Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047

Open to Public Inspection

A	For t	ne 2012 calendar year, or tax year beginning an	id ending		
В	Check applica	ble:		D Employer ident	tification number
		ress The Pachamama Alliance			
	Nan	ne page Doing Business As		94-3	249793
	Initia retu		Room/suite		
	Terr	nin-		A STATE OF THE STA) 561-4522
		nded C:		G Gross receipts \$	3,733,308,
	App	San Francisco, CA 94129		H(a) Is this a group	
	pen	F Name and address of principal officer:Basil R Twist, Jr.		for affiliates?	Yes X No
		same as C above			included? Yes No
1	Tax-e	xempt status: \boxed{x} 501(c)(3) $\boxed{}$ 501(c) () $\boxed{}$ (insert no.) $\boxed{}$ 4947(a)(1) or 527		a list. (see instructions)
J	Webs	ite: > www.pachamama.org	^	H(c) Group exempt	
	Form of	of organization: x Corporation Trust Association Other Summary	L Year		M State of legal domicile: CA
	4	Briefly describe the organization's mission or most significant activities: The m	ission of	Mho Daghamama	
Activities & Governance		Alliance is to empower indigenous people of the Amazon (con		The Fachamama	
rna	2	Check this box if the organization discontinued its operations or disp		e than 25% of its not	accate
ove	3	Number of voting members of the governing body (Part VI, line 1a)	ooca or mor	3	
Ö	4	Number of independent voting members of the governing body (Part VI, line 1b)	**************	4	
S	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	*****************	5	-
VIţ	6	Total number of volunteers (estimate if necessary)		6	
cti	7 a			7:	300
4	b	Net unrelated business taxable income from Form 990-T, line 34		7	
				Prior Year	Current Year
Ф	8	Contributions and grants (Part VIII, line 1h)		2,778,314	
enn	9	Program service revenue (Part VIII, line 2g)		673,504	
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,756	
ш	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		8,026	
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,461,600	
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		791,166	
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0	
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,271,905	
ens	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0	
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25) 500	,157.		A Comment of the Comm
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,486,727	1,548,846.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		4,549,798	4,190,420,
(V)	19	Revenue less expenses. Subtract line 18 from line 12		<1,088,198	.> <457,836.
Net Assets or Fund Balances			Be	ginning of Current Year	End of Year
Bala		Total assets (Part X, line 16)		3,967,970	814,895.
ind		Total liabilities (Part X, line 26)		525,493	862,008.
	ırt II	Net assets or fund balances. Subtract line 21 from line 20 Signature Block		3,442,477	<47,113,
			4		
rue	correc	lities of perjury, I declare that I have examined this return, including accompanying schedule t, and complete Declaration of preparer (other than officer) is based on all information of w	es and stateme	ents, and to the best of n	ny knowledge and belief, it is
ruo,	COITCO	and complete beginning in the paper (other than bricker) is boased on all illionnation of w	nich preparer	nas any knowledge.	7/12
Sigr	,	Signature of officer		Date	7/12
dere		Basil R Twist, Jr., CEO			KE CODY
ici	_	Type or print name and title			ILL VUMY
		Print/Type preparer's name Preparer's signature	D	ate Check	PTIN
aid		Sue Fujitani Sue Fujita	10000	if self-emplo	
	arer	Firm's name Sue Fujitani	10	Firm's EIN	yed P00542703
	Only	Firm's address 58 West Portal Ave #130		THITISLIN	
		San Francisco, CA 94127		Phone no. 7	415) 566-4619
Лау	the IF	AS discuss this return with the preparer shown above? (see instructions)		11.1101101101	X Yes No

	The Pachamama Alliance	94-3249793	Page 2
Pa	art III Statement of Program Service Accomplishments		-
_	Check if Schedule O contains a response to any question in this Part III		х
1	Briefly describe the organization's mission:		
	The mission of The Pachamama Alliance is: To preserve the Earth's		
	tropical rainforests by empowering the indigenous people who are its		
	natural custodian, and to contribute to the creation of a new global vision of equality and sustainability for all.		
2	Did the organization undertake any significant program services during the year which were not listed on		
_	the prior Form 990 or 990-EZ?	Г	Yes X No
	If "Yes," describe these new services on Schedule O.		res No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service	982	Yes X No
	If "Yes," describe these changes on Schedule O.	O'	
4	Describe the organization's program service accomplishments for each of its three largest program services,	as measured by e	xpenses
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to o	thers, the total exp	enses, and
	revenue, if any, for each program service reported.	,	3,1000, 4,10
4a	(Code:) (Expenses \$ 954,616. including grants of \$ 1,000.) (Re	venue \$	26 879
	AWAKENING THE DREAMER, US CAMPAIGN, COMMUNICATION AND OUTREACH		
	The Pachamama Alliances's flagship workshop, the Awakening the Dreamer		
	Symposium, has now been delivered in 73 countries and at least 13		
	languages, thanks to more than 4,000 trained volunteer Facilitators		
	worldwide who are bringing the Symposium to their communities and		
	allied organizations.		
4b	(Code:) (Expenses \$		20 600 \
	FUNDACION PACHAMAMA, THE 11TH ROUND PROJECT, RIGHTS OF NATURE.	enue \$	20,609.)
	JUNGLEMAMAS, SOLAR PROJECT		
	Indigenous Voices Speak Up for Preservation		
	Fundacion Pachamama (FP) provided funding for numberous workshops and		
	assemblies so that indigenous communities of the Ecuadorian Amazaon		
	were fully informed about plans for oil development in their lands, and		
	so that their voices calling for territorial preservation were clearly		
	heard. This was all part of FP's overall effort to find common ground		
	between the need to protect the environmental and cultural richness of		
	the Amazon and a commitment to help the Ecaudorean government achieve		
	its legitimate and necessary long-term social development and poverty		
4c	reduction goals for its people.		
	(Code:) (Expenses \$) (Reverse	nue \$	538,027.)
	140 people participated in 10 separate deep immersion journeys to		
	connect with our indigenous partners in the Ecuadorian Amazon and the		
	spirit of the rainforest itself. In additiona to visiting Achuar		
	territory, our journey offerings included visits to Karanqui, Kichwa		
	and Zapara communities		
			<u> </u>
ld	Other program services (Describe in Schedule O.)		
	(Expenses \$ 929,818, including grants of \$ 7,114,) (Revenue \$	1,903.)	
1e	Total program service expenses ▶ 3,371,676.		

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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	1		
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
6	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
O	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I			
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	6		X
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.	_		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	7		X
	Schedule D, Part III			
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for	8		X
	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		v
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	9		X
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	10		
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	х	
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	services and the services of the tax year include a loothote trial addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Ves." complete School No. 5. Posts Land IV.			
15	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	14b	X	
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	45		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	15	X	
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		v
7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		X
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	.,		Δ
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			**
	complete Schedule G, Part III	19		Х
0a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form 990 (2012) The Pachamama Alliance Part IV Checklist of Required Schedules (continued)

21	Did the examination report more than \$5,000 of averts and allowers.		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
22	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,	21	X	-
22	column (A), line 2? If "Yes," complete Schedule I, Parts I and III			
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	22		X
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J			
24	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23		X
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	04-		
	Schedule K. If "No", go to line 25 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a		X
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24b		
	any tax-exempt bonds?	04-		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c		-
25	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	24d		-
	disqualified person during the year? If "Yes," complete Schedule L, Part I	0.5		
ŀ	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	25a		X
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	051		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified	25b		X
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II			12
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	26	X	
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	07		-
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	27		X
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer director trustee or key employee? If "Yee " expected Cate of the Cate of t	28a		**
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		X
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29	X	
	contributions? If "Yes," complete Schedule M	30		v
31	Did the organization liquidate, terminate, or dissolve and cease operations?	30		X
	If "Yes," complete Schedule N, Part I	31		v
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		X
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	02		
	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, Part II, III, or IV, and	-00		Α
	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	-		44
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Y	

_	n 990 (2012) The Pachamama Alliance 94-3249793 rt V Statements Regarding Other IRS Filings and Tax Compliance			age 5
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter ·0· if not applicable	9		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable)		
С				
	(gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 33	3		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
0	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		

b Did the organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter:

Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b

Section 501(c)(29) qualified nonprofit health insurance issuers.

a' Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.

b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans

c Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14a 14b Form 990 (2012)

13b

12a

Form 990 (2012) Page 6 The Pachamama Alliance 94-3249793 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI

Sec	ction A. Governing Body and Management			
	A		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	7		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b	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	х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		Х
7a				- 41
	more members of the governing body?	7a		х
b				21
	persons other than the governing body?	7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			Λ
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	- 0.0	41	
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			21
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			**
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	х	
b	Other officers or key employees of the organization	15b	х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►CA			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailabl	е	
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	d financ	cial	
	statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	ion: 🕨		
	5 - 11 5 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			

Basil R Twist, Jr - (415) 561-4522

Presidio Building 1009, San Francisco, CA 94129

Form 990 (2012) The Pachamama Alliance 94-3249 Part VII | Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response to any question in this Part VII

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

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

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

(A) Name and Title	(B) Average hours per week	box	not c , unle cer ar	Pos heck ss pe	erson	than	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key emplayee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Gordon Starr	1.00									
Chairman of the Board		Х						0.	0.	0
(2) Lynne Twist	10.00									
Director		Х						0.	0.	0
(3) John Perkins	1.00									
Director		Х						0.	0.	0
(4) Michael Olmstead	1.00									
Director		Х						7,500.	0.	0
(5) Catherine Parrish	1.00									
Director		X						0.	0.	0
(6) Rev Deborah Johnson	1.00									
Director		Х		_				0.	0.	0
(7) Tammy White	1,00									
Director		X	_			-		0.	0.	0
(8) Basil R Twist, Jr	45.00									
CEO			-	Х			-	105,905.	0,	8,225
(9) Patricia Usner	45.00									
Secretary				Х		-	-	79,878.	0.	6,485
(10) Tatiana Tilley	45.00							Interest of Secretaria		
Treasurer				Х				76,842.	0.	5,285
• (0)										

1 6	Section A. Officers, Directors, Tru	stees, Key Em (B)	ploy	/ees		dH C)	ighe	st C	7,4835	7001 18		T	(E)	
	(A) Name and title	Average hours per week	box	o not o x, unle icer ar	Pos check ess pe	more erson	than is bo	th an	(D) Reportable compensation from	(E) Reportable compensation from related	on		(F) Estimat amount othe	ted t of
		hours for related organizations below	hours for related a page (W-2/109					the organization (W-2/1099-MISC)	organization (W-2/1099-MIS		or	mpens from the ganizated nd rela	he ation ated	
		line)	Individual	Institut	Officer	Key employee	Highes	Former				org	ganiza	tions
														7
	-													
1h	Sub-total													
С	Sub-total Total from continuation sheets to Part V Total (add lines 1b and 1c)	II, Section A					•		270,125. 0. 270,125.		0.	19,995 0 19,995		0
2	Total number of individuals (including but no compensation from the organization) wh	o red		000 of reportable				
3	Did the organization list any former officer, line 1a? <i>If</i> "Yes," <i>complete Schedule J for s</i>												Yes	No
4	For any individual listed on line 1a, is the su and related organizations greater than \$150	ım of reportable	е со	mpe	nsat	tion	and	othe	er compensation from the	ne organization		3		X
5	Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com	ccrue compen	satio	on fr	om a	any	unre	elate	d organization or individ	lual for services		5		Х
1	tion B. Independent Contractors Complete this table for your five highest col	mnensated ind	ene	nder	nt co	ntrs	actor	re the	at received more than \$	100 000 of com	20001	ation 1	from	
	the organization. Report compensation for the	the calendar ye	ar e	ndin	ıg wi	ith o	r wit	thin t	the organization's tax ye	ear.	701136	100111	IOIII	
	(A) Name and business	address	NON	ſΕ					(B) Description of se	rvices	Co	(C ompe	C) nsatio	n
	*						,							
2	Total number of independent contractors (ir \$100,000 of compensation from the organiz		t lim	ited	to th	hose 0	e list	ed a	bove) who received mo	re than				

Part VIII Statement of Revenue Alliance

		Check if Schedule O cont	ains a response	e to any question in				
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
nts	2 1	1 a Federated campaigns	1a					0.10,01.011
Contributions, Gifts, Grants	no l	b Membership dues	1b					
ts, (2	c Fundraising events						
Gif	ā	d Related organizations	1d					
ns,		e Government grants (contribut	ions) 1e					
utio	5	f All other contributions, gifts, gran	8					
ribit	5	similar amounts not included above	Harden Committee	3,115,754.				
ont	2	g Noncash contributions included in lines		50,987.				
0 6	8	h Total. Add lines 1a-1f		>	3,115,754.			
				Business Code				
ice	2	2 a Travel referral fees		900099	538,027.	538,027.		
Jer.	3	b Facilitator training		900099	21,194.	21,194.		
Program Service		c Other event income		900099	7,980.	7,980.		
gra	2	d Leadership summit		900099	6,020.	6,020.		
2ro		e Other trainings		900099	2,409.	2,409.		
_		f All other program service rever						
_	120	g Total. Add lines 2a-2f			575,630.			
	3	(-			
	4	other similar amounts)		357.			357.	
	5							
	3	Royalties	(i) Real	1 1000 1000 VI				<u> </u>
	6	a Gross rents		(ii) Personal				
		b Less: rental expenses	29,055. 0.					
	1	c Rental income or (loss)	29.055.					
		. 95	25,055,		29,055.			
	1	a Gross amount from sales of	(i) Securities	(ii) Other	29,055.			29,055.
	(5)	assets other than inventory	() 0000111100	(ii) Other				
	ı	b Less: cost or other basis						
		and sales expenses						
		c Gain or (loss)						
		d Net gain or (loss)		•				
Ф	8 8	a Gross income from fundraising	events (not					
enne		including \$	of					
Other Reve		contributions reported on line 1	c). See					
er F		Part IV, line 18	a					
Oth	b	b Less: direct expenses						
•	_	c Net income or (loss) from fundra						
	9 a	a Gross income from gaming acti						
		Part IV, line 19	a					
		b Less: direct expenses						
		c Net income or (loss) from gamin						
	10 a	a Gross sales of inventory, less re						
	360	and allowances	a	12,512.				
		b Less: cost of goods sold		724.				
1	С	c Net income or (loss) from sales			11,788.	11,788.		
1	44	Miscellaneous Revenue		Business Code	1			
	11 a							
	b							
	C							
	a	d All other revenue e Total. Add lines 11a-11d	L	•				
	12	Total revenue. See instructions			2 720 504	FOR 110		
20000		. Jan 1919 au . Oco mon donono.		1111111111111	3,732,584.	587.418.	0.	29.412.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response to any question in this Part IX (A) Total expenses (B) Program service (D) Fundraising Do not include amounts reported on lines 6b. Management and general expenses 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 853,022 853,022, Grants and other assistance to individuals in the United States. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 265,568, 227,350. 31,312, 6,906. Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 7 1,229,746. 963,551. 49,233, 216,962. Pension plan accruals and contributions (include 8 section 401(k) and 403(b) employer contributions) Other employee benefits 9 161,336, 116,321, 21,307 23,708. Payroll taxes 10 131,902, 104.848. 5,701. 21,353. 11 Fees for services (non-employees): Management a b Legal 7,633. 7,633. С Accounting 9,500, 9,500. Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) 425,053 326,464. 1,625 96,964. Advertising and promotion 12 3,447 3,348 99 Office expenses 13 160,209 65,103. 76,771 18,335. Information technology 14 93,746, 27,223, 39,176 27,347. Royalties 15 16 Occupancy 139,650 111,724 9.409 18,517. 17 471,159 430,445 24,162 16,552. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 181,960. 120,762 10,513 50,685. 20 18,182. 18,182, Payments to affiliates 21 Depreciation, depletion, and amortization 22 6,214 6,214 23 Insurance 7.376. 3,348. 4,028 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) a b C d e All other expenses 24,717. 18,167. 3,722. 2.828.

4,190,420.

3,371,676.

Check here

25

Total functional expenses. Add lines 1 through 24e

Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

if following SOP 98-2 (ASC 958-720)

500,157.

318,587.

Form 990 (2012) Part X Balance Sheet

	ILX	Check if Schedule O contains a response to an	y ques	ion in this Part X			
		·			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments			794,513,	2	271,743.
	3	Pledges and grants receivable, net			3,021,092,	3	416,278.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and for	ormer c	fficers, directors,			
		trustees, key employees, and highest compens	ated er	ployees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disquali	ified pe	rsons (as defined under			
		section 4958(f)(1)), persons described in section					
		employers and sponsoring organizations of sec					
		employees' beneficiary organizations (see instr).				6	
Assets	7	Notes and loans receivable, net				7	
Ass	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges	50,077.		57,037.		
	10a	Land, buildings, and equipment: cost or other	1		30,077.		37,037.
		basis. Complete Part VI of Schedule D	10a	60,334.			
	b	Less: accumulated depreciation		44,192.	19,462.	100	16 140
	11	Investments - publicly traded securities	32,826.		16,142. 3,695.		
	12	Investments - other securities. See Part IV, line 1	32,020,	12	3,093,		
	13	Investments - program-related. See Part IV, line		50,000.	13	F0 000	
	14	Intangible assets		30,000.	14	50,000.	
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equa	4)	3,967,970.	16	914 905	
	17	Accounts payable and accrued expenses	130,507.	17	814,895.		
	18	Grants payable		130,307.	18	183,403.	
	19	Deferred revenue		44 006		60.605	
	20				44,986.	19	68,605.
S	21	Escrow or custodial account liability. Complete F					
Liabilities		Loans and other payables to current and former				21	
abil		key employees, highest compensated employee					
Ë		Complete Part II of Schedule L				00	(44 1444
	23	Secured mortgages and notes payable to unrela	ted thir	d narties		22	60,000.
	24	Unsecured notes and loans payable to unrelated	third r	artics	250.000	23	
	25	Other liabilities (including federal income tax, pay	ahles t	related third	350,000.	24	550,000.
		parties, and other liabilities not included on lines		- Control of the cont			
		Schedule D		500 200 200 0 M 600 200 C Secret 1 Secret 2 C C Secret 2		05	
	26	Total liabilities. Add lines 17 through 25			F0F 402	25	252 222
		Organizations that follow SFAS 117 (ASC 958)	check	here X and	525,493.	26	862,008.
ς,		complete lines 27 through 29, and lines 33 and		illere La allu			
JCe		Unrestricted net assets			250 416	07	005 440
ala	28	Temporarily restricted net assets			358,416.	27	<297,113.>
g G	29				3,084,061.	28	250,000.
S		Organizations that do not follow SFAS 117 (AS				29	
5		and complete lines 30 through 34.	0 300,	, check here			
ts		Capital stock or trust principal, or current funds				20	
SSe	31	Paid-in or capital surplus, or land, building, or equ	inmen	fund		30	
< □		Retained earnings, endowment, accumulated inc				31	
an l						32	
Ž	33	Total net assets or fund balances		I	3,442,477.	33	<47,113.>

Forn	n 990 (2012) The Pachamama Alliance	94-3249793		Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3	.732	.584.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4	.190	420.
3	Revenue less expenses. Subtract line 2 from line 1	3			836.>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3	,442	477.
5	Net unrealized gains (losses) on investments	5		2	618.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8		<13	280.>
9	Other changes in net assets or fund balances (explain in Schedule O)	9	<3	.021	092.>
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10		<47	113.>
Pa	rt XII Financial Statements and Reporting	"			
	Check if Schedule O contains a response to any question in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	x Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	ale Audit			

Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

Form **990** (2012)

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No. 1545-0047

2012

Open to Public Inspection

Nam	e of	the organiza	tion							Employe	r identifica	tion n	umber
_				mama Alliance						9	4-324979	3	
Pa	rt I	Reason	for Public Cha	arity Status (All organ	izations m	ust comple	ete this pa	ırt.) See in:	structions.				
The o	organ			n because it is: (For lines									
1	_	A church, co	onvention of church	ies, or association of chu	irches des	cribed in s	ection 17	O(b)(1)(A)(i).				
2	_			170(b)(1)(A)(ii). (Attach S									
3	_			pital service organization									
4				n operated in conjunction	n with a ho	spital des	cribed in s	ection 17	0(b)(1)(A)(iii). Enter	the hospit	al's nai	me,
		city, and sta											
5				e benefit of a college or ι	university o	owned or o	perated b	y a goverr	nmental ur	nit describ	oed in		
	_		0(b)(1)(A)(iv). (Comp										
6	=			ment or governmental ur									
7	X			eceives a substantial part	t of its sup	port from a	a governm	ental unit	or from the	e general	public des	cribed	in
			(b)(1)(A)(vi). (Comp	Charles to been profe	10								
8	=			section 170(b)(1)(A)(vi).									
9				eceives: (1) more than 33									
				unctions - subject to cert									
				taxable income (less sec	ction 511 ta	ax) from b	usinesses	acquired l	by the org	anization	after June	30, 19	75.
10			509(a)(2). (Comple	te Part III.) operated exclusively to te	act for pub	lio oofotu	Caa4:	500/	41				
11				operated exclusively for t									150
				zations described in sect									or
				g organization and comp				2). 000 Se	Ction 509	(a)(3). On	eck trie bo	xırıaı	
		a Type			ype III - Fu			4	d Tyr	ae III - Na	n-functiona	ally into	aratod
e [nat the organization is no									
				than one or more public									
f				itten determination from						0(4)(1) 01	300001100	$O(\alpha)(2)$.	
			rganization, check			1.7	33 2 50	2. 5.1					
g				organization accepted a	ny gift or c	ontributio	n from any	of the foll	owing per	sons?			
				directly controls, either a								Yes	No
		the gov	erning body of the s	supported organization?							11g(i)		
		(ii) A family	member of a perso	on described in (i) above?)						11g(ii)		
		(iii) A 35%	controlled entity of	a person described in (i)	or (ii) abov	e?					11g(iii		
h		Provide the f	ollowing information	about the supported or	ganization	(s).							
				T									
(i) N	ame o	of supported	(ii) EIN	(iii) Type of organization				u notify the	(vi) ls organizație	s the	(vii) Amoun	t of mo	netary
	orgai	nization		(described on lines 1-9 above or IRC section	in col. (i) lis	sted in your document?	organiza	tion in col.	(i) organiz	red in the	sut	port	
				(see instructions))				T	U.S	T			
				**************************************	Yes	No	Yes	No	Yes	No			
otal													

Schedule A (Form 990 or 990 EZ) 2012 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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support						
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	2,652,646.	4,101,867.	3,659,426.	2,778,314.	3,115.754.	16,308,007.
2	Tax revenues levied for the organ-						, , , , , , , , , , , , , , , , , , , ,
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	2,652,646.	4,101,867.	3,659,426.	2.778.314.	3,115,754.	16,308,007.
5	The portion of total contributions		2,202,007,	3,033,120.	2,770,514.	3,113,734.	10,300,007.
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						101 215
6	Public support. Subtract line 5 from line 4.						484,315.
Se	ction B. Total Support						15,823,692.
STE	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 4	2,652,646.	4,101,867.	3,659,426.	2,778,314.	3,115,754.	(f) Total
8	Salara Control of the	2,032,040.	4,101,007.	3,039,420.	2,770,314,	3,115,754.	16,308,007.
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	7.	2	110	1 756		
9	Net income from unrelated business	7.	2.	118.	1,756.	357.	2,240.
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part IV.)						
44	Total support. Add lines 7 through 10						
	Gross receipts from related activities,	ata /aaa inatmustia					16,310,247.
						12	2,135,120.
13	First five years. If the Form 990 is for	PACE			*		
Sec	organization, check this box and stop tion C. Computation of Publi	ic Support Per	centage				P
				(0)			
	Public support percentage for 2012 (li					14	97.02 %
	Public support percentage from 2011					15	98.98 %
10a	33 1/3% support test - 2012. If the o						
h	stop here. The organization qualifies a						
	33 1/3% support test - 2011. If the o						
	and stop here. The organization quali						
	10% -facts-and-circumstances test						
	and if the organization meets the "fact						
	meets the "facts-and-circumstances"						
	10% -facts-and-circumstances test						0% or
	more, and if the organization meets th						
	organization meets the "facts-and-circ						▶∐
18	Private foundation. If the organization	n did not check a b	ox on line 13, 16a,	16b, 17a, or 17b, o			>
					Cahaa	tula A /Farm 000 a	- 000 EZ\ 0040

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

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

Se	ection A. Public Support						
Ca	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and					1 12	
	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							
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	a Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
1	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
1	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)						
	ction B. Total Support						,
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 6	(-/	(2) = = = =	(0) 20 10	(4) 2011	(6) 2012	(i) rotai
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
t	Unrelated business taxable income						· · · · · · · · · · · · · · · · · · ·
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
	First five years. If the Form 990 is for	the organization's	first, second, third	, fourth, or fifth ta	x vear as a sectio	n 501(c)(3) organiza	ation
	4 V SANDON S					·····	
Sec	tion C. Computation of Public	Support Per	rcentage				
15	Public support percentage for 2012 (lin	ne 8, column (f) di	vided by line 13, co	olumn (f))		15	%
16	Public support percentage from 2011	Schedule A, Part	III II 4 F			16	%
Sec	tion D. Computation of Invest	ment Income					
17	Investment income percentage for 201	2 (line 10c, colum	nn (f) divided by line	13, column (f))		17	%
	Investment income percentage from 20					18	%
	33 1/3% support tests - 2012. If the o						
	more than 33 1/3%, check this box and						
b	33 1/3% support tests - 2011. If the o						
	line 18 is not more than 33 1/3%, chec						
	Private foundation If the organization						

SCHEDULE D

(Form 990)

Department of the Treasury

Supplemental Financial Statements

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

OMB No. 1545-0047

Name of the organization

Employer identification number The Pachamama Alliance 94-3249793 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I 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 Aggregate grants from (during year) 3 Aggregate value at end of year 4 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 can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II | 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 education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 3 Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ 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 XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) 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 (ASC 958) relating to these items: Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

	edule D (Form 990) 2012 The Pacham	ama Alliance						94-3249	793	Р	age 2
Pa	art III Organizations Maintaining	Collections of A	Art, H	listorical T	reasures,	or Oth	ner Simil	ar Asse	ets(conti	nued)	
3	Using the organization's acquisition, access	sion, and other recor	ds, ch	eck any of the	e following th	at are a	significant	use of its	collectio	n item	18
	(check all that apply): Public exhibition			1	ahanaa nraa						
a			d		change prog						
b			e	Other							
4		allantions and audio	de le ec		Ale			D-	-t VIII		
4	Provide a description of the organization's of							se in Pai	π XIII.		
5	During the year, did the organization solicit								٦,,		٦
Pa	to be sold to raise funds rather than to be multiple to be sold to raise funds rather than to be multiple to be sold to raise funds rather than to be multiple to be sold to raise funds rather than to be multiple to be sold to raise funds rather than to be multiple to be sold to raise funds rather than to be multiple to be sold to raise funds rather than to be multiple to be sold to raise funds rather than to be multiple to be sold to raise funds rather than to be multiple to be sold to raise funds rather than to be multiple to be sold to raise funds rather than to be multiple to be sold to raise funds rather than to be multiple to be sold to raise funds rather than to be multiple to be sold to raise funds rather than to be multiple to be sold to be sold to raise funds rather than to be multiple to be sold to be so						000		Yes		No
	reported an amount on Form 990, Pa		iete ii	trie organizati	on answered	res to	5 Form 990	, Part IV,	line 9, or		
1a	Is the organization an agent, trustee, custoo		diary f	for contributio	ns or other a	ssets no	ot included				
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII					**********			163		_ 140
7.57		and complete me		.g table!					Amoun	t	
. с	Beginning balance						1c		Amoun	L.	
d	Additions during the year						1d				
е	Distributions during the year										
f	Ending balance										- 1
2a	Did the organization include an amount on F	orm 990. Part X. line	21?		***************				Yes		No
	If "Yes," explain the arrangement in Part XIII										1
	rt V Endowment Funds. Complete	if the organization ar	nswere	ed "Yes" to Fo	orm 990. Pari	t IV. line	10.		*********		
		(a) Current year) Prior year			(d) Three y	ears back	(e) Four	vears	hack
1a	Beginning of year balance		1	, ,	10/110/00		(4)	our o out	(0) 1 0 01	youro	Duoit
b	Contributions										
С	Net investment earnings, gains, and 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 curr	rent year end balanc	e (line	1g, column (a	a)) held as:						
а	Board designated or quasi-endowment		%	,	,,						
b	Permanent endowment ▶	%									
C	Temporarily restricted endowment ▶	%									
	The percentages in lines 2a, 2b, and 2c should	ıld equal 100%.									
3a	Are there endowment funds not in the posse	ssion of the organiza	ation t	hat are held a	and administe	red for t	he organiza	ation			
	by:									Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
b	If "Yes" to 3a(ii), are the related organizations	listed as required o	n Sch	edule R?					3b		
4	Describe in Part XIII the intended uses of the	organization's endo	wmen	t funds.							
Par	t VI Land, Buildings, and Equipm	ent. See Form 990	, Part	X, line 10.							
	Description of property	(a) Cost or of basis (investment)		(b) Cost basis	or other (other)		ccumulated preciation		(d) Book	value	
1a	Land										
	Buildings										
С	Leasehold improvements	476									
	Equipment				49.084.		41.9	42.		7 1	142.
e	Other				11,250.		2.2				000.
Total	. Add lines 1a through 1e. (Column (d) must ed	qual Form 990, Part	X, colu	ımn (B), line 1						16.1	

Part VII Investments - Other Securities. See (a) Description of security or category (including name of security)	(b) Book value		valuation: Cost or e	end-of-year market va	alue
Financial derivatives	(b) Book value	(c) Wethod of	valuation. Cost of t	and or year market va	ilue
2) Closely-held equity interests					
3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					-
(G)					
(H)					
(I)					
Part VIII Investments Program Bolated	E 000 B				
Part VIII Investments - Program Related. See (a) Description of investment type	(b) Book value		valuation. Cast as a		T
		(c) Method of	valuation: Cost or e	nd-of-year market va	llue
(1) Convertible promissory note	50,000.	Cost			
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	50,000.				
Part IX Other Assets. See Form 990, Part X, line 18					
(a) De	escription			(b) Book value	ie
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
otal. (Column (b) must equal Form 990, Part X, col. (B) line 1	5.)		>		
Part X Other Liabilities. See Form 990, Part X, line	25.				
. (a) Description of liability	(b)) Book value			
(1) Federal income taxes					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
otal. (Column (b) must equal Form 990, Part X, col. (B) line 2	5)				
FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of		nization's financial	etatamenta that	norte the aver-	m1-

	edule D (Form 990) 2012 The Pachamama Alliance	Wal D	94-3249	793 Page 4
1	rt XI Reconciliation of Revenue per Audited Financial Statements Total revenue, gains, and other support per audited financial statements	AND ADDITION OF THE PROPERTY O		2 754 505
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		1	3,751,505
a	10 m of 10 m o			
b	Departed convices and use of facilities	a 2,618	3.	
		b	-	
C		C		
d	* * * * * * * * * * * * * * * * * * *	d 16,303		
e				18,921,
3	Subtract line 2e from line 1		3	3,732,584.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	a Î		
a	Investment expenses not included on Form 990, Part VIII, line 7b		-	
b				
-	Add lines 4a and 4b		4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	147.1 =	5	3,732,584.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements			
1	Total expenses and losses per audited financial statements	****************************	1	4,190,420.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	ï		
а	Donated services and use of facilities 2	a		
b	Prior year adjustments 2	b		
С	Other losses 2	С		
d	Other (Describe in Part XIII.)	d		
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	4,190,420.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	9		
b	Other (Describe in Part XIII.)		1	
	Add lines 4a and 4b		4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			4 100 420
Pai	t XIII Supplemental Information		3	4,190,420.
	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines	s 1a and 4: Part IV lines 1	Ib and Ob. F	Part V. line 4: Dent
X. lin	⊋ 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provi	do any additional informa	tion	art v, iiile 4, Part
	X, Line 2: "Management of the Alliance considers the likelihood	de any additional informa	tion.	
ICIC	A, bline 2: Management of the Alliance considers the likelihood			
of c	hanges by taying sutherities in its filed to			
OI C	hanges by taxing authorities in its filed tax returns and recognize	es a		
liab	Allter for an Alexander and al			
IIab	ility for or disclose potential significant changes if management			
1-11	V. V			
bell	eves it is more likely than not for a change to occur, including			
chan	ges to the Alliance's status as a not-for-profit entity. Management			
beli	eves the Alliance met the requirements to maintain its tax-emempt			
stat	us and has no income subject to unrelated business income tax;			
ther	efore no provision for income taxes has been provided in these			

Schedule D (Form 990) 2012 The Pachamama Alliance Part XIII Supplemental Information (continued)	94-3249793	Page 5
Supplemental Information (continued)		14
financial statements. The Alliance's tax returns for the past three years		
are subject to examination by tax authorities, and may change upon		
examination."		
Part XI, Line 2d - Other Adjustments:		
Audit adjustment to prior year, decrease in accounts		
receivable		
		**

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

➤ Attach to Form 990. ➤ See separate instructions.

2012
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

The Pachamama Alliance	e			94-3249793	
		Activities Ou	itside the United States. Comp		Yes"
to Form 990, Pa	art IV, line 14b.				
			rds to substantiate the amount of its gr	100	
the grantees' eligibility	for the grants or	assistance, and	the selection criteria used to award th	e grants or assistance? x	Yes No
2 For grantmakers. Des United States.	cribe in Part V the	e organization's	procedures for monitoring the use of it	ts grants and other assistance out	side the
			an be duplicated if additional space is	needed.)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
South America -					
Argentina, Bolivia,	0	0	Grantmaking		804,475.
South America -			Program	Journey Program: immersion w/indigenous peoples of Ecuador's	
Argentina, Bolivia,	0	0	Program Services	rainforest and highlands	374,350.
East Asia and the Pacific -	0	0	Grantmaking		5,000.
					8
	¥1				
3 a Sub-total	0	0			1 102 005
b Total from continuation	0	U			1,183,825.
sheets to Part I c Totals (add lines 3a	0	0			0.
and 3b)	0	0			1 183 825

The Pachamama Alliance

Part II 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 recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. 94-3249793

N						(a)
Enter total number of the IRS, or for which the						1 (a) Name of organization
ecipient organization re grantee or counse						(b) IRS code section and EIN (if applicable)
I has provided a section			South America - Argentina, Bolivia,	East Asia and the	South America - Argentina, Bolivia,	(c) Region
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter			General Support	General Support	General Support	(d) Purpose of grant
foreign country,			5,000.wire	5,000.	799,475.Wire	(e) Amount of cash grant
recognized as tax-ex			Wire transfer	000 check	Wire transfer	(f) Manner of cash disbursement
empt by			0.	0.	8,547.	(g) Amount of non-cash assistance
					Labor and materials for solar panel installation;	(h) Description of non-cash assistance
ر س			Cash basis	Cash basis	Cash basis	(i) Method of valuation (book, FMV, appraisal, other)

232072 12-10-12

ω

Enter total number of other organizations or entities

Part III

The Pachamama Alliance

94-3249793

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.

Part III can be duplicated if additional space is needed.

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

232073 12-10-12

	ule F (Form 990) 2012 The Pachamama Alliance	94-3249793	Page 4
Part	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	x No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	x No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	Yes	x No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Yes	x No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	Yes	x No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes." the organization may be required to file Form 5713. International Boycott Report, (see Instructions		

for Form 5713)

Schedule F (Form 990) 2012

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ➤ Attach to Form 990.

> Open to Public OMB No. 1545-0047

Inspection

Name of the organization The Pachamama Alliance

a gorinanio i							Employer identification number
-	Alliance						94-3249793
2	nd Assistance	8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8					
Toes the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility	to substantiate th	e amount of the grants	s or assistance, the	grantees' eligibilir		for the grants or assistance, and the selection	tion
criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant finds in the United States.	stance?	thering the constant)			X Yes No
art	Governments ar	d Organizations in th	e United States.	omplete if the ord	anization answered "	Ves" to Form 000 Dark	IV liss of forms
recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	\$5,000. Part II ca	n be duplicated if addit	tional space is need	ded.	מווייבמנוסוו מווסאאפופט	ies to Follii 990, Fait	IV, III e z I, Tor any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Amazon Watch							
2201 Broadway							Touth Good House
Oakland, CA 94612	95-4604782	501(c)(3)	6,000.	0.	Book		Summit
Indigenous Environmental Network							
PO Box 106							
Essex, NY 12936	79-3099465	501(c)(3)	28,000.	0.	Book		IEN Works
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	nd government o	ganizations listed in th	e line 1 table				2.
	s listed in the line	1 table					

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

Schedule I (Form 990) (2012)

Schedule I (Form 990) (2012) The Pachamama Alliance Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.	ited States. Com	plete if the organiz	ation answered "Yes	to Form 990, Part IV, line 22.	94-3249793 Page 2
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
-					
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	e the information	required in Part I,	line 2, Part III, colum	n (b), and any other additional info	ormation.
Schedule I, Part I, Line 2: Use of grant funds is monitored through	onitored thro	ugh			
periodic grantee reports.					
				-	

SCHEDULE L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

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

OMB No. 1545-0047

Open To Public Inspection

Name of the organization							Empl	oye	r ident	ificat	ion nu	ımbeı
	The Pachamama						94-3	249	793			
					section 501(c)(4) org	2 550						
Complete if the					art IV, line 25a or 25l	b, or Form 990-EZ, F	Part V, lin	e 4	0b.			
(a) Name of disqualified	person (b)	Relationship be			ulified (c) Description of tran	nsaction				Corre	cted?
	201	person and o	organiz	ation		,				Y	es	No
										-	-	
										+-	-	
										+		
												(2)
2 Enter the amount of tax	x incurred by the o	organization ma	nagers	or disc	qualified persons du	ring the year under						
section 4958							▶	\$				
3 Enter the amount of tax	x, if any, on line 2,	above, reimbur	sed by	the or	ganization			\$				
Part II Loans to an	nd/or From Int	terested Per	rsons	:				_				
					, Part V, line 38a or F	Form 990 Port IV lin	00 26: or	if +1-	an oran	nizati		
	nount on Form 990				, rait v, inte soa or r	omi 550, Fait IV, III	16 20, 01	II U	le orga	ilizati	JII	
(a) Name of	(b) Relationship with		(d) Lo	oan to or	(e) Original	(f) Balance due	(g) lr	1	(h) App	roved	(i) W	/ritten
interested person	organization	of loan		n the ization?	principal amount	(7	defaul		comm	ittee?	agree	ment?
			То	From			Yes I	Vo	Yes	No	Yes	No
Basil Twist	CEO	Cash flo	Х		60,000.	60,000.		X	Х		Х	
			-									
			-									
			-					_				
												-
Total Part III Grants or A	ssistance Ber	ofiting Into	rooto	d Do	> \$	60,000.						X)
(a) Name of interested	organization answ				(c) Amount of	(d) Tupo	06		(-)	Disse		
(a) Name of interested	person ((b) Relationship interested pers			assistance	(d) Type assistant				ssista	ose of nce	
		the organiza	ation									
								-				
								-				
								+				
								+				
								+				
								\dagger				
HA For Paperwork Reduc	tion Act Notice,	see the Instruc	tions f	or For	m 990 or 990-EZ.	Sche	dule L (For	m 990	or 99	0-EZ)	2012

See Part V for Continuations

Complete if the organization answe	red "Yes" on Form 990, Part IV, line 28a, 28	3b, or 28c.			
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz rever	
				Yes	No
Michael Olmstead	Member, Board of Di	7,500.	Pachamama c	-	X
F					
Dort V Complemental Life					
Part V Supplemental Information			. 0 00 0		
Complete this part to provide additi	onal information for responses to questions	on Schedule L (see	instructions).		
Schedule L, Part II, Loans To and Fro	om Interested Persons:				
(a) Name of Person: Basil Twist					
(a) Purpose of Loan, Cash flows					
(c) Purpose of Loan: Cash flows					
(6)					
Sch L, Part IV, Business Transactions	Involving Interested Persons:				
(a) Name of Person: Michael Olmstead					
(b) Relationship Between Interested E	Person and Organization:				
Member, Board of Directors					
nomber, board of bifectors					
(c) Amount of Transaction \$ 7,500.					
(d) Description of Transaction: Pacha	mama contracted with the Directo	r's			
company, e2k, for creative developmen	t. production coordination staf	f			
and on-site direction. The company re	ceived \$7,500 for services. An				
additional \$97,302 was paid to reimbu	rse the direct costs of the even	<u>_</u>			
additional pyr, 502 was para to remind	ise the direct costs of the even	ι,			
which were advanced by e2K.		11			
e) Sharing of Organization Revenues?	= No				

SCHEDULE M (Form 990)

Department of the Treasury

nternal Revenue Service

Noncash Contributions

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

Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Schedule M (Form 990) (2012)

Name of the organization

Employer identification number 94-3249793 The Pachamama Alliance Part I Types of Property (a) (b) (d) (c) Check if Number of Noncash contribution Method of determining contributions or amounts reported on applicable noncash contribution amounts items contributed Form 990, Part VIII, line 1g Art - Works of art 1 2 Art - Historical treasures Art - Fractional interests 3 Books and publications 4 Clothing and household goods 5 Cars and other vehicles 6 7 Boats and planes Intellectual property 8 Securities - Publicly traded 9 50,987. FMV, quoted sources Securities - Closely held stock 10 Securities - Partnership, LLC, or 11 trust interests Securities - Miscellaneous 12 13 Qualified conservation contribution -Historic structures Qualified conservation contribution - Other 14 15 Real estate - Residential 16 Real estate - Commercial Real estate - Other 17 Collectibles 18 Food inventory 19 Drugs and medical supplies 20 21 Taxidermy Historical artifacts 22 Scientific specimens 23 Archeological artifacts 24 25 26 Other 27 Other Other 28 Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement 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 X 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 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 an amount in column (c) for a type of property for which column (a) is checked,

LHA

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

SCHEDULE O

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization Employer identification number The Pachamama Alliance 94-3249793 Form 990, Part I, Line 1, Description of Organization Mission: (cont.) rainforest to preserve their lands and culture and, using insights gained from that work, to educate and inspire individuals everywhere to bring forth a thriving, just and sustainable world. Form 990, Part III, Line 4b, Program Service Accomplishments: People of Sarayaku Receive Restitution Payment With guidance from FP's lawyers, the people of Sarayaku obtained a favorable ruling by the Inter American Court for Human Rights. The government was required to pay reparations of more than one million dollars for damage to their land and people, and has committed to cleaning up the more than 3,000 pounds of explosives left in their territory. Jungle Mamas Takes Huge Steps in Advancing Safe Motherhood In a new collaboration with One Heart World-Wide, Jungle Mamas trained 20 Achuar women in a community empowerment workshop. The 20 women will provide prenatal coverage to 47 Achuar communities. To date, Jungle Mamas has distributed 100 safe birth kits to women in approximately 30 communities. Impact Analysis Begins for the Southeastern Amazon FP provided financial support for a major scholarly study to research the impact of two divergent future scenarios in the southeastern Amazon one of oil development and one of conservation. The research

Schedule O (Form 990 or 990-EZ) (2012)

	5
Name of the organization	Employer identification number
The Pachamama Alliance	94-3249793
Form 990, Part XI, line 9	
Other Changes in Net Assets	
Management has elected to change their policies around "intentions to	
give" and not record intentions to	
temporarily restricted net assets for the year ended December 31, 2012.	
In previous years intentions to give were recorded as the	
increases in temporarily restricted net assets in accordance with	
accounting principles generally accepted in the United States of	
America for the treatment of pledges (promises to give). As a result,	
beginning temporarily restricted not seem of	
are reduced by the amount of \$3,021,092 as all were intentions to give	
rather than promises to give.	
Form 990, Part XII, line 2c	
oversight and selection process	
here has been no change to either the oversight or selection process.	
	A

Asset No.

Description

Date Acquired

Method

Life

No.

Unadjusted Cost Or Basis

Bus % Excl

Reduction In Basis

Basis For Depreciation

Accumulated Depreciation

Current Sec 179

Current Year Deduction

0. 11.250.		11,250.				Ociiei
11,250.		11,250.	16	5.00	123111SL	te Page 10 Total
						Other
0. 49,084.		49,084.				Machinery & Equipm
1,242.		1,242.	16	3.00	111212SL	Laptop computer * 990 Page 10 Total
1,652.	H	1,652.	16	3.00	081312SL	Airbook
1,144.		1,144.	16	5.00	092911SL	1Flat Screen TV
1,391.		1,391.	16	5.00	120910SL	White Board
1,140.		1,140.	16	3.00	122911SL	Computer & Software 122911SL
1,983.		1,983.	16	3.00	062411SL	Computer & Software 062411SL
1,951.		1,951.	16	5.00	051110SL	projector
3,682.		3,682.	16	3.00	031809SL	macpro
1,477.		1,477.	16	3.00	123108SL	Slaptop computer
14,218.		14,218.	16	5.00	123107SL	furniture
6,038.		6,038.	16	5.00 16	123106SL	and
						ממדר מוומ

278

32

380

661

390

76

229

69

229

278

386

534

(D) - Asset disposed

228102 05-01-12

12Website * 990 Page

* 990 Page 10 To

equipment furniture Equipment

and

123105SL

5.00

16

2,900.

Office equipment

123104SL

5.00

16

10,266

10,266

10,266

2,900

2,900

13,800

418.

0

0

0

2,273

1,228

1,395

6,038

and

Equipment

Machinery

82

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

37,978.

0

3,964

Form 990 Page 10

228102 05-01-12		Asset No.
	* Grand Total 990 Page 10 Depr	1
		Date Acquired
		Method
		Life
(D) - As		Line No.
(D) - Asset disposed	60,334.	Unadjusted Cost Or Basis
		Bus % Excl
* ITC, \$		Reduction In Basis
Section 179, Salva	60,334.	Basis For Depreciation
* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction	37,978.	Accumulated Depreciation
nercial Revitali	0.	Current Sec 179
zation Deduction	6,214.	Current Year Deduction

990