

PUBLIC DISCLOSURE COPY

Form **990****Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047

2005Department of the Treasury
Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public
Inspection**A For the 2005 calendar year, or tax year beginning****and ending****B** Check if applicable:

- ☒ Address change
☐ Name change
☐ Initial return
☐ Final return
☐ Amended return
☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization**The Pachamama Alliance**

Number and street (or P.O. box if mail is not delivered to street address)

Presidio Bldg 1009

Room/suite

City or town, state or country, and ZIP + 4

San Francisco, CA 94129**D Employer identification number****94-3249793****E Telephone number****415-561-4522****F Accounting method:** ☐ Cash ☒ Accrual
☐ Other (specify) ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and I are not applicable to section 527 organizations.**H(a)** Is this a group return for affiliates? ☐ Yes ☒ No**H(b)** If "Yes," enter number of affiliates ▶ **N/A****H(c)** Are all affiliates included? **N/A** ☐ Yes ☐ No
(If "No," attach a list.)**H(d)** Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No**I Group Exemption Number** ▶ **N/A****M Check** ☐ if the organization is **not** required to attach Sch. B (Form 990, 990-EZ, or 990-PF).**G Website:** ▶ **www.pachamama.org****J Organization type** (check only one) ▶ ☒ 501(c) (**3**) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**K Check here** ☐ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization chooses to file a return, be sure to file a complete return. **Some states require a complete return.****L Gross receipts:** Add lines 6b, 8b, 9b, and 10b to line 12 ▶**1,580,344.****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

Revenue	1 Contributions, gifts, and similar amounts received:				
	a Direct public support	1a	1,396,127.		
	b Indirect public support	1b			
	c Government contributions (grants)	1c			
	d Total (add lines 1a through 1c) (cash \$ 1,295,466. noncash \$ 100,661.)			1d	1,396,127.
	2 Program service revenue including government fees and contracts (from Part VII, line 93)			2	155,758.
	3 Membership dues and assessments			3	
	4 Interest on savings and temporary cash investments			4	
	5 Dividends and interest from securities			5	16.
	6 a Gross rents	6a			
	b Less: rental expenses	6b			
	c Net rental income or (loss) (subtract line 6b from line 6a)			6c	
7 Other investment income (describe ▶)			7		
Expenses	8 a Gross amount from sales of assets other than inventory	(A) Securities	(B) Other		
		26,758.	8a		
	b Less: cost or other basis and sales expenses	26,787.	8b		
	c Gain or (loss) (attach schedule)	<29.>	8c		
	d Net gain or (loss) (combine line 8c, columns (A) and (B))	Stmt 1		8d	<29.>
	9 Special events and activities (attach schedule). If any amount is from gaming , check here ▶ <input type="checkbox"/>				
	a Gross revenue (not including \$ of contributions reported on line 1a)	9a			
	b Less: direct expenses other than fundraising expenses	9b			
	c Net income or (loss) from special events (subtract line 9b from line 9a)			9c	
	10 a Gross sales of inventory, less returns and allowances	10a			
	b Less: cost of goods sold	10b			
	c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)			10c	
11 Other revenue (from Part VII, line 103)			11	1,685.	
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)			12	1,553,557.	
Net Assets	13 Program services (from line 44, column (B))			13	1,242,842.
	14 Management and general (from line 44, column (C))			14	135,542.
	15 Fundraising (from line 44, column (D))			15	124,552.
	16 Payments to affiliates (attach schedule)			16	
	17 Total expenses (add lines 16 and 44, column (A))			17	1,502,936.
18 Excess or (deficit) for the year (subtract line 17 from line 12)			18	50,621.	
19 Net assets or fund balances at beginning of year (from line 73, column (A))			19	175,466.	
20 Other changes in net assets or fund balances (attach explanation)	See Statement 2		20	<10,000.>	
21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)			21	216,087.	

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash \$ <u>547,150.</u> noncash \$ <u>25,920.</u>) If this amount includes foreign grants, check here <input type="checkbox"/>	22 573,070.	573,070.	Statement 4 Statement 5	
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25 Compensation of officers, directors, etc.	25 212,438.	192,637.	7,543.	12,258.
26 Other salaries and wages	26 146,729.	51,355.	73,365.	22,009.
27 Pension plan contributions	27			
28 Other employee benefits	28 19,426.	9,907.	7,576.	1,943.
29 Payroll taxes	29 19,204.	9,794.	7,490.	1,920.
30 Professional fundraising fees	30			
31 Accounting fees	31			
32 Legal fees	32			
33 Supplies	33 18,495.	12,947.	2,774.	2,774.
34 Telephone	34 12,544.	8,153.	1,882.	2,509.
35 Postage and shipping	35 6,305.	631.	1,891.	3,783.
36 Occupancy	36 27,620.	13,810.	6,905.	6,905.
37 Equipment rental and maintenance	37			
38 Printing and publications	38 18,086.	12,660.	1,809.	3,617.
39 Travel	39 27,576.	26,197.	276.	1,103.
40 Conferences, conventions, and meetings	40			
41 Interest	41			
42 Depreciation, depletion, etc. (attach schedule)	42 2,767.		2,767.	
43 Other expenses not covered above (itemize):				
a	43a			
b	43b			
c	43c			
d	43d			
e	43e			
f	43f			
g See Statement 3	43g 418,676.	331,681.	21,264.	65,731.
44 Total functional expenses. Add lines 22 through 43. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44 1,502,936.	1,242,842.	135,542.	124,552.

Joint Costs. Check ☐ if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs \$ N/A ; (ii) the amount allocated to Program services \$ N/A ;

(iii) the amount allocated to Management and general \$ N/A ; and (iv) the amount allocated to Fundraising \$ N/A

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► <u>See Statement 6</u>		Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)		
a <u>Statement attached</u>		
(Grants and allocations \$ <u>572,610.</u>) If this amount includes foreign grants, check here ► <input type="checkbox"/>		<u>1,242,842.</u>
b		
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>		
c		
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>		
d		
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>		
e Other program services (attach schedule)		
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>		
f Total of Program Service Expenses (should equal line 44, column (B), Program services) ►		<u>1,242,842.</u>

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Part IV Balance Sheets (See the instructions.)**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
Assets	45 Cash - non-interest-bearing	106,090.	45	96,964.
	46 Savings and temporary cash investments		46	61,601.
	47 a Accounts receivable 47a 5,569.			
	b Less: allowance for doubtful accounts 47b	1,479.	47c	5,569.
	48 a Pledges receivable 48a 172,950.			
	b Less: allowance for doubtful accounts 48b	92,885.	48c	172,950.
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees		50	
	51 a Other notes and loans receivable 51a			
	b Less: allowance for doubtful accounts 51b		51c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges	1,500.	53	1,500.
	54 Investments - securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54	
	55 a Investments - land, buildings, and equipment: basis 55a			
b Less: accumulated depreciation 55b		55c		
56 Investments - other		56		
57 a Land, buildings, and equipment: basis 57a 20,527.				
b Less: accumulated depreciation Stmt 7 57b 11,211.	9,183.	57c	9,316.	
58 Other assets (describe ►))		58		
59 Total assets (must equal line 74). Add lines 45 through 58	211,137.	59	347,900.	
Liabilities	60 Accounts payable and accrued expenses	19,196.	60	109,825.
	61 Grants payable		61	
	62 Deferred revenue		62	11,988.
	63 Loans from officers, directors, trustees, and key employees Stmt 8		63	10,000.
	64 a Tax-exempt bond liabilities		64a	
	b Mortgages and other notes payable		64b	
	65 Other liabilities (describe ►))	16,475.	65	
66 Total liabilities. Add lines 60 through 65)	35,671.	66	131,813.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	175,466.	67	216,087.
	68 Temporarily restricted		68	
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)	175,466.	73	216,087.
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73	211,137.	74	347,900.

Part IV-A

Part IV-B	Reconciliation of Expenses per Audited Financial Statements With Expenses per Return
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Part V-A **Current Officers, Directors, Trustees, and Key Employees** (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

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Yes	No
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- Note.** Related organizations include section 509(a)(3) supporting organizations.

d Does the organization have a written conflict of interest policy?

(E) Expense account and other allowances

Part VI	Other Information <i>(See the instructions.)</i>
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Part VI Other Information (continued)

Yes No

82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X	
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b		
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.			
c	Dues, assessments, and similar amounts from members	85c	N/A	
d	Section 162(e) lobbying and political expenditures	85d	N/A	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A	
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h		
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12	86a	N/A	
b	Gross receipts, included on line 12, for public use of club facilities	86b	N/A	
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders	87a	N/A	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	N/A	
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88		X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0.; section 4912 ▶ 0.; section 4955 ▶ 0.			
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			0.
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization			0.
90 a	List the states with which a copy of this return is filed ▶ CA	90b		5
b	Number of employees employed in the pay period that includes March 12, 2005			
91 a	The books are in care of ▶ Basil R Twist, Jr Telephone no. ▶ (415) 561-4522 Located at ▶ Presidio Building 1009, San Francisco, CA ZIP + 4 ▶ 94129			
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	91b		X
	If "Yes," enter the name of the foreign country ▶ N/A			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
c	At any time during the calendar year, did the organization maintain an office outside of the United States? If "Yes," enter the name of the foreign country ▶ N/A	91c		X
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92		N/A	

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Part VII Analysis of Income-Producing Activities (See the instructions.)**Note:** Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a <u>Symposium</u>					24,796.
b <u>Travel referral fees</u>					130,962.
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities			14	16.	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	<29.>	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a <u>Tape sale royalties</u>			15	1,685.	
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0.		1,672.	155,758.
105 Total (add line 104, columns (B), (D), and (E))					157,430.

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93	Activities further our exempt purpose by providing public education

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Please Sign Here	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.			
	Signature of officer <u>Sue Fujitani</u>		Date <u>05/11/06</u>	
Paid Preparer's Use Only	Preparer's signature <u>Sue Fujitani</u>		Check if self-employed <input checked="" type="checkbox"/>	
	Firm's name (or yours if self-employed), address, and ZIP + 4 <u>Sue Fujitani</u> <u>3145 Geary #65</u> <u>San Francisco, CA 94118</u>		Preparer's SSN or PTIN EIN <u>(415) 566-4619</u>	

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

► **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No. 1545-0047

2005

Name of the organization

The Pachamama Alliance

Employer identification number

94 3249793

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				
Total number of other employees paid over \$50,000		0		

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of others receiving over \$50,000 for professional services		0

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of other contractors receiving over \$50,000 for other services		0

Part III Statements About Activities (See page 2 of the instructions.)**Yes No**

1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.	1		X
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)			
a	Sale, exchange, or leasing of property? _____	2a		X
b	Lending of money or other extension of credit? _____	2b		X
c	Furnishing of goods, services, or facilities? _____	2c		X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? See Part V-A, Form 990	2d	X	
e	Transfer of any part of its income or assets? _____	2e		X
3 a	Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.) _____	3a		X
b	Do you have a section 403(b) annuity plan for your employees? _____	3b		X
c	During the year, did the organization receive a contribution of qualified real property interest under section 170(h)? _____	3c		X
4 a	Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds? _____	4a		X
b	Do you provide credit counseling, debt management, credit repair, or debt negotiation services? _____	4b		X

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)The organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

5	<input type="checkbox"/> A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
6	<input type="checkbox"/> A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
7	<input type="checkbox"/> A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
8	<input type="checkbox"/> A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
9	<input type="checkbox"/> A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ▶ _____
10	<input type="checkbox"/> An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the Support Schedule in Part IV-A.)
11a	<input checked="" type="checkbox"/> An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)
11b	<input type="checkbox"/> A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)
12	<input type="checkbox"/> An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)
13	<input type="checkbox"/> An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) sections 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). Check the box that describes the type of supporting organization: <input type="checkbox"/> Type 1 <input type="checkbox"/> Type 2 <input type="checkbox"/> Type 3

Provide the following information about the supported organizations. (See page 6 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

14	<input type="checkbox"/> An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)
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Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) **Use cash method of accounting.**
Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	1,134,837.	760,302.	854,324.	820,652.	3,570,115.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	65,613.	37,822.	27,929.	21,971.	153,335.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	595.	242.	380.	5,062.	6,279.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	1,201,045.	798,366.	882,633.	847,685.	3,729,729.
24 Line 23 minus line 17	1,135,432.	760,544.	854,704.	825,714.	3,576,394.
25 Enter 1% of line 23	12,010.	7,984.	8,826.	8,477.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					71,528.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2001 through 2004 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					113,406.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					3,576,394.
d Add: Amounts from column (e) for lines: 18 6,279. 19 22 113,406.					119,685.
e Public support (line 26c minus line 26d total)					3,456,709.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					96.6535%
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: N/A					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: N/A					
c Add: Amounts from column (e) for lines: 15 16 17 20 21					N/A
d Add: Line 27a total and line 27b total					N/A
e Public support (line 27c total minus line 27d total)					N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)					N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					N/A %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

None

Part V Private School Questionnaire (See page 7 of the instructions.)**N/A****(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30	
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31	
If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)		
32 Does the organization maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d Copies of all material used by the organization or on its behalf to solicit contributions?	32d	
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)		
33 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?	33a	
b Admissions policies?	33b	
c Employment of faculty or administrative staff?	33c	
d Scholarships or other financial assistance?	33d	
e Educational policies?	33e	
f Use of facilities?	33f	
g Athletic programs?	33g	
h Other extracurricular activities?	33h	
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		
34 a Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b Has the organization's right to such aid ever been revoked or suspended?	34b	
If you answered "Yes" to either 34a or b, please explain using an attached statement.		
35 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	

Schedule A (Form 990 or 990-EZ) 2005

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)

N/A

(To be completed **ONLY** by an eligible organization that filed Form 5768)Check ☐ **a** if the organization belongs to an affiliated group. Check ☐ **b** if you checked "a" and "limited control" provisions apply.**Limits on Lobbying Expenditures**

(The term "expenditures" means amounts paid or incurred.)

	(a) Affiliated group totals	(b) To be completed for ALL electing organizations
	N/A	
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38 Total lobbying expenditures (add lines 36 and 37)	38	
39 Other exempt purpose expenditures	39	
40 Total exempt purpose expenditures (add lines 38 and 39)	40	
41 Lobbying nontaxable amount. Enter the amount from the following table -		
If the amount on line 40 is -		
Not over \$500,000	20% of the amount on line 40	
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	
Over \$17,000,000	\$1,000,000	
42 Grassroots nontaxable amount (enter 25% of line 41)	42	
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 11 of the instructions.)

	Lobbying Expenditures During 4-Year Averaging Period				N/A
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
45 Lobbying nontaxable amount					0.
46 Lobbying ceiling amount (150% of line 45(e))					0.
47 Total lobbying expenditures					0.
48 Grassroots nontaxable amount					0.
49 Grassroots ceiling amount (150% of line 48(e))					0.
50 Grassroots lobbying expenditures					0.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h.)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines c through h.)			0.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

- a** Transfers from the reporting organization to a noncharitable exempt organization of:

	Yes	No
51a(i)		X
a(ii)		X
b(i)		X
b(ii)		X
b(iii)		X
b(iv)		X
b(v)		X
b(vi)		X
c		X

- (ii) Other assets
- b Other transactions:
- (i) Sales or exchanges of assets with a noncharitable exempt organization
- (ii) Purchases of assets from a noncharitable exempt organization
- (iii) Rental of facilities, equipment, or other assets
- (iv) Reimbursement arrangements
- (v) Loans or loan guarantees
- (vi) Performance of services or membership or fundraising solicitations
- c Sharing of facilities, equipment, mailing lists, other assets, or paid employees
- d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:

N/A

[illegible]

- 52 a** Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

b If "Yes," complete the following schedule:

N/A

☐ Yes ☒ No[illegible]

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
	Machinery & Equipment											
1	Software	010198	SL	5.00	16	1,665.			1,665.	1,665.		0.
2	Printer and cable	052098	SL	5.00	16	421.			421.	421.		0.
3	iMac	030199	SL	5.00	16	1,417.			1,417.	1,417.		0.
4	iMac	122199	SL	5.00	16	994.			994.	994.		0.
5	Giftmaker Pro	071800	SL	5.00	16	1,450.			1,450.	1,281.		169.
6	Tape Back-up	121500	SL	5.00	16	814.			814.	666.		148.
7	iMac	123000	SL	5.00	16	600.			600.	480.		120.
8	Office equipment	123104	SL	5.00	16	10,266.			10,266.	1,520.		2,053.
9	Equipment and furniture	123105	SL	5.00	16	2,900.			2,900.			277.
	* 990 Page 2 Total											
	Machinery & Equipment					20,527.		0.	20,527.	8,444.	0.	2,767.
	* Grand Total 990 Page 2 Depr					20,527.		0.	20,527.	8,444.	0.	2,767.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

Form 990	Gain (Loss) From Publicly Traded Securities	Statement	1
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Description	Gross Sales Price	Cost or Other Basis	Expense of Sale	Net Gain or (Loss)
Publicly traded securities	26,758.	26,787.	0.	<29.>
To Form 990, Part I, line 8	26,758.	26,787.	0.	<29.>

Form 990	Other Changes in Net Assets or Fund Balances	Statement	2
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Description	Amount
Prior year loan reported as income in error	<10,000.>
Total to Form 990, Part I, line 20	<10,000.>

Form 990	Other Expenses	Statement	3
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Description	(A) Total	(B) Program Services	(C) Management and General	(D) Fundraising
Outside services	95,271.	60,483.		34,788.
Bank charges and fees	2,465.		2,465.	
Consultants	98,346.	98,346.		
Credit card fees	12,862.		12,862.	
Event expense	117,123.	87,842.		29,281.
Hospitality	3,042.	1,521.	304.	1,217.
Miscellaneous	2,215.		2,215.	
Payroll services	1,683.		1,683.	
Training	11,408.	11,408.		
Workers compensation insurance	4,450.	2,270.	1,735.	445.
Program: INIYA	1,200.	1,200.		
Program: Trips	68,611.	68,611.		
Total to Fm 990, ln 43	418,676.	331,681.	21,264.	65,731.

Form 990

Cash Grants and Allocations

Statement 4

Classification	Donee's Name	Donee's Address	Donee's Relationship	Amount
	Fundacion Pachamama	Gonzalo Serrano 345 y 6 de Diciembre, Quito,	Sister foundation	512,184.
	U'wa Defense Project	Presidio Bldg 1009 Ground Floor, San Francisco CA 94129	None	34,966.
Total Included on Form 990, Part II, line 22				547,150.

Form 990	Noncash Grants and Allocations	Statement	5
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Class of Activity:

Donee's Name

Fundacion Pachamama

Donee's Address

Gonzalo Serrano 345 y 6 de
Diciembre, Quito, Ecuador

Relationship of Donee

Sister foundation

Description of Property

Used computer
equipment, aeroplane

Date of Gift

Various

Method Used to Determine Book Value

Depreciated value

Method Used to Determine Fair Market Value

Same

Book Value

25,920.

Amount Given

25,920.

Total Included on Form 990, Part II, line 22

25,920.

Form 990	Statement of Organization's Primary Exempt Purpose Part III	Statement	6
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Explanation

Preservation of tropical rainforests and cultures, and public environmental
education

Form 990	Depreciation of Assets Not Held for Investment	Statement	7
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Description	Cost or Other Basis	Accumulated Depreciation	Book Value
Software	1,665.	1,665.	0.
Printer and cable	421.	421.	0.
IMac	1,417.	1,417.	0.
IMac	994.	994.	0.
Giftmaker Pro	1,450.	1,450.	0.
Tape Back-up	814.	814.	0.
IMac	600.	600.	0.

The Pachamama Alliance			94-3249793
Office equipment	10,266.	3,573.	6,693.
Equipment and furniture	2,900.	277.	2,623.
Total to Form 990, Part IV, ln 57	20,527.	11,211.	9,316.

Form 990	Loans Payable to Officer's, Director's, Etc.	Statement	8
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<u>Lender's Name and Title</u>	<u>Original Loan Amount</u>
Basil Twist, President	10,000.

<u>Date of Note</u>	<u>Maturity Date</u>	<u>Terms of Repayment</u>	<u>Interest Rate</u>
12/31/04		None	.00%

<u>Security Provided by Borrower</u>	<u>Purpose of Loan</u>
None	Cash flows

<u>Description of Consideration</u>	<u>FMV of Consideration</u>	<u>Balance Due</u>
None	0.	10,000.

Total to Form 990, Part IV, line 63, Column B	10,000.
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Form 990

Part V - List of Officers, Directors,
Trustees and Key Employees

Statement 9

Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Expense Contrib Account	
Tracy Apple Presidio Bldg 1009 San Francisco, CA 94129	Director 30.	50,600.	0.	0.
Ana Maria Murillo Presidio Bldg 1009 San Francisco, CA 94129	Program Director 40.	31,625.	0.	0.
Neal Rogin Presidio Bldg 1009 San Francisco, CA 94129	Director 30.	60,500.	0.	0.
David Tucker Presidio Bldg 1009 San Francisco, CA 94129	Exec Dir & Secretary 40.	62,667.	0.	0.
Bob Curtis Presidio Bldg 1009 San Francisco, CA 94129	Treasurer 1.	0.	0.	0.
Michael Olmstead Presidio Bldg 1009 San Francisco, CA 94129	Director 5.	7,046.	0.	0.
John Perkins Presidio Bldg 1009 San Francisco, CA 94129	Director 10.	0.	0.	0.
Gordon Starr Presidio Bldg 1009 San Francisco, CA 94129	Director 1.	0.	0.	0.
Basil R Twist, Jr Presidio Bldg 1009 San Francisco, CA 94129	President 30.	0.	0.	0.
Lynne Twist Presidio Bldg 1009 San Francisco, CA 94129	Director 10.	0.	0.	0.
Totals Included on Form 990, Part V		212,438.	0.	0.

Form 990

Explanation of Relationship
Part V-A, Line 75b

Statement 10

Individual's Name

Title or Role

Basil Twist

President

Individual's Name

Title or Role

Lynne Twist

Director

Explanation of Relationship

Married

THE PACHAMAMA ALLIANCE FORM 990
FED EID: 94-3249793
FORM 990

Part III, Statement of Program Service and Accomplishments

The organization's primary exempt purposes are the preservation of tropical rainforests and cultures, and public environmental education.

<u>Tropical Rainforest and Cultural Preservation</u>	Grants	Program Services
	\$572,610	\$1,242,842

The Pachamama Alliance ("Pachamama") is working in partnership with the Achuar, Shuar, Shiwiar, and Zapara people of the southern Amazon region in Ecuador and the Achuar of northern Amazon region of Peru. Pachamama's primary focus is on strengthening the indigenous people's ability to speak for, and represent their own interests. Pachamama has worked in close partnership with the Achuar people since its inception and since 2001 the work and partnership expanded to include the other indigenous groups in the region and the Achuar of Peru. During 2005, Pachamama provided direct assistance in the form of material aid (grants of funds and equipment) and technical assistance to support the indigenous group's efforts in preserving their territories and way of life. This work was carried out through Fundacion Pachamama, ("FP"), an Ecuadorian non-for-profit foundation that Pachamama established in 1997.

1. Funding was provided to the Achuar governing federation, FINAE, to cover the basic operating costs and overhead, the annual congress that provides a forum for the Achuar leaders to deliberate the major issues affecting their lives, and various activities in the fields of territory, health, communication, economic development and education. Technical assistance was provided for institutional development and capacity building with the federations and its leaders.
2. Pachamama provided funding and technical support the Achuar people to develop new by-laws and obtain an official decree from the government for an official recognition as the 'Achuar Nationality'. Technical assistance and funding was also provided for the demarcation and participatory mapping of 140,000 hectares of the Achuar territory and the design of a project to complete demarcation of the rest of the territory.
3. Pachamama funded and provided technical support for, in collaboration with Conservation International and the Achuar leadership, a series of participatory meetings to develop a strategy to implement a 'transfer plan' of Kapawi Ecolodge, an eco-tourism project running in Achuar territory since 1996. An Ecuadorian private company will run the project until 2011 at which point the Achuar will assume ownership. The transference plan aims to address all the issues that will make this process a success. The plan guarantees the Ecolodge's continued function with top quality standards. Funding covered 10 strategic meetings (transportation, food and other expenses).

4. Pachamama funded and provided technical support for the start-up of an on-site English language instruction program at Kapawi Ecolodge and in Kapawi village. The English program aims to bring a high quality of English education to the Achuar people in their rainforest home and facilitate their eco-tourism endeavors in the future.
5. Funding was provided to the Zápara governing federation, ONZAE, to cover the basic operating costs and overhead.
6. Funding was provided to the Shuar governing federation, FIPSE, to cover the basic operating costs and overhead. Together with support from other NGOs, Pachamama provided funding and technical assistance to FIPSE on legal issues associated with their land titling process.
7. Funding and technical support was provided to ONSHIPAE, the Shiwiar governing federation, to cover their administrative expenses, to complete their definition and recognition of the nationality's by-laws and complete mapping and demarcation of their territory.
8. Pachamama funded and provided technical support for, in collaboration with other non-governmental organizations (NGOs) and indigenous organizations, to "Comite Interfederacional" a growing alliance between the local indigenous organizations in the zone the development of an organizing strategy to protect the Achuar, Shuar, Zápara, and Shiwiar territory and strengthen constitutional rights. Funding covered strategic planning meetings (transportation, food and other expenses).
9. Pachamama funded and provided technical support for a series of training and exchange workshops to indigenous technicians on geographic information systems, demarcation, and mapping methodologies.
10. Pachamama provided funding to the Center for Social and Economic Rights (CDES) - an Ecuadorian NGO devoted to promoting economic, social and cultural rights, interdisciplinary research and grassroots advocacy - to provide legal assistance to all the grassroots federations Pachamama works in the Ecuadorian Amazon.
11. Pachamama provided funding to Racimos de Ungurahui - an Peruvian NGO devoted to promoting collective rights and grassroots advocacy - to provide legal assistance to all the Achuar grassroots federations in Peru.