatio	ed
1b	Subtotal								1,029,186.		0.	209	,93	31.
	Total from continuation sheets to Part VI Total (add lines 1b and 1c) Total number of individuals (including but n						<u></u>		0 • 1 , 029 , 186 • eceived more than \$100	),000 of reportabl	0. 0. le	209	,93	$\frac{0}{31}$
3	compensation from the organization Did the organization list any <b>former</b> officer,	director, truste	ee, k	key e	empl	oye	e, or	hig	phest compensated emp	bloyee on	[		/es	No
4	line 1a? <i>If</i> "Yes," <i>complete Schedule J for</i> su For any individual listed on line 1a, is the su and related organizations greater than \$150	m of reportabl	le co	ompe	ensa	ation	n anc	l otl		the organization		3 4	x	X
5 Sec	Did any person listed on line 1a receive or a rendered to the organization? <i>If</i> "Yes," <i>com</i> tion <b>B. Independent Contractors</b>	accrue comper	nsati	ion f	rom	any	unr	elat	ed organization or indiv	idual for services		5		x
1	Complete this table for your five highest con										pens	ation fro	om	
	the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) Name and business address NONE Description of services								C	(C) ompens		ı		
2	Total number of independent contractors (in \$100,000 of compensation from the organiz		ot lir	nite	d to	thos (		stec	above) who received n	nore than		Form <b>9</b>	<b>90</b> (2	.023)

332008 12-21-23

			2023) RAINFOREST F	OUNDATION	, INC.		95-1622	945 Page 9
Pa			I Statement of Revenue					
			Check if Schedule O contains a respons	se or note to any lin	e in this Part VIII			
					<b>(A)</b> Total revenue	Related or exempt	<b>(C)</b> Unrelated business revenue	Revenue excluded
nts	1	а	Federated campaigns 1a					
Grai			Membership dues 1b					
ts, ( Am			Fundraising events 1c					
Contributions, Gifts, Grants and Other Similar Amounts			······································	<b>F C 1 0 0 0</b>				
Sins,			Government grants (contributions) 1e	561,982.				
utio		f	All other contributions, gifts, grants, and	601 020				
d: Gtib		~		99,167.				
and		-	Noncash contributions included in lines 1a-1f <b>1g S</b>		9,246,811.			
0				Business Code	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
e,	2	а						
Program Service Revenue		b						
enu.		с						
ran eve		d						
rog		е		_				
٩		f	All other program service revenue					
		g	Total. Add lines 2a-2f					
	3		Investment income (including dividends, inte		166,314.			166,314.
			other similar amounts) Income from investment of tax-exempt bonc		100,514.			100,514.
	4 5		Royalties	· ·				
	5		(i) Real	(ii) Personal				
	6	а	Gross rents					
	-		Less: rental expenses 6b					
			Rental income or (loss) 6c					
		d	( ) <u></u>					
	7	а	Gross amount from sales of (i) Securities					
			assets other than inventory <b>7a 4</b> , 622	. 19,612.				
		b	Less: cost or other basis					
evenue				. 18,420. . 1,192.				
leve			( /	_	127.			127
Other R	•		Net gain or (loss) Gross income from fundraising events (not		127•			127.
Oth	0	d	including \$ of					
•			contributions reported on line 1c). See					
			Part IV, line 18	Ba				
		b		3b				
			Net income or (loss) from fundraising events	5				
	9	а	Gross income from gaming activities. See					
			Part IV, line 19 9	)a				
				)b				
			Net income or (loss) from gaming activities					
	10	а	Gross sales of inventory, less returns					
		<b>L</b>	and allowances1	0a 0b				
			Less: cost of goods sold 1 Net income or (loss) from sales of inventory					
		C	Net income or (1055) from sales of inventory	Business Code				
sno	11	а						
ane		b		-				
Sella		c						[
Miscellaneous Revenue		d	All other revenue					
۲			Total. Add lines 11a-11d					
	12		Total revenue. See instructions		9,413,252.	0.	0.	-
33200	9 12	-21	-23					Form <b>990</b> (2023)

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RAINFOREST FOUNDATION, INC. 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).

<b>D</b> -	Check if Schedule O contains a respon	(A)		(C)	L
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	<b>(B)</b> Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
2	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
0	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	2,947,390.	2,947,390.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
-	trustees, and key employees	223,356.	111,678.	67,007.	44,671
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	2,310,995.	1,426,598.	238,215.	646,182
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	284,214.	176,124.	28,162.	79,928
0	Payroll taxes	199,092.	121,098.	23,549.	54,445
1	Fees for services (nonemployees):				
а	Management				
b	Legal	9,650.		9,650.	
с	Accounting	4,690.		4,680.	10
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch 0.)	603,488.	400,963.	185,938.	16,587
2	Advertising and promotion	105,556.	76,263.	350.	28,943
3	Office expenses	320,517.	179,326.	105,321.	35,870
4	Information technology	65,270.	14,642.	21,628.	29,000
5	Royalties				
6	Occupancy	202,741.	73,477.	49,181.	80,083
7	Travel	526,827.	460,120.	44,306.	22,401
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings				
0	Interest				
1	Payments to affiliates				
2	Depreciation, depletion, and amortization	7,525.		7,525.	
3	Insurance	17,442.	104.	17,270.	68
4	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 0.)	1 01 0 1 1	1 010 115		
а	PROGRAM EXPENSES	1,916,445.	1,916,445.		
b	FOREIGN CURRENCY EXCHAN	33,922.		33,922.	
с	SUPPLIES	28,701.	22,712.	3,600.	2,389
d	MISCELLANEOUS EXPENSES	25,765.		25,765.	
е	All other expenses	0 0 0 0 5 0 5			1 040 555
5	Total functional expenses. Add lines 1 through 24e	9,833,586.	7,926,940.	866,069.	1,040,577
6	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)				

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11 2023.05000 RAINFOREST FOUNDATION, INC. 8392\_\_\_1

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

RAINFOREST FOUNDATION,

Part X Balance Sheet

Form 990 (2023)

Assets

Liabilities

Net Assets or Fund Balances

Cash - non-interest-bearing 6 , 493 , 272 • 1 1 , 8	70 105
	78,125.
Savings and temporary cash investments 2 5,09	92,019.
	04,664.
Accounts receivable, net	
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 5	
Loans and other receivables from other disqualified persons (as defined	
under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6	
Notes and loans receivable, net 7	
Inventories for sale or use 8	
Prepaid expenses and deferred charges 57,919. 9	17,687.
Land, buildings, and equipment: cost or other	
	17,979.
Investments - publicly traded securities 112,494. 11 12	10,365.
Investments - other securities. See Part IV, line 11 12	
Investments - program-related. See Part IV, line 11 13	
Intangible assets 14	
Other assets. See Part IV, line 11         1,334,662.15         1,22	21,624.
	)2,463.
Accounts payable and accrued expenses 318,001. 17 2.	35,346.
	52,864.
Deferred revenue 19	
Tax-exempt bond liabilities 20	
Escrow or custodial account liability. Complete Part IV of Schedule D 21	
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 22	
Secured mortgages and notes payable to unrelated third parties 23	
Unsecured notes and loans payable to unrelated third parties 24	
Other liabilities (including federal income tax, payables to related third	
parties, and other liabilities not included on lines 17-24). Complete Part X	
	L7,265.
Total liabilities. Add lines 17 through 25         2,571,795.26         2,32	15,475.
Organizations that follow FASB ASC 958, check here X	
and complete lines 27, 28, 32, and 33.	
	08,374.
	78,614.
Organizations that do not follow FASB ASC 958, check here	
and complete lines 29 through 33.	
Capital stock or trust principal, or current funds 29	
Paid-in or capital surplus, or land, building, or equipment fund	
Retained earnings, endowment, accumulated income, or other funds 31	
Total net assets or fund balances 7,747,941. 32 7,38	36,988.
Total liabilities and net assets/fund balances 10,319,736. 33 9,70	02,463.

INC.

(A)

Beginning of year

(B)

End of year

Form **990** (2023)

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Form	990 (2023) RAINFOREST FOUNDATION, INC.	95	-1622945	Pa	ige <b>12</b>
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	9,41		
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,83	3,5	86.
3	Revenue less expenses. Subtract line 2 from line 1	3			34.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	7,74	7,9	41.
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 on Schedule O)	9	5	<u>9,3</u>	81.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	7,38	6,9	88.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				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 on Schedul	e O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis	6,		
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audi	t,		
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scl	nedule	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?		За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired au	ıdit		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
				000	(0000)

Form **990** (2023)

332012 12-21-23

SCHEDULE A	١
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Department of the Treasury

Internal Revenue Service

(Form 990)

Total

# Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2023
Open to Public

. Inspection Employer identification number

		RAIN	FOREST FOU	NDATION, INC	•			9	5-1622945				
Ра	rt I	Reason for Public	Charity Status.	All organizations must c	omplete th	nis part.) S	See instructions	3.					
The	orgai	nization is not a private found	lation because it is: (	For lines 1 through 12, c	heck only	one box.)							
1		A church, convention of ch	urches, or associatio	on of churches described	d in <b>sectio</b>	n 170(b)(*	1)(A)(i).						
2		A school described in sect	ion 170(b)(1)(A)(ii).	Attach Schedule E (Form	n 990).)								
3		A hospital or a cooperative	hospital service orga	anization described in <b>se</b>	ection 170	(b)(1)(A)(i	ii).						
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	or the benefit of a co	llege or university owned	d or operat	ted by a g	overnmental ur	nit describ	oed in				
		section 170(b)(1)(A)(iv). (C	Complete Part II.)										
6		A federal, state, or local go	vernment or governn	nental unit described in s	section 17	′0(b)(1)(A)	(v).						
7	X	An organization that norma						e general	public described in				
		section 170(b)(1)(A)(vi). (C			•			0					
8		A community trust describe		1)(A)(vi). (Complete Parl	: II.)								
9		An agricultural research or				ed in conju	unction with a la	and-grant	college				
		or university or a non-land-	-			-		-	-				
		university:		. , , ,				C C					
10		An organization that norma	Illy receives (1) more	than 33 1/3% of its sup	port from a	contributio	ons, membersh	ip fees, ar	nd gross receipts from				
		activities related to its exen											
		income and unrelated busi											
		See section 509(a)(2). (Co		. ,		·	, ,						
11		An organization organized		ively to test for public sa	fety. See s	section 50	09(a)(4).						
12		An organization organized	-	•	•			rry out the	purposes of one or				
		more publicly supported or	-	-	-			•					
		lines 12a through 12d that	-										
а		<b>Type I.</b> A supporting orga	• •			-		-	aivina				
		the supported organization	-	-	•								
		organization. You must o		• • • •	, ,				11 5				
b		<b>Type II.</b> A supporting org	-		tion with it	s support	ed organizatior	n(s), bv ha	vina				
		control or management of	-				-		-				
		organization(s). You mus											
с		Type III functionally inte			in connect	tion with.	and functionall	v integrate	ed with.				
		its supported organizatio						, ,	,				
d		Type III non-functionally						ed organi	zation(s)				
		that is not functionally int		• • •				-					
		requirement (see instruct			•		-						
е		Check this box if the orga	anization received a	written determination fro	m the IRS	that it is a	a Type I, Type I	I, Type III					
		functionally integrated, o											
f	Ent	er the number of supported of											
g	Pro	vide the following information											
		(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	nization listed	(v) Amount of r	monetary	(vi) Amount of other				
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see ins	structions)	support (see instructions)				

ns)

Part II

RAINFOREST FOUNDATION, INC.

95-1622945 Page 2

(f) Total

(e) 2023

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 aamalata Dart III )

fails to qualify under the tests listed below, please complete Part III.)											
Section A. Public Support											
Calendar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022							
1 Gifts, grants, contributions, and											
membership fees received. (Do not	2657200		7002410	1 1 1 1 1 1 1 1							

	include any "unusual grants.")	3657292.	7444295.	7083419.	11111171.	9246811.	38542988.
2	Tax revenues levied for the organ-						
	ization'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 $\dots$						
4	Total. Add lines 1 through 3	3657292.	7444295.	7083419.	11111171.	9246811.	38542988.
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)						4326576.
6	Public support. Subtract line 5 from line 4.						34216412.

#### 6 Public support. Subtract line 5 from line 4. 7

Se	Ction B. Total Support						_
Cal	endar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	3657292.	7444295.	7083419.	11111171.	9246811.	38542988.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	145.	175.	61.	6.	166,314.	166,701.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	100.	7,788.	5,704.	118.		13,710.
11	Total support. Add lines 7 through 10						38723399.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	-
13	First 5 years. If the Form 990 is for th	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3)	
	organization, check this box and stop	here					
Se	ction C. Computation of Publ						
14	Public support percentage for 2023 (I	line 6, column (f), d	livided by line 11,	column (f))		14	88.36 %
15	Public support percentage from 2022	Schedule A, Part	II, line 14			15	93.88 %
16a	a 33 1/3% support test - 2023. If the c	organization did no	t check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this b	
	stop here. The organization qualifies	as a publicly supp	orted organization				X
ł	o 33 1/3% support test - 2022. If the c	organization did no	t check a box on l				
	and stop here. The organization qual	ifies as a publicly s	supported organization	ation			
17a	a 10% -facts-and-circumstances tes	t - 2023. If the org	anization did not c	heck a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the fact	s-and-circumstanc	es test, check this	box and <b>stop he</b>	<b>re.</b> Explain in Part	VI how the organiz	zation
	meets the facts-and-circumstances te	est. The organizatio	on qualifies as a pu	ublicly supported	organization		
ł	0 10% -facts-and-circumstances tes	t - 2022. If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets th	ne facts-and-circun	nstances test, che	ck this box and <b>s</b> t	t <b>op here.</b> Explain ii	n Part VI how the	
	organization meets the facts-and-circ	umstances test. Th	ne organization qu	alifies as a public!	y supported organ	ization	

**18 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990) 2023

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Schedule A	(Form 990	) 2023
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RAINFOREST FOUNDATION, INC.

#### 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.)

Se	ction A. Public Support		•		•		
Cale	ndar year (or fiscal year beginning in)	<b>(a)</b> 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	3 (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 per- formed, or facilities furnished in any activity that is related to the						
2	organization's tax-exempt purpose Gross receipts from activities that						
3	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
•	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	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						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
ie	ction B. Total Support						
ale	ndar year (or fiscal year beginning in)	<b>(a)</b> 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	3 <b>(f)</b> Total
	Amounts from line 6						
0a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
2	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	ne organization's f	irst, second, third	, fourth, or fifth tax	year as a section	501(c)(3) orga	anization,
	check this box and stop here						
	ction C. Computation of Publ						
15	Public support percentage for 2023 (					15	%
<u>16</u>	Public support percentage from 2022					16	%
	ction D. Computation of Invest						
	Investment income percentage for 20					17	%
18	Investment income percentage from						%
19a	<b>33 1/3% support tests - 2023.</b> If the						
	more than 33 1/3%, check this box a						
C	<b>33 1/3% support tests - 2022.</b> If the	•			•		
20	line 18 is not more than 33 1/3%, che						
	Private foundation. If the organization	T UIU HOL CHECK A		a, ur ieu, check li	nis DUX and See IN		dule A (Form 990) 2023
JJ20	23 12-21-23			16		Sche	uule A (FUI 11 990) 202
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#### RAINFOREST FOUNDATION, INC.

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

Yes No

#### 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

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

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Pa	rt IV Supporting Organizations ( <i>continued</i> )			
		_	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations	•		
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If</i> " <i>No</i> ," <i>describe in</i> <b>Part VI</b> <i>how the supported organization</i> (s) effectively operated, supervised, or controlled the organization's activities. <i>If the organization had more than one supported</i> <i>organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the</i> <i>supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations	•		
			Yes	No
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			

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?	1	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported		
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how		
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	
3	By reason of the relationship described 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? If "Yes," describe in Part VI the role the organization's		
	supported organizations played in this regard.	3	

### Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the or	ganization used to satisfy	the Integral Part Test du	ring the yea(see instructions).

- a \_\_\_\_ The organization satisfied the Activities Test. Complete line 2 below.
- **b** L The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

c	The organization supported	a governmental entity.	Describe in Part VI	how you supported	a governmental entity	(see instructions).
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- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If* "Yes," *then in* **Part VI identify those supported organizations and explain** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**
- **a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "*No*" *provide details in* **Part VI.**
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* **Part VI** *the role played by the organization in this regard.*

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Schedule A (F

3b | Schedule A (Form 990) 2023

2a

2b

За

No

Yes

18

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RAINFOREST FOUNDATION, INC.

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporti			55-1022545 Pa
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on	Nov. 20, 1970 (explain in	Part VI). See instruction
	All other Type III non-functionally integrated supporting organizations mu	st complete	Sections A through E.	
Sectio	n A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 1	Net short-term capital gain	1		
<b>2</b> F	Recoveries of prior-year distributions	2		
3 (	Other gross income (see instructions)	3		
4 /	Add lines 1 through 3.	4		
<b>5</b> [	Depreciation and depletion	5		
<b>6</b> F	Portion of operating expenses paid or incurred for production or			
c	collection of gross income or for management, conservation, or			
r	naintenance of property held for production of income (see instructions)	6		
7 (	Other expenses (see instructions)	7		
8 A	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sectio	n B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 /	Aggregate fair market value of all non-exempt-use assets (see			
i	nstructions for short tax year or assets held for part of year):			
a A	Average monthly value of securities	1a		
b A	Average monthly cash balances	1b		
сF	Fair market value of other non-exempt-use assets	1c		
d 1	Fotal (add lines 1a, 1b, and 1c)	1d		
еĽ	Discount claimed for blockage or other factors			
(	explain in detail in Part VI):			
2 /	Acquisition indebtedness applicable to non-exempt-use assets	2		
<b>3</b> S	Subtract line 2 from line 1d.	3		
4 (	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
s	see instructions).	4		
<b>5</b> N	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
<b>6</b> N	Aultiply line 5 by 0.035.	6		
<b>7</b> F	Recoveries of prior-year distributions	7		
8 1	Minimum Asset Amount (add line 7 to line 6)	8		
Sectio	n C - Distributable Amount			Current Year
1 /	Adjusted net income for prior year (from Section A, line 8, column A)	1		
<b>2</b> E	Enter 0.85 of line 1.	2		
3 N	Ainimum asset amount for prior year (from Section B, line 8, column A)	3		
<b>4</b> E	Enter greater of line 2 or line 3.	4		
5 I	ncome tax imposed in prior year	5		
6 [	Distributable Amount. Subtract line 5 from line 4, unless subject to			
e	emergency temporary reduction (see instructions).	6		

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

Schedule A (Form 990) 2023

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Par	t v Type III Non-Functionally Integrated 509	value supporting Orga	anizations (contin	ued)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		1	
2	Amounts paid to perform activity that directly furthers exempt				
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpos	IS	3		
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in <b>Part VI</b> )		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which t	he organization is responsive	e		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2023	ns	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
a	From 2018				
b	From 2019				
c	From 2020				
d	From 2021				
e	From 2022				
f	Total of lines 3a through 3e				
	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
-	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, <i>explain in</i> <b>Part VI.</b> See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
-	Excess from 2019				
-	Excess from 2020				
	Excess from 2021				
	Excess from 2022				
е	Excess from 2023				

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Schedule A	(Form 990) 2023	RAINFORE						945 Page 8
Part VI	Supplemental Part IV, Section A, I line 1; Part IV, Secti	<b>Information.</b> Provid lines 1, 2, 3b, 3c, 4b, 4c ion D, lines 2 and 3; Par 6, and 8; and Part V, Se	e the explanat , 5a, 6, 9a, 9b, t IV, Section E	ions required t , 9c, 11a, 11b, , lines 1c, 2a, 2	by Part II, line and 11c; Part 2b, 3a, and 3b	10; Part II, line 17a or 1 IV, Section B, lines 1 a ; Part V, line 1; Part V,	7b; Part III, lir nd 2; Part IV, Section B, line	ne 12; Section C, e 1e; Part V,
332028 12-21-2	23			21			Schedule A (	Form 990) 202
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Department of the Treasury

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

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

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

Internal Revenue Service Name of the organization

Employer identification number 95-1622945

	RAINFOREST FOUNDAT	ION, INC.		95-1622945
Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Si	milar Funds or	Accounts.Complete if the
	organization answered "Yes" on Form 990, Part IV, li	ne 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		l in donor advised fi	unde
Ŭ	are the organization's property, subject to the organization's	•		
6	Did the organization inform all grantees, donors, and donor a			
0	for charitable purposes and not for the benefit of the donor			
Par		appization answord "Vos"		
		-	on ronn 990, Fait	IV, III e 7.
1	Purpose(s) of conservation easements held by the organizat			
	Preservation of land for public use (for example, recrea			storically important land area
	Protection of natural habitat		Preservation of a ce	rtified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qual	ified conservation contribut	tion in the form of a	Held at the End of the Tax Year
	day of the tax year.			
а	Total number of conservation easements			
b				
	Number of conservation easements on a certified historic st			_ 2c
d	Number of conservation easements included on line 2c acquired acqu			
	on a historic structure listed in the National Register			2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or te	rminated by the org	anization during the tax
	year			
4	Number of states where property subject to conservation ea	asement is located		
5	Does the organization have a written policy regarding the pe	eriodic monitoring, inspectio	on, handling of	
	violations, and enforcement of the conservation easements	it holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting	, handling of violations, and	d enforcing conserva	ation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, han	dling of violations, and enfo	orcing conservation	easements during the year
8	Does each conservation easement reported on line 2d abov	e satisfy the requirements of	of section 170(h)(4)(	B)(i)
	and section 170(h)(4)(B)(ii)?			Yes III No
9	In Part XIII, describe how the organization reports conservat		-	
	balance sheet, and include, if applicable, the text of the foot	note to the organization's f	inancial statements	that describes the
	organization's accounting for conservation easements.			
Par	t III Organizations Maintaining Collections of	-	asures, or Othe	r Similar Assets.
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 9	58, not to report in its rever	nue statement and b	palance sheet works
	of art, historical treasures, or other similar assets held for pu	blic exhibition, education, o	or research in furthe	rance of public
	service, provide in Part XIII the text of the footnote to its fina	ancial statements that desc	ribes these items.	
b	If the organization elected, as permitted under FASB ASC 9	58, to report in its revenue	statement and balar	nce sheet works of
	art, historical treasures, or other similar assets held for publi	c exhibition, education, or r	research in furtherar	nce of public service,
	provide the following amounts relating to these items.			
	(i) Revenue included on Form 990, Part VIII, line 1			\$
				•
2	If the organization received or held works of art, historical tre			
	the following amounts required to be reported under FASB		-	
а	Revenue included on Form 990, Part VIII, line 1			\$
	Assets included in Form 990, Part X			
	For Paperwork Reduction Act Notice, see the Instruction			Schedule D (Form 990) 2023
	09-28-23			, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
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		EST FOUNDA			or Other			45 Page 2
	t III Organizations Maintaining C							ntinuea)
3	Using the organization's acquisition, access	ion, and other record	ds, check any o	of the following the	at make sig	gnificant use	ofits	
_	collection items (check all that apply).							
a	Public exhibition	C		r exchange progra				
b	Scholarly research	e						
c	Preservation for future generations							
4	Provide a description of the organization's c						n Part XIII.	
5	During the year, did the organization solicit o							
Da	to be sold to raise funds rather than to be m							
Fai	t IV Escrow and Custodial Arran reported an amount on Form 990, Pa		te if the organi	zation answered "	Yes" on Fe	orm 990, Par	t IV, line 9,	or
			-11			la a la al a		
та	Is the organization an agent, trustee, custod							
	on Form 990, Part X?						📖 Yes	s 📖 No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	blowing table:				٨٣٥	upt
							Amo	un
	Beginning balance							
	Additions during the year							
-	Distributions during the year							
f	Ending balance							
	Did the organization include an amount on F					y?	📖 Yes	s 🛄 No
Pa	If "Yes," explain the arrangement in Part XIII							
Fai	t V Endowment Funds Complete if	(a) Current year	(b) Prior ye				hack (a) F	our years back
		(a) Current year	(b) Flior ye			aj milee years		Our years back
-	Beginning of year balance							
b	Contributions							
	Net investment earnings, gains, and losses							
d	Grants or scholarships							
е	Other expenditures for facilities							
	and programs							
	Administrative expenses							
-	End of year balance							
2	Provide the estimated percentage of the cur	rent year end baland		imn (a)) held as:				
a	Board designated or quasi-endowment	0/	_%					
b	Permanent endowment	%						
С		<u>%</u>						
-	The percentages on lines 2a, 2b, and 2c sho							
За	Are there endowment funds not in the posse	ession of the organiz	ation that are h	ield and administe	ered for the	e		Yes No
	organization by:							
	(i) Unrelated organizations?							
	(ii) Related organizations?							
	If "Yes" on line 3a(ii), are the related organiza			le R?			31	<u> </u>
4	Describe in Part XIII the intended uses of the		owment funds.					
Pa	t VI Land, Buildings, and Equipn					ine 10		
	Complete if the organization answere						1	
	Description of property	(a) Cost or o		Cost or other		cumulated	(d) B	ook value
<u> </u>		basis (investr		basis (other)	aepr	reciation		
	Land							
	Buildings			20 076		2 510		24 524
	Leasehold improvements			38,076.		3,542		34,534.
d	Equipment			49,120.		35,675		13,445.
	Other		I	10,221.		10,221	•	0.
Tota	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, line 10c, co	olumn (B))				47,979.

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Schedule D	(Form 990) 2023	RAINFOREST	FOUNDATION,	INC.
Part VII	Investments - O	ther Securities		
	Complete if the organ	nization answered "Yes"	on Form 990, Part IV, I	ine 11b. S

Complete if the organization answered "Yes		TTD. See Form 990, Part A, line 12.	
(a) Description of security or category (including name of security	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes	s" 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	d-of-vear market value
(1)			
(1)			
(3)			
(4)			
(5)			
<u>(6)</u>			
<u>(7)</u>			
(8)			
(9) 			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets	all an Earra 000 Dart IV line	11d Cas Faura 000 Dart V line 15	
Complete if the organization answered "Yes	a) Description	TTd. See Form 990, Part A, line 15.	(b) Book value
			26,355.
			20,333.
	TICE		1,192,595
	-026		1,192,393.
<u>(4)</u>			
(5)			
(6)			
(7)			
(8)			
(9)			1 001 004
Total. (Column (b) must equal Form 990, Part X, line 15,	col. (B))		1,221,624.
Part X Other Liabilities			
Complete if the organization answered "Yes	s" 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) OPERATING LEASE LIABILIT	Y		1,217,265.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 25,	col. (B))		1,217,265.
2. Liability for uncertain tax positions. In Part XIII, provi			that reports the

c. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to 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.

Schedule D (Form 990) 2023

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Schedule D (Form 990) 2023 RAINFOREST FOUNDATION, IN	с.		95-	1622945 Page 4
Part XI Reconciliation of Revenue per Audited Financial Statem	nents With			
Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.			
1 Total revenue, gains, and other support per audited financial statements			1	9,379,330.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a Net unrealized gains (losses) on investments	2a			
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			2e	0.
3 Subtract line 2e from line 1			3	9,379,330.
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	4a			
<b>b</b> Other (Describe in Part XIII.)	4b	33,922.		
c Add lines <b>4a</b> and <b>4b</b>			4c	33,922.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	9,413,252.
Part XII Reconciliation of Expenses per Audited Financial State	ments With	I Expenses per	Retu	Irn
Complete if the organization answered "Yes" on Form 990, Part IV, line 12	'a.			
1 Total expenses and losses per audited financial statements			1	9,740,283.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a Donated services and use of facilities	2a			
b Prior year adjustments	2b			
c Other losses	2c			
d Other (Describe in Part XIII.)	2d			
e Add lines 2a through 2d			2e	0.
3 Subtract line 2e from line 1			3	9,740,283.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:				
- Investment evenes and included as Ferry 000, Revt///// line 7h	4a			
a Investment expenses not included on Form 990, Part VIII, line 7b	<del>4</del> a			
<ul> <li>a Investment expenses not included on Form 990, Part VIII, line 7b</li> <li>b Other (Describe in Part XIII.)</li> </ul>		93,303.		
	4b	•	4c	93,303.
b Other (Describe in Part XIII.)	4b		4c 5	93,303. 9,833,586.

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 XI, LINE 4B - OTHER ADJUSTMENTS:

#### FOREIGN EXCHANGE CURRENCY LOSS NETTED WITH INCOME ON

#### FINANCIAL STATEMENTS

PART XII, LINE 4B - OTHER ADJUSTMENTS:	
FOREIGN EXCHANGE CURRENCY LOSS NETTED WITH INCOME ON	
FINANCIAL STATEMENTS	33,922.
GRANTS CANCELLED	59,381.

TOTAL TO SCHEDULE D, PART XII, LINE 4B

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33,922.

93,303.

30 2023.05000 RAINFOREST FOUNDATION, INC. 8392\_\_\_1

5	Sche	dule l	D	(Form	990)	2023

RAINFOREST FOUNDATION, INC. 95-1622945 Page 5

Part XIII	Supplemental Infor	mation (continued)			
				Schedule D (Form	990) 2023
332055 09-28-	-23				

Department of the Treasury Internal Revenue Service	Go to w	ww.irs.gov/Form	<i>n990</i> for instructions and the latest	information.		pen to Public Ispection
Name of the organization					Employer ide	ntification numbe
		TNC			95-1622	045
RAINFOREST FOUN			tside the United States. Compl			
Form 990, Part IV				ete il trie organ	lization answere	eu res on
		n maintain recor	ds to substantiate the amount of its gr	ants and other		
the grantees' eligibility f	or the grants or a	assistance, and	the selection criteria used to award th	e grants or ass	istance?	X Yes 🗌 No
-	ribe in Part V the	e organization's	procedures for monitoring the use of it	ts grants and o	ther assistance	outside the
United States. 3 Activities per Region. (T	ha fallowing Dart	l line 2 table o	an be duplicated if additional space is	needed )		
(a) Region	(b) Number of	(c) Number of		<u> </u>	vity listed in (d)	(f) Total
(a) Hogion	offices	employees,	(by type) (such as, fundraising, pro-		gram service,	expenditures
	in the region	agents, and independent	gram services, investments, grants to		e specific type	for and
		contractors in the region	recipients located in the region)	of service	e(s) in the region	investments in the region
				LAND TITLI	NG LAND	
			PROGRAM ACTIVITIES AND	MANAGEMENT		
CENTRAL AMERICA AND			GRANTS TO RECIPIENTS	ORGANIZATIO	,	
THE CARIBBEAN	0	0	LOCATED IN THE REGION	STRENGTHEN:		990,884
				LAND TITLI		
			PROGRAM ACTIVITIES AND	MANAGEMENT		
			GRANTS TO RECIPIENTS	ORGANIZATI		
SOUTH AMERICA	1	12	LOCATED IN THE REGION	STRENGTHEN:		4,111,714
				LAND TITLI		
			PROGRAM ACTIVITIES AND	MANAGEMENT		
EAST ASIA AND THE			GRANTS TO RECIPIENTS	ORGANIZATI		
PACIFIC	0	0	LOCATED IN THE REGION	STRENGTHEN:		293,885
				LAND TITLI		
			PROGRAM ACTIVITIES AND	MANAGEMENT		
			GRANTS TO RECIPIENTS	ORGANIZATIO		
SUB-SAHARAN AFRICA	0	0	LOCATED IN THE REGION	STRENGTHEN		385,414
	1	12	2			5,781,897
<b>3 a</b> Subtotal		L 1				5,701,097
<b>b</b> Total from continuation		,				0
sheets to Part I c Totals (add lines 3a		· · · · · · · · · · · · · · · · · · ·				0
				-		

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

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Schedule F (Form 990) 2023

5,781,897.

LHA 332071 11-29-23

and 3b)

10001114 759420 8392

SCHEDULE F	Statement of Activities Outside the United States
(Form 990)	Complete if the organization answered "Ves" on Form 990 Part IV line 14b, 15 or 16

(Form 990)

ganization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990.

OMB No. 1545-0047 Open to Public Inspection

Page **2** 

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	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	<b>(f)</b> Manner of cash disbursement	(g) Amount of noncash assistance	<b>(h)</b> Description of noncash assistance	(i) Method of valuation (book, FMV appraisal, other)
			ENVIRONMENTAL					
			MONITORING,					
			, ORGANIZATIONAL					
		SOUTH AMERICA	STRENGTHENING, LAND	134,254.	WIRE TRANSFER	ο.		
			ENVIRONMENTAL	, ,				
			MONITORING,					
			ORGANIZATIONAL					
		SOUTH AMERICA	STRENGTHENING, LAND	230,766.	WIRE TRANSFER	ο.		
			ENVIRONMENTAL	, ,				
			MONITORING,					
			ORGANIZATIONAL					
		SOUTH AMERICA	STRENGTHENING, LAND	25,000.	WIRE TRANSFER	ο.		
			ENVIRONMENTAL	,				
			MONITORING,					
		CENTRAL AMERICA	ORGANIZATIONAL					
		AND THE CARIBBEAN	STRENGTHENING, LAND	600,063.	WIRE TRANSFER	ο.		
			ENVIRONMENTAL	, ,				
			MONITORING,					
			ORGANIZATIONAL					
		SOUTH AMERICA	STRENGTHENING, LAND	18,000.	WIRE TRANSFER	ο.		
			ENVIRONMENTAL	,				
			MONITORING,					
			ORGANIZATIONAL					
		SOUTH AMERICA	STRENGTHENING, LAND	100,000.	WIRE TRANSFER	ο.		
			ENVIRONMENTAL	,				
			MONITORING,					
			ORGANIZATIONAL					
		SOUTH AMERICA	STRENGTHENING, LAND	99,748.	WIRE TRANSFER	Ο.		
			, ENVIRONMENTAL	, .				
			MONITORING,					
		CENTRAL AMERICA	ORGANIZATIONAL					
			STRENGTHENING, LAND	101,000.	WIRE TRANSFER	ο.		

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

3 Enter total number of other organizations or entities

SEE PART V FOR COLUMN (D) DESCRIPTIONS

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RAINFOREST FOUNDATION, INC.

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Part II	Continuation o	f Grants and Other	Assistance to Organiz	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	1 490 2
<b>1</b> (a) Name	e of organization	<b>(b)</b> IRS code section and EIN (if applicable)	<b>(c)</b> Region	<b>(d)</b> Purpose of grant	(e) 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	(i) Method of valuation (book, FMV, appraisal, other)
				ENVIRONMENTAL					
				MONITORING,					
			CENTRAL AMERICA	ORGANIZATIONAL					
			AND THE CARIBBEAN	STRENGTHENING, LAND	20,000.	WIRE TRANSFER	0.		
				ENVIRONMENTAL					
				MONITORING,					
				ORGANIZATIONAL					
			SOUTH AMERICA	STRENGTHENING, LAND	14,162.	WIRE TRANSFER	0.		
				ENVIRONMENTAL					
				MONITORING,					
				ORGANIZATIONAL					
			SOUTH AMERICA	STRENGTHENING, LAND	199,407.	WIRE TRANSFER	0.		
				ENVIRONMENTAL					
				MONITORING,					
				ORGANIZATIONAL					
			SOUTH AMERICA	STRENGTHENING, LAND	428,474.	WIRE TRANSFER	Ο.		
				ENVIRONMENTAL					
				MONITORING,					
			SUB-SAHARAN	ORGANIZATIONAL					
			AFRICA	STRENGTHENING, LAND	161,480.	WIRE TRANSFER	Ο.		
				ENVIRONMENTAL					
				MONITORING,					
				ORGANIZATIONAL					
			SOUTH AMERICA	STRENGTHENING, LAND	127,116.	WIRE TRANSFER	Ο.		
				ENVIRONMENTAL	,				
				MONITORING,					
			EAST ASIA & THE	ORGANIZATIONAL					
			PACIFIC	STRENGTHENING, LAND	72,064.	WIRE TRANSFER	0.		
				ENVIRONMENTAL					
				MONITORING,					
				ORGANIZATIONAL					
			SOUTH AMERICA	STRENGTHENING, LAND	348,356.	WIRE TRANSFER	0.		
				ENVIRONMENTAL	, <u>,</u>				
				MONITORING,					
				, ORGANIZATIONAL					
			SOUTH AMERICA	STRENGTHENING, LAND	21,600.	WIRE TRANSFER	0.		

RAINFOREST FOUNDATION, INC.

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Page 2

Part II Continuation of	of Grants and Other	Assistance to Organiz	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	T age
<b>1</b> a) Name of organization	(b) IRS code section and EIN (if applicable)	(a) Degion	<b>(d)</b> Purpose of grant	(e) Amount	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM appraisal, other)
			ENVIRONMENTAL					
			MONITORING,					
			ORGANIZATIONAL					
		SOUTH AMERICA	STRENGTHENING, LAND	20 678.	WIRE TRANSFER	0.		
			ENVIRONMENTAL	,				
			MONITORING,					
			ORGANIZATIONAL					
		SOUTH AMERICA	STRENGTHENING, LAND	22 000	WIRE TRANSFER	0.		
			ENVIRONMENTAL	,				
			MONITORING,					
			ORGANIZATIONAL					
		SOUTH AMERICA	STRENGTHENING, LAND	10 000	WIRE TRANSFER	0.		
			ENVIRONMENTAL	10,000.		· · ·		
			MONITORING,					
			ORGANIZATIONAL					
		SOUTH AMERICA	STRENGTHENING, LAND	100 000	WIRE TRANSFER	0.		
		DOUTH AMERICA	ENVIRONMENTAL	100,000.	WIRE TRANSFER	•.		
			MONITORING,					
			ORGANIZATIONAL					
		SOUTH AMERICA	STRENGTHENING, LAND	6 000	WIRE TRANSFER	0.		
		SOUTH AMERICA	ENVIRONMENTAL	0,000.	WIKE IKANSFER	· · ·		
			MONITORING,					
		COUNTL AMEDICA	ORGANIZATIONAL	01 701		0		
		SOUTH AMERICA	STRENGTHENING, LAND	01,721.	WIRE TRANSFER	0.		

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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. Т

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	<b>(h)</b> Method of valuation (book, FMV, appraisal, other)

Schedule F (Form 990) 2023

Schedule F (Form 990) 2023		FOUNDATION,	INC.
Part IV Foreign Form	S		

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	X No
2	Did the organization have an interest in a foreign trust during the tax year? <i>If</i> "Yes," <i>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</i> (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? 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	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? <i>If</i> "Yes," <i>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)</i>	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? <i>If</i> "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	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," <i>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)</i>	Yes	X No

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Schedule F (Form 990) 2023 RAINFOREST FOUNDATION, INC.

 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:

RFUS PROGRAM STAFF MONITORS THE USE OF GRANT FUNDS THROUGH SITE VISITS,

CONSTANT COMMUNICATIONS, AND REVIEWS OF INTERIM AND FINAL NARRATIVE AND

FINANCIAL REPORTS. DURING SITE VISITS, RFUS PROGRAM STAFF ALSO ASSESS

PARTNERING ORGANIZATIONS' ACCOUNTING PRACTICES, AND EVALUATE ACTIVITIES

TAKING PLACE WITH GRANT FUNDS.

PART II, COLUMN (D):

**REGION: SOUTH AMERICA** 

(D) PURPOSE OF GRANT: ENVIRONMENTAL MONITORING, ORGANIZATIONAL

STRENGTHENING, LAND MANAGEMENT PLANNING

#### REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: ENVIRONMENTAL MONITORING, ORGANIZATIONAL

STRENGTHENING, LAND MANAGEMENT PLANNING

#### REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: ENVIRONMENTAL MONITORING, ORGANIZATIONAL

STRENGTHENING, LAND MANAGEMENT PLANNING

#### REGION: CENTRAL AMERICA AND THE CARIBBEAN

(D) PURPOSE OF GRANT: ENVIRONMENTAL MONITORING, ORGANIZATIONAL

STRENGTHENING, LAND MANAGEMENT PLANNING

#### REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: ENVIRONMENTAL MONITORING, ORGANIZATIONAL

STRENGTHENING, LAND MANAGEMENT PLANNING

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#### RAINFOREST FOUNDATION, INC. Schedule F (Form 990) 2023

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.

#### **REGION: SOUTH AMERICA**

(D) PURPOSE OF GRANT: ENVIRONMENTAL MONITORING, ORGANIZATIONAL

STRENGTHENING, LAND MANAGEMENT PLANNING

REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: ENVIRONMENTAL MONITORING, ORGANIZATIONAL

STRENGTHENING, LAND MANAGEMENT PLANNING

**REGION: SOUTH AMERICA** 

(D) PURPOSE OF GRANT: ENVIRONMENTAL MONITORING, ORGANIZATIONAL

STRENGTHENING, LAND MANAGEMENT PLANNING

REGION: CENTRAL AMERICA AND THE CARIBBEAN

(D) PURPOSE OF GRANT: ENVIRONMENTAL MONITORING, ORGANIZATIONAL

STRENGTHENING, LAND MANAGEMENT PLANNING

REGION: CENTRAL AMERICA AND THE CARIBBEAN

(D) PURPOSE OF GRANT: ENVIRONMENTAL MONITORING, ORGANIZATIONAL

STRENGTHENING, LAND MANAGEMENT PLANNING

#### **REGION: SOUTH AMERICA**

(D) PURPOSE OF GRANT: ENVIRONMENTAL MONITORING, ORGANIZATIONAL

STRENGTHENING, LAND MANAGEMENT PLANNING

#### **REGION: SOUTH AMERICA**

(D) PURPOSE OF GRANT: ENVIRONMENTAL MONITORING, ORGANIZATIONAL

332075 11-29-23

10001114 759420 8392

Schedule F (Form 990) 2023

#### 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.

#### STRENGTHENING, LAND MANAGEMENT PLANNING

#### **REGION: SOUTH AMERICA**

(D) PURPOSE OF GRANT: ENVIRONMENTAL MONITORING, ORGANIZATIONAL

#### STRENGTHENING, LAND MANAGEMENT PLANNING

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: ENVIRONMENTAL MONITORING, ORGANIZATIONAL

STRENGTHENING, LAND MANAGEMENT PLANNING

#### **REGION: SOUTH AMERICA**

(D) PURPOSE OF GRANT: ENVIRONMENTAL MONITORING, ORGANIZATIONAL

STRENGTHENING, LAND MANAGEMENT PLANNING

REGION: EAST ASIA & THE PACIFIC

(D) PURPOSE OF GRANT: ENVIRONMENTAL MONITORING, ORGANIZATIONAL

STRENGTHENING, LAND MANAGEMENT PLANNING

REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: ENVIRONMENTAL MONITORING, ORGANIZATIONAL

STRENGTHENING, LAND MANAGEMENT PLANNING

REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: ENVIRONMENTAL MONITORING, ORGANIZATIONAL

#### STRENGTHENING, LAND MANAGEMENT PLANNING

#### REGION: SOUTH AMERICA

332075 11-29-23

#### 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.

#### (D) PURPOSE OF GRANT: ENVIRONMENTAL MONITORING, ORGANIZATIONAL

#### STRENGTHENING, LAND MANAGEMENT PLANNING

REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: ENVIRONMENTAL MONITORING, ORGANIZATIONAL

STRENGTHENING, LAND MANAGEMENT PLANNING

**REGION: SOUTH AMERICA** 

(D) PURPOSE OF GRANT: ENVIRONMENTAL MONITORING, ORGANIZATIONAL

STRENGTHENING, LAND MANAGEMENT PLANNING

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STRENGTHENING, LAND MANAGEMENT PLANNING

REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: ENVIRONMENTAL MONITORING, ORGANIZATIONAL

STRENGTHENING, LAND MANAGEMENT PLANNING

**REGION: SOUTH AMERICA** 

(D) PURPOSE OF GRANT: ENVIRONMENTAL MONITORING, ORGANIZATIONAL

STRENGTHENING, LAND MANAGEMENT PLANNING

REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: ENVIRONMENTAL MONITORING, ORGANIZATIONAL

STRENGTHENING, LAND MANAGEMENT PLANNING

332075 11-29-23

#### 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.

#### REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: ENVIRONMENTAL MONITORING, ORGANIZATIONAL

#### STRENGTHENING, LAND MANAGEMENT PLANNING

#### REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: ENVIRONMENTAL MONITORING, ORGANIZATIONAL

STRENGTHENING, LAND MANAGEMENT PLANNING

332075 11-29-23

10001114 759420 8392

SCHEE	DULE J	Compensation Information	1	OMB No. 1	545-00	47
(Form	990)	For certain Officers, Directors, Trustees, Key Employees, and Highest	-	2023		
-	-	Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.		Ľυ	ζIJ	)
Doportmont	of the Treasury		Open to	Publ	ic	
	enue Service		Inspe	ction		
Name of	the organization	1	Employer id			mber
		RAINFOREST FOUNDATION, INC.	95-1	62294	5	
Part I	Question	s Regarding Compensation				
					Yes	No
<b>1a</b> Che	eck the appropri	ate box(es) if the organization provided any of the following to or for a person listed on Form	1 990,			
Part	VII, Section A,	line 1a. Complete Part III to provide any relevant information regarding these items.				
	First-class or c	harter travel Housing allowance or residence for perso	naluse			
	Travel for com	panions Payments for business use of personal re	sidence			
	Tax indemnific	ation and gross-up payments Health or social club dues or initiation fee	S			
	Discretionary s	spending account Personal services (such as maid, chauffe	ur, chef)			
<b>b</b> If ar	ny of the boxes	on line 1a are checked, did the organization follow a written policy regarding payment or				
reim	nbursement or p	rovision of all of the expenses described above? If "No," complete Part III to explain		1b		
2 Did	the organization	n require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
trus	tees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2		
3 Indi	cate which, if ar	ny, of the following the organization used to establish the compensation of the organization'	S			
CEC	D/Executive Dire	ctor. Check all that apply. Do not check any boxes for methods used by a related organizat	ion to			
esta	ablish compensa	ation of the CEO/Executive Director, but explain in Part III.				
	Compensation	committee Written employment contract				
	Independent o	compensation consultant Compensation survey or study				
X	Form 990 of o	ther organizations X Approval by the board or compensation of	ommittee			
4 Duri	ing the year, dic	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
orga	anization or a re	lated organization:				
		e payment or change-of-control payment?				X
		eive payment from a supplemental nonqualified retirement plan?				X
		eive payment from an equity-based compensation arrangement?		<b>4c</b>		X
lf "Y	es" to any of lir	nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
		)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati	on			
	tingent on the r					37
a The	organization?			5a		X
		ation?		5b		X
		r 5b, describe in Part III.				
		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati	on			
	tingent on the n					v
						X
		ation?		6b		X
		r 6b, describe in Part III.				
		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payment		_		v
		nes 5 and 6? If "Yes," describe in Part III		7		X
		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the		_		v
		ption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		X
		id the organization also follow the rebuttable presumption procedure described in				
		1 53.4958-6(c)?				
For Pape	erwork Reducti	on Act Notice, see the Instructions for Form 990.	Sched	ule J (Forn	n 990)	12023

LHA 332111 11-06-23

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

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

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

		(B) Breakdown of W	/-2 and/or 1099-MIS compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) SUZANNE PELLETIER	(i)	183,333.	10,000.	0.	475.	29,547.	223,355.	0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) CHRISTINE HALVORSON	(i)	135,450.	0.	78,285.	84,717.	9,617.	308,069.	0.
PROGRAM DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JOSHUA LICHTENSTEIN	(i)	130,032.	0.	59,413.	333.	16,295.	206,073.	0.
PROGRAM MANAGER	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) KIM CHAIX	(i)	124,614.	0.	14,782.	319.	29,547.	169,262.	0.
DIRECTOR OF STRATEGIC IMPA	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) JAMES CAMERON ELLIS	(i)	105,272.	0.	26,396.	181.	29,195.	161,044.	0.
FIELD SCIENCES DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) JULIE HUDSON	(i)	155,517.	0.	6,092.	398.	9,307.	171,314.	0.
DIRECTOR OF DEVELOPMENT	(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)							
	(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 3:

RAINFOREST FOUNDATION US EXECUTIVE DIRECTOR COMPENSATION IS REVIEWED

#### AGAINST COMPARATIVE ORGANIZATIONS FOR REASONABLENESS AND MUST BY APPROVED

#### BY THE BOARD OF DIRECTORS.

PART II, LINE 2(I)(C)

RETIREMENT AND OTHER DEFERRED COMPENSATION REPORTED IN COLUMN C FOR

CHRISTINE HALVORSON INLCLUDES DEFERRED PAYMENT OF RETIREMENT

CONTRIBUTIONS WHICH WERE ACCRUED IN 2023 BUT NOT PAID UNTIL 2024.

#### SCHEDULE M (Form 990)

## **Noncash Contributions**

OMB No. 1545-0047

23

r

Employer identification number 95 - 1622945

Department of the Treasury Internal Revenue Service Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Name of the organization

#### RAINFOREST FOUNDATION, INC.

Pa	πτι iypes	of Property								
			<b>(a)</b> Check if	(b) Number of	(c) Noncash contril		(d) Method of de	etermin	•	
			applicable	contributions or items contributed	amounts report Form 990, Part VII		noncash contribu	ution a	mount	S
1	Art - Works of a	art				· · · · · ·				
2		treasures								
3		interests								
4		blications								
5		ousehold goods								
6		vehicles								
7		nes								
8		perty								
9		olicly traded	X	13	74	,737.	FMV			
10		sely held stock				/				
11		tnership, LLC, or								
••										
12		cellaneous								
13		ervation contribution -								
		Ires								
14		ervation contribution - Other								
15		esidential								
16		ommercial								
17		ther								
18										
19		·								
20		lical supplies								
21										
22		cts								
23		imens								
24		artifacts								
25	Other (CI	RYPTO CURRENCY )	Х	110	24	,430.	FMV			
26	Other (	)								
27	Other (	)								
28	Other (	)								
29	Number of For	ms 8283 received by the organi	zation durin	g the tax year for c	ontributions					
	for which the o	rganization completed Form 82	83, Part V, I	Donee Acknowledg	ement	29				
									Yes	No
30a	During the yea	r, did the organization receive b	y contributio	on any property rep	oorted in Part I, line	es 1 throu	gh 28, that it			
	must hold for a	t least 3 years from the date of	the initial co	ntribution, and wh	ich isn't required to	be used	for			
	exempt purpos	ses for the entire holding period	?					30a		X
b		be the arrangement in Part II.								
31	Does the orgar	nization have a gift acceptance	policy that r	equires the review	of any nonstandard	d contribu	utions?	31		X
32a	Does the organ	nization hire or use third parties	or related or	ganizations to soli	cit, process, or sell	noncash				
	contributions?							32a		X
b	If "Yes," descri	be in Part II.								
33	If the organizat	ion didn't report an amount in c	olumn (c) fo	r a type of propert	y for which column	(a) is che	cked,			
	describe in Par	t II.								

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

Schedule M (Form 990) 2023

LHA 332141 09-11-23

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**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. Part II

	 	 <u> </u>

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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 for the latest information.



95-1622945

RAINFOREST FOUNDATION, INC.

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

AND ORGANIZATIONS TO SECURE THEIR RIGHTS TO THEIR TRADITIONAL LANDS AND

PROTECT THEIR FORESTS AND LIVELIHOODS. WE ARE TACKLING THE WORLD'S MOST

URGENT CHALLENGES: BIODIVERSITY LOSS, CLIMATE CHANGE, AND HUMAN RIGHTS.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

SECURING AND CONTROLLING THE NATURAL RESOURCES NECESSARY FOR THEIR LONG TERM WELL BEING AND MANAGING THESE RESOURCES IN WAYS WHICH DO NOT HARM THEIR ENVIRONMENT, VIOLATE THEIR CULTURE OR COMPROMISE THEIR FUTURE;

AND DEVELOPING THE MEANS TO PROTECT THEIR INDIVIDUAL AND COLLECTIVE

RIGHTS AND TO OBTAIN, SHAPE AND CONTROL BASIC SERVICES FROM THE STATE.

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

RFUS WORKS WITH INDIGENOUS PEOPLES AND LOCAL COMMUNITIES TO UNDERSTAND

AND EXERCISE THEIR RIGHTS; MAP AND DEMARCATE THEIR TERRITORIES, AND TO

OBTAIN LEGAL REPRESENTATION TO SECURE LAND RIGHTS, SETTLE DISPUTES AND

SEEK JUSTICE FOR HUMAN RIGHTS VIOLATIONS PERPETRATED AGAINST

ENVIRONMENTAL DEFENDERS.

TERRITORIAL GOVERNANCE AND SECURITY: RFUS SUPPORTS PARTNERS TO MONITOR

AND SECURE THEIR TERRITORIES, STRENGTHEN COLLECTIVE FOREST GOVERNANCE

AND MANAGEMENT, AND ISSUE EVIDENCE-BASED ADVOCACY TO ADDRESS

DEFORESTATION ON THEIR LANDS.

DIRECT FINANCE: RFUS SUPPORTS THE ESTABLISHMENT AND FINANCING OF

2023.05000 RAINFOREST FOUNDATION, INC. 8392\_\_\_1

Schedule O (Form 990) 2023	Page 2
Name of the organization RAINFOREST FOUNDATION, INC.	Employer identification number 95-1622945
INDIGENOUS PEOPLES AND LOCAL COMMUNITY-LED TERRITORIAL FA	CILITIES TO
SUSTAIN FOREST PROTECTION STRATEGIES, THE STRENGTHENING O	F PARTNERS'
INSTITUTIONAL CAPACITIES TO ADMINISTER INCREASED FINANCIA	L FLOWS, AND
ABILITIES TO NEGOTIATE NEW ECONOMY-BUILDING PARTNERSHIPS	FOR THEIR
COMMUNITIES.	

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

DRAFTS OF THE COMPLETED RETURNS ARE REVIEWED BY THE EXECUTIVE DIRECTOR AND FINANCIAL DIRECTOR. THE FINAL DRAFT IS SUBMITTED TO THE FINANCE AND EXECUTIVE COMMITTEE FOR ITS REVIEW AND APPROVAL. ONCE THE COMMITTEE HAS COMPLETED ITS REVIEW, COPIES OF THE RETURNS ARE PROVIDED TO ALL BOARD MEMBERS FOR FINAL REVIEW AND APPROVAL BEFORE FILING.

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

ALL BOARD MEMBERS COMPLETE AN ANNUAL CONFLICT OF INTEREST STATEMENT, WHICH ACKNOWLEDGES THAT EACH INDIVIDUAL HAS DISCLOSED ANY POTENTIAL CONFLICT OF INTEREST; RECEIVED A COPY OF THE CONFLICT OF INTEREST POLICY; AND READ, UNDERSTOOD AND AGREED TO COMPLY WITH THE CONFLICT OF INTEREST POLICY. EACH YEAR PRINCIPAL OFFICERS, KEY EMPLOYEES AND/OR COMMITTEE MEMBERS ARE ASKED TO DISCLOSE POTENTIAL OR ACTUAL CONFLICTS OF INTEREST WHEN AND IF THEY ARISE AND SIGN AN UPDATED CONFLICT OF INTEREST STATEMENT.

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

RAINFOREST FOUNDATION US EXECUTIVE DIRECTOR COMPENSATION IS REVIEWED

AGAINST COMPARATIVE ORGANIZATIONS FOR REASONABLENESS AND MUST BE APPROVED

BY THE BOARD OR DIRECTORS

FORM 990	), PART	VI,	SECTION	С,	LINE	19:	

332212 11-14-23

Schedule O (Form 990) 2023

Name of the organization

RAINFOREST FOUNDATION, INC.

Page 2 Employer identification number 95-1622945

#### ALL DOCUMENTS ARE AVAILABLE UPON REQUEST WITHIN THE PRESCRIBED TIME FRAMES

AS REQUIRED.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

GRANTS CANCELLED

59,381.

FORM 990, PART XII, LINE 2C:

RAINFOREST FOUNDATION US EXECUTIVE DIRECTOR COMPENSATION IS REVIEWED

#### AGAINST COMPARATIVE ORGANIZATIONS FOR REASONABLENESS AND MUST BE

#### APPROVED

BY THE BOARD OF DIRECTORS.

Schedule O (Form 990) 2023

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332212 11-14-23