#### PUBLIC DISCLOSURE COPY

Internal Revenue Service

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

OMB No. 1545-0047

Open to Public Inspection

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. A For the 2008 calendar year, or tax year beginning

<u>A</u>	For	the 2008 calendar year, or tax year beginning and endi	ng	
В	Check applic		D Employer ident	ification number
		dress label or print or The Pachamama Alliance		
F	Na	me type. Doing Business As		. 40 = 0.0
Ē	Init	ial	n/suite E Telephone numb	249793
Ē		min- Specific	•	
Ē		ended tions.		561-4522
Ē		plica-	G Gross receipts \$	3,167,752
		F Name and address of principal officer:Basil R Twist, Jr.	H(a) Is this a group for affiliates?	
		same as C above	H(b) Are all affiliates i	Yes X No
1	Tax-e	exempt status: x 501(c) ( 3 ) (insert no.) 4947(a)(1) or 527	i	
		site: www.pachamama.org	!	a list. (see instructions)
<u>K</u>	Type	of experience Corporation Trust Corporation	Year of formation: 1996	M State of legal domicile: CA
L <u>.</u>	~			
စ္ခ	1	Briefly describe the organization's mission or most significant activities: The mission	of The Pachamama	
nan		Alliance is: To preserve the Earth's tropical rainforests by		
Governance	2	Check this box if the organization discontinued its operations or disposed o	f more than 25% of its asse	ets.
යි	3	Number of voting members of the governing body (Part VI, line 1a)	3	
•ಶ ഗ	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	
<u>ë</u>	5	Total number of employees (Part V, line 2a)	5	
Activities &	6	Total grees unrelated business (estimate if necessary)	6	
¥	7a	o Telephone Tele		<u> </u>
	0	Net unrelated business taxable income from Form 990-T, line 34		
	8	Contributions and grants (Part VIII. line 11)	Prior Year	Current Year
Je .	9	Contributions and grants (Part VIII, line 1h)		
Revenue	10	Program service revenue (Part VIII, line 2g)	•	
æ	11	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,163	
	12	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
	13	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)  Grants and similar amounts paid (Part IX, column (A), lines 1-3)	3,771,455	
	14	Benefits paid to or for members (Part IX, column (A), line 4)	754,898,	1,048,406
co.	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		
Se		Professional fundraising fees (Part IX, column (A), lines 5-10)	693,727,	1,019,165.
Expenses	h	Total fundraising expanses (Part IX, column (A), lifte (Te)		
Ä	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		
	18	Total expenses Add lines 12.17 (must equal Dark IV asking (A) (5	1,005,402.	
	19	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)  Revenue less expenses. Subtract line 18 from line 12		3,578,138,
or es	13	Trevenue less expenses. Subtract line 16 from line 12	1,317,428,	<476,740,
Net Assets or   Fund Balances	20	Total assets (Part X, line 16)	Beginning of Year	End of Year
Ass Ba	21	Total liabilities (Part X, line 26)	2,616,338.	2,621,359,
E.E.	22	Net assets or fund balances. Subtract line 21 from line 20	96,700.	578,461,
	rt II	Signature Block	2,519,638.	2,042,898.
<b>*</b>		Under penalties of perjury, I declare that I have examine this return, including accompanying schedules and statem and complete. Declaration of the I regument that I find I is oused on all information of which preparer has any known	ents, and to the best of my knowled edge.	ge and belief, it is true, correct,
Sign		Signature of officer	Date	
Here	<b>3</b>	Basil R Twist, Jr., President	Date	
		Type or print name and title  Preparer's Date	Check if Prepare	ar's identifying number
Paid			self- (see ins	er's identifying number structions)
Prep	arer's	Firm's name (or The Buddhard	employed > x	
Use (	Only	yours if Sue Fujitani self-employed), 2145 Cooper #65	EIN ▶	
		address, and 3143 Geary #05		
Mar	the IF	Dan Francisco, CA 94116	Phone no. ► (4	15) 566-4619
iviay	ine it	RS discuss this return with the preparer shown above? (see instructions)	<u> </u>	X Yes No

	m 990 (2008) The Pachama	ma Allianc	e	94-32497	93	Page
Pa	art III Statement of Program Ser	vice Acco	mplishments (see instructions)			
1	Briefly describe the organization's missio	n:				
	The mission of The Pachamama A	lliance is:	To preserve the Earth's			
	tropical rainforests by empower					
	natural custodian, and to contr					
	vision of equality and sustains					
2	Did the organization undertake any signif			not listed on		
					Vec	x No
	If "Yes", describe these new services on				103	١٩٧
3	Did the organization cease conducting, o		cant changes in how it conducts, any r	orogram services?	Yes	v N
	If "Yes", describe these changes on Sche		part or angeo in moti it contacts, any p	orogram scrvices;	162	الكــا الاد
4	Describe the exempt purpose achieveme		f the organization's three largest progr	am equipos by avnongo		
	Section 501(c)(3) and 501(c)(4) organizati	one and secti	on 4947(a)(1) truste are required to rep	and services by expenses.		•
	allocations to others, the total expenses,					
	anocations to others, the total expenses,			ea.		
4a	(Codo: \((\( \)\)(Fymana)		nedule O for Continuation(s)			
44	(Code: ) (Expenses \$	•		1,048,406.)(Revenue\$		
	The organization's primary exem					
	tropical rainforests and cultur	es, and pu	<u>blic environmental education,</u>			
	Tropical Rainforest and Cultura	1 Preserva	tion			
	The Pachamama Alliance ("Pacham	ama") is w	orking in partnership with th	ie		
	Achuar, Shuar, Shiwiar, and Zap	ara people	of the southern Amazon region	on		
	in Ecuador and the Achuar of no					
	Pachamama's primary focus is on					
	ability to speak for, and repre					
	worked in close partnership wit					
	Since 2001, the work and partne					
4b	(Code: ) (Expenses \$	reitth expan		) (D		
	(Ελρείίου γ		including grants of \$	) (Revenue \$		
	•			-		
						· · · · · · · · · · · · · · · · · · ·
1c	(Code: ) (Expenses \$		including grants of ¢	\(\(\text{D}\) \(		
	(ελρείδες ψ		including grants of \$	) (Revenue \$		,
					· · · · · · · · · · · · · · · · · · ·	
					***************************************	
	Marie Company	*******				
	Other pregram services (D	L I. C.				
	Other program services. (Describe in Sched	*	_			
	_	ling grants of S	) (Revenue \$	)		
Δ	Total program service expenses > \$	2	D22 C26 (Must aqual Dart IV Line	05		

Form 990 (2008)

The Pachamama Alliance
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	ļ	х
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	ļ	ļ
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice			
	on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		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	ļ	х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
_	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; 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 hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	ļ	X
11	Did the organization report arr amount in Part X, lines 10, 12, 13, 15, or 25?			
	If "Yes," complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	Х	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was			
40	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Х	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	, , , , , , , , , , , , , , , , , , , ,	14a		Х
b	5 Santananing, backnood,			
45	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity			
40	located outside the United States? If "Yes," complete Schedule F, Part II	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
17	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17 18	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
19	Did the organization report more than \$15,000 total on Part VIII, line 9a? If "Yes," complete Schedule G, Part II	18		Х
20	Did the examination exercts and as mare hamitate 0.16 N/2 - 11 - 2 - 2 - 1 - 1 - 1 - 1	19		_X
21	Did the organization operate one of more hospitals? If "Yes," complete Schedule H  Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	20		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and III	21		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	22		X
24a		23		Х
10	last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K.			
	If "No", go to question 25	04=		
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		Х
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		•
Ĭ	any tax-exempt bonds?	240	İ	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	24u		<del></del>
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		v
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a	EUG		<u> X</u>
_	prior year? If "Yes," complete Schedule L, Part I	25b		v
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	200	+	<u>X</u>
-	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial			Λ
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		x

# Form 990 (2008) The Pachamama Alliance Part IV Checklist of Required Schedules (continued)

			res	NO
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other		<u> </u>	
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a	Х	
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		Х
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c	Х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes " complete Schedule R. Part VI	37		v

Form **990** (2008)

tart v Ctatemente negarang Ctrici in C i mings and Tax Compilation	Part V Statements Regarding	Other IRS Filings	and Tax Compliance
--	-----------------------------	-------------------	--------------------

					Yes	No		
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of							
	U.S. Information Returns. Enter -0- if not applicable	1a		17				
b		1b		0				
c	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eporta	ble gaming					
	(gambling) winnings to prize winners?	;	*************************	1c	Х			
<b>2</b> a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,							
	filed for the calendar year ending with or within the year covered by this return	2a		19				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	rns?	*************************	2b	х			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see	instruc	ctions)		***************************************			
За	3					Х		
b	, , , , , , , , , , , , , , , , , , , ,			3b				
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other		•					
	financial account in a foreign country (such as a bank account, securities account, or other financial	accour	nt)?	4a		х		
b	If "Yes," enter the name of the foreign country:							
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign	Bank a	nd			ĺ		
	Financial Accounts.							
5a	• • • • • • • • • • • • • • • • • • • •							
b	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?							
¢	c If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited							
	Tax Shelter Transaction?							
6a	,			6a		X		
b	, , , , , , , , , , , , , , , , , , , ,		•					
	were not tax deductible?			6b	ļ			
7	Organizations that may receive deductible contributions under section 170(c).							
а	J 1 J							
b	b If "Yes," did the organization notify the donor of the value of the goods or services provided?							
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was							
	to file Form 8282?			7c		X		
		7d	. 0	-				
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p			_				
	benefit contract?		••••••	7e		_X		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contri-				-	X		
g h	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C			7g		<u>X</u>		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sect			7h		·X		
o	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization.							
	excess business holdings at any time during the year?	-	·					
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		*********************	8				
а	Did the organization make any taxable distributions under section 4966?			9a				
b				9b	-			
10								
а		10a						
b		10b		1 1				
11	Section 501(c)(12) organizations. Enter: N/A	100						
· ·		11a						
	Gross income from other sources (Do not net amounts due or paid to other sources against		<del></del>	1				
~		11b						
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form			12a				
	A STATE OF THE STA	12b						

Form 990 (2008) The Pachamama Alliance 94-3249793 Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Se	ction A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstance	es,		
	processes, or changes in Schedule O. See instructions.			
	a Enter the number of voting members of the governing body  1a	9		
t a		6		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
_	officer, director, trustee, or key employee?	2	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of efficient direct supervisions of efficients direct supervisions.			
	of officers, directors or trustees, or key employees to a management company or other person?			X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		-	X
5	Did the organization become aware during the year of a material diversion of the organization's assets?		-	X
6	Does the organization have members or stockholders?	6	+	X
7a	o more than the man and the ma	_		
<b>h</b>	governing body?  Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7a		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	<u>7b</u>	+	X
0	by the following:			
а				
b		8a	X	<del> </del>
9a		8b	X	ļ.,
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates	9a	-	X
J	and branches to ensure their operations are consistent with those of the organization?	š,		ĺ
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must	<u>9b</u>	-	
	describe in Schedule O the process, if any, the organization uses to review the Form 990	1		
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	10	Х	
• • •	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			
Sec	etion B. Policies	11	<u> </u>	<u> </u>
			Yes	NI.
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	No
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	IZA	^	
	to conflicts?	12b	x	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120	Δ	*******
	in Schedule O how this is done	12c	x	
13	Does the organization have a written whistleblower policy?	13	^	Х
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent	13		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision:			
а	The organization's CEO, Executive Director, or top management official?	15a	х	
	Other officers or key employees of the organization?		X	
	Describe the process in Schedule O. (see instructions)	100	-4	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	1111		
	taxable entity during the year?	16a		x
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation	on loa		
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sect	tion C. Disclosure		L.	
17	List the states with which a copy of this Form 990 is required to be filed ▶cA			
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) a	vailable for		
	public inspection. Indicate how you make these available. Check all that apply.			
	X Own website X Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest p	olicy and fine	nciel	
	statements available to the public.	moy, and find	iviai	
	State the name, physical address, and telephone number of the person who possesses the books and records of the o	rganization:		
	David D major To (ASE) ECC ASEO	•		
	Presidio Building 1009, San Francisco, CA 94129			

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

<b>(A)</b> Name and Title	( <b>B)</b> Average hours per	(C) Position (check all that apply)					ply)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	week	. 151		Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
Tracy Apple										
Director	30.00	х						57,500,	0.	0
Michael Olmstead										
Director	5.00	Х						7,000.	0.	0
John Perkins										
Director	1,00	х						0.	0.	0
Neal Rogin										
Director	30.00	x						75,250	0.	
Gordon Starr										
Director	1.00	х						0.	0.	0
Lynne Twist										
Director	10.00	х						0.	0 -	0
Tammy White										
Director	1.00	х						0.	0.	0
Bob Curtis										
Treasurer	1.00	Х		Х				0.	0.	0
Basil R Twist, Jr										
President	30,00	Х		Х				0.	0.	0.
Patricia Usner										
Secretary	40,00			Х				76,417,	0.	0,
David Tucker										
Executive Director	40.00				Х			76,250.	0,	0,
•										

	(A) Name and title	(B) Average	(0		Pos			.1. A	(D) Reportable	(E) Reportable		(F) Estima	ated
		hours per week	Individual trustee or director	Institutional trustee		Key employee	Highest compensated ad a complex compensated		compensation from the organization (W-2/1099-MISC)	compensatio from related organization (W-2/1099-MIS	l s	amour othe compens from t organizand relations	er sation the ation ated
									,				
						on the state of th							
	•												•
2 Tot	al number of individuals (including those appensation from the organization		ceive	ed m	ore	thai			292, 417, 000 in reportable		_ O.  <b>▶</b>		0_,
	the organization list any <b>former</b> officer, 1a? If "Yes," complete Schedule J for s			-					ighest compensated en	•		Yes	No
4 For	any individual listed on line 1a, is the sull related organizations greater than \$150	ım of reportabl 0,000? <i>If</i> "Yes,	e co	mpe mple	nsa te S	tion Sche	and adule	oth J fo	er compensation from tor such individual	he organization		4	х
the Section	any person listed on line 1a receive or a organization? If "Yes," complete Schede B. Independent Contractors	ule J for such p	oers	on				*****				5	Ìх
	nplete this table for your five highest col organization.	mpensated inc	lepe	nde	nt co	ontra	acto	rs th	nat received more than s	\$100,000 of comp	pensa		
	(A) Name and business	address							(B) Description of se	ervices	Ce	(C) ompensatio	on
				_									
						•••••							·
	al number of independent contractors (in n the organization <b>▶</b>	ncluding those	in 1	) wh	o red	ceiv	ed n	nore	than \$100,000 in comp	ensation		- 000	

3,101,398.

453.739

Total Revenue. Add lines th, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e

<4 987.

# Form 990 (2008) The Pachamama Alliance Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	از)نا) Section عداد Section عداد المرازع الم		ions must complete al not required to comple		(D).
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	14,285.	14,285.		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16	1,034,121.	1,034,121.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	292,417.	254,121.	21,063,	17,233,
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	604,536.	424,319,	86,538.	93,679,
8	Pension plan contributions (include section 401(k)		j		
	and section 403(b) employer contributions)				
9	Other employee benefits	56,500.	40,279.	8,131.	8,090.
10	Payroll taxes	65,712.	46,846.	9.457.	9 409
11	Fees for services (non-employees):				
а	Management				
b	Legal	26,030.		26,030.	
С	Accounting				
d					
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	750,907.	622.848.	84,515.	43,544.
12	Advertising and promotion				
13	Office expenses	135,759.	61,705.	63,863.	10,191.
14	Information technology .	11.724.	9,915.	1,809.	
15	Royalties		,		
16	Occupancy	68,092.	38,910.	17,023.	12,159.
17	Travel	49.810.	44.580.	1,719.	3,511.
18	Payments of travel or entertainment expenses			1,723	5,544.
	for any federal, state, or local public officials		Ì		
19	Conferences, conventions, and meetings				
20	Interest	12,717.		12,717.	
21	Payments to affiliates	12,/1/		12,111,	
22	Depreciation, depletion, and amortization	6,709.		6,709.	
23	Insurance	5.046.	810.	3,983.	253,
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)	3,040.	010,	3,303,	233,
а	Accomodation & facility	303.545.	287.497.	6,127,	9,921.
b	Meals & Catering	96,844.	50,407.	17,952.	28,485
С	Bad debt	25,000.		25,000.	
d	Training	5.375.	2,993.	2,382.	
e		-,,-			
f	All other expenses	13,009.		13,009,	
25	Total functional expenses. Add lines 1 through 24f	3,578,138.	2,933,636.	408.027.	236.475.
26	Joint Costs. Check here Jif following	3,370,130.	2,000,000,	200,047	430,413,
20	SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined			***************************************	
	educational campaign and fundraising solicitation				

Part X Balance Sheet (A) (B) Beginning of year End of year 1 Cash - non-interest-bearing 221 417 359 421. Savings and temporary cash investments 2 2 27,407 5.014. Pledges and grants receivable, net 3 2,287,779 3 2,211,102. Accounts receivable, net 4 4 143. Receivables from current and former officers, directors, trustees, key 5 employees, or other related parties. Complete Part II of Schedule L 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L ß Notes and loans receivable, net 7 26,994 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 8,109 9 24,116. 10a Land, buildings, and equipment: cost basis 10a **b** Less: accumulated depreciation. Complete Part VI of Schedule D 10b 27,012 20.480 10c 15,248, Investments - publicly traded securities 11 11 2,515. Investments - other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13 14 Intangible assets 14 Other assets. See Part IV, line 11 15 3.800 15 3,800. 16 Total assets. Add lines 1 through 15 (must equal line 34) 2,616,338, 16 2,621,359, Accounts payable and accrued expenses ..... 17 17 54,904. 120,095, 18 Grants payable 18 Deferred revenue 19 19 41.796 58.366. Tax-exempt bond liabilities 20 20 Escrow account liability. Complete Part IV of Schedule D 21 21 Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 400,000. Unsecured notes and loans payable 24 24 Other liabilities. Complete Part X of Schedule D 25 25 26 Total liabilities. Add lines 17 through 25 96,700 26 578,461. Organizations that follow SFAS 117, check here \( \times \) and complete lines 27 through 29, and lines 33 and 34. Vet Assets or Fund Balances 27 Unrestricted net assets \_\_\_\_\_ 296,244 27 <175,100.> Temporarily restricted net assets 28 2,223,394. 28 2,217,998, 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 32 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 33 2,519,638, 2,042,898. Total liabilities and net assets/fund balances 2 616 338 2,621,359. Part XI **Financial Statements and Reporting** Yes No Accounting method used to prepare the Form 990: \_\_\_\_ Cash \_x\_ Accrual \_\_\_\_ Other 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a b Were the organization's financial statements audited by an independent accountant? 2b c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c Х 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? За If "Yes," did the organization undergo the required audit or audits?

#### **SCHEDULE A**

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

**Public Charity Status and Public Support** To be completed by all section 501(c)(3) organizations and section 4947(a)(1)

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

Inspection

Employer identification number

OMB No. 1545-0047

Name of the organization

nonexempt charitable trusts.

The Pachamama Alliance

Reason for Public Charity Status (All organizations must complete this part.) (see instructions) 94-3249793 Part I The organization is not a private foundation because it is: (Please check only one organization.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.) A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete the Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or 11 more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. . **b** Type II c \_\_\_\_ Type III - Functionally integrated Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III f supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes Nο the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the organizations the organization supports. h (iii) Type of (i) Name of supported (ii) EIN (iv) Is the organization (v) Did you notify the (vi) Is the (vii) Amount of organization in col. (i) listed in your organization in col. organization in col. organization support (described on lines 1-9 (i) organized in the U.S.? governing document? (i) of your support? above or IRC section (see instructions)) Yes No Yes No Yes Total LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule A (Form 990 or 990-EZ) 2008

Schedule A (Form 990 or 990-EZ) 2008 The Pachamama Alliance 94-3249793

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Se	ction A. Public Support						
Ca	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and				•		
	membership fees received. (Do not						
	include any "unusual grants.")	1,161,971.	1,396,127.	1,751,212.	3,502,370.	2,652,646.	10,464,326,
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		ĺ				
	the organization without charge		- FEFFE				
4	Total. Add lines 1 - 3	1,161,971.	1,396,127.	1,751,212.	3,502,370.	2,652,646.	10,464,326.
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,	T- OCI - OCI				A CONTROL OF THE CONT	
	column (f)						281 417.
6	Public Support. Subtract line 5 from line 4.						10 182 909
Se	ction B. Total Support						20,202,
Cal	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4	1,161,971,	1,396,127.	1,751,212.	3,502,370.	2,652,646,	10,464,326,
8	Gross income from interest,						
	dividends, payments received on	Ì					
	securities loans, rents, royalties						
	and income from similar sources	595.	16.	82.	2,163.	7.	2,863.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on			İ			
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						10,467,189.
12	Gross receipts from related activities, e	etc. (see instruction	ns)			12	1,116,592.
13	First five years. If the Form 990 is for t	the organization's f	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3)	
	organization, check this box and stop	here				••••	<b></b>
	tion C. Computation of Public			***			
14	Public support percentage for 2008 (lin	ne 6, column (f) divi	ded by line 11, col	umn (f))		14	97.28 %
	Public support percentage from 2007 S					15	96.89 %
	33 1/3% support test - 2008. If the org						
	stop here. The organization qualifies as	s a publicly suppor	ted organization			*************************	<b>▶</b> x
b	33 1/3% support test - 2007. If the org	ganization did not d	check a box on line	13 or 16a, and lin	e 15 is 33 1/3% c	r more, check this	box
	and <b>stop here.</b> The organization qualifi	es as a publicly su	pported organizati	on	***************************************		<b>&gt;</b>
17a	10% -facts-and-circumstances test -	- <b>2008.</b> If the organ	ization did not che	eck a box on line 10	3, 16a, or 16b, and	d line 14 is 10% or	more,
	and if the organization meets the "facts						
	meets the "facts-and-circumstances" te						
	10% -facts-and-circumstances test -						
	more, and if the organization meets the						
	organization meets the "facts-and-circu						<b></b>
18	Private foundation. If the organization	did not check a bo	x on line 13, 16a,	16b, 17a, or 17b, c	heck this box and	see instructions	<b>&gt;</b>

Sch Pa	edule A (Form 990 or 990-EZ) 2008 art III   Support Schedule for (	Organizations	Described in	Section 509(a	) <b>(2)</b> (Complete on	lv if you checked the b	Page 3
Se	ction A. Public Support						
Cal	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(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 organization's tax-exempt purpose						
3	Gross receipts from activities that						
	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 - 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 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
С	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)						
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6				<b>.</b>		10.533
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part IV.)				T-1177.11	<del> </del>	
	First five years. If the Form 990 is for t	he organization's	first second third	fourth or fifth ta	y year as a sectio	n 501(a)(3) arganize	tion.
	tion C. Computation of Public	Support Per	centage		********************		
	Public support percentage for 2008 (lin			olumn (fl)		15	•
16	Public support percentage from 2007 S	Schedule A. Part I	V-∆ line 27a	Januar (1))			<u>%</u>
Sect	tion D. Computation of Invest	ment Income	Percentage			10	%
	nvestment income percentage for 200	····		13 column (ft)		17	
18	nvestment income percentage from 20	M7 Schadula A	Part IVA line 27h	; 13, column (i)) .		18	<u>%</u>
	33 1/3% support tests - 2008, if the o						%
	nore than 33 1/3%, check this box and 3.1/3%, support tests - 2007. If the o						
	33 1/3% support tests - 2007. If the or						
	ne 18 is not more than 33 1/3%, check Private foundation. If the organization						
Г	TITALE TOURIGINATION, IL LITE OF GARIZALION	GIG HOL CHECK & D	ox on ine 14, 19a,	OF TOD, CHECK (NI	s nox and see ins		or 990-E7\ 2009

## Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Financial Statements**

Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008
Open to Public Inspection

Name of the organization Employer identification number The Pachamama Alliance 94-3249793 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year \_\_\_\_\_ Aggregate contributions to (during year) 2 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year a Total number of conservation easements b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06 \_\_\_\_\_\_ Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable Number of states where property subject to conservation easement is located ▶ 4 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year > \$ 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

		mama Alliance					4-3249		[	Page 2
Pa	art III Organizations Maintaining	Collections of A	rt, Historical	Treasures	, or Oth	ner Simila	ır Asse	ets (cor	ntinue	d)
3	Using the organization's accession and other	ner records, check an	y of the following	that are a sigi	nificant u	se of its colle	ection ite	ems (che	eck all	i
	that apply):									
ē		•	<del></del>	exchange pro						
t	, , , , , , , , , , , , , , , , , , , ,	•	e Other							
c										
4	Provide a description of the organization's	collections and expla	in how they furth	er the organiza	ation's ex	empt purpo:	se in Par	t XIV.		
5	During the year, did the organization solicit									
	to be sold to raise funds rather than to be	maintained as part of	the organization's	s collection?				Yes		No
Pa	rt IV Trust, Escrow and Custodi	al Arrangements	Complete if org	anization ans	wered "Y	es" to Form	990, Pai	rt IV, line	9, or	
	reported an amount on Form 990, F							·····		
1a	Is the organization an agent, trustee, custo							_		
	on Form 990, Part X?						🖳	Yes		No
b	If "Yes," explain the arrangement in Part XI	V and complete the fo	ollowing table:							
								Amour	nt	
С			• • • • • • • • • • • • • • • • • • • •			1c				
d	Additions during the year									
е	Distributions during the year									
f	f Ending balance									
2a	9	Form 990, Part X, line	21?				L	」 Yes		No
	If "Yes," explain the arrangement in Part XI					- 1111111111111111111111111111111111111				
Pa	rt V Endowment Funds. Complete	if organization answe	ered "Yes" to Fon			1				
		(a) Current year	(b) Prior year	(c) Two ye	ars back	(d) Three year	ars back	<b>(e)</b> Fou	r years	s back
1a	• • • • • • • • • • • • • • • • • • • •									
b	Contributions									
С	Investment earnings or losses									
d	Grants or scholarships									·
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance		····							
2	Provide the estimated percentage of the year		ıs:							
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С	Term endowment	_%								
3a	Are there endowment funds not in the poss	ession of the organiza	ation that are held	and administ	ered for t	he organizat	tion			
	by:								Yes	No
	(i) unrelated organizations	*******************************	• • • • • • • • • • • • • • • • • • • •					3a(i)		
	(ii) related organizations	******************************						3a(ii)		
b	If "Yes" to 3a(ii), are the related organization	s listed as required or	n Schedule R?					3b		
4	Describe in Part XIV the intended uses of the	e organization's endo	wment funds.							
Par	t VI Investments - Land, Buildin	gs, and Equipme	ent. See Form 99	00, Part X, line	10.					
	Description of investment	(a) Cost or ot basis (investm		st or other s (other)	(c) D	epreciation		(d) Bool	< value	e
1a	Land									
	Buildings					·				
	Leasehold improvements									
	Equipment			42,260,		27,01	2		15	248.
	Other					2,,01				
	. Add lines 1a-1e. (Column (d) should equal Fo		nn (B), line 10(c).)			h	<b>-</b>		15	248.

Total. (Column (b) should equal Form 990, Part X, col (B) line 25.). ▶ In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

	art XI Reconciliation of Change in Net Assets from Form 9	200 to Financia	1.01-1-	94-3249	793 Page
1			T		
2					3,101,398
	Total expenses (Form 990, Part IX, column (A), line 25)				3,578,138
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		<476,740
4	Net unrealized gains (losses) on investments		4		
5	Donated services and use of facilities		5		
6	Investment expenses		6		
7	Prior period adjustments	***************************************	7		
8	Other (Describe in Part XIV)	***************************************	8		
9	Total adjustments (net). Add lines 4-8		9		0
Pa	rt XII Reconciliation of Revenue per Audited Financial Sta	19 Stemente With	Boyonus par	Dotum	<476,740
1	Table				
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		***************************************	. 1	3,106,392
a		10-1			
b	B and the second			$\dashv$	
c	D	2b		-	
d	0.1 (m) 11 1 m 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1		-	
				-	
e	•		••••••	2e	0
3	Subtract line 2e from line 1	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	. 3	3,106,392
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		$\dashv$	
b	Other (Describe in Part XIV)		<4,994	<del></del>	
	Add lines 4a and 4b			4c	<4,994
Pa	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 1 rt XIII Reconciliation of Expenses per Audited Financial States	2.)	Evanasa	5	3,101,398
1					
2	Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:			1	3,583,132
		1 - 1			
a	Donated services and use of facilities			-	
b	Prior year adjustments	2b		_	
C	Losses reported on Form 990, Part IX, line 25	2c		_	
d	Other (Describe in Part XIV)		4,994		
	Add lines 2a through 2d				4,994
3	Subtract line 2e from line 1			3	3,578,138,
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		_	
	Other (Describe in Part XIV)	4b			
	Add lines 4a and 4b			4c	0.
<u>5</u>	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line	18.)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	5	3,578,138.
	t XIV Supplemental Information				
Comp	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9;	Part III, lines 1a and	4; Part IV, lines	1b and 2b; P	art V, line 4; Part
X; Pa	rt XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.				
art	XII, Line 4b - Other Adjustments:				
Recla	assification of realized loss				
art	XIII, Line 2d - Other Adjustments:				
anl-	esification of realized loss				
(EC16	assification of realized loss				

#### Schedule F (Form 990)

### Statement of Activities Outside the United States

► Attach to Form 990. Complete if the organization answered "Yes" to

OMB No. 1545-0047 Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

Form 990, Part IV, line 14b, line 15, or line 16.

The Pachamama Alliance 94-3249793 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the \_ No 2 For grantmakers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States. Activities per Region. (Use Schedule F-1 (Form 990) if additional space is needed.) (a) Region (b) Number of (c) Number of (d) Activities conducted in region (e) If activity listed in (d) (f) Total offices employees or (by type) (i.e., fundraising, is a program service, expenditures in the region agents in program services, grants to describe specific type in region region recipients located in the region) of service(s) in region Ecuador Grantmaking 1,013,121. Grantmaking 21,000. 1.034.121.

(i) Method of valuation (book, FMV, appraisal, other) Page 2 Schedule F (Form 990) 2008 FMV Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any equipment, flight 392,295, expenses, Achuar (h) Description of non-cash assistance suits, travel Computer (g) Amount of 0 non-cash assistance Enter total number of organizations that are recognized as charities by the foreign country or for which the grantee or counsel has provided a 94-3249793 of cash grant | cash disbursement (f) Manner of 21,000 check 620,826,Check (e) Amount recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 (d) Purpose of General Support General Support grant Use Schedule F-1 (Form 990) if additional space is needed. The Pachamama Alliance (c) Region Scuador Enter total number of other organizations or entities Peru (b) IRS code section and EIN (if applicable) section 501(c)(3) equivalency letter Schedule F (Form 990) 2008 (a) Name of organization Part II Q

Schedule F (Form 990) 2008

The Pachamama Alliance

Page 3

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed.

Part III

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

Schedule F (Form 990) 2008

Schedule F (Form 990) 2008 The Pachamama Alliance	94-3249793	Page 4
Part IV Supplemental Information		
Complete this part to provide the information required by Part I, line 2, and any other additional info	ormation.	
Schedule F, Part I, Line 2: The Pachamama Alliance Board President, Basil		
Twist, Jr. spent almost the entire 2008 year living and working in		
Ecaudor, He collected reports from grant recipients, attended meetings		
and conferences, and spent significant time with key administrators. He		
and conferences, and spene significant time with key administrators, ne		
also attended Board meetings in San Francisco to report back on fund		
disc accended board meetings in San Francisco to report back on fund		
usage to staff and other Board members.		
usage to start and other board members.		
		•
1		
		•

SCHEDULE I . (Form 990)		Grants and	rants and Other Assistance to Organizations,	e to Organizations	ń		OMB No. 1545-0047
		Govern	Governments, and Individuals in the U.S.	duals in the U.S.			2008
Department of the Treasury Internal Revenue Service	▲ Com	► Complete if the organizatio	on answered "Yes," on F	," on Form 990, P. m 990.	ganization answered "Yes," on Form 990, Part IV, lines 21 or 22.  Attach to Form 990.		Open to Public
Name of the organization The Pachamama 111; and	0.000 to 1.1.1.00 to 0.000 to						Employer identification number
Part I General Information on Grants and Assistance	and Assistance						94-3249793
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance and the grants or assistance and the grants or assistance and the grants or assistance and the grants or assistance and the grant of the gr	s to substantiate th	ne amount of the grants	s or assistance, the	grantees' eligibility	for the grants or ass	color off bac coacisis	CON
	sistance?				Total Grants Of ass	ostance, and the select	\ \ \ \
》	rocedures for mon	itoring the use of grant	funds in the Unite	d States.			ON Sal TV
Fart II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	Governments an	d Organizations in th	e United States.	complete if the orga	anization answered "\	res" on Form 990, Part	IV, line 21, for any
recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	\$5,000. Check th	is box if no one recipier	nt received more th	ian \$5,000. Use Pa	irt IV and Schedule F	1 (Form 990) if addition	al space is needed
(a) Name and address of organization     or government	( <b>a)</b>	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Amazon Watch	Annual Property and Property an			17.000	other)		
221 Pine St, 4th Fl	·						
San Francisco, CA 94104	The state of the s	501(c)(3)	3,500	0	411700000		General Support
Community Environmental Legal							
Defense Fund - PO Box 2016 -							
Chambersburg, PA 17201		501(c)(3)	2,000.	0			Honorarium
					A CONTRACTOR OF THE CONTRACTOR	The state of the s	
Margaret Love/JungleMamas							
Berkeley, CA 94708	56-5863801	501(c)(3)	8,785.	0	***************************************		General Support
	7.70						
	11111						Andre de manuelle mande proprieta de la composition della composit
			•			•	
					The state of the s		
2 Enter total number of section 501(c)(3) and dovernment organizations	o taganayay bas	i de la companya de l	1100		p physical and the second seco	and the state of t	
3 Enter total number of other organizations	and government of	gamzauons					3
LHA For Privacy Act and Paperwork Reduction Act Notice see the Insta	iction Act Notice	see the Instructions	notions for Earn 000				0
•	·	See are men acutorio	IOI FUITH 350.				Schedule I (Form 990) 2008

#### SCHEDULE L (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

**Transactions with Interested Persons** 

► Attach to Form 990 or Form 990-EZ.

► To be completed by organizations that answered

"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-F7, Part V, lines 39a or 40b

OMB No. 1545-0047

2008 Open To Public

Name of the organization

or Form 990-EZ, Part V, lines 38a or 40b.

Employer identification number

	Pachamama								4-3249	793		
Part I Excess Benefit						-	• •					
To be completed b	y organizatior	ns that a	nswered "Yes	s" on Form 99	00, Part IV, line	25a or	25b, or	Form 99	0-EZ, Pa	rt V, line	40b.	
1 (a) Nama of di	accelificat acc				#-> D						(c) Cor	recte
(a) Name of di	squaimed per	SON		(b) Description of transaction						Yes	No	
2 Enter the amount of tax imp	osed on the	organiza	tion manager	s or disqualif	ied persons di	uring the	e vear ur	nder			1	
·		-	•	•		•	,		<b>&gt;</b> \$			
3 Enter the amount of tax, if a	nv. on line 2.	above. r	eimbursed by	v the organiza	ation				<b>&gt;</b> \$			
,,	,,,	, .		, 0. 90		**********			<b>•</b> •			
Part II Loans to and/o	r From In	tereste	d Persons	3.								
To be completed by	/ organization	s that ar	newered "Vec	" on Form 99	n Part IV line	26 or 1	Form 900	n.EZ Da	rt \/_lino	282		
To be completed by organizations that  (a) Name of interested (b) Loan to or fi			ı		t		ľ	) in		oroved	(a) \A	/ritten
person and purpose					- uue		ault?	by bo	ard or	agree		
	То	From	1			Yes	No	Yes	mmittee?	Yes No		
		1	·				163	NO	163	NO	165	140
								<b>†</b>				
									<u> </u>			
		ļ										
	-											
	1										-	
atal				<b>&gt;</b> \$								
otal Part III │ Grants or Assis	stance Bei	efiting	Intereste		*							
<del></del>		-	-			07						
To be completed by		s that an										
(a) Name of interested	person		(b) Relation		en interested ganization	person	and		<b>(c)</b> Amou מ	int of gra assista	ant or ty: nce	pe
				.,,,,,	Jan Hadrion,							
								_				
								-				
					·			-			<del> </del>	
Part IV   Business Trans	actions In	volvin	Interest	d Doroon								
······································		•	-									
To be completed by		ı						BC.				<del></del>
(a) Name of interested	person	(Ł		p between in		(c) Amo			Descripți		(e) Sha organiza	
		-	person and	d the organiza	ation	transac	ction	t	ransactio	on [	reven	
											Yes	No
chael Olmstead		Me	mber, Boar	d of Di			7,000	Pacha	mama c			X
acy Apple		Me	mber, Boar	d of Di			57,500	.Progr	am con			Х
al Rogin		Me	mber, Boar	d of Di			75,250	Progr	am/pro			Х
											T	
								<del></del>				

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

Schedule L (Form 990 or 990-EZ) 2008

#### SCHEDULE M (Form 990)

Department of the Treasury

### NonCash Contributions

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30.

Inspection

Employer identification number

OMB No. 1545-0047

Internal Revenue Service Name of the organization

Attach to Form 990.

The Pachamama Alliance 94-3249793 Part I Types of Property (a) (b) (d) (c) Check if Number of Revenues reported on Method of determining applicable contributions Form 990, Part VIII, line 1g revenues Art - Works of art Art - Historical treasures 2 3 Art - Fractional interests 4 Books and publications Clothing and household goods 5 Cars and other vehicles 6 Boats and planes 7 Intellectual property 8 Securities - Publicly traded ..... 9 59 730 FMV Securities - Closely held stock \_\_\_\_\_ 10 11 Securities - Partnership, LLC, or trust interests Securities - Miscellaneous 12 Qualified conservation contribution 13 (historic structures) Qualified conservation contribution (other) ... 14 Real estate - Residential 15 Real estate - Commercial 16 Real estate - Other 17 18 Collectibles 19 Food inventory Drugs and medical supplies ..... 20 21 Taxidermy Historical artifacts 22 23 Scientific specimens 24 Archeological artifacts ...... 25 26 Other 27 Other > 28 Other Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgment Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 30a Х b If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 X 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32a Х b If "Yes," describe in Part II. 33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II

(Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Information to Form 990**

➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Name of the organization	Employer identification number
The Pachamama Alliance	94-3249793
Form 990, Part I, Line 1, Description of Organization Mission:	
empowering the indiginous people who are its natural custodian, and	
To contribute to the creation of a new global vision of equality and	
sustainability for all.	
Form 990, Part III, Line 4a, Program Service Accomplishments	
indigenous groups in the region and the Achuar of Peru, During 2008,	
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 representative government, NAE,	
to cover the basic operating costs and overhead, the annual congress	
that provides a forum for the Achuar leaders to discuss 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 NAE and its leaders.	
2. Pachamama provided funding and technical support the Achuar people	
to implement new by-laws and increase accountability of its elected	
leaders. Technical assistance and funding was also provided to	
complete the demarcation and participatory mapping of 140,000 hectares	

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Information to Form 990**

➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Employer identification nu	mber
Pachamama Alliance 94-3249793	
ovided technical support for, in	•
ation International and the Achuar	
ticipatory meetings to develop a strategy to	
	-
of Kapawi Ecolodge, an eco-tourism project	
since 1996. Based on negotiations between	
an company that ran the project since 1996,	
ership of Kapawi in 2008. The transference	
e issues that will make this process a	
s the Ecolodge's continued function with top	
covered 10 strategic meetings	
ther expenses),	
vided technical support for the start-up of	
instruction program at Kapawi Ecolodge and	
ish program aims to bring a high quality of	<del></del>
huar people in their rainforest home and	
n endeavors in the future,	
osts and overhead.	
	<del></del>
the Shuar governing federation, FIPSE, to	
osts and overhead. Together with support	

(Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Information to Form 990**

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Name of the organization	Employer identification number
The Pachamama Alliance	94-3249793
FIPSE on legal issues associated with their land titling process.	
7. Funding and technical support was provided to SHINAE, the Shiwiar	
representative government, to cover their administrative expenses, to	
complete their definition and recognition of the nationality's by-laws	
	The state of the s
and complete mapping and demarcation of their territory.	
8. Pachamama funded and provided technical support, in collaboration	
with other non-governmental organizations (NGOs) and indigenous	
organizations, to two regional networks - the Inter-federational	
Committee and the Alliance of Ancestral Peoples in Resistance (APAR) -	
two growing alliances among the local indigenous organizations in the	
South Central Ecuadorian Amazon, APAR is the technical branch of the	
more political Inter-Federational Committee, both of which are focused	
on organizing a strategy to protect the Achuar, Shuar, Zapara, and	
Shiwiar territory and strengthen constitutional rights of indigenous	
Shiwial territory and Strengthen constitutional rights of indigenous	
peoples, Funding covered strategic planning meetings (transportation,	
food and other expenses).	
•	
9. Pachamama funded and provided technical support for AmazonGISnet,	
another regional network focused on training and sharing experiences	
among indigenous technicians on geographic information systems,	
demarcation, and mapping methodologies, as a strategy for more	
effective territorial defense in the Amazon.	
10. Pachamama funded and provided technical support for the first-ever	

(Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Information to Form 990**

Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information. 2008
Open to Public Inspection

Name of the organization Employer identification number The Pachamama Alliance 94-3249793 Binational Congress of the Binational Government of Achuar Peoples from Ecuador and Peru 11. Pachamama funded and spear-headed the "Green Plan' - a political and technical proposal to establish an alternative development model for Ecuador that would decrease the country's dependence on oil strengthen and respect indigenous peoples' constitutional rights and protect the South Central Ecuadorian Amazon for sustainable development. Funds covered proposal development, advocacy, and publications. 12. Pachamama provided funding and technical support to the national indigenous movement, through the CONAIE, ECUARUNARI, and CONFINAE, with the objective of consolidating the Movement's position on key issues related to territory, collective rights, and indigenous governance, as well as strengthening Andean-Amazonian relations within the Movement. 13. 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. 14. 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

### **SCHEDULE 0**

(Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Information to Form 990**

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

The Pachamama Alliance	Employer identification number 94-3249793
Peru.	
Awakening the Dreamer Program	
In addition to work in Ecuador and Peru, The Pachamama Alliance's	
programmatic work also focuses on the root causes that are driving the	
destruction of the rainforests around the world. Since 2005, our work	
has expanded so that we are also focusing our efforts in the United	
States and other industrialized nations, to effectively address the	
ultimate root cause of this environmental degradation: the current	
worldview that has us destroying the environment with little attention	
to the long-term consequences. The centerpiece of the program is a	
day-long Symposium - a profound inquiry into the assumptions and	
beliefs that allow citizens of the modern world to continue acting and	
living in a way that is unsustainable. This is not just an educational	
session, however, Rather, the Symposium is the entryway into the fuller	
vehicle of the Awakening the Dreamer Initiative, and it is an inquiry	
into the topics of sustainability, spiritual fulfillment and social	
justice, and how these issues interrelate.	
Using video clips from some of the world's most respected thinkers,	
along with inspiring short films, leading edge information and dynamic	
group interactions, the Symposium allows participants to gain a new	
insight into the very nature of our time, and the opportunity we have	
to shape and impact the direction of our world with our everyday	
choices and action. The aim of the Symposium is not merely to learn	

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Information to Form 990**

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Name of the organization .  The Pachamama Alliance	Employer identification number 94-3249793
	J
more about the world, but to grapple and come to grips with the very	
assumptions that underlie the way we ourselves see the world and our	
place in it, and with what each of us can do - both individually and	And the second s
cooperatively - to move the world in this new direction.	
The Symposium is designed to leave people actively engaged in changing	
the direction of society, starting with their own worldview and their	
lives. They find themselves in what Martha Graham has called a state of	
"blessed unrest." At the same time that they see clearly the impending	
crisis and it origins in their own desires, they see new possibilities	
for taking action.	
Since the Initiative was launched in March 2005, the number of people	
being trained to facilitate the symposium, and the number of people	
attending symposiums, has expanded exponentially. Symposiums are	
offered in the United States, Europe, Australia and Asia, with more	
cities and countries added regularly. Symposiums are presented to a	
wide range of groups and people, including business leaders, students	
on college campuses, church groups, community centers and people's	
homes, to name a few.	
Form 990, Part VI, Section A, line 2: Board President Basil Twist, Jr.	
and Director Lynne Twist are married.	
Form 990, Part VI, Section A, line 10: The form 990 is presented and	
reviewed at a board meeting prior to filing.	

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Information to Form 990**

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Name of the organization	Employer identification number
The Pachamama Alliance	94-3249793
Form 990, Part VI, Section B, Line 12c: The issue is looked at at each	
Board meeting.	
•	
Form 990, Part VI, Section B, Line 15: Compensation is determined through	•
analysis of survey data collected from online professional resources and	
other organizations of similar size, budget, mission, and with comparable	
geographies/demographics, A study of the overall percentage of the position	- William - Will
salary is compared against the balance of the company payroll.	
Form 990, Part VI, Section C, Line 19: The organization's financial	
statements are available on its web site.	
Sch L, Part IV, Business Transactions Involving Interested Persons:	
(a) Name of Person: Michael Olmstead	
(b) Relationship Between Interested Person and Organization:	
Member, Board of Directors	
(c) Amount of Transaction \$ 7000.	
(d) Description of Transaction: Pachamama contracted with the Director's	
company, e2k, for creative development, production coordination, staff	
and on-site direction.	
(e) Sharing of Organization Revenues? = No	
(a) Name of Person: Tracy Apple	
(b) Relationship Between Interested Person and Organization:	
Member, Board of Directors	

#### **SCHEDULE 0**

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Information to Form 990**

➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Name of the organization	Employer identification number
The Pachamama Alliance	94-3249793
(c) Amount of Transaction \$ 57500.	
(d) Description of Transaction: Program consulting	
(e) Sharing of Organization Revenues? = No	
(a) Name of Person: Neal Rogin	
(b) Relationship Between Interested Person and Organization:	
Member Board of Directors	
(c) Amount of Transaction \$ 75250.	
(d) Description of Transaction: Program/production consulting	
(e) Sharing of Organization Revenues? = No	
•	

066

Form 990 Page 10

Current Year Deduction		0	.0	0	0	·	.0	0	2,053.	.086	1,208.	2,844.	24.	.607,8	.602'9	w
Current Sec 179												•		0	0	 
Accumulated Depreciation		1,665.	421.	1,417.	994.	1,450.	814.	.009	7,679.	1,437.	1,812.	2,014.		20,303.	20,303.	 
Basis For Depreciation		1,665.	421.	1,417.	. 866	1,450.	814.	.009	10,266.	2,900.	6,038.	14,218.	1,477.	42,260.	42,260.	
Reduction In Basis														0	0	Wester 5
Bus % Excl														•		
Unadjusted Cost Or Basis		1,665.	421.	1,417.	994.	1,450.	814.	6009	10,266.	2,900.	6,038.	14,218.	1,477.	42,260.	42,260.	
Line No.	•	16	16	16	16	16	16	16	16	16	16	16	16			
Life		5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	3.00			
Method		SL	$_{ m SI}$	SI	$S\Gamma$	SL	SL	$_{ m SI}$	SL	SL	SL	SL	SL			
Date Acquired		010198SL	052098SL	030199SL	122199SL	071800SL	121500 <mark>SL</mark>	123000SL	123104SL	123105SL	123106SL	123107SL	123108SL			
Description	Machinery & Equipment	Software	Printer and cable	3IMac	4IMac	sGiftmaker Pro	oTape Back-up	7IMac	Office equipment Equipment and furniture EQUIPMENT AND LOFURNITURE EQUIPMENT AND				Laptop computer * 990 Page 10 Total	chinery g Grand Tot	10 Depr	
Asset No.		ਜ	-74	m	4	ιń.	9	F-	8	6	70 1	7	12		<del></del>	 

(D) - Asset disposed

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