

Return of Organization Exempt From Income Tax

2006

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

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

A For the 2006 calendar year, or tax year beginning and ending

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return
 Amended return
 Application pending

C Name of organization
 RIGHTS AND RESOURCES INSTITUTE, INC.
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
 1238 WISCONSIN AVENUE, N.W. 204
 City or town, state or country, and ZIP + 4
 WASHINGTON, DC 20007

D Employer identification number
 20-3690821

E Telephone number
 202-470-3900

F Accounting method: Cash Accrual
 Other (specify) _____

G Website: WWW.RIGHTSANDRESOURCES.ORG

J Organization type (check only one) 501(c) (3) (insert no.) 4947(a)(1) or 527

K Check here if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 **1,827,000.**

M Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

H and I are not applicable to section 527 organizations.
H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates **N/A**
H(c) Are all affiliates included? **N/A** Yes No
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No
I Group Exemption Number **N/A**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

Revenue		Expenses		Net Assets	
1	Contributions, gifts, and similar amounts received:				
a	Contributions to donor advised funds	1a			
b	Direct public support (not included on line 1a)	1b	1,570,466.		
c	Indirect public support (not included on line 1a)	1c			
d	Government contributions (grants) (not included on line 1a)	1d	100,000.		
e	Total (add lines 1a through 1d) (cash \$ 1,670,466. noncash \$)	1e		1,670,466.	
2	Program service revenue including government fees and contracts (from Part VII, line 93)	2		155,534.	
3	Membership dues and assessments	3			
4	Interest on savings and temporary cash investments	4			
5	Dividends and interest from securities	5			
6 a	Gross rents	6a			
b	Less: rental expenses	6b			
c	Net rental income or (loss). Subtract line 6b from line 6a	6c			
7	Other investment income (describe)	7			
8 a	Gross amount from sales of assets other than inventory	(A) Securities	8a	(B) Other	
b	Less: cost or other basis and sales expenses	8b			
c	Gain or (loss) (attach schedule)	8c			
d	Net gain or (loss). Combine line 8c, columns (A) and (B)	8d			
9	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>				
a	Gross revenue (not including \$ of contributions reported on line 1b)	9a			
b	Less: direct expenses other than fundraising expenses	9b			
c	Net income or (loss) from special events. Subtract line 9b from line 9a	9c			
10 a	Gross sales of inventory, less returns and allowances	10a			
b	Less: cost of goods sold	10b			
c	Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a	10c			
11	Other revenue (from Part VII, line 103)	11		1,000.	
12	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12		1,827,000.	
13	Program services (from line 44, column (B))	13		1,020,074.	
14	Management and general (from line 44, column (C))	14		196,640.	
15	Fundraising (from line 44, column (D))	15		12,309.	
16	Payments to affiliates (attach schedule)	16			
17	Total expenses. Add lines 16 and 44, column (A)	17		1,229,023.	
18	Excess or (deficit) for the year. Subtract line 17 from line 12	18		597,977.	
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19		0.	
20	Other changes in net assets or fund balances (attach explanation)	20		0.	
21	Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21		597,977.	

Part II Statement of Functional Expenses

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

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds (attach schedule) (cash \$ 0, noncash \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>			Statement 2	
22b Other grants and allocations (attach schedule) (cash \$ 72,330, noncash \$ 0) If this amount includes foreign grants, check here <input checked="" type="checkbox"/>	72,330.	72,330.		
23 Specific assistance to individuals (attach schedule)				
24 Benefits paid to or for members (attach schedule)				
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A	373,831.	355,141.	18,690.	0.
b Compensation of former officers, directors, key employees, etc. listed in Part V-B	0.	0.	0.	0.
c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
26 Salaries and wages of employees not included on lines 25a, b, and c	155,825.	80,369.	66,197.	9,259.
27 Pension plan contributions not included on lines 25a, b, and c	9,953.	4,824.	4,495.	634.
28 Employee benefits not included on lines 25a-27	18,260.	13,872.	3,912.	476.
29 Payroll taxes	35,267.	28,714.	5,897.	656.
30 Professional fundraising fees				
31 Accounting fees	17,009.	2,320.	14,689.	
32 Legal fees	4,038.		4,038.	
33 Supplies				
34 Telephone				
35 Postage and shipping				
36 Occupancy	64,980.	52,905.	10,867.	1,208.
37 Equipment rental and maintenance				
38 Printing and publications	11,337.	4,976.	6,361.	
39 Travel	145,405.	141,054.	4,351.	
40 Conferences, conventions, and meetings	30,800.	19,443.	11,357.	
41 Interest				
42 Depreciation, depletion, etc. (attach schedule)	4,113.	3,349.	688.	76.
43 Other expenses not covered above (itemize):				
a CONSULTANTS	231,290.	231,290.		
b OFFICE EXPENSES	48,500.	8,931.	39,569.	
c MISCELLANEOUS	5,903.	556.	5,347.	
d BUSINESS EXPENSES	182.		182.	
e				
f				
g				
44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	1,229,023.	1,020,074.	196,640.	12,309.

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

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

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

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

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

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

What is the organization's primary exempt purpose? ▶ <u>See Statement 7</u>	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	
a <u>See Statement 3</u> 	
(Grants and allocations \$ <u>25,054.</u>) If this amount includes foreign grants, check here ▶ <input checked="" type="checkbox"/>	171,672.
b <u>See Statement 4</u> 	
(Grants and allocations \$ <u>47,276.</u>) If this amount includes foreign grants, check here ▶ <input checked="" type="checkbox"/>	470,914.
c <u>See Statement 5</u> 	
(Grants and allocations \$) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	260,366.
d <u>See Statement 6</u> 	
(Grants and allocations \$) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	117,122.
e Other program services (attach schedule)	
(Grants and allocations \$) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶	1,020,074.

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year	(B) End of year
Assets	45 Cash - non-interest-bearing		45 398,487.
	46 Savings and temporary cash investments		46
	47 a Accounts receivable	47a 197,972.	
	b Less: allowance for doubtful accounts	47b	47c 197,972.
	48 a Pledges receivable	48a	
	b Less: allowance for doubtful accounts	48b	48c
	49 Grants receivable		49 78,365.
	50 a Receivables from current and former officers, directors, trustees, and key employees		50a
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		50b
	51 a Other notes and loans receivable	51a	
	b Less: allowance for doubtful accounts	51b	51c
	52 Inventories for sale or use		52
	53 Prepaid expenses and deferred charges		53 8,107.
	54 a Investments - publicly-traded securities	<input type="checkbox"/> Cost <input type="checkbox"/> FMV	54a
	b Investments - other securities	<input type="checkbox"/> Cost <input type="checkbox"/> FMV	54b
55 a Investments - land, buildings, and equipment: basis	55a		
b Less: accumulated depreciation	55b	55c	
56 Investments - other		56	
57 a Land, buildings, and equipment: basis	57a 75,432.		
b Less: accumulated depreciation Stmt 8	57b 4,113.	57c 71,319.	
58 Other assets, including program-related investments (describe ► DEPOSITS)		58 18,530.	
59 Total assets (must equal line 74). Add lines 45 through 58		0 . 59 772,780.	
Liabilities	60 Accounts payable and accrued expenses		60 149,642.
	61 Grants payable		61
	62 Deferred revenue		62
	63 Loans from officers, directors, trustees, and key employees		63
	64 a Tax-exempt bond liabilities		64a
	b Mortgages and other notes payable		64b
	65 Other liabilities (describe ► See Statement 9)		65 25,161.
66 Total liabilities. Add lines 60 through 65		0 . 66 174,803.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.		
	67 Unrestricted		67 294,487.
	68 Temporarily restricted		68 303,490.
	69 Permanently restricted		69
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.		
	70 Capital stock, trust principal, or current funds		70
	71 Paid-in or capital surplus, or land, building, and equipment fund		71
	72 Retained earnings, endowment, accumulated income, or other funds		72
73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)		0 . 73 597,977.	
74 Total liabilities and net assets/fund balances. Add lines 66 and 73		0 . 74 772,780.	

Part VI Other Information (continued)		Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	X	
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		
82b			
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
84b			
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
c	Dues, assessments, and similar amounts from members	N/A	
d	Section 162(e) lobbying and political expenditures	N/A	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	N/A	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	N/A	
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	N/A	
85g			
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	N/A	
85h			
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12	N/A	
b	Gross receipts, included on line 12, for public use of club facilities	N/A	
86a			
86b			
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders	N/A	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	N/A	
87a			
87b			
88 a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI		X
88a			
88b			
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 0.; section 4912 0.; section 4955 0.		
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		X
89b			
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	0.	
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization	0.	
89c			
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?		X
89e			
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?		X
89f			
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? N/A		
89g			
90 a	List the states with which a copy of this return is filed DC		
b	Number of employees employed in the pay period that includes March 12, 2006	90b	3
91 a	The books are in care of THE ORGANIZATION Telephone no. 202-470-3900 Located at 1238 WISCONSIN AVE., SUITE 204, WASHINGTON, DC ZIP + 4 20007		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country N/A See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	91b	X

Part VI Other Information (continued)

c At any time during the calendar year, did the organization maintain an office outside of the United States? Yes No
 If "Yes," enter the name of the foreign country **N/A**

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here
 and enter the amount of tax-exempt interest received or accrued during the tax year **92** **N/A**

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a CONTRACTS					144,217.
b CONFERENCE REVENUE					11,317.
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a OTHER INCOME			01	1,000.	
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		1,000.	155,534.
105 Total (add line 104, columns (B), (D), and (E))					156,534.

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	See Statement 11

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

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

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

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

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

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

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13). N/A

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	Yes	No
a	-----					
b	-----					
c	-----					
Totals						

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	Yes	No
a	-----					
b	-----					
c	-----					
Totals						

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

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.

Please Sign Here

Signature of officer: ARVIND KHARE, DIRECTOR, FINANCE & POLICY Date: _____

Type or print name and title

Paid Preparer's Use Only

Preparer's signature: [Signature] Date: 11/15/07 Check if self-employed: Preparer's SSN or PTIN (See Gen. Inst. X)

Firm's name (or yours if self-employed), address, and ZIP + 4: E. Cohen and Company, CPAs
One Research Court, Suite 101
Rockville, MD 20850 EIN: _____ Phone no.: 301-917-6200

- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** and check this box **X**
- Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II			Additional (not automatic) 3-Month Extension of Time. You must file original and one copy.		
Type or print File by the extended due date for filing the return. See instructions.	Name of Exempt Organization		Employer identification number		
	RIGHTS AND RESOURCES INSTITUTE, INC.		20-3690821		
	Number, street, and room or suite no. If a P.O. box, see instructions. 1238 WISCONSIN AVENUE, NW, No. 204		For IRS use only		
City, town or post office, state, and ZIP code. For a foreign address, see instructions. WASHINGTON, DC 20007					

Check type of return to be filed (File a separate application for each return):

Form 990
 Form 990-EZ
 Form 990-T (sec. 401(a) or 408(a) trust)
 Form 1041-A
 Form 5227
 Form 8870
 Form 990-BL
 Form 990-PF
 Form 990-T (trust other than above)
 Form 4720
 Form 6069

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of **THE ORGANIZATION**
Telephone No. **202-470-3900** FAX No. **202-944-3315**
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ . If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

- 4 I request an additional 3-month extension of time until **November 15, 2007**.
- 5 For calendar year **2006**, 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 in accounting period

7 State in detail why you need the extension
Additional information from third parties is needed in order to prepare a complete and accurate return.

8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$
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.	8c	\$ NONE

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.

Signature *Eric Cohen* Title *CPA* Date *8/4/07*

Notice to Applicant. (To Be Completed by the IRS)

- We have approved this application. Please attach this form to the organization's return.
- We have not approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to the organization's return.
- We have not approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file. We are not granting a 10-day grace period.
- We cannot consider this application because it was filed after the extended due date of the return for which an extension was requested.
- Other _____

Director _____ By: _____ Date _____

Alternate Mailing Address. Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above.

Type or print	Name	E. Cohen and Company, CPAs
	Number and street (include suite, room, or apt. no.) or a P.O. box number	One Research Court, Suite 101
	City or town, province or state, and country (including postal or ZIP code)	Rockville, MD 20850

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information-(See separate instructions.)
▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No. 1545-0047

2006

Name of the organization RIGHTS AND RESOURCES INSTITUTE, INC.	Employer identification number 20 3690821
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Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 2 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
MISTY JONES 1238 WISCONSIN AVE., N.W., SUITE 204,	OFFICE MGR. 40.00	59,328.	10,518.	0.
Total number of other employees paid over \$50,000 ▶	0			

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

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

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
YOUR TRAVEL CENTER P.O. BOX 50640, SANTA BARBARA, CA 93150	TRAVEL AGENCY	71,231.
PEKING UNIVERSITY COLLEGE OF ENVTL. SCIENCES, BEIJING 100871, PRC	CONSULTING, WORKSHOPS	67,954.
Total number of other contractors receiving over \$50,000 for other services ▶	0	

Part III Statements About Activities (See page 2 of the instructions.)		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		X
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a	Sale, exchange, or leasing of property?		X
b	Lending of money or other extension of credit?		X
c	Furnishing of goods, services, or facilities?		X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? See Statement 12	X	
e	Transfer of any part of its income or assets?		X
3 a	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)		X
b	Did the organization have a section 403(b) annuity plan for its employees?		X
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement		X
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?		X
4 a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g		X
b	Did the organization make any taxable distributions under section 4966? N/A		
c	Did the organization make a distribution to a donor, donor advisor, or related person? N/A		
d	Enter the total number of donor advised funds owned at the end of the tax year	N/A	
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year	N/A	
f	Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts	0.	
g	Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year	0.	

Part IV Reason for Non-Private Foundation Status (See pages 4 through 7 of the instructions.)

I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:
 Type I Type II Type III-Functionally Integrated Type III-Other

Provide the following information about the supported organizations. (See page 7 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total					▶

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 7 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) **Use cash method of accounting.**
 Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)					
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975					
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	0.	0.	0.	0.	0.
24 Line 23 minus line 17					
25 Enter 1% of line 23					

26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 ▶ 26a

b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts ▶ 26b 0.

c Total support for section 509(a)(1) test: Enter line 24, column (e) ▶ 26c

d Add: Amounts from column (e) for lines: 18 _____ 19 _____
 22 _____ 26b _____ ▶ 26d

e Public support (line 26c minus line 26d total) ▶ 26e

f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶ 26f %

27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: **N/A**
 (2005) _____ (2004) _____ (2003) _____ (2002) _____

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: **N/A**
 (2005) _____ (2004) _____ (2003) _____ (2002) _____

c Add: Amounts from column (e) for lines: 15 _____ 16 _____
 17 _____ 20 _____ 21 _____ ▶ 27c N/A

d Add: Line 27a total _____ and line 27b total _____ ▶ 27d N/A

e Public support (line 27c total minus line 27d total) ▶ 27e N/A

f Total support for section 509(a)(2) test: Enter amount on line 23, column (e) ▶ 27f N/A

g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶ 27g N/A %

h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ▶ 27h N/A %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

Part V Private School Questionnaire (See page 9 of the instructions.)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

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

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 10 of the instructions.)

N/A

(To be completed ONLY by an eligible organization that filed Form 5768)

Check **a** if the organization belongs to an affiliated group. Check **b** if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures

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

(a) Affiliated group totals
(b) To be completed for all electing organizations

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

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 13 of the instructions.)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
45	Lobbying nontaxable amount				0.
46	Lobbying ceiling amount (150% of line 45(e))				0.
47	Total lobbying expenditures				0.
48	Grassroots nontaxable amount				0.
49	Grassroots ceiling amount (150% of line 48(e))				0.
50	Grassroots lobbying expenditures				0.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instructions.)

N/A

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

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

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Supplementary Information for
line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

OMB No. 1545-0047

2006

Name of organization

Employer identification number

RIGHTS AND RESOURCES INSTITUTE, INC.

20-3690821

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. (Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule—see instructions.)

General Rule-

For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules-

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III.)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) ► \$ _____

Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions
for Form 990, Form 990-EZ, and Form 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2006)

Name of organization

Employer identification number

RIGHTS AND RESOURCES INSTITUTE, INC.

20-3690821

Part I Contributors (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	FOREST TRENDS 1050 POTOMAC STREET N.W. WASHINGTON, DC 20007	\$ 909,213.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	FORD FOUNDATION 320 EAST 43RD STREET NEW YORK, NY 10017	\$ 300,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	SWEDISH INTERNATIONAL DEVELOPMENT AGENCY VALLHALLAVAGEN, 199 STOCKHOLM, SWEDEN SE 10525	\$ 175,308.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	UNITED STATES FOREST SERVICE 1099 14TH STREET, N.W., SUITE 5500W WASHINGTON, DC 20005	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5	DEPARTMENT FOR INTERNATIONAL DEVELOPMENT 1 PALACE STREET LONDON, SW1E 5H3 UK	\$ 86,304.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6	THE WORLD CONSERVATION UNION RUE MAUVERNEY 28 GLAND 1196, SWITZERLAND	\$ 64,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization RIGHTS AND RESOURCES INSTITUTE, INC.	Employer identification number 20-3690821
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Part I Contributors (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	INTERNATIONAL DEVELOPMENT RESEARCH CENTRE P.O. BOX 8500 OTTAWA, ON K1G 3H9 CANADA	\$ 26,141.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
8	AUGUSTA MOLNAR 1238 WISCONSIN AVENUE, SUITE 204 WASHINGTON, DC 20007	\$ 9,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

2006 DEPRECIATION AND AMORTIZATION REPORT

Form 990 Page 2

990

Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	Buildings														
11	LEASEHOLD IMPROVEMENTS	10/01/06	SL	10.00		HY16	16,764.				16,764.			430.	430.
12	LEASEHOLD IMPROVEMENTS	10/01/06	SL	10.00		HY16	893.				893.			23.	23.
13	LEASEHOLD IMPROVEMENTS	10/01/06	SL	10.00		HY16	2,767.				2,767.			71.	71.
14	LEASEHOLD IMPROVEMENTS	10/01/06	SL	10.00		HY16	25,000.				25,000.			641.	641.
15	LEASEHOLD IMPROVEMENTS	11/16/06	SL	10.00		HY16	5,355.				5,355.			69.	69.
	* 990 Page 2 Total Buildings						50,779.				50,779.	0.		1,234.	1,234.
	Furniture & Fixtures														
16	GESTETNER DSE 424	05/03/06	SL	5.00		HY16	8,485.				8,485.			1,132.	1,132.
17	OFFICE CHAIRS	10/19/06	SL	10.00		HY16	3,459.				3,459.			72.	72.
18	10 3-DRAWER FILE CABINETS	10/19/06	SL	10.00		HY16	1,532.				1,532.			32.	32.
	* 990 Page 2 Total Furniture & Fixtures						13,476.				13,476.	0.		1,236.	1,236.
	Machinery & Equipment														
19	2 LAPTOPS	03/08/06	SL	3.00		HY16	4,032.				4,032.			1,120.	1,120.
20	DELL DESKTOPS	10/15/06	SL	3.00		HY16	1,993.				1,993.			166.	166.
21	COMPUTER	10/18/06	SL	3.00		HY16	3,310.				3,310.			230.	230.
22	LENOVO LAPTOP	10/19/06	SL	3.00		HY16	1,842.				1,842.			127.	127.
	* 990 Page 2 Total Machinery & Equipment						11,177.				11,177.	0.		1,643.	1,643.

628111
12-05-06

(D) - Asset disposed

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

2006 DEPRECIATION AND AMORTIZATION REPORT

Form 990 Page 2

990

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	* Grand Total 990 Page 2 Depr						75,432.				75,432.	0.		4,113.	4,113.

628111
12-05-06

(D) - Asset disposed

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

Footnotes

Statement 1

INITIAL RETURN

THE ORGANIZATION IS FILING ITS INITIAL RETURN FOR THE CALENDAR YEAR ENDED DECEMBER 31, 2006. IT WAS INCORPORATED ON OCTOBER 26, 2005 BUT HAD NO GROSS RECEIPTS DURING 2005 AND WAS THEREFORE EXEMPT FROM FILING FORM 990 FOR 2005.

Form 990	Cash Grants and Allocations to Others	Statement	2
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Class of Activity/Donee's Name and Address	Amount
LAND TENURE SURVEY IUCN: THE WORLD CONSERVATION UNION RUE MAUVERNY 28 CH-1196 GLAND, SWITZERLAND	25,054.
WORKSHOPS PEKING UNIVERSITY COLLEGE OF ENVIRONMENTAL SCIENCES BEIJING 100871, PRC	10,000.
COUNTRY INITIATIVE REG'L. COMM. FORESTRY TRNG. CTR. FOR ASIA AND THE PACIFIC P.O. BOX 1111, KASETSART UNIVERSITY BANGKOK 10903, THAILAND	37,276.
Total Included on Form 990, Part II, line 22b	72,330.

Description of Program Service One

GLOBAL CAMPAIGN - HOSTED MEETINGS REGARDING THE RIGHTS AND RESOURCES INITIATIVE (RRI) AND FOREST TENURE, ATTENDED BY ORGANIZATIONS ACTIVE IN TENURE AND POLICY REFORM SUCH AS THE GLOBAL ALLIANCE OF COMMUNITY FORESTRY, THE INTERNATIONAL LAND COALITION, THE FOOD AND AGRICULTURE ORGANIZATION OF THE UNITED NATIONS (FAO), THE WORLD BANK, AND THE UNITED KINGDOM AND NORWAY BRANCHES OF THE RAINFOREST FOUNDATION. COORDINATED COLLABORATIVE WORK OF PARTNER ORGANIZATIONS ENGAGED IN THE LISTENING, LEARNING, SHARING LAUNCH OF THE RRI. INVITED PRESENTATIONS ON RRI, INCLUDING PRESENTATIONS TO THE WORLD BANK, SIDA, NORAD, THE EUROPEAN TROPICAL FOREST ADVISORY GROUP, THE FAO, THE USFS, US AID, IUCN, THE ITTO AND OTHERS. CONTINUED ENGAGEMENT WITH KEY GOVERNMENT DELEGATIONS TO UNFF TO INFLUENCE THE NEW INTERNATIONAL ARRANGEMENTS ON FORESTS.

	Grants	Expenses
To Form 990, Part III, line a	25,054.	171,672.

Form 990 Statement of Program Service Accomplishments Statement 4

Description of Program Service Two

COUNTRY INITIATIVES - ORGANIZED A VISIT OF AN INTERNATIONAL DELEGATION OF POLICY EXPERTS TO INDIA. INITIAL PLANNING OF A NEW ANALYTICAL AND POLICY ENGAGEMENT ON "ALTERNATIVE TENURE AND BUSINESS MODELS" IN CENTRAL AFRICA AND WEST AFRICA, INCLUDING PRODUCTION OF A PAPER ON BACKGROUND ANALYSIS, "STATUS OF FOREST INDUSTRY AND TRADE IN CENTRAL AND WEST AFRICA" AND "INDUSTRIAL FORESTRY CONCESSIONS AND CONCESSION-BASED INDUSTRY IN CENTRAL AND WEST AFRICA." PROVIDED TECHNICAL AND FINANCIAL SUPPORT TO GREEN ADVOCATES FOR TENURE SCOPING IN LIBERIA. PROVIDED SUPPORT TO RRI PARTNER, FOREST TRENDS, TO DEVELOP AN ANALYSIS OF CHINESE-AFRICA TRADE IN FOREST PRODUCTS. WITH COLLABORATORS AT PEKING UNIVERSITY, CONDUCTED A SURVEY OF COLLECTIVE FOREST TENURE IN CHINA. WITH VIETNAM FOREST UNIVERSITY, PERFORMED A COMPREHENSIVE ANALYSIS OF FOREST RESOURCES AND TENURE IN VIETNAM.

	Grants	Expenses
To Form 990, Part III, line b	47,276.	470,914.

Description of Program Service Three

NETWORKS - PARTICIPATED IN TWO MEETINGS OF THE ITTO CIVIL SOCIETY ADVISORY GROUP IN MEXICO AND JAPAN. PROVIDED A POLICY-PRACTICE SEMINAR WITH LEADING POLICY-MAKERS FROM SIX COUNTRIES AT THE BIENNIAL IASCP CONFERENCE IN BALI. DESIGNED AND ESTABLISHED THE REDFORESTAL COMMUNITY NETWORK FOR LATIN AMERICA, IN CONJUNCTION WITH ACICAFOC, ACOFOP AND REDNOSOC, INCLUDING THREE WEBSITES - A PUBLIC SITE, A PRIVATE INTERACTIVE SITE FOR COMMUNITIES AND A MIXED-USE SITE FOR MARKETING COMMUNITY PRODUCTS AND SERVICES. PROVIDED TRAINING IN USE OF THE REDFORESTAL NETWORK THROUGHOUT LATIN AMERICA. ORGANIZED A MEETING OF MEGAFLORESTAIS, AN INFORMAL NETWORK OF FOREST POLICY LEADERS FROM LARGE, FORESTED COUNTRIES. WITH RRI PARTNERS, FOREST WATCH AND CIVIC RESPONSE, ESTABLISHED A NEW NETWORK OF CRITICAL THINKERS AND ACTORS FOR ATBM IN AFRICA.

To Form 990, Part III, line c

Grants	Expenses
	260,366.

OFFICE CHAIRS	3,459.	72.	3,387.
10 3-DRAWER FILE CABINETS	1,532.	32.	1,500.
2 LAPTOPS	4,032.	1,120.	2,912.
2 DELL DESKTOPS	1,993.	166.	1,827.
COMPUTER	3,310.	230.	3,080.
LENOVO LAPTOP	1,842.	127.	1,715.
Total to Form 990, Part IV, ln 57	75,432.	4,113.	71,319.

Form 990	Other Liabilities	Statement	9
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Description	Amount
DUE TO FOREST TRENDS	8,000.
DEFERRED RENT	17,161.
Total to Form 990, Part IV, line 65, Column B	25,161.

Form 990	Part V-A - List of Current Officers, Directors, Trustees and Key Employees	Statement	10
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Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Contrib	Expense Account
ANDY WHITE 1238 WISCONSIN AVE., NW, SUITE 204 WASHINGTON, DC 20007	PRESIDENT 40.00	118,845.	15,651.	0.
ARVIND KHARE 1238 WISCONSIN AVE., NW, SUITE 204 WASHINGTON, DC 20007	DIRECTOR, FINANCE & POLICY 40.00	113,025.	7,910.	0.
AUGUSTA MOLNAR 1238 WISCONSIN AVE., NW, SUITE 204 WASHINGTON, DC 20007	DIRECTOR, COMM. & MARKETS 40.00	110,490.	7,910.	0.
YATI BUN FNDN. FOR PEOPLE & COMM. DEVL./P.O. BOX 1119 BOROKO, NCD, PAPUA, NEW GUINEA	DIRECTOR 1.00	0.	0.	0.
DORIS CAPISTRANO CIFOR/CGIAR/P.O. BOX 6596, JKPWB JAKARTA, 10065, INDONESIA	CHAIR 1.00	0.	0.	0.

RIGHTS AND RESOURCES INSTITUTE, INC.

20-3690821

ALBERTO CHINCHILLA ACICAFOC/2089-1000 SAN JOSE, COSTA RICA	DIRECTOR 1.00	0.	0.	0.
JOHN HUDSON UK DEPT. FOR INT'L DEVL./PALACE STREET LONDON SW1E 5H3, UK	DIRECTOR 1.00	0.	0.	0.
MICHAEL JENKINS FOREST TRENDS/1050 POTOMAC STREET, N.W. WASHINGTON, DC 20007	DIRECTOR 1.00	0.	0.	0.
STEWART MAGINNIS WORLD CONSERVATION UNION/RUE MAUVERNEY 28 GLAND 1196, SWITZERLAND	TREASURER 1.00	0.	0.	0.
YAM MALLA REG'L COMM. FORESTRY TRNG. CTR./P.O. BOX 1111/KASETSART UNIV. BANGKOK 10903, THAILAND	SECRETARY 1.00	0.	0.	0.

Totals Included on Form 990, Part V-A

342,360. 31,471. 0.

Form 990 Part VIII - Relationship of Activities to Statement 11
Accomplishment of Exempt Purposes

Line	Explanation of Relationship of Activities
93A	PROVIDED TECHNICAL EXPERTISE IN COMMUNITY FOREST MANAGEMENT SYSTEMS IN INDIA, VIETNAM AND CHINA.
93B	ORGANIZED A POLICY FORUM HELD IN CONJUNCTION WITH THE INTERNATIONAL ASSOCIATION FOR THE STUDY OF COMMON PROPERTY'S BIENNIAL GLOBAL CONFERENCE. THE POLICY FORUM WAS BASED ON THE GOALS OF THE RIGHTS AND RESOURCES INITIATIVE AND PROVIDED AN OPPORTUNITY FOR POLICY MAKERS FROM AROUND ASIA TO DISCUSS THE MANAGEMENT OF FORESTS AND COMMUNITY INVOLVEMENT IN ASIAN COUNTRIES.

Schedule A	Explanation of Transactions Part III, Line 2d	Statement 12
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IN ADDITION TO THE COMPENSATION REPORTED IN PART V OF FORM 990, STAFF IS REIMBURSED FOR OUT-OF-POCKET TRAVEL EXPENSES UNDER AN ACCOUNTABLE PLAN, FOR TRAVEL IN THE COURSE OF THE ORGANIZATION'S BUSINESS.