Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

A	For the	2013 cale	ndar year, or tax year beginning , 2013, and ending		, 20	
В	Check if	applicable:	C Name of organization The Pachamama Alliance	D Employ	er identification number	
	Address	change	Doing Business As		94-3249793	
П	Name ch		Number and street (or P.O. box if mail is not delivered to street address) Room/suite	E Telepho	ne number	
\Box	Initial ret		Presidio Bldg 1009	415-561-4522		
\exists	Terminat		City or town, state or province, country, and ZIP or foreign postal code		deligance supposition international	
H	Amende			G Gross re	eceipts \$ 4,872,709	
H				roup return for subordinates? Yes No		
	Applicati	ion pending	A DECEMBER OF THE PROPERTY OF		sincluded? Yes No	
_	_		TI(b) Are an o		a list. (see instructions)	
<u>!</u>		mpt status:	BE 301(0)(0)			
<u>, , , , , , , , , , , , , , , , , , , </u>	Website		1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	1	No. Control Control Control Control	
			E constitue Tract Tracticum Carlot	M State	of legal domicile: CA	
	art I	Summ) l ·	Alli i- t	
2	1		escribe the organization's mission or most significant activities: The mission of The P			
30			is people of the Amazon Rainforest to preserve their lands and culture, and using insights gaine	d from th	eir work, to educate and	
Activities & Governance	015		dividuals everywhere to bring forth a thriving, just, and sustainable world.			
Ver	2		is box $ ightharpoonup$ if the organization discontinued its operations or disposed of more than	25% of	its net assets.	
ဗိ	3		of voting members of the governing body (Part VI, line 1a)	3	7	
9	4	Number	of independent voting members of the governing body (Part VI, line 1b)	4	6	
ties	5	Total nu	mber of individuals employed in calendar year 2013 (Part V, line 2a)	5	42	
ξ	6	Total nu	mber of volunteers (estimate if necessary)	6	261	
Ac	7a	Total un	related business revenue from Part VIII, column (C), line 12	7a	0	
	b	Net unre	lated business taxable income from Form 990-T, line 34	7b	0	
			Prior Ye	ar	Current Year	
•	8	Contribu	tions and grants (Part VIII, line 1h)	,115,754	4,264,364	
ng	9		Six of the first of the second	575,630	603,669	
Revenue	10		ent income (Part VIII, column (A), lines 3, 4, and 7d)	357	122	
	11		venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	40,843	3,012	
	12			,732,584	4,871,167	
_	13			853,022	824,094	
	14		paid to or for members (Part IX, column (A), line 4)	0		
0.20	4.5			,788,552		
Expenses	16a		carret compensation, or project contents (and in a content (), made a con-	0		
en	10a		onal fundraising fees (Part IX, column (A), line 11e)			
X	b		istration g experiese (r are ix, estation (e), mile 25)	,548,846	1,860,552	
	17		, , , , , , , , , , , , , , , , , , , ,	7		
	18			,190,420		
_	19	Revenue		457,836)		
Sor	20 21 22		Beginning of Cu		End of Year	
sset	20		sets (Part X, line 16)	814,895		
etA	21		pilities (Part X, line 26)	862,008	7,000,000,000,000	
			ets or fund balances. Subtract line 21 from line 20	(47,113)	259,753	
ŀ	art II	Signa	ture Block			
			ury, I declare that I have examined this return, including accompanying schedules and statements, and to the		my knowledge and belief, it is	
tr	ue, correc	ct, and com	olete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowle	age.		
	gn	Sig	nature of officer Dat	te	0/01/0011	
H	ere	В	asil R Twist, Jr., CEO	0	710412014	
		Typ	e or print name and title			
D.	aid	Print/T	ype preparer's name Preparer's signature Date	Check	T if PTIN	
		25	, and the second	self-em		
	repare		name ► Firm	n's EIN ▶		
U	se On	II y		ne no.		
M	ay the I		ss this return with the preparer shown above? (see instructions)		Yes No	
			The second section where the discussion is a second second section of the second secon			

	990 (2013) The Pachamama Alliance Statement of Program Service Accomplishments	94-3249793	
	Check if Schedule O contains a response or note to any line in this Part III		7
	Briefly describe the organization's mission:		•
	The mission of The Pachamama Alliance is to empower indigenous people of the Amazon rainforest to preserve their lands a	nd culture	and,
	using insights gained from that work, to educate and inspire individuals everywhere to bring forth a thriving, just and sustaina	ble world.	
	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?		
	If "Yes," describe these new services on Schedule O.	☐ Yes	∐ N
	Did the organization cease conducting, or make significant changes in how it conducts, any program		
	services?	□ v	
	If "Yes," describe these changes on Schedule O.	_ Yes	∐ N
	Describe the organization's program service accomplishments for each of its three largest program services,		
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocathe total expenses, and revenue, if any, for each program service reported.	as mea cations t	surea o othe
1	/ () () () () () () () () () (5,77	7_)
	Awakening the Dreamer, Education, Up to Us. Communication and Outreach		
	The Up to Us initiative is a pathway to educate, inspire, and engage leaders who are committed to carrying out TPA's mission	n. The firs	step
	engagement is the Awakening the Dreamer Symposium. The Pachamama Alliances's flagship workshop, it has now been de		
	countries and 13 languages, thanks to more than 4,000 trained volunteer facilitators worldwide who are bringing the symposi	um to the	r
	communities and allied organizations		
	communities and allied organizations.		
	communities and allied organizations		
	communities and allied organizations.		
	communities and allied organizations.		
	communities and allied organizations.		
	communities and allied organizations.		
	communities and allied organizations.		
	communities and allied organizations.		
,	communities and allied organizations.		
)	(Code:) (Expenses \$ 932,070 including grants of \$ 778,367) (Revenue \$ Fundacion Pachamama, The 11th Round Project, Rights of Nature, Junglemamas, Solar Project		
)	(Code:) (Expenses \$ 932,070 including grants of \$ 778,367) (Revenue \$ Fundacion Pachamama, The 11th Round Project, Rights of Nature, Junglemamas, Solar Project Indigenous Voices Speak Up for Preservation:)
•	(Code:) (Expenses \$ 932,070 including grants of \$ 778,367) (Revenue \$ Fundacion Pachamama, The 11th Round Project, Rights of Nature, Junglemamas, Solar Project Indigenous Voices Speak Up for Preservation: Fundacion Pachamama (FP) provided funding for numerous workshops and assemblies so that indigenous communities of the state of the	ne Ecuadi)
•	(Code:) (Expenses \$ 932,070 including grants of \$ 778,367) (Revenue \$ Fundacion Pachamama, The 11th Round Project, Rights of Nature, Junglemamas, Solar Project Indigenous Voices Speak Up for Preservation: Fundacion Pachamama (FP) provided funding for numerous workshops and assemblies so that indigenous communities of the Amazon were fully informed about plans for oil development in their lands, and so that their voices calling for territorial preservation.	he Ecuadovation we) orian
•	(Code:) (Expenses \$932,070 including grants of \$778,367) (Revenue \$	he Ecuadovation we) orian
•	(Code:) (Expenses \$932,070 including grants of \$778,367) (Revenue \$	he Ecuadovation we) orian
•	(Code:) (Expenses \$	he Ecuadovation we) orian
•	(Code:) (Expenses \$ 932,070 including grants of \$ 778,367) (Revenue \$ Fundacion Pachamama, The 11th Round Project, Rights of Nature, Junglemamas, Solar Project Indigenous Voices Speak Up for Preservation: Fundacion Pachamama (FP) provided funding for numerous workshops and assemblies so that indigenous communities of the Amazon were fully informed about plans for oil development in their lands, and so that their voices calling for territorial preservations of the Amazon and a commitment to help the Ecuadorean government achieve its legitimate and necessary long ter development and poverty reduction goals for its people. People of Sarayaku Receive Restitution Payment:	he Ecuado vation we nd cultura m social	orian
•	(Code:) (Expenses \$ 932,070 including grants of \$ 778,367) (Revenue \$ Fundacion Pachamama, The 11th Round Project, Rights of Nature, Junglemamas, Solar Project Indigenous Voices Speak Up for Preservation: Fundacion Pachamama (FP) provided funding for numerous workshops and assemblies so that indigenous communities of the Amazon were fully informed about plans for oil development in their lands, and so that their voices calling for territorial preservation: The fundacion Pachamama (FP) provided funding for numerous workshops and assemblies so that indigenous communities of the Amazon were fully informed about plans for oil development in their lands, and so that their voices calling for territorial preservations of the Amazon and a commitment to help the Ecuadorean government achieve its legitimate and necessary long territorials of the Amazon and a commitment to help the Ecuadorean government achieve its legitimate and necessary long territorial preservations of the Amazon and a commitment to help the Ecuadorean government achieve its legitimate and necessary long territorial preservations. People of Sarayaku Receive Restitution Payment: With guidance from FP's lawyers, the people of Sarayuku obtained a favorable ruling with the InterAmerican Court for Humanimum and powers.	ne Ecuad vation we nd cultura m social	orian re
)	(Code:) (Expenses \$	ne Ecuad vation we nd cultura m social	orian re
> ·	(Code:) (Expenses \$ 932,070 including grants of \$ 778,367) (Revenue \$ Fundacion Pachamama, The 11th Round Project, Rights of Nature, Junglemamas, Solar Project Indigenous Voices Speak Up for Preservation: Fundacion Pachamama (FP) provided funding for numerous workshops and assemblies so that indigenous communities of the Amazon were fully informed about plans for oil development in their lands, and so that their voices calling for territorial preservation: The fundacion Pachamama (FP) provided funding for numerous workshops and assemblies so that indigenous communities of the Amazon were fully informed about plans for oil development in their lands, and so that their voices calling for territorial preservations of the Amazon and a commitment to help the Ecuadorean government achieve its legitimate and necessary long territorials of the Amazon and a commitment to help the Ecuadorean government achieve its legitimate and necessary long territorial preservations of the Amazon and a commitment to help the Ecuadorean government achieve its legitimate and necessary long territorial preservations. People of Sarayaku Receive Restitution Payment: With guidance from FP's lawyers, the people of Sarayuku obtained a favorable ruling with the InterAmerican Court for Humanimum and powers.	ne Ecuad vation we nd cultura m social	orian re
	(Code:) (Expenses \$	he Ecuado vation we nd cultura m social n Rights.	orian re l
	(Code:) (Expenses \$932,070 including grants of \$778,367) (Revenue \$	ne Ecuad vation we nd cultura m social) orian re he
	(Code:) (Expenses \$932,070 including grants of \$778,367) (Revenue \$	he Ecuad vation we nd cultura m social n Rights. nmitted to) orian re he
	(Code:) (Expenses \$ 932,070 including grants of \$ 778,367) (Revenue \$ Fundacion Pachamama, The 11th Round Project, Rights of Nature, Junglemamas, Solar Project Indigenous Voices Speak Up for Preservation: Fundacion Pachamama (FP) provided funding for numerous workshops and assemblies so that indigenous communities of it Amazon were fully informed about plans for oil development in their lands, and so that their voices calling for territorial preser clearly heard. This was all part of FP's overall effort to find common ground between the need to protect the environmental ar richness of the Amazon and a commitment to help the Ecuadorean government achieve its legitimate and necessary long ter development and poverty reduction goals for its people. People of Sarayaku Receive Restitution Payment: With guidance from FP's lawyers, the people of Sarayuku obtained a favorable ruling with the InterAmerican Court for Human government was required to pay reparation of more than one million dollars for damage to their land and people, and has cor up the more than 3000 pounds of explosives left in their territory. (Code:) (Expenses \$ 500,030 including grants of \$ 4,000) (Revenue \$ Pachamama Journeys	he Ecuadovation we many social many social s	prian re he
b	(Code:	he Ecuadovation we many social many social s	prian re he
	(Code:) (Expenses \$ 932,070 including grants of \$ 778,367) (Revenue \$ Fundacion Pachamama, The 11th Round Project, Rights of Nature, Junglemamas, Solar Project Indigenous Voices Speak Up for Preservation: Fundacion Pachamama (FP) provided funding for numerous workshops and assemblies so that indigenous communities of it Amazon were fully informed about plans for oil development in their lands, and so that their voices calling for territorial preser clearly heard. This was all part of FP's overall effort to find common ground between the need to protect the environmental ar richness of the Amazon and a commitment to help the Ecuadorean government achieve its legitimate and necessary long ter development and poverty reduction goals for its people. People of Sarayaku Receive Restitution Payment: With guidance from FP's lawyers, the people of Sarayuku obtained a favorable ruling with the InterAmerican Court for Human government was required to pay reparation of more than one million dollars for damage to their land and people, and has cor up the more than 3000 pounds of explosives left in their territory. (Code:) (Expenses \$ 500,030 including grants of \$ 4,000) (Revenue \$ Pachamama Journeys	he Ecuadovation we many social many social s	orian re
	(Code:	he Ecuadovation we many social many social s	orian re
	(Code:	he Ecuadovation we many social many social s	prian re l
	(Code:	he Ecuadovation we many social many social s	prian re l

4d Other program services (Describe in Schedule O.) (Expenses \$ 210,467 including grants of \$

40,727) (Revenue \$

4e Total program service expenses ▶

3,734,085

1 - 200001-00-0			Van	Ma
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	4	Yes	No
•		1	<u> </u>	_
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	/	
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		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		/
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		/
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		_
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		~
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		_
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		,
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		/
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	,	No. Working Street, St
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		_
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	_	
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		_
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		/
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	_	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	1	
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		~
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	- 프로그램 - 1980년 - 1982년 -	14a		1
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	114		*
b	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b	_	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	_	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16	-	/
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		_
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		-
19	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		
20 a			-	1
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a	-	/
n	in resito line zoa, did the organization attach a copy of its addited financial statements to this return?	20b		

Part	Checklist of Required Schedules (continued)		,,,	-g
6.00			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	/	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		_
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			_
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		/
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
h	through 24d and complete Schedule K. If "No," go to line 25a	24a 24b		~
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		_
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		_
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		,
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or			
27	disqualified persons? If so, complete Schedule L, Part II	26		~
21	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		,
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV . A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28a	EGI SANDONI III.	~
	Schedule L, Part IV	28b		/
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	/	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	/	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		~
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		,
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		,
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		/
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		/
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		/
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			Ť
36	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	35b		_
36	related organization? If "Yes," complete Schedule R, Part V, line 2	36		~
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,			
38	Part VI	37		~
	19? Note. All Form 990 filers are required to complete Schedule O	38	/	
		Fon	n 99 0	(2013)

Part				_
	Check if Schedule O contains a response or note to any line in this Part V			
10	Estable and the Burnett III Bu		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 41 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 Did the organization comply with backup withholding rules for reportable payments to vendors and			
•	reportable gaming (gambling) winnings to prize winners?	1.	,	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1c	1	
	Statements, filed for the calendar year ending with or within the year covered by this return 42			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	
	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		1
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, 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		1
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		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
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			
h	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		/
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	۵.		
7	gifts were not tax deductible?	6b		
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		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		/
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	710		_
	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			1
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	Arristance control	1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		T .
h	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 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.			
a	Did the organization make any taxable distributions under section 4966?	9a		-
b 10	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
а	lateral and a state of the stat			
b	Gross receipts, included on Form 990, Part VIII, line 12	-		
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources	1		
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	a contambino cos	manufacture and a
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state?	13a		
-	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?	14a		~
D	II Les. Has it lied a conflictor to report these payments of "IVO." provide an explanation in Schadula D	14h	1	1

Part '	Governance, Management, and Disclosure For each "Yes" response to lines 2 thr response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes				
	Check if Schedule O contains a response or note to any line in this Part VI				
Section	on A. Governing Body and Management			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 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.	1a 7		105	
ь 2	Enter the number of voting members included in line 1a, above, who are independent. Did any officer, director, trustee, or key employee have a family relationship or a business reany other officer, director, trustee, or key employee?	e se se se s	2	_	
3	Did the organization delegate control over management duties customarily performed by or usupervision of officers, directors, or trustees, or key employees to a management company or other		3		/
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 99 Did the organization become aware during the year of a significant diversion of the organization Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to eone or more members of the governing body?	n's assets? elect or appoint	4 5 6		\ \ \ \
b	Are any governance decisions of the organization reserved to (or subject to approval stockholders, or persons other than the governing body?		7b		~
8	Did the organization contemporaneously document the meetings held or written actions und the year by the following:				
а b 9	The governing body?	t be reached at	8a 8b	/	
Socti	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O ion B. Policies (This Section B requests information about policies not required by the		9	odo)	
Secu	on B. Policies (This Section B requests information about policies not required by the	internal neveri	ue C	Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?		10a		~
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before		10b 11a	/	-
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	o ming the form:	Ha	~	
12a b	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give		12a 12b	1	
С	Did the organization regularly and consistently monitor and enforce compliance with the prescribe in Schedule O how this was done	oolicy? If "Yes,"	12c	/	
13 14 15	Did the organization have a written whistleblower policy?		13	7	
a b	The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	* * * * *	15a 15b		
16a	with a taxable entity during the year?		16a		-
b	participation in joint venture arrangements under applicable federal tax law, and take steps to organization's exempt status with respect to such arrangements?	o safeguard the	16b		
	ion C. Disclosure				
17 18	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, a available for public inspection. Indicate how you made these available. Check all that apply.	,	n 501	(c)(3)s	only)
19	✓ Own website ☐ Another's website ✓ Upon request ☐ Other (explain in Sci Describe in Schedule O whether (and if so, how) the organization made its governing docume financial statements available to the public during the tax year.	nts, conflict of int			y, and
20	State the name, physical address, and telephone number of the person who possesses the beorganization: ► Basil R Twist, Jr. (415) 561-4522 Presidio Building 1009, San Francisco, CA 94129	ooks and records	of the	Э	

Form	990	(201	3)	The	Pacha	mama	ΔIII	anc	۰

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. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

☐ Check this box if neither the organization no	r any related	d orga	aniz	atio	n c	ompe	nsa	ted any curren	t officer, director	r, or trustee.
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, ı	ot ch unles	Pos eck s pe	rson	than of the state	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Gordon Starr Chairman of the Board	1:00	~						0	0	0
(2) Lynne Twist Director	10:00	/						0	0	0
(3) John Perkins Director	1:00	-						0	0	0
(4) Michael Olmstead Director	1:00	1						9,000	0	0
(5) Catherine Parrish Director	1:00	,						0	0	0
(6) Rev Deborah Johnson Director	1:00	,						0		0
(7) Tammy White Director	1:00	,						0		0
(8) Basil R Twist, Jr CEO	45:00	•		.,				104,313		4,244
(9) Patricia Usner Secretary	45:00			✓ ✓				78,204		6,884
(10) Tatiana Tilley Treasurer	45:00			,				82,136		5,444
(11)				-						3, 131 1
(12)										
(13)										
(14)										

Part	Section A. Officers, Directors, Trust	ees, Key E	mploy	yees			lighes	st C	ompensated E	mployees (cont	inued)		
	100	(C) Position											
	(A)	(B)	(do not check more than o						(D)	(E)	(F)		
	Name and title	Average hours per					is both		Reportable compensation	Reportable compensation from			
		week (list any	officer and a director/tru					-	from	related	other		
		hours for related	divi	stitu	Officer	ey e	ighe	Former	the organization	organizations (W-2/1099-MISC)	compensation from the		
		organizations below dotted		tion	-	Key employee	st co	, a	(W-2/1099-MISC)		organization		
		line)	trus	al tru		уее	ompe				and related organizations		
			tee	Institutional trustee		139	Highest compensated employee						
(15)							ğ						
(16)													
(17)										- 0			
(18)													
(19)													
(20)													
(21)													
(22)													
(23)						\vdash							
(24)								_					
(25)			-								.0		
1b	Sub-total							>	273,653		16,572		
c	Total from continuation sheets to Part							•	0		0		
d	Total (add lines 1b and 1c)							<u> </u>	273,653		16,572		
	Total number of individuals (including bur reportable compensation from the organ		d to th	iose	e list	ted	above	e) w	no received m	ore than \$100,0	000 of		
3	Did the organization list any former of	ficer direc	tor o	or tr	riisti	00	kev (-mr	ployee or high	nest compensa	Yes No		
	employee on line 1a? If "Yes," complete	Schedule J	fors	uch	ind	livid	ual				. 3 🗸		
4	For any individual listed on line 1a, is the												
	organization and related organizations individual									nedule J for si	Antalaminated capthorasi-sactamental		
5	Did any person listed on line 1a receive of									zation or individ	. 4 /		
	for services rendered to the organization										PERSONAL CONTRACTOR PROCESSOR		
Section	on B. Independent Contractors												
1	Complete this table for your five highest												
	compensation from the organization. Repyear.	oort compe	nsati	on fo	or ti	he c	alenc	dar	year ending wi	th or within the	organization's tax		
	(A) Name and business add	tress							(B) Description of s	services	(C) Compensation		
								H					
2	Total number of independent contractor	ors (includi	na bi	ut n	not	limi	ted to	o th	hose listed ah	ove) who			
200	received more than \$100,000 of compen							- 5	0				

Form 9	90 (201	3) The Pachamama Alliance						94-3249793 Page 9
		Statement of Reve						
		Check if Schedule O	contains a re	esponse or note to	any line in this (A) Total revenue	Part VIII (B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts	1a	Federated campaigns	la					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .			1			
	С	Fundraising events .	10					
Contributions, Gifts, and Other Similar Ar	d	Related organizations	10	t l				
imi	е	Government grants (con		9				
tion er S	f	All other contributions, gi			*			
효		and similar amounts not inc						
ontro	g	Noncash contributions include						
	h	Total. Add lines 1a-1	f		4,264,364			
Program Service Revenue		T 15 / 15		Business Code	507.000	507.000		
9/9	2a	Travel Referral Fees		900099	597,892	597,892		
В	b	Other Event Income		900099	5,777	5,777		
Δį	С			-				
Se	d							
ram	9	A.II.						
rog	Ť	All other program sen			603,669	- 00 -	W	
	g 3	Total. Add lines 2a–2 Investment income			603,669			
	3	and other similar amo			122			122
	4	Income from investmen			122			124
	4		- 35					
	5	Royalties	(i) Real	(ii) Personal	Mark to the Mark the Mark to t			
	6-	O	(i) Heal	(ii) i ersoriai				
	6a	Gross rents	-					
	b	Less: rental expenses						
	c	Rental income or (loss)	(1)					
	d	Net rental income or Gross amount from sales of	(i) Securities	▶ (ii) Other				
	7a	assets other than inventory	(i) Securities	(ii) Other				
	ь	Less: cost or other basis	:					
		and sales expenses .						
	_							
	c d	Gain or (loss) Net gain or (loss)				AND THE RESERVE AND THE		
	u	ivet gain or (loss) .				STACK THE SHIP OF THE STACK	17 W. W. W. W. W. W. W. W.	
en	8a	Gross income from fu	ındraising					
	Oa	events (not including \$	ariarasirig					
Other Reven		of contributions report	ed on line 1c)					
7		See Part IV, line 18 .		а				
ţ	b	Less: direct expense		b				1
0	c	Net income or (loss) t			SUNGAUVE MELESTRE BETTER SERVICE		in page average and a suggestion	A TO SERVICE OF THE ROLL OF THE SERVICE OF THE SERV
		Gross income from ga						
							24	
	b			b				
	С	Net income or (loss)		ctivities >	Employed and Company of the International Authorities of Company			A CONTRACTOR OF THE PROPERTY O
		Gross sales of in returns and allowance	nventory, less	s				
	L.			4				
	b	Less: cost of goods s Net income or (loss)			3,012	3,012		
	С	Miscellaneous F		Business Code	3,012	3,012		
	11a		10761106	Dusilless Code				
	b							+
	0							+
	٦,	All other revenue .						+
	u	All other revenue		1			I .	

4,871,167

606,681

Total revenue. See instructions.

122

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must com-

Sectio	n 501(c)(3) and 501(c)(4) organizations must con	nplete all columns. Al	ll other organization	s must complete coll	umn (A).
	Check if Schedule O contains a respon	se or note to any lin	e in this Part IX .		🗹
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	824,094	824,094		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	269,256	207,183	44,463	17,610
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 8	Other salaries and wages	1,304,740	1,068,111	13,394	223,235
9	Other employee benefits	156,648	113,746	21,421	21,481
10	Payroll taxes	143,152	112,079	21,167	9,906
11	Fees for services (non-employees):				
а	Management				
b	Legal				
С	Accounting	13,260		13,260	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees		71 -11/11 -11/11 -11/11		
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	695,945	590,676	11,816	93,453
12	Advertising and promotion	14,009	13,396	1	613
13	Office expenses	152,715	46,238	65,685	40,792
14	Information technology	180,851	144,260	34,572	2,019
15	Royalties				
16	Occupancy	110,837	86,779	7,670	16,388
17	Travel	454,557	400,667	20,441	33,449
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	183,374	109,631	3,635	70,108
20	Interest	12,761		12,761	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	6,314		6,314	
23	Insurance	9,136	4,218	4,626	292
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
a	2				
b					
C					
d	All all	00.000	10.007	40 470	0.050
e 05	All other expenses Total functional expenses. Add lines 1 through 24e	33,836 4,565,485	13,007 3,734,085	18,179 299,404	2,650 531,996
25 26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if	4,303,403	3,734,005	299,404	531,996
1-1	following SOP 98-2 (ASC 958-720)				F 990 (2010)

Form 990 (2013) The Pachamama Alliance

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this	Part X		
		,	(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		1	
	2	Savings and temporary cash investments	271,743	2	386,628
	3	Pledges and grants receivable, net	416,278	3	94,463
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, director			
Vi		trustees, key employees, and highest compensated employees Complete Part II of Schedule L	es.	5	
6	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers as sponsoring organizations of section 501(c)(9) voluntary employees' beneficial organizations (see instructions). Complete Part II of Schedule L	nd ary	6	
Assets	7	Notes and loans receivable, net).*(7	
Ass	8	Inventories for sale or use		8	
- 20	9	Prepaid expenses and deferred charges	57,037	9	48,775
	10a	Land, buildings, and equipment: cost or			
			783		
	b	M	505 16,142	10c	16,278
	11	Investments—publicly traded securities	3,695	11	7,338
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11	50,000	13	50,000
	14	Intangible assets		14	
I	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	814,895	16	603,482
	17	Accounts payable and accrued expenses	183,403	17	93,550
	18	Grants payable		18	
	19	Deferred revenue	68,605	19	50,200
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D $\mbox{.}$		21	Output to the second se
es	22	Loans and other payables to current and former officers, director			
Ħ		trustees, key employees, highest compensated employees, are	with respect to the residence of the second		
Liabilities		disqualified persons. Complete Part II of Schedule L	60,000	22	
_	23	Secured mortgages and notes payable to unrelated third parties	550,000	23	100.070
	24	Unsecured notes and loans payable to unrelated third parties	550,000	24	199,979
	25	Other liabilities (including federal income tax, payables to related thi parties, and other liabilities not included on lines 17-24). Complete Part			
		of Schedule D	^	25	
	26	Total liabilities. Add lines 17 through 25	862,008		343,729
_	20	Organizations that follow SFAS 117 (ASC 958), check here ▶ □		20	77.10
98		complete lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets	(297,113)	27	(112,266)
Sale	28	Temporarily restricted net assets	250,000	(C)	372,019
d E	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ a complete lines 30 through 34.	and		
0 8	30	Capital stock or trust principal, or current funds		30	
set	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds.		32	
let	33	Total net assets or fund balances		_	259,753
2	34	Total liabilities and net assets/fund balances		_	603,482

orm 99	0 (2013) The Pachamama Alliance		94-324979	33 Pa	ge 12
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		4,87	1,167
2	Total expenses (must equal Part IX, column (A), line 25)	2		4,56	5,485
3	Revenue less expenses. Subtract line 2 from line 1	3		308	5,682
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		(47	,113)
5	Net unrealized gains (losses) on investments	5			1184
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		259	9,753
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				1
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain in			
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		/
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	piled 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	/	
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on a			
	separate basis, consolidated basis, or both:				
	☑ 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 o				
	of the audit, review, or compilation of its financial statements and selection of an independent account		2c	/	
	If the organization changed either its oversight process or selection process during the tax year, ex	cplain in			
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in	110000000000000000000000000000000000000		HIII COMMENT PROPERTY
	the Single Audit Act and OMB Circular A-133?	*	3a		1
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits.	3b		
			Forn	n 990	(2013)

SCHEDULE A (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.

2013

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

	of the organization achamama Alliance							Employer id	entification 94-32		_
Pari	Marie Paris - San President San President	or Public Char	rity Status (All orga	nizations	e must c	omnlete	this na	rt \ Saa ir			_
The o	rganization is not	a private founda	tion because it is: (For hes, or association of	r lines 1 t	hrough 1	1, check	only one	box.)		, in its.	_
2	A school descri	ibed in section	170(b)(1)(A)(ii). (Attac	h Sched	ule E.)						
			spital service organiza on operated in conjunc)(b)(1)(A)	(iii) Enter the	
	hospital's nam	e, city, and state	9 :								
	section 170(b)	(1)(A)(iv). (Comp							vernment	al unit described	in
	An organizatio	n that normally	nment or governmenta receives a substantia (A)(vi). (Complete Par	l part of					it or fron	n the general publ	ic
			n section 170(b)(1)(A)								
9	receipts from support from	activities related gross investme	receives: (1) more that to its exempt functi ent income and unrel fter June 30, 1975. Se	ions-sul ated bus	oject to c siness tax	ertain ex xable inc	ceptions ome (les	s, and (2) ss section	no more	e than 331/3% of i	ts
	No.	100	operated exclusively								
11	purposes of o	ne or more pub	nd operated exclusive plicly supported organ describes the type of	nizations	described	d in secti	on 509(a	a)(1) or se	ection 50	9(a)(2). See section	
е		ndation manage	II c Type III that the organization ers and other than one	is not co	ntrolled d	lirectly or	indirectl	y by one	or more		
f		ation received a heck this box	a written determination	on from	the IRS t	that it is	a Type	I, Type I	I, or Typ	be III supporting	٦
g	Since August following person		he organization accep	oted any	gift or co	ontributio	n from a	any of the	r)		_
			ndirectly controls, eithody of the supported						d in (ii) a	nd Yes No	_
	2. 2		on described in (i) abo							11g(ii)	_
h			a person described in ion about the support					× × ×	200 200 10	11g(iii)	_
1/0/16	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the o	organization sted in your document?	(v) Did y the organ col. (i)	ou notify nization in of your port?	organizat (i) organi	s the tion in col. zed in the S.?	(vii) Amount of moneta support	ary
				Yes	No	Yes	No	Yes	No		_
(A)											
(B)			9								
(C)											
(D)											
(E)											

Total

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.)

Section	on A. Public Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	4,101,867	3,659,426	2,778,314	3,115,754	4,264,364	17,919,725
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	4,101,867	3,659,426	2,778,314	3,115,754	4,264,364	17,919,725
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						855,194
6	Public support. Subtract line 5 from line 4.						17,064,531
	on B. Total Support	WAS SEE HEISSAME TO BE SOURCE			Am 1911 3,5	percential community control	
Calen	dar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	4,101,867	3,659,426	2,778,314	3,115,754	4,264,364	17,919,725
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2	118	1,756	357	122	2,355
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						17,922,080
12	Gross receipts from related activities, etc					12	2,285,050
13	First five years. If the Form 990 is for the				70		
	organization, check this box and stop he						🕨 🗆
	on C. Computation of Public Suppor						
14	Public support percentage for 2013 (line					14	95.22 %
15 16a	Public support percentage from 2012 Scl					15 mara a	97.02 %
104	331/3% support test—2013. If the organi box and stop here. The organization qua						
b	331/3% support test—2012. If the organization qua						to the same of the
D	check this box and stop here . The organ						and the second second
170	T. (72)						_
17a	10%-facts-and-circumstances test—2 10% or more, and if the organization me Part IV how the organization meets the "torganization	ets the "facts- facts-and-circu	and-circumsta imstances" tes	nces" test, che st. The organiz	eck this box ar ation qualifies	nd stop here. E as a publicly s	xplain in upported
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organiza Explain in Part IV how the organization m	tion meets the neets the "facts	"facts-and-ci s-and-circums	rcumstances" tances" test. T	test, check th he organizatio	nis box and st in qualifies as a	op here. a publicly
18	supported organization	id not check a	box on line 13	, 16a, 16b, 17a	a, or 17b, chec	k this box and	see

Schedul	e A (Form 990 or 990-EZ) 2013 The Pachamama Alliance	20				94-32	49793 Page 3
Part	Support Schedule for Organiza	tions Descr	ibed in Secti	on 509(a)(2)			
	(Complete only if you checked the	e box on line	9 of Part I o	r if the organi	zation failed t	o qualify und	der Part II.
	If the organization fails to qualify	under the te	sts listed belo	ow, please co	mplete Part I	l.)	
Section	on A. Public Support						
Calen	dar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees						
_	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf		1				
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b		le Calles Alon Harris Alon State				
8	Public support (Subtract line 7c from						
Casti	line 6.)						
	on B. Total Support	() 0000	#10040		/ D 00/0		
	dar year (or fiscal year beginning in) Amounts from line 6	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
10a	Gross income from interest, dividends, payments received on securities loans, rents,						
Na. C	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .						
b	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less						
Na. C	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						
b	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						
b	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						
b	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 Add lines 10a and 10b Net income from unrelated business						
b	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						
b c 11	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 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						
b	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 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 Other income. Do not include gain or						
b c 11	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 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						
b c 11	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 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 Other income. Do not include gain or loss from the sale of capital assets						
c 11	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 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 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
c 11	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. 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 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	ne organizatio	n's first, secon	d, third, fourth	n, or fifth tax ye	ear as a secti	on 501(c)(3)
c 11 12	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. 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 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	The second secon					
b c 11 12 13 14	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 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 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.)	re			n, or fifth tax ye		
b c 11 12 13 14	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 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 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.)	re rt Percentag	e	3 3 3 Y S			
b c 11 12 13 14 Secti	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 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 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.)	re rt Percentag 8, column (f) d	e ivided by line 1			15	🕨 🗆
b c 11 12 13 14 Secti 15 16	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 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 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.). First five years. If the Form 990 is for the organization, check this box and stop here on C. Computation of Public Support Public support percentage for 2013 (line Public support percentage from 2012 Scion D. Computation of Investment In	rt Percentag 8, column (f) d hedule A, Part come Perce	e ivided by line 1 III, line 15 .	3, column (f))		15	▶ □
b c 11 12 13 14 Secti 15 16	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 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 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	re	e ivided by line 1 III, line 15 ntage nn (f) divided b	3, column (f))	mn (f))	15 16	▶ □
b c 11 12 13 14 Secti 15 16 Secti	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 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 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	re	e ivided by line 1 III, line 15 ntage nn (f) divided b	13, column (f))	mn (f))	15 16	% % %
b c 11 12 13 14 Secti 15 16 Secti 17	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 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 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for the organization, check this box and stop here on C. Computation of Public Support Public support percentage for 2013 (line Public support percentage from 2012 Scion D. Computation of Investment In Investment income percentage from 2013 (line Public support tests—2013. If the organization, support tests—2013. If the organization of Public Support percentage from 2013	rt Percentag 8, column (f) d hedule A, Part come Perce (line 10c, colur 2 Schedule A, lization did not	e ivided by line 1 III, line 15 ntage nn (f) divided be Part III, line 17 check the box	y line 13, colu x on line 14, a	mn (f))	15 16 17 18 nore than 331/2	% % % % %, and line
c 11 12 13 14 Secti 15 16 Secti 17 18	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 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 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.)	rt Percentag 8, column (f) d hedule A, Part come Perce (line 10c, colur 2 Schedule A, iization did not and stop here	e ivided by line 1 III, line 15 ntage nn (f) divided be Part III, line 17 check the boo. The organizati	by line 13, column (f)) oy line 13, colu ox on line 14, a	mn (f))	15 16 17 18 nore than 331/x orted organiza	% % % % %, and line tion . ▶ □
c 11 12 13 14 Secti 15 16 Secti 17 18	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 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 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for the organization, check this box and stop here on C. Computation of Public Support Public support percentage for 2013 (line Public support percentage from 2012 Scion D. Computation of Investment In Investment income percentage from 2013 (line Public support tests—2013. If the organization, support tests—2013. If the organization of Public Support percentage from 2013	rt Percentag 8, column (f) d hedule A, Part come Perce line 10c, colur 2 Schedule A, nization did not and stop here zation did not de	e ivided by line 1 III, line 15 ntage nn (f) divided b Part III, line 17 check the box The organizations a box on	by line 13, column (f)) x on line 14, a on qualifies as line 14 or line	mn (f))	15 16 17 18 nore than 331/3 orted organiza 6 is more than	% % % % % % % % % % , and line tion . ▶ □

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (F	form 990 or 990-EZ) 2013 The Pachamama Alliance	94-3249793	P	Page 4
Part IV	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line Part III, line 12. Also complete this part for any additional information. (See instructions).	17a or	17b; a	ind

SCHEDULE D (Form 990)

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.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990.

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

The Pachamama Alliance 94-3249793 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds Total number at end of year 1 2 Aggregate contributions to (during year) . 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 2a **b** Total acreage restricted by conservation easements 2b 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 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 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 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) 9 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 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 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: **b** Assets included in Form 990, Part X

Part	III Organizations Maintaining	Colle	ections of	Art, His	torical 1	reasures, o	or Ot	her Similar Ass	ets (continued)
3	Using the organization's acquisition, a collection items (check all that apply):	acces							
а	☐ Public exhibition			d	□ Loan	or exchange	prog	rams	
b	☐ Scholarly research				☐ Othe	r	p. 09		
25.75	☐ Preservation for future generations	3			_ 00				
4	Provide a description of the organizat		collections a	and expl	ain how t	hev further th	ne ord	anization's exem	ot purpose in Part
	XIII.	35.10		an on one		rioy raitinor ti	.0 0,9	ameadorr o oxorri	pr parpood in r air
5	During the year, did the organization	solici	t or receive	donation	ns of art.	historical trea	asure	s or other similar	**
	assets to be sold to raise funds rather								☐ Yes ☐ No
Part				3.111.	Property of the Committee of the Committ			3 _3	
	Complete if the organization			" to For	m 990. F	Part IV. line 9	or r	eported an amo	ount on Form
	990, Part X, line 21.				000, .	are 11, 11110 c	,	oportod arraine	and off form
1a	Is the organization an agent, trustee,	custo	odian or oth	ner interr	nediary fo	or contributio	ns or	other assets not	
	included on Form 990, Part X?								☐ Yes ☐ No
b	If "Yes," explain the arrangement in Pa								eee
1.550	, co, coopiant the arrangement min		rana comp.	010 1110 11	ono wing t	abio.		Am	nount
С	Beginning balance						10		
d	Additions during the year						10		
е	Distributions during the year						1e		
f	Ending balance						1f		
2a	Did the organization include an amoun								□ Vos □ No
	If "Yes," explain the arrangement in Pa								
	V Endowment Funds.	Car C / (II	i. Official field	o ii tiio o	Apidilatio	irriao beeri p	TOVICE	sammar Am .	· · · Ц
	Complete if the organization	ansv	vered "Yes	" to For	m 990. F	Part IV. line 1	10.		
			Current year		ior year	(c) Two years		(d) Three years back	(e) Four years back
1a	Beginning of year balance		***************************************		Mer Rocky				
b	Contributions								
c	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 t	the cu	rrent vear er	nd balan	ce (line 1	column (a))	held	as:	
а	Board designated or quasi-endowmen		,	%	(;	5,(,)			
b		%							
С	Temporarily restricted endowment ▶		%						
	The percentages in lines 2a, 2b, and 2		ould equal 10	00%.					
3a	Are there endowment funds not in the				ization th	at are held a	nd ad	ministered for the	Э
	organization by:	•							Yes No
	(i) unrelated organizations								3a(i)
	(ii) related organizations								3a(ii)
b	If "Yes" to 3a(ii), are the related organ								3b
4	Describe in Part XIII the intended uses						8 8	5	
Part									
	Complete if the organization			" to For	m 990. F	art IV, line	11a. S	See Form 990. F	Part X, line 10.
	Description of property		(a) Cost or o			or other basis		Accumulated	(d) Book value
	**************************************		(investm			other)		epreciation	
1a	Land					400			
b	Buildings						and the state of the state of	A STATE OF THE STA	
c	Leasehold improvements								
d	Equipment	2				55,533		46,005	9,528
е	Other					11,250		4,500	6,750
-	Add lines 1a through 1e (Column (d) r	must c	agual Form C	on Part	Y colum		611	,,000	16.278

Part VII	Investments – Other Securities. Complete if the organization answered "Ye	es" to Form	990, Part IV, lin	e 11b. S	see Form	990, Part X. line
	(a) Description of security or category		(b) Book value		(c) Meth	nod of valuation:
F: : : :	(including name of security)				Cost or end-	of-year market value
	derivatives	· · ·		-		
	neld equity interests			-		
Other A)			-			
B)						
C)				<u> </u>		
D)				-		
E)						
F)						
(G)	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~					
(H)						
THE RESERVE OF THE PERSON NAMED IN	b) must equal Form 990, Part X, col. (B) line 12.) ▶					
art VIII	Investments - Program Related.					
	Complete if the organization answered "Ye	es" to Form	990, Part IV, lin	e 11c. S	See Form	990, Part X, line
	(a) Description of investment		(b) Book value			hod of valuation: -of-year market value
Converti	ble promissory note		50,000	Cost		
)						
)					9.50	
)						
)						
-						
3)					MANA STATE STORY AND STATE OF THE STATE OF T	OZ. WOWARMSHIP OF THE PROPERTY
	(b) must equal Form 990, Part X, col. (B) line 13.) ▶		50,00	D		
3) 9) tal. (Column (Other Assets.	2 to Farm			200 5000	000 Post V line
tal. (Column	Other Assets. Complete if the organization answered "Ye				See Form	
e) () (tal. (Column (Part IX	Other Assets.				See Form	990, Part X, line
o) (al. (Column (Part IX	Other Assets. Complete if the organization answered "Ye				See Form	
color of the color	Other Assets. Complete if the organization answered "Ye				See Form	
al. (Column (Part IX	Other Assets. Complete if the organization answered "Ye				See Form	
c) c) c) c) c) cal. (Column (cart IX c) c) c) c) c)	Other Assets. Complete if the organization answered "Ye				See Form	
)))) pal. (Column (part IX)))))	Other Assets. Complete if the organization answered "Ye				See Form	
)))) al. (Column (Part IX)))))))))))))))	Other Assets. Complete if the organization answered "Ye				See Form	
))) plant (Column (Part IX)))))))))))))))))))	Other Assets. Complete if the organization answered "Ye				See Form	
(a) (b) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	Other Assets. Complete if the organization answered "Ye				See Form	
3) 2) tal. (Column) Part IX 2) 3) 4) 5) 6) 77	Other Assets. Complete if the organization answered "Ye		1990, Part IV, lir	e 11d. §	See Form	
(a) (b) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	Other Assets. Complete if the organization answered "Ye (a) Description		1990, Part IV, lir	e 11d. §		
)))) pal. (Column (part IX)))))))))))))))))))	Other Assets. Complete if the organization answered "Ye (a) Description (a) Description Imm (b) must equal Form 990, Part X, col. (B) line	15.)	990, Part IV, lir	e 11d. §		(b) Book value
Part IX Part IX (Column (Part IX) (S) (S) (S) (S) (S) (S) (S) (S) (S) (Other Assets. Complete if the organization answered "Ye (a) Description (a) Description Imm (b) must equal Form 990, Part X, col. (B) line Other Liabilities.	15.)	990, Part IV, lir	e 11d. §		(b) Book value
Part X	Other Assets. Complete if the organization answered "Ye (a) Description Imn (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Ye line 25. (a) Description of liability (b)	15.)	990, Part IV, lir	e 11d. §		(b) Book value
al. (Column (cart IX cart IX	Other Assets. Complete if the organization answered "Ye (a) Description Imm (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Ye line 25.	<i>15.)</i> es" to Forn	990, Part IV, lir	e 11d. §		(b) Book value
al. (Column (cart IX))))))))))))) tal. (Column) Part X	Other Assets. Complete if the organization answered "Ye (a) Description Imn (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Ye line 25. (a) Description of liability (b)	<i>15.)</i> es" to Forn	990, Part IV, lir	e 11d. §		(b) Book value
)) al. (Column (cart IX)))))))))))) tal. (Column) Part X) Federal i	Other Assets. Complete if the organization answered "Ye (a) Description Imn (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Ye line 25. (a) Description of liability (b)	<i>15.)</i> es" to Forn	990, Part IV, lir	e 11d. §		(b) Book value
) (Column (Part IX))))))))))))))))))	Other Assets. Complete if the organization answered "Ye (a) Description Imn (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Ye line 25. (a) Description of liability (b)	<i>15.)</i> es" to Forn	990, Part IV, lir	e 11d. §		(b) Book value
) (Column (Part IX))))))))))))))))))	Other Assets. Complete if the organization answered "Ye (a) Description Imn (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Ye line 25. (a) Description of liability (b)	<i>15.)</i> es" to Forn	990, Part IV, lir	e 11d. §		(b) Book value
) (Column (Part IX))))))))))))))))))	Other Assets. Complete if the organization answered "Ye (a) Description Imn (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Ye line 25. (a) Description of liability (b)	<i>15.)</i> es" to Forn	990, Part IV, lir	e 11d. §		(b) Book value
)) al. (Column (Part IX)))))))))))))))) part X) Federal i (2) (3) (5) (7)	Other Assets. Complete if the organization answered "Ye (a) Description Imn (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Ye line 25. (a) Description of liability (b)	<i>15.)</i> es" to Forn	990, Part IV, lir	e 11d. §		(b) Book value
Part IX	Other Assets. Complete if the organization answered "Ye (a) Description Imn (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Ye line 25. (a) Description of liability (b)	<i>15.)</i> es" to Forn	990, Part IV, lir	e 11d. §		(b) Book value
) (Column (Part IX)) (Part IX) (Par	Other Assets. Complete if the organization answered "Ye (a) Description Imn (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Ye line 25. (a) Description of liability (b)	<i>15.)</i> es" to Forn	990, Part IV, lir	e 11d. §		(b) Book value

Part	Reconciliation of Revenue per Audited Financial Statements With F Complete if the organization answered "Yes" to Form 990, Part IV, line		Return.	
1	Total revenue, gains, and other support per audited financial statements		1	4,872,351
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			4,072,001
a	Net unrealized gains on investments	1,184		
b	Donated services and use of facilities	1,104		
c	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)			
e	Add lines 2a through 2d		2e	1,184
3	Subtract line 2e from line 1		3	4,871,167
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a			
b	Other (Describe in Part XIII.)			
С	Add lines 4a and 4b		4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	4,871,167
Part			r Return.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line			
1	Total expenses and losses per audited financial statements		1	4,565,485
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities			
b	Prior year adjustments			
С	Other losses			
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1	[3	4,565,485
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 4a			
b	Other (Describe in Part XIII.)			
С	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	4,565,485
	XIII Supplemental Information.			
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, I			4; Part X, line
	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a	150		
Part X	(, Line 2: "Management of the Alliance considers the likelihood of changes by taxing authorities in it	s filed tax returns	and recogniz	zes a
liability	y for or discloses potential significant changes if management believes it is more likely than not for	a change to occur	r, including cl	nanges
to the	Alliance le statue de a not for profit antitu. Management he lieure the Alliance met the requirement of	a mariatain ita ta .		
to the	Alliance's status as a not for profit entity. Management believes the Alliance met the requirements t	o maintain its tax	-exempt stati	us and has no
ingom	a subject to unrelated business income tout therefore no provision for income tours had been provi	ided in these finer	saial atatama	nto The
Incom	ne subject to unrelated business income tax; therefore no provision for income taxes has been provi	ded in these final	iciai stateme	nts, the
Allian	cale tax returns for the past three wags are subject to examination by tax authorities, and may ober	aa unon evamina	ation "	
Alliand	ce's tax returns for the past three years are subject to examination by tax authorities, and may char	ige upon examina	ation.	

Schedule D (For	m 990) 2013 The Pachamama Alliance	94-3249793	Page 5
Part XIII	Supplemental Information (continued)		

	*		

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

► Attach to Form 990. ► See separate instructions.

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

2013
Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

The Pachamama Alliance

Employer identification number 94-3249793

Part	General Information Form 990, Part IV, line		es Outside t	the United States. Comp	lete if the organization ansv	vered "Yes" on
1	For grantmakers. Does the assistance, the grantees' eligrants or assistance?	gibility for the	e grants or as	sistance, and the selection		∠ Yes □No
2	For grantmakers. Describe assistance outside the Unite		he organizati	on's procedures for monit	oring the use of its grants	s and other
3	Activities per Region. (The fo	llowing Part	l. line 3 table o	an be duplicated if addition	al 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
(1)	South America Argentina, Bolivia	0	0	Grantmaking		768,806
(2)	South America Argentina, Bolivia	0	0	Program & Program Services	Journey Program:	328,335
(3)					Immersion w/indigenous peoples of Ecuador's rainforest and highlands	
(4)					Tanner oo, and mgmando	
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						
(13)						
(14)						
(15)					*	
(16)						
(17)						
3a	Sub-total	0	0			1,097,141
b	Total from continuation sheets to Part I	0	0			0

c Totals (add lines 3a and 3b)

1,097,141

94-3249793

Schedule F (Form 990) 2013 The Pachamama Alliance

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

Pari	7, IIThe 13, 191 al	ny recipient who re	Part IV, III e 10, 101 any leciple it wild received in the final polyton. Part in call be duplicated in additional space is needed.	S,000. rait II cal	I De dupilicated II a	Julionial space is	Heeded.	
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(D)		South America Argentina, Bolivia	General Support	726,500	726,500 Wire Transfer			Cash Basis
(2)		South America Argentina, Bolivia	General Support	7,500	7,500 Wire Transfer			Cash Basis
(3)		South America Argentina, Bolivia	General Support	5,000	5,000 Wire Transfer			Cash Basis
(p)		South America Argentina. Bolivia	General Support	5,000	5,000 Wire Transfer			Cash Basis
(9)		South America Argentina, Bolivia	General Support	24,806	24,806 Wire Transfer			Cash Basis
(9)							9	
6								
(8)								
(6)								
(0,1)								
E								
(112)								
(13)								
(14)								
(15)								
(16)								

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 8

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2013

2

Schedule F (Form 990) 2013 The Pachamama Alliance

Part III Grants and Other As Part III can be duplice	Grants and Other Assistance to Individual Part III can be duplicated if additional space	als Outside to is needed.	he United States	S. Complete if the	organization answ	Is Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. is needed.), Part IV, line 16.
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)	÷.						
(4)							
(5)							
(9)				u			
(2)							
(8)							
(6)							
(10)							
(11)				-		12	
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
						Sch	Schedule F (Form 990) 2013

scriedui	ter (Form 990) 2013 The Pachamama Alliance	94-3249793	Page 4
Part	V 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	₩ 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	₩ 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	₽ 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	₽ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	☐ Yes	₽ No
6	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)	Yes	₽ No

Part V	Supplemental	Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Schedule F, Part I, Line 2: The Pachamama Alliance CEO, Basil Twist, Jr. serves on the Board of Directors of Fundacion Pachamama (unpaid position).
Regular monthly reports are generated and monitored, and description of program activities are used for the website, email campaigns, and fundraising
efforts.

SCHEDULE I (Form 990)

Department of the Tressury Internal Revenue Service Name of the organization

The Pachamama Alliance

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

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

		1	i	
	¢	3	ì	
	ξ		١	
	Ç	7	١	
	4	c	٠	
	1	E	٠	
	i	č	;	
	L	ĭ		
	7	_	Ī	
	i	2	;	
	1	_		
	7	'n	5	
	1	ř	i	
	٠	ä	9	
	4	7	;	
	0	7	٠	
	A	٨		

545-0047	3
OMB No. 1	20
O	9 (

Open to Public Inspection

94-3249793

Employer identification number ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	in on Grants and ain records to subs	Assistance	int of the grants or	assistance, the g	rantees' eligibility t	or the grants or assistanc	;
the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	award the grants in ization's procedur	or assistance? es for monitoring t	the use of grant fur	nds in the United	States.	* * * * * * * * * * * * * * * * * * * *	· · · · · · · · · · · · · · · · · · ·
Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	ssistance to Go	vernments and received more the	Organizations i	n the United St	ates. Complete	if the organization answ space is needed.	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Amazon Watch 2201 Broadway, Oakland, CA 94612	95-4604782	501(c)(3)	12,644		Book		North-South Indigenous
							Summit
Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table	1 501(c)(3) and gov	ernment organizat in the line 1 table	ions listed in the li	ne 1 table			1 0
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	see the Instructions	s for Form 990.		Ca	Cat. No. 50055P		Schedule I (Form 990) (2013)

Schedule I Form 990) (2013)

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.

	Pari III cali de duplicated II additional space is necesa.	space is liceded				, , , , , , , , , , , , , , , , , , ,
	(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
,		===				
-						
2						
ဇ						
4			ie.			
,						
9						
7	- 1	:	:	=	30	, T
Part IV	Supplemental Information. Provide the	the information r	equired in Part I, lin	e 2, Part III, column	information required in Part I, line 2, Part III, column (b), and any other additional information.	onal information.
5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5						
						Schedule I (Form 990) (2013)

SCHEDULE L (Form 990 or 990-EZ)

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.

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

(10)

Employer identification number

The F	Pachamama Alliance										94-3	32497	93		
Par	Excess Bene Complete if th	fit Tr	ransaction ganization	s (section 501 answered "Yes	(c)(3) a s" on F	nd secti orm 990	ion 501(c)(4 0, Part IV, li	1) org ine 25	anizations only 5a or 25b, or Fo). orm 99	0-EZ,	Part '	V, line	40b.	
1	(a) Name of disqualified			(b) Relationship be					(c) Descripti					(d) Con	rected?
	(a) Name of disqualified	perso	111		organizat	tion			(c) Descripti	on or trai	isaction	t.		Yes	No
(1)				34											
(2)															
(3)															
(4)															
(5)															
(6)												15			
2	Enter the amount														
	under section 4958									5 5		• \$	S		
3	Enter the amount o	f tax	, if any, on	line 2, above,	reimbu	irsed by	the organi	zatio	n		!	▶ \$	<u> </u>		
Par				ested Person			0 F7 D			200 D					
	Complete if the	e or	ganization ted an ama	answered "Yes ount on Form 9	s" on F	orm 99	0-EZ, Part 1	V, line	38a or Form 9	990, Pa	irt IV,	line 2	6; or	if the	
	organization	T	ted all allic	ount on roini s	190, га	art A, III ie	1 0, 0, 01 22			-					
(a) N	lame of interested person		Relationship	(c) Purpose of		an to or	(e) Origin		(f) Balance due	(g) In (default?				ritten
		with	organization	loan		n the ization?	principal am	nount					oard or nittee?	agree	ment?
						_					_	-	T		
- (4)		-			То	From				Yes	No	Yes	No	Yes	No
(1)		+-								-	-		-		
(2)		-				-				_	-				
(3)		-								_	-	-	-		
(4)		\vdash								_	-		-	-	
(5)		-								-	-	-	-	-	
(6)		+-				-				_	-	-	-	-	
(7)		+								_	-	-	-	-	
(8)		+									-	-	-	-	_
(9) (10)		\vdash								+	-	_	-		
Tota									\$	0/600000000	100.000	3.00000000		i Swordinana i	
Par		ciete	noo Pono	fiting Interest	od Dor				Ψ						
rail	Complete if the	ne or	ganization	answered "Ye	s" on F	orm 99	0 Part IV I	ine 2	7.						
	100 mar 200 ma								200000000000000000000000000000000000000		Ι.				-111100
(a) Name of interested person	n :		ship between inter- and the organization		c) Amount	t of assistance		(d) Type of assistar	nce	(e) Purpo	ose of a	assistar	ice
(1)			102000000												
(2)															
(3)															
(4)															
(5)															
(6)															
(7)															
(8)															
(0)											_				

Part IV Business Transactions Invo Complete if the organization a	lving Interested Persons.	0. Part IV. line 28a 3	94-3249 P8b. or 28c.	793 F	Page 2
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organiz	aring of zation's nues?
				Yes	No
(1) Michael Olmstead	Member, BOD	9000	Pachamama Contracted		1
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
Supplemental Information Provide additional information Sch L, Part IV, Business Transactions Involving		on Schedule L (see	instructions).		
(a) Name of Person: Michael Olmstead		***************************************			
(b) Relationship Between Interested Person ar	nd Organization: Member, Board				
(c) Amount of Transaction: \$9000					
(d) Description of Transaction: Pachamama co	ntracted with the Director's com	pany, Olmstead Produc	ctions, Inc for creative development	, producti	on
coordination, staff, and on-site direction. The c	ompany received \$9000 for serv	vices. An additional \$12	28,151 was paid to reimburse the di		of the
event, which were advanced by Olmstead Pro-	ductions, Inc.			~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	
(e) Sharing of Organization Revenues? No					
***************************************	***************************************				

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

2013

Open To Public Inspection

Department of the Treasury Internal Revenue Service

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

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

Name of the organization
The Pachamama Alliance

Employer identification number

94-3249793

Part	Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method o			
1	Art-Works of art							
2	Art-Historical treasures							
3	Art-Fractional interests							
4	Books and publications							
5	Clothing and household goods							
	Cars and other vehicles							
6	Boats and planes							
7								_
8 9	Intellectual property Securities – Publicly traded	_	10	120 655	FMV, quoted :	SOURCES		
	Securities—Publicly traded Securities—Closely held stock .	~	10	120,000	i iviv, quotou	ooui oco	-	
10 11	Securities—Partnership, LLC,							
••	or trust interests		0					
12	Securities-Miscellaneous							
13	Qualified conservation							
	contribution—Historic							
	structures							
14	Qualified conservation contribution—Other							
15	Real estate-Residential							
16	Real estate-Commercial							
17	Real estate-Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ► ()							
26	Other ► ()							
27	Other ► ()							
28	Other ► (
29	Number of Forms 8283 received							
	which the organization completed	d Form 828	Part IV, Donee Acknowle	edgement	29			
							Yes	No
30a		tion receive	by contribution any prope	rty reported in Part I, lines	1 - 28, that			
	it must hold for at least three ye							
	used for exempt purposes for the					30a		~
b	If "Yes," describe the arrangement							
31	Does the organization have a	gift acce	ptance policy that require	es the review of any no	n-standard			
	contributions?					31		1
32a	Does the organization hire or us							
	contributions?					32a		~
b	[1] [1] [1] [1] [1] [1] [1] [1] [1] [1]							
33	If the organization did not report a describe in Part II.	an amount i	n column (c) for a type of pr	operty for which column (a)	is checked,			

Part II	(Form 990) (2013) The Pachamama Alliance Supplemental Information. Provide the information required by Part I, lines 30b, 32b, a	94-3249793 nd 33. and	Page 2
raitii	the organization is reporting in Part I, column (b), the number of contributions, the numb		
	or a combination of both. Also complete this part for any additional information.		2.700 - C. II

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

Employer identification number

The Pachamama Alliance	94-3249793
Form 990, Part III, Line 4b, Program Service Accomplishments:	
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 of	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 scenar	rios in the southeastern Amazon
one of oil development and another of conservation. The research, evaluating economic, social, political, ecol	ogical, and cultural dimentions, is
being carried out by respected universities in Ecuador and the United Kingdom, and will be used to inform FP	's future work.
Amazon's First Solar Powered Transportation Network is Prepared:	
Preparation was begun for a groundbreaking system of solar-powered boats and recharge stations covering of	over 40 miles of rivers in Achuar
territory. The project is in collaboration with the government of Finland, MIT, Ecuador's most renowned engine	ering university, and multiple
Ecuadorian government agencies, as well as the Achuar people, who will be the owners of the system.	

Schedule O (Form 990 or 990-EZ) (2013) The Pachamama Alliance	94-3249793 Page Z
Name of the organization The Pachamama Alliance	Employer identification number 94-3249793
Form 990, Part III, Line 4d, Other Program Services:	
Other Programs	
Expenses: \$210,467, including grants of \$13,000.	
Revenue: \$29,159.	
Form 990, Part VI, Section A, Line 2: CEO Basil Twist, Jr. and Director	
Lynne Twist, family relationship	
Form 990, Part VI, Section B, Line 11: The Form 990 is presented and reviewed at a board me	eting prior to filing.
Form 990, Part VI, Section B, Line 12c: The issue is looked at at each board meeting.	
Form 990, Part VI, Secion 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/der	nographics. A study of the overall precentage of
the position 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 website.
Form 990, Part IX, Line 11g, Other Fees:	***************************************
Program Consultants:	
Program service expenses 590,676.	
Management and general expenses 0.	
Fundraising expenses 0.	
Total expenses 590,676.	

Schedule O (Form 990 or 990-EZ) (2013) The Pachamama Alliance				94-3249793	Page 2
Name of the organization The Pachamama Alliance			Emp	loyer identification num 94-3249793	ber
Program event production:					
Program service expenses	0.				
Management and general expenses	0.				
Fundraising expenses	93,453.	B			
Total Expenses	93,453.				
Other services:				***************************************	
Program service expenses	0.				
Management and general expenses	11,816.				
Fundraising expenses	0.				
Total Expenses	11,816.				
Total Other Fees on Form 990, Part IX, Line 11g, Col A	695,945.				
Form 990, Part XII, Line 2C					
Oversight and selection process:					
There has been no change to either the oversight or select	ion process.			**********	

	~~~~				
				7 N N N N N N N N N N N N N N N N N N N	
		********************************		~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	
		***************************************			