



Form **990**

\*\* PUBLIC DISCLOSURE COPY \*\*

**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)

Department of the Treasury  
Internal Revenue Service

OMB No. 1545-0047  
**2009**  
Open to Public Inspection

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

**A** For the 2009 calendar year, or tax year beginning

and ending

**D** Employer identification number

**B** Check if applicable

Address changes

Name change

Initial return

Termination

Amended return

Applies pending

Please use IRS label or print or type

Doing Business As

Specific Instructions

See Form 990-SS

F Name and address of principal officer: MICHAEL MARKARIAN

SAME AS C ABOVE

THE FUND FOR ANIMALS, INC

Number and street (or P.O. box if mail is not delivered to street address)

City or town, state or country, and ZIP + 4

Room/suite

Telephone number

Gross receipts \$

Is this a group return for affiliates?  Yes  No

Are all affiliates included?  Yes  No

If "No," attach a list. (see instructions)

H(j) Group exemption number

Address changes

Name change

Initial return

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Amended return

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Room/suite

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Gross receipts \$

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Are all affiliates included?  Yes  No

If "No," attach a list. (see instructions)

H(j) Group exemption number

Activities & Governance		Prior Year	Current Year
1 Briefly describe the organization's mission or most significant activities: <b>TO BE RESPONSIBLE FOR THE HSUS'S ANIMAL CARE FACILITIES AND LEGAL CAMPAIGNS IN COURTS.</b>			
2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
3	Number of voting members of the governing body (Part VI, line 1a)	3	5
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	5
5	Total number of employees (Part V, line 2a)	5	0
6	Total number of volunteers (estimate if necessary)	6	145
7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.
7b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
Revenue		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	11,695,346.	7,106,859.
9	Program service revenue (Part VIII, line 2g)	20.	
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	113,300.	20,409.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	332,029.	277,643.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12,140,695.	7,404,911.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	271,775.	39,000.
14	Benefits paid to or for members (Part IX, column (A), line 4)		
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,573,764.	1,791,803.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	112,367.	99,067.
b	Total fundraising expenses (Part IX, column (D), line 25)	2,720,056.	3,193,395.
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	4,677,962.	5,123,265.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	7,462,733.	2,281,646.
19	Revenue less expenses. Subtract line 18 from line 12		
20	Total assets (Part X, line 16)		
21	Total liabilities (Part X, line 26)		
22	Net assets or fund balances. Subtract line 21 from line 20	14,407,447.	16,655,874.
<b>Part II Signature Block</b>		Beginning of Current Year	End of Year
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.		14,286,495.	16,568,141.

Signature of officer: G THOMAS WAITTE III, TREASURER Date: 8/26/10

Type or print name and title

Preparer's signature: RSM MCGLADREY, INC. Date: 8/25/10 Check if self-employed  EIN

Preparer's name (or yours if self-employed), address, and ZIP + 4: 8000 TOWERS CRESCENT DR. STE 500 VIENNA, VA 22182-6205

Preparer's identifying number (see instructions): 703-336-6400

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

932001 02-04-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2009)

Form 990 (2009) **THE FUND FOR ANIMALS, INC** 13-6218740 Page 2  
**Part III Statement of Program Service Accomplishments**

- 1 Briefly describe the organization's mission:  
**THE ALLEVIATION OF FEAR, PREVENTION OF PAIN AND THE RELIEF OF SUFFERING OF ANIMALS EVERYWHERE AND TO FOSTER HUMANE CONDUCT TOWARD ANIMALS AND ENCOURAGE AND SUPPORT THE COOPERATION AMONG ALL PERSONS INTERESTED IN HUMANE ACTIVITIES.**
- 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? .....  Yes  No
- 3 If "Yes," describe these new services on Schedule O.  
 Did the organization cease conducting, or make significant changes in how it conducts, any program services? .....  Yes  No  
 If "Yes," describe these changes on Schedule O.
- 4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ **1,832,930** . Including grants of \$ **39,000** .) (Revenue \$  )  
**HUMANE EDUCATION - EDUCATE THE PUBLIC ON ISSUES AND EVENTS AFFECTING ANIMAL RIGHTS AND WELFARE.**

**-HAVE AN IMPACT ON THE COMMUNITY BEYOND JUST THE ANIMALS WE CARE FOR BY ENGAGING THE PUBLIC AND MOVING THEM TO TAKE ACTION FOR ANIMALS.**  
**-PROFESSIONAL EDUCATION FOR VETERINARY AND VETERINARY TECHNICIAN STUDENTS AND POST GRADUATES.**  
**-USE OUR ANIMAL CARE CENTERS AS LIVING SEMINARS ON CURRENT ENVIRONMENTAL CONCERNS WHICH ARE AFFECTED BY INDIVIDUAL ACTIONS AND CHOICES. WE NOT ONLY PROVIDE A HEALTHY ENVIRONMENT TO WOUNDED AND/OR ABUSED ANIMALS, WE DRAW ATTENTION TO WHAT HAPPENS WHEN POLICY MAKERS MAKE BAD DECISIONS.**

4b (Code: ) (Expenses \$ **1,445,568** . Including grants of \$  ) (Revenue \$  )  
**CLEVELAND AMORY BLACK BEAUTY RANCH IN MURCHISON, TX, IS A 1300 ACRE REFUGE WITH AN ANIMAL POPULATION OF APPROXIMATELY 1300 ANIMALS YEAR ROUND, REPRESENTING 51 SPECIES. ANIMALS INCLUDE EXOTICS AS WELL AS DOMESTIC, RANGING FROM HORSES AND BURROS, CATTLE AND BUFFALO, DEER, PIGS, TORTOISE, KANGAROO, CHIMPANZEES, AND OTHER PRIMATE SPECIES. THIS IS A PLACE WHERE ANIMALS WALK THROUGH THE DOOR AND ARE NEVER VULNERABLE TO ABUSE OR EXPLOITATION AGAIN. IN 2009, THE RANCH ALSO BECAME THE SITE OF THE DORIS DAY HORSE RESCUE AND ADOPTION CENTER, WHERE CUTTING-EDGE METHODS OF CARE AND REHABILITATION WILL BE USED TO HELP RESCUED HORSES FIND FOREVER HOMES.**

4c (Code: ) (Expenses \$ **515,290** . Including grants of \$  ) (Revenue \$  )  
**CAPE WILDLIFE CENTER IN CAPE COD, MA IS A FIVE ACRE FACILITY DESIGNED AS A MODEL REHABILITATION PROGRAM OF BOTH NATIVE AND TRANSITORY WILDLIFE. THE CAPE WILDLIFE CENTER IS AN INTEGRAL PART OF THE COMMUNITY, ADVISING PEOPLE ON HUMANE SOLUTIONS TO HUMAN WILDLIFE CONFLICTS-WHILE SUPPORTING PUBLIC POLICIES THAT BENEFIT WILD ANIMALS AND THEIR HABITATS. THE CENTER'S OUTSTANDING EXTERNSHIP PROGRAM DRAWS UNDERGRADUATE, VETERINARY, AND VETERINARY TECHNICIAN STUDENTS FROM ACROSS THE U.S. AND ABROAD. IN 2009, MORE THAN 1700 ANIMALS WERE TOUCHED THROUGH THIS PROGRAM.**

4d Other program services. (Describe in Schedule O.)  
 (Expenses \$ **471,960** . Including grants of \$  ) (Revenue \$  )  
 4e Total program service expenses \$ **4,265,748** .

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(e)(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? 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 .....	2	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part I ..... 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 .....	3	X
6 Did the organization maintain any donor advised funds or any similar funds or 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 .....	4	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II .....	5	N/A
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III .....	6	X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV .....	7	X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V .....	8	X
11 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable .....	9	X
• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI .....	10	X
• Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII .....	11	X
• Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII .....		
• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX .....		
• Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X .....		
• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X .....		
12 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII .....		
12A Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII is optional .....	12	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E .....	12A	X
14a Did the organization maintain an office, employees, or agents outside of the United States? .....	13	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 United States? If "Yes," complete Schedule F, Part I .....	14a	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 .....	14b	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III .....	15	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I .....	16	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II .....	17	X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III .....	18	X
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H .....	19	X
	20	X

Form 990 (2009) **THE FUND FOR ANIMALS, INC**  
**Part IV Checklist of Required Schedules** (continued)

13-6218740

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	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	X	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25		X
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III		X
28 Was the organization a party to a business transaction with one of the following parties. (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	X
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations?	31	X
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	X
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	X
34 Was the organization related to any tax-exempt or taxable entity?	34	X
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	X
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	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	X

Form 990 (2009)

1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	1a	0	Yes	No
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (See instructions)	2b			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	X		
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X		
b	If "Yes," enter the name of the foreign country: <u>See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.</u>				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X		
c	If "Yes," to line 5a or 5b, did the organization file Form 9886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a	X		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	Organizations that may receive deductible contributions under section 170(c).				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization, 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			
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h			
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8			
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the organization make any taxable distributions under section 4966?	9a			
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b			
10	Section 501(c)(7) organizations. Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	N/A		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
a	Gross income from members or shareholders	11a	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.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			

Form 990 (2009)

**Part VI Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

**Section A. Governing Body and Management**

	1a	1b	Yes	No
1a	Enter the number of voting members of the governing body		5	
b	Enter the number of voting members that are independent		5	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		2	X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		3	X
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	X
b	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:			
a	The governing body?		8a	X
b	Each committee with authority to act on behalf of the governing body?		8b	X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9	X

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

	10a	10b	11	11A	12a	12b	12c	13	14	15	15a	15b	16a	16b
10a	Does the organization have local chapters, branches, or affiliates?													
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?													
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?													
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.													
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13													
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?													
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done													
13	Does the organization have a written whistleblower policy?													
14	Does the organization have a written document retention and destruction policy?													
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?													
a	The organization's CEO, Executive Director, or top management official													
b	Other officers or key employees of the organization													
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)													
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?													
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate 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?													

**Section C. Disclosure**

- 17 List the states with which a copy of this Form 990 is required to be filed **AK, AL, AR, AZ, CA, LA, CO, CT, FL, GA, HI, IL**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
 Own website     Another's website     Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest 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: **G. THOMAS WAITE, III - 202-452-1100**  
**700 PROFESSIONAL DRIVE, GAITHERSBURG, MD 20879**



Form 990 (2009)

THE FUND FOR ANIMALS, INC

13-6218740

Page 7

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

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

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

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

Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
MARIAN PROBST CHAIR/DIRECTOR	1.00	X					0.	0.	0.
PATRICK MCDONNELL DIRECTOR	1.00	X					0.	0.	0.
WILLIAM F. MANCUSO DIRECTOR	1.00	X					0.	0.	0.
JUDY NEY DIRECTOR	1.00	X					0.	0.	0.
DAVID O. WIEBERS, M.D. DIRECTOR	1.00	X					0.	0.	0.
MICHAEL MARKARIAN PRESIDENT	1.00		X				189,223.	16,410.	0.
WAYNE PACELE VICE PRESIDENT	1.00		X				234,026.	34,360.	0.
G. THOMAS WAITTE III TREASURER	1.00		X				188,972.	60,854.	0.
GWEN CRANE ASSISTANT TREASURER	1.00		X				97,020.	14,381.	0.
MARY K. BERGE ASSISTANT TREASURER	1.00		X				79,232.	13,864.	0.
SHERYL DEMPSEY SECRETARY	1.00		X				57,844.	15,805.	0.
MELISSA RUBIN VP, ANIMAL CARE	40.00				X		116,447.	20,900.	0.





Form 990 (2009) **THE FUND FOR ANIMALS, INC** 13-6218740 Page 9  
**Part VIII Statement of Revenue**

		(A)	(B)	(C)	(D)
		Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
<b>Contributions, gifts, grants and other similar amounts</b>					
1 a	Federated campaigns	1a			
b	Membership dues	1b			
c	Fundraising events	1c	7,384.		
d	Related organizations	1d			
e	Government grants (contributions)	1e			
f	All other contributions, gifts, grants, and similar amounts not included above	1f	7,099,475.		
g	Noncash contributions included in lines 1a-1f: \$		14,403.		
h	<b>Total.</b> Add lines 1a-1f		7,106,859.		
		Business Code			
<b>Program Service Revenue</b>					
2 a					
b					
c					
d					
e					
f	All other program service revenue				
g	<b>Total.</b> Add lines 2a-2f				
3	Investment income (including dividends, interest, and other similar amounts)		20,409.		20,409.
4	Income from investment of tax-exempt bond proceeds				
5	Royalties		244,319.		244,319.
6 a	Gross Rents	(i) Real			
b	Less: rental expenses	(ii) Personal			
c	Rental income or (loss)				
d	Net rental income or (loss)				
7 a	Gross amount from sales of assets other than inventory	(i) Securities			
b	Less: cost or other basis and sales expenses	(ii) Other			
c	Gain or (loss)				
d	Net gain or (loss)				
8 a	Gross income from fundraising events (not including \$ 7,384. of contributions reported on line 1c). See Part IV, line 18	a	8,803.		
b	Less: direct expenses	b	2,428.		
c	Net income or (loss) from fundraising events		6,375.		6,375.
9 a	Gross income from gaming activities. See Part IV, line 19	a			
b	Less: direct expenses	b			
c	Net income or (loss) from gaming activities				
10 a	Gross sales of inventory, less returns and allowances	a			
b	Less: cost of goods sold	b			
c	Net income or (loss) from sales of inventory				
Miscellaneous Revenue					
11 a	LIST RENTAL	Business Code	26,130.		26,130.
b	MISCELLANEOUS INCOME	511140	819.		819.
c		900099			
d	All other revenue		26,949.		
e	Total. Add lines 11a-11d		7,404,911.	0.	298,052.
12	Total revenue. See instructions.		7,404,911.	0.	298,052.

**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).

	(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	39,000.	39,000.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B))				
7 Other salaries and wages	1,421,913.	1,204,044.	73,551.	144,318.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	154,597.	130,909.	7,997.	15,691.
9 Other employee benefits	111,880.	94,738.	5,787.	11,355.
10 Payroll taxes	103,413.	87,568.	5,349.	10,496.
11 Fees for services (non-employees):				
a Management				
b Legal	149,619.	131,265.	8,019.	10,335.
c Accounting	2,850.	2,500.	153.	197.
d Lobbying				
e Professional fundraising services. See Part IV, line 17	99,067.	30,969.	4,386.	99,067.
f Investment management fees	41,008.	411,887.	26,203.	5,653.
g Other	471,862.			33,772.
12 Advertising and promotion	702,809.	616,597.	37,666.	48,546.
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	543,937.	477,214.	29,151.	37,572.
17 Travel	181,493.	159,230.	9,727.	12,536.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	160,062.	140,428.	8,578.	11,056.
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a DIRECT RESPONSE COSTS	869,115.	675,294.	69,828.	123,993.
b OTHER TAXES	73,068.	64,105.	3,916.	5,047.
c FUND. EXP ON LINE 8B	<2,428.>			<2,428.>
d				
e				
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	5,123,265.	4,265,748.	290,311.	567,206.
26 Joint costs. Check here <input checked="" type="checkbox"/> 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 solicitation	1,210,202.	661,374.	36,306.	512,522.

**Part X Balance Sheet**

		(A) Beginning of year	(B) End of year
1	Cash - non-interest-bearing .....		300.
2	Savings and temporary cash investments .....	178,280.	326,489.
3	Pledges and grants receivable, net .....	5,615,424.	145,263.
4	Accounts receivable, net .....	439,414.	566,634.
5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		
6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L .....		
7	Notes and loans receivable, net .....		
8	Inventories for sale or use .....		
9	Prepaid expenses and deferred charges .....		645.
10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	10a 3,629,429.	
	b Less: accumulated depreciation .....	10b 1,485,800.	
11	Investments - publicly traded securities .....	1,826,515.	2,143,629.
12	Investments - other securities. See Part IV, line 11 .....		
13	Investments - program-related. See Part IV, line 11 .....		
14	Intangible assets .....		
15	Other assets. See Part IV, line 11 .....	6,347,814.	13,472,914.
16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	14,407,447.	16,655,874.
17	Accounts payable and accrued expenses .....	120,952.	87,733.
18	Grants payable .....		
19	Deferred revenue .....		
20	Tax-exempt bond liabilities .....		
21	Escrow or custodial account liability. Complete Part IV of Schedule D .....		
22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		
23	Secured mortgages and notes payable to unrelated third parties .....		
24	Unsecured notes and loans payable to unrelated third parties .....		
25	Other liabilities. Complete Part X of Schedule D .....	120,952.	87,733.
26	<b>Total liabilities.</b> Add lines 17 through 25 .....		
27	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.		
27	Unrestricted net assets .....	14,286,495.	16,030,270.
28	Temporarily restricted net assets .....		537,871.
29	Permanently restricted net assets .....		
29	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.		
30	Capital stock or trust principal, or current funds .....		
31	Paid-in or capital surplus, or land, building, or equipment fund .....		
32	Retained earnings, endowment, accumulated income, or other funds .....		
33	Total net assets or fund balances .....	14,286,495.	16,568,141.
34	<b>Total liabilities and net assets/fund balances</b> .....	14,407,447.	16,655,874.

Form 990 (2009)

Form 990 (2009) **THE FUND FOR ANIMALS, INC** 13-6218740 Page 12  
**Part XI Financial Statements and Reporting**

**1** Accounting method used to prepare the Form 990:  Cash  Accrual  Other \_\_\_\_\_  
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

**2a** Were the organization's financial statements compiled or reviewed by an independent accountant?  Yes  No

**2b** Were the organization's financial statements audited by an independent accountant?  Yes  No

**2c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  Yes  No  
 If the organization changed either its oversight process or selection of an independent accountant during the tax year, explain in Schedule O.

**3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  Separate basis  Consolidated basis  Both consolidated and separate basis

**3b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.  Yes  No

	Yes	No
<b>2a</b>		<b>X</b>
<b>2b</b>	<b>X</b>	
<b>2c</b>	<b>X</b>	
<b>3a</b>		<b>X</b>
<b>3b</b>		

Form 990 (2009)

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

**Public Charity Status and Public Support**

Department of the Treasury  
Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047  
**2009**  
Open to Public Inspection

Name of the organization

**THE FUND FOR ANIMALS, INC**

Employer identification number

**13-6218740**

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1  A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2  A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3  A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4  A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8  A community trust described in section 170(b)(1)(A)(vii). (Complete Part II.)
- 9  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 10  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.  
 a  Type I      b  Type II      c  Type III - Functionally integrated      d  Type III - Other
- e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f  If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box: \_\_\_\_\_
- g  Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  
 (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? .....  
 (ii) A family member of a person described in (i) above? .....  
 (iii) A 35% controlled entity of a person described in (i) or (ii) above? .....  
 h  Provide the following information about the supported organization(s):

	11g(i)	Yes	No
	11g(ii)		
	11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
<b>Total</b>									

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 **THE FUND FOR ANIMALS, INC** 13-6218740 Page 2  
**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(v)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	6360608.	6388608.	8074894.	11695346.	7106859.	39626315.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
3 The value of services or facilities furnished by a governmental unit to the organization without charge .....						
4 Total. Add lines 1 through 3 .....	6360608.	6388608.	8074894.	11695346.	7106859.	39626315.
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) .....						5891778. 33734537.
6 Public support. Subtract line 5 from line 4.						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4 .....	6360608.	6388608.	8074894.	11695346.	7106859.	39626315.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....	207,641.	120,413.	212,076.	167,465.	290,858.	998,453.
9 Net income from unrelated business activities, whether or not the business is regularly carried on .....						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....	58,151.	472,305.	368,706.	273,764.	819.	1173745. 41798513.
11 Total support. Add lines 7 through 10 .....						135,197.
12 Gross receipts from related activities, etc. (see instructions) .....						
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here .....						

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) .....	14	80.71 %
15 Public support percentage from 2008 Schedule A, Part II, line 14 .....	15	80.68 %
16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization .....		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		<input type="checkbox"/>

Schedule A (Form 990 or 990-EZ) 2009



**Part III Support Schedule for Organizations Described in Section 509(a)(2)** (Complete only if you checked the box on line 9 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2008	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
5 The value of services or facilities furnished by a governmental unit to the organization without charge .....						
6 Total. Add lines 1 through 5 .....						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 18 for the year .....						
c Add lines 7a and 7b .....						

**8. Public support (Subtract line 7c from line 6.)**

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2008	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6 .....						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
c Add lines 10a and 10b .....						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....						
13 Total support (add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) .....	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15 .....	16	%

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) .....	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17 .....	18	%
19a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization .....	<input type="checkbox"/>	
b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization .....	<input type="checkbox"/>	

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

Schedule A (Form 990 or 990-EZ) 2009



**Schedule B**

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

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

**2009**

Name of the organization

**THE FUND FOR ANIMALS, INC**

Employer identification number

**13-6218740**

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 an organization 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 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(v), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions 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 990-EZ that received from any one contributor, during the year, 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. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions Schedule B (Form 990, 990-EZ, or 990-PF) (2009) for Form 990, 990-EZ, or 990-PF.

Name of organization

**THE FUND FOR ANIMALS, INC**

Employer identification number

**13-6218740**

**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$ 146,667.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2		\$ 200,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3		\$ 245,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4		\$ 276,992.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5		\$ 404,130.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6		\$ 689,635.	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

**THE FUND FOR ANIMALS, INC**

Employer identification number

**13-6218740**

**Part I Contributors (see instructions)**

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7		\$ 180,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution



**Part II-A** Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A Check  if the filing organization belongs to an affiliated group.  
 B Check  if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures  
 (The term "expenditures" means amounts paid or incurred.)

	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying) .....		
b Total lobbying expenditures to influence a legislative body (direct lobbying) .....		
c Total lobbying expenditures (add lines 1a and 1b) .....		
d Other exempt purpose expenditures .....		
e Total exempt purpose expenditures (add lines 1c and 1d) .....		
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	
Not over \$500,000	20% of the amount on line 1e.	
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.	

- g Grassroots nontaxable amount (enter 25% of line 1f) .....
- h Subtract line 1g from line 1a. If zero or less, enter -0- .....
- i Subtract line 1f from line 1c. If zero or less, enter -0- .....
- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for the year?  Yes  No

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 2a through 2f on page 4.)

	Lobbying Expenditures During 4-Year Averaging Period				
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2009



**Part II-B** Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)	(b)	
	Yes	No	Amount
<b>1</b> 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:			
<b>a</b> Volunteers?		<input checked="" type="checkbox"/>	
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1j)?		<input checked="" type="checkbox"/>	
<b>c</b> Media advertisements?		<input checked="" type="checkbox"/>	
<b>d</b> Mailings to members, legislators, or the public?		<input checked="" type="checkbox"/>	
<b>e</b> Publications, or published or broadcast statements?		<input checked="" type="checkbox"/>	
<b>f</b> Grants to other organizations for lobbying purposes?	<input checked="" type="checkbox"/>		10,000.
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body?		<input checked="" type="checkbox"/>	
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		<input checked="" type="checkbox"/>	
<b>i</b> Other activities? If "Yes," describe in Part IV			10,000.
<b>j</b> Total. Add lines 1c through 1i			
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		<input checked="" type="checkbox"/>	
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
<b>Part III-A</b> Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).			

<b>1</b> Were substantially all (90% or more) dues received nondeductible by members?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>3</b> Did the organization agree to carryover lobbying and political expenditures from the prior year?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Part III-B</b> Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."				
<b>1</b> Dues, assessments and similar amounts from members	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
<b>a</b> Current year		<b>2a</b>		
<b>b</b> Carryover from last year		<b>2b</b>		
<b>c</b> Total		<b>2c</b>		
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		<b>3</b>		
<b>4</b> 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?		<b>4</b>		
<b>5</b> Taxable amount of lobbying and political expenditures (see instructions)		<b>5</b>		

**Part IV Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

**PART II-B, LINE 1(I), OTHER LOBBYING ACTIVITIES:**

**PROMOTE LEGISLATION TO PREVENT CRUEL FACTORY FARMING PRACTICES.**

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**Schedule D**  
(Form 990)

**Supplemental Financial Statements**  
▶ Complete if the organization answered "Yes," to Form 990,  
Part IV, line 8, 7, 8, 9, 10, 11, or 12.  
▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047  
**2009**  
Open to Public  
Inspection

Department of the Treasury  
Internal Revenue Service

Name of the organization

**THE FUND FOR ANIMALS, INC**

Employer identification number  
**13-6218740**

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

	(a) Donor advised funds	(b) Funds 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 donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <input type="checkbox"/> Yes <input type="checkbox"/> No		
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <input type="checkbox"/> Yes <input type="checkbox"/> No		

**Part II Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

- 1 Purpose(s) of conservation easements held by the organization (check all that apply).  
 Preservation of land for public use (e.g., recreation or pleasure)  Preservation of an historically important land area  
 Protection of natural habitat  Preservation of a certified historic structure  
 Preservation of open space
- 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.
- |  | 2a | 2b | 2c | 2d |
|--|----|----|----|----|
| a Total number of conservation easements   |    |    |    |    |
| b Total acreage restricted by conservation easements                                 |    |    |    |    |
| c Number of conservation easements on a certified historic structure included in (a) |    |    |    |    |
| d Number of conservation easements included in (c) acquired after 8/17/06            |    |    |    |    |
- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 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, inspection, handling of violations, and enforcement of the conservation easements it holds?  Yes  No
- 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶  Yes  No
- 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$  Yes  No
- 8 Does each conservation easement reported on line 2(c) above satisfy the requirements of section 170(f)(4)(B)(i) and section 170(f)(4)(B)(ii)?  Yes  No
- 9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.** Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describe these items.
- b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenues included in Form 990, Part VIII, line 1  \$ \_\_\_\_\_
- (ii) Assets included in Form 990, Part X  \$ \_\_\_\_\_
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:
- a Revenues included in Form 990, Part VIII, line 1  \$ \_\_\_\_\_
- b Assets included in Form 990, Part X  \$ \_\_\_\_\_

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a  Public exhibition
- b  Scholarly research
- c  Preservation for future generations
- d  Loan or exchange programs
- e  Other \_\_\_\_\_

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.** Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21?  Yes  No

b If "Yes," explain the arrangement in Part XIV.

**Part V Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment  %
- b Permanent endowment  %
- c Term endowment  %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations 

3a(i)	Yes	No
3a(ii)		
3b		
- (ii) related organizations 

3a(ii)	Yes	No
3a(iii)		
3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment	(a) Cost or other basis (investment)		(b) Cost or other basis (other)		(c) Accumulated depreciation	(d) Book value
1a Land		1,490,541.				1,490,541.
b Buildings		1,757,174.			1,298,364.	458,810.
c Leasehold improvements						
d Equipment		170,408.			80,326.	90,082.
e Other		211,306.			107,110.	104,196.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)						2,143,629.



**Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements**

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	7,404,911.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	5,123,265.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	2,281,646.
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net). Add lines 4 through 8	9	0.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	2,281,646.

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1	Total revenue, gains, and other support per audited financial statements	1	7,424,406.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
	a Net unrealized gains on investments	2a	
	b Donated services and use of facilities	2b	17,067.
	c Recoveries of prior year grants	2c	
	d Other (Describe in Part XIV)	2d	
	e Add lines 2a through 2d	2e	17,067.
3	Subtract line 2e from line 1	3	7,407,339.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
	b Other (Describe in Part XIV)	4b	<2,428.>
	c Add lines 4a and 4b	4c	<2,428.>
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	7,404,911.

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

1	Total expenses and losses per audited financial statements	1	5,142,760.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
	a Donated services and use of facilities	2a	17,067.
	b Prior year adjustments	2b	
	c Other losses	2c	
	d Other (Describe in Part XIV)	2d	
	e Add lines 2a through 2d	2e	17,067.
3	Subtract line 2e from line 1	3	5,125,693.
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	
	b Other (Describe in Part XIV)	4b	<2,428.>
	c Add lines 4a and 4b	4c	<2,428.>
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	5,123,265.

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

**PART XII, LINE 4B - OTHER ADJUSTMENTS:**

**FUNDRAISING EXPENSES REPORTED ON PART VIII LINE 8B: -2428.**

**PART XIII, LINE 4B - OTHER ADJUSTMENTS:**

**FUNDRAISING EXPENSES REPORTED ON PART VIII LINE 8B: -2428.**



**Part II Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 8a. List events with gross receipts greater than \$5,000.

	Revenue	Direct Expenses			Net income summary. Combine line 3, column (d), and line 10.
		(a) Event #1	(b) Event #2	(c) Other events	
		(event type)	(event type)	(total number)	(d) Total events (add col. (a) through col. (c))
1	Gross receipts .....	GOLF TOURNAMENT		NONE	16,187.
2	Less: Charitable contributions .....				7,384.
3	Gross income (line 1 minus line 2) .....				8,803.
4	Cash prizes .....				
5	Noncash prizes .....				
6	Rent/facility costs .....				
7	Food and beverages .....				
8	Entertainment .....				2,428.
9	Other direct expenses .....				2,428.
10	Direct expense summary. Add lines 4 through 9 in column (d) .....				6,375.
11	Net income summary. Combine line 3, column (d), and line 10. <b>Part III Gaming.</b> Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 8a.				

	Revenue	Direct Expenses			(d) Total gaming (add col. (a) through col. (c))
		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	
		Yes _____ % No _____ %	Yes _____ % No _____ %	Yes _____ % No _____ %	Yes _____ % No _____ %
1	Gross revenue .....				
2	Cash prizes .....				
3	Noncash prizes .....				
4	Rent/facility costs .....				
5	Other direct expenses .....				
6	Volunteer labor .....				
7	Direct expense summary. Add lines 2 through 5 in column (d) .....				
8	Net gaming income summary. Combine line 1, column (d), and line 7 .....				

9 Enter the state(s) in which the organization operates gaming activities: \_\_\_\_\_ 9a

a Is the organization licensed to operate gaming activities in each of these states? \_\_\_\_\_

b If "No," explain: \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? \_\_\_\_\_ 10a

b If "Yes," explain: \_\_\_\_\_

11 Does the organization operate gaming activities with nonmembers? \_\_\_\_\_ 11

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? \_\_\_\_\_ 12



13 Indicate the percentage of gaming activity operated in:

	13a	13b	
a The organization's facility .....	%		
b An outside facility .....	%		

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ \_\_\_\_\_  
 Address ▶ \_\_\_\_\_

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? .....

15a

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ▶ \$ \_\_\_\_\_  
 c If "Yes," enter name and address of the third party:

Name ▶ \_\_\_\_\_  
 Address ▶ \_\_\_\_\_

16 Gaming manager information:

Name ▶ \_\_\_\_\_  
 Gaming manager compensation ▶ \$ \_\_\_\_\_  
 Description of services provided ▶ \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Director/officer     Employee     Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? .....

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ \_\_\_\_\_

17a

Yes No

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

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

OMB No. 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization **THE FUND FOR ANIMALS, INC** Employer identification number **13-6218740**

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ...

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OHIOANS FOR HUMANE FARMS 1799 W 5TH AVE #318 COLUMBUS, OH 43212	27-1083586	501(C)(4)	10,000.	0.			CITIZENS BACKED BALLOT INITIATIVE.
RABBIT SANCTUARY INC 833 FAIRVIEW ROAD SIMPSONVILLE, SC 29680	20-5315478	501(C)(4)	29,000.	0.			RABBIT SHELTER.

2 Enter total number of section 501(c)(3) and government organizations ..... ▶ **2.**

3 Enter total number of other organizations ..... ▶ **2.**

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

Schedule I (Form 990) 2009

**Part III** Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

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

**Part IV** Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

THE FUND FOR ANIMALS ISSUES GRANTS TO ORGANIZATIONS THAT MEET OUR MISSION CRITERIA. GRANTS ARE USUALLY GIVEN TO ORGANIZATIONS THAT HAVE BEEN THOROUGHLY RESEARCHED BY US OR TO ONES WITH WHICH WE HAVE AN EXISTING RELATIONSHIP. GRANT OVERSIGHT IS ACCOMPLISHED THROUGH A VARIETY OF METHODS SUCH AS GRANT REPORTS, MEETINGS WITH GRANTEES, AND SITE VISITS.

**SCHEDULE J  
(Form 990)**

**Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees  
 ▶ Complete if the organization answered "yes" to Form 990, Part IV, line 23.  
 ▶ Attach to Form 990. ▶ See separate instructions.

Department of the Treasury  
 Internal Revenue Service

**THE FUND FOR ANIMALS, INC**

Employer identification number  
**13-6218740**

OMB No. 1545-0047

**2009**

Open to Public Inspection

**Part I Questions Regarding Compensation**

- 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.
- First-class or charter travel
  - Travel for companions
  - Tax indemnification and gross-up payments
  - Discretionary spending account
  - Housing allowance or residence for personal use
  - Payments for business use of personal residence
  - Health or social club dues or initiation fees
  - Personal services (e.g., maid, chauffeur, chef)

- b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain
- 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? .....

- 3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.
- Compensation committee
  - Independent compensation consultant
  - Form 990 of other organizations
  - Written employment contract
  - Compensation survey or study
  - Approval by the board or compensation committee

- 4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:
- a Receive a severance payment or change-of-control payment? .....
  - b Participate in, or receive payment from, a supplemental nonqualified retirement plan? .....
  - c Participate in, or receive payment from, an equity-based compensation arrangement? .....
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

	Yes	No
5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a The organization? .....		
b Any related organization? .....		
6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a The organization? .....		
b Any related organization? .....		
7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III .....		
8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III .....		
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....		

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule J (Form 990) 2009

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

**Note.** The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C)	(D)	(E)	(F)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	Retirement and other deferred compensation	Nontaxable benefits	Total of columns (B)(i)-(D)	Compensation reported in prior Form 990 or Form 990-EZ
MICHAEL MARKARIAN	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	189,223.	0.	0.	12,146.	5,058.	206,427.	0.
WAYNE PACELLE	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	234,026.	0.	0.	30,316.	4,838.	269,180.	0.
G. THOMAS WAITE III	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	188,972.	0.	0.	51,874.	9,775.	250,621.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

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

▶ Attach to Form 990.

Department of the Treasury  
Internal Revenue Service

OMB No. 1545-0047  
**2009**  
Open to Public Inspection

Name of the organization

**THE FUND FOR ANIMALS, INC**

Employer identification number  
**13-6218740**

Part I	Types of Property	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 19	(d) Method of determining revenues
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 .....				
10	Securities - Closely held stock .....				
11	Securities - Partnership, LLC, or trust interests .....				
12	Securities - Miscellaneous .....				
13	Qualified conservation contribution - Historic structures .....				
14	Qualified conservation contribution - Other .....				
15	Real estate - Residential .....				
16	Real estate - Commercial .....				
17	Real estate - Other .....				
18	Collectibles .....				
19	Food inventory .....	X	2	48. FMV	
20	Drugs and medical supplies .....	X	1	50. FMV	
21	Taxidermy .....				
22	Historical artifacts .....				
23	Scientific specimens .....				
24	Archaeological artifacts .....				
25	Other ▶ (ARCHITECTURAL)	X	1	17,067. FMV	
26	Other ▶ (ANIMAL SUPPLI)	X	14	10,435. FMV	
27	Other ▶ (EQUIPMENT)	X	2	3,000. FMV	
28	Other ▶ (OFFICE SUPPLI)	X	3	870. FMV	
29	Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgment .....			29	

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 30a Yes No

b If "Yes," describe the arrangement in Part II. 31 Yes No

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 Yes No

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32a Yes No

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II. 33 Yes No

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2009

**SCHEDULE O**  
**(Form 990)**

**Supplemental Information to Form 990**

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

OMB No. 1545-0047  
**2009**  
Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Name of the organization

THE FUND FOR ANIMALS, INC

Employer identification number

13-6218740

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

THE FUND FOR ANIMALS WILDLIFE CENTER, BASED IN SOUTHERN CALIFORNIA, IS A 15 ACRE FACILITY DESIGNED FOR REHABILITATION OF NATIVE WILDLIFE. THE CENTER FOCUSES PRIMARILY ON PREDATOR REHABILITATION AND RELEASE SUCH AS MOUNTAIN LIONS, COYOTES, BOBCATS, EAGLES, HAWKS, AND OWLS; IN 2009 APPROXIMATELY 400 ANIMALS WERE RESCUED. NEARLY 50 ANIMALS RESCUED FROM THE EXOTIC PET TRADE AND CRUELTY CASES HAVE ALSO FOUND PERMANENT HOMES AT THE CENTER INCLUDING AN AFRICAN LION, PYGMY HIPPO, MOUNTAIN LION, ALL OF WHOM ONCE SUFFERED IN THE HANDS OF PRIVATE OWNERS. IN ADDITION THIS CENTER SERVES AS HOME TO A LIMITED NUMBER OF NON-RELEASABLE EXOTICS AND WILDLIFE.  
EXPENSES \$ 471960. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

PLEASE NOTE THAT THIS FORM 990 IS TO REPORT ON THE ENTITY INCORPORATED AS THE FUND FOR ANIMALS, INC. THE FUND FOR ANIMALS, INC IS A SEPARATELY INCORPORATED 501(C)(3) AFFILIATE OF THE HUMANE SOCIETY OF THE UNITED STATES AND AFFILIATES. INTERESTED PERSONS MAY GO TO WWW.HUMANESOCIETY.ORG TO READ THE HUMANE SOCIETY OF THE UNITED STATES AND AFFILIATES' CONSOLIDATED ANNUAL REPORT.

FORM 990, PART VI, SECTION A, LINE 2: OFFICERS MARKARIAN, PACHELLE, WAITTE, BERGE, CRANE, AND DEMPSEY WERE EMPLOYED BY ANOTHER TAX-EXEMPT ORGANIZATION ON WHOSE BOARD FUND FOR ANIMALS' DIRECTORS PROBST, MCDONNELL, NEY, MANCUSO, AND WIEBERS SERVED. THEREFORE, THESE INDIVIDUALS HAVE "BUSINESS RELATIONSHIPS" WITH EACH OTHER.



**SCHEDULE O**  
**(Form 990)**

**Supplemental Information to Form 990**

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

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**2009**  
Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Name of the organization

THE FUND FOR ANIMALS, INC

Employer identification number  
13-6218740

FORM 990, PART VI, SECTION A, LINE 7B: THE BOARD OF THE FUND FOR ANIMALS' PARENT ORGANIZATION, THE HUMANE SOCIETY OF THE UNITED STATES, APPROVES OR CONFIRMS THE ELECTION OF FFA BOARD MEMBERS AND OFFICERS.

FORM 990, PART VI, SECTION A, LINE 8B: THE FUND FOR ANIMALS' BOARD HAS NO COMMITTEES.

FORM 990, PART VI, SECTION B, LINE 11: THE FUND FOR ANIMALS ("FFA") USES THE FOLLOWING PROCESS TO REVIEW ITS 990: AFTER INTERNAL ACCOUNTING STAFF DRAFTS THE 990, THE DRAFT IS SUBMITTED TO FFA'S INDEPENDENT TAX PREPARERS FOR THEIR REVIEW AND REVISION, AS MAY BE APPROPRIATE. THE REVISED DRAFT IS THEN GIVEN TO FFA'S TREASURER FOR FURTHER REVIEW. ONCE ALL STAFF AND PROFESSIONAL REVIEWS/REVISIONS ARE DONE, THE TREASURER SENDS THE PROPOSED FINAL OF THE FORM 990 TO THE FFA BOARD FOR ITS CONSIDERATION. ONCE THE BOARD HAS HAD AN OPPORTUNITY TO REVIEW AND COMMENT, THE FINALIZED VERSION IS FILED WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C: THE FUND FOR ANIMALS RELIES UPON AND FOLLOWS THE CONFLICT OF INTEREST POLICY OF ITS PARENT ORGANIZATION, THE HUMANE SOCIETY OF THE UNITED STATES. THE MONITORING AND COMPLIANCE PROCESS IS FACILITATED BY THE OVERLAP IN STAFF AND BOARDS BETWEEN THE TWO ORGANIZATIONS. THE IMPLEMENTATION OF THE POLICY EMPHASIZES AVOIDING CONFLICTS TO BEGIN WITH. THE GENERAL COUNSEL'S OFFICE FIELDS AND USUALLY RESOLVES CONFLICTS OF INTEREST AND QUESTIONS RAISED BY STAFF OR BOARD MEMBERS.

**SCHEDULE O**  
**(Form 990)**

**Supplemental Information to Form 990**

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

OMB No. 1545-0047  
**2009**  
Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Name of the organization  
**THE FUND FOR ANIMALS, INC**

Employer identification number  
**13-6218740**

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AK, AL, AR, AZ, CA, LA, CO, CT, FL, GA, HI, IL, KS, KY, MA, MD, ME, MI, MS, MN, MO, NC, ND, NJ, NH, NM, NY, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV

FORM 990, PART VI, SECTION C, LINE 19: THE FUND FOR ANIMALS (FFA) MAKES COPIES OF ITS ARTICLES OF INCORPORATION AND BYLAWS AVAILABLE TO DONORS FREE OF CHARGE UPON REQUEST. FORMAL AUDITED FINANCIAL STATEMENTS ARE FILED WITH STATE CHARITABLE SOLICITATION REGISTRATIONS AND ARE MADE AVAILABLE TO MAJOR DONORS AND, WHERE REQUIRED BY STATE LAW, TO THE GENERAL PUBLIC BY MAIL UPON REQUEST. COPIES OF FFA'S FORM 1023 APPLICATION FOR RECOGNITION OF TAX-EXEMPT STATUS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST BOTH BY MAIL AND IN PERSON AT FFA'S HEADQUARTERS OFFICE IN NEW YORK CITY AND AT ITS OFFICE IN GAITHERSBURG, MARYLAND. THE FFA MAKES COPIES OF THE THREE MOST RECENTLY-FILED FORMS 990 AVAILABLE TO THE PUBLIC ON ITS WEBSITE AT WWW.FUNDFORANIMALS.ORG AND UPON REQUEST BOTH BY MAIL AND IN PERSON AT FFA'S HEADQUARTERS OFFICE IN NEW YORK CITY, AND AT ITS OFFICE IN GAITHERSBURG, MARYLAND. THE CONFLICT OF INTEREST POLICY HAS NOT BEEN MADE AVAILABLE TO THE GENERAL PUBLIC.

FORM 990, PART XI, LINE 2C

THE PROCESS HAS BEEN CONSISTENT WITH PRIOR YEARS.

FORM 990, SCHEDULE M

DONATED SERVICE DISCLOSURE

FORM 990 INSTRUCTIONS DO NOT REQUIRE DONATED SERVICES TO BE REPORTED ON

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule O (Form 990) 2009  
932211  
02-03-10

**SCHEDULE O**  
**(Form 990)**

**Supplemental Information to Form 990**

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

OMB No. 1545-0047  
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Department of the Treasury  
Internal Revenue Service

Name of the organization

THE FUND FOR ANIMALS, INC

Employer identification number

13-6218740

FORM 990 AND SCHEDULE M. HOWEVER, IN ORDER TO INCREASE TRANSPARENCY

AND PROVIDE THE USERS OF THE FORM WITH COMPLETE INFORMATION ABOUT THE

ORGANIZATION'S ACTIVITIES, MANAGEMENT HAS CHOSEN TO LIST THE DONATED

SERVICES IN DETAIL ON SCHEDULE M OF FFA'S FORM 990 ALONG WITH NONCASH

CONTRIBUTIONS. THE AMOUNTS REFLECT THE FAIR MARKET VALUE OF IN-KIND

SERVICES REPORTED.

Multiple horizontal lines for supplemental information.

**SCHEDULE R**  
**(Form 990)**  
Department of the Treasury  
Internal Revenue Service

**Related Organizations and Unrelated Partnerships**

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.**  
▶ **Attach to Form 990.** ▶ **See separate instructions.**

OMB No. 1545-0047  
**2009**  
**Open to Public Inspection**

Name of the organization **THE FUND FOR ANIMALS, INC** Employer identification number **13-6218740**

**Part I Identification of Disregarded Entities** (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

**Part II Identification of Related Tax-Exempt Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(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
<u>HUMANE SOCIETY OF THE UNITED STATES -</u> <u>53-0225390, 2100 L ST, NW, WASHINGTON, DC</u> <u>20037</u>	<u>ANIMAL WELFARE</u>	<u>DELAWARE</u>	<u>501(C)(3)</u>	<u>7</u>	<u>N/A</u>

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**Part V Transactions With Related Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.)

**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
<b>1</b> 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?		
<b>a</b> Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		X
<b>b</b> Gift, grant, or capital contribution to other organization(s)		X
<b>c</b> Gift, grant, or capital contribution from other organization(s)		X
<b>d</b> Loans or loan guarantees to or for other organization(s)		X
<b>e</b> Loans or loan guarantees by other organization(s)		X
<b>f</b> Sale of assets to other organization(s)		X
<b>g</b> Purchase of assets from other organization(s)		X
<b>h</b> Exchange of assets		X
<b>i</b> Lease of facilities, equipment, or other assets to other organization(s)		X
<b>j</b> Lease of facilities, equipment, or other assets from other organization(s)		X
<b>k</b> Performance of services or membership or fundraising solicitations for other organization(s)		X
<b>l</b> Performance of services or membership or fundraising solicitations by other organization(s)		X
<b>m</b> Sharing of facilities, equipment, mailing lists, or other assets		X
<b>n</b> Sharing of paid employees		X
<b>o</b> Reimbursement paid to other organization for expenses		X
<b>p</b> Reimbursement paid by other organization for expenses	X	
<b>q</b> Other transfer of cash or property to other organization(s)	X	
<b>r</b> Other transfer of cash or property from other organization(s)		X

**2** 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.

(a) Name of other organization(s)	(b) Transaction type (a-r)	(c) Amount involved
(1) <b>HUMANE SOCIETY OF THE UNITED STATES</b>	P	4,373,432.
(2) <b>HUMANE SOCIETY OF THE UNITED STATES</b>	Q	11,499,000.
(3)		
(4)		
(5)		
(6)		



Form **8868**  
(Rev. April 2009)

## Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Department of the Treasury  
Internal Revenue Service

▶ File a separate application for each return.

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box
- If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

**Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**



**Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

**Electronic Filing (e-file).** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on e-file for Charities & Nonprofits.

<b>Type or print</b>	Name of Exempt Organization <b>THE FUND FOR ANIMALS, INC</b>	<b>Employer identification number</b> <b>13-6218740</b>
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. <b>200 WEST 57TH STREET, NO. 705</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>NEW YORK, NY 10019</b>	

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

- |  |   |                                    |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation)                 | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL         | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ         | <input type="checkbox"/> Form 990-T (trust other than above)      | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF         | <input type="checkbox"/> Form 1041-A                              | <input type="checkbox"/> Form 8870 |

**C. THOMAS WAITTE, III**  
**700 PROFESSIONAL DRIVE - GAITHERSBURG, MD 20879**

FAX No. ▶ \_\_\_\_\_

- The books are in the care of ▶ **202-452-1100** Telephone No. ▶ \_\_\_\_\_ FAX No. ▶ \_\_\_\_\_
- 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 will cover.

1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2010** to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶  calendar year **2009** or
- ▶  tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

2 If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period

<b>3a</b> 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.	<b>3a</b>	
<b>b</b> If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$
<b>c</b> Balance Due. Subtract line 3b from line 3a. 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.	<b>3c</b>	\$ <b>N/A</b>

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions. Form 8868 (Rev. 4-2009)



- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box  **Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 990-BL.
- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1).
- If you are filing for an **Automatic (Not Automatic) 3-Month Extension of Time**, Only file the original (no copies needed).

Type or print	Name of Exempt Organization	Employer identification number
File by the extended due date for filing the return. See instructions.	<b>THE FUND FOR ANIMALS, INC</b>	13-6218740
	Number, street, and room or suite no. If a P.O. box, see instructions.	For IRS use only
	<b>200 WEST 57TH STREET, NO. 705</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	<b>NEW YORK, NY 10019</b>	

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

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 5227	<input type="checkbox"/> Form 9870
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> Form 6069	

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 990-BL.**

**G. THOMAS WAITE, III**  
**700 PROFESSIONAL DRIVE - GAITHERSBURG, MD 20879**

- The books are in the care of **202-452-1100** FAX No.
- Telephone No. **202-452-1100**
- 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, 2010**
- 5 For calendar year **2009**, 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 TIME IS REQUIRED TO GATHER INFORMATION AND FILE A COMPLETE AND ACCURATE TAX 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 990-BL.	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	\$
			N/A

**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 **[Signature]** Title **Accountant** Date **3/2/10**  
 Form 990-BL (Rev. 4-2009)