Form **990**

Return of Organization Exempt From Income Tax

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

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

QUU Open to Public

Open to Public Inspection

Form 990 (2008)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

and ending For the 2008 calendar year, or tax year beginning Please C Name of organization D Employer identification number Check if applicable International Rivers Network use IRS Address change Doing Business As 94-3158295 label or print or Name change Room/suite E Telephone number Number and street (or P O box if mail is not delivered to street address) type Initial return 300 (510) 848-1155 2150 Allston Way See Specific City or town, state or country, and ZIP + 4 Termination Instruc-G Gross receipts \$ 2.949.431 CA 94704 Berkelev Amended return tions Yes X Application pending Name and address of principal officer H(a) Is this a group return for affiliates? Patrick McCully 2150 Allston Way, Suite 300, Berkeley, CA H(b) Are all affiliates included? If "No," attach a list (see instructions) 501(c) (3) **◄** (insert no) 4947(a)(1) or Tax-exempt status Website: ▶ www.internationalrivers org H(c) Group exemption number ► N/A X Corporation L. Year of formation Other -M State of legal domicile K Type of organization Association Part I Summary Briefly describe the organization's mission or most significant activities — International Rivers Network is dedicated to developing and assisting global grassroots movements to protect rivers and watersheds for the people and ecosystems dependent upon Activities & Governance If the organization discontinued its operations or disposed of more than 25% of its assets Number of voting members of the governing body (Part VI, line 1a) 11 Number of independent voting members of the governing body (Part VI, line 1b) 28 5 Total number of employees (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 21 Total gross unrelated business revenue from Part VIII, line 12, column (C). 0 7a Net unrelated business taxable income from Form 990-T, line 34 Prior Year **Current Year** Contributions and grants (Part VIII, line 1h) 2,186,769 2,813,969 8 Program service revenue (Part VIII, line 2g) 127,424 58,685 9 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 29,572 34,313 10 -7,745 2,995 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e). 2,336,020 2,909,962 12 Total revenue-add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3) 271,710 302,910 13 0 14 Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1.039.065 1.395.766 15 Professional fundrars in (fees (Fart X), column (A), line 11e) . . 16a Total fundraising expenses (Part IX, column (D), line 25) ▶ Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)
Total expenses Add lines 43-17 (must equal Part IX, column (A), line 25) 612,811 1,099,440 17 1,923,586 2,798,116 18 Revenue less expenses Subtract line 18 from line 12 412,434 111,846 19 Total assets (Part OGD Beginning of Year End of Year 1,879,268 1,755,147 20 209,931 222,206 21 Total liabilities (Part X, line 26) Net assets or fund balances Subtract line 21 from line 20 1,545,216 1,657,062 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Signature of officer Here MCCULLY, EXECUTIVE DIRECTOR PATRICK Type or print name and title (Faid Date Check if Preparer's identifying number Preparer's self-(see instructions) signature employed ̈́Ρ̈́reparer's Firm's name (or yours ▶ 57-1155648 Ghaffarı Zaragoza LLP EIN **Use Only** if self-employed) 1330 Broadway, Suite 430, Oakland, CA 94612 **►** (510) 834-6542 XYes No May the IRS discuss this return with the preparer shown above? (see instructions) .

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

(HTA)

- 6	Statement of Program Service Accomplishments (see instructions)		 	
1	Briefly describe the organization's mission			
`	International Rivers Network is dedicated to developing and assisting global grassroots movements to prote	ct rivers	and	
	watersheds for the people and ecosystems dependent upon them			
2	Did the organization undertake any significant program services during the year which were not listed on			
	the prior Form 990 or 990-EZ?	_ [] Y	'es X	No
	If "Yes," describe these new services on Schedule O			
3	Did the organization cease conducting, or make significant changes in how it conducts, any program			
	services?		'es X	No
	If "Yes," describe these changes on Schedule O	Ш.	ين ۲۰	
4	Describe the exempt purpose achievements for each of the organization's three largest program services by	eynens	26	
-	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amou			
	allocations to others, the total expenses, and revenue, if any, for each program service reported	it or gran	no arra	
	anotations to differ total expenses, and revenue, if any, for each program control reported			
4a	(Code) (Expenses \$ 2,108,852 including grants of \$ 302,910) (Revenue \$		50,844)	
74	Campaigns - International Rivers helped communities that would be affected by Mexico's La Parota Dam to			
	the project through legal action. We organized a successful gathering of more than 1000 indigenous people			
	Amazon's Xingu River Basin The meeting resulted in a strong expression of opposition by indigenous peop			
	Belo Monte Dam planned for the Xingu River. Our campaign to keep the rivers of Patagonia free-flowing had			
	successes as we pressured the transnational companies that are backing the building of destructive dams of			
	Pascua rivers, leading to extensive delays in the project. In response to recent plans to build eleven dams of	n the Me	kong Rive	er's_
	mainstream, we worked with our local partners to support an international public forum in Bangkok that high	lighted w	hat would	
	be lost if these projects were to go ahead			
			- 	
				
				
4b	(Code) (Expenses \$ 179,863 including grants of \$ 0) (Revenue \$		6,951)	
	Information and media - International Rivers released two major reports, "Power Surge The Impacts of Rap		evelopme	ent
	in Laos" and "Cambodia's Hydropower Sector and China's Involvement," that drew public attention to the da			
	now underway in the Mekong Region. We also produced a report showing how the Kyoto Protocol's Clean [
	Mechanism is handing out billions of dollars for destructive dams and fossil fuels in the name of carbon offs			
	China's overseas dam industry was circulated widely around the world to educate communities impacted by			
	all and other than a second at the second at			
	about what they can do to protect their rivers and rights			
	••••••••••••••••••••••••••••••••••••			
40	(Code) (Expenses \$ 0 including grants of \$ 0) (Revenue \$		0)	
40	(Code) (Expenses \$			
				-
				- -
4d	Other program services (Describe in Schedule O)			
	(Expenses \$ 0 including grants of \$ 0) (Revenue \$	0)		
4e	Total program service expenses ► \$ 2,288,715 (Must equal Part IX, Line 25, column	(B))		

Far	Checklist of Required Schedules			
			Yes	No
1	'is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C,			
	Part II	4	Х	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice			
	and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	N/A	
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to			
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			
	Schedule D, Part I	6		Х
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		Χ
0				
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	8		Х
_	complete Schedule D, Part III	0		
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"	•		v
	complete Schedule D, Part IV	9	\vdash	X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	\vdash	X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,			
	Parts VI, VIII, IX, or X as applicable	11	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return			
	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII .	12	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Χ_
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a	X	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
_	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b	x	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	x	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
10	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		Х
4 =		17		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	18		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II			$\hat{\mathbf{x}}$
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	 	x
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u>X</u> _
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Χ_
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete			
	Schedule J	23		_ <u>X</u> _
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 questions			
	24b–24d and complete Schedule K. If "No," go to question 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	N/A	
	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	N/A	
Ч	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			
234	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
L	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified			<u> </u>
D		25b		Х
	person from a prior year? If "Yes," complete Schedule L, Part I	200	├─┤	
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	26		х
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	\vdash	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or			_
	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	oxdot	X

Part IV Checklist of Required Schedules (continued)

			Yes	No
28 `	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			,
	Part IV .	28a	~ -	Х
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		х
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M .	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Х	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	35		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part	37		Χ_

Form **990** (2008)

Form 9	90 (2008) International Rivers Network	94-315829	5	Page 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance	_	-	
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	17		
L	U.S. Information Returns. Enter -0- if not applicable			
b	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	씍		
С	gaming (gambling) winnings to prize winners?	10	- x	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	10	 ^	
Za	Statements, filed for the calendar year ending with or within the year covered by this return 2a	28	l	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> this return. (see			
	instructions)			ł
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this return?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	N/A	·
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			1
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	. 4a	X	ļ
b	If "Yes," enter the name of the foreign country Brazil, Germany, Thailand, Cameroon			•
	See the instructions for exceptions and 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?	. <u>5a</u>		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	. 5b		X
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity	Ea	N/A	
c-	Regarding Prohibited Tax Shelter Transaction?	. <u>5c</u>		X
6a b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	1.00	+	+^-
U	gifts were not tax deductible?	. 6b	N/A	
7	Organizations that may receive deductible contributions under section 170(c).		1	
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than			
	\$75?	. 7a		Χ
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	N/A	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	. 70		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		Ì	
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	· 7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/A	\
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	. 7h	N/A	
8	required? Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section	· ///	130/	+
Ü	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8	N/A	
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		<u> </u>	1
a	Did the organization make any taxable distributions under section 4966?	. 9a	N/A	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	. 9b	N/A	
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b N/A			
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			
	against amounts due or received from them)		L TA	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12	a N/A	+-
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b N/A			

Part Vi
Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code)

Section A. Governing Body and Management

Seci	IOII A. Governing Body and Management			
	For each "Vas" response to lines 2. This law, and for a "No" response to lines 8 or 9h holow, describe the		Yes	No
	For each "Yes" response to lines 2–7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O See instructions.			ĺ '
4				'
1a	Enter the number of voting members of the governing body Enter the number of voting members that are independent 1a 11 1b 11	1		
b	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1		ĺ
2	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
3	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		Х
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
-	the year by the following			l
а	The governing body?	8a	Х	L
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9a	Does the organization have local chapters, branches, or affiliates?	9a		Х
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	9b_	N/A	
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations	1		l
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	Χ	<u> </u>
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at	ļ		l
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.	11		LX_
Sect	tion B. Policies			r
		40-	Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	х_	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			1
	describe in Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13	Х	L.
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by		'	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision.			
а	The organization's CEO, Executive Director, or top management official?	15a	X	
b	Other officers or key employees of the organization?	15b	<u> </u>	X
	Describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	40=	-	- ,
_	with a taxable entity during the year?	16a	 	<u> </u>
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			1
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b	Ν/Δ	
Sac	the organization's exempt status with respect to such arrangements?	1 100	L.4//	
<u>3ec</u> 17	List the states with which a copy of this Form 990 is required to be filed CA	<u> </u>		
1 <i>7</i> 18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s	onlv)		
	available for public inspection. Indicate how you make these available. Check all that apply	,		
	Own website X Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of inter-	est		
. •	policy, and financial statements available to the public	-		
20	State the name, physical address, and telephone number of the person who possesses the books and records of	the		
	organization ► Inanna Hazel (510) 848-1			
	2150 Allston Way, Suite 300, Berkeley, CA, 94704			

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors; institutional trustees, officers, key employees, highest compensated employees, and former such persons.

(A)	(B)			•	C)			(D)	(E)	(F)
Name and Title	Average hours per week		_	hec Officer		that ap Highes employ	Former	Reportable compensation from the	Reportable compensation from related organizations	Estimated amount of other compensation
		Individual trustee or director	Institutional trustee		nployee	Highest compensated employee		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
Martha Belcher Chair	2	Х		X		_		0	0	0
André Carothers Vice Chair	1.	Х		х				0	0	O
Mılan Momirov Treasurer	0.5	Х		x				0	0	0
Marcia McNally Secretary	0 5			x				0	0	0
Robert Hass Director	0.5	Х						0	0	0
Carlos Mejia Director	0 5	Х						0	0	0
Deborah Moore Director	0 5	Х						0	0	0
Cymie Payne Director	0 5	х						0	0	0
David N. Pellow Director	0.5	Х						0	0	0
Lori Udall Director	0.5	Х						0	0	0
Meeta Vyas Director	0.5	х						0	0	0
Patrick McCully Executive Director	40		_	x				78,843	0	11,328
Inanna Hazel Director of Finance	40			x		_		74,475	0	4,368
	0							0	0	0
	0.		L	L				0	0	0
	0							0	0	0
	0							0	0	0

compensation from the organization

Pa	t VI. Section A. Officers, Directors, Tru	ustees, Key Em	ploy	ees,	, and	Hig	hes	t Co	mpensated Emp	oloyees (cont	nuec	1)	
	(A)	(B)		(C)					(D)	(E)		(F)	
•	Name and title	Average Position (check all that ap							Reportable	Reportable		Estima	
		hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amoun othe compens from t organiza and rela organiza	r sation he ation ated
		0.							0		0		0
		0							o	·	0		0
		00							0		0		0
·		0							o		0		0
		0							o		0		0
		0							0		0		0
		0							0		0		0
	~~····	0.							0	_	0		0
		0							0		0		0
		0						<u> </u>	0		0		
		0.							0	-	0		
		0							_0		<u>-</u>		0
41.	T-A-I	0						<u> </u>	0		o 0		0
1b	Total	:		·:				<u> </u>	153,318		<u> </u>		5,696
2 	Total number of individuals (including those organization ▶ 0	m raj who rece	iveu	IIIOI	e (112	111 Ф			Treportable com				N.
3	Did the organization list any former officer, employee on line 1a? If "Yes," complete Sci					yee,	or h	ighe	st compensated		3	Yes	No X
4	For any individual listed on line 1a, is the surthe organization and related organizations gundividual										4		- <u>x</u>
5	Did any person listed on line 1a receive or a services rendered to the organization? If "Yo								ganization for	-	5		
Sec	tion B. Independent Contractors												
1	Complete this table for your five highest corcompensation from the organization.	npensated inde	pend 	ent c	contr	acto	rs tha	at re	ceived more than	1 \$100,000 of			
	(A) Name and business a	ddress							(B) Description of servi	ces	Com	(C) pensatio	n
	Conservacion Patagonica Chile (Klenner 299	, Puerto Varas, X Re	egion,	Chile				Imple	mented a national ad-	vertising		5	22,500
								$\overline{}$	aign to increase awar				0
									t planned dams in Chi				
									gonia and a transmiss	ion line to			0
	Total number of independent contractors (in	cluding those in	1) v	vho r	ecer	ved i	more	Santi thai			· · · ·		<u>U</u>

94-3158295

Part VIII		Statement of Revenue						
	•				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts	1a	Federated campaigns	1a	0				
ran	b	Membership dues .	1b	0				
5, g mo	С	Fundraising events	1c					
ufts ar a	d	Related organizations	1d	27,000				
Contributions, gifts, grants and other similar amounts	е	Government grants (contributions)	1e	0				
ion Sil	L	All other contributions, gifts, grants,	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1					
but :he		similar amounts not included above		2,786,969				
ıtri I of	a	Noncash contributions included in li	<u> </u>	39,804				
Cor	h			>	2,813,969			
	- :-			Business Code				
Program Service Revenue	2a	Contract revenue and service fees		541900	52,928	52,928	0	
Sev.	b			561000	890	890	0	(
ce	C	O = = = = = = = = = = = = = = = = = = =		900004	4,867	4,867	0	
ervi	٦				0	0	0	
S F	ء ا				0	0	0	
graı	, F	All other program service revenue			0	0	0	
Pro	,			•	58,685		<u>-</u>	
	2		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	00,000			
	3	Investment income (including divide	enos, interest, a	na 🛌	25 400	0	o	35,488
		other similar amounts)			35,488 0	0		Ţ
	4	Income from investment of tax-exer	npi bona procei	eus	0			
	5	Royalties	(i) Pool	(v) Bornanal	U		0	· · · · · · · · · · · · · · · · · · ·
		O D	(ı) Real	(II) Personal				
	6a	Gross Rents	····					
	b	Less rental expenses .		-	1			
	C.	Rental income or (loss) .		0				
	_d	Net rental income or (loss)	4.0	(3.0% ==	0	0	0	
	/a	Gross amount from sales of	(i) Securities	(II) Other	İ			
	١.	assets other than inventory	38,29	4 0				
	þ	Less. cost or other basis		_				
		and sales expenses	39,469					
	С	Gain or (loss)	-1,17	5 0				
	d	Net gain or (loss)		, <u> </u>	-1,175	0	0	-1,175
ō	8a	Gross income from fundraising	_					
Š		events (not including \$						1
ě		of contributions reported on line 1c)).					
Ř		See Part IV, line 18	а	0				
Other Revenue		Less direct expenses .	t	0				
ŏ	1	Net income or (loss) from fundraising	_	_	0	0	0	
	9a	Gross income from gaming activities	s					
		See Part IV, line 19.	а	ı <u> 0</u>				
	1	Less direct expenses	t	0				
		Net income or (loss) from gaming a	ctivities .	. •	0	0	0	
	10a	Gross sales of inventory, less						
		returns and allowances	а	ı <u> </u>		1		
	b	Less cost of goods sold .	. t	0			-	
	С	Net income or (loss) from sales of i	nventory	<u> </u>	0	0	0	
		Miscellaneous Revenue		Business Code		<u>.</u> .		_
	11a				0	0	0	
	b				0	0		
	c				0		0	
	d	All other revenue .			2,995		0	2,995
	е	Total. Add lines 11a-11d .		▶	2,995			
	12	Total Revenue. Add lines 1h, 2g, 3	s, 4, 5, 6d, 7d, 8	c,				
		9c, 10c, and 11e .	<u> </u>	▶	2,909,962	58,685	0	37,308

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).										
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses						
1	Grants and other assistance to governments and										
	organizations in the U.S. See Part IV, line 21	O	o								
2	Grants and other assistance to individuals in										
	the U.S. See Part IV, line 22	0	0								
3	Grants and other assistance to governments,				,						
	organizations, and individuals outside the										
	U.S. See Part IV, lines 15 and 16 .	302,910	302,910								
4	Benefits paid to or for members	0	0								
5	Compensation of current officers, directors,										
	trustees, and key employees .	169,014	16,231	92,368	<u>60,415</u>						
6	Compensation not included above, to disqualified										
	persons (as defined under section 4958(f)(1)) and										
	persons described in section 4958(c)(3)(B)	0	0	0	0						
7	Other salaries and wages	1,029,185	755,088	195,283	78,814						
8	Pension plan contributions (include section 401(k)										
	and section 403(b) employer contributions)	7,400	5,044	1,586	770						
9	Other employee benefits .	99,111	75,621	18,889	4,601						
10	Payroll taxes	91,056	60,862	20,518	9,676						
11	Fees for services (non-employees).										
a	Management	0	0	0	0						
b	Legal	5,623	5,623	0	0						
C	Accounting	2,844	2,844	0	0						
d	Lobbying	0	0	0	0						
e	Professional fundraising services See Part IV, line 17	0			0						
f	Investment management fees	0	0	0	0						
g	Other	717,129	686,343	22,918	7,868						
12	Advertising and promotion	2,464	1,654	810	0						
13	Office expenses	145,870	103,051	29,963	12,856						
14	Information technology	0	0	0	0						
15	Royalties	0	5.514	70.054	0						
16	Occupancy	81,070	5,511	76,254	-695						
17	Travel	80,159	79,652	247	260						
18	Payments of travel or entertainment expenses										
40	for any federal, state, or local public officials	0	0	0 400	0						
19	Conferences, conventions, and meetings.	7,354	3,879	3,123	352						
20	Interest	18	0	18	<u> </u>						
21	Payments to affiliates	0	0		0						
22	Depreciation, depletion, and amortization .	12,888	0	12,888 3,903	0						
23 24	Insurance	3,903		3,903							
24	Other expenses Itemize expenses not covered above (Expenses grouped together		1		1						
			j	}							
	and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				1						
а	Duna and subservation	6,200	3,855	1,539	806						
a b	Staff training	5,376	3,740	875	761						
C	Meals and entertainment	19,673	4,740	1,120	13,813						
d	Bank fees, fees and taxes	8,637	4,740	2,857	870						
e	Shared cost allocation	0,037	167,004	-194,240	27,236						
f	All other expenses Miscellaneous expenses	232	157,004	79	27,230						
25	Total functional expenses. Add lines 1 through 24f	2,798,116	2,288,715	290,998	218,403						
		2,730,110	2,200,110	230,330	210,700						
26	Joint Costs. Check here ► X if following										
	SOP 98-2 Complete this line only if the organization										
	reported in column (B) joint costs from a combined educational campaign and fundraising		1								
	solicitation	800	738	o	62						
	Solicitation	800]			50rm 990 (2008)						

	art X	Balance Sneet		<u> </u>					
					(A) Beginning of year			(B) of year	
	1	Cash-non-interest-bearing			22,687	1			35,680
	2	Savings and temporary cash investments	·		1,325,020		 		32,318
	3	Pledges and grants receivable, net		_	360,474				12,399
	4	Accounts receivable, net	•	·	0		 		0
	5	Receivables from current and former officers	direct	ors trustees key					
		employees, or other related parties. Complete			0	5			0
	6	Receivables from other disqualified persons							
	Ŭ	4958(f)(1)) and persons described in section							
		Part II of Schedule L	,,,,,,,	,,(o,(o), oomploto		6			. 0
B	7	Notes and loans receivable, net		· ·	0	7			
Assets	8	Inventories for sale or use	•	· –	0	8	 		0
As	9	Prepaid expenses and deferred charges	•		11,359				12,499
	10a		10a	145,481	11,338				12,433
	b		100	140,401			1		
	~	Part VI of Schedule D	10b	62,075	23,804	100		۶	33,406
	11	Investments-publicly traded securities	100	02,075	20,004	11			0.400
	12	Investments-other securities. See Part IV, lin	_ 11	· · · ·		12			
	13	Investments—program-related See Part IV, III		· · · ·			 		0
	14	Intangible assets	16 11	· · · · -	0		 		0
	15	Other assets See Part IV, line 11		· · · -	11,803				22,966
	16	Total assets. Add lines 1 through 15 (must e	auglie		1,755,147	16	 		79,268
	17		<u>quai iii</u>	16 24)	209,931	17			
	18	Accounts payable and accrued expenses		 -	209,931				22,20 <u>6</u> 0
	19	Grants payable Deferred revenue	•	·	0				0
ý	20	Tax-exempt bond liabilities		ļ					0
	21	Escrow account liability Complete Part IV of	Sahadı	ulo D		21	 		0
Liabilities	22	Payables to current and former officers, direct					 		
þi	~~	employees, highest compensated employees	-				l		
Lia		persons Complete Part II of Schedule L .	, and t	iisquaiiiieu	0	22		~	0
	23	Secured mortgages and notes payable to uni	olated	third parties	0	23			0
	24	Unsecured notes and loans payable	0	24			0		
	25	Other liabilities Complete Part X of Schedule		, -	0	25	<u> </u>		0
	26	Total liabilities. Add lines 17 through 25			209,931	26		22	22,206
				• V	200,001			<u></u>	
S		Organizations that follow SFAS 117, check complete lines 27 through 29, and lines 33							
Š		•	anu s	4 .			·		
ala	27	Unrestricted net assets		•	241,377	27	 		31,419
Net Assets or Fund Balances	28	Temporarily restricted net assets	٠		1,303,839	28	 	1,52	25,643
Ĕ	29	Permanently restricted net assets		_; <u> </u>	0	29	 		0
4		Organizations that do not follow SFAS 117	', chec	k here▶			1		
0		and complete lines 30 through 34.							
set	30	Capital stock or trust principal, or current fund	is .			30			
As	31	Paid-in or capital surplus, or land, building, or			"	31			
et '	32	Retained earnings, endowment, accumulated	Incom	e, or other funds .		32			
Z	33	Total net assets or fund balances .		· · <u> </u>	1,545,216				7,062
	34	Total liabilities and net assets/fund balances			1,755,147	34		1,87	9,268
Рa	rt XI	Financial Statements and Reporting	Щ.		· · · · · · · · · · · · · · · · · · ·				
			_					Yes	No
1		counting method used to prepare the Form 99		Cash X Accrual	_			1 -	
2		ere the organization's financial statements con				•	. 2a	 	X
		ere the organization's financial statements and					. <u>2b</u>	X	
("Yes" to lines 2a or 2b, does the organization h				ignt of			
_		udit, review, or compilation of its financial stater					2c_	X	
3		s a result of a federal award, was the organizati	on req	=		r1	3-		
		e Single Audit Act and OMB Circular A-133?	, al aal:4	or gudito?			3a	N/A	Х
	b If'	"Yes," did the organization undergo the require	u audit	or addits /	·		3b_		
							F/	orm 990	J (2008)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

200

Employer identification number

2008

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

 Open to Public Inspection

nter	natio	nal Rivers Ne	twork						94-31582	295			
Pai	t I	Reason	for Public Ch	narity Status (All org	ganizatio	ns must	complete	this par	t.) (see i	nstruction	ons)		
The o	orgar			ation because it is (Pl		-	_						
1	\Box	A church, co	nvention of chu	rches, or association of	of churche	es describ	ed in sec	tion 170(b)(1)(A)(i	i).			
2		A school des	scribed in sectio	on 170(b)(1)(A)(ii). (At	tach Sch	edule E)							
3		A hospital or	a cooperative h	nospital service organi	zation de	scribed in	section	170(b)(1)	(A)(iii). (A	Attach Sc	hedule i	H)	
4		A medical re	search organiza	ation operated in conju	inction wi	th a hospi	tal descri	bed in se	ction 170	(b)(1)(A)	(iii). Ent	er the	
		-	me, city, and sta										. .
5		_	•	r the benefit of a collect (Complete Part II)	ge or univ	ersity owr	ned or ope	erated by	a govern	mental u	nıt descr	ribed	
6		A federal, sta	ate, or local gov	ernment or governme	ntal unit d	lescribed	in sectior	170(b)(1)(A)(v).				
7	X	_		y receives a substanti (1)(A)(vi). (Complete I	•	its suppoi	t from a g	jovernme	ntal unit o	or from th	e gener	al publ	IC
8	Γ	A community	trust described	d in section 170(b)(1)((A)(vi). (C	omplete f	Part II)						
9	同			y receives (1) more th				om contril	outions, n	nembersh	nip fees,	and g	ross
		receipts from	n activities relate i gross investme	ed to its exempt function ent income and unrelated after June 30, 1975.	ons—subj ted busin	ject to cer ess taxabl	taın exce _l le income	ptions, an (less sec	d (2) no ration 511	nore thar	n 33 1/3°	% of its	
10		An organizat	tion organized a	nd operated exclusive	ly to test	for public	safety Se	ee sectio	n 509(a)(4) . (see ı	nstructio	ns)	
11		An organizat	tion organized a	nd operated exclusive	ly for the	benefit of	, to perfor	m the fur	ctions of,	or to car	rry out th	e	
				blicly supported organ								section	on
		_		at describes the type o					te lines 1				
		a Type		Type II c		e III–Fund	-	_			Type III-		
е	\Box			y that the organization									
				on managers and othe	r than on	e or more	publicly s	supported	organiza	itions des	scribed ii	n secti	on
			section 509(a)(2	•									
f		_	zation received a , check this box	a written determinatior	n from the	RS that	ıt ıs a ⊺yp	e I, Type	II, or Typ	e III supp	oorting		
g		•		the organization acce	oted anv	aift or con	tribution 1	from anv	of the	• •			ш
9		following per		mo organization accep	,	J							
		• .		or indirectly controls,	either alo	ne or toge	ther with	persons	described	l ın (ıi)	,	Yes	No
		•		verning body of the su		rganizatio	n?				11g(i)		
			•	person described in (i)					•	•	11g(ii)		
				y of a person describe						•	<u>11g(iii)</u>	l	L
<u>h</u>		Provide the		ation about the organiz					(vi)	Is the	(vii)	Amount	of
(i)		of supported	(ii) EIN	(described on lines 1-9	in col (i) li	sted in your	the organ	nization in	organiza	tion in col		support	
	U, g	21112411011		above or IRC section (see instructions))	governing	document?		of your oort?		zed in the S?			
				(See mondedons))	Yes	No	Yes	No	Yes	No	1		
					-	<u> </u>							
							<u></u>		_		ļ		0
]				0
						 		 	_		 		
			L										0
						ļ							0
													0
						-			<u> </u>				
Tota	1		l]	-	l	l	l	<u> </u>	L		0

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)

Sect	ion A. Public Support		3, ,, 0, 0		· · · · · · · · · · · · · · · · · · ·		
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	1 102 524	1 946 104	4 764 290	2 196 760	2,813,969	9,714,736
•	,	1,103,524	1,846,194	1,764,280	2,186,769	2,613,969	9,714,730
2	Tax revenues levied for the organization's						
	benefit and either paid to or expended on its behalf	o	o	o	0	ا	0
		<u>_</u>					
3	The value of services or facilities						
	furnished by a governmental unit to the organization without charge	0	o	o	0	ا	0
_	-						0.744.700
4	Total Add lines 1-3	1,103,524	1,846,194	1,764,280	2,186,769	2,813,969	9,714,736
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)						3,606,343
6	Public support. Subtract line 5 from line 4						6,108,393
Sect	ion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4	1,103,524	1,846,194	1,764,280	2,186,769	2,813,969	9,714,736
8	Gross income from interest, dividends,	· · · · · · · · · · · · · · · · · · ·			• • • • •		
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources .	1,096	2,613	13,600	29,572	35,488	82,369
9	Net income from unrelated business					ĺ	
	activities, whether or not the business is	ا				ا ا	0
40	regularly carried on	0	0	0	0	0	0
10	Other income Do not include gain or loss from the sale of capital assets						
	(Explain in Part IV)	4,511	3,697	3,360	-5,631	2,995	8,932
11	Total support. Add lines 7 through 10	7,011	0,001	0,000	0,00.		9,806,037
12	Gross receipts from related activities, etc. (s	ee instructions	.)			12	265,690
13	First five years. If the Form 990 is for the o					a section 501(c	
	organization, check this box and stop here			,			^`-′ ▶□
Sact	ion C. Computation of Public Support	Percentage					
<u>3601</u> 14	Public support percentage for 2008 (line 6,		ed by line 11	column (fi)		14	62 29%
15	Public support percentage from 2007 Sched			001011111 (1))		15	61 40%
16a	33 1/3% support test—2008. If the organiza			ine 13 and lin			
ıva	and stop here . The organization qualifies a				C 14 13 00 1707		> X
b	33 1/3% support test–2007. If the organiza				nd line 15 is 33	3 1/3% or more	
D	box and stop here. The organization qualifier						▶ □
17a	10%-facts-and-circumstances-test-2008.				ne 13. 16a. or 1	16b. and line 1₄	1 is 10%
	or more, and if the organization meets the "i	facts-and-circui	mstances" test	. check this bo	x and stop he	re. Explain in P	art IV how
	the organization meets the "facts-and-circur	nstances" test	The organizat	on qualifies as	a publicly sup	ported organiza	ation ▶ 🗍
b	10%-facts-and-circumstances test-2007.	If the organiza	tion did not che	eck a box on lir	ne 13, 16a, 16b	o, or 17a, and li	ne 15 is 10 [™]
-	or more, and if the organization meets the "i	facts-and-circui	mstances" test	, check this bo	x and stop he	re. Explain in P	Part IV how
	the organization meets the "facts-and-circur	nstances" test.	The organizat	ion qualifies as	a publicly sup	ported organiza	ation 🕨 🔲
18	Private foundation. If the organization did not ch						▶ □
.0	r iivate loundation. Ii tile organization did not cr	ICCK & DUX OII IIIR	, 10, 10d, 10b, 1		DOX BIIG SC		<u> </u>
					Cal	hadula A (Farm 00)	0 oz 000 EZ) 2008

990 or 990-EZ) 2008 International Rivers Network

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

	(Complete only if you checked the	ne box on line	9 of Part I)		<u> </u>	· · · · - · -	
	tion A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not	_	_	_	i		_
	include any "unusual grants ") .	0	0	0			. 0
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	ol	o	0			0
3	Gross receipts from activities that are not an						
J	•						0
	unrelated trade or business under section 513						
4	Tax revenues levied for the organization's						
	benefit and either paid to or expended on	ا	_	م			0
_	its behalf	0	0	0			0
5	The value of services or facilities						
	furnished by a governmental unit to the						•
_	organization without charge	0	0	0			0
6	Total. Add lines 1-5	0	0	. 0	0	0	0
7a	Amounts included on lines 1, 2, and 3						_
	received from disqualified persons						0
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of 1%						
	of the total of lines 9, 10c, 11, and 12 for						
	the year or \$5,000						0
C	Add lines 7a and 7b	0	0	_0	0	0	0
8	Public support (Subtract line 7c from						
	line 6)						0
Sect	tion B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6	0	0	0	0	0	0
	Gross income from interest, dividends,	J					<u>~</u>
·vu	payments received on securities loans,						
	rents, royalties and income from similar						
	sources						0
h	Unrelated business taxable income (less				·		
U	section 511 taxes) from businesses	i					
	acquired after June 30, 1975						0
_	Add lines 10a and 10b	0	0	0	0	0	0
C	Net income from unrelated business		<u>_</u>		<u>-</u>		
11							
	activities not included in line 10b,		i				
	whether or not the business is regularly						0
40	carried on .						0
12	Other income Do not include gain or						
	loss from the sale of capital assets	_					•
	(Explain in Part IV.)	0	0	0			0
13	Total support. (Add lines 9, 10c, 11,						
	and 12)						0
14	First five years. If the Form 990 is for the org	ganization's firs	t, second, third	l, fourth, or fifth	i tax year as a	section 501(c)	(3)
	organization, check this box and stop here.	•					. ▶ 🔝
Sec	tion C. Computation of Public Support	Percentage					
15	Public support percentage for 2008 (line 8, co		d by line 13, co	olumn (f))		15	0 00%
16	Public support percentage from 2007 Schedu	. ,	•			16	0 00%
	tion D. Computation of Investment Ince			<u> ,</u>	<u>· · · </u>		0.00.10
	Investment income percentage for 2008 (line			e 13. column (f	2)	17	0 00%
17					"· · ·	18	0 00%
18	Investment income percentage from 2007 Sc	neuule Α, Ραπ	iv-M, iiiie Z/N	 			
19a		tion ald not che	ECK THE DOX ON	ime 14, and lin	e io is more tr	iaii 33 1/3% ar	10 III 17 18
	not more than 33 1/3%, check this box and si	top here. The	organization qu	jaiities as a pu	DIICIY SUPPORE	o organization	🟲 📖
b	33 1/3% support tests-2007. If the organization d						
	line 18 is not more than 33 1/3%, check this box a	nd stop here. Th	ne organization q	ualifies as a pub	licly supported o	rganization	▶ <u> </u>
20	Private foundation. If the organization did no		on line 14 10s	or 10h obool	this boy and	oo instruction	, <u>⊾</u> i i

Schedule A (Form 990 or 990-EZ) 2008	International Rivers Network	94-3158295 Pa	age 4
Part IV Supplemental	Information. Complete this part to provide the explanation	n required by Part II, line 10,	
Part II line 17a	or 17b, or Part III, line 12 Provide any other additional info	ormation (see instructions)	N/A
• 1 41(11, 1110 174	or tra, or tale in, into 12 thousand any outer addition	Jilliano (555 mistrosus)	
Dert II Line 40 Misselleneous inc	ama		
Part II Line 10 Miscellaneous inc	onie		

			·
		,	

		,	
			· -
			 -

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

- To be completed by organizations described below.
 - ▶ Attach to Form 990 or Form 990-EZ.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-B

	_	es," to Form 990, Part IV, line 5 (Proxy ganizations Complete Part III	iax), then		
	me of organization			• •	er identification number
	national Rivers Network			94-3158	
Pa		eted by all organizations exem ctions for Schedule C for details.		on 501(c) and section	527 organizations.
1	Provide a description of	the organization's direct and indirect	political campaig	n activities in Part IV.	
2	Political expenditures			▶ \$	0
3	Volunteer hours				0
Pai		eted by all organizations exem	•	on 501(c)(3).	N/A
		ctions for Schedule C for details.	·	4055	N/AO
1		excise tax incurred by the organizat			
2	•	excise tax incurred by organization	-		
3	-	ed a section 4955 tax, did it file Forn	n 4720 for this yea	ar ⁷	Yes No
4a	Was a correction made?				Yes No
b	If "Yes," describe in Part	IV. eted by all organizations exem	-4don o o o4'.	F04/a\ avaant aaat	ion 504(a)(2)
Pa		ctions for Schedule C for details	pt under Sectio	on 501(c), except sect	1011 50 1(C)(3). N/A
1		expended by the filing organization	for costion 527 c	exampt function	
'	activities	y expended by the filling organization	i ioi section 527 e	xempt function ► ¢	
2		filing organization's funds contribute	d to other organiz	eations	
2	for section 527 exempt for		u to other organiz	.auons ▶ \$	
3	•	ct exempt function expenditures Ad-	d lines 1 and 2 an	nd enter here and	-
3	on Form 1120-POL, line		u lines i and z ai	s s	0
4		n file Form 1120-POL for this year?	•	Ψ	Yes No
5	• -	ses and employer identification num		 action 527 political organ	
3	navments were made. F	nter the amount paid and indicate if	the amount was r	paid from the filing organi	zations to which
	were political contribution	ns received and promptly and directly	y delivered to a s	eparate political organiza	ition, such as a
	separate segregated fun	d or a political action committee (PA	C) If additional s	pace is needed, provide	information in Part IV
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
				(0
					0
					0
				() 0
			· 	() 0
					0

			•
'n	а	е	4

Sch	edule*C (Form 990 or 990-EZ) 2008					Page 2
P	art II-A To be completed by orgen (election under section	-	•			B N/A
	Check ▶ if the filing organization					
В	Check ▶ ☐ If the filing organization	•	• ,		apply	
	Limits on L (The term "expenditures	obbying Expen		d.)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influen	ce public opinio	n (grass roots lobby	/ing)	0	0
b	Total lobbying expenditures to influen	_	• •		0	0
C	Total lobbying expenditures (add lines				0	0
d e	Other exempt purpose expenditures . Total exempt purpose expenditures (a			•	0	0
f	Lobbying nontaxable amount. Enter the			n both		
	columns				0	0
	If the amount on line 1e, column (a) or (b) is:		g nontaxable amoun	it is:		
	Not over \$500,000 Over \$500,000 but not over \$1,000,000		mount on line 1e s 15% of the excess	over \$500,000		
	Over \$1,000,000 but not over \$1,500,000		s 10% of the excess			:
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plu	s 5% of the excess o			
	Over \$17,000,000	\$1,000,000				
g h	Grassroots nontaxable amount (enter Subtract line 1g from line 1a Enter -0	•			0	<u>0</u> 0
ï	Subtract line 1f from line 1c. Enter -0-	=			0	0
j	If there is an amount other than zero section 4911 tax for this year?	on either line 1h			m 4720 reporting	Yes No
	(Some organizations tha	t made a sectio				9
	Lobb	ying Expenditu	res During 4-Year	Averaging Period	<u> </u>	
	Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
2a	Lobbying non-taxable amount	0	0	0		_0
ь	Lobbying ceiling amount (150% of line 2a, column(e))					0
	Total lobbying expenditures	0	0	0		0
_d	Grassroots non-taxable amount	0	0	0		0
е —	Grassroots ceiling amount (150% of line 2d, column (e))					0
f	Grassroots lobbying expenditures	0	0	0		0
					Schedule C (Form	990 or 990-EZ) 2008

Par	To be completed by organizations exempt under section 501(c)(3) that hat 5768 (election under section 501(h)). See the instructions for Schedule C for			ea Fo		
		(6	a)		(b)	
		Yes	No	,	Amoun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local					
	legislation, including any attempt to influence public opinion on a legislative matter or			}		
	referendum, through the use of					
а	Volunteers?		X			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?.	X		1		
С	Media advertisements?		Х			C
d	Mailings to members, legislators, or the public?		Х			
е	Publications, or published or broadcast statements?	X				79
f	Grants to other organizations for lobbying purposes?		X			C
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	X				1,308
h			Х			C
i	Other activities? If "Yes," describe in Part IV		Х			C
j	Total lines 1c through 1i			_		1,387
2a			Х			
b	If "Yes," enter the amount of any tax incurred under section 4912			N/A		
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			N/A		
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	N/A				
	t III-A To be completed by all organizations exempt under section 501(c)(4), sec	tion 5	01(c	(5), o	Г	
	section 501(c)(6). See the instructions for Schedule C for details		•	• • • •		N/A
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?.			3		
Par	To be completed by all organizations exempt under section 501(c)(4), sec section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No"				r	
	question 3 is answered "Yes." See Schedule C instructions for details					N/A
1	Dues, assessments and similar amounts from members		1		-	
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of					
	political expenses for which the section 527(f) tax was paid).					
a	Current year		2a			
b	Carryover from last year		2b			
C	Total		2c			0
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due	S.	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the					
	excess does the organization agree to carryover to the reasonable estimate of nondeductible					
_	lobbying and political expenditure next year?	•	5			
5 Pos	Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)		3	L		
Part	IV Supplemental Information					
	plete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line complete this part for any additional information	5, and	Part	II-B, Iır	ne 1i	N/A
				· -	. .	 -
			. 		. -	

Interna	ational Rivers Network irm 990 or 990-EZ) 2008		94-3158295
Part IV	Supplemental Information (continued)	N/A	Page 4
,			
		• • • • • • • • • • • • • • • • • • • •	
		•	
			•••••

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Inspection Employer identification number

Name	of the organization		E	mploye	identification number
Inter	national Rivers Network		94	4-3158	295
Par		or Advised Funds or Other Similar	r Funds	or Ac	counts. Complete if
	the organization answered "Yes" t	o Form 990, Part IV, line 6			N/A
		(a) Donor advised funds		(b) F	unds and other accounts
1	Total number at end of year .				
2	Aggregate contributions to (during year)	-			
3	Aggregate grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and o	-		onor a	
	funds are the organization's property, subje				
6	Did the organization inform all grantees, do		-		/ be
	used only for charitable purposes and not for	or the benefit of the donor or donor advis	sor or oth	ner	o., o.,
			<u> </u>	•	Yes No
Par	Conservation Easements. Comp	plete if the organization answered "Y	es" to F	<u>orm 9</u>	90, Part IV, line 7 N/A
1	Purpose(s) of conservation easements held	by the organization (check all that appl	y).		
	Preservation of land for public use (e g	, recreation or pleasure) Preservat	tion of ar	histor	ically important land area
	Protection of natural habitat	Preservat	tion of ce	ertified	historic structure
	Preservation of open space				
2	Complete lines 2a-2d if the organization he	ld a qualified conservation contribution i	in the for	m of a	conservation easement
_	on the last day of the tax year	ia a qualifica conscivation contribution		o. a	conservation casement
	on the last day of the tax year				Held at the End of the Year
а	Total number of conservation easements			2a	
b	Total acreage restricted by conservation ea	sements		2b	
c	Number of conservation easements on a ce			2c	
d	Number of conservation easements include			2d	
3	Number of conservation easements modifie		or termina	ated by	the organization
	during the taxable year			•	•
4	Number of states where property subject to	conservation easement is located	>		
5	Does the organization have a written policy	regarding the periodic monitoring, inspe	ection, vi	olation	s, and
	enforcement of the conservation easements	s it holds?			. Yes No
6	Staff or volunteer hours devoted to monitori				ar -
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing easements d	luring the	year	▶ \$
8	Does each conservation easement reported	I on line 2(d) above satisfy the requirem	ents of s	ection	
	170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)?		•	•	Yes No
9	In Part XIV, describe how the organization r				
	balance sheet, and include, if applicable, th		n's financ	ial stat	ements that describes
	the organization's accounting for conservati		0:		
Par		ons of Art, Historical Treasures, or Of	ther Sim	ilar As	
	Complete if the organization answere				N/A
1a	If the organization elected, as permitted und	der SFAS 116, not to report in its revenu	ie statem	ent an	d balance sheet works of
	art, historical treasures, or other similar ass				
	service, provide, in Part XIV, the text of the				
b	If the organization elected, as permitted und				
	historical treasures, or other similar assets service, provide the following amounts relati	· · · · · · · · · · · · · · · · · · ·	research	in lulu	lerance or public
	•	•			. .
	(i) Revenues included in Form 990, Part VI (ii) Assets included in Form 990, Part X.	II, line 1	٠		\$
_					
2	If the organization received or held works or		r assets	tor tina	ncial gain, provide the
	following amounts required to be reported u				▶ ¢
a	Revenues included in Form 990, Part VIII, I	ne I			S
b	Assets included in Form 990, Part X				- P

_		•
Pag	е	4

Part		Organizations Maintaining	g Collections of	Art,	<u>Histo</u>	rical 1	reasures,	or Ot	<u>her Similar A</u>	ssets (c	<u>ontınu</u>	<u> </u>
` 3	Using	the organization's accession	and other records	, chec	k any	of the	following th	at are	a significant us	e of its co	ollectio	าก
_		(check all that apply)	N/A	-	•		•		_			
а		Public exhibition		d		Loan	or exchange	e progi	ams			
b	$\overline{\Box}$	Scholarly research		е		Other						
С	=	Preservation for future genera	ations									
4	Provid	e a description of the organiz		and e	explain	how t	hey further	the org	janization's exe	mpt purp	ose in	ı
	Part X											
5		ighe year, did the organization is to be sold to raise funds rath									es 🔲	No
Part		Trust, Escrow and Custo Part IV, line 9, or reported						on an	swered "Yes"	to Form	990,	N/A
1a	Is the	organization an agent, trustee	e, custodian or oth	er inte	ermed	ary for	r contributio	ns or c	other assets no		P	
	includ	ed on Form 990, Part X?								Y	es 🔃	No
b	If "Yes	s," explain the arrangement in	Part XIV and con	nplete	the fol	llowing	table:	_				
								_		Amount		
С	-	ning balance				•		. 10				
d		ons during the year	• •				ı	10				
е		utions during the year				•		. 16				
f	Ending	g balance						11	<u> </u>			<u> </u>
2a	Did the	e organization include an amo	ount on Form 990,	Part 2	X, line	21?.				Y	es 🛛	No
<u>b</u>		," explain the arrangement in										
Part	V	Endowment Funds. Com	plete if organiza	tion a	nswer	ed "Y	es" to Forr	n 990	, Part IV, line	10		N/A
			(a) Current year	(b) Pnor y	ear	(c) Two year	s back	(d) Three years ba	ick (e) Fo	our years	back
1a	Begini	ning of year balance										
b	Contri	butions										
C	Invest	ment earnings or losses .		•								
d	Grants	s or scholarships .					•				·	
е	Other	expenditures for facilities										
	and pr	ograms										
f		istrative expenses .										i
g	End of	f year balance	0									
2	Provid	e the estimated percentage of	f the year end bal	ance	held a	S.						
а		designated or quasi-endowm	-		%							
b	Perma	nent endowment	%									
С	Term	endowment •	%									
3a	Are the	ere endowment funds not in t	he possession of	the or	ganıza	tion th	at are held	and ac	Iministered for	the		
	organi	zation by									Yes	No
	(i)	unrelated organizations .			,					3a(i)		<u> </u>
	(ii)	related organizations								3a(ii)		<u> </u>
b	If "Yes	s" to 3a(ıı), are the related org	anizations listed a	ıs requ	ured o	n Sche	edule R?.			3b		<u> </u>
4	Descri	be in Part XIV the intended u	ses of the organiz	ation's	s endo	wmen	t funds					
Part		Investments—Land, Buil						ırt X, lı	ne 10			
		Description of investment	(a) Cost or o		is		st or other (other)	(c)	Depreciation	(d) Bo	ook value	e
1a	Land		.		0	_	0					0
b		ngs			ō		0		0			0
c		hold improvements .			o		60,178		3,578		5	6,600
d	Equip				ō		80,303		53,497			6,806
e	Other				0		5,000		5,000			0
		nes 1a-1e (Column (d) shou	ld equal Form 990). Part		lumn (i		c).)			8	3,406

International Rivers Network			94-3158295	
Schedute D (Form 990) 2008			• • • • • • • • • • • • • • • • • • • •	Page
Part VII Investments—Other Securities	. See Form 990, Part X,	line 12	N/A	
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of va Cost or end-of-year n	
Financial derivatives and other financial products	0			
Closely-held equity interests	0			
Other	0			
	0			
	0			
	0			
	0			
	0			
	0			
	0			
	0			
	0			
Total (Column (b) should equal Form 990, Part X, col (B) line 12)	000 5			
Part VIII Investments—Program Related	1. See Form 990, Part X,	line 13	N/A	 -
(a) Description of investment type	(b) Book value	((c) Method of va	
	0			
	0			
	0			
	0			
	0			
	0			
	0			· · · · · · · · · · · · · · · · · · ·
	0			
	0			
Total (Column (b) should equal Form 990, Part X, col. (B) line 13.)	0			
Part IX Other Assets. See Form 990, Part IX		L		
) Description			(b) Book value
Advances and other receivables	, Description			11,00
Deposits				11,958
Deposits		-		1.,,00,

				(
				

8800000000 Total. (Column (b) should equal Form 990, Part X, col. (B) line 15.). 22,966

Part X Other Liabilities. See Form 990	, Part X, line 25	N/A
(a) Description of liability	(b) Amount	
Federal income taxes	0	
Lease payable	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
Total (Column (b) should equal Form 990, Part X, col (B) line 25)	0	

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Sched	die D (Form 990) 2008					Fage 4
Par				1		
`1	Total revenue (Form 990, Part VIII, column (A), line 12)		• •	1	—	2,909,962
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	↓	2,798,116
3	Excess or (deficit) for the year Subtract line 2 from line 1	٠	•	3	↓	111,846
4	Net unrealized gains (losses) on investments			4	ļ	0
5	Donated services and use of facilities			5_	<u> </u>	0
6	Investment expenses			6	ļ	0
7	Prior period adjustments			7	 	0
8	Other (Describe in Part XIV)			8	ļ	0
9	Total adjustments (net) Add lines 4–8			9	<u> </u>	0
10	Excess or (deficit) for the year per financial statements. Combine lines 3 a	nd 9		10		111,846
Par	t XII Reconciliation of Revenue per Audited Financial Statem		With Revenue	per	Retur	
1	Total revenue, gains, and other support per audited financial statements .			<u> </u>	1	2,920,447
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 - 1	1			
а	Net unrealized gains on investments	2a		0		
b	Donated services and use of facilities	2b	10,4			
C	Recoveries of prior year grants	2c		0		
d	Other (Describe in Part XIV)	2d		0		
е	Add lines 2a through 2d			-	2e	10,485
3	Subtract line 2e from line 1			-	3	2,909,962
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b.	4a		<u> </u>		
b	Other (Describe in Part XIV)	4b		0		
С	Add lines 4a and 4b.			· -	4c	0
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, lin				5	2,909,962
	Reconciliation of Expenses per Audited Financial State	ment	s with Expens	es p		
1	Total expenses and losses per audited financial statements			 -	1	2,808,601
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 -	. مه	405		
a	Donated services and use of facilities	2a	10,4	185		
b	Prior year adjustments	2b				
С	Losses reported on Form 990, Part IX, line 25	2c				
d	Other (Describe in Part XIV)	2d		-		40.405
е	Add lines 2a through 2d			-	2e	10,485
3	Subtract line 2e from line 1			H	3	2,798,116
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		_		
ь	Other (Describe in Part XIV)	4b				0
C	Add lines 4a and 4b			٠	4C	0.709.446
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, I	line 18	3)		5	2,798,116
	t XIV Supplemental Information					
	plete this part to provide the descriptions required for Part II, lines 3, 5, and			d 4, P	art IV,	
and	2b, Part V, line 4, Part X, Part XI, line 8; Part XII, lines 2d and 4b, and Part X	XIII, III	nes 2d and 4b			N/A
						· · · · · · · · · · · · · · · · · · ·
						
						· · · · · · · · · · · · · · · · · · ·
			• • • • • • • • • • • • • • • • • • • •			· · · · · · · · · · · · · · · · · · ·
						· · · · · · · · · · · · · · · · · · ·

International Rivers Network 94-3158295 Page 5 Schedule D (Form 990) 2008 Supplemental Information (continued) N/A

Schedule F (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047

Open to Public

Department of the Treasury

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

Internal Revenue Service		Form 990, Pa	rt IV, line 14b, line 15, or line	16.	Inspection
Name of the organization					mployer identification number
International Rivers Net					I-31582 <u>95</u>
	nformation on Acorm 990, Part IV, line		de the United States. Co	omplete if the organization	answered
	ntees' eligibility for tl		ords to substantiate the amo sistance, and the selection o	-	X Yes No
2 For grantmakers. United States	Describe in Part IV t	he organizatıor	s's procedures for monitoring	g the use of grant funds o	utside the
3 Activities per Regio	on (Use Schedule F-	1 (Form 990) if	additional space is needed)	
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, 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 in region
South America	1	1	Program services	Research, writing, hosting, mee	tings 88,501
South America	0	C	Grants to recipients	N/A	178,879
Europe	1	1	Program services	Research, writing, hosting, mee	etings 64,111
Europe	0	<u>c</u>	Grants to recipients	N/A	25,000
Sub-Saharan Africa	1	1	Program services	Research, writing, and training	56,204
East Asia and the Pacif	īc 1	2	Program services	Research and writing	62,888
East Asia and the Pacif	ic 0	c	Grants to recipients	N/A	76,921
Middle East and North Africa	1	1	Program services	Research and writing	52,077

0 Grants to recipients

0

0

이

0

0

N/A

0

0

0

0

0

0

0

0

8,100

0

0

0

0

0

0

0

612,681

North America

Schedule F (Form 990) 2008

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Schedule F-1 (Form 990) if additional space is needed Part II

nerica ne	(d) Purpose of (e) Amount of (f) Manner of g) Amount of (h) Description valuation valuation of non-cash grant cash disbursement assistance assistance appraisal, other)	Implementation of the grant "Promoting integrated Resources 48,921 Wire N/A N/A N/A	Legal actions, communication, communication of an 25,100 Wire N/A N/A N/A	Pursung legal actions in the campaign to protect the Madeira 28,200 Wire N/A N/A N/A	Conducting a study for an atternative energy 20,000 Wire N/A N/A N/A N/A	Working with local communities affected by the Madeira River 9,500 Wire N/A N/A N/A	Travel costs for two activists from Aisen, 5,029 Wire N/A N/A N/A	Completing the work concerning the Marowe Dam project 10,000 Wire IN/A N/A N/A	To investigate and report on the effects of 7-100 Wire N/A N/A N/A N/A	Supporting social participation regarding 5,000 Wire N/A N/A N/A	Supporting representatives of N/A NI/A NI/A NI/A NI/A	Supporting NA N/A representatives of Kayapo Indians' trip to 20,000 Wire N/A	Supporting the Living N/A N/A N/A Atlamira, Brazil in May 17,500 Wire N/A N/A	Assessing the Environmental Impact 10,000 Wire N/A N/A N/A N/A	Participation in the IV Annual REDLAR Conference in 2,400 Wire N/A N/A	To create two sessions of capacity-building school, to 5,700 Wire N/A N/A N/A	
(a) Name of organization	(Form 990) if additional space is (b) IRS code section and EIN (if applicable) (c)	East Asia Pacific	South An	South An	South An	South An	South An	Europe	East Asia Pacific	Europe	South An	South An	South An	South An	Central A	Central A	

Enter total number of organizations that are recognized as charities by the foreign country or for which the grantee or counsel has

provided a section 501(c)(3) equivalency letter

Enter total number of other organizations or entities

94-3158295

International Rivers Network Schedule F-1 (Form 990) 2008

Schedule F-1	Schedule F- (Form 930) 2006	Othor Accie	tanco or Entitios	Entities Outside the United States (Schadule F (Form 990) Part III	itod States /S	Chadula E (Eor	m 990) Part II)		
Tak	Continuation of Grants	alla Otilei Assis	ומווכב כו דווווובם כ	מונצומב וווב סוו	ica States.	o l'apparent	(a a a a a a a a a a a a a a a a a a a		in Mothad of
-	(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)
			South America	Helping the people affected by the Daule Peripa Dam to	5,800 Wire	Wire	N/A	N/A	N/A
			East Asia and the Pacific	Continued monitoring of hydropower dam developments in	10,000 Wire		N/A	N/A	N/A
			East Asia and the Pacific	Supporting Vietnam Rivers Network's three field-based studies by	6,500 Wire		W/A	N/A	N/A
			ia and the	Organizing four meetings of the Thai Dam-Affected People's			N/A	N/A	N/A
			America	Supporting work around the Belo Monte Dam, including work			W/A	N/A	N/A
				Supporting work with people affected by Belo Monte Dam and			W/A	N/A	N/A
				Following up with the people affected by the Merowe Dam in Sudan	-		N/A	N/A	N/A
					0		0		
					0		0		
					0		0		
_					0		0		
					0		0		
					0		0		
					0		0		
					0		0		
					0		0		
					0		0		
					0		0		
-					0		0		
								Schedule F	Schedule F-1 (Form 990) 2008

International Rivers Network

Schedule F (Form 990) 2008

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III

Schedule F (Form 990) 2008 (h) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance 0 0 (f) Amount of non-cash assistance (e) Manner of cash disbursement 0 0 ᅙ (d) Amount of cash grant 0 0 0 0 Ò ō 0 0 (c) Number of recipients Use Schedule F-1(Form 990) if additional space is needed (b) Region (a) Type of grant or assistance

Schedule F (Fon	m 990) 2008 Page 4
	Supplemental Information Complete this part to provide the information required in Part I, line 2, and any other additional information.
Part I Line 2	
Grant applica	ations include a description of how the money is to be spent, and grantees are required to submit a report at the end of
the grant des	scribing the results of the supported activities. This report must include expenditure detail

SCHEDULE M (Form 990)

NonCash Contributions

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

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization
International Rivers Network

Employer identification number 94-3158295

OMB No 1545-0047

Part	Types of Property				,			
		(a) Check if	(b) Number of contributions	(c) Revenues reported on	Moth	(d) nod of def	terminin	^
		applicable	Number of Contributions	Form 990, Part VIII, line 1g	MICI	revenu		J
1	Art—Works of art							
2	Art—Historical treasures		· ·					
3	Art—Fractional Interests							
4	Books and publications							
5	Clothing and household							
•	goods							
6	Cars and other vehicles .					-		
7	Boats and planes	 						-
8	Intellectual property							
9	Securities—Publicly traded .	X	5	30 804	Market q	uotatio	ne	
10	Securities—Closely held stock	 ^ 		39,004	IVIAI KEL Y	uotatio	113	
	•	-						
11	Securities—Partnership, LLC,	l i						
40	or trust interests				 			
12	Securities—Miscellaneous .				 			
13	Qualified conservation							
	contribution (historic							
	structures)	— —						
14	Qualified conservation							
	contribution (other)				ļ			
15	Real estate—Residential	ļ						
16	Real estate—Commercial				<u> </u>			
17	Real estate—Other .							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens				<u>l</u>			
24	Archeological artifacts .				<u> </u>			
25	Other ► ()		0	0				
26	Other ► ()		0	0				
27	Other ► ()		0	0				
28	Other • ()		0	0				
	`	<u> </u>						
29	Number of Forms 8283 received	•	•					_
	which the organization complete	ed Form 82	83, Part IV, Donee Acknow	ledgement	29			0
							Yes	No
30 a	During the year, did the organize		· · · · · · · · · · · · · · · · · · ·		i –2 8			
	that it must hold for at least thre	•						
	required to be used for exempt	purposes f	or the entire holding period?	?		30a		X
b	If "Yes," describe the arrangement	ent in Part	II					
31	Does the organization have a gi	ft acceptar	nce policy that requires the i	review of any non-standard				
	contributions? .					31		X
32 a	Does the organization hire or us	e third par	ties or related organizations	s to solicit, process, or sell				
	noncash contributions?	•				32		Х
b	If "Yes," describe in Part II.							
33	If the organization did not report	revenues	in column (c) for a type of p	property for which column (a)) IS			
	checked, describe in Part II					<u>L</u>		

International Rivers Network

94-3158295

Schedule M (F		age 2
Part II	Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.	N/A

SCHEDULE O (Form 990)

Supplemental Information to Form 990

Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information. OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

International Rivers Network	94-3158295
Form 990 Part VI Section A Line 10	
All Board members and management will receive an electronic copy of the prepared Form 990	before it is filed with the IRS, and
will have one week to review it before it is filed.	
Form 990 Part VI Section B Line 12c	
The organization requires all board members to sign a statement annually declaring any conflic	t of interest, and excuse
themselves from discussions and votes where such a conflict occurs.	
In the course of meetings or activities, all board members and officers will disclose any interest	s in a transaction or decision
where, to their knowledge, including their businesses or other nonprofit affiliations, their families	s and/or their significant other,
employer, or close associates will receive a benefit or gain. After disclosure, the board member	s will be asked to leave the
room for the discussion and will not be permitted to vote on the question.	
Form 990 Part VI Section B Line 15a	
Every three years (2007 was the most recent), the organization conducts a compensation review	w for all positions, including the
Executive Director Director of Finance and Operations compiles the data from whatever source	es are available (in 2007, there was
only one comparable survey, published by Center for Nonprofit Management), and analyze our	current structure and pay scale in
light of that data, and prepare a proposed revision, in consultation with the Management Team	
The Board appoints a member to review the process and proposal, and if both are approved, the	e proposal goes to the full Board
for approval. The Board's decision is documented in the minutes	
Form 990 Part VI Section C Line 19	
Governing documents, conflict of interest policy, and Financial Statements are available to the	public upon request

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

Open to Public

Employer identification number

94-3158295

Department of the Treasury Internal Revenue Service

International Rivers Network Name of the organization

Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ▶ See separate instructions.

۷ (F)
Direct controlling
entity (E) End-of-year assets (D) Total income Legal domicile (state or foreign country) Primary activity Identification of Related Tax-Exempt Organizations Identification of Disregarded Entities (A) Name, address, and EIN of disregarded entity Partl Part II

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity
Fund for International Rivers 20-4014735 2150 Aliston Way, Suite 300, Berkeley, CA 94704	Support International Rivers Network CA	CA	501 (c) (3)	11 Type I	N/A

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. (HTA)

Schedule R (Form 990) 2008

	•		
Ç	1	I	
94 21 59 705	C670C1C-+6		•

Schedule R (Form 990) 2008 International Rivers Network

Part III Identification	Identification of Related Organizations Taxable	nizatior		as a Partnership	i E		:						A/N
a g	(B) Primary activity	(C) Legal domicile (state or foreign		(E) Predominant income (related, unrelated)	nant lated, ent,	(F) Share of total income		(G) Share of end-of-year assets	(H) Disproportionate allocations?	Tionate ons?	(I) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(J) General or managing partner?	al or ging er?
					_		_		Yes	2 2		Yes	8
							0	0			0	l	
							- 0	0			0		
							0				0		
							0	0			0		
							0	0			0		
							0	0			0		
							0	0			0		1
Part IV Identification	Identification of Related Organizations Taxable	anizatior		as a Corporation or Trust	ion or Tr	ust							N/N
Name, address, and E	(A) Name, address, and EIN of related organization	Ę	(B) Primary activity		(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Type of entity (C corp. S corp. or trust)		(F) Share of total income		(G) Share of end-of-year assets	(H) Percentage ownership	ntage ship
								:		0	0		%
			:							0	0		%
										0	0		%
								;		0	0		%
										0	0		%
			į				·			0	0		%
										0	0		%
											Schedule R (Form 990) 2008	orm 990)	2008

94-3158295 e **3**

International Rivers Network Schedule R (Form 990) 2008

Transactions With Related Organizations Part V

27,000 0 0 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds Amount involved Yes Ξ 4 9 **1**e ס <u>0</u> 4 **Fransaction** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? type (a-r) Performance of services or membership or fundraising solicitations for other organization(s) Performance of services or membership or fundraising solicitations by other organization(s) Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity Lease of facilities, equipment, or other assets from other organization(s) Name of other organization(s) Lease of facilities, equipment, or other assets to other organization(s) Sharing of facilities, equipment, mailing lists, or other assets Other transfer of cash or property from other organization(s) Gift, grant, or capital contribution from other organization(s) Other transfer of cash or property to other organization(s). Reimbursement paid by other organization for expenses. Gift, grant, or capital contribution to other organization(s) Reimbursement paid to other organization for expenses Note. Complete line 1 if any entity is listed in Parts II, III, or IV. Loans or loan guarantees to or for other organization(s) Purchase of assets from other organization(s) Loans or loan guarantees by other organization(s) Sale of assets to other organization(s). Sharing of paid employees. Fund for International Rivers Exchange of assets. Ε 0 0 5 _ Ξ 2 9 **3** 9 9 ~

Schedule R (Form 990) 2008

Part VI

Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships Yes No (H) General or managing partner? (G)
Code V—UBI
amount in box 20
of Schedule K-1
(Form 1065) (F)
Disproportionate allocations? ž Yes 0 0 (E) Share of end-of-year assets (D)
Are all
partners
501(c)(3)
organizations? Yes No (C)
Legal domicile
(state or foreign country) Primary activity Name, address, and EIN of entity

Schedule R (Form 990) 2008

•				
Form 8	3868 (Rev. 4-2009)			Page 2
Note	you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check the Only complete Part II if you have already been granted an automatic 3-month extension on a previously you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).			►X
Par	t II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies	neede	ed).	
Type	Or Name of Exempt Organization Employe	r iden	tification n	umber
print		295		
File by sextende		use onl	у	
due dat	e for 2150 Allston Way, Suite 300			
filing the return	See			
instruct				
	ck type of return to be filed (File a separate application for each return):	7		
I I	Form 990	Forr	n 6069	
F	Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 4720	Forr	n 8870	
F	Form 990-EZ Form 990-T (trust other than above) Form 5227			
	Pl Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed	Form 8	868.	
• T	ne books are in the care of International Rivers Network			
	elephone No. ► (510) 848-1155 FAX No. ► N/A			_
	the organization does not have an office or place of business in the United States, check this box			
	this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)		If this is	
	e whole group, check this box ▶	· a	nd attach	а
	ith the names and EINs of all members the extension is for.			
4	I request an additional 3-month extension of time until 11/15/2009			
5	For calendar year2008 , or other tax year beginning , and ending			-
6	If this tax year is for less than 12 months, check reason: Initial return Final return Change		Ψ.	
7	State in detail why you need the extension Additional time is needed to gather sufficient information in o	rder to	file a con	plete
	Informational return			
8 a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,	T	T	
	less any nonrefundable credits. See instructions.	8a	\$	0
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and	<u> </u>		

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete and that I am authorized to prepare this form

estimated tax payments made. Include any prior year overpayment allowed as a credit and any

c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.

Signature > H - () Marry

amount paid previously with Form 8868.

CPA

Form **8868** (Rev 4-2009)

0

0

8b

8c