UNITED STATES DISTRICT COURT FOR THE DISTRICT OF COLUMBIA

FELD ENTERTAINMENT, INC.

•

Plaintiff,

Case No. 07- 1532 (EGS)

AMERICAN SOCIETY FOR THE PREVENTION OF CRUELTY

:

ANIMALS, et al.

v.

Defendants.

PLAINTIFF'S OPPOSITION TO SUPPLEMENTAL MOTION OF DEFENDANT
HUMANE SOCIETY OF THE UNITED STATES TO DISMISS PLAINTIFF'S
AMENDED COMPLAINT

Plaintiff Feld Entertainment, Inc. ("FEI")¹ opposes the Supplemental Motion of Defendant to Dismiss Plaintiff's Amended Complaint (12-03-10) (Docket Entry ("DE") 55) ("HSUS. Mot.") filed by defendant Humane Society of the United States ("HSUS"). FEI incorporates herein all arguments made in Plaintiff's Opposition to Motion of Defendants to Dismiss Plaintiff's First Amended Complaint, filed contemporaneously.

INTRODUCTION

HSUS does not, as it must under Fed. R. Civ. P. 12(b)(6), assume the truth of the facts alleged in the FAC and then show why FEI's claims are not "plausible" as a matter of law.² Instead, HSUS simply disputes the claims in the FAC by attaching exhibits that undermine its own arguments. Thus, even though the FAC specifically alleges that FFA and HSUS "merged effective January, 1, 2005," FAC ¶ 36, HSUS denies that the transaction was a "merger." HSUS Mot. at 2. Similarly, even though the FAC sets out *six separate instances* in which HSUS itself paid money to bribe Rider, FAC ¶ 160, HSUS claims it "never made a single payment, either directly or indirectly, to Rider." HSUS Mot. at 4. The facts show otherwise, but a debate on the parties' respective views of the facts is not proper on 12(b)(6). *See Plunkett v. Poyner*, 2010 U.S. Dist. LEXIS 79885 at *5-6 (S.D. Fla. 2010) (denying dismissal of RICO complaint; "arguments regarding the relative merits of Plaintiff's version of the facts compared with Defendants' version are not germane to a consideration of a motion to dismiss, even if the underlying documents themselves are not in dispute").

Moreover, HSUS improperly goes outside the FAC by submitting exhibits that are not referred to in, or attached to, the FAC. HSUS Mot., Exs. A-E. Matters outside the FAC can only

71009479.1 - 1 -

An explanatory table of acronyms and abbreviations used herein is attached hereto as Appendix A.

² Ashcroft v. Iqbal, 129 S. Ct. 1937, 1949-50 (2009); Bell Atlantic Corp. v. Twombly, 550 U.S. 544, 555 (2007); Aktieselskabet Af 21. November 2001 v. Fame Jeans, 525 F.3d 8, 15 (D.C. Cir. 2008).

be considered if the Court converts the motion to one for summary judgment and provides the parties notice thereof and the procedures prescribed by Fed. R. Civ. P. 56.³ HSUS's invocation of "judicial notice" is unavailing. Judicial notice is only proper as to a fact that "is not subject to reasonable dispute in that it is either: (1) generally known within the territorial jurisdiction of the trial court; or (2) capable of accurate and ready determination by resort to resources whose accuracy cannot reasonably be questioned." Fed. R. Evid. 201(b). None of HSUS's exhibits qualifies for judicial notice, and HSUS's reference to them is improper. As one court observed reversing a dismissal based on judicial notice:

The district court's principal mistake was in thinking that it was entitled to rely on the deed of sale attached to the defendants' Rule 12(b)(6) motion, in the course of adjudicating that motion. ... [T]here is no doubt that [the deed] was a 'matter outside the pleadings,' within the meaning of Rule 12(d). ... Although there exists a narrow exception to the Rule 12(d) instructions that permits a district court to take judicial notice of matters of public record without converting a Rule 12(b)(6) motion into a motion for summary judgment, the district court erred in thinking that the deed was a proper subject for judicial notice.

Doss v. Clearwater Title Co., 551 F.3d 634, 639-40 (7th Cir. 2008).4

HSUS's motion is one for summary judgment masquerading as a motion to dismiss. It only creates more material fact issues, none of which can properly be decided before FEI has had discovery on the issues raised. For example, whether FFA and HSUS merged is a fact issue that cannot be resolved on the basis of HSUS's self-serving characterizations. Most, if not all, of the facts bearing on this issue are exclusively within HSUS's control. Having opposed discovery,

71009479.1 - 2 -

³ See Kim v. United States, 2011 U.S. App. Lexis 2397 at *16-17 (D.C. Cir. 2011); Tele-Communc's of Key West, Inc. v. United States, 757 F.2d 1330, 1334-35 (D.C. Cir. 1985); Gordon v. Nat'l Youth Work Alliance, 675 F.2d 356, 360 (D.C. Cir. 1982).

⁴ HSUS's authorities (HSUS Mot. at 1 n.2) are not to the contrary. *Baird v. Snowbarger*, 2010 U.S. Dist. LEXIS 109091 at *14-15 (D.D.C. 2010), took judicial notice of an exhibit stating uncontested dates relevant to the timeliness of plaintiff's claims. In *Western Assocs. Ltd. P'ship v. Market Square Assocs.*, 235 F.3d 629, 634 (D.C. Cir. 2001), the court reviewed the original complaint in evaluating plaintiff's amended complaint. Neither case endorses HSUS's effort to use "judicial notice" to get a resolution of disputed facts under 12(b)(6).

DE 59, HSUS is in no position to burden the Court with fact issues not appropriately addressed until discovery has been allowed.

ARGUMENT

I. HSUS IS RESPONSIBLE FOR FFA'S RACKETEERING AND TORTS

HSUS does not deny that the successor corporation after a merger inherits the liabilities of the predecessor corporation. Nor could it, since the law on this issue is clear. See N.Y. Not-For-Profit Corp. Law § 905(b)(3) (Consol. 2010) ("[t]he surviving or consolidated corporation shall assume and be liable for all the liabilities, obligations and penalties of each of the constituent corporations"); D.C. Code § 29-301.44 (5) (2010) ("[s]uch surviving or new corporation shall thenceforth be responsible and liable for all the liabilities and obligations of each of the corporations so merged or consolidated"). Thus, assuming the truth of FEI's allegation that FFA and HSUS merged, FAC ¶ 36, HSUS is liable as a matter of law for all of FFA's racketeering and tortious activity.

While admitting that the FFA transaction was a "corporate combination," HSUS insists that it was an "asset acquisition," not a merger, and that FFA and HSUS "have continued to operate as separate and distinct organizations." HSUS Mot. at 2. These *post hoc* rationalizations to the Court directly contradict what HSUS and FFA have both stated about this transaction, publicly, internally and to the IRS. (Indeed, as shown below, its own counsel did not know the difference when it sent a thank you note for an HSUS payment.) In the November 22, 2004 press release announcing the deal, both parties said that "the *merger* will formally occur on January 1, 2005." [ESA]DE 192-2 (emphasis added). The parties also stated that the transaction was "an unprecedented and historic combination" that will result in a "new entity" with a single "planned 2005 budget of over \$95 million," with boards that "will combine to operate as one" and with D.C. as the base of operations of the "combined organization." *Id.* HSUS now tries to

pretend that these were "colloquial" references, HSUS Mot. at 2, but they were no accident. The Asset Acquisition Agreement (11-22-04) ("Agreement"), to which HSUS invites the Court's attention, HSUS Mot., Ex. A, expressly states that "[n]o press release related to this Agreement ... shall be issued ... without the joint approval of HSUS and Fund, given through their respective presidents." *Id.* § 10.3. Thus, "merger" was terminology approved at the highest level of these organizations. Furthermore, more than two years later, Michael Markarian, the President of FFA and Executive Vice President of HSUS, FAC ¶ 36, still used the "m" word in official records. [ESA]DE 192-22, p. 4 (FFA board minutes of Markarian's President's report of a "[t]wo year review of FFA & HSUS *since merger*") (emphasis added).⁵

Even if HSUS's "no-merger" claims were true, HSUS still is responsible for FFA's actions. Successor liability applies under RICO. *R.C.M. Exec. Gallery Corp. v. Rols Capital Co.*, 901 F. Supp. 630, 635-36 (S.D.N.Y. 1995). Under the traditional common law rule applicable in these situations, a corporation acquiring assets of another corporation takes on its liabilities "if (1) there is an express or implied agreement to assume the other company's debts and obligations; (2) the transaction was fraudulent; (3) there was a *de facto* combination or merger of the companies; or (4) the purchasing company was a mere continuation of the selling company." *Id. See also Lumbard v. Maglia, Inc.*, 621 F. Supp. 1529, 1534-35 (S.D.N.Y. 1985). At least two such exceptions apply here: (i) HSUS assumed FFA's liabilities; and (ii) if not a merger in fact, the FFA/HSUS combination was a *de facto* merger which has the same effect on HSUS's liability.

71009479.1 - 4 -

⁵ HSUS claims "there is no cognizable legal entity called FFA/HSUS," but this was the Court's reaction in the ESA Case after hearing Markarian testify on the relationship between FFA and HSUS. ASPCA v. Feld Entm't, Inc., 677 F. Supp. 2d 55, 77 n.15 (D.D.C. 2009) ("FFA is an affiliate of the Humane Society of the United States ("HSUS"). 3-10-09 p.m. at 48:13-48-15 (Markarian). For convenience, the Court will refer to FFA as "FFA/HSUS").

⁶ New York law apparently controls the FFA/HSUS Agreement, HSUS Mot., Ex. A (§ 11.9), but the New York successor liability standard is the same as the traditional rule discussed above. *New York v. Storonske Cooperage Co.*, 174 B.R. 366, 375 (N.D.N.Y. 1994).

Under the Agreement, HSUS expressly assumed FFA's liabilities: "HSUS shall assume, defend, discharge, and perform as and when due, all lawful liabilities and obligations of the Fund ... of whatever type or kind, including without limitation contingent liabilities whether known or unknown and whether asserted or unasserted, including, but not limited to" a list of items. HSUS Mot., Ex. A (§ 1.3) (emphasis added). This broad language plainly covers any statutory or tort claim by FEI arising out of FFA's Rider payments. Furthermore, while the Agreement contains an express exclusion of liabilities, none of them covers this case. Id. § 1.4. Thus, whatever the FFA/HSUS transaction is called, HSUS assumed FFA's liabilities.

HSUS also inherited FFA's liabilities because the combination was a *de facto* merger:

A de facto merger occurs where one corporation is absorbed by another, but without compliance with the statutory requirements for a merger. ... To find that a de facto merger has occurred there must be a continuity of the selling corporation, evidenced by the same management, personnel, assets and physical location; a continuity of stockholders, accomplished by paying for the acquired corporation with shares of stock; a dissolution of the selling corporation, and the assumption of liabilities by the purchaser. ... Such a merger makes the surviving corporation liable for the claims against the predecessor corporation.

Arnold Graphics Ind., Inc. v. Ind. Agent Ctr., Inc., 775 F.2d 38, 42 (2d Cir. 1985) (citation omitted). See also Storonske, 174 B.R. at 382. "Not all of these factors are needed to demonstrate a merger; rather, these factors are only indicators that tend to show a de facto merger." Lumbard, 621 F. Supp. at 1535 (citation omitted). Nor do the factors have to occur at the same time. Arnold, 775 F.2d at 42. HSUS's exhibits show that the FFA/HSUS combination was a de facto merger or that, at a minimum, the facts are in dispute on that issue.8

71009479.1 - 5 -

⁷ In the Agreement, FFA also represents that "[n]o officer, director, employee, or agent of Fund has been or is authorized to make or receive, and Fund knows of no such person making or receiving any bribe, kickback, or other illegal payment at any time." HSUS Mot., Ex. A (§ 2.10). If this representation was made to insulate HSUS from liability for FFA's Rider payments, then the fraud exception to successor liability also applies. Furthermore, the due diligence (if any) that occurred as to this representation will be a significant discovery issue in this case.

⁸ Since neither HSUS nor FFA evidently has stock, see HSUS Mot., Ex. A at 1, the stock/shareholder part of the *de facto* merger test is not relevant.

While FFA retained title to three pieces of real estate, HSUS Mot., Ex. A (§ 1.2(g)), HSUS assumed the operation of FFA's Black Beauty Ranch, at HSUS's expense (\$900,000 per year, not to exceed \$5 million), at HSUS's discretion, retaining the option to discontinue the funding or operation of that facility entirely, *id.* § 1.5(a). Except for the real estate, some cash and other items, FFA transferred to HSUS "*all of its assets*, including but not limited to all of its real and personal property, tangible and intangible, of any type or kind and wheresoever situated," *id.* § 1.1, including 12 broadly defined categories, *id.* § 1.1(a)-(l) (emphasis added).

HSUS offered jobs to all FFA employees, conditioned on, *inter alia*, releases of all employment-related claims, known and unknown, "against the Fund, *or against the HSUS derivatively*," *id.* § 1.5(b)(1)(iii) (emphasis added) – a superfluous move if FFA and HSUS really were "separate and distinct" as HSUS now asserts. After the merger, FFA had no paid employees; HSUS employed and paid all persons working for FFA. No. 03-2006, Tr. of Hearing at 56:11-58:9 (3-6-08) (Markarian). After the merger, FFA had no fundraising, no public relations and no legal department; HSUS employees performed all such functions. *Id.* at 57:22-58:2, 58:3-14 (Markarian). Last, but certainly not least, any member of the public giving \$10 or more to FFA within 12 months of the Agreement's closing automatically became a member of HSUS. HSUS Mot., Ex. A (§ 1.5(e)).

HSUS now asserts to the Court that "FFA continued to proceed with its own litigation, such as the ESA Action," HSUS Mot. at 3. However, HSUS advertised it differently to the public. HSUS's website listed the ESA Case as one of HSUS's own cases, on HSUS's, not FFA's, "current docket." *See* [ESA]DE 192-4. HSUS also identified, as "HSUS counsel" in the ESA Case, Ethan Eddy, an HSUS employee formerly with MGC. *Id.* HSUS's "current docket" and its representation of the ESA Case as one of HSUS's own cases with HSUS's own counsel

involved, was used by HSUS to solicit money from the public, with a "donate" button immediately adjacent to the case description. *Id.*⁹

HSUS also submits excerpts from certain FFA IRS Form 990 tax returns for 2005-07 to support its claim of separateness. HSUS Mot. at 3 & Ex. D. However, HSUS leaves out the part of the 2005 990 stating that, under the Agreement, FFA had "transferred assets totaling \$18,418,663 to [HSUS]" and that "the Society took control of the Fund's Board and voting membership." Ex. 1 at p. 39. HSUS also neglects to tell the Court that FFA's 990 for 2007 stated that FFA is an "affiliate organization of [HSUS]" that is "controlled by HSUS." Ex. 2 at pp. 27, 32. Similarly, the FFA 990's for 2008 and 2009 both represent HSUS as FFA's "parent organization" and show substantial, if not complete, overlap in boards of directors as well as the fact that all FFA officers are HSUS employees. Ex. 3 at pp. 32, 33; Ex. 4 at pp. 36, 37. The 2009 990 states that the board of FFA's "parent organization, [HSUS], approves or confirms the election of FFA board members and officers." Ex. 4 at p. 37.

Thus, HSUS's insistence that FFA and HSUS remained "separate and distinct" after the admitted "corporate combination" in 2005, HSUS Mot. at 2, is an issue of fact not properly resolved on 12(b)(6). See Software Freedom Cons., Inc. v. Best Buy Co., Inc., 2010 U.S. Dist. Lexis 125426 at *21 (S.D.N.Y. 2010) (evidentiary hearing required to decide de facto merger issue); Wallace v. Midwest Fin. & Mort. Serv., Inc., 728 F. Supp. 2d 906, 926-27 (E.D. Ky. 2010) (denying summary judgment on successor liability because, inter alia, predecessor company stated it was "merging with" defendant); Rothberg v. Chloe Foods Corp., 2007 U.S. Dist. Lexis 53914 at *66-68 (E.D.N.Y. 2007) (whether defendant assumed predecessor's liabilities raised issue of fact precluding summary judgment); R.C.M., 901 F. Supp. at 636

- 7 -

⁹ HSUS still lists the ESA Case in "cases on the docket" of HSUS's Animal Protection Litigation section, headed by Lovvorn. Available (control + click): http://www.humanesociety.org/about/departments/litigation. (3-4-11).

(summary judgment denied on successor liability; issue of fact raised despite defendant's claim that it was "separate and distinct" from predecessor entity). These facts also show that, even if it was legally separate from FFA, HSUS has enough control over FFA to be subject to relief under RICO for FFA's acts. *See United States v. Philip Morris USA, Inc.*, 566 F.3d 1095, 1134-35 (D.C. Cir. 2009) (holding company properly enjoined regarding subsidiaries' conduct).

II. THE FAC STATES A CLAIM AGAINST HSUS UNDER 18 U.S.C. § 1962(C)

HSUS claims that the FAC does not adequately plead the elements of "conduct or participation," and "racketeering activity (predicate acts)". HSUS Mot. at 6-10. Neither of these arguments has any merit.¹⁰

HSUS's participation in the operation of the enterprise is demonstrated by the predicate offenses it committed. The FAC specifically describes the fraudulent scheme directed at FEI, FAC ¶ 98-129, and details how FFA (both before and after merging with HSUS) committed mail or wire fraud in connection with that scheme to defraud. FAC ¶ 163-67. The FAC specifically details FFA's bribes and/or illegal gratuity payments, FAC ¶ 160-62, and the mischaracterization of those monies to evade federal income tax. FAC ¶ 168. The FAC also describes how FFA, through Markarian, an officer of both FFA and HSUS, gave false 30(b)(6) deposition testimony in July 2005 and concealed FFA's payments to Rider. FAC ¶ 36, 217-222. All of these racketeering acts are attributable to HSUS.

Liability under RICO requires participation in the "operation or management of the enterprise." Reves v. Ernst & Young, 507 U.S. 170, 183 (1993) (emphasis added). Upper management as well as "lower rung participants in the enterprise who are under the direction of upper management" are liable. Id. at 184. Management or operation of the enterprise must be through a "pattern of racketeering activity. 18 U.S.C. § 1962(c) (2006). "Racketeering activity" means committing any of the "predicate acts," i.e., the criminal offenses listed in 18 U.S. C. § 1961(1). A "pattern of racketeering activity" requires "at least two acts of racketeering activity," not more than 10 years apart, one of which must be after 1970. Id. § 1961(5) (2006). "[T]o prove a pattern of racketeering activity a plaintiff or prosecutor must show that the racketeering predicates are related, and that they amount to or pose a threat of continued criminal activity." H.J. Inc. v. Northwestern Bell Tel. Co., 492 U.S. 229, 239 (1989) (original emphasis).

The FAC pleads specific racketeering acts committed by HSUS as well. A RICO defendant can join the fraudulent enterprise "at any point." Elsevier Inc. et al. v W.H.R.P., Inc., 692 F. Supp. 2d 297, 306 (S.D.N.Y. 2010). HSUS claims the FAC "fails to adequately allege at least two predicate acts against HSUS," HSUS Mot. at 10, but this is untrue. The FAC alleges at least eight such acts. After the FFA merger, HSUS made at least six payments to WAP intended for Rider. FAC ¶ 160. HSUS also participated in the July 2005 fundraiser for money to continue the Rider payments, which is one of the episodes of mail fraud. FAC ¶¶ 179-83. When FFA obstructed FEI's discovery with false 30(b)(6) deposition testimony about the Rider payments, FFA's witness, Markarian, was also an Executive Vice President of HSUS. FAC ¶¶ 36, 217-22. HSUS also could control the ESA Case, as two of its employees, Ockene and Lovvorn, remained counsel of record in the ESA Case after they left MGC and joined HSUS. FAC ¶¶ 44-45. Even if paying Rider was not its idea, HSUS executed that scheme by making payments and co-hosting an event to fund the Rider payments. Thus, the FAC clearly pleads HSUS's participation in the operation of the enterprise through a pattern of racketeering activity. See In re Ins. Brokerage Antitrust Lit., 618 F.3d 300, 378 (3d Cir. 2010) (defendant participates in operation of enterprise "by knowingly implementing decisions' by the enterprise's managers to commit crimes") (citation omitted); Elemary v. Philipp Holzmann A.G., 533 F. Supp. 2d 116, 142 (D.D.C. 2008) (organizing a single transaction for enterprise sufficient for "directing the enterprise's affairs.' Reves, 507 U.S. at 179") (original emphasis).¹¹

71009479.1

¹¹ HSUS's cases (HSUS Mot. at 7) are inapposite. Univ. of Md. v. Peat, Marwick, Main & Co., 996 F.2d 1534 (3d Cir. 1993), has been criticized for its assertion that some degree of decision-making is not participation under Reves. See, e.g., United States v. Allen, 155 F.3d 35, 42 (3d Cir. 1998) (noting Univ. of Md.'s inconsistency with Reves; a defendant's "commission of crimes that advance its objectives must be assessed by a fact-finder to determine whether [it] ... constitutes participation in the operation or management of the enterprise's affairs"); MCM Partners v. Andrews-Bartlett & Assocs., 62 F.3d 967, 979 n.13 (7th Cir. 1995) (noting Univ. of Md. and other cases' interpretations of Reves). Harpole Architects, P.C. v. Barlow, 668 F. Supp. 2d 68 (D.D.C. 2009), shows, by contrast, the clear sufficiency of the FAC. The complaint dismissed there had no "factual enhancement" supporting the "naked allegation" that the defendant played a part in directing the enterprise's affairs. Id. at 75-76. Danielsen

HSUS responds to these allegations (1) by denying its merger with FFA and (2) by denying its payments to Rider. HSUS Mot. at 2-4. Denials do not trigger dismissal. We have addressed the first point above. As to the second, HSUS again goes outside the FAC, referring to Markarian's testimony that the HSUS payments to WAP for Rider were really FFA payments. Id. at 5. This is entirely an issue of fact. The WAP payments after the merger were sent by an employee of HSUS, Lovvorn, with a letter to WAP on HSUS letterhead, and were made with HSUS checks, signed by HSUS employees that were drawn on an HSUS bank account. [ESA]DE 166-14, 166-19, 166-22; [ESA]DE 166-15, 166-20, 166-23. While Markarian claimed under oath that these were "FFA payments," he also admitted that the money was drawn from an HSUS bank account. No. 03-2006, Tr. of Hearing at 38:17-39:16. (5-30-08) (Markarian). Not one of the transmitting documents or negotiable instruments referred to FFA; HSUS generated them all. [ESA]DE 166-14, 166-19, 166-22; [ESA]DE 166-15, 166-20, 166-23. WAP recorded all of these payments on its own ledger as HSUS "donations," sending at least one "thank you" note for the money to HSUS. FAC ¶ 160; [ESA]DE 85-5; [ESA]DE 166-24. Indeed, HSUS's own Form 990 for 2005 lists a \$5,500 "grant" to WAP, [ESA]DE 169-9 at 2, which matches exactly the amount on WAP's ledger received from HSUS, FAC ¶ 160.

The claim that the payments were FFA payments "processed" by HSUS further exemplifies defendants' disingenuous labeling to conceal the real mechanics of the payments. HSUS's argument demonstrates the money laundering – its payments for Rider went through WAP so HSUS could later deny (as it does now) paying Rider. HSUS's assertion that it did not pay Rider "directly or indirectly," HSUS Mot. at 4, is untrue, as the above evidence plainly shows. Indeed, in the ESA Case, the Court found "questionable" Markarian's trial testimony

71009479.1 - 10 -

v. Burnside-Ott Aviation Training Ctr., Inc., 941 F.2d 1220 (D.C. Cir. 1991), is distinguishable, as plaintiff never alleged defendants' participation in the operation or management of the enterprise. Id. at 1231, 1232.

that he was not "certain" that FFA/HSUS intended their WAP payments for Rider – in view of the record showing Rider as the ultimate intended recipient. 677 F. Supp. 2d at 76-77 (FOF 38).

HSUS's citations (HSUS Mot. at 8 n.3) give it no cover as an "unwitting participant" or "an innocent instrument." HSUS's protestations of innocence are hollow. HSUS's payments to WAP for Rider after the merger were by Lovvorn, Vice President & Chief Counsel for Animal Protection Litigation & Research. See [ESA]DE 166-14, 166-19, 166-22, 166-24. Lovvorn also had been a partner in MGC, the law firm handling the ESA Case that paid Rider directly as well as through its alter ego, WAP; he had worked on the fraudulent ESA Case as counsel since at least July 2001, participating, with others, in the false statements to the courts about Rider's "aesthetic injury;" he had full knowledge of the Rider payments; he had participated in the planning and execution of those payments; and he remained counsel of record in the ESA Case after joining HSUS. FAC ¶¶ 39, 43, 44, 160. Thus, HSUS, through Lovvorn (and others such as Ockene, id. ¶ 45) fully knew of, and actively engaged in, the enterprise's activities. Whether HSUS participated in the "operation" or "management" of the RICO enterprise is an issue of fact beyond the scope of a motion to dismiss. First Capital Asset Mgmt., Inc. v. Satinwood, Inc., 385 F.3d 159, 176 (2d Cir. 2004) (internal citation omitted).

III. THE FAC STATES A CLAIM AGAINST HSUS UNDER 18 U.S.C. § 1962(D)

HSUS argues that if FEI's substantive RICO claim is dismissed, so must its RICO conspiracy claim "because FEI's RICO conspiracy claim is derivative of its substantive RICO claim." HSUS Mot. at 10. This is incorrect. Liability under § 1962(c) is not required for liability under § 1962(d). Salinas v. United States, 522 U.S. 52, 65-66 (1997) (upholding

71009479.1 - 11 -

¹² Cf. First City Nat'l Bank & Trust Co. v. FDIC, 730 F. Supp. 501 (E.D.N.Y. 1990) (bank directors without knowledge of racketeering "unwitting participants" in enterprise); Reed Constr. Data Inc. v. McGraw-Hill Cos., No. 09 Civ. 8578, 2010 U.S. Dist. LEXIS 96791 at *14 (S.D.N.Y. 2010) (defendant was "an innocent instrument" used by the enterprise, as complaint did not allege the defendant intended to, or did, commit any fraud).

conviction on RICO conspiracy count for defendant acquitted of substantive RICO count); see also United States v. Wilson, 605 F.3d 985, 1020 (D.C. Cir. 2010) (per curiam) (defendant can be guilty of RICO conspiracy even though incapable of committing the substantive offense); United States v. Philip Morris, 327 F. Supp. 2d 13, 20 (D.D.C. 2004) ("[L]iability for a RICO conspiracy ... does not require ... proof of commission of all the other elements of the Section 1962(c) substantive offense."). 13

A RICO conspiracy requires no formal agreement. *Philip Morris*, 566 F.3d at 1130 ("A conspiracy can be inferred from a combination of close relationships or knowing presence and other supporting circumstantial evidence"). "Proof of an agreement which is a substantive violation of RICO (such as conducting the affairs of an enterprise through a pattern of racketeering) is sufficient to establish a violation of section 1962(d)." *Baumer v. Pachl*, 8 F.3d 1341, 1346 (9th Cir. 1993). *See also Handeen v. Lemaire*, 112 F.3d 1339, 1355 (8th Cir. 1997) (conspiracy claim "need only establish tacit understanding between the parties") (citation omitted); *Allstate Ins. Co. v. Linea Latina De. Acc., Inc.*, 2011 U.S. Dist. Lexis 16221 at *15 (D. Minn. 2011) (same).

HSUS clearly "adopted the goal of furthering or facilitating the criminal endeavor." Oceanic Expl. Co. v. ConocoPhillips, Inc., 2006 U.S. Dist. LEXIS 72231 at *60 (D.D.C. 2006) (citation omitted). Through WAP, HSUS paid Rider six times; HSUS participated in the July 2005 fundraiser that collected money to fund Rider; HSUS's Executive Vice President obstructed FEI's discovery by providing false 30(b)(6) deposition testimony about the Rider payments; and HSUS could control the ESA Case through two of the counsel of record, Lovvorn

71009479.1 - 12 -

¹³ Reed (cited at HSUS Mot. at 8, 10) dismissed the conspiracy claim because it did not allege involvement by anyone other than the company's agents which usually precludes a conspiracy. 2010 U.S. Dist. LEXIS 96791 at *18. Here, independent individuals and entities (not all of whom were the others' agents) conspired to violate RICO.

and Ockene, its employees and former MGC lawyers. FAC ¶ 160, 179-83, 36, 217-22, 44-45. HSUS joined in what it knew was a collective venture (made up of plaintiffs, counsel of record, and organizations that lent financial support to the fraudulent case) to pursue a lawsuit against FEI based on a fraudulent jurisdictional predicate propped up by a plaintiff who was hired to claim an injury he did not have. FAC ¶ 13-32. These individuals and groups, including FFA and HSUS, associated together for the common goals of forcing elephants out of FEI's circus, draining FEI's resources, and raising funds for like-minded organizations (like FFA/HSUS). FAC ¶ 2, 9-12. The FAC sufficiently pleads HSUS's involvement in a § 1962(d) conspiracy. See Bryant v. Mattel, 2010 U.S. Dist. LEXIS 103851 at *46 (C.D. Cal. 2010) (because "the nature of the uncontested relationships between the alleged co-conspirators is suggestive, if not supportive, of agreement," § 1962(d) conspiracy adequately alleged). 14

CONCLUSION

For the foregoing reasons, defendant's motion should be denied.

Dated: March 4, 2011 Respectfully submitted,

/s/

John M. Simpson (D.C. Bar #256412) jsimpson@fulbright.com Stephen M. McNabb (D.C. Bar #367102) smcnabb@fulbright.com Michelle C. Pardo (D.C. Bar #456004) mpardo@fulbright.com

FULBRIGHT & JAWORSKI L.L.P. 801 Pennsylvania Avenue, N.W. Washington, D.C. 20004
Telephone: (202) 662-0200

Facsimile: (202) 662-4643

Counsel for Plaintiff Feld Entertainment, Inc.

¹⁴ HSUS's claim (HSUS Mot. at 10 n.4) that the malicious prosecution and abuse of process claims must be dismissed because it was allegedly not a party to the ESA Case ignores the effect of the merger. Under either New York or D.C. law, whether or not ever joined, a successor corporation succeeds without abatement to any pending case where the predecessor is a party. N.Y. NOT-FOR-PROFIT CORP. LAW § 905(b)(3); D.C. CODE § 29-301.44 (5).

UNITED STATES DISTRICT COURT FOR THE DISTRICT OF COLUMBIA

FELD ENTERTAINMENT, INC.

.

Plaintiff,

.

Case No. 07- 1532 (EGS)

v.

AMERICAN SOCIETY FOR THE PREVENTION OF CRUELTY

ANIMALS, et al.

:

Defendants.

Defendants.

PLAINTIFF'S OPPOSITION TO SUPPLEMENTAL MOTION OF DEFENDANT
HUMANE SOCIETY OF THE UNITED STATES TO DISMISS PLAINTIFF'S
AMENDED COMPLAINT

APPENDIX A

GLOSSARY OF TERMS

Term Explanation

API Animal Protection Institute, defendant herein.

ASPCA American Society for the Prevention of Cruelty to Animals, defendant herein.

AWI Animal Welfare Institute, defendant herein.

COL Conclusion of law.

Crystal Howard M. Crystal, defendant herein.

DE A docket entry in the instant case, Civil Action No. 07-1532-EGS (D.D.C.).

Def. Mem. Memorandum and Points of Authorities in Support of Motion of Defendants to

Dismiss Plaintiff's Amended Complaint (12-3-10) (DE 54-1).

DX A trial exhibit of the defendant in the ESA Case.

ESA Endangered Species Act, 16 U.S.C. § 1531 et seq.

ESA Case The litigation styled, American Society for the Prevention of Cruelty to Animals, et

al. v. Feld Entertainment, Inc., Civil Action Nos. 00-1641-EGS & 3-2006-EGS

(D.D.C.).

[ESA]DE A docket entry in the ESA Case.

FAC First Amended Complaint of Feld Entertainment, Inc. (2-16-10) (DE 25).

FEI Feld Entertainment, Inc., plaintiff herein.

FFA The Fund for Animals, Inc., defendant herein.

FOF Finding of Fact.

Glitzenstein Eric R. Glitzenstein, defendant herein.

HSUS Humane Society of the United States, defendant herein.

HSUS Mot. Defendant The Humane Society of the United States's Supplemental Motion to

Dismiss Plaintiff's Amended Complaint and Memorandum of Points and

Authorities in Support (12-3-10) (DE 55).

Liss Cathy Liss, President of AWI, during some or all of time period alleged in FAC.

Lovvorn, defendant herein.

71010674.1

<u>Term</u>	Explanation
Markarian	Michael Markarian, President of FFA and Executive Vice President of HSUS, during some or all of time period alleged in FAC.
Meyer	Katherine A. Meyer, defendant herein.
MGC	Meyer, Glitzenstein & Crystal, defendant herein.
Ockene	Kimberly D. Ockene, defendant herein.
Paquette	Nicole Paquette, General Counsel of API, during some or all of time period alleged in FAC.
PAWS	Performing Animal Welfare Society.
PETA	People for the Ethical Treatment of Animals.
RICO	Racketeer Influenced and Corrupt Organizations Act, 18 U.S.C. § 1961 et seq.
Rider	Thomas Eugene Rider, defendant herein.
Supp. Mot.	Supplemental Motion to Dismiss the Claims Against Attorneys Lovvorn and Ockene, and Memorandum of Law in Support Thereof (12-3-10) (DE 53).
USDA	United States Department of Agriculture.
WAP	Wildlife Advocacy Project, defendant herein.
Weisberg	Lisa Weisberg, Senior Vice President of Government Affairs and Public Policy of ASPCA, during some or all of time period alleged in FAC.

71010674.1 - 2 -

UNITED STATES DISTRICT COURT FOR THE DISTRICT OF COLUMBIA

FELD ENTERTAINMENT, INC.

Plaintiff,

Case No. 07- 1532 (EGS)

AMERICAN SOCIETY FOR THE PREVENTION OF CRUELTY

ANIMALS, et al.

v.

Defendants.

Detendants.

PLAINTIFF'S OPPOSITION TO SUPPLEMENTAL MOTION OF DEFENDANT
HUMANE SOCIETY OF THE UNITED STATES TO DISMISS PLAINTIFF'S
AMENDED COMPLAINT

EXHIBIT 1

Form	99	0		turn of O									900 C
			Under sec	tion 501(c), 5	27, or 4947(a	a)(1) of the	Internal	Reven	ue Code (excep	t blac	k lung	Open to Public
		f the Treasury rue Service	▶ Th	e organization (rust or priva se a copy of th				rting re	quiren	nents.	Inspection
			dar year, or t	ax year begin	ning			, 20	005, and e	nding			
B cm	h el magellos	di Please	C Name of or	ganization							D En	nployer ident	ification number
	Address	use IPCS tabel or	THE FUND	FOR ANIMA	LS, INC.				· · · · · · · · ·		13-	-621874	0
	Name ch		Number an	d street (or P.C), box if mail is	not delivered t	o street ac	ddress)	Room/su	ile	E Te	lephone nun	aber
	fatial reb	m type.							1				
\vdash	Frantista Amanded	Specific	200 WEST				· · · · · · · · · · · · · · · · · ·		705		(2) F Ac	12)246-	
H	return Applicates	Instruc-		n, state or count		•					٣	Other (spec	Cash X Accrual
ш	printing	ليسييا	NEW YORK			nonevempt	charitable		M and I am	nol and	bcable		?7 organizations
	 Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ). H(a) is this a group.												
G W	ebsite:		FUNDFORAN						1 ' '			er of afflutes	
			eck only one) > X			4947(a)(1) 01	527	H(c) Are al	l affiliate	s inclu	ded?	Yes No
	heck he			ation's gross rece			m \$25,000	O The	(If "No H(d) is this			See instruction	ons)
or	ganızat	ion need not	l file a return wit	-								a ducrib unpud,	Yes X No
SI	re to fu	le a complete	return Some state	es require a com	plete return.				1 Grou	Examp	tion N	mber 🕨	· · · · · · · · · · · · · · · · · · ·
					117				M Check	- 1			bon is not required
			nes 6b, 8b, 9b, and				709, 2		 		. B (Fa	m 990, 990-l	EZ, or 990-PF)
Par	F		Expenses, and				ices (See	the in	structions		1,.3		
	1	Contribute	ons, gift s, granti	s, and similar an	nounts received	ì	1. 1				[··]		
	а		lic support				1		6,360,	608.	∤' ∤		
	b		iblic support								[,]		
	6	Governme	ent contributions	(grants)			[10]						C 260 600
	l d		es la through 1c) (ca					1 1			1d 2		6,360,60B. 82,859.
	2	-	ervice revenue								3		02,009,
	3		up dues and assu								1	~	
	5		n savings and le	_						• • • •	5		340.
	6 a		and interest from				4 . 1	· · · ·			1		
	Ь		al expenses						PEC	VE IV	, : : : :		
			income or (loss						1156	/EIA	阳	_0	
9_	7		stment income i			• • • • •			41014)	7	Ø	
Revenue	8 a	Gross amo	ount from sales o	f assets other	(A) S	ecurities		181	On MOA	207	2006	191	
æ	1	than inven	itory				8a		-			781	
	ь		or other basis ar				86		OGD	EN	11	-=	
	C	Gain or (lo	ss) (attach sched	tule)	L		8c			-	5 4		
	d	Net gain o	r (toss) (combine	e line 8c, column	ns (A) and (B))					5	84		
	9	Special ev	ents and activiti	es (attach scho	dule) If any am	iount is from g	aming, ch	neck he	re 🕨 🛴]	1.1		
	а		enue (not includia								13		
2	1		ons reported on I										
2	Ь		ct expenses other								-		
က			e or (loss) from							• • • •	19C		
			es of inventory, le								133		
留			of goods sold . let or (loss) from						- 10-)		100		
	l	•	• •		•	• •					11		265,452.
\cap	11	Total save	enue (from Part \ enue (add lines	14 2 3 4 5		00 and 11)				• • •			6,709,259,
-111	13		ervices (from line								13		3,869,747.
₹	14		ent and general								14		221,440,
SCHWINED	15		ng (from line 44,								15		209.212.
3	16	Payments	to affiliales (atta	ch schedule)	 .	STMT 1					16		2,838,794,
Ø	17		enses (add line										7,139,193.
	18		(deficit) for the								18		-429,934.
Net Assets	19		or fund balance								19		20,425,827.
Ž.	20		nges in net asse								20		18,418,663,
	21	Net assets	or fund balance	es at end of yea	r (combine line	s 18, 19, and	20) · · ·						1.577.230.
For P	rivacy	Act and Pa	perwork Reduc	tion Act Notice	, see the separ	rate Instructio	ns.			-			Form 990 (2005)

Pa			tions must complete colum i and section 4947(#)(1)			
	Do not include amounts reported on line 6b, 8b, 9b, 10b, or 15 of Part I		(A) Total	(8) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule)	1				7 7 7 7 V
	(cash \$ 39,086, noncash \$	22	1			
	If this amount includes foreign grants, check here	L	39,086.	39,086.	~ ASTMEAS	
23	Specific assistance to individuals (attack	•				
	schedule)	23				
4	Benefits paid to or for members (attach					
	schedule)	24				SACTOR
25	Compensation of officers, directors, etc.	25	NONE	NONE	NONE	
:6	Other salaries and wages	26	871,265.	783.214.	45,276.	42,77
?7	Pension plan contributions	27	NONE			
8	Other employee benefits	28	269,527.	242,288.	14,006.	13, 23
9	Payroll taxes	29	2,007.	1,804.	104.	9
0	Professional fundraising fees	30	56,066.			56,06
1	Accounting fees	31	57,322.	51,529.	2,979.	2,81
2	Legal fees	32	189,404.	170,263.	9,842.	9,29
3	Supplies	33	757,567.	681,007.	39, 367.	37,19
4	Telephone	34	34,763.	31,250.	1,806.	1,70
5	Postage and shipping	35	29, 911.	26,887.	1,556.	1,46
6	Occupancy	36	269, 398.	242,173.	13,999.	13, 22
7	Equipment rental and maintenance	37	207, 750,		13, 333.	13,66
8	Printing and publications	38	88,150.	79,241.	4,581.	4,32
9	Travel.	39	156, 497.	140,682.	8,132.	7, 68
0	Conferences, conventions, and meetings	40	130,437.	140,002.	6,132,	7, 00.
1		41				
2	Interest	42	135,736.	122.018.	7,054.	6,66
_		_		122,010.	7,034.	0,00
	Other expenses not covered above (demize):	43a	STMT 5	202 670	22 757	
	CONSULTING FEES	43b	427,653.	393,678.	22,757.	11,218
	INVESTMENT ADVISORY FEES	43c	10,284.	9,245.	534.	50
	INSURANCE		-1,975.	-1,775.	-103.	-9:
	REAL_ESTATE_AND_PERSONAL_	43d	44 000	40.000		
	PROPERTY_TAX	43e	11,977.	10,767.	622.	58
f	MAILING COSTS	43f	895,761.	846.390.	48,928.	44:
9		439				
4	Total functional expenses. Add lines 22 through 43 (Organizations completing columns (B)-(D), carry these totals to lines 13-15).	44	4,300,399.	3,869,747.	221,440.	209, 21:
loi:	nt Costs. Check ▶ 🗶 if you are follo			3,003,141,	661,790,	<u></u>
ioit Le	any joint costs from a combined educational	rany c	aun and fundraismo selv	catation reported as (8) On	nram senires?	► X Yes No
	es,* enter (i) the aggregate amount of these i		wiet and telephony but	(ii) the amount often	ated to Dronmon sensors	XYes No
	es, "enter (i) the aggregate amount of mese j he amount allocated to Management and ge				ated to Program services	
m) (не антоин акосател то манаделяетт апо де	142 St 1	26,374	, and (w) the amount a	llocated to Fundraising \$	209, 070 Form 990 (2005

JSA 55 1020 2 000

Fo	rm 990 (2005)	,	3-6218740	Page 3
Ρ	art III Statement of Program Service Accor		3-0210140	
Fo pa on	m 990 is available for public inspection a riscular organization. How the public percein its return. Therefore, please make sure the ograms and accomplishments	and, for some people, serves as the power an organization in such cases ma	v be determined by the	information presented
W	hat is the organization's primary exempt purpor	se? ►SEE_STATEMENT 6		Program Service
ЫA	organizations must describe their exempt purpor	se achievements in a clear and concise in		Expenses (Required for 501(c)(3) and
	clients served, publications issued, etc. Discuss			(4) orgs , and 4947(a)(1) trusts; but optional for
org	anizations and 4947(a)(1) nonexempt charitable tr	rusts must also enter the amount of grants	and allocations to others)	others.)
a	SEE_EXHIBIT 1			
	(Grants and allocations \$ 39,08	6.) If this amount includes foreign g	rants, check here ▶	3,869,747.
b				
	(Grants and allocations \$) If this amount includes foreign g	rants, check here ▶	
C				
	(Grants and allocations \$) If this amount includes foreign g	rants, check here ▶	
đ				
	To see the second secon			
	(Grants and allocations \$) If this amount includes foreign g	rants, check here 🕨	
•	Other program services (attach schedule) (Grants and allocations \$) If this amount includes foreign g	rants, check here ►	
f	Total of Program Service Expenses (should			3,869,747.
-				Form 990 (2005)

_		(2005)		1	3-6218740		Page 4
_	art IV					***************************************	
-	lote:	Where required, attached schedules and amounts column should be for end-of-year amounts only	within	the description	(A) Beginning of year		(B) End of year
	45	Cash - non-interest-bearing			218	45	NONE
	46	Savings and temporary cash investments			2,860,718	46	1,409,104.
	47a	Accounts receivable	47a	85,402.		1	
	ь	Less allowance for doubtful accounts	47b		149,303	47c	85,402.
	40-	Diadagasasasas				1 1	
	463	Pledges receivable	48a	426,718.			
	49	Less. allowance for doubtful accounts	48b	<u> </u>	NON	48c	426,718,
	50	Grants receivable				49	
	30						
	512	(attach schedule)	• • •			50	
	•••	schedule)	1640			1 1	
8	ь	Less. allowance for doubtful accounts	51a			ca	
Assets						51c	
٩	53	Prepaid expenses and deferred charges	• • • •		112.504	 	2 242
	54	Investments - securities (attach schedule)			15,718,625.		2,343.
- 1	55a	Investments - land, buildings, and			13, 110, 623.	100	NONE
		equipment basis	55a				
Ì	b	Less: accumulated depreciation (attach				1	
- 1		schedule)	55b	1		55c	
- [56	Investments - other (attach schedule)		STMT. 7	NONE		2,630.
- 1		Land, buildings, and equipment basis .STMT. 8	572	3, 360, 846		1	
	b	Less: accumulated depreciation (attach				1 1	
ı		schedule)	57b	1,675,194	3, 899, 336.	57c	1,685,652.
j	58	Other assets (describe ▶		<u>STMT 9</u>)	44,712.	58	470.
- 1							
	59	Total assets (must equal line 74) Add lines 45 thre			22,785,416.	59	3,612,319.
-	60	Accounts payable and accrued expenses			359,589.	60	56,109.
	61 62	Grants payable				61	
. 1	63	Deferred revenue				62	· · · · · · · · · · · · · · · · · · ·
휣	0.5						
Labilities	642	schedule)				63 64a	
۲	ь	Mortgages and other notes payable (attach schedul	 le1			64b	
	65	Other liabilities (describe ▶	~,	STMT 10)	2,000,000.		1 070 000
ł					2,000,000.	03	1,978,980.
	66	Total liabilities. Add lines 60 through 65			2,359,589.	66	2,035,089.
Т	Orga	nizations that follow SFAS 117, check here ▶ X	and	complete lines	-,003,003.		2,000,000.
-		67 through 69 and lines 73 and 74	-				
2	67	Unrestricted			20,070,597.	67	1,577,230.
Ĕ		Temporarily restricted			355,230.	68	NONE
2	69	Permanently restricted	· · · <u>. ·</u>	<u></u> [69	
Net Assets or Fund Balance		nizations that do not follow SFAS 117, check here complete lines 70 through 74.	▶ _	and			
	70	Capital stock, trust principal, or current funds				70	
2	71	Paid-in or capital surplus, or land, building, and equ	ipmen	t fund		71	
8	72	Retained earnings, endowment, accumulated incon	ne, or	other funds		72	
4	73	Total net assets or fund balances (add lines 67 thr	ough	69 or lines			
ě		70 through 72;	_	ł			
-	•	column (A) must equal line 19; column (B) must eq	ual lin	e 21) L	20,425,827.	73	1,577,230.
L	74	Total liabilities and net assets/fund balances. Add	lines	66 and 73	22,785,416.	74	3,612,319.
							Form 990 (2005)

	Reconciliation of Revenue per Audited Finstructions.)	nancıaı Statemer	its With Reveni	ve per Returi	n (Se	e the
•	Total revenue, gains, and other support per audited financi	al statements	• • • • • • • • •		a	3,907,12
b	Amounts included on line a but not on Part I, line 12.					
1	Net unrealized gains on investments		Б1		1 1	
2	Donated services and use of facilities		1 1	36,656.	1.1	
3	Recoveries of prior year grants				1. 1	
4	Other (specify):		1 1			
-	\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-		11		11	
	Add lines b1 through b4				ь	36,65
C	Subtract line b from line a				С	3,870,46
d	Amounts included on Part I, line 12, but not on line a:					
1	Investment expenses not included on Part I, line 6b		lasi		·	
2	Other (specify) SEE STATEMENT 11					
_			d2 2	.838.794.	1 1	
	Add lines d1 and d2		WA		al	2,838,79
3	Total revenue (Part I, line 12). Add lines c and d				e	6,709,25
Рa	rt IV-B Reconciliation of Expenses per Audited F	nancial Stateme	nts With Expen	ses per Retu		01,007,00
1	Total expenses and losses per audited financial statements				a	4,337,05
	Amounts included on line a but not on Part I. line 17.					
1	Donated services and use of facilities		b1	36,656.		
•	Prior year adjustments reported on Part I, line 20					
-						
3	Losses reported on Part I, line 20				1 1	
•	Other (specify).		1			
					ь	36, 65
	Add lines b1 through b4				c	4,300,39
	Subtract line b from line a	• • • • • • • • • •	• • • • • • • • •		!	3,300,33
	Amounts included on Part I, line 17, but not on line a:		lasl		.]	
1	Investment expenses not included on Part I, tine 6b Other (specify): - SEE STATEMENT 12				1	
2			1 1		1	
_	Other (specify)			920 704		
_			d2 2	.838.794.	,	2 929 70
-			d2 2		d e	
_	Add lines d1 and d2		d2 2		e	7, 139, 19
_	Add lines d1 and d2	ey Employees (L	d2 2	who was an o	e	2,838,79 7,139,19 r, director, trus
_	Add lines d1 and d2. Total expenses (Part I, line 17). Add lines c and d ITV Current Officers, Directors, Trustees, and K or key employee at any time during line year even in	ey Employees (L f they were not com	d2 2	who was an o	e office:	7, 139, 19 r, director, trus
_	Add lines d1 and d2. Total expenses (Part I, line 17). Add lines c and d rt V Current Officers, Directors, Trustees, and K	ey Employees (L	d2 2	who was an o	e officer	7, 139, 19
_	Add lines d1 and d2	ey Employees (L f they were not com (B) fille and average hours per week devoted to position	ist each person pensated) (See (C) Compensation (If not paid, enter	who was an other instructions	e officer	7, 139, 19 r, director, trus
Pa	Add lines d1 and d2. Total expenses (Part I, line 17). Add lines c and d rt V Current Officers, Directors, Trustees, and K or key employee at any time during line year even if (A) Name and address	ey Employees (L f they were not com (B) fille and average hours per week devoted to position	ist each person pensated) (See (C) Compensation (If not paid, enter	who was an o	e officer	7, 139, 19 r, director, trus (E) Expense scc and other allows
Pa	Add lines d1 and d2 Total expenses (Part I, line 17). Add lines c and d Int V Current Officers, Directors, Trustees, and K or key employee at any time during line year even if (A) Name and address E STATEMENT 13	ey Employees (L f they were not com (B) fille and average hours per week devoted to position	ist each person pensated) (See (C) Compensation (If not paid, enter	who was an o	e officer	7, 139, 19 r, director, trus (E) Expense scc and other allows
Pa	Add lines d1 and d2. Total expenses (Part I, line 17). Add lines c and d rt V Current Officers, Directors, Trustees, and K or key employee at any time during line year even if (A) Name and address	ey Employees (L f they were not com (B) fille and average hours per week devoted to position	ist each person pensated) (See (C) Compensation (If not paid, enter	who was an o	e officer	7, 139, 19 r, director, trus (E) Expense scc and other allows
Pa	Add lines d1 and d2 Total expenses (Part I, line 17). Add lines c and d IT V Current Officers, Directors, Trustees, and K or key employee at any time during line year even if (A) Name and address E STATEMENT 13	ey Employees (L f they were not com (B) fille and average hours per week devoted to position	ist each person pensated) (See (C) Compensation (If not paid, enter	who was an o	e officer	7, 139, 19 r, director, trus (E) Expense scc and other allows
Pa	Add lines d1 and d2 Total expenses (Part I, line 17). Add lines c and d Int V Current Officers, Directors, Trustees, and K or key employee at any time during line year even if (A) Name and address E STATEMENT 13	ey Employees (L f they were not com (B) fille and average hours per week devoted to position	ist each person pensated) (See (C) Compensation (If not paid, enter	who was an o	e officer	7, 139, 19 r, director, trus (E) Expense scc and other allows
Pa	Add lines d1 and d2 Total expenses (Part I, line 17). Add lines c and d IT V Current Officers, Directors, Trustees, and K or key employee at any time during line year even if (A) Name and address E STATEMENT 13	ey Employees (L f they were not com (B) fille and average hours per week devoted to position	ist each person pensated) (See (C) Compensation (If not paid, enter	who was an o	e officer	7, 139, 19 r, director, trus (E) Expense scc and other allows
Pa	Add lines d1 and d2 Total expenses (Part I, line 17). Add lines c and d IT V Current Officers, Directors, Trustees, and K or key employee at any time during line year even if (A) Name and address E STATEMENT 13	ey Employees (L f they were not com (B) fille and average hours per week devoted to position	ist each person pensated) (See (C) Compensation (If not paid, enter	who was an o	e officer	7, 139, 19 r, director, trus (E) Expense scc and other allows
Pa	Add lines d1 and d2 Total expenses (Part I, line 17). Add lines c and d IT V Current Officers, Directors, Trustees, and K or key employee at any time during line year even if (A) Name and address E STATEMENT 13	ey Employees (L f they were not com (B) fille and average hours per week devoted to position	ist each person pensated) (See (C) Compensation (If not paid, enter	who was an o	e officer	7, 139, 19 r, director, trust gi Expense account other allows
Pa	Add lines d1 and d2 Total expenses (Part I, line 17). Add lines c and d IT V Current Officers, Directors, Trustees, and K or key employee at any time during line year even if (A) Name and address E STATEMENT 13	ey Employees (L f they were not com (B) fille and average hours per week devoted to position	ist each person pensated) (See (C) Compensation (If not paid, enter	who was an o	e officer	7, 139, 19 r, director, trus (E) Expense scc and other allows
Pa	Add lines d1 and d2 Total expenses (Part I, line 17). Add lines c and d IT V Current Officers, Directors, Trustees, and K or key employee at any time during line year even if (A) Name and address E STATEMENT 13	ey Employees (L f they were not com (B) fille and average hours per week devoted to position	ist each person pensated) (See (C) Compensation (If not paid, enter	who was an o	e officer	7, 139, 19 r, director, trus (E) Expense scc and other allows
Pa	Add lines d1 and d2 Total expenses (Part I, line 17). Add lines c and d IT V Current Officers, Directors, Trustees, and K or key employee at any time during line year even if (A) Name and address E STATEMENT 13	ey Employees (L f they were not com (B) fille and average hours per week devoted to position	ist each person pensated) (See (C) Compensation (If not paid, enter	who was an o	e officer	7, 139, 19 r, director, trust gi Expense account other allows
Pa	Add lines d1 and d2 Total expenses (Part I, line 17). Add lines c and d IT V Current Officers, Directors, Trustees, and K or key employee at any time during line year even if (A) Name and address E STATEMENT 13	ey Employees (L f they were not com (B) fille and average hours per week devoted to position	ist each person pensated) (See (C) Compensation (If not paid, enter	who was an o	e officer	7, 139, 19 r, director, trust gi Expense account other allows
Pa	Add lines d1 and d2 Total expenses (Part I, line 17). Add lines c and d IT V Current Officers, Directors, Trustees, and K or key employee at any time during line year even if (A) Name and address E STATEMENT 13	ey Employees (L f they were not com (B) fille and average hours per week devoted to position	ist each person pensated) (See (C) Compensation (If not paid, enter	who was an o	e officer	7, 139, 19 r, director, trust gi Expense account other allows
Pa	Add lines d1 and d2 Total expenses (Part I, line 17). Add lines c and d IT V Current Officers, Directors, Trustees, and K or key employee at any time during line year even if (A) Name and address E STATEMENT 13	ey Employees (L f they were not com (B) fille and average hours per week devoted to position	ist each person pensated) (See (C) Compensation (If not paid, enter	who was an o	e officer	7, 139, 19 r, director, trust g) Expense scco and other allows
Pa	Add lines d1 and d2 Total expenses (Part I, line 17). Add lines c and d IT V Current Officers, Directors, Trustees, and K or key employee at any time during line year even if (A) Name and address E STATEMENT 13	ey Employees (L f they were not com (B) fille and average hours per week devoted to position	ist each person pensated) (See (C) Compensation (If not paid, enter	who was an o	e officer	7, 139, 19 r, director, trus (E) Expense scc and other allows
Pa	Add lines d1 and d2 Total expenses (Part I, line 17). Add lines c and d IT V Current Officers, Directors, Trustees, and K or key employee at any time during line year even if (A) Name and address E STATEMENT 13	ey Employees (L f they were not com (B) fille and average hours per week devoted to position	ist each person pensated) (See (C) Compensation (If not paid, enter	who was an o	e officer	7, 139, 19 r, director, trus (E) Expense scc and other allows
Pa	Add lines d1 and d2 Total expenses (Part I, line 17). Add lines c and d IT V Current Officers, Directors, Trustees, and K or key employee at any time during line year even if (A) Name and address E STATEMENT 13	ey Employees (L f they were not com (B) fille and average hours per week devoted to position	ist each person pensated) (See (C) Compensation (If not paid, enter	who was an o	e officer	7, 139, 19 r, director, trus (E) Expense scc and other allows
Pa	Add lines d1 and d2 Total expenses (Part I, line 17). Add lines c and d IT V Current Officers, Directors, Trustees, and K or key employee at any time during line year even if (A) Name and address E STATEMENT 13	ey Employees (L f they were not com (B) fille and average hours per week devoted to position	ist each person pensated) (See (C) Compensation (If not paid, enter	who was an o	e officer	7, 139, 19 r, director, trus (E) Expense soor and other allows
Pa	Add lines d1 and d2 Total expenses (Part I, line 17). Add lines c and d IT V Current Officers, Directors, Trustees, and K or key employee at any time during line year even if (A) Name and address E STATEMENT 13	ey Employees (L f they were not com (B) fille and average hours per week devoted to position	ist each person pensated) (See (C) Compensation (If not paid, enter	who was an o	e officer	7, 139, 19 r, director, trust gi Expense account other allows
Pa	Add lines d1 and d2 Total expenses (Part I, line 17). Add lines c and d IT V Current Officers, Directors, Trustees, and K or key employee at any time during line year even if (A) Name and address E STATEMENT 13	ey Employees (L f they were not com (B) fille and average hours per week devoted to position	ist each person pensated) (See (C) Compensation (If not paid, enter	who was an o	e officer	7,139,19 r, director, trus (E) Expense account other allows NO
Pa	Add lines d1 and d2 Total expenses (Part I, line 17). Add lines c and d IT V Current Officers, Directors, Trustees, and K or key employee at any time during line year even if (A) Name and address E STATEMENT 13	ey Employees (L f they were not com (B) fille and average hours per week devoted to position	ist each person pensated) (See (C) Compensation (If not paid, enter	who was an o	e officer	7, 139, 19 r, director, trus (E) Expense soor and other allows

orm 9	, (2005)		13-621874	0	Page			
	V-A Current Officers, Directors, Trustees, and K	ey Employees (con		Ŧ	Yes No			
5a	Enter the total number of officers, directors, and trusted meetings	es permitted to vote	on organization · · · · · · ▶	business at board				
b	b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)							
C	Do any officers, directors, trustees, or key employees temployees listed in Schedule A, Part I, or highest contractors listed in Schedule A, Part II-A or II-B, received tax exempt or taxable, that are related to this organizations include section 509(a)(3) su	t compensated prof s compensation from tion through commoi	essional and o any other orga n supervision or	ther independent nizations, whether common control?	75c X			
	If "Yes," attach a statement that identifies the individuals the other organization(s), and describes the compensation individual by each related organization							
	V-B Former Officers, Directors, Trustees, and I (If any former officer, director, trustee, or key em the year, list that person below and enter the amoinstructions)	Key Employees The ployee received comp	at Received C	ompensation or er benefits (describ	ed below) durin			
	(A) Name and address	(B) Loans and Advances	(C) Compensation	(D) Contributions to corplayor benefit plans & deformat compensation plans	(E) Expense account and other allowances			
		4						
		-0-	-0-	-0-	 -0-			
_								
		-						
_								
_		-						
_		-						
_								
_								
_								
ar	VI Other Information (See the instructions.)	1	L		Yes No			
,	Did the organization engage in any activity not previous description of each activity				76 X 77 X			
	If "Yes," attach a conformed copy of the changes							
	Did the organization have unrelated business gross inc this return?				78a X 78b N/A			
	Was there a liquidation, dissolution, termination, or sula statement	bstantial contraction	during the year	? If "Yes." attach	79 X			
3	Is the organization related (other than by association common membership, governing bodies, trustees, or	with a statewide or	nationwide orga	anization) through				
					80a X			
L	organization?	ר ידאנא:						
	If "Yes," enter the name of the organization ▶ _SEE_EX	and check wheth	er it is X exemp	ot or nonexempt				
a	organization? If "Yes," enter the name of the organization SEE_EX Enter direct and indirect political expenditures. (See line of the organization file Form 1120-POL for this year?	and check wheth 81 instructions.)	eritis X exemp	NONE	81b X			

	990 (2005)		,	age 7
	990 (2005) 13-6218740 t VI Other Information (continued)		Yes	
	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge			
	or all substantially less than fair rental value?	82=	х	
	If "Yes," you may indicate the value of these items here. Do not include this amount			
_	as revenue in Part I or as an expense in Part II (See instructions in Part III)	,		1
3 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	x	
	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	х	
	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	N/	A
	If "Yes," did the organization include with every solicitation an express statement that such contributions		· ·	
	or gifts were not tax deductible?	845	N/	Α
	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a	N/	h
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b	N/	A
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization	·		
	received a waiver for proxy tax owed for the prior year			1
	Dues, assessments, and similar amounts from members 85c N/A	ŀ		.]
	Section 162(e) lobbying and political expenditures			
	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices			
	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A	1 :		•
	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	859	N/	h
	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable			
	estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/	A
	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12 86a N/A	·	•	
	Gross receipts, included on line 12, for public use of club facilities 86b N/A	1		
	501(c)(12) orgs. Enter a Gross income from members or shareholders 87a N/A	1		1
	Gross income from other sources (Do not net amounts due or paid to other	1		
_	sources against amounts due or received from them) 87b N/A	i		
8	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or	1		
	partnership, or an entity disregarded as separate from the organization under Regulations sections	1] .	
	301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88		x
	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under	-7	1.	1
-	section 4911 ► NONE , section 4912 ► NONE , section 4955 ► NONE	1	l	1
	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction	1	1	
	during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach		1	1
	a statement explaining each transaction	896	1	x
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under			
Ū	sections 4912, 4955, and 4958		N/Z	
4	Enter Amount of tax on line 89c, above, reimbursed by the organization		N/2	1
	List the states with which a copy of this return is filed > SEE STATEMENT 18			
		90b	NON	IE.
	The books are in care of THE FUND FOR ANIMALS, INC. Telephone no 212-24	6-20	096	
	Located at 200 WEST 57TH STREET, NEW YORK, NY ZP+4 10019			
	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
	a financial account in a foreign country (such as a bank account, securilies account, or other financial account)?	91b		Х
	If "Yes," enter the name of the foreign country >			-
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts.		ł	1
_	At any time during the calendar year, did the organization maintain an office outside of the United States?	91€	<u> </u>	l x
·	If "Yes," enter the name of the foreign country >	100		
2	Section 4947(a)(1) nonexempt charitable trusts filling Form 990 in lieu of Form 1041 - Check here			▶∐
_	and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92		N/2	
_		Fort	n 990	(2005)

SA E1041 2,000

oma 990 (200:	5) Analysis of Income-Produc	las Astad	ins (See the i	13-	-6218740	Page 8
	Analysis of income-Produc		lated business inc		y section 512, 513, or 514	(E)
indicated.	CO2 SHICKNIS SHIESS CONSTANSE	(A) Business code	(B) Amount	(C)	(D) Amount	Related or exempt function
~	n service revenuer	0227423 0107	7.11.00.11			income 38.119.
	RATURE			42	6,624.	38,119,
	SORSRIPS				0,024.0	38,116.
d WORK	SHOPS	 				
Medicare	e/Medicaid payments					
	d contracts from government agencies					
94 Membe	rship dues and assessments	C				
95 Interest o	n savings and temporary cash investments . •					
96 Druden	ds and interest from securities			14	340,	
97 Net ren	tal income or (loss) from real estate					· · ·
a debt-fin	anced property	<u></u>				
b not deb	t-financed property					
-	income or (loss) from personal property		<u> </u>			
	nvestment income		 			
-	oss) from sales of assets other than siveritory		<u> </u>			
	ome or (loss) from special events .	ļ	 			
-	rolit or (loss) from sales of inventory					
	REVENUE		l	01	3,655.	
c ROYA			 	15	175, 983.	
***************************************	L REIMB.			01	54,496.	
	RENTALS			15	31,318.	
	(add columns (B), (D), and (E))	, 17		7:52	272,416.	76,235
	Explain how each activity for which of the organization's exempt purpout SALES OF BOOKS, VIDE TO INCREASE PUBLIC A MISSION.	ses (other It	LOGO ITEMS	inds for such purposes). S. AT OR BELOW	COST,	
93C	ONLINE & CLASSROOM T	RAINING	ON ANIMAL	WELFARE.		
Part IX	Information Regarding Taxa	ble Subsi	diaries and D	sregarded Entitie	s (See the instruction:	s. <i>)</i>
	(A) ime, address, and EIN of corporation, partnership, or disreparded entity		(8) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	permersing, or disagended entry		%			
	1040		%			
			%			
			%			
Part X	Information Regarding Tra	nsfers Ass	ociated with	Personal Benefit (Contracts (See the ins	structions.)
(a) Did the (b) Did the	organization, during the year, receive a e-organization, during the year	ny funds, direc r, pay prem	ty or indirectly, to partiums, directly o	y premiums on a personal i or indirectly, on a pe	benefit contract? Brsonal benefit contract	Yes X No
	es" lo (b), f ile Form 8870 and F	orm 4720 (see instructions,).		
	Under penalties of perjury, I deci- and belief, it is true, correct, and	are that I have	examined this return claration of prepare	n, including accompanying ((other than officer) is base	schedules and statements, and ed on all information of which pre	to the best of my knowledge parer has any knowledge
Please	my	1/	2		1 11/10/	de
Sign Here	Signature of officer Type or put insine and title	erge	Assist	ant Treasu	7 (0)	
Paid	Preparer's signature	\mathcal{J}	-)CPH	Date 11/9/0(Check if self- employed	perer's SSN or PTIN (See Gen Inst. V
Preparer's	Firm's name (or yoursGRA	NT THOR	NTON LLP	, ,	EIN 🕨	
Use Only	if self-employed).	O CORPO	RATE RIDGE	SUITE 400	Phone	
	address, and ZIP + 4 MCL	EAN. V	١	2210	2 100 -	703-847-7500
						Form 990 (2005)
60 1 000 90.37	57 649C 11/02/2006 0	7:37:18				11

SCHEDULE A (Form 990 or 990-EZ) Considered of the Transport Organization Exempt Under Section 501(c), 501(f), 501(f								
Department of the Treasury Information - (See Separate Instructions.) MUST be completed by the above organizations and attached to their Form 990 or 990-EZ								
Name of the organization						Employer	identification number	
THE FUND FOR AN	IMALS, INC.						218740	
Part I Compens (See page	ation of the Five Highes 1 of the instructions List e	st Paid Employed ach one. If there are	es O re no	ther Than Off ne, enter "None	icers, Direc e.")	tors, a	nd Trustees	
(a) Name and addres	s of each employee paid more in \$50,000	(b) Title and average in per week devoted to po	AUFS	(c) Compensation	(d) Contribute employee benef deferred comp	t plans &	(e) Expense account and other allowances	
SEE STATEMENT 1	9							
							······································	
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~								
Total number of other em	ployees paid over \$50,000 >	NONE		· (3 ': - h)	19 3 3 3 3	30		
Part II-A Compens	ation of the Five Highes 2 of the instructions. List e	st Paid Independ	lent indiv	Contractors (	or Professi . If there are	onal S	ervices nter "None.")	
	s of each independent contractor paid			(b) Type of se			c) Compensation	
SEE STATEMENT 2	0			<del></del>		<b> </b>		
	receiving over \$50,000 for		U.S.	3. S.	•	7	<del></del>	
		NONE	<u>.</u>	<u> </u>	<u> </u>	<del>7.3</del>	· · · · · ·	
(List each	sation of the Five Highe contractor who performed ere are none, enter "None.	I services other tha	n pro	ofessional servi	ces, whether	ervices individu	s lals or	
(a) Name and address	of each independent contractor paid	more than \$50,000		(b) Type of se	rvice	(4	c) Compensation	
NONE								

NONE

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

Schedule A (Form 990 or 990-EZ) 2005

Total number of other contractors receiving over

Scher	lule A (Form 990 or 990-EZ) 2005	Page 2
Par		Yes No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any	
-	attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid	4
	or incurred in connection with the lobbying activities > \$ 4,259, (Must equal amounts on line 38,	
	Part VI-A, or line I of Part VI-B)	1 x
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other	
	organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of	
	the lobbying activities.	130
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any	
	substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or	
	with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority	
	owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the	
	transactions )	
8	Sale, exchange, or leasing of property?	. 28 X
b	Lending of money or other extension of credit?	. 26 X
c	Furnishing of goods, services, or facilities?	
đ	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	. 2d X
	Transfer of any part of its income or assets?	20 X
3 a	Do you make grants for scholarships, fellowships, student loans, etc? (If "Yes," attach an explanation of how	
	you determine that recipients qualify to receive payments.)	
b	Do you have a section 403(b) annuity plan for your employees?	
c	During the year, did the organization receive a contribution of qualified real property interest under section 170(h)?	· ·   3c   X
4a	Did you maintain any separate account for participating donors where donors have the right to provide advice on	
h	the use or distribution of funds?	40 X
Par	Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)	
The c	rganization is not a private foundation because it is: (Please check only ONE applicable box.)	
5	A church, convention of churches, or association of churches Section 170(b)(1)(A)(i).	
6	A school. Section 170(b)(1)(A)(ii) (Also complete Part V)	
7	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii)	
8	A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)	
9	A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii) Enter the hospital's in	ıme, city,
1	and state	
10	An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 176	)(b)(1)(A)(M)
1	(Also complete the Support Schedule in Part IV-A.)	t- 0t
11=		ic. Section
احمم	170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)	
11b	A community trust. Section 170(b)(1)(A)(w). (Also complete the Support Schedule in Part IV-A)  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and	nross
12 (	receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 ft.	
	its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses	
	by the organization after June 30, 1975. See section 509(a)(2), (Also complete the Support Schedule in Part IV-A.)	
13	An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organization	ations
	described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) C	
		pe 3
	Provide the following information about the supported organizations (See page 6 of the instructions)	
	(a) Name(e) of connected prescion(e)	ine number
	(m) commenters or ambienters reflected and ambienters (s)	om above
14	An organization organized and operated to test for public safety. Section 509(a)(4) (See page 6 of the instructions.)	
	Schedule A (Fo	rm 990 or 990-EZ) 2005

Sch	edule A (Form 990 or 990-EZ) 2005			13-6218740		Page 3		
	Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) Use cash method of accounting.							
No	le: You may use the worksheet in the instructio	ns for converting fr	om the accrual to t	he cash method of	accounting.			
-	endar year (or fiscal year beginning in)	(a) 2004	(ы) 2003	(c) 2002	(d) 2001	(e) Total		
15	Gifts, grants, and contributions received. (Do							
-	not include unusual grants. See line 28.)	6.540.396.	6.514.491.	7.239.412.	5,500,946.	25.795.245.		
	Membership fees received							
17	Gross receipts from admissions, merchandise							
	sold or services performed, or turnishing of							
	facilities in any activity that is related to the							
	organization's charitable, etc., purpose	126,217.	350.557.	370,129.	418.314.	1,265,217.		
18	Gross income from interest, dividends,							
	amounts received from payments on securities							
	loans (section 512(a)(5)), rents, royalties, and							
	unrelated business taxable income (less							
	section 5 t 1 taxes) from businesses acquired							
-	by the organization after June 30, 1975	655,238.	681.533.	722,744.	740,803.	2,800,318.		
19	Net income from unrelated business		Η.					
	activities not included in line 18							
20	Tax revenues levied for the organization's							
	benefit and either paid to it or expended on							
	its behalf					<del></del>		
21	The value of services or facilities furnished to			1				
	the organization by a governmental unit							
	without charge. Do not include the value of							
	services or facilities generally furnished to the							
	public without charge							
ZZ	Other income Attach a schedule. Do not							
	include gain or (loss) from sale of capital assets							
23	Total of lines 15 through 22	7.321.851.	7.546.581.			29,860,780.		
	The state of the s			7,962,156.		28,595,563.		
	Enter 1% of line 23			83.323.				
	Organizations described on lines 10 or 11: a					571,911.		
	Prepare a list for your records to show the				44.4			
	governmental unit or publicly supported organi	•	-	-		1 412 000		
	amount shown in line 26a Do not file this li					1,412,080.		
	Total support for section 509(a)(1) test. Enter line 24				▶ 26c	28,595,563.		
•	Add Amounts from column (e) for lines 182	26	1 412	000		4 212 200		
						4,212,398.		
	Public support (kine 26c minus line 26d total)					24, 383, 165.		
27	Public support percentage (fine 26e (numerator) d Organizations described on line 12: a For	amounts included	in knes 15. 1	6. and 17 that	were received from	85.2691 % om a "disqualified		
	person," prepare a list for your records to sho	w the name of, a	ind total amounts					
	Do not file this list with your return. Enter the sum	of such amounts for	each year					
	NOT APPLICABLE		(2002)		(2004)			
	(2004) (2003)							
D	For any amount included in line 17 that was re show the name of, and amount received for each							
	(Include in the list organizations described in line	s 5 through 11, as	well as individuals	.) Do not file this	list with your retur	n. After computing		
	the difference between the amount received an	d the larger amou	ni described in (1)	or (2), enter the	sum of these diffe	rences (the excess		
	amounts) for each year (2004) (2003)		(2002)		/2004)			
	(2004) (2003)		(2002)		(2001)			
_	Add Amounts from adums fol for home of	46	•					
C	Add Amounts from column (e) for lines 15 20		' <del></del>	<del></del>	► 127a l			
	20	E		• • • • • • • •	274			
d	Add: Line 27a total	and line 270 total			270			
-	Total support for section 509(a)(2) test Enter amount	et from Kon 23 colum	n (a)	D 271	***			
•	Public support for section 509(3)(2) test Enter amount Public support percentage (line 27e (numerator) d	If II CALL MIC CO! ACCOUNT						
9	Investment income percentage (line 18, column (e	vector by mid 2/1 (00)	d by Doe 276 (denomina	instaril	274	<del>%</del>		
- R	Unusual Grants: For an organization described	f in line 10. 11.	or 12 that rece	eved any unusual	grants during 200	)1 through 2004.		
	prepare a list for your records to show, for	each year, the na	me of the contrib	utor, the date and	amount of the	grant, and a brief		
	description of the nature of the grant. Do not file this	list with your return	. Do not include the	ese grants in line 15	Schadula A (E.	n 990 or 990-EZ) 2005		
SA	21 1 000				acingania w fadii	" 330 OL 320-ET) 1002		
ME T Z	90375J 649C 11/02/2006 07:3	7.19				14		
	303730 013C 11/04/2006 07:3	,.10				**		

Sche	dule A (Form 990 or 990-EZ) 2005 13-6218740			Page 4
Pai	TV Private School Questionnaire (See page 7 of the instructions.) NOT APPLIC	ABL	E	
	(To be completed ONLY by schools that checked the box on line 6 in Part IV)		Yes	M =
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	168	NO
30	other governing instrument, or in a resolution of its governing body?  Does the organization include a statement of its racially nondiscriminatory policy toward students in all its		•	. ;
••	brochures, catalogues, and other written communications with the public dealing with student admissions,	<b>)</b>	10034	),
	programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during	1 5	1	,:>
	the period of solicitation for students, or during the registration penod if it has no solicitation program, in a way		-	٠., ١
	that makes the policy known to all parts of the general community it serves?	31	-	ļ
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement)	Ι.		ŀ
			1: ::	; ;
			) : :	,
		7		· .
32	Does the organization maintain the following:		<b>:</b> ; . :	. S
	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		`
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory			
	hasin?	32b		
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d	, -, -	ļ
	Maria and the state of the stat		::	
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
	8	1		
33	Does the organization discriminate by race in any way with respect to.		, , ,	
•		١.	].·	
а	Students' nghts or privileges?	33a		
		1		
b	Admissions policies?	33b		
_	For all control of familiar as administrative at the			
С	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
_	Scholarships of other matical assistance?	330		
е	Educational policies?	33e		
	<u>~</u>			
f	Use of facilities?	331		
		l i		
9	Athletic programs?	33g		
n	Other extracumcular activities?	33h	१ ह	7,
	If you answered "Yes" to any of the above, please explain, (If you need more space, attach a separate statement.)	. 3	<b>.</b>	
	in you allowed the to any of the above, please explaint (in you need more space, attach a separate statement y	. 1		12
		. :		
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
þ	Has the organization's right to such aid ever been revoked or suspended?	34b		<del></del>
	If you answered "Yes" to either 34a or b, please explain using an attached statement		  :	
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05	;,	* :	
	of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		,,.

Sch	nedule A (Form 990 or 990	-EZ) 2005			13-6	218740			Page 5
	art VI-A Lobbying I	expenditures by Ele	ecting Public Charitie	s (See page 9	of th	e instructio	ns.)		
	(To be con	pleted ONLY by ar	eligible organization	n that filed Form	n 576	B) NOT A	PPL	CAB	LE
Ch		ization belongs to an a		▶ b if you	check	ed "a" and "i	imited	cont	rol" provisions apply
		Limits on Lobbyin	g Expenditures			(a) Affiliated tota	group	,	(b) To be completed for ALL electing
			ns amounts paid or incu		·				organizations
36	Total lobbying expend	Irtures to influence pu	iblic opinion (grassroots	s lobbying)	36	Exhib	it 4		
37	Total lobbying expend	litures to influence a	legislative body (direct	lobbying)	37				
38	Total lobbying expend	litures (add lines 36 a	and 37)		38				
39	Other exempt purpos	e expenditures			39				
40	Total exempt purpose	expenditures (add li	nes 38 and 39)		40				~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
41	Lobbying nontaxable	amount. Enter the an	nount from the following	table -	F.":	]	ξ.	\$4I	
	If the amount on line		lobbying nontaxable a		10.3		· · · · ·		1. March 1997
			of the amount on line 40		4.			-3. 4	App. Barrier
			,000 plus 15% of the excess		**	<b>1</b> 5.3 · · ·	. ••	* 1	
			,000 plus 10% of the excess		41				
	Over \$1,500,000 but not 0	ver \$17,000,000 \$225	,000 plus 5% of the excess o	ver \$1,500,000			:. *		
	Over \$17,000,000				120		` . <del></del> ;		· · · · · · · · · · · · · · · · · · ·
42	Grassroots nontaxab	le amount (enter 25%	of line 41)		42				
43			ne 42 is more than line	36	43				
44	Subtract line 41 from	line 38. Enter -0- if Ir	ne 41 is more than line	38	44				
77					2.5	1. A		7	
	Caution: If there is a	n amount on either lii	ne 43 or line 44, you mu	st file Form 4720					** ** ** ** ** ** ** ** ** ** ** ** **
_	Guationa // (illustrational)	4-Ye	ar Averaging Period	Under Section	n 501	(h)			
	(Some organiza	itions that made a se	ction 501(h) election do	not have to cor	nplete	all of the fi	ve col	umns	below
	(como organiza	See the instruc	tions for lines 45 throu	gh 50 on page 1	of th	e instruction	ns.)		
_		1							
_			Lobbying Expend	T	I-Yea	1	g Pel d)	100	(e)
	Calendar year (or fisca	L	(b)	(c)		1	02		Total
	year beginning in) 🕨	2005	2004	2003		1	02		10101
	Lobbying nontaxable	İ							
45	amount			<del>  </del>	٠٠.	1 3 3 4 4 4	<del></del>	4.5	
	Lobbying ceiling amoun	ıt i					٠-		
46	(150% of line 45(e)) .	·		<del>- `````</del>	***	41.60 1 3	<u>.                                    </u>		
						1		- 1	
47	Total lobbying expenditures	L		<u> </u>		<del> </del>			
	Grassroots nontaxable		Ì			1			
48	amount · · · · ·				C 31.75*	10000000			
	Grassroots ceiling amount			. N. 1949. April	à r	10 Ye 5 3	70	心心门	
49	(150% of time 48(e))					44.43.3	, , , , , , , , , , , , , , , , , , ,	-	
	Grassroots lobbying	1							
50	expenditures								
P	art VI-B Lobbying	<b>Activity by Nonele</b>	cting Public Charitie	5					
	(For repo	rting only by organi	zations that did not co	omplete Part V	-A) (	See page 1	1 of (	he in	structions)
Di	uring the year, did the org	enization attempt to infi	uence national, state or lo	cal legislation, inclu	dung ar	ly .	Yes	No	Amount
all	tempt to influence public o	pinion on a legislative r	nalter or referendum, throu	igh the use of					
,	a Volunteers							Х	
į	b Paid staff or manage	ment (Include comp	ensation in expenses re	ported on lines c	throug	ph h)	L	Х	1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
								Х	
	d Mailings to members	, legislators, or the p	ublic					Х	
			atements				Х		4,259.
			purposes					Х	
			, government officials,					Х	
			ntions, speeches, lecture					X	
!								<u> </u>	4,259
i	I Total loodying expen	Charles (MICHIES C II	hrough h.).		of the	Inhhving act	ivihoe	- <u></u>	TMT 22
		anove, also attach a	statement giving a det	aneu uescripion	Ji tire	www.miy.du	Schee	lute A	(Form 990 or 990-EZ) 2005
JS	A 1240 1 800								

chedule A (Fo	rm 990 or 990-EZ) 2005		13-6218740		Page 6
Part VII	Information Regarding Exempt Organizations (	See page 12 of the instructions.)	d Relationships With Noncharitable		
1 Did the re	eporting organization directl	y or indirectly engage in any of the folk	owing with any other organization describ	ed in se	ction
		n 501(c)(s) organizations) or in secution ation to a noncharitable exempt organiz	n 527, relating to political organizations?	Ye	s No
			100	a(i)	х
				(ii)	x_
b Other tran		-thhandald average agreement	1.		
		nth a nonchardable exempt organization		(Ü) (Ü)	X
(iii) Ren	tal of facilities, equipment, (	or other assets	<u> </u>	(101)	X
(iv) Rein	mbursement arrangements		<u>b</u>	(iv)	Х
(v) Load	ns or loan guarantees			(A)	X
		mbership or fundraising solicitations in ing lists, other assets, or paid employee	· · · · · · · · · · · · · · · · · · ·	c (vi)	- X
-			(b) should always show the fair market value of		
		the reporting organization. If the organization			
transaction	n or sharing arrangement, show	w in column (d) the value of the goods, other			
(#) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharin	o arrancei	nents
N/A					
	<b></b>				
describe	d in section 501(c) of the C complete the following sch	Y		Yes [	X No
Na	(a) me of organization	(b) Type of organization	Description of relationship		
N/A					
			**************************************		
A 1250 1 000			Schedule A (Form 990	or 990-f	Z) 2005
90375	T 649C 11/02/2006	07.37.18		17	

THE FUND FOR ANIMALS, INC.

13-6218740

FORM 990, PART I - PAYMENTS TO AFFILIATES

DESCRIPTION

**AMOUNT** 

THE HUMANE SOCIETY OF THE UNITED STATES

2,838,794.

TOTAL

2,838,794.

Case 1:07-cv-01532-EGS Document 66-2 Filed 03/04/11 Page 17 of 43 Case 1:03-cv-02006-EGS Document 192-24 Filed 09/21/07 Page 21 of 47

THE FUND FOR ANIMALS, INC.

13-6218740

FORM 990, PART I - OTHER DECREASES IN FUND BALANCES

DESCRIPTION

AMOUNT

TRANSFER BEGINNING NET ASSETS TO HSUS EIN# 53-0225390

TOTAL

18,418,663. 18,418,663.

STATEMENT 2

FORM 990, PART II - GRANTS AND ALLOCATIONS PAID DURING THE	S WHE YEAR		8
ECIPIENT NAME AND ADDRESS RANTS PAID	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PUREOSE OF GRAWT OR CONTRIBUTION	
TARE COD STRANDING NETWORK, INC. 120 HAIN STREET 3022ARDS WAY, MA 02532	NOME	Charitable	10,000.
HELDEN MEMORIAL LIBRARY 2/01 METINGHOUSE WAY TEST BARNSTABLE, HA 02668	NONE	CHARITABLE	25.
ENDERSON COUNTY HURANE SOCIETY 1059 RICHROND BLVD NALLAND, CR 94611	NONE	Chaitable	400.
'AWS/CA 'O BOX 849 'BLT, CA 95632	NONE	CHARITABLE	4,500.
HE FUND FOR ANIMALS RABBIT SANCTUARY 133 FAIRVIEW ROAD 11MPSORVILLE, SC 29660	NONE	Chaitable	22, 936.
TAN ZANDT COUNTY HUMANE SOCIETY O BOX 4 THAND SALINE, TX 75140	NONE	CHANTIABLE	400,
903755 649C 11/02/2006 07:37:18		22 STATEMENT 3	

13-6218740

THE FOND FOR ANIMALS, INC.

13-6218740

THE FUND FOR ANIMALS, INC.

Depticipation of Property   Deptication	Depreciption of Property DEPRECIATION Asset description VARIOUS ASSETS	1													
December	DEPRECIATION Asset description VARIOUS ASSETS														
District	Asset description VARIOUS ASSETS														
1360.166   100.000   1360.166   1353.455   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145   1.653.145	VARIOUS ASSETS		Unadjusted Cosi or basis			Basis Reduction		Beginning Accumulated depreciation	Ending Accumulated depreciation	Me thod		ACRS	MA GRS Gass	irrent-year 179 expense	Current-year depreciation
### Accommission   1,550,846   1,550,846   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,155   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,154   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155   1,555,155			3,360,846.	-	-			1,539,459,	1,675,194.				1		135,735
##5.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.  13.560,816.										$\dagger$	-	1	$\dagger$		
1 3 360, 846								G		$\dagger$	+	-	$\dagger$		
15.350.346.   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000   20.000													H		
1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 3160, 816.  1) 316										H	H				
1 3.369.846. 3.369.846. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334. 1.532.334										$\dagger$	+	1	+	+	
#85  *** The control of the control										$\dagger$	+	-			
##5.  Ty.  Ty.  Ty.  Ty.  Ty.  Ty.  Ty.  T											H		H		
1   1   1   1   1   1   1   1   1   1										H	H		+		
### 3.360,846. 1.539,459. 1.675,134.   Correspond to the control of the control o										$\dagger$	+	-	$\dagger$	$\dagger$	
## 1350.866 3350.866 1.339.459 1.035.194   Current placed in										+	+		+		
## 3.360.846. 1.539.459, 1.675.194.  10.N Date Cost Accumulated Ac											+	1	+		
885  10 Date   Cost   Scripton   Service   Date   Cost   C											+		H		
17.7.  13.360,816  13.360,816  13.360,816  15.33,459, 1,675,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1,530,134, 1											-		+		
17y  1946  1950,816  1950,816  1950,816  1950,816  1951,334,139, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1,613,134, 1	Less: Relified Assets			- t	8					1.	╢.	-		, ,;,	
10N   Date   Cost   Accomulated Accomulate	Subtotals		3,360,846.	. 1			3,360,846,	1, 539, 459,	1, 675, 194.	• .					
10N Date Cost Accumulated Accu	Listed Property									Ì	}		}		
10N Date Cost of piaced in or service basis acrotted basis contraction amortization										$\dagger$	+	-	+		
Scription service besis anortization amortization content amortization										$\prod$	H		H		
10N  Date Cost scription service basis  scription  Scription  Scription  Scription  Cost amortization decode Life amortization Code Life											$\dashv$		1	-	•
tON  Date Cost Accumulated Acc	Less Retired Assets										٠.		<u>.</u>		
Scription Service basis amortization amortization Code Life amortization amortization Code Life	**************************************		2 360 646	•			3 360 846		1 675 104				1		135.73
scription service basis amortization amortization Code Life	AMORTIZATION		19191000101				31 3007 8481	_							
	Asset description	. Date placed in service	Cost or basis		·			Accumulated amortization	Ending Accumulated amortization	Code	-ge	:			Current-year amortization
				•	٠.						T				
						:	••						-	L_J.	
						es.					T				
Assett Rettrad	- CATAL									1	7			-1	
	Assets Retired														

13-6218740

FORM 990, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE

THE ALLEVIATION OF FEAR, THE 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.

# Case 1:07-cv-01532-EGS Document 66-2 Filed 03/04/11 Page 22 of 43 Case 1:03-cv-02006-EGS Document 192-24 Filed 09/21/07 Page 26 of 47

THE FUND FOR ANIMALS, INC.

13-6218740

FORM 990, PART IV - INVESTMENTS - OTHER

DESCRIPTION

ENDING BOOK VALUE

OTHER INVESTMENTS

2,630.

TOTALS

2,630.

1				BALANCE	****	1, 675, 194.	***************************************	1,0/5,131.	
		ACCUMULATED DEPRECIATION DETAIL		DISPOSALS		Ä	1 -	- i	STATEMENT 8
		COMOLATED DEPR		ADDITIONS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	135, 735.			v,
		<b>3</b> C		BEGINNING		1,539,439.		1,539,439.	27
13-6218740	INVESTMENT								
	NOT HELD FOR		!	BALANCE		3,360,846,		3, 350, 845.	
	NGS, EQUIPMENT	FIXED ASSET DETAIL		DISPOSALS					
	LAND, BUILDINGS, EQUIPMENT NOT HELD FOR INVESTMENT	FIXED AS		ADDITIONS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
	~ •			BALANCE		3,360,846.		3, 300, 840.	
				CLASS					006 07:37:18
THE FUND FOR ANIMALS, INC.				ASSET DESCRIPTION		VARIOUS ASSETS		STATE OF THE STATE	903753 649C 11/02/2006 07:37:18

Case 1:07-cv-01532-EGS Document 66-2 Filed 03/04/11 Page 24 of 43 Case 1:03-cv-02006-EGS Document 192-24 Filed 09/21/07 Page 28 of 47

THE FUND FOR ANIMALS, INC.

13-6218740

FORM 990, PART IV - OTHER ASSETS

DESCRIPTION

ENDING BOOK VALUE

SECURITY DEPOSITS

470.

TOTALS

470.

STATEMENT 9

13-6218740

FORM 990, PART IV - OTHER LIABILITIES

DESCRIPTION

ENDING BOOK VALUE

DUE TO AFFILIATE

1,978,980.

TOTALS

1,978,980.

13-6218740

FORM 990, PART IV-A - OTHER REVENUE ON RETURN BUT NOT ON BOOKS

DESCRIPTION

AMOUNT

PAYMENTS TO AFFILIATES

2,838,794.

TOTAL

2,838,794.

STATEMENT 11

13-6218740

FORM 990, PART IV-B - OTHER EXPENSES ON RETURN BUT NOT ON BOOKS

DESCRIPTION

AMOUNT

PAYMENTS TO AFFILIATES

2,838,794.

2,838,794.

______

TOTAL

THE FUND FOR ANIMALS, INC.

FORM 990, PART V-A ~ CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

	NONE	NONE	NONE	NONE	NON	NONE	NONE	STATEMENT 13
BENEFIT PLANS	NONE	NONE	NONE	NONE	NONE	NONE	NONE	S
COMPENSATION	NONE	NONE	NONE	NONE	NONE	NONE	NONE	32
TITLE AND TIME DEVOTED TO POSITION	CHAIR/DIRECTOR 35	PRESIDENT 40	VICE PRESIDENT 1	Treasurer 1	ASSISTANT TREASURER 1	DIRECTOR 1	DIRECTOR 1	06 07:37:18
NAME AND ADDRESS	MARIAN G. PROBST 200 WEST 57TH STREET 705 NEW YORK, NY 10019	MICHAEL MARKARIAN 200 WEST 57TH STREET 705 NEW YORK, NY 10019	WAYNE PACELLE 200 WEST 57TH STREET 705 NEW YORK, NY 10019	G. THOMAS WAITE, III 200 WEST 57TH STREET 705 NEW YORK, NY 10019	MARY KATHERINE BERGE 200 WEST 57TH STREET 705 NEW YORK, NY 10019	PATRICK MCDONNELL 200 WEST 57TH STREET 705 NEW YORK, NY 10019	WILLIAM F. MANCUSO	90375J 649C 11/02/2006 07:3

73-0218/40	
	PART V-4 - CURRENT OFFICERS. DIRECTORS - 4-V. TRAC
	2
	DIRECTOR
	CHRICERS
TNC.	CURRENT
ANTERNO, INC.	- 4-7
FOR AN	PART 1
FUND :	990.
3 341	FORM

AND OTHER ALLOWANCES .	NONE	NONE	NO I	14
M				STATEMENT 1
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	NONE	NONE		STA
COMPENSATION	NONE	NONE	NON	88
TITLE AND TIME DEVOTED TO POSITION	DIRECTOR 1	DIRECTOR 1	GRAND TOTALS	
DE .	Ώ e-l	ÖH		90375J 649C 11/02/2006 07:37:18
NAME AND ADDRESS	EDGAR SMITH 200 WEST 57TH STREET 705 NEW YORK, NY 10019	DAVID WEIBERS 200 WEST 57TH STREET 705 NEW YORK, NY 10019		90375J 649C 11/

	•							
		EXPENSE ACCT AND OTHER ALLOWANCES	NONE	NONE	NONE	NONE	NONE	15
			• 6)	. 76	•		NONE	STATEMENT
		CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	15,129	20,097.	28,076.	23,381	NO	
08/9T70_CT		COMPENSATION	146,538.	203,231.	165,231.	112,538.	100,683.	ъ.
-i	LATED ORGANIZATION	COMP						
	RELATED ORGANIZATION							
	ROVIDED BY							7:18
· •	COMPENSATION PR							07:3
בחנ שמדמדמים זמר	V-A	S I	10 IARKARIAN 57TH STREET NY 10019	STREET .0019	E, III STREET 0019	E BERGE STREET 10019	, Lip	649C 11/02/2006
ないい	FORM 990, PART	NAME AND ADDRESS	AEL NWEST	HSUS 53-0225390 WAYNE PACELLE 200 WEST 57TH STREE 705 NEW YORK, NY 10019	HSUS 53-0225390 G. THOMAS WAITE, III 200 WEST 57TH STREET 705 NEW YORK, NY 10019	1225390 KATHERIN WEST 57TH	HSUS 53-0225390 GRANT THORNTON,	903755 6
<b>3</b> 47	FORM	NAME	HSUS 53-0 MICH 200 705 NEW	#50; 83-( 8200 705	53.1 6.1 7000 7000 888	HSUS S3-05 MARY 200 705 NEW	HSUS 53-02 GRAN	0

THE FUND FOR ANIMALS, INC.	0#/0T70_CT		
FORM 990, PART V-A COMPENSATION PROVIDED BY	PROVIDED BY RELATED ORGANIZATION		
NAME AND ADDRESS 	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
HSUS 53-0225390 MEYER & GLITZENSTEIN 1601 CONNECTICUT AVENUE, NW WASHINGTON, DC 20009	61,051.	NONE	NONE
HSUS 53-0225390 NATIONAL OUTDOOR SPORTS ADVERT 5151 WISCONSIN AVENUE, NW WASHINGTON, DC 20016	1,757,199.	NONE	NONE
GR	GRAND TOTALS 2,546,471.	86,683.	NONE
90375J 649C 11/02/2006 07:37:18	35		STATEMENT 16

13-6218740

FORM 990, PART VI - LIQUIDATION, DISSOLUTION, TERMINATION

SEE EXHIBIT 2

13-6218740

FORM 990, PART VI, LINE 90A ~ STATES

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

INC.
ANIMALS,
FOR
OZ.

- COMPENSATION OF THE FIVE HIGHEST PAID EMPLOYEES

SCHEDULE A, PART I

13-6218740

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCOUNT	((*))
	DIR, ANIMAL CARE	59,071.	9,319.	NON	
ERIC DAVIS 200 WEST 57TH STREET 705 NEW YORK, NY 10019	DIR, RURAL VET SERV. 40	64,836.	12,666.	NONE	
SUSAN MONGER 200 WEST 57TH STREET 705 NEW YORK, NY 10019	VETERINARIAN 40	58,578.	8,788.	NONE	
	TOTAL COMPENSATION	182,485.	30,773.	NONE	

13

STATEMENT

13-6218740

### SCH. A, PART II-A COMPENSATION OF THE 5 HIGHEST PAID FOR PROF. SERV.

NAME AND ADDRESS	TYPE OF SERVICE	COMPENSATION
GRANT THORNTON, LLP 2010 CORPORATE RIDGE, SUITE 400 MCLEAN, VA 22102	AUDIT	54,320.
MEYER & GLITZENSTEIN 1601 CONNECTICUT AVENUE, NW WASHINGTON, DC 20009	LEGAL	120,139.
NATIONAL OUTDOOR SPORTS ADVERTISING 5151 WISCONSIN AVENUE, NW WASHINGTON, DC 20016	PROF. FUNDRAISING	56,066.
LEO, EGAR, DVM. 2607 MARILYN ROAD PHOENIX, AZ 85032	VETERINARIAN	57,250.
LYDIA C LOVE 6324 PLEASANT TOP DRIVE ARLINGTON, TN 38002	VETERINARIAN	51,500.
TOTAL COMPENSA	TION	339,275.
		==========

STATEMENT 20

907757 649C

20

Case 1:07-cv-01532-EGS Document 66-2 Filed 03/04/11 Page 36 of 43 Case 1:03-cv-02006-EGS Document 192-24 Filed 09/21/07 Page 40 of 47

THE FUND FOR ANIMALS, INC.

13-6218740

SCHEDULE A, PART III - EXPLANATION FOR LINE 3A

AN ANALYSIS AND CALCULATION IS MADE FOR ALL REQUESTS FOR FUNDS TO OTHER ORGANIZATIONS. IF THE SOLICITING ORGANIZATION IS IN THE POSITION OF AIDING IN THE FUND'S GOALS, THEN THE MONEY WILL BE GRANTED.

STATEMENT 21

Case 1:07-cv-01532-EGS Document 66-2 Filed 03/04/11 Page 37 of 43 Case 1:03-cv-02006-EGS Document 192-24 Filed 09/21/07 Page 41 of 47

THE FUND FOR ANIMALS, INC.

13-6218740

SCHEDULE A, PART VI-B - LOBBYING ACTIVITY EXPLANATION

LOBBYING EXPENSES INCURRED THROUGH THE FUND FOR ANIMALS (MAGAZINE).

STATEMENT 22

47

### The Fund for Animals

Following the 2005 corporate combination between The HSUS and The Fund for Animals (FFA), FFA became the entity responsible for The HSUS's animal care facilities. These facilities include the Cleveland Amory Black Beauty Ranch (TX), the Fund for Animals Wildlife Rehabilitation Center (CA), the Cape Wildlife RehabilitationCenter (MA), and the Rural Area Veterinary Services (RAVS) program, which sponsors mobile veterinary clinic visits to Native American reservations and impoverished communities across the United States and throughout the western hemisphere.

Humane Education: Educate the public on issues and events affecting animal rights and welfare.

Program Expense: \$1,149,149 Gifts and Grants: \$ 22,936

Cleveland Amory Black Beauty Ranch: The Fund for Animals operates the world famous Black Beauty Ranch in Murchison, Texas. The 1,620-acre refuge is home to many hundreds of animals -- from chimpanzees to burros to elephants. Here, animals do not get harassed or harmed, but a helping hand and a loving home.

Program Expense: \$1,152,747 Gifts and Grants: \$ 400

California Wildlife Rehabilitation Center: In southern California, injured and orphaned wild animals are restored to health and back to their native wild homes, thanks to The Fund's 24-hour medical facility. The center includes premium rehabilitation enclosures for animals such as mountain lions, coyotes, and raccoons, and the largest free-flight raptor aviary in the world.

Program Expense: \$434,890 Gifts and Grants: \$ 4,900

Cape Wildlife Rehabilitation Center. The mission of the Cape Wildlife Center, a program of The Humane Society of the United States, is to promote and protect the health and well-being of wild animals and their habitats as integral parts of the Cape Cod community The center operates a year-round wildlife rehabilitation facility and veterinary clinic that annually provides professional care to nearly 1,400 injured, iff, and orphaned wild animals. We strive to achieve the highest standards of care and humane treatment of wild animals within the Cape Cod ecosystem

Program Expense: \$353,021

Gifts and Grants: \$10,025

Rural Area Veterinary Services (RAVS) RAVS brings veterinary services to poor communities around the globe, whether in Bolivia or Bell County, Kentucky, Volunteer veterinary students work with several professional vets to provide not only essential services such as sterilizations and vaccinations, but also educational services such as talks on disease prevention and pet care.

Program Expense: \$779,940 Gifts and Grants: \$825

The Fund for Animals Form 990, Part VI Other Information 12/31/05

Question 79

Effective January 1, 2005, an asset acquisition agreement was executed between The Fund for Animals (Fund) and The Humane Society of the United States (Society), EIN: 53-0225390, whereby the Fund transferred assets totaling \$18,418,663 to the Society.

In addition, the Fund's Board members were assumed into the Society's Board of Director's, and the Society took control of the Fund's Board and voting membership. The Fund continues to operate as an animal welfare organization, coordinating its animal care facilities with the Society's animal care programs.

Exhibit 2

THE FUND FOR ANIMALS EIN: 13-6218740 12/31/2005

NAME OF ORGANIZATION	EXEMPT	NONEXEMPT
THE HUMANE SOCIETY OF THE UNITED STATES	x	
THE HUMANE SOCIETY OF THE US WILDLIFE LAND TRUST	x	
THE NATL ASSOC. FOR HUMANE AND ENVIRONMENTAL EDUCATION	x	
CENTER FOR RESPECT OF LIFE AND THE ENVIRONMENT	x	
EARTHVOICE INTERNATIONAL	x	
EARTHKIND USA	X	
THE HUMANE SOCIETY LEGISLATIVE FUND	x	
HUMANE SOCIETY INTERNATIONAL	x	
HUMANE SOCIETY OF HONG KONG LIMITED	(INTL	NFP CORP)
THE HUMANE SOCIETY INTERNATIONAL UK	INTL	NFP CORP)
THE HUMANE SOCIETY INTERNATIONAL GERMANY	(INT'L	NFP CORP)
THE HUMANE SOCIETY INTERNATIONAL FRANCE	INTL	NFP CORP)
THE HUMANE SOCIETY INTERNATIONAL, INC. (AUSTRALIA)	(INT'L	NFP CORP)
GLOBAL ALLIANCE FOR HUMANE SUSTAINABLE DEVELOPMENT	(INT'L	NFP CORP)

Exhibit 3

The Fund for Animals
Form 990, Schedule A, Part VI-A
Lobbying expenditures by Electing Public Charities
12/31/05

Question 36

While FFA did not revoke its election under 501(h) for 2005, we are filing this Schedule A as though it had because we intend to file a private letter ruling request seeking 9100 relief.

Exhibit 4

	14		1	}				_	
Farm 88	004)	Appl	icati	ion for Exte Exempt Org	nsion of Ti anization I	ime To F Return	ile a	n	OMB No. 1545-1709
Department of the Internal Revenue S				► File a separate	e application for eac	ch return.			
		n Automatic 3-M	onth l	Extension, comple	te only Part I an	nd check this t	oox .		<b>&gt;</b> x
				matic) 3-Month Ex					
				y been granted an				reviously file	ed Form 8868.
				f Time - Only sub				March Lamb.	<b>.</b> □
	-	•		natic 6-month exte			- ·		
Partnerships,	REMICS.	and trusts must	use F	filers) must use Fo form 8736 to requi	esi an extension (	of time to file F	om 10	65, 1066, ai	1041.
returns noted (not automatic	below (6 c) 3-mon	months for cor th extension, ins	porate tead	Form 990-T filers	<ul><li>i) However, you</li><li>the fully comple</li></ul>	r cannot file i	t electr	ronically if y	time to file one of the you want the additional Form 8868. For more
		f Exempl Organizat		t www.irs gov/efile	·	·····		Employ	er identification number
Type or print				D. C.					
file by the		E FUND FOR , street, and room		no If a P.O. box, see	instructions.			1 43-	6218740
due date for	_20	O WEST 57TH	STR	EET			705		
filing your return. See				nd ZIP code. For a for	eign address, see w	nstructions.			
instructions.	NE	W YORK, NY	1001	9					<del></del>
		to be filed (file a		ate application for			С.		
X Form 99	-	ŀ		orm 990-T (corporation	-			Form 4720 Form 5227	
Form 990		ŀ	_	orm 990-T(sec 401(; orm 990-T (trust othe				Form 6069	
Form 990		ľ		orm 1041-A				Form 6870	
	······								
<ul> <li>If this is for for the whole names and El</li> <li>1 I request</li> </ul>	r a Group group, ch Ns of all an autor e exempt	Return, enter the eck this box members the extended and t	e orga ension month	·	it Group Exempti f the group, chec f corporation) e	on Number (G ok this box > xtension of tm	EN)	and attac	
▶ 📙	tax year	beginning		,	, and er	nding			- ·
2 If this tax	year is f	or less than 12 n	onths	, check reason	Initial return	Final r	eturn [	Chang	e in accounting period
	-	is for Form 990 dits. See instruc		990-PF, 990-T, 47					s NA
	·	-		990-T, enter any	refundable cred	its and estima	ated tax	k payments	_
with FTI	D coupo	n or, if require	d, by	ent allowed as a cre  3 a. Include your using EFTPS (E	lectronic Federa	al Tax Paymo	ent Sys	stem) See	
	are gom	g to make an ek		ic fund withdrawat					m 8879-EO
			tion A	ct Notice, see Inst	ructions.				Form 8868 (Rev. 12-2004)
									,
					9				
							820		
							1000		

## Case 1:07-cv-01532-EGS Document 66-2 Filed 03/04/11 Page 43 of 43 Case 1:03-cv-02006-EGS Document 192-24 Filed 09/21/07 Page 47 of 47

\		
Form 8868 (7)		Page 2
• If you ar	e filing for an Additional (not automatic) 3-Month Extension, complete only y complete Part II if you have already been granted an automatic 3-month ex	dension on a promously filed Same Roce
	e filing for an Automatic 3-Month Extension, complete only Part I (on page	
Part II	Additional (not automatic) 3-Month Extension of Time - Must	File Original and One Copy.
	Name of Exempt Organization	Employer identification number
Type or print	THE LEUND FOR ANIMALS, INC.	13-6218740
File by the	Number, street, and room or suite no. If a P.O. box, see instructions	For IRS use only
extended due date for	200 WEST 57TH STREET  City, town or post office, state, and ZIP code For a foreign address, see instructions	
filing the return See		
Check tue	NEW YORK, NY 10019  De of return to be filed (File a separate application for each return)	上一次和10年,10年11年11日 11日 11日 11日 11日 11日 11日 11日 11日
	m 990 Form 990-T(sec 401(a) or 408(a) trust)	Form 5227
-	m 990-BL Form 990-T (trust other than above)	Form 6069
For	m 960-EZ Form 1041-A	Form 8870
	m 990-PF Form 4720	
STOP: D	o not complete Part II if you were not already granted an automatic 3-mo	onth extension on a previously filed Form 8868.
	poks are in the care of ► THE FUND FOR ANIMALS, INC.	
	none No > 212 246-2096 FAX No >	chack the hou
	ganization does not have an office or place of business in the United States, if for a Group Return, enter the organization's four digit Group Exemption Numi	
	iote group, check this box   If it is for part of the group, check this box	
	d EINs of all members the extension is for	
	uest an additional 3-month extension of time until 11/15/2006	
5 For	calendar year 2005, or other tax year beginning	and ending
	s tax year is for less than 12 months check reason I Initial return	Final return Change in accounting period
	e in detail why you need the extension ADDITIONAL TIME IS REQUI	
INFO	DRMATION NECESSARY TO FILE A COMPLETE AND ACCURATE	RETURN.
8a If the	s application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter th	e tentative tax less any
	efundable credits. See instructions.	
	s application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable	
lax į	payments made. Include any prior year overpayment allowed as a credi	t and any amount paid
•	iously with Form 8868	
-	nce Due. Subtract line 8b from line 8a Include your payment with this form	
	FTD coupon or, if required, by using EFTPS (Electronic Federal Tax	
instr	uctions	
	ies of perjury, I declare that I have examined this form, including accompanying schedules a	
it is true con	rect_and_complete, and that I am authorized to prepare this form	, , ,
Signature >	James Collerie Tillo > CPA/	(142.11 Date > 3/14/06
~	Notice to Applicant - To Be Complete	ed by the IRS
We	have approved this application. Please attach this form to the organization's return	RECEIVER
dale	have not approved this application. However, we have granted a 10-day grace per e of the organization's return (including any prior extensions). This grace period is	considered to be a valid extension or more threathful
ath	erwise required to be made on a limely return. Please attach this form to the organizati	on's return 191 181
We	have not approved this application. After considering the reasons stated in item 7, ite. We are not granting a 10-day grace period.	we cannot grant your reduction an enterphase of what
☐ We	cannot consider this application because it was filed after the extended due date of	the return for which an extension was meanested.
Oin		L GOEN, UT
	By	
Oirector		Date
	Mailing Address - Enter the address if you want the copy of this application	for an additional 3-month extension
returned t	to an address different than the one entered above	
	GRANT THORNTON LLP Attn & David Cotton	<b>^</b> 0
Type or	Number and street (include suite, room, or apt. no.) or a P.O. box number	<u> </u>
print	2010 CORPORATE RIDGE, SUITE 400	
	City or town, province or state, and country (mcluding postal or ZIP code)	
	MCLEAN, VA 22102	
JSA 5F8055 1 000		Form 8868 (Rev. 12-2004)
	75J 649C 08/14/2006 09:10:09	1

## UNITED STATES DISTRICT COURT FOR THE DISTRICT OF COLUMBIA

FELD ENTERTAINMENT, INC. :

.

Plaintiff,

•

v. :

Case No. 07- 1532 (EGS)

AMERICAN SOCIETY FOR THE

PREVENTION OF CRUELTY ANIMALS, et al.

•

Defendants.

•

PLAINTIFF'S OPPOSITION TO SUPPLEMENTAL MOTION OF DEFENDANT
HUMANE SOCIETY OF THE UNITED STATES TO DISMISS PLAINTIFF'S
AMENDED COMPLAINT

### **EXHIBIT 2**

** PUBLIC DISCLOSURE COPY **

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047

A	For the 2	007 calendar year, or tax year beginning	and en	ding		
B	Check If applicable:	Please use IRS			D Employer identi	fication number
	Address change	print or THE FUND FOR ANIMALS,	INC	2 1	13-621	8740
	Name change	type. Number and street (or P.O. box if mail is not de	elivered to street address)	Room/suite	E Telephone num	
	Initial return	Specific 200 WEST 57TH STREET	50 20	705	212-24	
	Termin- ation	tions. City or town, state or country, and ZIP + 4			F Accounting method:	Cash X Accrual
	Amende retum	MEN TORRY MI TOOLS	6		Other (specify)	- 12-11-1-11-1-1-1-1-1-1-1-1-1-1-1-1-1-1
	Applicat pending	<ul> <li>Section 501(c)(3) organizations and 4947(a)(1) n must attach a completed Schedule A (Form 990 o</li> </ul>	onexempt charitable trusts	H and I are not app	licable to section	
			r 980-cz).	H(a) Is this a group		
		▶WWW.FUNDFORANIMALS.ORG		H(b) If "Yes," enter no		
		ion type (check only one) ► X 501(c) (3) <		H(c) Are all affillates (if "No," attach a		A Yes No
K		re 🕨 🔲 if the organization is not a 509(a)(3) supporting		H(d) is this a separat	te return filed by an	0f
		re normally not more than \$25,000. A return is not required	, but if the organization		red by a group rulin	
	chooses 1	o file a return, be sure to file a complete return.		I Group Exemption		N/A
			0 ((7 7))		-	is not required to attach
Transport.		elpts: Add lines 6b, 8b, 9b, and 10b to line 12	8,667,733.		90, 990-EZ, or 990-	PF).
£.\$		Revenue, Expenses, and Changes In Ne	t Assets of Fund Baia	nces		<del> </del>
	1	Contributions, gifts, grants, and similar amounts received:	1 1	1		
	a	Contributions to donor advised funds		8,054,3	99	
	b	Direct public support (not included on line 1a)	<del></del>	20,4		6
	C	Indirect public support (not included on line 1a)		20,4	93.	¥
	d	Government contributions (grants) (not included on line 1a Total (add lines 1a through 1d) (cash \$8,074		Va. 5 5	10	8,074,894.
	9	Program service revenue including government fees and co	TO 74 " Honcash &	# 200 200	)   <u>18  </u>	12,057.
	2	•	•			12/03/4
	3	Membership dues and assessments				120,413.
	4	Interest on savings and temporary cash investments			1	120/113.
	5	Dividends and interest from securities	1	}''''		
	6 a	Gross rents				
	b	Less: rental expenses		l	5c	¥)
Revenue	, C				) 7	
Ven	7	Other Investment Income (describe  Gross amount from sales of assets other	(A) Securities	(B) Other	- 1	
æ	8 a		(M) Securities	(8) 00161		
		than inventory Less: cost or other basis and sales expenses	95			
	b	Gain or (loss) (attach schedule)	0u 8c			
		Net gain or (loss). Combine line 8c, columns (A) and (B)		l	84	
	9 "	Special events and activities (attach schedule). If any amou			·····	(-
		Gross revenue (not including \$ of contra				
	a	Less: direct expenses other than fundraising expenses	9b			
		Net income or (loss) from special events. Subtract line 9b f			9c	10
		Gross sales of inventory, less returns and allowances				
	b	Less: cost of goods sold	10h			
X		Gross profit or (loss) from sales of Inventory (attach sched		10a	100	•
	1	Other revenue (from Part VII, line 103)	•			460,369.
		Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, a				8,667,733.
		Program services (from line 44, column (B))				4,893,524.
8	14	Management and general (from line 44, column (C))				317,139.
Expenses	15	Fundraising (from line 44, column (D))				219,071.
Š	16	Payments to affiliates (attach schedule)				
ш		Total expenses. Add lines 16 and 44, column (A)				5,429,734.
	18	Excess or (deficit) for the year. Subtract line 17 from line 12				3,237,999.
# # # # # # # # # # # # # # # # # # #	19	Net assets or fund balances at beginning of year (from line				3,585,763.
Net	20	Other changes in net assets or fund balances (attach explan	nation)		20	0.
9	21	Net assets or fund balances at end of year. Combine lines 1				6,823,762.
723		HA For Privacy Act and Panerwork Reduction Act Notic				Form 990 (2007)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
2a Grants paid from donor advised funds					
(attach schedule)		]			
(cash \$ 0 • noncash \$ 0					
If this amount includes foreign grants, check here	Color   Colo				
b Other grants and allocations (attach schedule				STASSISTER 2	
(cash \$ 86,608 - noncash \$ 0					
If this amount includes foreign grants, check here	22h	86,608.	86,608.		
Specific assistance to individuals (attach		İ			
schedule)	23				
Benefits paid to or for members (attach					
schedule)	24				
a Compensation of current officers, directors, key					
employees, etc. listed in Part V-A	25a	0.	0.	0.	0
b Compensation of former officers, directors, key					
employees, etc. listed in Part V-B	25b	0.	0.	0.	0
a Compensation and other distributions, not included	$\Box$				
above, to disqualified persons (as defined under	1				
section 4958(f)(1)) and persons described in	1				
section 4958(c)(3)(B)	25c			·	
Salaries and wages of employees not					***************************************
included on lines 25a, b, and c	28	1.419.235.	1.282.581	80.823.	55,831
Pension plan contributions not included on				00,020	
lines 25a, b, and c	27	30.515.	20-950-	5 - 658 -	3.907
Employee benefits not included on lines	1-1	30,3231	2073000	3,000	
	20	298 225	276 139	13.062	9 024
25a - 27		230/2236	270/133.	13/002.	3/024
Payroli taxes	$\overline{}$	93 5/19			83 548
Professional fundralsing fees		03,340.			03,340
Accounting fees	-				70.00.00
Legal fees	-	549 662	500 812	30 840	
Supplies					
Telephone		20 216			
Postage and shipping	-				
Occupancy		411,202.	3/1,003.	23,421.	10,1/0
Equipment rental and maintenance	$\overline{}$				<del></del>
Printing and publications		152 551	100 766		
Travel		153,551.	138,766.	8,745.	6,040
Conferences, conventions, and meetings	I				
Interest	1	00 556	20 255		
Depreciation, depletion, etc. (attach schedule)	42	98,556.	89,066.	5,613.	3,8//
Other expenses not covered above (itemize):					
	43a				
b	43b				
	43c				
	43d				
B	43e				
	43f	£ 1			
SEE STATEMENT 1	43g	2,188,008.	2,018,022.	133,671.	36,315
Total functional expenses. Add lines 22a through	ΙĒ				
43g. (Organizations completing columns (B)-(D),					
carry these totals to lines 13-15)	44	5,429,734.	4,893,524.	317,139.	219,071
int Costs. Check 🕨 🛣 if you are following					, , , , , , , , , , , , , , , , , , ,
any joint costs from a combined educational campaig			orted in (B) Program servic	es? ►\X	Yes No
(es," enter (i) the aggregate amount of these joint cos					

200		218740	Page 3
	Statement of Program Service Accomplishments (See the instructions.)		
Fo	rm 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a pa	articular organiz	cation.
	w the public perceives an organization in such cases may be determined by the information presented on its return. Therefore	<del>-</del>	
ret	urn is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.	·	
	AND CONTRACTOR C	1	
W	nat is the organization's primary exempt purpose? ► <u>SEE STATEMENT</u> 6	Program Se	
		Expense (Required for 5	
All	organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of	and (4) orgs	
cli	ents served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4)	4947(a)(1) tru	sts; but
org	panizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	optional for o	thers.)
a	SEE STATEMENT 3		
		1	
		1	
		]	
		]	
	(Grants and allocations \$ 41,000 ⋅ ) If this amount includes foreign grants, check here ►	1,903,	<u>,943.</u>
b	CLEVELAND AMORY BLACK BEAUTY RANCH: THE FUND FOR ANIMALS	-	
	OPERATES THE WORLD FAMOUS BLACK BEAUTY RANCH IN MURCHISON,	1	
	TEXAS. THE 1,320-ACRE REFUGE IS HOME TO NEARLY 1,300 ANIMALS	1	
	FROM CHIMPANZEES AND CAMELS TO BURROS AND HORSES. HERE, ANIMALS DO NOT GET HARASSED OR HARMED, BUT ARE PROVIDED WITH	‡	
	A HELPING HAND AND A LOVING HOME.	1	
	(Grants and allocations \$ ) If this amount includes foreign grants, check here	1,006,	.554.
c	SEE STATEMENT 4		
•		1	
		1	
		]	
		]	
	(Grants and allocations \$ 45,548.) If this amount includes foreign grants, check here	915	,046.
d	SEE STATEMENT 5	-	
		-	
		1	
		1	
		1	
	(Grants and allocations \$ ) If this amount Includes foreign grants, check here	571,	404.
8	Other program services (attach schedule) SEE STATEMENT 7		
	(Grants and allocations \$ 60 • ) If this amount includes foreign grants, check here	<del> </del>	577.
<u>f</u>	Total of Program Service Expenses (should equal line 44, column (B), Program services)	4,893,	
		Form <b>9</b> 9	(2007)

For	n 990 (	(2007) THE FUND FOR AN	IM	ALS, INC		13-	6218740 Page 4
		Balance Sheets (See the instructions.)		· · · · · · · · · · · · · · · · · · ·			
Not		ore required, attached schedules and amounts within uld be for end-of-year amounts only.	n the	description column	(A) Beginning of year		(B) End of year
	45				4 800 800	45	F 000 ==4
	46	Savings and temporary cash investments	· · · · · ·		1,782,732.	46	5,329,751.
		1		207 410			
	47 a	Accounts receivable		397,419.	006 555		207 410
	þ	Less: allowance for doubtful accounts	47b		236,575.	47¢	397,419.
				200			
		Pledges receivable	48a	37,680.	600 01E		27 220
	Ī		48b	350.	699,015.		37,330.
	49	Grants receivable				49	
	50 a	Receivables from current and former officers, direc					
	١.	key employees				50a	
	0	Receivables from other disqualified persons (as de				506	
Assets		4958(f)(1)) and persons described in section 4958(		(B)		50b	
Ass		Other notes and loans receivable				E4.	
-	b b	Less: allowance for doubtful accounts				510	
	52 53	Inventories for sale or use			2,383.	52 53	3,146.
	1	Prepaid expenses and deferred charges			2,303.	54a	3/140.
	34 a	Investments • publicly-traded securities		Cost FMV		54a	
		investments - land, buildings, and	···· •	COSt LIPWIV		940	***************************************
	03 a	equipment: basis	550				
		equipment, basis	33a				
	h	Less: accumulated depreciation	55h	1		55c	
	56	Investments - other				56	
		•	57a	3,856,802.			
			57b	2,001,211.	1,731,102.	57e	1,855,591.
	58	Other assets, including program-related Investments	L				
		(describe ► SECURITY DEPOSITS		)	470.	58	260.
	59	Total assets (must equal line 74). Add lines 45 thr	ough	58	4,452,277.	59	7,623,497.
	60	Accounts payable and accrued expenses			98,347.	60	141,340.
	51	Grants payable	• • • • • • • •			61	
	62	Deferred revenue				62	
abilities	63	Loans from officers, directors, trustees, and key er				63	
Ω	64 a	Tax-exempt bond liabilities	• • • • • • •			64a	
Ë	b	Mortgages and other notes payable				84b	
	65	Other liabilities (describe DUE TO HSUS		)	768,167.	65	658,395.
		34					
	66	Total liabilities. Add lines 60 through 65			866,514.	66	799,735.
	Orga	nizations that follow SFAS 117, check here 🕨 🛚	X :	and complete lines			
49		67 through 69 and lines 73 and 74.			0 505 560		6 000 760
8	67	Unrestricted			3,585,763.		6,823,762.
調	68	Temporarily restricted				58	
Ω Φ	69	Permanently restricted				89	
Net Assets or Fund Balances	Orga	nizations that do not follow SFAS 117, check her	re 🕨	` ∟l and			
<u>-</u>		complete lines 70 through 74.					
şte	70	Capital stock, trust principal, or current funds				70	
SS(	71	Paid-in or capital surplus, or land, building, and equ			······································	71	
et A		Retained earnings, endowment, accumulated inco		r		72	
Ž		Total net assets or fund balances. Add lines 67 through (Column (A) must equal line 19 and column (B) must equ		• 1	3,585,763.	73	6,823,762.
		Total flabilities and net assets/fund balances. Ad			4,452,277.		7,623,497.

	m 990 (2007) THE FUND FOR ANIMALS,	INC			2187	
8.86	Reconciliation of Revenue per Audited Fina instructions.)	ıncial Statements W	ith Revenue p	er Re	turn (Se	e the
					10	700 450
a	Total revenue, gains, and other support per audited financial stateme	ents			a 8,	798,458.
D	Amounts included on line a but not on Part I, line 12:	- 1.	.1			
1	Net unrealized gains on investments			25		
2	Donated services and use of facilities	[ ]		23.		
4	Recoveries of prior year grants		14			
•	Other (specify): Add lines b1 through b4	L			h	130,725.
c	Subtract line b from line a				£ 8,	667,733.
d	Amounts included on Part I, line 12, but not on line a:					0011100.
1	Investment expenses not included on Part i, line 6b	١,	₁₁			
2		Г	12			
	Add lines d1 and d2		-		d	0.
8_	Total revenue (Part I, line 12). Add lines c and d				e 8,	667,733.
	Total revenue (Part I, line 12). Add lines c and d  Reconciliation of Expenses per Audited Fina	ancial Statements V	/ith Expenses	per R	eturn	
а	Total expenses and losses per audited financial statements				a 5,	560,459.
b	Amounts included on line a but not on Part I, line 17:	£1				
1	Donated services and use of facilities	<u>_</u>	1  130,7	25.		
2	Prior year adjustments reported on Part I, line 20	<u>l</u>	12			
3	Losses reported on Part I, line 20	<u>l</u>	3			
4	Other (specify):		14			
	Add lines b1 through b4				b	130,725.
C	Subtract line b from line a	***************************************	•••••	[	c 5,	429,734.
d	Amounts included on Part I, line 17, but not on line a:	1	1			
1	Investment expenses not included on Part I, line 6b		1			
2	Other (specify):		12			
	Add lines d1 and d2				d c	0.
	Total expenses (Part I, line 17). Add lines c and d					429,734.
***	or key employee at any time during the year even if they we	ere not compensated \ (Se	a the instructions			ctor, trustee,
		(B) Title and average hours	(C) Compensation	(D)Cont	ributions to	(E) Expense
	(A) Name and address	per week devoted to position	(If not paid, enter -0)	plans (	ee penent Lideferred Estion plans	account and other allowances
				95.11	Adoli piano	
SE	E STATEMENT 9		0.		0.	0.
					:	
	~~===~~~==,==.				6	
						<del>-</del>
	~					
			L			orm <b>990</b> (2007)
						V

Form 990 (2007) THE FUND FOR ANIMALS,	INC		13-62187	
Part VA Current Officers, Directors, Trustees, and Ke	y Employees (continu	ed)		Yes No
75 a Enter the total number of officers, directors, and trustees permitted				
meetings	***************************************	<b>&gt;</b>	5	
h Are any officers, directors, trustees, or key employees listed in Form	990. Part V-A. or highest of	compensated emp	lovees	
listed in Schedule A, Part I, or highest compensated professional an				
Part II-A or II-B, related to each other through family or business related	tionships? if "Yes," attach	a statement that is		
the individuals and explains the relationship(s)				75b X
c Do any officers, directors, trustees, or key employees listed in Form	990, Part V-A, or highest o	ompensated empl	oyees	
listed in Schedule A, Part I, or highest compensated professional an				
Part II-A or II-B, receive compensation from any other organizations,	whether tax exempt or tax	able, that are relat	ed to the	
organization? See the instructions for the definition of "related organization".		EE STATEM	ENT TO	75c X
If "Yes," attach a statement that includes the information described				75d X
d Does the organization have a written conflict of interest policy? Former Officers, Directors, Trustees, and Ke	v Employees That B	eceived Com	nensation or	
Benefits (If any former officer, director, trustee, or key er				
the year, list that person below and enter the amount of co				
(E) Blazes and address	(P) Leave and Advances	(C) Compensation	(D) Contributions to employee benefit	
(A) Name and address NONE	(B) Loans and Advances	(if not paid, enter -0-)	plans & deferred compensation plans	account and other allowances
- AND THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF				F4
				1
				T
				İ
				<del> </del>
				1
Other Information (See the instructions.)		<u> </u>	I	Yes No
76 Did the organization make a change in its activities or methods of co	nducting activities? If "Yes	s." attach a detaile	nd	
statement of each change				78 X
77 Were any changes made in the organizing or governing documents i				77 X
If "Yes," attach a conformed copy of the changes.				
78 a Did the organization have unrelated business gross income of \$1,00	0 or more during the year	covered by this rel	tum?	78a X
b If "Yes," has it filed a tax return on Form 990-T for this year?				78b
79 Was there a liquidation, dissolution, termination, or substantial contr			22	79 X
80 a is the organization related (other than by association with a statewid	-		T.	7
membership, governing bodies, trustees, officers, etc., to any other	exempt or nonexempt orga	antzation?		BDa X
b If "Yes," enter the name of the organization			7	
81 a Enter direct and indirect collision expanditures (Con line 04 instruction	and check whether it is L	lexemptor     eta	inonexempt □	
81 a Enter direct and indirect political expenditures. (See line 81 instruction by Did the organization file Form 1120-POL for this year?	•			81b X
A NEW THE OLD WINDS THE LINE I ALLE LATE OF THE AGE!	***************************************	***************************************		200

Form	1 990 (2007) THE FUND FOR ANIMALS, INC		13-6218	3740	P	age 7
	Other Information (continued)				Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities a	at no cha	arge or at substantially			
	less than fair rental value?			82a	X	
b	If "Yes," you may indicate the value of these items here. Do not include this					
	amount as revenue in Part I or as an expense in Part II.					
	(See Instructions in Part III.)	82b	130,725			
83 a	Did the organization comply with the public inspection requirements for returns and exemption		· · · · · · · · · · · · · · · · · · ·	83a	X	,,,,,,,,,,,,,,
b	Did the organization comply with the disclosure requirements relating to quid pro quo contribu			83h	Х	r
	Did the organization solicit any contributions or gifts that were not tax deductible?			84a		Х
	If "Yes," did the organization include with every solicitation an express statement that such co					
-	tax deductible?		•	84b	*********	59866833
85 a	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?			85a		
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			85 b		$\overline{}$
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the			000		*****
	waiver for proxy tax owed for the prior year.	le Olyail	Ration leceived a			
8	Dues, assessments, and similar amounts from members	85c	N/A			
d	Section 162(e) lobbying and political expenditures		N/A			
-			N/A	-		
8	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		N/A			
	Taxable amount of lobbying and political expenditures (line 85d less 85e)  Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?			95.	*********	*******
g h				85g		
"	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditure.					
				85h		
86	following tax year?  501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on	• • • • • • • • • • • • • • • • • • • •		0011		******
00	•	86a	N/A			
b	line 12		N/A			
87	•	87a	N/A			
	501(c)(12) organizations. Enter: a Gross income from members or shareholders	0/8	N/A	₩		
B	Gross Income from other sources. (Do not net amounts due or paid to other sources	076	N/A			
88 0	against amounts due or received from them.)			1		
00 a	At any time during the year, did the organization own a 50% or greater interest in a taxable co- or an entity disregarded as separate from the organization under Regulations sections 301.77	-				
				88a	************	X
h	If "Yes," complete Part IX  At any time during the year, did the organization, directly or indirectly, own a controlled entity	within th	a manaina of	000		
•	section 512(b)(13)? if "Yes," complete Part XI		-	88b		х
RQ a	501(c)(3) organizations. Enter: Amount of tax Imposed on the organization during the year under					
05 4	section 4911 ► 0 • ; section 4912 ► 0 • ; section 4915		0.			
h	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess					
	transaction during the year or did it become aware of an excess benefit transaction from a price					
	If "Yes," attach a statement explaining each transaction	•		89b	**********	X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the		der			
•	sections 4912, 4955, and 4958	1	0.			
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		0.			
	All organizations. At any time during the tax year, was the organization a party to a prohibited t			89e	P20000000	X
	All organizations. Did the organization acquire a direct or indirect interest in any applicable insu			891		$\frac{\hat{\mathbf{x}}}{\mathbf{x}}$
	For supporting organizations and sponsoring organizations maintaining donor advised funds. D					
•	or a fund maintained by a sponsoring organization, have excess business holdings at any time			89a	(0)((0)(0):03	X
90 a	List the states with which a copy of this return is filedSEE STATEMENT 11		ino Jour	- vol		<del></del> -
	Number of employees employed in the pay period that includes March 12, 2007		90b			0
			hone no. ► 212-24	6-2	096	
	Located at ▶ 200 WEST 57TH STREET, NEW YORK, NY	10101	ZIP+4 ▶ ]			
. h	At any time during the calendar year, did the organization have an interest in or a signature or	nther ou	<del></del>		Yes	No
•	a financial account in a foreign country (such as a bank account, securities account, or other fi		•	91b		X
	If "Yes," enter the name of the foreign country	, a lord				*****
	See the Instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of F	orelon F				
	and Financial Accounts.	CLOIRI L	real ere			
				Form	990 (	2007)
					1	

		FUND FOR	ANIMA	LS, INC		13-	-6218740	Page 8
	VI Other Information (	continued)						Yes No
	At any time during the calendar ye				e of the Ur	nited States?	910	X
1	if "Yes," enter the name of the for	reign country 🕨		N/A				
	Section 4947(a)(1) nonexempt cha							, ▶ 📖
	and enter the amount of tax-exem						N/	<u> </u>
	Analysis of Income		~~~				т	
	Enter gross amounts unless other	arwise	(A)	ted business income	(C)	ed by section 512, 513, or 514	(E)	)
indīca			Business	(B) Amount	Exclu- sion	(D) Amount	Related or	•
	rogram service revenue:		code		code		function	
	LITERATURE		<u> </u>			·····		1,107.
b ]	WORKSHOP	· · · · · · · · · · · · · · · · · · ·					ļ <u>1</u>	0,950.
C _	· · · · · · · · · · · · · · · · · · ·						ļ	
α -		<del></del>			-		<del> </del>	
B _		***************************************	ļ		-	·····	<del>                                     </del>	
	ledicare/Medicaid payments		~~~~~		-		<del> </del>	
-	ees and contracts from governme	-			_		<del></del>	
	embership dues and assessment				14	120,413.	<del> </del>	
	terest on savings and temporary cash			·		120,413.	<del> </del>	
	ividends and interest from securit				(800)			
	et rental income or (loss) from rea							
	ebt-financed property						<del>                                     </del>	
	ot debt-financed property et rental income or (loss) from per				-			
	ther investment income		<del></del>	<u></u>				
	ain or (loss) from sales of assets	***************************************					<del> </del>	
	her than inventory							
	et income or (loss) from special ex							
	ross profit or (loss) from sales of i						-	<del>*************************************</del>
	ther revenue:	involutory	<del></del>	·	+			
	OTHER INCOME				01	368,706.		
-	ROYALTIES	<del></del>		· · · · · · · · · · · · · · · · · · ·	15	58,864.		
**	LIST RENTALS		<del></del>		15	32,799.		
d =								
8	· · · · · · · · · · · · · · · · · · ·							<del></del>
	ubtotal (add columns (B), (D), and	(E)			0.	580,782.	1	2,057.
	otal (add line 104, columns (B), (D							2,839.
Note: L	Ine 105 plus line 1e, Part I, should	d equal the amou	unt on line 1	2, Part I.	•••••••	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	Relationship of Acti	vities to the	Accompl	ishment of Exer	mpt Pur	poses (See the instructi	ions.)	
Line N	<ul> <li>Explain how each activity for wh exempt purposes (other than by</li> </ul>				uted importa	antly to the accomplishment	of the organizati	ion's
93A	SALES OF BOOKS,	<del></del>	<u> </u>		AT O	R BELOW COST,	TO INC	REASE
	PUBLIC AWARENES					SSION.		
93B				N ANIMAL W				
	Information Regardi	ing Taxable	Subsidiar	ies and Disrega	rded En	tities (See the instructio	ns.)	
Name	(A)	(B) Percentage of		(C)		(D)	(E	
Pa	, address, and EIN of corporation, inthership, or disregarded entity	ownership interes	st .	Nature of activities		Total income	End-of asse	-year ats
			%					
	N/A	•	%					
			%					
			%					
	Information Regardi	ng Transfers	Associa	ted with Person	al Bene	fit Contracts (See the	e instructions.	)
(a) Di	d the organization, during the year, re	ceive any funds, d	lirectly or indi	rectly, to pay premiums	on a persor	nal benefit contract?	Yes	X No
	d the organization, during the year, pa				t contract?		Yes	X No
Note:	If "Yes" to (b), file Form 8870 and	d Form 4720 (see	e instruction	s).				

Form 99	0 (2007) THE FUND FOR ANIMALS, I	NC	13-62187	740 P	age 9
	Information Regarding Transfers To and From C	Controlled Entit	ies. Complete only if the organizati	on is a	
	controlling organization as defined in section 512(b)(13).	N/A			
				Yes	No
106 Die	d the reporting organization make any transfers to a controlled entity a	as defined in section	n 512(b)(13) of the Code? If "Yes,"		
co	mplete the schedule below for each controlled entity.				
	(A)	(B)	(C)	(D)	
İ	Name, address, of each	(B) Employer Identification	Description of	Amount	of
	controlled entity	Number	transfer	transfe	r
a		į			
_			1		
b					
c					
	Totals			ls.	1 41
485 01					No
	d the reporting organization receive any transfers from a controlled er	ntity as defined in se	ection 512(b)(13) of the Code? If "Ye	s,"	
	mplete the schedule below for each controlled entity.	(m)	T		
	(A)	(B) Employer Identification	(C) Description of	(D) Amount	of
	Name, address, of each controlled entity	Identification	transfer	transfe	
-		Number			
a			j		
.			İ		
<b>b</b>					
				<del></del>	
			}		
°					
	Totals			98	
	Totals			Yes	No
108 Did	the organization have a binding written contract in effect on August	17, 2006, covering t	the interest, rents, royalties, and	1.00	1
	nuities described in question 107 above?	.,,,,			ł
	Under penalties of perjury, I declare that I have examined this return, including scoompany and complete. Declaration of preparer other than officer) is based on all information of whi	ing schedules and statem	ents, and to the best of my knowledge and belie	if, it is true, co	rect,
	and complete. Declaration of preparer other than officer) is based on all information of whi	ch preparer has any know	ledge.		
Please	1 / m		11-12-08		
Sign	Signature of officer		Date		
Here	G THOMAS WAITE III, TREASURER				
	Type or print name and title				
	Preparer's 4	Date	Check if Preparer's SSN or	PTIN (See Gen	. Inst. X)
Paid	signature	11/12/08	self- employed >		
Preparer's	Firm's name (or RSM MCGT, ADREV, TNC.		EIN >		
Use Only	self-employed), 8000 TOWERS CRESCENT DR.	STE 500	EIII F		
	address, and ZiP+4 VIENNA, VA 22182-6205		Phone no. ► 703-33	36-640	0
	1 TANION TAL ELICE VEVS		LI HOHO HO. P 700 DA		

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

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information-(See separate Instructions.)

MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

realite of the organization			Cithinaet ment	
THE FUND FOR ANIMALS, INC			13 6218	~~~
Part Compensation of the Five Highest Pald Emp		Officers, Dire	ctors, and $\ceil{ctors}$	<b>Trustees</b>
(See page 1 of the instructions. List each one. If there are none, e				
(a) Name and address of each employee paid	(b) Title and average hours per week devoted to	(c) Compensation	(d) Contributions i	(a) Expense account and other
more than \$50,000	position	(e) compensation	(d) Contributions employee benefit plans & deferred compensation	allowances
ROBERT FEARN	DIR-CAPE WL (	ENTER		
200 W 57TH STREET, NEW YORK, NY 10019	40.00	65,525.	10,651	. 0.
ERIC W. DAVIS	DIR-RAVS			
200 W 57TH STREET, NEW YORK, NY 10019	40.00	72,196.	10,569	. 0.
SUSAN HOUGH MONGER	VETERINARIAN			
200 W 57TH STREET, NEW YORK, NY 10019		65,819.	7,645	. 0.
KATHERINE B. LISCOMB	VP-ANIMAL CAR		1 7 2 2	
200 W 57TH STREET, NEW YORK, NY 10019		112,169.	20,072	. 0.
RICHARD H. FARINATO	DIR-BLACK BEA		20/0/2	• •
200 W 57TH STREET, NEW YORK, NY 10019			12,519	. 0.
	40.00	09,711.	12,313	•
Total number of other employees paid	0			
over \$50,000		4 D 4		
Par II-A Compensation of the Five Highest Paid Inde			ionai Servic	es
(See page 2 of the instructions. List each one (whether individuals	or firms). If there are none, o	enter "None.")	2	
(a) Name and address of each independent contractor paid more th	an \$50,000	(b) Type of	service	(c) Compensation
WARTOWAY OURDOOD GRODER				
NATIONAL OUTDOOR SPORTS		DIRECT MAI		00 540
5151 WISCONSIN AVE, NW 4TH FL, WASHIN	GTON DC 2000	CONSULTING	SERVIC	83,548
THE SHARE GROUP, INC				
4411 S 40TH ST, SUITE D-6, PHOENIX, A	Z 85040	ELEMARKET	ING	60,570.
**************************************				
A TOTAL CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF TH				
Total number of others receiving over				
\$50,000 for professional services	0			
Part 129 Compensation of the Five Highest Paid Inde	pendent Contracto	rs for Other S	ervices	
(List each contractor who performed services other than profession	onal services, whether individ	uals or		
firms. If there are none, enter "None." See page 2 of the instruction	s.)			
	Ara ana	(b) T s		(-) ()
(a) Name and address of each independent contractor paid more the	an \$50,000	(b) Type of	service	(c) Compensation
RICHARD J. RICHMOND	i c	UIUQAMMU		
453 CHURCH STREET, WEST BARNSTABLE MA		ONSULTANT	FEES	63,510.
EO EGAR, DVM.		LINIC-FIE		<u> </u>
2607 MARILYN ROAD, PHOENIX, AZ 85032		ETERINARI		56,324
JENNIFER SCARLETT, DVM		ETERINARY		30,324
905 FLORIDA STREET, SAN FRANCISCO CA	(	ERVICES	· _	52,770.
TO LEGITLE DIRECT DAY PROJECT CA	24110	TICA TORD		32,110
	<u> </u>			
Total number of other contractors receiving over	_			
\$50,000 for other services	0			

	Statements About Activities (See page 2 of the Instructions.)		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities   \$ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)	1		x
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)			
8	a Sale, exchange, or leasing of property?	2a		X
t	Lending of money or other extension of credit?	2b		X
(	Furnishing of goods, services, or facilities?	2c		X
£	I Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	20		X
•	Transfer of any part of its income or assets?	2e		X
3 a	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)  SEE STATEMENT 12	3a	х	
t	Did the organization have a section 403(b) annuity plan for its employees?	3b		X
C	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3c		X
đ	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		X
	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	48		Х
þ	Did the organization make any taxable distributions under section 4966?	4b		
C	Did the organization make a distribution to a donor, donor advisor, or related person?	4c		
	Enter the total number of donor advised funds owned at the end of the tax year		N/	A.
	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year		N/	A
	Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts			0.
g	Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year			0.

Schedule A (Form 990 or 990-EZ) 2007

Sched	lule A (F	orm 990 or 990-EZ) 2007 THE FUND FO	R ANIMALS,	INC		13-62	18740	Page 3
		Reason for Non-Private Foundation	o <b>n Status</b> (See page	s 4 through 8 of the instruction	ons.)			
		ne organization is not a private foundation because it A church, convention of churches, or association A school. Section 170(b)(1)(A)(ii). (Also complete A hospital or a cooperative hospital service organical A federal, state, or local government or government A medical research organization operated in conjugant state.  An organization operated for the benefit of a collect (Also complete the Support Schedule in Part IV-A An organization that normally receives a substant Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support from activities related to its charitable, etc. its support from gross investment income and united to the section association and control of the section activities related to its charitable, etc.	is: (Please check only Q of churches. Section 170 Part V.) zation. Section 170(b)(1) rotal unit. Section 170(b)(notion with a hospital. Section 170(b)(all part of its support from port Schedule in Part IV complete the Support Shan 33 1/3% of its support, functions - subject to created business taxable	NE applicable box.)  (b)(1)(A)(i).  (A)(iii).  (1)(A)(v).  ection 170(b)(1)(A)(iii). Enter  r operated by a governmental  m a governmental unit or from  -A.)  Schedule in Part IV-A.)  ort from contributions, membertain exceptions, and (2) no income (less section 511 tax)	the hospital's unit. Section 1 the general p ership fees, an more than 33 from business	i70(b)(1)(A)(iv) public. ad gross 1/3% of	<b>).</b>	
by the organization after June 30, 1975. See section 509(a)(2). (Also complete the <b>Support Schedule</b> in Part IV-A.)  An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:  Type II Type III-Functionally Integrated Type III-Other								
		Provide the following information	, · · · · · · · · · · · · · · · · · · ·		the instruction	ns.)		
		(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	is the supported Amou organization listed in supp		(8) Amount suppor	
					Yes	No		
				-		*		
<del></del>	<del></del>							
		=				A.C.		
rotal .								
		An organization organized and operated to test for						

******	Support Schedule (C Note: You may use th			NC , 11, or 12.) Use cash		-6218740 Page 4 ing.
Cali	Note: You may use the	e worksheet in the inst	ructions for converting	from the accrual to th	e cash method of acc	ounting.
beg	inning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15	Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	6,388,608.	6,360,608.	6,540,396.	6,514,491.	25,804,103.
16	Membership fees received					
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	31,458.	82,859.	126,217.	350,557.	591,091.
18	Gross Income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	120,413.	207,641.	655,238.		1,664,825.
19	Net income from unrelated business					
20	activities not included in line 18  Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22	Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	472,305.	58.151.	SEE STATEME		530,456.
23	Total of lines 15 through 22	7,012,784.	6,709,259.	7,321,851.	7,546,581.	28,590,475.
24	Line 23 minus line 17	6,981,326.	6,626,400.	7,195,634.	7,196,024.	27,999,384.
25	Enter 1% of line 23	70,128.		73,219.	<del></del>	559,988.
26	Organizations described on lines 10		• • •		XXXXXXXX	339,988.
b	Prepare a list for your records to sho unit or publicly supported organization		•		MXXXXXXX	
	Do not file this list with your return.	•	▼			4,624.
C	Total support for section 509(a)(1) to					27,999,384.
d	Add: Amounts from column (e) for iii	nes: 18 1,6	C A . O O E		00000000	
		22 5	30,456. 26b	4,62	4 - ≥ 26d	
8	Public support (line 26c minus line 2	6d total)		••••••••••	268	25,799,479.
27	Public support percentage (line 26e Organizations described on line 12:					92.1430%
2	records to show the name of, and tot	ai amounts received in ea	ch year from, each "disqu	ualified person." Do not fi	ie this list with your ret	ım. Enter the sum of
b	For any amount included in line 17 th and amount received for each year, ti	at was received from eac	h person (other than "disc	qualified persons"), prepa	re a list for your records	to show the name of,
	described in lines 5 through 11b, as the larger amount described in (1) or (2006)	well as individuals.) Do no (2), enter the sum of the (2005)	ot file this list with your r se differences (the excess (20	eturn. After computing to amounts) for each year: 904)	he difference between the N/A (2003)	e amount received and
C	Add: Amounts from column (e) for lin	16s: 15		16		NT/R
d	Add: Amounts from column (e) for lin  17  Add: Line 27a total	20	t ling 97h total	21	27c 27d	
8	Public support (line 27c total minus II	ine 27d total)			<b>▶</b> 278	<del>}</del>
t	Total support for section 509(a)(2) te	st: Enter amount on line	23, column (e)	271	N/A	CONTRACTOR OF CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACT
g	Public support percentage (line 27e	(numerator) divided by	line 27f (denominetor))		<b>▶</b> 27g	N/A %
h	investment income percentage (line	18, column (e) (numera	tor) divided by line 27f (	denominator))	> 27h	N/A %
<b>28</b> l s r 72313	Inusual Grants: For an organization de how, for each year, the name of the co eturn. Do not include these grants in li 1 12-27-07	scribed in line 10, 11, or not intributor, the date and an ne 15.	12 that received any unus nount of the grant, and a ONE	sual grants during 2003 t brief description of the na	hrough 2006, prepare a ature of the grant. Do no Sched	list for your records to t file this list with your tule A (Form 990 or 990-E2) 2007

723131 12-27-07

*****		3-621874		age t
	Private School Questionnaire (See page 9 of the instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV)	N/	A	
	(10 DO ONINDICED OTTET BY SOLICOID BILL GLOSGER GIO DOX OF INFO OTTET STEETY		V	
<b>.</b> g	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing		Yes	No
	Instrument, or in a resolution of its governing body?	29		
0	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues,			
	and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of			
	solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known			
	to all parts of the general community it serves?	31		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
	Does the organization maintain the following:			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	L	ļ
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		L
Ç	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student			
	admissions, programs, and scholarships?	320		L
d	Copies of all material used by the organization or on its behalf to solicit contributions?	321		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
	Does the organization discriminate by race in any way with respect to:			
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
C	Employment of faculty or administrative staff?	33c		_
ď	Scholarships or other financial assistance?	33d		<u> </u>
Ð	Educational policies?	338		<u> </u>
f	Use of facilities?	331		
g	Athletic programs?			
h	Other extracurricular activities?			
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
1				
8	Does the organization receive any financial aid or assistance from a governmental agency?	348		
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
	If you answered "Yes" to either 34a or b, please explain using an attached statement.			
	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50	),		
	1975-2 C.B. 587, covering racial nondiscrimination? If "No " attach an explanation	95		

Sc	hedule A (Form 990 or 990-EZ	2007 THE FUND	FOR ANIMALS,	INC			13	-6218740 Page 6
	Lobbying (To be complet	<b>Expenditures by El</b> led <b>ONLY</b> by an eligible orga	ecting Public Char nization that filed Form 576	r <b>ities</b> (See page 11	of the Instruction	ons.)		N/A
<u>Ch</u>	eck a if the organiz	ation belongs to an affiliated	group. Check	▶ b ☐ if you c	hecked "a" and	"limited o	control*	provisions apply.
		imits on Lobbying m "expenditures" means am			Affiliate	a) d group tals		(b) To be completed for all electing organizations
	-				N/	A		
	Total lobbying expenditures t							
37	Total lobbying expenditures t					·		
38	, , , , , , , , , , , , , , , , , , , ,							
39		ditures		39	-			
40				40		00000000000	*******	
41	Lobbying nontaxable amount							
	if the amount on line 40 is -		ng nontaxable amount is -					
	Not over \$500,000			B0000000				
	Over \$500,000 but not over \$1,000 Over \$1,000,000 but not over \$1,60							
	Over \$1,500,000 but not over \$17,0		· · · · · · · · · · · · · · · · · · ·	50000000			***	
	Over \$17,000,000			£0330330				
42	Grassroots nontaxable amou				*************	*****	riscore.	
	Subtract line 42 from line 36.							
	Subtract line 41 from line 38.							
	Caution: If there is an amo							
		(Some organizations that ma	Averaging Period ade a section 501(h) election structions for lines 45 through	n do not have to com	plete all of the fi	ve colun )	nns	
		20	Lobbying Exp	enditures During 4-Y	ear Averaging	Period		N/A
	endar year (or al year beginning in)	(a) 2007	(b) 2006	(c) 2005		(d) 2004		(e) Total
45	Lobbying nontaxable amount							0
46	Lobbying ceiling amount							
	(150% of line 45(e))							0.
47	Total lobbying							_
AΩ	expenditures							0.
+0	amount							0.
49	Grassroots ceiling amount							•
-	(150% of line 48(e))							0.
50	Grassroots lobbying					******	******	
×	expenditures Lobbying A	ctivity by Nonelec	ting Public Chariti	es				0.
		nly by organizations that did				<del></del>	·····	N/A
	ing the year, did the organization			n, including any attem	pt to	Yes	No	Amount
	ence public opinion on a legisl	-	•			-		
a h	Volunteers	buda companestion in avoar	nese renorted on lines a thr	ough h \		$\vdash$		
	Media advertisements							
ď	Mailings to members, legislato	ors, or the public	***************************************		***************************************			
8	Publications, or published or b	proadcast statements	***************************************	••••••••••	•••••••••			
t	Grants to other organizations f	or lobbying purposes			***************			
g	Direct contact with legislators,	their staffs, government off	icials, or a legislative body					
h	Rallies, demonstrations, semin	ars, conventions, speeches	, lectures, or any other mea	ıns				
i	Total lobbying expenditures (A	dd lines c through h.)	******	••••••	••••••			0.
231	It "Yes" to any of the above, als	so attach a statement giving	a detailed description of th	e lobbying activities.				
الجب	Y L_		2.00			0-1-		45 - 466 - 466 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 500 - 5

		7 THE FUND FOR A			<u>521874</u>	0	Page '
		garding Transfers To as zations (See page 14 of the ins		d Relationships With Noncha	ritable		
	Did the reporting organization of		of the following with any othe	r organization described in section bilitical organizations?			
а		ganization to a noncharitable exem				Yes	No
						ļ	X
		***************************************	•••••••••••••••••••••••••••••••••••••••		a(II)		X
þ	Other transactions:	An will a second of the left of the second of	•		\ <b>\</b>		J.
	(i) Sales of exchanges of asset	its with a noncharitable exempt org			b(I)	-	X
	(iii) Pental of facilities, equipme	i itoriciiantable exempt organizatioi ant or other assets			b(II)		X
	(iv) Reimbursement arrangeme	ents	•••••••••••••		b(lv)	<u> </u>	X
	(v) Loans or loan guarantees				b(v)		X
	(vi) Performance of services or	membership or fundralsing solicit	ations		b(vi)		X
C	Sharing of facilities, equipment,	mailing lists, other assets, or paid	employees		6		X
d	If the answer to any of the above	e is "Yes," complete the following s	chedule. Column (b) should a	always show the fair market value of the			
				less than fair market value in any		(-	
	1	nent, show in column (d) the value	of the goods, other assets, o			N/A	
(a) Line n	(b) D. Amount involved	(c) Name of noncharitable e	vernet organization	(d) Description of transfers, transactions, ar	ıd charina aı	rannar	nante
			Washing or Bassication	boomphon of transfers, transactions, ar	o onamy a	rangon	
•	***************************************						
						**	
<del></del>		***************************************				<del></del>	
			***************************************				
			**************************************				
****							
		*****		, , , , , , , , , , , , , , , , , , , ,			
(	s the organization directly or Inc Code (other than section 501(c)( f "Yes," complete the following s	(3)) or in section 527?	one or more tax-exempt org	anizations described in section 501(c) of tr	Yes	X	] No
	(a) Name of org	anization	(b) Type of organization	(c) Description of relation	nship		
<del></del>							
		*****					
		**************************************					
		· · · · · · · · · · · · · · · · · · ·					
	**************************************						
723152	· · · · · · · · · · · · · · · · · · ·			<u> </u>			

# Case 1:07-cv-01532-EGS Document 66-3 Filed 03/04/11 Page 18 of 37 ** PUBLIC DISCLOSURE COPY **

**Schedule of Contributors** 

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

OMB No. 1545-0047

2007

or 990-PF)

Supplementary Information for

Department of the Treasury
Internal Revenue Service

Name of organization

Supplementary Information for

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

Employer identification number

	THE FUND FOR ANIMALS, INC	13-6218740				
Organizatio	on type (check one):					
Filers of:	Section:					
Form 990 or	r 990-EZ X 501(c)( 3 ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	F 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
	ur organization is covered by the <b>General Rule</b> or a <b>Special Rule. (Note:</b> Only a section 501(c)(7), a General Rule and a Special Rule-see instructions.)	(10) or (10) or game and 10 or or or or or or or or or or or or or				
☐ For	r organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in ntributor. (Complete Parts I and II.)	n money or property) from any one				
Special Rule	es-					
sec	r a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support to ctions 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribut the amount on line 1 of these forms. (Complete Parts I and II.)					
agg	For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III.)					
son \$1,0	For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the Parts unless the General Rule applies to this organization because it received					
Caution: Org	nexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.)	9 B (Form 990, 990-EZ, or 990-PF), but				

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

Schedule B (Form 990, 998-EZ, or 990-PF) (2007)

	orm 990, 990-EZ, or 990-PF) (2007)			Page 1 of 1 of Part I
Name of or	ganization		Employ	er identification number
THE F	UND FOR ANIMALS, INC		13	-6218740
Parti	Contributors (See Specific Instructions.)			
(a)	(b)	(c)		(d)
No.	Name, address, and ZIP + 4	Aggregate contribut	ions	Type of contribution
1		\$822,5	00.	Person X Payroti
(a)	<b>(b)</b>	(c)		(d)
No.	Name, address, and ZIP + 4	Aggregate contribut	ions	Type of contribution
2		\$\$	31.	Person X Payroll
(a)	(b)	(c)		(d)
No.	Name, address, and ZIP + 4	Aggregate contribut	ions	Type of contribution
3		\$1,000,0	20.	Person X Payroll  Noncash  (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)		(d)
No. 4	Name, address, and ZIP + 4	Aggregate contribut		Person X Payroll
(a) No.	(b)  Name, address, and ZIP + 4	(c) Aggregate contribut	lone	(d) Type of contribution
		\$	a comment	Person Payroll Moncash Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c)	iono	(d)
NO.	reame, accress, and zir + 4	Aggregate contribut	Uns	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

13-6218740

FORM 990	OTHER	EXPENSES		STATEMENT 1
	(A)	(B) PROGRAM	(C) MANAGEMENT	(D)
DESCRIPTION	TOTAL	SERVICES	AND GENERAL	FUNDRAISING
PRICES & AWARDS CONSULTANT &	66.	66.		
CONTRACTED SERVICE INVESTMENT EXPENSES	474,846.	429,124.	27,042.	18,680.
& TRUSTEES' FEES	23,232.	17,765.	3,233.	2,234.
INSURANCE REAL ESTATE & PERSONAL PROPERTY	<333.>	<301.>	<19.>	· <13.>
TAXES	19,525.	17,645.	1,112.	768.
PROFESSIONAL FEES EDUCATION MATERIAL, PUBLICATION	252,286.	227,994.	14,367.	9,925.
, AND CAMPAIGNS	120,005.	108,450.	6,834.	4,721.
MAILING COSTS	1,298,381.	1,217,279.	81,102.	
TOTAL TO FM 990, LN 43	2,188,008.	2,018,022.	133,671.	36,315.

FORM 990	CASH GRANTS AND ALLOCATIONS TO OTHERS	STATEMENT 2
CLASS OF ACTIVITY/DONE	E'S NAME AND ADDRESS	AMOUNT
GRANTS ANIMAL COMPASSION NETW PO BOX 1704 SKYLAND, NC 28776-1704		719.
GRANTS ANIMAL PROTECTIVE LEAG 1001 TAINTOR ROAD SPRINGFIELD, IL 62702	UE	901.
GRANTS ANIMAL WELFARE ASSOCIA PO BOX 575 HOWE, IN 46746-0575	TION INC	719.
GRANTS ANIMAL WELFARE SOCIETY PO BOX 475 BLACKWOOD, NJ 08009	OF CAMDEN COUNTY	854.
GRANTS ANIMALS REQUESTING FRI 210 N 3RD BURNT PRAIRIE, IL 6282	ENDS BENEVOLENT SOCIETY	719.
GRANTS BALDWIN ANIMAL RESCUE 306 MAGNOLIA AVENUE FAIRHOPE, AL 36532	CENTER	731.
GRANTS BARREN RIVER ANIMAL WE PO BOX 171 GLASGOW, KY 42141	LFARE ASSOCIATION	719.
GRANTS BEST FRIENDS OF BAKER : PO BOX 185 BAKER CITY, OR 97801	INC	719.
GRANTS BROOKHAVEN ANIMAL RESCU PO BOX 3477 BROOKHAVEN, MS 39603	UE LEAGUE	756.

THE FUND FOR ANIMALS, INC	13-6218740
GRANTS BRUNSWICK ANIMAL LEAGUE 3108 OAK DRIVE SHALLOTTE, NC 28470	719.
GRANTS CALAVERAS HUMANE SOCIETY PO BOX 177 VALLECITO, CA 95251	719.
GRANTS CAPE COD STRANDING NETWORK INC PO BOX 287, 120 MAIN STREET BUZZARD'S BAY, MA 02532	10,000.
GRANTS CATS ANGELS, INC. SPCA PO BOX 16072 FERNANDINA BEACH, FL 32035	806.
GRANTS CENTRAL CALIFORNIA SPCA 103 S HUGHES AVENUE FRESNO, CA 93706	1,561.
GRANTS CHARLOTTESVILLE/ALBEMARLE SPCA 3355 BERKMAR DRIVE CHARLOTTESVILLE, VA 22901	886.
GRANTS COMMUNITY ANIMAL RESCUE EFFORT PO BOX 1234 COLUMBUS, IN 47202	734.
GRANTS EFFINGHAM COUNTY HUMANE SOCIETY 53 VILLAGE SQUARE MALL, EFFINGHAM IL 62401 COLUMBUS, IN 47202	719.
GRANTS FAYETTE FRIENDS OF ANIMALS 223 SEARIGHT-HERBERT ROAD UNIONTOWN, PA 15401	820.
GRANTS FERAL CAT SPAY/NEUTER PROJECT 11331 ROOSEVELT WAY NE SEATTLE, WA 98125-6227	1,129.

THE FUND FOR ANIMALS, INC	13-6218740
GRANTS FOND DU LAC HUMANE SOCIETY 652 TRIANGLE ROAD FOND DU LAC, WI 54935	829.
GRANTS FRIENDS FOR THE DEARBORN ANIMAL SHELTER 2661 GREENFIELD DEARBORN, MI 48120	909.
GRANTS FRIENDS OF KEOKUK ANIMAL SERVICES PO BOX 1181 KEOKUK, IA 52632	744.
GRANTS GREEN MOUNTAIN ANIMAL DEFENDERS PO BOX 4577 BURLINGTON, VT 05406-4577	719.
GRANTS GUAM ANIMALS IN NEED, INC 108 HERMAN CORTEZ AVE SIRENA PLAZA SUITE 100 HAGATNA, GU 96921	954.
GRANTS HEART OF JACKSON HUMANE SOCIETY INC PO BOX 126 HOLTON, KS 66436-0126	744.
GRANTS HUMANE ANIMAL TREATMENT SOCIETY (HATS) 6600 W SHORE DRIVE WEIDMAN, MI 48892	719.
GRANTS HUMANE SOCIETY OF CAMDEN COUNTY 905 S GROVE BLVD KINGSLAND, GA 31548	886.
GRANTS HUMANE SOCIETY OF CHARLES COUNTY PO BOX 1015 WALDORF, MD 20604-1015	964.
GRANTS HUMANE SOCIETY OF HARLINGEN 1106 MARKOWSKY HARLINGEN, TX 78550	769.

THE FUND FOR ANIMALS, INC	13-6218740
GRANTS HUMANE SOCIETY OF KENT COUNTY 3077 WILSON DRIVE NW GRAND RAPIDS, MI 49534	719.
GRANTS HUMANE SOCIETY OF ROME INC PO BOX 4572 ROME, NY 13442	1,191.
GRANTS HUMANE SOCIETY OF TULSA 8988-L S SHERIDAN #284 TULSA, OK 74133	799.
GRANTS JURY-DUTY SPAY AND NEUTER PROGRAM 109 N PALAFOX STREET PENSACOLA, FL 32502	799.
GRANTS KENT COUNTY SPCA 32 SHELTER CIRCLE CAMDEN, DE 19934	879.
GRANTS KITTITAS COUNTY FRIENDS OF ANIMALS 1517 SANDERS ROAD ELLENSBURG, WA 98926	719.
GRANTS LANDER PET CONNECTION PO BOX 99 KINNEAR, WY 82516	719.
GRANTS MCKAMEY ANIMAL CARE & ADOPTION CENTER PO BOX 1028 HIXSON, TN 37343	814.
GRANTS MENOMINEE ANIMAL SHELTER N 184 HAGGERSON CT MENOMINEE, MI 49858	719.
GRANTS MERRIMACK RIVER FELINE RESCUE SOCIETY 63 ELM STREET, ROUTE 110 SALISBURY, MA 01952	1,176.

THE FUND FOR ANIMALS, INC	13-6218740
GRANTS MITCHELL COUNTY ANIMAL RESCUE PO BOX 308 SPRUCE PINE, NC 28777	719.
GRANTS NOAH'S ARK ANIMAL FOUNDATION PO BOX 748 FAIRFIELD, IA 52556	886.
GRANTS PARSIPPANY ANIMAL SUPPORTERS SOCIETY INC PO BOX 5077 PARSIPPANY, NJ 07054-5210	1,466.
GRANTS PARTNERS AMONG CATS & CANINES PO BOX 1133 FRANKLIN, VA 23851	834.
GRANTS PET-OVERPOPULATION PREVENTION ADVOCATES PO BOX 5721 BEAVERTON, OR 97006	831.
GRANTS PROGRESSIVE ANIMAL WELFARE SOCIETY (PAWS-WA) 15305 44TH AVENUE WEST LYNNWOOD, WA 98037	961.
GRANTS PURRFECT CAT RESCUE PO BOX 7958 FREMONT, CA 94537	1,194.
GRANTS RABBITT SANCTUARY, INC 833 FAIRVIEW ROAD SIMPSONVILLE, SC 29680	29,000.
GRANTS RUTHERFORD COUNTY ANIMAL PROTECTION PO BOX 623 RUTHERFORDTON, NC 28139	956.
GRANTS SACRAMENTO AREA ANIMAL COALITION PO BOX 188890	994.

THE FUND FOR ANIMALS, INC	13-6218740
GRANTS SOUTHERN ALLIANCE ANIMAL WELFARE PO BOX 23535 NASHVILLE, TN 37202	756.
GRANTS SPAY/NEUTER YOUR PET PO BOX 477 MEDFORD, OR 97501	819.
GRANTS VIRGINIA PARTNERSHIP ANIMAL WELFARE AND SUPPORT PO BOX 179 CHRISTIANSBURG, VA 24068	994.
GRANTS W.A.G.S. OF MONROE COUNTY INC 60035 VAUGH ROAD AMORY, MS 38821	896.
GRANTS WASHINGTON HUMANE SOCIETY 7319 GEORGIA AVE., NW WASHINGTON, DC 20012	1,601.
GRANTS WILDLIFE ADVOCACY PROJECT 1601 CONNECTICUT AVENUE NW, SUITE 700 WASHINGTON, DC 20009	2,000.
TOTAL INCLUDED ON FORM 990, PART II, LINE 22B	86,608.

13-6218740

FORM 990

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

STATEMENT

3

#### DESCRIPTION OF PROGRAM SERVICE ONE

THE FFA IS AN AFFILIATE ORGANIZATION OF THE HUMANE SOCIETY OF THE UNITED STATES (HSUS). IT IS RESPONSIBLE FOR THE HSUS'S ANIMAL CARE FACILITIES AND IT ALSO INCLUDES AN ANIMAL PROTECTION LITIGATION SECTION WHICH UNDERTAKES PRECEDENT-SETTING LEGAL CAMPAIGNS IN STATE AND FEDERAL COURTS. THESE DIRECT CARE FACILITIES INCLUDE THE CLEVELAND AMORY BLACK BEAUTY RANCH (TX), THE FUND FOR ANIMALS WILDLIFE CENTER (CA), AND THE CAPE WILDLIFE CENTER (MA).

HUMANE EDUCATION: EDUCATE THE PUBLIC ON ISSUES AND EVENTS AFFECTING ANIMAL RIGHTS AND WELFARE.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE A	41,000.	1,903,943.
	···	

13-6218740

FORM 990

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

STATEMENT

4

#### DESCRIPTION OF PROGRAM SERVICE THREE

RURAL AREA VETERINARY SERVICES (RAVS): RAVS, PART OF THE FUND FOR ANIMALS IN 2007 PROVIDED VETERINARY SERVICES TO POOR COMMUNITIES AROUND THE GLOBE, WHETHER IN BOLIVIA OR BELL COUNTY, KENTUCKY. VOLUNTEER VETERINARY STUDENTS WORK WITH PROFESSIONAL VETS TO PROVIDE NOT ONLY ESSENTIAL SERVICES SUCH AS STERILIZATIONS AND VACCINATIONS, BUT ALSO EDUCATIONAL SERVICES SUCH AS TALKS ON DISEASE PREVENTION AND PET CARE.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE C	45,548.	915,046.

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

THE FUND FOR ANIMALS, INC

FORM 990

13-6218740

STATEMENT

DESCRIPTION OF PROGRAM SERVICE FOUR

CAPE WILDLIFE CENTER: THE MISSION OF THE CAPE WILDLIFE CENTER IS TO PROMOTE AND PROTECT THE HEALTH AND WELL-BEING OF WILD ANIMALS AND THEIR HABITATS AS INTEGRAL PARTS OF THE NEW ENGLAND AREA. THE CENTER OPERATES A YEAR-ROUND WILDLIFE REHABILITATION FACILITY AND VETERINARY CLINIC THAT ANNUALLY PROVIDES PROFESSIONAL CARE TO MORE THAN 1,400 INJURED, ILL, AND ORPHANED WILD ANIMALS. VETERINARY STUDENTS AND TECHNICIANS ARE TRAINED AT THIS FACILITY AS WELL.

G	RANTS	E	XPENSES
TO FORM 990, PART III, LINE D			571,404.
FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMP	T PURPOSE	STA	TEMENT 6
EXPLANATION  THE ALLEVIATION OF FEAR, THE PREVENTION OF PAIN AND TO FORTH AND TO FORTH HUMANE CONDUCT TO ENCOURAGE AND SUPPORT THE COOPERATION AMONG ALL PERSON HUMANE ACTIVITIES.	WARD ANIMA	LS AN	ID
FORM 990 OTHER PROGRAM SERVICES		STA	TEMENT 7
DESCRIPTION OF OTHER PROGRAM SERVICES	GRANTS A	_	EXPENSES
CALIFORNIA WILDLIFE REHABILITATION CENTER: IN SOUTHER CALIFORNIA, INJURED AND ORPHANED WILD ANIMALS ARE RESTORED TO HEALTH AND BACK TO THEIR NATIVE WILD HOMES, THANKS TO THE FUND'S 24-HOUR REHABILITATION FACILITY. THE CENTER SPECIALIZES IN LARGE PREDATORS	N		
AND BIRDS OF PREYANIMALS SUCH AS MOUNTAIN LIONS, COYOTES, AND BOBCATS ARE REGULARLY ADMITTED, AND THE LARGEST FREE-FLIGHT RAPTOR AVIARY ON THE WEST COAST I USED TO PREPARE INJURED BIRDS TO GO BACK TO THE WILD.	s	60.	496,577.
TOTAL TO FORM 990, PART III, LINE E	0	60.	496,577.

FORM 990 DEPRECIATION OF ASSE	ETS NOT HELD FOR	INVESTMENT	STATI	EMENT 8
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATIO		VALUE
LAND BUILDINGS & AUTO FURNITURE & EQUIPMENTS	1,490,541. 2,045,194. 321,067.	1,765,16 236,04	5.	,490,541. 280,029. 85,021.
TOTAL TO FORM 990, PART IV, LN 57	3,856,802.	2,001,21	1. 1,	855,591.
FORM 990 PART V-A - LIST OF CU TRUSTEES A	RRENT OFFICERS,		STATI	EMENT 9
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
MARIAN PROBST 200 WEST 57TH STREET,705 NEW YORK, NY 10019	CHAIR/DIRECTOR 35.00	0.	0.	0.
MIKE MARKARIAN 200 WEST 57TH STREET,705 NEW YORK, NY 10019	PRESIDENT/EXEC	UTIVE DIRECT	OR 0.	0.
WAYNE PACELLE 200 WEST 57TH STREET,705 NEW YORK, NY 10019	VICE PRESIDENT	0.	0.	0.
G. THOMAS WAITE III 200 WEST 57TH STREET,705 NEW YORK, NY 10019	TREASURER 1.00	0.	0.	0.
MARY K. BERGE 200 WEST 57TH STREET,705 NEW YORK, NY 10019	ASSISTANT TREAS	SURER 0.	0.	0.
PATRICK MCDONNELL 200 WEST 57TH STREET,705 NEW YORK, NY 10019	DIRECTOR 1.00	0.	0.	0.
WILLIAM F. MANCUSO 200 WEST 57TH STREET,705 NEW YORK, NY 10019	DIRECTOR 1.00	0.	0.	0.

THE FUND FOR ANIMALS, INC			13-62	218740
JUDY NEY 200 WEST 57TH STREET,705 NEW YORK, NY 10019	DIRECTOR 1.00	0.	0.	0.
SHERYL DEMPSEY 200 WEST 57TH STREET,705 NEW YORK, NY 10019	SECRETARY 1.00	0.	0.	0.
DAVID WEIBERS 200 WEST 57TH STREET,705 NEW YORK, NY 10019	DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON FORM 990,	PART V-A	0.	0.	0.

13-6218740

FORM 990 PART V-A OFFICER COMPENSATION FROM RELATED ORGANIZATIONS

STATEMENT 10

OFFICER'S NAME

COMPENSATION

BENEFIT PLAN EXPENSE CONTRIBUTION ACCOUNT

EMPLOYEE

MICHAEL MARKARIAN

170,923.

16,264.

0.

NAME OF RELATED ORGANIZATION

EMPLOYER ID NUMBER

HUMANE SOCIETY OF THE UNITED STATES

53-0225390

RELATIONSHIP BETWEEN ORGANIZATIONS

CONTROLLED BY HSUS

COMPENSATION DESCRIPTION

COMPENSATION RECIEVED FOR PERFORMING DUTIES OF EXECUTIVE VP, EXTERNAL AFFAIRS OF THE HUMANE SOCIETY OF THE UNITED STATES.

OFFICER'S NAME

COMPENSATION CONTRIBUTION ACCOUNT

BENEFIT PLAN EXPENSE

G. THOMAS WAITE, III

180,616.

23,510.

**EMPLOYEE** 

0.

NAME OF RELATED ORGANIZATION

EMPLOYER ID NUMBER

HUMANE SOCIETY OF THE UNITED STATES

53-0225390

RELATIONSHIP BETWEEN ORGANIZATIONS

CONTROLLED BY HSUS

COMPENSATION DESCRIPTION

COMPENSATION RECIEVED FOR PERFORMING DUTIES OF TREASURER/CFO OF THE HUMANE SOCIETY OF THE UNITED STATES.

13-6218740

	EMPLOYEE			
	BENEFIT PLAN	EXPENSE		
COMPENSATION	CONTRIBUTION	ACCOUNT		

MARY KATHERINE BERGE 125,369.

23,821.

0.

NAME OF RELATED ORGANIZATION

EMPLOYER ID NUMBER

HUMANE SOCIETY OF THE UNITED STATES

53-0225390

RELATIONSHIP BETWEEN ORGANIZATIONS

CONTROLLED BY HSUS

OFFICER'S NAME

COMPENSATION DESCRIPTION

COMPENSATION RECIEVED FOR PERFORMING DUTIES OF ASSISTANT TREASURER OF THE HUMANE SOCIETY OF THE UNITED STATES.

OFFICER'S NAME	COMPENSATION	EMPLOYEE BENEFIT PLAN CONTRIBUTION	EXPENSE ACCOUNT
MARTA PRADO	134,466.	12,844.	0.
NAME OF RELATED ORGANIZATION		EMPLOYER	ID NUMBER
HUMANE SOCIETY INTERNATIONAL, INC		52-17	769464

RELATIONSHIP BETWEEN ORGANIZATIONS

CONTROLLED BY HSUS

COMPENSATION DESCRIPTION

COMPENSATION RECIEVED FOR PERFORMING DUTIES OF EXECUTIVE DIRECTOR OF THE HUMANE SOCIETY INTERNATIONAL, INC.

THE FUND FOR ANIMALS, INC

13-6218740

EMPLOYEE

BENEFIT PLAN EXPENSE CONTRIBUTION ACCOUNT

215,308.

COMPENSATION

19,445.

0.

NAME OF RELATED ORGANIZATION

EMPLOYER ID NUMBER

HUMANE SOCIETY OF THE UNITED STATES

53-0225390

RELATIONSHIP BETWEEN ORGANIZATIONS

CONTROLLED BY HSUS

OFFICER'S NAME

WAYNE PACELLE

COMPENSATION DESCRIPTION

COMPENSATION RECIEVED FOR PERFORMING DUTIES OF PRESIDENT/CEO OF THE HUMANE SOCIETY OF THE UNITED STATES.

FORM 990

LIST OF STATES RECEIVING COPY OF RETURN
PART VI, LINE 90

STATEMENT

11

STATES

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

SCHEDULE A

EXPLANATION OF QUALIFICATIONS TO RECEIVE PAYMENTS STATEMENT 12 PART III, LINE 3A

AN ANALYSIS AND CALCULATION IS MADE OF ALL REQUESTS FOR FUNDS TO OTHER ORGANIZATIONS. IF THE SOLICITING ORGANIZATION IS IN THE POSITION OF AIDING IN THE FUND'S GOALS, THEN THE MONEY WILL BE GRANTED.

13-6218740

SCHEDULE A	OTHER INC	OME	ST	ATEMENT	13
DESCRIPTION	2006 AMOUNT	2005 AMOUNT	2004 AMOUNT	2003 AMOUNT	
OTHER INCOME	472,305.	58,151.	0.		0.
TOTAL TO SCHEDULE A, LINE 22	472,305.	58,151.	0.		0.

Form **8868** (Rev. April 2008)

Department of the Treasury

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

OMB No. 1545-1709

File a separate application for each return. Internal Revenue Service ● 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 **▶**□ 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 Fiting (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 and click on e-file for Charities & Nonprofits. Employer identification number Name of Exempt Organization Type or print 13-6218740 THE FUND FOR ANIMALS, INC File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filing your 200 WEST 57TH STREET, NO. 705 City, town or post office, state, and ZIP code. For a foreign address, see instructions. Instructions NEW YORK, NY 10019 Check type of return to be filed (file a separate application for each return): Form 4720 Form 990-T (corporation) X Form 990 Form 5227 Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 6069 Form 990-EZ Form 990-T (trust other than above) Form 8870 Form 990-PF Form 1041-A The books are in the care of THE FUND FOR ANIMALS, INC FAX No. Telephone No. ► 212-246-2096 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. I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2008 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2007 or tax year beginning , and ending Change in accounting period If this tax year is for less than 12 months, check reason: initial return Final return 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. 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. 3b 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). 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. Form 8868 (Rev. 4-2008) For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 4-2008)		Page 2
• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this bo	ж	<b>▶</b> X
Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed		
If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).		
Part II Additional (Not Automatic) 3-Month Extension of Time. You must file original and	one c	ору.
Type or Name of Exempt Organization	Emp	ioyer Identification number
print	_	
THE FUND FOR ANIMALS, INC		3-6218740
extended Number, street, and room or suite no. If a P.O. box, see instructions.	For I	RS use only
filing the 200 WEST 5/III STREET, NO. 705	l	
return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions.  NEW YORK, NY 10019		
Check type of return to be filed (File a separate application for each return):		
X Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A	□ F	orm 5227 Form 8870
Form 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720	Fo	orm 6069
STOPI Do not complete Part II if you were not already granted an automatic 3-month extension on a previous	sly file	ed Form 8868.
The books are in the care of ▶ THE FUND FOR ANIMALS, INC		
Telephone No. ► 212-246-2096 FAX No. ►		
If the organization does not have an office or place of business in the United States, check this box		<b>D</b>
• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this		
box ▶ . If it is for part of the group, check this box ▶ . and attach a list with the names and EINs of all	memb	ers the extension is for.
4 I request an additional 3-month extension of time until NOVEMBER 15, 2008.		
5 For calendar year 2007, or other tax year beginning, and ending,		<u> </u>
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 ADDITIONAL TIME IS REQUIRED TO GATHER INFOR	MAT	ION AND FILE AN
AND COMPLETE 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.	•	
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated	8a	\$
tax payments made. Include any prior year overpayment allowed as a credit and any amount paid		
previously with Form 8868.	8b	\$
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit		· ¥ · · · · · · · · · · · · · · · · · ·
with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	s 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 it is true, correct, and complete, and that I am authorized to prepare this form.	best o	f my knowledge and belief,
Signature Accountant	Date	· 8/11/02
	- Duit	Form <b>8868</b> (Rev. 4-2008)

# UNITED STATES DISTRICT COURT FOR THE DISTRICT OF COLUMBIA

FELD ENTERTAINMENT, INC.

•

Plaintiff,

.

v. : Case No. 07- 1532 (EGS)

:

AMERICAN SOCIETY FOR THE

PREVENTION OF CRUELTY

ANIMALS, et al.

:

Defendants.

.

PLAINTIFF'S OPPOSITION TO SUPPLEMENTAL MOTION OF DEFENDANT
HUMANE SOCIETY OF THE UNITED STATES TO DISMISS PLAINTIFF'S
AMENDED COMPLAINT

# **EXHIBIT 3**

Form **990** 

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Services

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

Open to Public Inspection

A F	or the	2008 calendar year, or tax year beginning an	d ending				
3 0	heck if	Please C Name of organization		D Employer identific	eation number		
	Addres change	S label of Thur FIND FOD ANTMATC TAIC					
	Name change	Noe	13-6:	218740			
	Initial return	Number and street (or P 0. box if mail is not delivered to street address)		E Telephone number			
	Termin	Instruc-	705	212-3	246-2096		
느	Amend return Applica	City of town, state of country, and ZIP + 4		G Gross receipts \$	12,140,695.		
_	bon pendin	I MEN TORRY NI 10015	Τ	H(a) is this a group re	tum		
		SAME AS C ABOVE	1	for affiliates?  H(b) Are all affiliates incl			
1 1	ax-exe	empt status: X 501(c) (3 ) ◀ (Insert no.)	7	1 ''	list. (see instructions)		
		e: WWW.FUNDFORANIMALS.ORG		H(c) Group exemption	•		
		organization X Corporation Trust Association Other ▶	L Year	of formation 1967 M	State of legal domicile NY		
Pa	rt1	Summary					
9	1	Briefly describe the organization's mission or most significant activities: TO	BE RESI	COURSE FOR	THE HSUS'S		
Activities & Governance	'	ANIMAL CARE FACILITIES AND LEGAL CAMPAI					
Š	l	Check this box   If the organization discontinued its operations or disponder of voting members of the governing body (Part VI, line 1a)	osed of more	3   3			
ĝ		Number of voting members of the governing body (Fart VI, line 1a)	<b>)</b>	4	<u>5</u>		
ର୍ଷ ପ୍ର		Total number of employees (Part V, line 2a)	,	5	0		
¥		Total number of volunteers (estimate if necessary)		6	128		
ŧ	7a '	Total gross unrelated business revenue from Part VIII, line 12, column (C)		7a	0.		
_	ь	Net unrelated business taxable income from Form 990-T, line 34		7ь	0.		
			-	Prior Year	Current Year		
93	l .	Contributions and grants (Part VIII, line 1h)		8,074,894. 12,057.	11,695,346.		
Revenue		Program service revenue (Part VIII, line 2g)	-	120,413.	113,300.		
æ		Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11a)	<u> </u>	460,369.	332,029.		
	1	Total revenue - add lines 8 through 11 (must equal Raf Mill Comm (A), line 12	,	8,667,733.	12,140,695.		
				86,608.	271,775.		
	14	Benefits paid to or for members (Part X, column (A), line 4)					
S.	15	Salaries, other compensation, employed penetratipar (Par (X) column (A), tipes 5-10	))	1,747,975.	1,573,764.		
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	L.	83,548.	112,367.		
×		Total fundraising expenses (Part IX, column (9), line 25 N. UT 670,	879.	2 511 602	2 720 056		
w		Other expenses (Part IX, column (A), lines 11a446-711-249)	<u> </u>	3,511,603.	2,720,056. 4,677,962.		
	ı	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		5,429,734. 3,237,999.	7,462,733.		
S		Revenue less expenses. Subtract line 18 from line 12	<del></del>	Beginning of Year	End of Year		
Balances	20	Total assets (Part X, line 16)		7,623,497.	14,407,447.		
器	21	Total liabilities (Part X, line 26)		799,735.	120,952.		
		Net assets or fund balances. Subtract line 21 from line 20		6,823,762.	14,286,495.		
P	art II	Signature Block					
		Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and complete Declaration of preparer for the officer) is based on all information of which preparer has	and statements, is any knowledge	and to the best of my knowledg	ge and belief, it is true, correct,		
	,			1	glalog		
Sign		Signature of officer		Date	11101		
G THOMAS WAITE III							
	Type or print name and title						
		Preparer's Date			er's identifying number itructions)		
signature \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \							
•	Only	Firm's name (or RSM MCGLADREY, INC.	00	EIN ►			
- <b>-</b>	J,	8000 TOWERS CRESCENT DR. STE 5	UU	Dha > 7	03-336-6400		
	- Ab = 15	OC draws the return with the conservations have about 2 (recleatively)		I rhone no P /	X Yes No		
	<u>/ the II</u> 01 12-1	RS discuss this return with the preparer shown above? (see instructions) 8-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the	senarate inc	tructions.	Form <b>990</b> (2008)		
N20	VI 12-1	and fill in Lindal Lot and Laborative Legendral Lot Legical and me					

Form	990 (2008) THE FUND FOR ANIMALS, INC	13-6218740	Page 2
Pa	rt 祖   Statement of Program Service Accomplishments (see instructions)		
1	Briefly describe the organization's mission:		
	THE ALLEVIATION OF FEAR, PREVENTION OF PAIN AND THE REL		
	SUFFERING OF ANIMALS EVERYWHERE AND TO FOSTER HUMANE COL	NDUCT TOWAR	D
	ANIMALS AND ENCOURAGE AND SUPPORT THE COOPERATION AMONG	ALL PERSON	S
	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?	[ Ye	s X No
	If 'Yes', describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	□ve	s X No
3			140 (AE) 140
	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 ex		
	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.		
40	(Code: ) (Expenses \$ 1,786,771. including grants of \$ 271,775.) (Re		20.)
4a	(Code: ) (Expenses \$ 1,786,771 • including grants of \$ 271,775 • ) (Rehumane Education: Educate The Public on Issues and Even!		•
	ANIMAL RIGHTS AND WELFARE.	IS AFFECTIN	<del></del>
	ANIMAL RIGHTS AND WELFARE.		
4b	(Code: ) (Expenses \$ 972,488 • including grants of \$ ) (R	evenue \$	)
70	CLEVELAND AMORY BLACK BEAUTY RANCH: THE 1,320 ACRE REFU		<b>т</b> О ′
	NEARLY 1,300 ANIMALS ON 1,300 ACRES OF PERMANENT SANCTU		
	LIVING ON THE SANCTUARY INCLUDE MANY EXOTIC AND NATIVE		
	INCLUDING CHIMPANZEES, HORSES, CAMELS, BISON, AND ANTELO		S 00
	NOT GET HARASSSED OR HARMED, BUT ARE PROVIDED WITH A HE	LPING HAMD	AND A
	LOVING HOME.		
	A A STATE STATE OF THE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE S		
		<u> </u>	
4c	(Code: ) (Expenses \$ 482,693. Including grants of \$ ) (Re	evenue \$	)
	CAPE WILDLIFE CENTER: PROMOTES AND PROTECTS THE HEALTH	AND WELL-BE	ING
	OF WILD ANIMALS AND THEIR HABITATS AS INTEGRAL PARTS OF	THE NEW EN	GLAND
	AREA. THE CENTER OPERATES A YEAR-ROUND WILDLIFE REHABI	LITATION	
	FACILITY AND VETERINARY CLINIC. IN 2008, 1,852 INJURED		D
	ANIMALS WERE TREATED AND RETURNED TO THE WILD.		
	Milland water Individual Table Williams To The Wille		
4d	Other program services. (Describe in Schedule O.)		
	(Expenses \$ 478, 275 • including grants of \$ ) (Revenue \$	)	
4e	Total program service expenses ▶\$ 3,720,227. (Must equal Part IX, Line 25, column (B))		
		Form	990 (2008)
83200 12-18	-08		
	3		

Form 990 (2008) Part IV Checklist of Required Schedules

THE FUND FOR ANIMALS, INC

13-6218740 Page 3

			Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		ζ.	
_	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2_	<u>X</u>	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	2		
	public office? If "Yes," complete Schedule C, Part I	4	Х	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		^	<del> </del>
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and	5		ł
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	<u> </u>	<u> </u>	
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7		0		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
۰	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete		ļ	-
8		8		x
9	Schedule D, Part III  Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide		<del></del>	
9	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	•	х
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	<del></del>	X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?	-10		<del></del>
••	If "Yes," complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	х	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was			
12.	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		X
13	Is the organization a school as described in section 170(b)(1)(A)(li)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
•	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity			
	located outside the United States? If "Yes," complete Schedule F, Part II	15		Х
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	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17	X	
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	X	L
24a				
	last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K.			
	If "No", go to question 25	24a		X
-	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<u> </u>	ļ
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease		1	
	any tax-exempt bonds?	24c	<u> </u>	ļ
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	<u> </u>	├
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	<u> </u>	X
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a			,,
	pnor year? If "Yes," complete Schedule L, Part I	25b	—	X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	١.		
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial			U
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	_27	000	X
		rom	990	(2008)

Form:	990 (2008) THE FUND FOR ANIMALS, INC 13	<u>-6218/40</u>	P	age 4
Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or a	ນາ		
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with o	other		
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X_
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional	ad l		
	corporation) doing business with the organization? 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?			
	If "Yes," complete Schedule N, Part I	31	L	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	1		
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	1		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	L	X
34	Was the organization related to any tax-exempt or taxable entity?		1	
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	X	<u> </u>
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			1
	If "Yes," complete Schedule R, Part V, line 2	35	ļ	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization	zation?		
	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

Form **990** (2008)

	990 (2008) THE FUND FOR ANIMALS, INC	13-6218	<u> 3740</u>	P	age <u>5</u>
Pa	t V Statements Regarding Other IRS Filings and Tax Compliance				
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of				
	U.S. Information Returns. Enter -0- if not applicable	1a (			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b (	)		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eportable gaming			
	(gambling) winnings to prize winners?		1c		<u> </u>
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	28 (	)		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	rns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see	instructions)			
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	ed by this retum?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	·	3ь		
	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		Х
ь	If "Yes," enter the name of the foreign country: ▶	,			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign	Bank and			
	Financial Accounts.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a	]	Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	action?	5b		Х
	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity				
•	Tax Shelter Transaction?	riogai onig i romonou	5c		
6a	Did the organization solicit any contributions that were not tax deductible?		6a		Х
	If "Yes," did the organization include with every solicitation an express statement that such contribution	tions or aifts			
•	were not tax deductible?		6ь		
7	Organizations that may receive deductible contributions under section 170(c).				
	Did the organization provide goods or services in exchange for any quid pro quo contribution of mor	e than \$75?	7a	]	Х
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	- trial ( )	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required		i -	
•	to file Form 8282?		7c		х
d	if "Yes," indicate the number of Forms 8282 filed during the year	7d			
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a		1		
Ī	benefit contract?		7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont	ract?	7f	<u> </u>	Х
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required		79		
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-		7h		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sec	•			
-	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring or				
	excess business holdings at any time during the year?	<b>3</b>	8		Х
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.				
а	Did the organization make any taxable distributions under section 4966?		9a		Х
	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		Х
10	Section 501(c)(7) organizations. Enter: N/A				
	Initiation fees and capital contributions included on Part VIII, line 12	10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	1		
11	Section 501(c)(12) organizations. Enter: N/A	L-7,4	1		
а	Gross income from members or shareholders	11a			
ь	Gross income from other sources (Do not net amounts due or paid to other sources against		1		
•	amounts due or received from them.)	116			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		
	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year N/A	126			
			Form	990 (	20081

	1990 (2008) THE FUND FOR ANIMALS, INC 13-621			age b
Pa	rt VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not referral Revenue Code)	equired	by the	•
Sec	tion A. Governing Body and Management			
	,		Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,			
	processes, or changes in Schedule O. See instructions.			
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	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	ļ	X
6	Does the organization have members or stockholders?	6		Х
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the		22	
	governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Х
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?	86		<u> </u>
	Does the organization have local chapters, branches, or affiliates?	9a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	9b		ļ
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must			
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X	
11	Is there any officer, director or 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	11		Х
Sec	tion B. Policies	_		<del></del>
			Yes	No
12a	• • • • • • • • • • • • • • • • • • • •	12a	Х	<u> </u>
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise		l	
	to conflicts?	12b	Х	
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		.,	
	in Schedule O how this is done	12c	X	<del></del>
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	ļ
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:			
	The organization's CEO, Executive Director, or top management official?	15a		X
b	Other officers or key employees of the organization?	15b	ļ	X
	Describe the process in Schedule O. (see instructions)			
16 _a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			U
	taxable entity during the year?	16a		X
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?	16b	<u> </u>	L
<u>Sec</u>	tion C. Disclosure	<del></del>		77.0
17	List the states with which a copy of this Form 990 is required to be filed AK, AL, AR, AZ, CA, CO, CT, FL, G		, 11	, KS
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	le for		
	public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,	and fina	ncial	
	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 of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of the person of	zation:		
	C. THOMAS WAITE, III - 202-452-1100			
00000	700 PROFESSIONAL DRIVE, GAITHERSBURG, MD 20879			
83200	SEE SCHEDULE O FOR FULL LIST OF STATES	Form	990	(2008)

Form 990 (2008)

THE FUND FOR ANIMALS, INC

13-6218740

Page 7

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

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

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

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

(A) Name and Title	(B) Average		(C) Position (check all that apply)					(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	Endwichtel frusses or director	neci eassus ignofutationi	Call		Highest compensated to the employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
MARIAN PROBST								_		
CHAIR/DIRECTOR	1.00	X			<u> </u>			0.	0.	0.
PATRICK MCDONNELL			-						_	
DIRECTOR	1.00	X		_	ļ		Ш	0.	0.	0.
WILLIAM F. MANCUSO										
DIRECTOR	1.00	X	<u> </u>	<u> </u>	<u> </u>	L		0.	0.	0.
JUDY NEY										
DIRECTOR	1.00	X	┞	_	<u> </u>	╙	Щ	0.	0.	0.
DAVID WEIBERS								•		
DIRECTOR	1.00	X	-			├		0.	0.	0.
MIKE MARKARIAN	1 00	l		١				•	101 600	10 270
PRESIDENT	1.00	<u> </u>		X	-	-		0.	181,629.	18,378.
WAYNE PACELLE	1 00					ļ		0.	220 001	22 252
VICE PRESIDENT	1.00	⊢	⊢	X		$\vdash$	Н	<u> </u>	228,981.	22,252.
G. THOMAS WAITE III	1.00			x				0.	184,744.	23,356.
TREASURER MARY K. BERGE	1.00	$\vdash$	$\vdash$	^	├	$\vdash$	$\vdash$	0.	104,744.	23,330.
ASSISTANT TREASURER	1.00	l	l	X				0.	128,106.	23,882.
SHERYL DEMPSEY	1.00	┝		ı.	$\vdash$	├-		<u> </u>	120,100.	25,002.
SECRETARY	1.00		1	x				0.	49,072.	8,146.
KAY LISCOMB	1000	├		-	_	├-			15/0120	0,110
VP, ADMIN & ANIMAL CARE C	40.00		ļ			X		0.	115,568.	22,136.
										,
						_				
										1/2
	-		T	T		$\vdash$	H			
	<u> </u>				<u> </u>	L	Ш			

832007 12-18-08

	990 (2008) THE FUND									13-62	<u>:18</u>	/40	P	age 8
Par	t VII Section A. Officers, Directors, Tru	stees, Key Eı	mplo	yee	s, a	nd l	High	est	Compensated Employ	ees (continued)				
	(A) Nàme and title	(B) Average hours per week	individual trustee or director	eckintensi trustae	Posi all	that			(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensatio from related organizations (W-2/1099-MIS	3	comp fro	(F) timate nount other censa om the anizat i relati	of tion e ion
			Individ	Institut	Officer	Key employee	Highes	Former				orga	nizati	ons
														-
16	Total		<u>L</u> .	L	<u> </u>	L		L	0.	888,10	00.	11	8,1	50.
2	Total number of individuals (including those	ın 1a) who re	celv	ed n	nore	tha	n \$1	00,	000 in reportable			<del></del>		
	compensation from the organization	<del></del>									<u> </u>	1	Yes	No
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s			, ke	y en	nplo	yee,	or i	highest compensated er	nployee on		3		х
4	For any individual listed on line 1a, is the su and related organizations greater than \$150	m of reportab	le co							the organization		4	х	
5	Did any person listed on line 1a receive or a the organization? If "Yes," complete Sched	ccrue compe	nsat	ion f						ices rendered to		5		х
Sec	tion B. Independent Contractors									¥				
<u> </u>	Complete this table for your five highest co the organization.	mpensated in	depe	ende	ent c	onti	racto	ors		\$100,000 of com	pens			
	(A) Name and business	address							(B) Description of s	services	С	O) omper		ก
AL								MANUFACTURIN	G AND			^ ^	45	
425	5 N. IRIS ST, MT. PLEAS	SANT, I	A !	526	94.	<u> </u>			PRINTING			12	9,8	<u>45.</u>
									(4)					
2	Total number of independent contractors (i	ncluding those	e in '	1) wl	ho ri	9001	ved	moi	re than \$100,000 in com	pensation	<i>P</i> 1			<u>-</u>
	from the organization									1.		Form (	000	2008)

art	VIII		nue		INC (A)	(B)	13-6218 (C)	(D)
		*			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
2 1	a	Federated campaigns	1a					
and other similar amounts	b	Membership dues	1b					
	C	Fundraising events	1c					
	d	Related organizations	1d					
		Government grants (contribut						
	f	All other contributions, gifts, gran	1 1					
6		similar amounts not included above		64,124.				
퇿	_	Noncash contributions included in lines	1a-1f \$	04,124.	11 605 346			
+-	n	Total. Add lines 1a-1f		Business Code	11,695,346.			
١,		LITERATURE		Business Code	20.	20.		Ì
2	b b				200			
2	c							
<b>8</b>	d						<del></del>	
2 Yevenue				·	*****			<u> </u>
	f	All other program service reve	กบอ					
		Total. Add lines 2a-2f		<b>&gt;</b>	20.		•	
3		Investment income (including	dividends, intere	st, and				
1		other similar amounts)		<b>&gt;</b>	109,200.			109,200
4	ŀ	Income from investment of ta	x-exempt bond p	roceeds 🕨				
5	5	Royalties		<b>&gt;</b>	58,265.		····	58,265
			(i) Real	(ii) Personal				
6	a	Gross Rents						
	b	Less: rental expenses						
	C	Rental income or (loss)						
	d	Net rental income or (loss)		<u> </u>				ļ
7	a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory		4,100.				
	b	Less: cost or other basis						
		and sales expenses		4 100				
		Gain or (loss)		4,100.	4 100			4 100
		Net gain or (loss)		<b>_</b> _	4,100.			4,100
8	a	Gross income from fundraisin	•					
		including \$						
		contributions reported on line	1c). See					
		Part IV, line 18	a					
		Less: direct expenses	b training events		:	1		
_		Net income or (loss) from fund Gross income from gaming ad	-					1
*	, 43	Part IV, line 19	a a		'			
		Less: direct expenses	b					
1		Net income or (loss) from garr	_	<b>—</b>		]		
10	-	Gross sales of inventory, less	•					
'"		and allowances	a					
	ь	Less: cost of goods sold	b					
		Net income or (loss) from sale	s of inventory	<b>D</b>	· ·	<u>                                     </u>		<u> </u>
	_	Miscellaneous Revenu		Business Code				
11	la	MICORITANDONO I			273,764.			273,764
	ь							
	c							
	đ	All other revenue						
1	9	Total. Add lines 11a-11d		<b>&gt;</b>	273,764.	<del></del>		
-[					12,140,695.	20.	0	. 445,329

13-6218740 Page 10

Form 990 (2008) THE FUND FOR Part IX Statement of Functional Expenses

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

	All other organizations must comp				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	271,775.	271,775.		*****************************
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	1,254,776.	1,018,113.	70,884.	165,779.
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)			10 (00	
9	Other employee benefits	223,096.	181,018.	12,603.	29,475.
10	Payroll taxes	95,892.	77,806.	5,417.	12,669.
11	Fees for services (non-employees):				
a	Management	266 572	216 205	15 050	25 210
b	Legal	266,573.	216,295.	15,059.	35,219.
C	Accounting				<u> </u>
d	Lobbying	112 267			110 267
0	Professional fundraising services See Part IV, line 17	112,367.			112,367.
f	Investment management fees	212 704	170 560	12 020	20 216
9	Other	213,704.	170,568.	12,920.	30,216.
12	Advertising and promotion	560 A72	440 420	26 255	84,790.
13	Office expenses	569,473.	448,428.	36,255.	04,790.
14	Information technology				
15	Royalties	560,406.	454,708.	31,658.	74,040.
16	Occupancy	130,448.	105,844.	7,369.	17,235.
17	Travel	130,440.	103,644.	7,309.	17,233.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	31,519.	19,202.	3,689.	8,628.
20	Interest	31,319.	13,202.	3,003.	0,020.
21	Payments to affiliates	104,484.	84,778.	5,902.	13,804.
22	Depreciation, depletion, and amortization	491.	398.	28.	65.
23	Insurance	771.	330.	200	05.
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)				
а	MAILING COSTS	763,126.	607,996.	80,119.	75,011.
ь	EDUCATION MATERIAL	61,375.	48,322.	3,910.	9,143.
C	REAL ESTATE & OTHER TAX	18,457.	14,976.	1,043.	2,438.
d					
е					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	4,677,962.	3,720,227.	286,856.	670,879.
26	Joint Costs. Check here ▶ 🗶 if following				
	SOP 98-2 Complete this line only if the organization		ļ		
	reported in column (B) joint costs from a combined		_		
	educational campaign and fundraising solicitation	1,278,562.	612,569.	38,357.	627,636.
83201	0 12-18-08				Form <b>990</b> (2008)

	990 (		NIM	ALS, INC		<u> 13-</u>	6218740	Pa	ge 11
Pa	ŧΧ	Balance Sheet							
		•			(A) Beginning of year		(B) End of		
					Deditting of Asst		2100	year	
	1	'Cash - non-interest-bearing		}	5,329,751.	1	17	<u>a a</u>	80.
	2	Savings and temporary cash investments		}	37,330.		5,61	5, <u>2</u>	24
	3	Pledges and grants receivable, net		-	397,419.		3,01	$\frac{3}{9}, \frac{4}{4}$	14.
	4	Accounts receivable, net			337,413.	4	43	7,4	14.
	5	Receivables from current and former officers, di		- 1		_			
		employees, or other related parties. Complete P		t .		5			<del></del>
	6	Receivables from other disqualified persons (as		•					
		4958(f)(1)) and persons described in section 495	58(c)(3)(	B). Complete					
	_	Part II of Schedule L		}		6			
Assets	7	Notes and loans receivable, net		-		7			
\ss	8	Inventories for sale or use		-	3,146.	8			
•	9	Prepaid expenses and deferred charges	1 1	2 171 007	3,140.	9			
		Land, buildings, and equipment: cost basis	10a	3,171,887.					
	þ	Less: accumulated depreciation. Complete		1 245 272	1 055 501	_	1 00	<i>c</i> =	1 6
		Part VI of Schedule D	106	1,345,372.	1,855,591.		1,82	5,3	13.
	11	Investments · publicly traded securities		-		11			
	12	Investments · other securities. See Part IV, line		}-	<u> </u>	12			
	13	Investments · program-related. See Part IV, line	11	ļ.,		13	<u> </u>		
	14	Intangible assets		-	260	14	6 34	<del></del>	1.4
	15	Other assets. See Part IV, line 11		-	260.		6,34		
	16	Total assets. Add lines 1 through 15 (must equ	al line 3	4)	7,623,497.		14,40		
	17	Accounts payable and accrued expenses		-	141,340.	1	12	0,9	<u>52.</u>
	18	Grants payable		-		18	7.515	<del></del> -	
	19	Deferred revenue		-		19			
	20	Tax-exempt bond liabilities		.  -	<del></del>	20	<del> </del>		
8	21	Escrow account liability. Complete Part IV of Sc		· · · · · · · · · · · · · · · · · · ·		21			
Liabilities	22	Payables to current and former officers, director							
喜		highest compensated employees, and disqualif		'	•				
_		of Schedule L		<u> </u>		22	ļ		
	23	Secured mortgages and notes payable to unrel	ated the	rd parties		23			
	24	Unsecured notes and loans payable		-	650 205	24	}	<del></del>	^
	25	Other liabilities. Complete Part X of Schedule D		-	658,395. 799,735.	25	12		0. 52.
	26	Total liabilities. Add lines 17 through 25		<b>V</b>	199,133.	26	12	0,3	<u>52.</u>
		Organizations that follow SFAS 117, check h	ere 🚩	X and complete					
ances		lines 27 through 29, and lines 33 and 34.		ŀ	6,823,762.		14,28	6 1	95
	27	Unrestricted net assets		}	0,023,102.		14,20	0,4	,,,
8	28	Temporarily restricted net assets		}		28			
밀	29	Permanently restricted net assets		<u> </u>	<del> </del>	29			
Ţ		Organizations that do not follow SFAS 117, c	neck h	ere 🕨 🔲 and					
ō		complete lines 30 through 34.		ŀ			ŀ		
Set	30	Capital stock or trust principal, or current funds				30			
Net Assets or Fund Bai	31	Paid-in or capital surplus, or land, building, or ed				31			
že i	32	Retained earnings, endowment, accumulated in	come,	or other tunos	6,823,762.	32	14,28	6 1	95
_	33	Total net assets or fund balances		}	7,623,497.	34	14,40	7 1	<del>93.</del>
10-	34	Total liabilities and net assets/fund balances			1,023,491.	34	14,40	1,12	<del>3/•</del>
re	LA	Financial Statements and Reporting	<u> </u>				<u>-</u>	Yes	No
	<b>A</b>	tipe method wood to proper the Form 000.	Ca	sh X Accrual	Other				
1		ounting method used to prepare the Form 990:					2.	i	x
2a		e the organization's financial statements compiled			wounds!		2a 2b		X
þ		e the organization's financial statements audited l			albility for avamiable of the	مارسانه			<del>                                     </del>
C		es" to lines 2a or 2b, does the organization have a w, or compilation of its financial statements and s		•	•	s audil	. 2c		
2-		w, or compliation of its financial statements and t result of a federal award, was the organization re				nle Arr			
J		result of a legeral award, was the organization re and OMB Circular A-133?	4-11-00		an our form in the Only	, ~ rw	3a		х
ь		es,* did the organization undergo the required au	dit or a	ıdıts?			3b		
	1 12-18	Unio			· · · · · · · · · · · · · · · · · · ·			990	(2008)

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

Department of the Treasury Internal Revenue Service

## **Public Charity Status and Public Support**

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

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

OMB No 1545-0047

Open to Public Inspection

Nam	e of t	the organizati							Į E		identification number
				D FOR ANIMAI							3-6218740
Pa	rt I	Reason	for Public Char	ity Status (All organi	zations mu	st complet	e this par	t.) (see ins	tructions)		
The o	organ	ization is not a	a private foundation	because it is: (Please ch	neck only o	ne organi	zation.)				
1		A church, co	nvention of churche	s, or association of chui	rches desc	nbed in se	ction 170	(b)(1)(A)(i)	).		
2		A school des	cribed in section 17	<b>'0(b)(1)(A)(ii).</b> (Attach Sc	chedule E.)						
3		A hospital or	a cooperative hospi	tal service organization	described	ın section	170(b)(1)	<b>(A)(iii</b> ). (At	tach Sche	dule H.)	
4		A medical res	search organization	operated in conjunction	with a hos	prtal descr	nbed in se	ction 170	(b)(1)(A)(i	li). Enter t	the hospital's name,
		city, and stat	e:								
5		An organizati	on operated for the	benefit of a college or u	niversity o	wned or op	perated by	a govern	mental un	t describ	ed in
		section 170	(b)(1)(A)(iv). (Comple	ete Part II.)							
6		A federal, sta	ite, or local governm	ent or governmental un	rt describe	d in sectio	n 170(b)(1	I)(A)(v).			
7	X	An organizati	on that normally rec	erves a substantial part	of its supp	ort from a	governme	ental unit d	or from the	general	public described in
		section 170(	<b>b)(1)(A)(vi)</b> . (Comple	te Part II.)							
8		A community	trust described in s	ection 170(b)(1)(A)(vi).	(Complete	Part II.)					
9		An organizati	on that normally rec	erves: (1) more than 33	1/3% of its	support f	rom contn	butions, n	nembersh	p fees, a	nd gross receipts from
		activities rela	ted to its exempt fui	nctions - subject to certa	ain excepti	ons, and (	2) no more	than 33 1	1/3% of its	support	from gross investment
		income and u	unrelated business t	axable income (less sec	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	anization i	after June 30, 1975.
		See section	509(a)(2). (Complete	the Part III.)							
10		An organizati	on organized and or	perated exclusively to te	est for publ	ic safety. S	See sectio	n 509(a)(4	<b>1). (see</b> ins	structions	)
11		An organizati	on organized and or	perated exclusively for t	he benefit	of, to perfo	m the fu	nctions of	, or to can	y out the	purposes of one or
		more publicly	supported organiza	ations described in sect	юп 5 <b>09</b> (а)(	1) or section	on 509(a)(2	2). See <b>se</b> e	ction 509	( <b>a)(3).</b> Che	eck the box that
		describes the	type of supporting	organization and comp	lete lines 1	1e through	11h.				
		a Type I		_ · / [ · · ·		e III - Func	•	-		اه	Type III - Other
0		By checking	this box, I certify tha	at the organization is not	t controlled	directly o	r indirectly	by one o	r more dis	qualified	persons other than
		foundation m	nanagers and other t	han one or more publicl	y supporte	ed organiza	ations des	cribed in s	ection 50	9(a)(1) or	section 509(a)(2).
f		If the organiz	ation received a writ	tten determination from	the IRS th	at it is a Ty	pe I, Type	II, or Type	e lil		
		supporting o	rganization, check th	nis box							<u></u>
9		Since August	t 17, 2006, has the c	organization accepted a	ny gift or c	ontribution	from any	of the foll-	owing per	sons?	
		(i) A perso	n who directly or ind	lirectly controls, either a	lone or tog	ether with	persons c	described	ın (ii) and	(iii) below,	Yes No
		the gove	eming body of the s	upported organization?							11g(i)
		•	•	n described in (i) above?							11g(ii)
		(ili) A 35% (	controlled entity of a	person described in (i)	or (ii) abov	e?					11g(iii)
h		Provide the f	oliowing information	about the organizations	s the organ	ızatıon suj	oports.				
			<del>,</del>	r			_ · · · · · · · · · · · · · · · · · · ·		1		
(1)	Name	of supported	(il) EIN	(III) Type of organization	r ,	organization		•	(vl) i: organizati		(vil) Amount of
	orga	anization		(described on lines 1-9	, ,,	sted in your document?			(I) organiz	red in the l	support
				above or IRC section					0.5		
				(see Instructions))	Yes	No	Yes	No	Yes	No	
										1	
					╀			<b></b>	<u> </u>	<b>├</b>	
					-			<b> </b>	<del> </del>		
					1	1					
					<del> </del>	<b> </b>		ļ	<del>                                     </del>	<del>                                     </del>	
						1		}		]	
					<del> </del>				<del> </del>		
					<b>_</b>	ļ		ļ		<b> </b>	
<u>Tota</u>	<u> </u>		<u> </u>	<u> </u>	1	L		L	<u> </u>		
LHA	For F	Privacy Act an	id Paperwork Redu	ction Act Notice, see t	he instruc	tions for F	orm 990.		Schedu	le A (Forr	n 990 or 990-EZ) 2008
83202	1 12-1	7-08									

Scho	edule A (Form 990 or 990-EZ) 2008 T	HE FUND F	OR ANIMAL	S, INC		13-621	3740 Page 2				
	rt II Support Schedule for	Organizations	Described in	Sections 170	b)(1)(A)(iv) and	d 170(b)(1)(A)(v	i)				
	(Complete only if you checke	d the box on line 5	, 7, or 8 of Part I.)								
Sec	tion A. Public Support										
	ndar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total				
	Gifts, grants, contributions, and										
	membership fees received. (Do not		1	]							
	include any "unusual grants.")	6,540,396.	6,360,608.	6,388,608.	8,074,894.	11,695,346.	39,059,852.				
2	Tax revenues levied for the organ-										
	ization's benefit and either paid to										
	or expended on its behalf					1					
3	The value of services or facilities										
	furnished by a governmental unit to					1					
	the organization without charge										
4	Total. Add lines 1 · 3	6,540,396.	6,360,608.	6,388,608.	8,074,894.	11,695,346.	39,059,852.				
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)						5,499,822.				
6	Public Support. Subtract line 5 from line 4			***************************************		-	33,560,030.				
	tion B. Total Support										
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total				
7	Amounts from line 4	6,540,396.	6,360,608.	6,388,608.	8,074,894.	11,695,346.	39,059,852.				
8	Gross income from interest,										
	dividends, payments received on										
	securities loans, rents, royalties					İ					
	and income from similar sources	655,238.	207,641.	120,413.	212,076.	167,465.	1,362,833.				
9	Net income from unrelated business					i					
	activities, whether or not the										
	business is regularly carried on	<u> </u>									
10	Other income. Do not include gain										
	or loss from the sale of capital	ļ									
	assets (Explain in Part IV.)		58,151.	472,305.	368,706.	273,764.	1,172,926.				
11	Total support. Add lines 7 through 10						41,595,611.				
12	Gross receipts from related activities	, etc. (see instructi	ons)			12	252,611.				
13				d, fourth, or fifth ta	ax year as a section	n 501(c)(3)					
-	organization, check this box and stop						▶□				
Sec	ction C. Computation of Publ	lic Support Pe	rcentage								
14	Public support percentage for 2008 (	line 6, column (f) d	rvided by line 11, o	olumn (f))		14	80.68 %				
15	Public support percentage from 2007	7 Schedule A, Part	IV-A, line 26f			15	92.14 %				
16a	33 1/3% support test - 2008. If the	organization did no	ot check the box or	n line 13, and line	14 is 33 1/3% or r	nore, check this bo	x and				
	stop here. The organization qualifies	as a publicly supp	orted organization				<b>►</b> X				
t	33 1/3% support test - 2007. If the	organization did no	ot check a box on !	ine 13 or 16a, and	line 15 is 33 1/39	6 or more, check th	is box				
	and stop here. The organization qua						▶[]				
17a	17a 10% -facts-and-circumstances test - 2008. 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										
t	10% -facts-and-circumstances tes										
	more, and if the organization meets t						,				
	organization meets the "facts-and-cir-						₽₩				
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17t	o, check this box a	and see instruction	s <b>P</b>				

<u>Sch</u>	edule A (Form 990 or 990-EZ) 2008				<del></del>		Page 3
	rt 相 Support Schedule for C	rganizations	Described in	Section 509(a	)(2) (Complete only	rf you checked the bo	ox on line 9 of Part I
Sec	ction A. Public Support		·		Υ		
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not					'	
	include any "unusual grants.")			<b>-</b>			
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 bus-						
	iness under section 513		j				
4	Tax revenues levied for the organ-						
•	ization's benefit and either paid to						
	or expended on its behalf						
ĸ	The value of services or facilities						
9	furnished by a governmental unit to						
	the organization without charge						
۵	Total. Add lines 1 · 5	<u></u>			<del>                                     </del>		
-		<u></u> -					
78	Amounts included on lines 1, 2, and		ļ				
	3 received from disqualified persons						
•	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
•	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6)						
	ction B. Total Support		<u> </u>	<u> </u>	<u> </u>		
	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Amounts from line 6	(4) 200 1	10,2200		1		
-	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
t	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on						
12	Other income. Do not include gain or loss from the sale of capital	-					
13	assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12)						
	First five years. If the Form 990 is for	the organization'	e first second thu	d fourth or fifth t	ax vear as a sectio	n 501(c)(3) organiz	ration.
•	check this box and stop here	the organization	5 111 5t, 5555110, 1111	-,		(0)(0) 0.8	▶□
Sa	ction C. Computation of Publ	ic Support Pe	rcentage	<del> </del>	<u> </u>		
	Public support percentage for 2008 (			odumo (A)		15	<del></del>
	Public support percentage from 2007		•	201011#1 (1) <b>)</b>		16	<u>/9</u> %
16	ction D. Computation of Inves					110	
_						47	04
	Investment income percentage for 20					17	<u>%</u>
18					. 45 m mare that 5	18	<u>%</u>
198	a 33 1/3% support tests - 2008. If the						r is not ▶☐☐
	more than 33 1/3%, check this box a	-	-	-			<b>-</b>
	33 1/3% support tests - 2007. If the						and
	line 18 is not more than 33 1/3%, che						<b>!</b>
<u>20</u>	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t			<u> </u>
					Sch	iedule A (Form 99	0 or 990-EZ) 2008

832023 12-17-08

#### SCHEDULE C (Form 990 or 990-EZ)

#### **Political Campaign and Lobbying Activities**

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

2008 Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service To be completed by organizations described below.

Attach to Form 990 or Form 990-EZ.

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

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

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

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

<ul> <li>Section</li> </ul>	501(c)(4), (5), or (6) organiza	tions: Complete Part III.			
Name of org	anızatıon			Empl	oyer identification number
		D FOR ANIMALS, I			13-6218740
Part I-A	To be completed b	y all organizations exem	pt under section	501(c) and section 52	27 organizations.
	See the instructions for S	chedule C for details.			
1 Provide	a description of the organi	ration's direct and indirect politic	cal campaign activities	s in Part IV.	
2 Politica	l expenditures			▶ \$	
3 Volunte	er hours				
Part I-B	To be completed b	y all organizations exem	pt under section	501(c)(3).	
	See the instructions for S	ichedule C for details.			
1 Enter th	ne amount of any excise tax	incurred by the organization und	der section 4955	▶\$	0.
2 Enter th	ne amount of any excise tax	incurred by organization manag	ers under section 495	<b>5</b> ▶\$	0.
3 If the o	rganization incurred a section	n 4955 tax, did it file Form 4720	for this year?		Yes Do
4a Was a	correction made?				Yes No
	describe in Part IV.				
Part I-C	To be completed b	y all organizations exem	pt under section	501(c), except sectio	n 501(c)(3).
	See the instructions for S	chedule C for details			
1 Enter th	ne amount directly expende	d by the filing organization for se	ection 527 exempt fund	ction activities > \$	
2 Enter th	ne amount of the filing organ	ization's funds contributed to of	ther organizations for s	section 527	
exempt	function activities			<b>▶</b> \$	
3 Total of	direct and indirect exempt	function expenditures. Add lines	s 1 and 2 and enter he	re and on	
Form 1	120-POL, line 17b			▶\$	Ves No
4 Did the	filing organization file Form	1120-POL for this year?			Yes No
5 State th	ne names, addresses and e	nployer identification number (E	IN) of all section 527 p	colitical organizations to whic	h payments were made.
Enter th	ne amount paid and indicate	if the amount was paid from the	e filing organization's f	unds or were political contrib	outions received and
	•	separate political organization,	such as a separate se	egregated fund or a political a	action committee (PAC).
If additi	onal space is needed, provi	de information in Part IV.			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's	contributions received and
				funds If none, enter -0	promptly and directly delivered to a separate
					political organization.
					If none, enter -0
			Ì		

Part II-A To be completed by organizations exempt under section 501(c)(3) that filed Form 5768  (election under section 501(h)). See the instructions for Schedule C for details  A Check  if the filing organization belongs to an affiliated group.	Schedule C (Form 990 or 990-EZ) 2008	THE FUND F	OR ANIMALS	INC	13-6	5218740 Page 2						
A Check In the filing organization belongs to an affiliated group.  If the filing organization checked box A and "limited centrol" provisions apply.  Limits on Lobbying expenditures (The term "expenditures" means amounts paid or incurred.)  1 a Total lobbying expenditures to influence public opinion (grassroots lobbying) b Total lobbying expenditures to influence a legislative body (stred lobbying) c Total lobbying expenditures (add lines it and 1b) d Other exempt purpose expenditures (add lines it and 1b) d Other exempt purpose expenditures (add lines it and 1c) f Lobbying nontaxable amount. Enter the amount from the following table in both columns.  If the amount on line 1s, column (s) or (p) ii: The lobbying nontaxable amount is: Not over \$500,000 but not over \$1,000,000 \$100,000 but 10% of the excess over \$500,000. Over \$500,000 but not over \$1,000,000 \$175,000 but 10% of the excess over \$1,000,000. Over \$1,000,000 but not over \$1,000,000 \$225,000 plus 5% of the excess over \$1,000,000. Over \$1,000,000 but not over \$1,000,000 \$225,000 plus 5% of the excess over \$1,000,000. Over \$1,000,000 but not over \$1,000,000 \$225,000 plus 5% of the excess over \$1,000,000. Over \$1,000,000 but not over \$1,000,000 \$225,000 plus 5% of the excess over \$1,000,000. Over \$1,000,000 but not over \$1,000,000 \$225,000 plus 5% of the excess over \$1,000,000. Over \$1,000,000 but not over \$1,000,000 \$225,000 plus 5% of the excess over \$1,000,000. Over \$1,000,000 but not over \$1,000,000 \$225,000 plus 5% of the excess over \$1,000,000. Over \$1,000,000 but not over \$1,000,000 \$225,000 plus 5% of the excess over \$1,000,000. Over \$1,000,000 but not over \$1,000,000 \$225,000 plus 5% of the excess over \$1,000,000. Over \$1,000,000 but not over \$1,000,000 \$225,000 plus 5% of the excess over \$1,000,000. Over \$1,000,000 but not over \$1,000,000 \$225,000 plus 5% of the excess over \$1,000,000. Over \$1,000,000 but not over \$1,000,000 \$225,000 plus 5% of the excess over \$1,000,000. Over \$1,000,000 but not over \$1,000,000 \$225,000 plus 5% of the excess ov	Part II-A To be completed by	y organizations e	xempt under se	ction 501(c)(3) tha	t filed Form 576	8						
B Check   If the filing organization checked box A and "limited control" provisions apply.    Limits on Lobbying Expenditures (a Propenditures (Papenditures)   California (a) Filing organization's totals	(election under sec	tion 501(h)). See t	he instructions for Sc	hedule C for details								
Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)  1 a Total lobbying expenditures to influence public opinion (grassroots lobbying)  b Total lobbying expenditures (add lines 1a and 1b)  c Total lobbying expenditures (add lines 1a and 1b)  d Other exempt purpose expenditures (add lines 1a and 1b)  d Other exempt purpose expenditures (add lines 1a and 1d)  1 Lobbying nontaxable amount. Enter the amount from the following table in both columns.  If the amount on line 1s, column (s) or (b) 1s:  Not over \$500,000 but not over \$1,000,000  Over \$500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,0	A Check  if the filing organiza	tion belongs to an affi	lated group.									
(The term "expenditures" means amounts paid or incurred.)  1a Total lobbying expenditures to influence public opinion (grassroots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1 a and 1b) d Other exempt purpose expenditures (add lines 1 a and 1b) d Other exempt purpose expenditures (add lines 1 a and 1b) l Cobbying ontexable amount. Enter the amount from the following table in both columns.  If the amount on line 1e, column (a) or (b) it: Not over \$500,000 Deve \$500,000 but not over \$1,000,000 Septime (a) or (b) it: Not over \$1,000,000 but not over \$1,000,000 Septime (a) or (b) it: Not over \$1,000,000 but not over \$1,000,000 Septime (a) or (b) it: Not over \$1,000,000 but not over \$1,000,000 Septime (a) or (b) it: Not over \$1,000,000 but not over \$1,000,000 Septime (a) or (b) it: Not over \$1,000,000 but not over \$1,000,000 Septime (a) or (b) it: Not over \$1,000,000 but not over \$1,000,000 Septime (a) or (b) it: Not over \$1,000,000 but not over \$1,000,000 Septime (a) or (b) it: Not over \$1,000,000 but not over \$1,000,000 Septime (a) or (b) it: Not over \$1,000,000 but not over \$1,000,000 Septime (a) or (b) it: Not over \$1,000,000 but not over \$1,000,000 Septime (a) or (b) it: Not over \$1,000,000 but not over \$1,000,000 Septime (a) or (b) it: Not over \$1,000,000 but not over \$1,000,000 Septime (a) or (b) or (b) it: Not over \$1,000,000 Septime (a) or (b) it: Not over \$1,000,000 Septime (a) or (b) it: Not over \$1,000,000 Septime (a) or (b) it: Not over \$1,000,000 Septime (a) or (b) it: Not over \$1,000,000 Septime (a) or (b) it: Not over \$1,000,000 Septime (a) or (b) it: Not over \$1,000,000 Septime (a) or (b) it: Not over \$1,000,000 Septime (a) or (b) it: Not over \$1,000,000 Septime (a) or (b) it: Not over \$1,000,000 Septime (a) or (b) it: Not over \$1,000,000 Septime (a) or (b) it: Not over \$1,000,000 Septime (a) or (b) it: Not over \$1,000,000 Septime (a) or (b) it: Not over \$1,000,000 Septime (a) or (b) it: Not over \$1,000,000 Septim	B Check F if the filing organiza	tion checked box A ar	nd "limited control" pr	ovisions apply.								
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 1 c and 1d) f Lobbying nontaxable amount. Enter the amount from the following table in both columns.  If the amount on line 1e, solumn (a) or (b) li: Not over \$500,000  Over \$500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,7000,000  Over \$1,000,000 but not over \$1,7000,000  Over \$1,000,000 but not over \$1,7000,000  Over \$1,000,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,00				L)	organization's							
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: Not over \$500,000 but not over \$1,000,000 \$20% of the amount on line 1e. Over \$500,000 but not over \$1,000,000 \$1100,000 plus 15% of the excess over \$500,000. Over \$1,000,000 but not over \$17,000,000 \$225,000 plus 15% 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 \$225,000 plus 5% of the excess over \$1,500,000. Over \$17,000,000 \$1,000,000 \$225,000 plus 5% of the excess over \$1,500,000. Over \$17,000,000 \$1,000,000 \$225,000 plus 5% of the excess over \$1,500,000. Over \$17,000,000 \$1,000,000 \$1,000,000.  g Grassroots nontaxable amount (enter 25% of line 1) h Subtract line 1g from line 1a. Enter 0- if line g is more than line a i Subtract line 1g from line 1a. Enter 0- if line g is more than line a i Subtract line 1g from line 1a. Enter 0- if line is more than line a if there is an amount other than zero on enther line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  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 2 a through 2f of the instructions.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2005 (b) 2008 (c) 2007 (d) 2008 (e) Total  d Grassroots non-taxable amount (150% of line 2a, column(e))	1 a Total lobbying expenditures to influ	uence public opinion (	grassroots lobbying)									
d Other exempt purpose expenditures e Total exempt purpose expenditures (edd lines 1c and 1d) 1 Lobbying nontaxable amount. Enter the amount from the following table in both columns.  If the amount on line 1e, solumn (a) or (b) is: Not over \$500,000 Over \$500,000 Over \$500,000 Over \$500,000 but not over \$1,000,000 \$110,000 plus 15% of the excess over \$500,000. Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$17,000,000 Over \$17,000,000 Over \$17,000,000 Over \$17,000,000 Over \$17,000,000 Over \$17,000,000 S225,000 plus 10% of the excess over \$1,500,000. Over \$17,000,000 Over \$17,000,000 Over \$17,000,000 Over \$17,000,000 Over \$17,000,000 Over \$17,000,000 Over \$17,000,000 Over \$17,000,000 Over \$17,000,000 Over \$17,000,000 Over \$17,000,000 Over \$17,000,000 Over \$17,000,000 Over \$17,000,000 Over \$17,000,000 Over \$17,000,000 Over \$17,000,000 Over \$17,000,000 Over \$17,000,000 Over \$17,000,000 Over \$17,000,000 Over \$10,000,000 Over \$1,000,000 Over \$	b Total lobbying expenditures to influ	uence a legislative boo	dy (direct lobbying)									
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:  Not over \$500,000  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  Over \$1,500,000 but not over \$17,000,000  \$175,000 plus 10% of the excess over \$1,500,000.  Over \$1,500,000 but not over \$17,000,000  \$1,000,000 but not over \$17,000,000  \$1,000,000  Over \$1,500,000 but not over \$17,000,000  \$1,000,000  Over \$1,500,000 but not over \$17,000,000  \$1,000,000  Over \$1,500,000 but not over \$17,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000  \$1,000,000	c Total lobbying expenditures (add li	nes 1a and 1b)										
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: 20% of the amount on line 1e. 20% of the amount on line 1e. 20% of the amount on line 1e. 20% of the amount on line 1e. 20% of the amount on line 1e. 20% of the amount on line 1e. 20% of the amount on line 1e. 20% of the amount on line 1e. 20% of the amount on line 1e. 20% of the amount on line 1e. 20% of the amount on line 1e. 20% of the amount on line 1e. 20% of the excess over \$500,000.  Over \$1,500,000 but not over \$1,500,000.  \$1,000,000   \$17,000,000.  Over \$1,500,000 but not over \$17,000,000.  \$225,000 plus 5% of the excess over \$1,500,000.  Over \$1,500,000 but not over \$17,000,000.  \$1,000,000.  \$1,000,000   \$1,000,000.  \$1,000,000.  \$1,000,000   \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.  \$1,000,000.	d Other exempt purpose expenditure	Other exempt purpose expenditures										
If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Not over \$1,000,000 Not over \$1,000,000 Not not over \$1,000,000 Not not over \$1,000,000 Not not over \$1,000,000 Not not over \$1,000,000 Not not over \$1,000,000 Not not over \$1,000,000 Not \$1,500,000 Not not over \$1,500,000 Not not over \$1,500,000 Not \$1,500,000 Not not over \$1,500,000 Not not over \$1,500,000 Not not not not not not not not not not n	e Total exempt purpose expenditure	s (add lines 1c and 1c	9)									
Not over \$500,000   20% of the amount on line 1e.	f Lobbying nontaxable amount. Ente	f Lobbying nontaxable amount. Enter the amount from the following table in both columns.										
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 1) h Subtract line 1g from line 1a. Enter -0- if line g is more than line a l Subtract line 1g from line 1a. Enter -0- if line f is more than line c 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 this year?  4-Year Averaging Period Under Section 601(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 of the instructions.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) Total  2 a Lobbying ceiling amount (150% of line 2a, column(e))  c Total lobbying expenditures  d Grassroots non-taxable amount (150% of line 2d, column (e))	If the amount on line 1e, column (a) o	r (b) is: The lob	bying nontaxable an	nount is:								
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.  g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a. Enter -0- if line is is more than line a i Subtract line 1f from line 1c. Enter -0- if line is is more than line c 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 this year?  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 of the instructions.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2005 (b) 2008 (c) 2007 (d) 2008 (e) Total  2e Lobbying non-taxable amount b Lobbying ceiling amount (150% of line 2a, column(e))  c Total lobbying expenditures  d Grassroots non-taxable amount e Grassroots ceiling amount (150% of line 2d, column (e))	Not over \$500,000	20% of	the amount on line 1e	ə								
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. Enter -0- if line g is more than line a i Subtract line 1f from line 1c. Enter -0- if line f is more than line c 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 this year?  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 2 a through 2 of the instructions.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) Total  2 Lobbying ceiling amount (150% of line 2a, column(e))  c Total lobbying expenditures  d Grassroots non-taxable amount e Grassroots ceiling amount (150% of line 2d, column (e))	Over \$500,000 but not over \$1,000	0,000 \$100,00	0 plus 15% of the ex	cess over \$500,000.								
g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a. Enter -0- if line g is more than line a l Subtract line 1f from line 1c. Enter -0- if line g is more than line c 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 this year?  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 of the instructions.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) Total  2a Lobbying ceiling amount (150% of line 2a, column(e))  c Total lobbying expenditures  d Grassroots non-taxable amount (150% of line 2d, column (e))	Over \$1,000,000 but not over \$1,5	00,000 \$175,00	00 plus 10% of the ex	cess over \$1,000,000.								
g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a. Enter -0 if line g is more than line a ! Subtract line 1f from line 1c. Enter -0 if line f is more than line c ] 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 this year?  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 of the instructions.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2005 (b) 2008 (c) 2007 (d) 2008 (e) Total  2a Lobbying non-taxable amount b Lobbying celling amount (150% of line 2a, column(e))  c Total lobbying expenditures  d Grassroots non-taxable amount e Grassroots non-taxable amount (150% of line 2d, column (e))	Over \$1,500,000 but not over \$17,	Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000.										
h Subtract line 1g from line 1a. Enter -0- if line g is more than line a    Subtract line 1f from line 1c. Enter -0- if line f is more than line c   Jif 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 this year?   Yes   No   A-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 of the instructions.)   Lobbying Expenditures During 4-Year Averaging Period     Calendar year (or fiscal year beginning in)   (a) 2005   (b) 2008   (c) 2007   (d) 2008   (e) Total     2a Lobbying non-taxable amount     b Lobbying ceiling amount (150% of line 2a, column(e))     c Total lobbying expenditures     d Grassroots non-taxable amount     e Grassroots ceiling amount (150% of line 2d, column (e))	Over \$17,000,000	Over \$17,000,000 \$1,000,000.										
h Subtract line 1g from line 1a. Enter -0- if line g is more than line a    Subtract line 1f from line 1c. Enter -0- if line f is more than line c   Jif 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 this year?   Yes   No   A-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 of the instructions.)   Lobbying Expenditures During 4-Year Averaging Period     Calendar year (or fiscal year beginning in)   (a) 2005   (b) 2008   (c) 2007   (d) 2008   (e) Total     2a Lobbying non-taxable amount     b Lobbying ceiling amount (150% of line 2a, column(e))     c Total lobbying expenditures     d Grassroots non-taxable amount     e Grassroots ceiling amount (150% of line 2d, column (e))												
I Subtract line 1f from line 1c. Enter -0- if line f is more than line c  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 this year?  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 of the instructions.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2005  (b) 2006  (c) 2007  (d) 2008  (e) Total  2a Lobbying ceiling amount (150% of line 2a, column(e))  c Total lobbying expenditures  d Grassroots non-taxable amount e Grassroots ceiling amount (150% of line 2d, column (e))	-	•		ļ								
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 this year?    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 of the instructions.)    Lobbying Expenditures During 4-Year Averaging Period	h Subtract line 1g from line 1a. Enter	-0- if line g is more th	an line a			<del></del>						
reporting section 4911 tax for this year?  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 of the instructions.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) Total  2a Lobbying non-taxable amount (150% of line 2a, column(e))  c Total lobbying expenditures  d Grassroots non-taxable amount (150% of line 2d, column (e))				l		<u></u>						
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 of the instructions.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2005 (b) 2008 (c) 2007 (d) 2008 (e) Total  2a Lobbying non-taxable amount (150% of line 2a, column(e))  c Total lobbying expenditures  d Grassroots non-taxable amount (150% of line 2d, column (e))	•		line 11, did the organi	zation file Form 4720		—.  —.						
(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 of the instructions.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2005 (b) 2008 (c) 2007 (d) 2008 (e) Total  2a Lobbying non-taxable amount  b Lobbying ceiling amount  (150% of line 2a, column(e))  c Total lobbying expenditures  d Grassroots non-taxable amount  e Grassroots ceiling amount  (150% of line 2d, column (e))	reporting section 4911 tax for this					Yes No_						
Calendar year (or fiscal year beginning in)  (a) 2005 (b) 2008 (c) 2007 (d) 2008 (e) Total  2a Lobbying non-taxable amount b Lobbying ceiling amount (150% of line 2a, column(e))  c Total lobbying expenditures  d Grassroots non-taxable amount e Grassroots ceiling amount (150% of line 2d, column (e))	• -	ations that made a s	ection 501(h) electio	on do not have to comp								
(e) 10tal  2a Lobbying non-taxable amount  b Lobbying ceiling amount (150% of line 2a, column(e))  c Total lobbying expenditures  d Grassroots non-taxable amount e Grassroots ceiling amount (150% of line 2d, column (e))		Lobbying Expe	nditures During 4-Ye	ear Averaging Period								
b Lobbying ceiling amount (150% of line 2a, column(e))  c Total lobbying expenditures  d Grassroots non-taxable amount e Grassroots ceiling amount (150% of line 2d, column (e))	- I	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) Total						
(150% of line 2a, column(e))  c Total lobbying expenditures  d Grassroots non-taxable amount e Grassroots celling amount (150% of line 2d, column (e))	2a Lobbying non-taxable amount				·····							
c Total lobbying expenditures  d Grassroots non-taxable amount e Grassroots celling amount (150% of line 2d, column (e))	b Lobbying ceiling amount											
d Grassroots non-taxable amount e Grassroots ceiling amount (150% of line 2d, column (e))	(150% of line 2a, column(e))				·							
e Grassroots ceiling amount (150% of line 2d, column (e))	c Total lobbying expenditures											
e Grassroots ceiling amount (150% of line 2d, column (e))	d Grassroots non-taxable amount											
(150% of line 2d, column (e))												
f Grassroots lobbying expenditures												
	f Grassroots lobbying expenditures											

Schedule C (Form 990 or 990-EZ) 2008

Schedule C (Form 990 or 990-EZ) 2008 THE FUND FOR ANIMALS, INC 13-6218740 Page 3

Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details.

	- (	B)	(t	<b>)</b>
	Yes	No	Amo	ount
During the year, did the filing organization attempt to influence foreign, national, state or	<u> </u>			
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of:				
a Volunteers?		X		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X		·
c Media advertisements?		X		
d Mailings to members, legislators, or the public?		X		
e Publications, or published or broadcast statements?	X	X	250	0,000
f Grants to other organizations for lobbying purposes?		х	230	,,000
g Direct contact with legislators, their staffs, government officials, or a legislative body?	-	X		
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?	· · · · · · · · · · · · · · · · · · ·	$\frac{\hat{x}}{\hat{x}}$		
i Other activities? If "Yes," describe in Part IV			250	0,000
j Total lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		х		7,000
b If "Yes," enter the amount of any tax incurred under section 4912	······································			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		Ī		
Part III-A To be completed by all organizations exempt under section 501(c)(4	), section	501(c)(5)	, or sect	ion
501(c)(6). See the instructions for Schedule C for details.	.,,			
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?		3		
Part III-B To be completed by all organizations exempt under section 501(c)(4	l), section	501(c)(5)	, or sect	ion
501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" O	R if Part II	I-A, ques	tion 3 is	i.
answered "Yes." See Schedule C Instructions for details.				
1 Dues, assessments and similar amounts from members		1		
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political	itical			
expenses for which the section 527(f) tax was paid).				
a Current year		2a		
b Carryover from last year		2b		·
c Total		2c		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the e				
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	d political			
expenditure next year?		4		
5 Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)		5	<del></del>	
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
or any additional information.				

#### Schedule D (Form 990)

Department of the Treasury Internal Revenue Service

#### **Supplemental Financial Statements**

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

2008 Open to Public

Name of the organization **Employer identification number** 13-6218740 THE FUND FOR ANIMALS, INC Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 2 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Preservation of certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year **2a** a Total number of conservation easements 2b Total acreage restricted by conservation easements 2¢ Number of conservation easements on a certified historic structure included in (a) 2d d Number of conservation easements included in (c) acquired after 8/17/08 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part 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 describes 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: Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2008

Sche	dule D (Form 990) 2008 THE FUN	D FOR ANIM	ALS,	INC				13-62	18740	Page 2
	t III Organizations Maintaining C				easures, c	or Othe	r Simila	er Asse	ts (contin	ued)
3	Using the organization's accession and other									
	that apply):									
а	Public exhibition	d	· 🖳	Loan or exc	hange progra	ams				
b	Scholarly research	•		Other						
C	Preservation for future generations									
4	Provide a description of the organization's c							ose in Par	XIV.	
5	During the year, did the organization solicit of	or receive donations	of art, h	istorical trea	sures, or oth	er sımılar	assets	_	,	r1
	to be sold to raise funds rather than to be m								Yes	No No
Pa	Trust, Escrow and Custodia		. Comp	lete if organ	ization answ	ered "Yes	to Form	990, Par	t IV, line 9	, or
	reported an amount on Form 990, Pa									<del></del>
1a	Is the organization an agent, trustee, custod	lian or other intermed	diary for	contribution	ns or other as	sets not	Included		1	г
	on Form 990, Part X?							L	Yes	L No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	gntwolk	table:						
									Amount	<del></del>
C	Beginning balance					•	10			
d	Additions during the year					•	1d			
е	Distributions during the year						1e			
f	Ending balance	000 D V t	040				1f		Yes	No
	Did the organization include an amount on F		1217					L	_ res	
Par	If 'Yes,' explain the arrangement in Part XIV <b>t V</b> Endowment Funds. Complete		arad "Ve	e' to Form	DON Port IV	line 10				
FE	LY Elidowineit Fullus. Compete			nor year	(c) Two yea		(d) Three v	ears back	(a) Four	years back
4.	Pagencias of year balance	(a) Current year	(0)	TIOI year	(C) INO YOU	13 Dack	(4) 111100	Oato Daok	(0) (00)	70010 0001
ıa b	Beginning of year balance Contributions	<del> </del>		.,,	<b></b>			***************************************		***************************************
b	Investment earnings or losses	·	<b></b>		<b>†</b>					*****
d	Grants or scholarships		·····							
8	Other expenditures for facilities	1.000					******			
	and programs									
	Administrative expenses									
	End of year balance									
2	Provide the estimated percentage of the year	ar end halance held	AS:	*******				***************************************	1	**************
a	Board designated or quasi-endowment	2 010 0000100 11010	 %							
ь	Permanent endowment	<del></del> %	_~							
	Term endowment ▶	%								
3a	Are there endowment funds not in the posse	•	ation th	at are held a	and administe	ered for th	ne organi	zation		
-	by:	<u>-</u>					_			Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
ь	If "Yes" to 3a(ii), are the related organization	s listed as required o	on Sche	dule R?					3ь	
4	Describe in Part XIV the intended uses of the									
Par	t VI Investments - Land, Buildin	gs, and Equipm	ent. Se	ee Form 990	, Part X, line	10.				
	Description of investment	(a) Cost or o			t or other		epreciatio	on .	(d) Book	value
		basis (investi	ment)		(other)					
1a	Land				0,541.					,541.
ь	Buildings			1,36	5,110.	1,2	221,8	76.	143	3,234.
C	Leasehold improvements			<u> </u>	_	_			<del></del>	
d	Equipment				6,778.		67,1			617.
	Other			<u> </u>	<u> 19,458.</u>		56,3	35.		123.
Total	. Add lines 1a-1e. (Column (d) should equal F	orm 990. Part X. coll	umo (B).	tine 10(c).)					1,826	,515.

Schedule D (Form 990) 2008

		INC	13-	6218740	Page 3
Part VII Investments - Other Securities.	See Form 990, Part X, line	12.			
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valuati Cost or end-of-year mark		
Financial derivatives and other financial products					
Closely-held equity interests					
Other	<u> </u>		<del></del>		
		- +		<del></del>	
		-		· ·	
***************************************					
Total. (Col (b) should equal Form 990, Part X, col (B) line 12 )	<b>&gt;</b>				
Part VIII Investments - Program Related.		e 13.			
(a) Description of investment type	(b) Book value		(c) Method of valuati		
(a) Description of investment type	(b) book value	(	Cost or end-of-year mark	et value	_
			···		
Total. (Col (b) should equal Form 990, Part X, col (B) line 13 )					
Part IX Other Assets. See Form 990, Part X, Irr					
	a) Description			(b) Book val	ue
SECURITY DEPOSITS	<del> </del>				470.
DUE FROM HSUS				6,347,	344.
- Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Cont					
				6,347,	914
Total. (Column (b) should equal Form 990, Part X, col (B) Part X Other Liabilities. See Form 990, Part X		·		0,341,	014.
(a) Description of liability	A, III 16 20.	(b) Amount		·····	••••••
Federal income taxes			1		
Federal Income taxes					
· · · · · · · · · · · · · · · · · · ·			7		
		<del></del>	7		
			_		
Total. (Column (b) should equal Form 990, Part X, col (B)					
In Part XIV, provide the text of the footnote to the organi	zation's financial stateme	ents that reports the	organization's liability for	uncertain tax po	sitions
under FIN 48.					
832053 12-23-08	_		Sche	dule D (Form 99	JU) 2008

-	dule D (Form 990) 2008 THE FUND FOR ANIMALS, INC	Financial Sta	tomonto	13-621874	O Page 4
-	t XI Reconciliation of Change in Net Assets from Form 990 to	Financiai Sta	tements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		<del></del>
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		
4	Net unrealized gains (losses) on investments		4		
5	Donated services and use of facilities		5		<del></del>
6	Investment expenses		7		
7	Prior period adjustments		8		
8	Other (Describe in Part XIV)		9	<del></del>	
9 10	Total adjustments (net). Add lines 4-8  Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		10	<del></del>	
	t XII Reconciliation of Revenue per Audited Financial Stateme	nts With Reve		Return	
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b		7 1	
c	Recoveries of prior year grants	2c		7 1	
ď	Other (Describe in Part XIV)	2d		]	
6	Add lines 2a through 2d				
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b		]	
c	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)			5	<del></del>
Pa	t XIII Reconciliation of Expenses per Audited Financial Statem	ents With Exp	enses pe	r Return	
1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a		4 1	
b	Prior year adjustments	2b		4 1	
C	Losses reported on Form 990, Part IX, line 25	2c		<b>-</b>	
d	Other (Describe in Part XIV)	2d		4 1	
e	Add lines 2a through 2d			20	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	2			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		- 1	
b	Other (Describe in Part XIV)	4b		4 1	
C	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	<del></del>		5	
	t XIV Supplemental Information	1 1 - 4 4 4 - 5	N = 4 N / N = 10 = 10	41	had de Dad
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II	I, lines 1a and 4; F	art IV, lines	1b and 2b; Part V,	line 4; Part
X; Pa	rt XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.				
		=			
2 22					
	2000—100 T 12 TH PROFESS (SATE II II II				
		-		Sahadula D #*	000/ 0000
83205	1			Schedule D (Fon	III 880) 2006
12-23-	25				

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

# Supplemental Information Regarding Fundraising or Gaming Activities

Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 8a.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Inspection Employer identification number

THE FUND FOR ANIMALS, INC 13-6218740									
Part I Fundraising Activitie	S. Complete if the organi	zation answe	ered "Y	'es" to	Form 990, Part IV, I	ine 17.			
1 Indicate whether the organization r	aised funds through any c	of the followin	ng actr	vities.	Check all that apply				
a X Mail solicitations	•	Solicitat	ion of	non-g	overnment grants				
b X Email solicitations	f	Solicitat	ion of	gover	nment grants				
c X Phone solicitations	g	Special	fundra	gniau	events				
d in-person solicitations									
2 a Did the organization have a writter							<b>—</b>		
key employees listed in Form 990,							L No		
b if 'Yes,' list the ten highest paid in				-			<b>De</b>		
compensated at least \$5,000 by the	ne organization. Form 990	-EZ filers are	not re	quire	to complete this tal	OI <del>0</del> .			
			(iii)	Did		(v) Amount paid	(vi) Amount paid		
(i) Name of Individual	(ii) Activity		funda have ca	BIBET	(iv) Gross receipts from activity	to (or retained by) fundraiser	to (or retained by)		
or entity (fundraiser)			or con	trol of	itom activity	listed in col. (i)	organization		
NATIONAL OUTDOOR	FUNDRAISING		Yes	No		······································			
SPORTS	CONSULTANT		100	X	1712183.	78,946.	1633237.		
	TELEPHONE								
THE SHARE GROUP, INC	.FUNDRAISING	PROGRA		Х	154,248.	33,421.	120,827.		
		·							
							<del></del>		
			-						
		•			1866431.	112,367.	1754064.		
Total  3 List all states in which the organiza	tion in receptored or licens		fundo	or boo		· · · · · · · · · · · · · · · · · · ·			
AK, AL, AR, AZ, CA, CO, CT									
NM, NY, OH, OK, OR, PA, RI							70.0 70.0 70.00		
	7 - 0 7 - 1 . 7 - 7	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
					·				
							<del>-</del>		
LHA For Privacy Act and Paperwork	Reduction Act Notice, se	e the Instru	ctions	for F	orm 990.	Schedule G (Form 9	90 or 990-EZ) 2008		
832081 12-18-08			26						
			Z, U						

Sch	edul	e G (Form 990 or 990-EZ) 2008 THE FU	ND FOR ANIMA	LS, INC		-6218740 Page 2
Pa	rti				IV, line 18, or reported	more than \$15,000
		on Form 990-EZ, line 6a. List events with			(a) Other French	T
		•	(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events (Add col. (a) through
an.			(event type)	(event type)	(total number)	col. (c))
Revenue	1	Gross receipts				
	2	Less: Charitable contributions				
	3	Gross revenue (line 1 minus line 2)				
	4	Cash prizes				
US6S	5	Non-cash prizes				
Direct Expenses	6	Rent/facility costs				
Direct	7	Other direct expenses				
	8	Direct expense summary. Add lines 4 through	h 7 ın column (d)		•	<u> </u>
F Pa	9	Net income summary. Combine lines 3 and 8	in column (d)	000 Bat IV Iva 10 and	<u> </u>	
Pa	TI. I	Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a.	answered Tes to Form	990, Part IV, line 19, or r	eported more than	
		\$13,000 On FORM \$50-22, mile da.	(-) p	(b) Pull tabs/Instant	(-) Other section	(d) Total gaming (Add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
æ	1	Gross revenue				
		Out among				
Ses	2	Cash prizes	1			
Direct Expenses	3	Non-cash prizes				
Direct	4	Rent/facility costs			<u> </u>	
	5	Other direct expenses				
			Yes %	Yes %	Yes %	
	6	Volunteer labor	No	No	∟ No	
	7	Direct expense summary. Add lines 2 through	h 5 ın column (d)		•	1
	8	Net gaming income summary. Combine lines	1 and 7 in column (d)		<b>•</b>	
_	_					Yes No
		ter the state(s) in which the organization opera the organization licensed to operate gaming ac		states?		9a
		No, Explain:	Savalos in Susin or anses			
	_					
		ere any of the organization's gaming licenses re Yes," Explain:	evoked, suspended or te	rminated during the tax y	year?	10a
	_			· · · · · · · · · · · · · · · · · · ·		
11 12	ls t	es the organization operate gaming activities vines of the organization a grantor, beneficiary or truste		of a partnership or othe	r entity formed to	. 11
	ad	minister charitable gaming?			Schedule G (Fo	12   orm 990 or 990-EZ) 2008

Schedule G (Form 990 or 990-EZ) 2008 THE FUND FOR ANIMALS, INC 13-	621874	0 Pa	age 3
		Yes	No
13 Indicate the percentage of gaming activity operated in:			
a The organization's facility	%		
b An outside facility	%		
14 Provide 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 garning revenue retained by the third party > \$			
c If "Yes," enter name and address:			
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?	17a		
b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the	1/0	$\vdash \vdash$	
organization's own exempt activities during the tax year \$\infty\$\$			
Organization a particle activities omitig the tax year > \$			

Schedule G (Form 990 or 990-EZ) 2008

SCHEDULE								OMB No 1545-0047	
(10th 880)			Governa	Governments, and Individuals in the U.S.	uals in the U.S.	r		2008	
Department of the Treasury		<b>▼</b> Complete	lete if the organization	n answered "Yes,	" on Form 990, Pa	If the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.		Open-to Public	
Internal Revenue Service				► Attach to Form 990.	л 990.			inspection	
Name of the organization	THE FUND FOR ANIMALS,	FOR ANIMA	LS, INC				<u></u>	Employer identification number 13-6218740	
Part i General Inf	General Information on Grants and Assistance	nd Assistance	ı						
1 Does the organize	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	o substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assi	stance, and the selecti		
criteria used to aw	criteria used to award the grants or assistance?	stance?			1			X Yes	
2 Describe in Part IN	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	cedures for monit	oring the use of grant	funds in the United	d States.				
	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 21, for any	Governments and	d Organizations in the	United States. C	omplete if the orga	inization answered "Y	es" on Form 990, Part	IV, line 21, for any	
recipient the	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	55,000. Check this	box if no one recipien	t received more th	an \$5,000. Use Pa	in IV and Schedule I-1	(Form 990) if additions	al space is needed	
1 (a) Name and add	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	
S FC	HUMANE PARMS								
SACRAMENTO, CA 95841	841	26-0719148	501(C)(4)	250,000.	0			ANIMAL WELFARE.	
RABBIT SANCTUARY INC 833 PAIRVIEW ROAD SIMPSONVILLE SC 296	ARY INC COAD SC 29680	20-5315478	501(C)(3)	21 775	C			ANTHAL WELPARE	
		I							
2 Enter total numbe	Enter total number of section 501 (c)(3) and government organizations	ind government on	ganizations						
1_	Enter total number of other organizations  For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	ction Act Notice,	see the Instructions	for Form 990.				Schedule   (Form 990) 2008	

832101 12-18-08

Schedule   (Form 990) 2008 THE FUND FOR ANIMALS,		INC			13-6218740 Page 2
er Assistance to 1 (Form 990) rf ad	ited States. Com	plete if the organiza	ition answered "Yes"	on Form 990, Part IV, line 22.	
(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.	de the information	required in Part I,	ine 2, and any other	additional information.	
THE FUND FOR ANIMALS ISSUES GRANTS		NIZATIONS	TO ORGANIZATIONS THAT MEET OUR	JUR	
MISSION CRITERIA. GRANTS ARE USUA	ARE USUALLY GIVEN	N TO ORGAN	TO ORGANIZATIONS THAT HAVE	IAT HAVE	
BEEN THOROUGHLY RESEARCHED BY US OR		S WITH WHI	TO ONES WITH WHICH WE HAVE AN	AN	
EXISTING RELATIONSHIP. GRANT OVERS		ACCOMPLIS	IGHT IS ACCOMPLISHED THROUGH A	I A	
VARIETY OF METHODS SUCH AS GRANT RE	PORTS,	MEETINGS W	MEETINGS WITH GRANTEES,	SS, AND	
SITE VISITS.					
		ļ.			
832102 12-18-08		30			Schedule I (Form 990) 2008

#### SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

### **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047

2008

Open to Public Inspection

Employer identification number

	THE FUND FOR ANIMALS, INC	13-621874	0	
Pa	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form	990,		1
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel	nal use		
	Travel for companions Payments for business use of personal re	sidence		
	Tax indemnification and gross-up payments Health or social club dues or initiation fee	3		
	Discretionary spending account Personal services (e.g., maid, chauffeur, c	hef)		
<b>.</b>	If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provisi	on		
	of all of the expenses described above? If "No," complete Part III to explain	1b	ĺ	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, dir			
~	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		]
	Trustees, and the CEO/Executive Director, regarding the items checked in line 121			
•	In the standards of any of the following the exponentian uses to entablish the componentian of the exponization?	,		
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 Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations  Approval by the board or compensation of	ommittee		
_	man and the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a:		x	1
a	Receive a severance payment or change of control payment?	4a	<b>├</b> ^	X
Ь	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	+	X
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	╁	1
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	'n	1	
	contingent on the revenues of:		1	
a	The organization?	<u>5a</u>	┼	X
b	Any related organization?	5b	<del> </del>	X
	If "Yes," to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	n e		
	contingent on the net earnings of:			
a	The organization?	6a	↓	X
Ь	Any related organization?	6b	<u> </u>	X
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments	s		1
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to ti	ne		

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

initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III

Schedule J (Form 990) 2008

Schedule J (Form 990) 2008 THE FUND FOR ANIMALS, INC

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

Page 2

13-6218740

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.

Do not list any individuals that are not listed on Form 990, Part VII.

		(B) Breakdown of V	of W-2 and/or 1099-MISC compensation	SC compensation	(0)	(0)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(D)-(V(B)	reported in prior Form 990 or Form 990-EZ
	8		0		1 1	0	1	0
MIKE MARKARIAN	Œ	181,629.			14,312.	נים	201,31	0
	8				0		0	0
WAYNE PACELLE	8	228,981.			18,044.	5,515.	252,	0
	Ξ				0	0		0
G. THOMAS WAITE III	(E)	184,744.			14,558.	10,105.	209,40	0
	(0)				0	0		0
MARY K. BERGE	(E)	128,106.	0	0	10,095.	15,093.	153,294.	0
	$\boldsymbol{\epsilon}$							
	Ξ							
	8							
	€							
	ε							
	€							
	8							
	3							
	8							
	8							
	€							
	3							
	ε							
	Ξ							
	Ξ							
	₿							
	8							
	Ξ							
	€							
	▣							
	8							
	Ξ							
	8							
							Schedul	Schedule J (Form 990) 2008

32

832112 12-23-08

Schedule J (Form 990) 2008 THE FUND FOR ANIMALS, INC	13-6218740	Page 3
Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information	art for any additional information	
PART I, LINE 4A: KAY LISCOMB WHO IS REQUIRED TO BE LISTED ON PART VII, CORE		
FORM RECEIVED \$11,522 IN SEVERANCE WHICH WAS INCLUDED IN HER MEDICARE		
WAGES.		
	Schedule J (Form 990) 2008	90) 2008
832113 12:23-08		

# SCHEDULE M (Form 990)

#### **NonCash Contributions**

OMB No 1545-0047

Schedule M (Form 990) 2008

2008 Open to Public Inspection

Department of the Treasury Internal Revenue Service ► To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

Name of the organization

THE FUND FOR ANIMALS, INC

Employer identification number
13-6218740

Pai	ti Types	of Property								
			(a) Check if applicable	(b) Number of contributions	(c) Revenues reported Form 990, Part VIII, III		(d) Method of det revenue		9	
1	Art · Works of	art .								
2	Art - Historical			<u> </u>						
3	Art · Fractional									
4	Books and put									
5	•	ousehold goods								
6	Cars and other							-		
7	Boats and plan	• • • • • • • • • • • • • • • • • • • •								
8	Intellectual pro									
9	Securities · Pul									
10		sely held stock								
11	Securities · Par	rtnership, LLC, or					,			
	trust interests									
12	Securities · Mis	scellaneous								
13	Qualified conse	ervation contribution								
	(historic struct	ures)								
14	Qualified conse	ervation contribution (other)								
15	Real estate · R	esidential								
16	Real estate - C	ommercial								
17	Real estate · O	ther								
18	Collectibles									
19	Food inventory	,	X	12	31,0 4,7	80.	FMV			
20	Drugs and med	dical supplies	Х	8	4,7	66.	FMV			
21	Taxidermy									
22	Historical artifa	cts			<del></del>					
23	Scientific spec	imens								
24	Archeological									
25		FACILITY COST)	X	11	23,2					
26	_ `	ANIMAL SUPPLI)	X	27	4,5	75.	FMV			
27	Other (	OFFICE SUPPLI)	Х	2	4	91.	FMV			<del></del>
28	Other		L	L						
29		ms 8283 received by the organi				l				
	for which the c	rganization completed Form 82	83, Part IV,	Donee Acknow	/ledgment	29	L			
				_					Yes	No
30a		r, did the organization receive b	-		•					
	•	ears from the date of the initial	contribution	, and which is	not required to be use	d for e	exempt purposes for			v
	the entire hold	• •						30a		X
		be the arrangement in Part II.								v
31	-	ization have a gift acceptance	-	•	•			31		X
<b>32</b> a	=	nization hire or use third parties	or related or	ganizations to	solicit, process, or sel	II nonc	asn			v
_	contributions?							32a		X
	If "Yes," descri					, .	E. d. A			
33	-	ion did not report revenues in c	olumn (c) fo	r a type of prop	perty for which column	1 (a) IS	checked,			
	describe in Par	T II.						L	L	

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

**SCHEDULE 0** (Form 990)

#### Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the

OMB No 1545-0047 2008 Open to Public Inspection

Department of the Tressury Form 990 or to provide any additional information. Internal Revenue Service Name of the organization **Employer identification number** 13-6218740 THE FUND FOR ANIMALS, INC FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: CALIFORNIA WILDLIFE REHABILITATION CENTER: IN SOUTHERN CALIFORNIA, INJURED AND ORPHANED WILD ANIMALS ARE RESTORED TO HEALTH AND BACK TO THEIR NATIVE WILD HOMES, THANKS TO THE FUND'S 24-HOUR REHABILITATION FACILITY. THE CENTER SPECIALIZES IN LARGE PREDATORS AND BIRDS OF PREY -- ANIMALS SUCH AS MOUNTAIN LIONS, COYOTES, AND BOBCATS ARE REGULARLY ADMITTED, AND THE LARGEST FREE-FLIGHT RAPTOR AVIARY ON THE WEST COAST IS USED TO PREPARE INJURED BIRDS TO GO BACK TO THE WILD. EXPENSES \$ 478275. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. FORM 990, PART VI, SECTION A, LINE 2: OFFICERS MARKARIAN, PACELLE, WAITE, KINDLER, AND BERGE WERE EMPLOYED BY ANOTHER TAX-EXEMPT ORGANIZATION ON WHOSE BOARD FUND FOR ANIMALS' DIRECTORS PROBST, MCDONNELL, NEY, MANCUSO, THEREFORE, THESE INDIVIDUALS HAVE "BUSINESS AND WIEBERS SERVED. RELATIONSHIPS" WITH EACH OTHER. FORM 990, PART VI, SECTION A, LINE 8B: THE FUND FOR ANIMALS' BOARD HAS NO COMMITTEES. FORM 990, PART VI, SECTION A, LINE 10: 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 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule O (Form 990) 2008 832211 12-18-08

#### SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

MEMBERS.

#### Supplemental Information to Form 990

➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008 Open to Public Inspection

Name of the organization

THE FUND FOR ANIMALS, INC

Employer identification number 13-6218740

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 CONFLICT OF INTEREST AND QUESTIONS RAISED BY STAFF OR BOARD

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

AK,AL,AR,AZ,CA,CO,CT,FL,GA,HI,IL,KS,KY,LA,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

FACILITY IN GAITHERSBURG, MARYLAND. THE FFA MAKES COPIES OF THE THREE MOST

RECENTLY-FILED FORMS 990 AVAILABLE TO THE PUBLIC UPON REQUEST BOTH BY MAIL

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

Schedule O (Form 990) 2008

12:18-16-16

#### SCHEDULE O (Form 990)

Supplemental Information to Form 990

Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008 Open to Public Inspection

Department of the Treasury Internal Revenue Service **Employer identification number** Name of the organization 13-6218740 THE FUND FOR ANIMALS, INC AND IN PERSON AT FFA'S HEADQUARTERS OFFICE IN NEW YORK CITY AND AT ITS FACILITY IN GAITHERSBURG, MARYLAND. THE CONFLICT OF INTEREST POLICY HAS NOT BEEN MADE AVAILABLE TO THE GENERAL PUBLIC. FORM 990, PART IV, LINE 12 ALTHOUGH THE ORGANIZATION DOES NOT RECEIVE STAND ALONE GAAP FINANCIAL STATEMENTS IT DOES RECEIVE ON AN ANNUAL BASIS FROM INDEPENDENT AUDITORS CONSOLIDATED ENTITY GAAP FINANCIAL STATEMENTS FOR IT AND ITS AFFILIATES.

SCHEDULE R (Form 990)  P Attach to Form 990. To I oppariment of the Treasury Internal Service	Related Organizations and Unrelated Partnerships  Attach to Form 990, To be completed by organizations that answered "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37.	Related Organizations and Unrelated Partnerships of by organizations that answered "Yes" to Form 990 ▶ See separate instructions.	), Part IV, lines 33,	34, 35, 36, or 37.	OMB No 1545-0047 2008 Open to Public frapection
zation THE FUND FOR	ANIMALS, INC			ŭ	Employer identification number 13-6218740
Part I Identification of Disregarded Entitles					
(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	tions				
(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
HUMANE SOCIETY OF THE UNITED SATES - 53-0225390, 2100 L ST, NW, WASHINGTON, DC 20037	ANIKAL WELPARE	DELAWARE	50 <u>1</u> (C)(3)	7	и/л
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 832161	ce, see the Instructions for Form 990	38			Schedule R (Form 990) 2008

13-6218740

٩

Page 3 Schedule R (Form 990) 2008  $\times \times \times$ × ×× Amount involved Yes 13-6218740 ξ 2 **¥** Ę 9 4 19 2 2 9 19 = = ÷ 8 # Ξ = . 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 (B)
Transaction type (a-r) 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? 40 Performance of services or membership or fundraising solicitations for other organization(s) Performance of services or membership or fundraising solicitations by other organization(s) Name of other organization(s) Receipt of (i) interest (ii) annuties (iii) royalties (iv) rent from a controlled entity INC Lease of facilities, equipment, or other assets from other organization(s) Lease of facilities, equipment, or other assets to other organization(s) THE FUND FOR ANIMALS, m Sharing of facilities, equipment, mailing lists, or other assets Other transfer of cash or property from other organization(s) Gift, grant, or capital contribution from other organization(s) Other transfer of cash or property to other organization(s) Gift, grant, or capital contribution to other organization(s) Note. Complete line 1 if any entity is listed in Parts II, III, or IV. Reimbursement paid by other organization for expenses Reimbursement paid to other organization for expenses Loans or loan guarantees to or for other organization(s) Loans or loan guarantees by other organization(s) Part V Transactions With Related Organizations Purchase of assets from other organization(s) Sale of assets to other organization(s) Sharing of paid employees Schedule R (Form 990) 2008 Exchange of assets 832163 12-23-08 0 N € 3 ៙ 0 9 ତ୍ର

INC	
ANIMALS,	
UND FOR	
124	
THE	
R (Form 990) 2008	
Schedule	

13-6218740 Page 4

Part Vt Unrelated Organizations Taxable as a Partnership

1. and EIN Pirmay activity (sistes or foreign received from color) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and EIN Pirmay activity) (1. and	Primay activity Legal dominicie Are all attention processor of the country) of the country) of the country) of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of the country of	Primary activity   Legal domicile   Ave is preme   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   No   Country   Ves   Country   Ves   Country   Ves   Country   Ves   Country   Ves   Country   Ves   Country   Ves   Country   Ves   Country   Ves   Country   Ves   Country   Ves   Country   Ves   Country   Ves   Country   Ves   Country   Ves   Country   Ves   Country   Ves   Country   Ves   Country   Ves   Country   Ves   Country   Ves   Country   Ves   Country   Ves   Country   Ves   Country   Ves   Country   Ves   Country   Ves   Country   Ves   Country   Ves   Country   Ves   Country   Ves   Country   Ves   Country   Ves   Country   Ves   Country   Ves   Count	נוופן אפן ופופוסס טקשוונסוון. ספס ווופנוסכונטון ופקשוטוון פארוטפטן וטן כפונשון ווויפטווויסוון אפן ווופן אפן ווופן אפן אפן אפן אפן אפן אפן אפן אפן אפן א		l	į	1	!	•	
Primary activity Legal cornicity Area in grammy Share of end-of- Country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country) Area in grammy country in grammy country (and in grammy country) Area in grammy country (and in grammy country) Area in grammy country (and in grammy country) Area in grammy country (and in grammy country) Area in grammy country (and in grammy country) Area in grammy country (and in grammy country) Area in grammy country (and in grammy country) Area in grammy country (and in grammy country) Area in grammy country (and in grammy country) Area in grammy country (and in grammy country) Area in grammy country (and in grammy country) Area in grammy country (and in grammy country) Area in grammy country (and in grammy country) Area in grammy country (and in grammy country) Area in grammy country (and in grammy country) Area in grammy country (and in grammy country) Area in grammy country (and in grammy country) Area in grammy country (and in grammy country) Area in grammy country (and in grammy country) Area	Primary activity Legal domictie Are il parizon Share of end-of- Disposor- country) Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes	Prmary activity Logal comiciles Acro striction (control) Acros striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro striction (control) Acro strictio	3	<u> </u>	<u>©</u>	ê	Œ)	E		
Yes   No (Four 1066)	Country) Yes No	Country) Yes No	Name, address, and EIN of entity	Primary activity	Legal domicite (state or foreign	Are all partners section 501(c)(3) organizations?		Dispropor- tionate allocations?		
					country)	Yes No		Yes No		
		Schedule R (Form 869) 200								
		Schedule R (Form 980) 200								-
		Schedule R (Form 800) 200								
		Schedule R Form 900 200								
		Schedule R (Form 890) 200		1						
		Schedule R (Form 890) 200								
		Schedule R (Form 860) 200						_		
		Schedule R (Form 860) 200								
		Schedule R (Form 960) 200		1						
		Schedule R (Form 899) 200						·		
		Schedule R (Form 890) 200		•						
		Schedule R (Form 980) 200								
		Schedule R (Form 890) 200						-		-
		Schedule R (Form 890) 200								
		Schedule R (Form 980) 200								
		Schedule R (Form 980) 200				1				$\downarrow$
		Schedule R (Form 990) 200								
										_
		Schedule R (Form 990) 200								
										•
		Schedule R (Form 990) 200								
		Schedule R (Form 990) 200								
		Schedule R (Form 990) 200			3.2					
		Schedule R (Form 990) 200		1						
		Schedule R (Form 990) 200								
		Schedule R (Form 990) 200								
		Schedule R (Form 990) 200								
		Schedule R (Form 990) 200		•						_
	A COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE COLUMN TO THE	Schedule R (Form 990) 200								
	Option Different Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Cont	Schedule R (Form 990) 200								

832164 12-23-08 Form **8868** (Rev. April 2009)

Department of the Treasury

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

OMB No. 1545-1709

Internal Re	evenue Service	File a separate application for each return.					
• If you	are filing for an Add	omatic 3-Month Extension, complete only Part I and check this box		. <b>&gt; X</b> n 8868.			
Part	. Automati	c 3-Month Extension of Time. Only submit original (no copies needed).					
A corpo Part I o		9 Form 990-T and requesting an automatic 6-month extension - check this box and comp	olete	▶□			
to file in	ncome tax returns.	ding 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an					
noted b (not aut	pelow (6 months for a tomatic) 3-month ext ast submit the fully co	enerally, you can electronically file Form 8868 if you want a 3-month automatic extension a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic ension or (2) you file Forms 990-BL, 6069, or 8870, group retums, or a composite or contempleted and signed page 2 (Part II) of Form 8868. For more details on the electronic filling on e-file for Charities & Nonprofits.	cally if ( Isolida	1) you want the additional ted Form 990-T. Instead,			
Туре о			Emplo	oyer identification number			
print		FOR ANIMALS, INC	13	3-6218740			
File by the due date filing your	tor Number, street,	and room or suite no. If a P.O. box, see instructions. 2 57TH STREET, NO. 705					
return Se Instructio		ost office, state, and ZIP code. For a foreign address, see instructions.					
Check type of return to be filed (file a separate application for each return):    X   Form 990							
Tele	ephone No.   212  e organization does  is s for a Group Ret	THE FUND FOR ANIMALS, INC e of ▶ 200 WEST 57TH STREET - NEW YORK, NY 100 2-246-2096  FAX No. ▶  urn, enter the organization's four digit Group Exemption Number (GEN) If this rt of the group, check this box ▶ and attach a list with the names and EINs of all	s is for	the whole group, check this			
	AUGUST 1	······································	il bove.	The extension			
	s for the organization  X calendar yea						
1	tax year beg	nning, and ending		_·			
2 1	If this tax year is for i	ess than 12 months, check reason: Initial return Final return		Change in accounting period			
		or Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	3a	\$			
	nonrefundable credit	or Form 990-PF or 990-T, enter any refundable credits and estimated	90				
		Include any prior year overpayment allowed as a credit.	3b	\$			
		act line 3b from line 3a. include your payment with this form, or, if required,	T	T			
(	deposit with FTD cou	upon or, if required, by using EFTPS (Electronic Federal Tax Payment System).	3c	s N/A			
	See instructions.	o make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form					
LHA		nd Paperwork Reduction Act Notice, see Instructions.		Form 8868 (Rev 4-2009			
		-					

Form	1868 (Rev. 4-2009)		Page 2			
• #5	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Pr	art II and check this bo	× . ▶ 🗓			
Note	Only complete Part II if you have already been granted an automatic 3-month extension	on on a previously filed	Form 8868.			
	ou are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).					
Pai	Lif Additional (Not Automatic) 3-Month Extension of Time. On	ly file the original (no co	ples needed).			
Туре	Name of Exempt Organization	190	Employer identification number			
print	l l		12 6010740			
File by	THE FUND FOR ANIMALS, INC	المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة	13-6218740			
extend due da šing th	Number, street, and room or suite no. If a P.O. box, see instructions.		For IRS use only			
refum Justruc	City, town or post office, state, and ZIP code. For a foreign address, see instruct	tions.				
	k type of return to be filed (File a separate application for each return):  Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust)  Form 990-BL Form 990-PF Form 990-T (trust other than above)	Form 1041-A Form 4720	Form 5227 Form 8870			
STOPI Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.						
Te ● If t	I request an additional 3-month extension of time until NOVEMBER 15, 2 For calendar year 2008, or other tax year beginning  If this tax year is for less than 12 months, check reason: Initial return  State in detail why you need the extension  ADDITIONAL TIME IS REQUIRED TO GATHER INFORAND COMPLETE RETURN.  If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative nonrefundable credits. See instructions.  If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credit.	ck this box (GEN) If the names and EINs of all 12 0 0 9, and ending Final return  RMATION AND tax, less any	s is for the whole group, check this mambers the extension is for.  Change in accounting period			
	tax payments made. Include any prior year overpayment allowed as a credit and any a previously with Form 8868.		8b \$			
c	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if		27/2			
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment Sys	tem). See instructions.	8c \$ N/A			
	Signature and Verification		a and a base and halfed			
Under It is tn	penalties of penury, I declare that I have examined this form, including accompanying schedules a e. correct, and complete, and that I am authorized to prepare this form		Dest of my knowledge and bellef,			
Signat	10 > 12 Tale > Account	ant_	Date > 7/9/07			
			Form 8868 (Rev 4-2009)			

# UNITED STATES DISTRICT COURT FOR THE DISTRICT OF COLUMBIA

FELD ENTERTAINMENT, INC.

.

Plaintiff,

Case No. 07- 1532 (EGS)

AMERICAN SOCIETY FOR THE PREVENTION OF CRUELTY

ANIMALS, et al.

v.

:

Defendants.

:

PLAINTIFF'S OPPOSITION TO SUPPLEMENTAL MOTION OF DEFENDANT
HUMANE SOCIETY OF THE UNITED STATES TO DISMISS PLAINTIFF'S
AMENDED COMPLAINT

## **EXHIBIT 4**

Form **990** 

Department of the Treasury Internal Revenue Service

** 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)

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

2009
Open to Public Inspection

A For the 2009 calendar year, or tax year beginning and ending					
	Check i		D Employer iden	tification number	
	Add char	resi label or milita milita mona anticolor del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario del militario d			
F	Nam Char			CO1 OF 10	
F	Initia			-6218740	
F	Tem				
ᅡ	== ated  Ame			2-246-2096	
F	iretur Appl		G Gross receipts \$	7,407,339.	
_	tion pend	Ing NEW YORK, NY 10019  F Name and address of principal officer:MICHAEL MARKARIAN	H(a) Is this a group		
		SAME AS C ABOVE	for affiliates?	Yes X No	
-	Toyo			included? Yes No	
		xempt status: X 501(c) (3 ) ◀ (insert no.) 4947(a)(1) or 527 ite: ➤ WWW • FUNDFORANIMALS • ORG		h a list. (see instructions)	
			H(c) Group exemp		
	art I		Year of formation: 1967	M State of legal domicile: NY	
	1	Briefly describe the organization's mission or most significant activities: TO BE RI	CDONGIBLE DO	AD MITTER TOTAL	
Activities & Governance	1.	ANIMAL CARE FACILITIES AND LEGAL CAMPAIGNS	SPUNSIBLE FO	OR THE HSUS'S	
يق	2	Check this box	N COURTS.		
ş	3	Check this box if the organization discontinued its operations or disposed of	more than 25% of its net	3 <b>1</b>	
පී	4	Number of voting members of the governing body (Part VI, line 1a)	·····	3 <u>5</u>	
త		Number of independent voting members of the governing body (Part VI, line 1b)	·····		
Ħ.	5	Total number of employees (Part V, line 2a)	······	5 0	
₹	6	Total number of volunteers (estimate if necessary)		6 145	
Ş	/a	Total gross unrelated business revenue from Part VIII, column (C), line 12	<u>7</u>	<u>0.</u>	
	<u>P</u>	Net unrelated business taxable income from Form 990-T, ine 34		ъ О.	
	_	Contribution and a set to the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set of the set	Prior Year	Current Year	
Revenue	8	Contributions and grants (Part VIII, line 1h)	11,695,346		
ě	9	Program service revenue (Part VIII, line 2g)	20		
E.		Investment income (Part Vill, column (A), lines 3, 4, and 7d)	113,300		
	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)			
8	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,573,764	. 1,791,803.	
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	112,367	99,067.	
Ř	} b	Total fundraising expenses (Part IX, column (D), line 25) 567,206.			
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	2,720,056	. 3,193,395.	
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,677,962		
	19	Revenue less expenses. Subtract line 18 from line 12	7,462,733		
sets or	l		Beginning of Current Yea		
ase ase	20	Total assets (Part X, line 16)	14,407,447		
Net Ass Fund Ba	21	Total liabilities (Part X, line 26)	120,952		
캳	22	Net assets or fund balances. Subtract line 21 from line 20	14,286,495		
Pa	ert II	Signature Block			
		Under penalties of perjury, I declare that I have examined this fature, including accompanying schedules and stateme and complete. Oeclaration of prepares (other than officer) is based on all information of which preparer has any knowle	nts, and to the best of my knowl	edge and belief, it is true, correct,	
		A CONTRACT OF WINCH PROPERTY RICHARD	ruge.		
Sign Here		1 1 1 W A B	8	26/10	
		Signature of officer	Date		
		G THOMAS WAITE III, TREASURER	•		
		Type or print name and title			
Paid	-0.000000000000000000000000000000000000	Preparer's Date		erer's identifying number instructions)	
	arer's	signature	self- employed ▶ □	maructions	
Use		Firm's name (or yours if RSM MCGLADREY, INC.	EIN ▶		
na¢ (	Jany	self-employed). 8000 TOWERS CRESCENT DR. STE 500			
		Address, and VIENNA, VA 22182-6205	Phone no. >	703-336-6400	
May	the IF	S discuss this return with the preparer shown above? (see instructions)	The second second second	X Yes No	
	1 02-0		instructions.	Form <b>990</b> (2009)	
				. 41111 444 (5003)	

	m 990 (2009) THE FUND FOR ANIMALS, INC 13-6218740 Part III   Statement of Program Service Accomplishments	age 2
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?  If "Yes," describe these new services on Schedule O.	No
3	Did the ennemination and the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the st	_
•	If "Yes," describe these changes on Schedule O.	No
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.	
	and the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street o	
4a	(Code: ) (Expenses \$ 1,832,930 • including grants of \$ 39,000 • ) (Revenue \$	
	(Code: ) (Expenses \$ 1,832,930 · including grants of \$ 39,000 · ) (Revenue \$ HUMANE EDUCATION - EDUCATE THE PUBLIC ON LOCATED TO THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE PUBLIC ON LOCATED THE	)
	HUMANE EDUCATION - EDUCATE THE PUBLIC ON ISSUES AND EVENTS AFFECTING ANIMAL RIGHTS AND WELFARE.	
	TATELLE KICKED AND MEDITARE.	
	-HAVE AN IMPACT ON THE COMMINITY DEVOND THE	
	-HAVE AN IMPACT ON THE COMMUNITY BEYOND JUST THE ANIMALS WE CARE FOR E	BY
	ENGAGING THE PUBLIC AND MOVING THEM TO TAKE ACTION FOR ANIMALS.	
	-PROFESSIONAL EDUCATION FOR VETERINARY AND VETERINARY TECHNICIAN STUDENTS AND POST GRADUATES.	
	TICE OUR ANIMAL CARE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE AS THE COMMENCE	
	-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		
	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 SPECTES	
	THIS IS A PLACE WHERE ANIMALS WALK THROUGH THE DOOR AND ARE NEVER	
	VULNERABLE TO ABUSE OR EXPLOITATION AGAIN. IN 2009 THE DANCH ALCO	
	BECAME THE SITE OF THE DORIS DAY HORSE RESCUE AND ADOPTION CRATER	
	WHERE CUTTING-EDGE METHODS OF CARE AND REHABILITATION WILL BE HIGHD TO	
	HELP RESCUED HORSES FIND FOREVER HOMES.	
<b>4</b> ¢	(Code: ) (Expenses \$ 515,290 · including grants of \$ ) (Revenue \$	
	CAPE WILDLIFE CENTER IN CAPE COD, MA IS A FIVE ACRE FACTLITY 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.	
	THE PROGRAM.	
4d	Other program services. (Describe in Schedule O.)	
	- A AMA A CA	
.0		
2000	Form <b>990</b> (200	nov.

Fon	n 990 (2009) THE FUND FOR ANIMALS, INC 13-621	8740	) F	age 3
P	rt IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	X	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	N/	A
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to		T	
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		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	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		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		1	
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?	<b> </b>	<del> </del>	
	If "Yes," complete Schedule D, Part V	10	}	x
11	is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	111	x	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	132		0 0
	Part VI.		79	
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	2.00		68
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.		31	Fig. 1
•	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.	*	100	37 EV
•	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		3	14 E
	Part X, line 16? If "Yes," complete Schedule D, Part IX.		1.0	100
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	2.0	W.	1 xx
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	lia SS	18	115 8
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.	1	1,235	
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	(8)	S	10
	Schedule D, Parts XI, XII, and XIII.	12	İ	х
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?	12		
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	1	- 1	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	_	Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	148		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	176	<b>-</b>	-43
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	170		
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), fine 3, more than \$5,000 of aggregate grants or assistance to individuals	13		
	located outside the United States? If "Yes," complete Schedule F, Part III	40		v
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		X
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	4.5	x	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17		
	1c and 8a? If "Yes," complete Schedule G, Part II	10	x	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18	Δ	
	complete Schedule G, Part III	40	l	~
20	Did the organization operate one or more bosnitals? If "Ves." complete Schedule V	19		X

_	n 990 (2009) THE FUND FOR ANIMALS, INC 13-62	18740	) F	age 4
Pa	rt IV Checklist of Required Schedules (continued)			
			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	21	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	22		X
23	Did the organization answer "Yes" to Part VII, Section A, Ine 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		]	
	Schedule J	23	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	24a	]	X
þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
¢	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		1
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			1
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete		1	
	Schedule L, Part I	25b	1	X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualifi-	ed		
	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		ł	
	Schedule L, Part III	27		х
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):			- € g
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A farnily member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			X
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) wa	s		
	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?			
	If "Yes," complete Schedule N, Part I	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		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	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	25		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?			
	Note. All Form 990 filers are required to complete Schedule O.	38	x	

	990 (2009) THE FUND FOR ANIMALS, INC 13-621	8740	) F	age 5
Pa	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of		4.8	¥1 1
	U.S. Information Returns. Enter -0- if not applicable	0		1
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0		30
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,	15	14	8 -
		0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	W	SII 58	
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		l	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: ▶	.10%	(69)	. 0
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and		35	
	Financial Accounts.		-27.	35
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 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited	1		
	Tax Shelter Transaction?	5c		1
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	-	<b></b>	<del> </del>
	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).	1	127	(SS) (8
	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		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	<u>'</u>		
	to file Form 8282?	7c		х
	If "Yes," indicate the number of Forms 8282 filed during the year 7d	1.0	1 (2)	
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	1	11 (3	
	benefit contract?	7e	- 22	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			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	- 1		-
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings		27	
	at any time during the year?	8		10
9	Sponsoring organizations maintaining donor advised funds.	- 0		
	Did the organization make any taxable distributions under section 4966?	9a	E	
b	Did the organization make a distribution to a donor, donor advisor, or related person? N/A	9b		
	Section 501(c)(7) organizations. Enter:	90	9	
	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a		80	0):
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1	11.5	
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders N/A 11a		ĵ.	100
	Gross Income from other sources (Do not net amounts due or paid to other sources against	"		ő.
	amounts due or received from them.)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	100		
	if "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a		<del></del>
	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s	Form	990 (	20001
		1 0000	~~~ (	こいいひり

Form	990 (2009) THE FUND FOR ANIMALS, INC 13-62	10740	. 6	age 6
	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and fe	10/40		age u
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.	H B TWO	respor	ise
Sec	tion A. Governing Body and Management			
000	BOTTAL COTOTNING BODY and management		1	
10	Enter the number of voting members of the governing body	<b>_</b>	Yes	No
b	Patentha and to a few standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards are standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards and the standards an	<u>5</u> .		
2	Enter the number of voting members that are independent  Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	_2		
_				
3	officer, director, trustee, or key employee?  Did the organization delegate control over management duties customarily performed by or under the direct supervision	2	X	
•	of officers, directors or trustees, or key employees to a management company or other person?		1	•
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		$\vdash$	X
5	Did the organization become aware during the year of a material diversion of the organization's assets?		<del>                                     </del>	X
6	Does the organization have members or stockholders?			X
-	Does the organization have members, stockholders, or other persons who may elect one or more members of the	6	<del> </del>	-
14	governing body?	7a		х
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	···   'W		
_	by the following:	104.0		
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the		<b></b>	43
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			4.
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	103	X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	100		
	and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?		X	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		ja (6)	
12a	Does the organization have a written conflict of Interest policy? If "No," go to line 13	12a	х	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b	x	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent		i.	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		X
Ь	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	-		
	taxable entity during the year?	16a		X
b	if "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation	920		
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	. 16b		
Sec	tion 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, I	'L,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) availa	ole for		
	public inspection. Indicate how you make these available. Check all that apply.			
	X Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy	, and fina	ncial	
	statements available to the public.			
20	State the name, physical address, and telephone number of the narron who possesses the books and records of the arrangement of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of			

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. 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 an	y cu	ırrer	t of	ficer	, dire	ecto	r, or trustee.		
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average	,,,		Pos			. I. A	Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	hecc aetsrul knoffutteri	Callicer		Highest compensated demonstrated demonstrated		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
MARIAN PROBST								_		
CHAIR/DIRECTOR	1.00	X	_		<u> </u>	<u> </u>		0.	0.	0.
PATRICK MCDONNELL	1 00								_	_
DIRECTOR	1.00	X				<u> </u>		0.	0.	0,
WILLIAM F. MANCUSO	1 00	7.				ĺ		•		
DIRECTOR JUDY NEY	1.00	X			-	-	-	0.	0.	0.
DIRECTOR	1.00	v				ł.,		0.	0.	0
DAVID O. WIEBERS, M.D.	1.00	Α		-		-		0.	U•	0.
DIRECTOR	1.00	v						0.	0.	0.
MICHAEL MARKARIAN	1.00	*	_	-	┢		$\vdash$		V •	
PRESIDENT	1.00			X				0.	189,223.	16,410.
WAYNE PACELLE					$\vdash$				205/225	10/410.
VICE PRESIDENT	1.00			x				0.	234,026.	34,360.
G. THOMAS WAITE III							П			32/3000
TREASURER	1.00			X				0.	188,972.	60,854.
GWEN CRANE										
ASSISTANT TREASURER	1.00			X				0.	97,020.	14,381.
MARY K. BERGE										
ASSISTANT TREASURER	1.00			X				0.	79,232.	13,864.
SHERYL DEMPSEY	ĺ									- · ·
SECRETARY	1.00			X		Щ		0.	57,844.	15,805.
MELISSA RUBIN										
VP, ANIMAL CARE	40.00					X	_	116,447.	0.	20,900.
							l			
	+					-				·
	<del>                                     </del>	$\vdash$	$\vdash$		-	$\vdash$				
								}	Ì	
	<del> </del>	$\dashv$	-	$\dashv$	$\dashv$	$\vdash$	-	-		<del>-</del>
	†	$\neg$					_			

	n 990 (2009) THE FUND	FOR AN	IM	AL	S,	Il	NC			13-6	<u> 2187</u>	40	Page 8
ra	rt VII Section A. Officers, Directors, Tru (A) Name and title	istees, Key Ei (B) Average hours				C) itlor	1		(D)  Reportable compensation	ees (continued) (E) Reportable compensation		(F Estimamou	
		per week	Individual toustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organization (W-2/1099-MIS	is (SC)	from organi and re	nsation the zation
												<del>.</del>	
							ļ						
			Н	_									
						-							
_													
	Total						<b>&gt;</b>		116,447.	846,3	17.	176,	574.
2	Total number of individuals (including but no compensation from the organization	ot limited to th	ose	liste	ed at	OOVE	) wt	10 re	eceived more than \$100	,000 in reportabl	θ	Ye	1
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for se											3	X
4	For any individual listed on line 1a, is the sur and related organizations greater than \$150	m of reportable),000? <i>If "Yes,</i> "	e co • <i>co</i>	mple	ensa ete S	tion Sche	and dule	oti J f	ner compensation from to for such individual	the organization		4 3	
Sec	Did any person listed on line 1a receive or a the organization? If "Yes," complete Schedution B. Independent Contractors	•				-			T			5_	x
1	Complete this table for your five highest corthe organization.	mpensated ind	lepe	nde	nt co	ontr	acto	rs ti	hat received more than	\$100,000 of com	pensati	on fron	n .
ME	(A) Name and business : YER GLITZENSTEIN & CRYS		01				•	_	( <b>B)</b> Description of s	ervices	Con	(C) npensa	ition
	NNECTICUT AVE, NW, WASH				20	000	9	1	LEGAL SERVIC	ES		<u>L13,</u>	588.
								+			<del></del>		
2	Total number of independent contractors (in \$100,000 in compensation from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organization from the organizati	-	ot lin	nited	d to	thos	e lis	ted	above) who received m	ore than			<del></del>
	4,000 at compensation from the organiza					+					Fo	rm <b>99</b> (	0 (2009)

		Statement of Rever	. si			(A) Total revenue	(B) Related or	(C) Unrelated	(D) Revenue excluded from
		207 20 2	. 10				exempt function revenue	business revenue	tax under sections 512, 513, or 514
1	9	Federated campaigns		la			- 14 (A)	2	010, 01014
٠.				lb					
		Membership dues		lc l	7,384.	to to			The Section Section 1
	_	•	·····	ld	1,304.	******	18 1 2 2 2	F 18	
		Related organizations					**************************************		
	-	Government grants (contribut	, F	le			es es l'Arres		
	f	All other contributions, gifts, gran		L					
		similar amounts not included abor	ve <u>  1</u>	If [/ ,	099,475.			C 200	
	_	Noncash contributions included in lines			14,403.		74		
	<u>b</u>	Total, Add lines 1a-1f				<u>7,106,859.</u>			
					Business Code	(f) (k)	4	2.0	U - 55
2	a				7.5				
	b								
	c								
	d								
	_								
	-	All other program service reve	ni io						
		Total, Add lines 2a-2f					NGA.	*	3 9 "
3		Investment income (including							
3	•					20,409.			20,409
		other similar amounts)				20,403.			20,403
4		Income from investment of tax	=	-		244 210			244 210
5	5	Royalties				244,319.			244,319
			(î) Re	al	(ii) Personal	(0.07). Ya. (2047-12)	1 2 2 2 2 2 2 2		
6	8	Gross Rents				1 / 1 = 2 *	1. 1. 1. 1. 1. 1. 1.		
	b	Less: rental expenses							A _{co} a
		Rental income or (loss)							98 5
	d	Net rental income or (loss)				******			
7		Gross amount from sales of	(i) Secu		(ii) Other		11 mg - 11 1		1. 1. 1. 1. 1.
•	<b>-</b>	assets other than Inventory	W 0000	11.00	17,00.10				
		Less: cost or other basis				20		× × ×	
	D				1	i sh			
		and sales expenses				(E		Ø	N G
		Gain or (loss)				Cat		11	
		Net gain or (loss)					53 10		
8	a	Gross Income from fundraising		not				section Management	
		including \$7,3	84. of						THE 1 18 TO 1
		contributions reported on line	1c). See		j				
		Part IV, line 18		а	8,803.	3 4 4 4	2 Y ], a		1.0
	b	Less: direct expenses			2,428.				#( %t
	c	Net income or (loss) from fund	raising ev	ents		6,375.			6,375
9		Gross income from gaming ac				19 10			III
•	_	Part IV, line 19				** 9	5 S 3 3 G	*0 80	* 6
	<b>h</b>	Less: direct expenses				- NO	a) 8		ł
		Net income or (loss) from gam							
				HOS			N P		_38
10	a	Gross sales of inventory, less				\$	E 8		**
		and allowances	·····	а		- 189 	25		*
		Less: cost of goods sold				50 G N	8 W.		5.
	C	Net income or (loss) from sale	s of invent						
		Miscellaneous Revenu	θ		Business Code	ilon * x	8 8		1 A
11	8	LIST RENTAL			511140	26,130.			26,130
	b	MISCELLANEOUS I	NCOME		900099	819.			819
	c								
	-	All other revenue							
		Total. Add lines 11a-11d			<b>&gt;</b>	26,949.			
	4					7,404,911.	0.	0.	298,052
12		Total revenue. See instructions.							

Form 990 (2009) THE FUND FOR ANIMALS, INC

13-6218740 Page 10

Part IX Statement of Functional Expenses

Insurance

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.)

DIRECT RESPONSE COSTS

FUND. EXP ON LINE 8B

Total functional expenses. Add lines 1 through 24f

Joint costs. Check here ► X if following

SOP 98-2. Complete this line only if the organization
reported in column (B) joint costs from a combined

educational campaign and fundraising solicitation

OTHER TAXES

All other 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). (C) Management and general expenses (B) Program service expenses (D) Fundraising (A) Total expenses Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to governments and 39,000 39,000 organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 _____ Benefits paid to or for members ..... Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 73,551. 144,318. 1,421,913. 1,204,044 Other salaries and wages ..... Pension plan contributions (include section 401(k) 7,997 15,691. 154,597 130,909 and section 403(b) employer contributions) ....... 5,787 11,355. 94,738 111,880. Other employee benefits 103,413. 87,568. 5,349 10,496. Payroll taxes 10 Fees for services (non-employees): 11 Management 10,335. 8,019 149,619 131,265 b Legal _____ 2,500 153 197. 2,850. c Accounting ..... d Lobbying 99,067. 99,067. Professional fundraising services. See Part IV, line 17 5,653. 30,969 4,386 41,008. Investment management fees f 411,887. 26,203 33,772. 471,862 Other Advertising and promotion 12 37,666 48,546. 702,809 616,597 Office expenses 13 Information technology 14 Royalties 15 477,214. 29,151 37,572. 543,937. 16 Occupancy 159,230. 9.727. 12,536. 181,493. Travel ..... 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials Conferences, conventions, and meetings ..... 19 Interest 20 Payments to affliates ______ 21 8,578 11,056. 160,062. 140,428 Depreciation, depletion, and amortization .....

23

d

69,828

290,311

36,306

3,916

123,993.

567,206.

512,522.

5,047.

<2,428.>

675,294

4,265,748.

661,374

64,105.

869,115.

5.123.265.

.210.202

73,068.

<2.428.

Form 990 (2009) THE FUND FOR ANIMALS, INC 13-6218740 Page 11

Pa	rt X	Balance Sheet				,	
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				1	300.
	2	Savings and temporary cash investments		•••••	178,280.	2	326,489.
	3	Pledges and grants receivable, net		**************	5,615,424.	3	145,263
	4	Accounts receivable, net			439,414.	4	566,634
	5	Receivables from current and former officers, di					5 3 6
		employees, and highest compensated employe	es. Com	plete Part II	F	9	2 2 2 3
		of Schedule L		******		5	
	6	Receivables from other disqualified persons (as				72	internal section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in the section in t
		4958(f)(1)) and persons described in section 49	58(c)(3)(E	3). Complete	error of the contract of the	* 10	
		Part II of Schedule L				6	
}	7	Notes and loans receivable, net				7	
2005	8	Inventories for sale or use				8	
ί	9	Prepaid expenses and deferred charges				9	645.
	10a	Land, buildings, and equipment: cost or other	1				
		basis. Complete Part VI of Schedule D	10a	3,629,429.		*	i a
	ь	Less: accumulated depreciation	10b	1,485,800.	1,826,515.	10c	2,143,629
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line				12	
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			6,347,814.	15	13,472,914
	16	Total assets. Add lines 1 through 15 (must equ			14,407,447.		16,655,874
	17	Accounts payable and accrued expenses			120,952.	17	87,733
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	· · · · · · · · · · · · · · · · · · ·
	22	Payables to current and former officers, director				(i) (i)	V = A A
		highest compensated employees, and disqualifi				80	
i		of Schedule L	-	· ·		22	
	23	Secured mortgages and notes payable to unrela				23	· , , , , , , , , , , , , , , , , , , ,
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities. Complete Part X of Schedule D				25	······································
	26				120,952.	26	87,733
		Organizations that follow SFAS 117, check he					
,		lines 27 through 29, and lines 33 and 34.			A	£55	*538 T 25 61 T T T T T T T T T T T T T T T T T T
	27	Unrestricted net assets			14,286,495.	27	16,030,270
	28	Temporarily restricted net assets				28	537,871
	29					29	
		Organizations that do not follow SFAS 117, c				751	
	ĺ	complete lines 30 through 34.			2000		
	30	Capital stock or trust principal, or current funds		)==	1000	30	e•
	31	Paid-in or capital surplus, or land, building, or ed			· · · · · · · · · · · · · · · · · · ·	31	
	32	Retained earnings, endowment, accumulated in				32	
•	33	Total net assets or fund balances			14,286,495.	33	16,568,141.
	34	Total liabilities and net assets/fund balances		······································	14,407,447.	34	16,655,874.

Form **990** (2009)

## 

Form	1990 (2009) THE FUND FOR ANIMALS, INC 13-621	<u> 3740</u>	Pa	ge 12
Pa	rt XI   Financial Statements and Reporting			0
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other	(9)		
	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?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
c	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?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	553		19274
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a		2	
	consolidated basis, separate basis, or both:		0	22
	Separate basis X Consolidated basis Both consolidated and separate basis	1 0	100	ř,
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?	3a		X
b	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.	3b		
		Earm	990	2000

SCHEDULE A (Form 990 or 990-EZ)

### **Public Charity Status and Public Support**

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Name of the organization Employer identification number THE FUND FOR ANIMALS, INC 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.) 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). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) A community trust described in section 170(b)(1)(A)(vi), (Complete Part II.) 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4), 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. b ___ Type II c ____ Type III - Functionally integrated d ___ Type III - Other 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). 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 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, Yes No the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s). h (iii) Type of (vi) Is the panizațion in col (iv) Is the organization (v) Did you notify the (i) Name of supported (if) EIN (vii) Amount of organization in col. (i) listed in your organization in col. organization (i) organized in the U.S.? support (described on lines 1-9 governing document? (i) of your support? above or iRC section (see instructions)) Yes No

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

Sch	edule A (Form 990 or 990-EZ) 2009 T	HE FUND F	OR ANIMAL	S, INC		13-621	8740 Page 2		
	rt II Support Schedule for	Organizations	Described in	Sections 170	(b)(1)(A)(iv) and	1 170(b)(1)(A)(\	/i)		
	(Complete only if you checked	d the box on line 5	, 7, or 8 of Part I.)						
Sec	tion A. Public Support								
Cale	endar 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 organ-								
	ization's benefit and either paid to								
	or expended on its behalf		<del>,</del>				_		
3	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge			0054004	11605346	7106050	20606315		
	Total. Add lines 1 through 3	6360608.	6388608.	8074894.	11695346.	7106859.	39626315.		
5	The portion of total contributions	2 to 12					ļ		
	by each person (other than a			14		1			
	governmental unit or publicly				1				
	supported organization) included								
	on line 1 that exceeds 2% of the	1							
	amount shown on line 11,	e e e					E001770		
	column (f)			04 85 10 14 14 15 15 16 16 16 16 16 16 16 16 16 16 16 16 16	34		5891778.		
	Public support. Subtract line 5 from line 4.		*)		X 3000 8.	5 121 -	<u>33734537.</u>		
	tion B. Total Support	1			1	4 3 0000			
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008 11695346.	(e) 2009	(f) Total 39626315.		
	Amounts from line 4	6360608.	6388608.	80/4894.	T10322#0.	/100033.	33020313.		
8	Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties	005 641	100 412	212 076	167,465.	200 050	008 453		
	and income from similar sources	207,641.	120,413.	414,070.	107,403.	290,030	330,433.		
9	Net income from unrelated business						ļ		
	activities, whether or not the		Ì						
	business is regularly carried on	931							
10	Other income. Do not include gain								
	or loss from the sale of capital	E0 1E1	472 205	369 706	273,764.	819	1173745.		
	assets (Explain in Part IV.)	20,131.	4/4,303.	300,700	4/3,/04.	019.	41798513.		
	Total support. Add lines 7 through 10				247	12	135,197.		
12	Gross receipts from related activities, First five years. If the Form 990 is fo	, etc. (see instructi the exceptantion)	o first eacond thir	d fourth or fifth t			100/40/		
13	organization, check this box and sto				an year as a second	11 00 1(0)(0)			
Se	ction C. Computation of Pub	lic Support Pe	rcentage		•••••				
	Public support percentage for 2009 (			column (f))		14	80.71 %		
14 15	Public support percentage from 2009					15	80.68 %		
184	33 1/3% support test - 2009.if the c	omanization did no	t check the box of	n line 13. and line	14 is 33 1/3% or n	nore, check this be	ox and		
100	stop here. The organization qualifies								
	32 1/3% purport test - 2008 if the	erganization did no	t check a box on l	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check t	his box		
•	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								
17-	and stop here. The organization qualifies as a publicity supported organization  17a 10% -facts-and-circumstances test - 2009. If the organization dld not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,								
116	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								
	b 10% -facts-and-circumstances test. The organization dualities as a publicly supported organization 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-cir						<b>&gt;</b>		
10	Private foundation. If the organization	on did not check a	box on line 13, 16	ia. 16b. 17a. or 17	b, check this box	and see instructio	ns ▶□		
10	1 114 and 14 disconnisting to 6 Mary State	w 110t offort u					0 or 990-EZ) 2009		

Pa	edule A (Form 990 or 990-EZ) 2009 rt III   Support Schedule for O ction A. Public Support	rganizations	Described in	Section 509(a)	)(2) (Complete only i	f you checked the bo	ex on line 9 of Part I.)
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not	(a) 2000	(0) 2000	(0) 2001	10/2000	(9) 2000	
	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 bus- iness under section 513						
4	Tax revenues levled for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year				<u> </u>		
	Add lines 7a and 7b			<del> </del>			
	Public support (Subtract line 7c from line 6.)		<u> </u>	<u> </u>			<u> </u>
	ction B. Total Support		T	T	1 ( 0 0000	(.) 0000	(D Total
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Amounts from line 6						<del> </del>
104	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
t	Unrelated business taxable income			1			
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	: 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, thi	rd, fourth, or fifth t	tax year as a sectio	n 501(c)(3) organi	zation,
	check this box and stop here ction C. Computation of Publi		*************************				•
15	Public support percentage for 2009 (	ine 8, column (f) o	livided by line 13.	column (f))		15	9/
16	Public support percentage from 2008					16	9
	ction D. Computation of Inves						
17	investment income percentage for 20					17	94
18	investment income percentage from a					18	9
19:	33 1/3% support tests - 2009. If the	organization did	not check the box	on line 14, and lin	e 15 is more than 3	33 1/3%, and line	
101	more than 33 1/3%, check this box ar						
	33 1/3% support tests - 2008. If the	organization did	not check a box o	n line 14 or line 19	a, and line 16 is mo	ore than 33 1/3%,	and
	line 18 is not more than 33 1/3%, che	ck this box and s	top here. The orga	anization qualifies	as a publicly suppo	orted organization	▶□
20	Private foundation. If the organization	n did not check a	box on line 14, 19	ea, or 19b, check t	this box and see in:	structions	▶□
X							90 or 990-EZ) 200

## 

Schedule A	(Form 990	or 990-EZ	12009	THE F	UND I	FOR .	ANIMALS	, INC			<u>13-6218740</u>	Page 4
Part IV	Sunnle	mental I	nform	ation.	Complete	this na	ANIMALS rt to provide t	he explana	tions require	d by Part II. line	10; Part II, line 17a or 1	
	ouppie	il line 10	Drováda	ony otho	oonipiete raddition	al infor	mation. See in	etructions		<b></b> ,		,
	and Parti	11, 1110 12.	FIONUE	ally out	r audiuoi	Jai II II OI	Hation, Goo a	3110010110	·			
									OMITTO	TNOOME.		
SCHEDU	ILE A,	PART	II,	LINE	10,	EXP	<u>LANATIC</u>	N FOR	OTHER	INCOME:		
OTHER	INCOM	E FROI	M EX	EMPT	ACTI	VITI	ES					
<u> </u>												
	-											
											7022 N N	
		*********										
		-										
		-1871) V-	124.00					2000 PA 00 00 00				
												-
										0.00		
								250000000				
				7 100000 100000								
											4100	*
										-		
		2000										
										<del> </del>		
								100000		Valida Colonia Procession		
		-										
			5		12.131		- POSSESS - 10 - 1-10			0.000		
					- 1	21112						
					•		-					
V												
			una Wasan wan nama		5500							
											3 2-2 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	or - William Williams
											- 6	

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

**Schedule of Contributors** 

OMB No. 1546-0047

Department of the Treasury Internal Revenue Service

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

2009

Name of the organizat	ion	Employer identification number
	THE FUND FOR ANIMALS, INC	13-6218740
Organization type (che	ck one):	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private four	ndation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	ion
	501(c)(3) taxable private foundation	
	on is covered by the General Rule or a Special Rule. 11(c)(7), (8), or (10) organization can check boxes for both the General Rule and	I a Special Rule. See Instructions.
General Rule		
· · · · · · · · · · · · · · · · · · ·	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 omplete Parts I and II.	or more (in money or property) from any one
Special Rules		
509(a)(1) and 1	501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support (170(b)(1)(A)(vi), and received from any one contributor, during the year, a contron (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, Ine 1. Complete Parts I are	ibution of the greater of (1) \$5,000 or (2) 2%
aggregate con	501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from a tributions of more than \$1,000 for use exclusively for religious, charitable, scient of cruelty to children or animals. Complete Parts I, II, and III.	
contributions f If this box is cl purpose. Do n	501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from a for use exclusively for religious, charitable, etc., purposes, but these contributed necked, enter here the total contributions that were received during the year foot complete any of the parts unless the General Rule applies to this organizate table, etc., contributions of \$5,000 or more during the year.	ons did not aggregate to more than \$1,000. or an exclusively religious, charitable, etc., tion because it received nonexclusively
but it must answer "No	on that is not covered by the General Rule and/or the Special Rules does not to no part IV, line 2 of its Form 990, or check the box on line H of its Form 990-le filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	
LHA For Privacy Act a	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.

Schedule B (F	form 990, 990-EZ, or 990-PF) (2009)			Page 1 of 2 of Parti
Name of or	ganization		Employ	er identification number
THE F	UND FOR ANIMALS, INC		13	-6218740
Part I	Contributors (see instructions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribut	tions	(d) Type of co <del>ntri</del> bution
1		\$ <u>146,6</u>	<u>67.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribut	tions	(d) Type of contribution
2		\$ <u>200,0</u>	00.	Person X Payroll
(a) No.	(b) Name, address, and ZiP + 4	(c) Aggregate contribut	tions	(d) Type of contribution
3		\$ 245,0		Person X Payroli
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribu	tions	(d) Type of contribution
4		\$ <u>276,9</u>	92.	Person X Payroli  Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribu	tions	(d) Type of contribution
5		\$ <b>404</b> ,1	<u>30.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribut	tions	(d) Type of contribution
6		\$ <u>689,6</u>		Person X Payroll

	Form 990, 990-EZ, or 990-PF) (2009)		Page Z of Z of Parti
Name of or	ganization	Empi	oyer identification number
ਅ ਤਮਾ	UND FOR ANIMALS, INC	1	3-6218740
Part I	Contributors (see instructions)		
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
7		\$ 180,000.	Person X Payroll
(a)	(b)	(c) Aggregate contributions	(d) Type of contribution
No.	Name, address, and ZIP + 4	Aggregate contributions  \$\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Occupied Payroll Payroll Payroll Payroll Payroll I if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		<b>s</b>	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		<b>\$</b>	Person Payroli Noncash (Complete Part II if there is a noncash contribution.)

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

## **Political Campaign and Lobbying Activities**

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Complete if the organization is described below.

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

Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. if the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

Open to Public Inspection

Schedule C (Form 990 or 990-EZ) 2009

<ul> <li>Section 527 organizations: Complete</li> </ul>	e Part I-A only.			
if the organization answered "Yes," to	Form 990, Part IV, line 4, or F	form 990-EZ, Part VI, I	Ine 47 (Lobbying Activities),	, then
• Section 501(c)(3) organizations that	have filed Form 5768 (election of	under section 501(h)): (	Complete Part II-A. Do not co	mplete Part II-B.
• Section 501(c)(3) organizations that			(h)): Complete Part II-B. Do n	ot complete Part II-A.
if the organization answered "Yes," to	Form 990, Part IV, line 5 (Pro	xy Tax), then		
<ul> <li>Section 501(c)(4), (5), or (6) organiza</li> </ul>	tions: Complete Part III.			
Name of organization			Emplo	oyer identification number
THE FUN	D FOR ANIMALS,	INC		<u> 13-6218740</u>
	anization is exempt un			ganization.
1 Provide a description of the organiz	zation's direct and indirect polit	ical campaign activities	in Part IV.	
2 Political expenditures			▶\$	
3 Volunteer hours				
Part I-B Complete if the org	janization is exempt un	der section 501(c	)(3).	
1 Enter the amount of any excise tax	incurred by the organization ur	nder section 4955		
2 Enter the amount of any excise tax	incurred by organization mana	gers under section 495	5 <b>▶</b> \$	
3 If the organization incurred a section	on 4955 tax, did it file Form 472	0 for this year?		Yes   No
4a Was a correction made?				Yes No
b if "Yes," describe in Part IV.		1	averation FO1/	-\(\(\alpha\)
Part I-C Complete if the org				
1 Enter the amount directly expende	d by the filing organization for s	ection 527 exempt fund	ction activities > \$	
2 Enter the amount of the filing organ	nization's funds contributed to o	other organizations for s	section 527	
exempt function activities			<b>&gt;</b> \$	
3 Total exempt function expenditures	s. Add lines 1 and 2. Enter here	and on Form 1120-PO	L,	
line 17b				
4 Dld the filing organization file Form	1120-POL for this year?			Yes No
5 Enter the names, addresses and en	mployer identification number (I	EIN) of all section 527 p	colitical organizations to which	n payments were made.
For each organization listed, enter	the amount paid from the filing	organization's funds. A	uso enter the amount of politi	cal contributions received
that were promptly and directly de			eparate segregated fund or a	political action committee
(PAC). If additional space is needed	1			/ > A
(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political contributions received and
			filing organization's funds. If none, enter -0.	promptly and directly
			Tango: II Trong onto	delivered to a separate
				political organization. If none, enter -0
				il florie, effici -o
		1		
	1	-1	1	1

LHA

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

## 

Schedule C (Form 990 or 990-EZ) 2009 Part II-A Complete if the orga	anization	is exei	OR ANIMALS, mpt under section	<u>INC</u> 501(c)(3) and fil	13-6 ed Form <b>5768</b>	218740 Page 2
(election under section A Check ► if the filing organization			liated group.	· · · · · · · · · · · · · · · · · · ·		
B Check ▶ ☐ if the filing organizati	on checked	box A ar	nd "limited control" prov	islons apply.		
	s on Lobbyi itures" mea		nditures ints paid or incurred.)	) )	(a) Filing organization's totals	(b) Affiliated group totals
ta Total lobbying expenditures to influe	ence public	opinion (	grass roots lobbying)			
b Total lobbying expenditures to influe						
c Total lobbying expenditures (add lin						······································
d Other exempt purpose expenditures						
<ul> <li>Total exempt purpose expenditures</li> </ul>						
f Lobbying nontaxable amount. Enter	r the amoun	t from the	e following table in both	columns.		
If the amount on line 1e, column (a) or			bying nontaxable amo		82	12 97 TX
Not over \$500,000			the amount on line 1e.			i v
Over \$500,000 but not over \$1,000,	,000		00 plus 15% of the exce			
Over \$1,000,000 but not over \$1,50	00,000	\$175,00	00 plus 10% of the exce	ss over \$1,000,000.		10 10
Over \$1,500,000 but not over \$17,0	000,000	\$225,00	00 plus 5% of the exces	s over \$1,500,000.		2 2 0
Over \$17,000,000		\$1,000,	000.			
					E 180	
g Grassroots nontaxable amount (ent	er 25% of fil	ne 1f)		***************************************		
h Subtract line 1g from line 1a. If zero	or less, ent	er-0				
i Subtract line 1f from line 1c. If zero						<u> </u>
j If there is an amount other than zero	o on either l	ne 1h or	fine 1i, did the organizat	ion file Form 4720	r	
reporting section 4911 tax for this y	/ear?					Yes No
(Some organiza coli	ations that i umns belov	nade a s v. See th	eraging Period Under Section 501(h) election te instructions for lines	do not have to com 2a through 2f on p	plete all of the five age 4.)	· <u></u>
	Lobbyi	ng Expe	nditures During 4-Year	Averaging Period	T	1
Calendar year (or fiscal year beginning in)	(a) 20	D6	(ь) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount						
b Lobbying ceiling amount				¥.		
(150% of line 2a, column(e))	() T.()		20.00		<u>(</u> j=1	
c Total lobbying expenditures						
d Grassroots nontaxable amount			-			<del> </del>
e Grassroots celling amount			100		g 9 5	
(150% of line 2d, column (e))		59 E	** (39) × (45)		g 8	
f Grassroots lobbying expenditures	A software to				Schedule C (Form	990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 2009 THE FUND FOR ANIMALS, INC 13-6218740 Page 3

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	Amo	ount
1	During the year, did the filling organization attempt to influence foreign, national, state or			¥ 2,	S 10
	local legislation, including any attempt to influence public opinion on a legislative matter	39	1		28
	or referendum, through the use of:	100	(g. 18)	* 5 8	
а	Volunteers?		X		8 9
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1))?		X		8 (5)
¢	Media advertisements?	<u> </u>	X		
d	Mailings to members, legislators, or the public?		X		
0	Publications, or published or broadcast statements?		X		
f	Grants to other organizations for lobbying purposes?	X	<u> </u>	10	0,000.
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		X		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X		
i	Other activitles? If "Yes," describe in Part IV		X		
j	Total. Add lines 1c through 1l			1(	0,000.
	Did the activities In line 1 cause the organization to be not described in section 501(c)(3)?		X		
	If "Yes," enter the amount of any tax incurred under section 4912		20	····	
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	}			
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).	on 501(c	)(5), or se	ction	
	501(c)(6).				r
				Yes	No
1					
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				ļ
3	Did the organization agree to carryover lobbying and political expenditures from the prior year? t III-B   Complete if the organization is exempt under section 501(c)(4), secti		3		<u> </u>
	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa "Yes."	rt III-A, I	ine 3 is a	nswered	
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	çal			
	expenses for which the section 527(f) tax was paid).		_		
а	Current year				
b	Carryover from last year				<del></del>
C					
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	ļ	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political		ļ	
	expenditure next year?		4	<b></b>	
5	Taxable amount of lobbying and political expenditures (see instructions)		5	<u> </u>	
	t IV Supplemental Information				
	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; a	nd Part II-E	3, line 1i. Alse	o, complete	this part
	ny additional information.				
PA	RT II-B, LINE 1(I), OTHER LOBBYING ACTIVITIES:				
				•	
PR	OMOTE LEGISLATION TO PREVENT CRUEL FACTORY FARMING	PRACT	ICES.		
_					
_					

#### Schedule D

(Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ➤ Attach to Form 990. ➤ See separate instructions.

Inspection Employer Identification number

	THE FUND FOR ANIMALS, INC	13-6218740
Par		ccounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6.	
		b) Funds and other accounts
1	Total number at end of year	
	Aggregate contributions to (during year)	
	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 fun	ds
	are the organization's property, subject to the organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used of	only
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose confer	ring
	impermissible private benefit?	
Par		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 historical	
	Protection of natural habitat Preservation of a certified hi	storic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a co	onservation easement on the last
	day of the tax year.	The state of the Table
		Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
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 organ	azadon duning the tax
	year ▶	
4	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
5	violations, and enforcement of the conservation easements it holds?	Yes No
	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during t	
6 7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(t	
0	and section 170(h)(4)(B)(ii)?	N
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense state	ment, and balance sheet, and
•	include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's	ganization's accounting for
	conservation easements.	
Par	t 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 se	ervice, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these items.	
b	if the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance she	eet works of art, historical treasures,
	or other similar assets held for public exhibition, education, or research in furtherance of public service, prov	ide 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:	
а	Revenues included in Form 990, Part VIII, line 1	> \$
b	Assets included in Form 990, Part X	▶ \$

		D FOR ANIM				-6218740 Page <b>2</b>
Pa	rt III Organizations Maintaining C					
3	Using the organization's acquisition, access	ion, and other record	is, check any of th	e following that are	a significant use o	of its collection items
	(check all that apply):					
а	Public exhibition	d		change programs		
b	Scholarly research	е	· L Other			
C	Preservation for future generations					
4	Provide a description of the organization's c					ı Part XIV.
5	During the year, did the organization solicit of	or receive donations	of art, historical to	easures, or other sin	nilar assets	
	to be sold to raise funds rather than to be m					
Pai	rt IV Escrow and Custodial Arran	•	ete if organization	answered "Yes" to	Form 990, Part IV,	line 9, or
	reported an amount on Form 990, Pa					
1a	Is the organization an agent, trustee, custod	lian or other intermed	dary for contributi	ons or other assets	not included	
	on Form 990, Part X?					Yes No
b	If "Yes," explain the arrangement in Part XIV				·	
		.0				Amount
c	Beginning balance				1c	
d	Additions during the year				1d	
е	Distributions during the year				1e	
f	Ending balance					
2a	Did the organization include an amount on F					Yes No
b	If "Yes," explain the arrangement in Part XIV					
Pai	rt V Endowment Funds. Complete	if the organization ar	swered "Yes" to	Form 990, Part IV, li	ne 10.	
		(a) Current year	(b) Prior year	(c) Two years bac	k (d) Three years	back (e) Four years back
1a	Beginning of year balance				<b>5</b>	
b	Contributions			· # #	8	8 8
c	Net investment earnings, gains, and losses				19	•
d	Grants or scholarships					0
е	Other expenditures for facilities			9.5	5 4 5 4 9	
	and programs			72.00		* * *
f	Administrative expenses			1.7		2,3
a	End of year balance			¥.	*	1 2 2
2	Provide the estimated percentage of the year	ar end balance held a	as:			
а	Board designated or quasi-endowment		_%			
b	Permanent endowment		<del></del>			
		<del></del> %				
	Are there endowment funds not in the posse	ession of the organiz	ation that are held	and administered t	for the organization	n
	by:					Yes No
	(i) unrelated organizations					3a(i)
	(II) related organizations					1 1
b	If "Yes" to 3a(ii), are the related organization					
	rt VI Investments - Land, Building			90, Part X, line 10.		
	Description of investment	(a) Cost or o	other (b) Co	st or other (d	c) Accumulated	(d) Book value
		basis (investr		is (other)	depreciation	
1a	Land		1.4	90,541.		1,490,541.
	Buildings	I I			L,298,364	
	Leasehold improvements					
	Equipment		1	70,408.	80,326	90,082.
	Other			11,306.	107,110	
	, Add lines 1a through 1e. (Column (d) must e					2,143,629.

Schedule D (Form 990) 2009 THE FUND F		<u>C</u>	<u></u>	218740 Pag
Part VII Investments - Other Securities.	See Form 990, Part X, line 12			<b>.</b>
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valuation to rend-of-year market	
nancial derivatives		-		
losety-heid equity interests				
ther				
	<u> </u>			
				<del></del>
		<del></del>		
tal. (Col (b) must equal form 990, Part X, col (B) line 12.)	M Total Total	- SA	747 a 407 g	4
Part VIII Investments - Program Related.	See Form 990, Part X, line 1:	3.		
			(c) Method of valuation	າ:
(a) Description of investment type	(b) Book value		or end-of-year market	
		_		
	<u> </u>	***************************************		
			<del></del>	
<del> </del>				
			6)	
otal. (Col (b) must equal Form 990, Part X, col (B) line 13.)		<i>2</i> 2	*	* *
Part IX Other Assets. See Form 990, Part X, fir				
	a) Description			(b) Book value
FFILIATE RECEIVABLE				13,472,91
				10/1/2/51
				····
			· · · · · · · · · · · · · · · · · · ·	
otal. (Column (b) must equal Form 990, Part X, col (B) li	ne 15.)			13,472,91
			<b>&gt;</b>	13,472,91
		(b) Amount	<b>&gt;</b>	13,472,91
Part X Other Liabilities. See Form 990, Part X (a) Description of liability		(b) Amount	<b>&gt;</b>	13,472,91
Part X Other Liabilities. See Form 990, Part X (a) Description of liability		(b) Amount	<b>&gt;</b>	13,472,91
Part X Other Liabilities. See Form 990, Part 3  (a) Description of liability		(b) Amount	<b>&gt;</b>	13,472,91
Part X Other Liabilities. See Form 990, Part X (a) Description of liability		(b) Amount	<b>&gt;</b>	13,472,91
Part X Other Liabilities. See Form 990, Part 3  (a) Description of liability		(b) Amount	<b>&gt;</b>	13,472,91
Part X Other Liabilities. See Form 990, Part X (a) Description of liability		(b) Amount	<b>&gt;</b>	13,472,91
Part X Other Liabilities. See Form 990, Part (a) Description of liability		(b) Amount	<b>&gt;</b>	13,472,91
Part X Other Liabilities. See Form 990, Part (a) Description of liability		(b) Amount	<b>&gt;</b>	13,472,91
Part X Other Liabilities. See Form 990, Part (a) Description of liability		(b) Amount	<b>&gt;</b>	13,472,91
		(b) Amount	<b>&gt;</b>	13,472,91
Part X Other Liabilities. See Form 990, Part X (a) Description of liability		(b) Amount	<b>&gt;</b>	13,472,91

Sche	dule D (Form 990) 2009 THE FUND FOR ANIMALS, INC			<u>13-6</u>	<u>5218740                                    </u>	Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to	Audited	Financial State	ement	S	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	•			7,404,	911.
2	Total expenses (Form 990, Part IX, column (A), line 25)			•	5,123,	
3	Excess or (deficit) for the year. Subtract line 2 from line 1				2,281,	
-	Net unrealized gains (losses) on investments					<del>• • • •</del>
4	• • • • • • • • • • • • • • • • • • • •		·····		· · · · · · · · · · · · · · · · · · ·	
5	Donated services and use of facilities		1 - 1			
6	Investment expenses					
7	Prior period adjustments		1 1		10	
8	Other (Describe In Part XIV.)			<del></del>		
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	d 9	10		2,281,	646.
Pa	t XII Reconciliation of Revenue per Audited Financial Stateme	nts With	Revenue per l	teturn		
1	Total revenue, gains, and other support per audited financial statements	•••••		1	7,424,	<u>406.</u>
2	Amounts included on line 1 but not on Form 990, Part Vill, line 12:			A		
а	Net unrealized gains on investments	2a				
	Donated services and use of facilities		17,067	±1,000		
G	Recoveries of prior year grants			7		
4	Other (Describe in Part XIV.)	2d		1,5		
	Add lines 2a through 2d			20	17.	067.
_	=			<del></del>	7,407,	
3	Subtract line 2e from line 1	••••	•••••		7, 407,	337.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	11		(CE)*		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	<2,428	- 1		
	Other (Describe in Part XIV.)	4b	<4,448	7.1		400
C	Add lines 4a and 4b					<u>428.</u> >
_5_	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			151	7,404,	911.
Pa	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents Witi	n Expenses pe	r Hetu	<u>rn</u>	
1	Total expenses and losses per audited financial statements			1	5,142,	<u>760.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			19		
а	Donated services and use of facilities	2a	17,067			
b	Prior year adjustments			7.		
c	Other losses					
4	Other (Describe in Part XIV.)	2d		۱ ۱		
	Add lines 2a through 2d			20	17.	067.
3	Subtract line 2e from line 1				5,125,	693.
3	Amounts included on Form 990, Part IX, line 25, but not on line 1:	• • • • • • • • • • • • • • • • • • • •	***************************************		3,123,	<del></del>
4		امها		81		
	Investment expenses not included on Form 990, Part VIII, line 7b		<2,428	-L		
	Other (Describe in Part XIV.)	40	<2,440	1. 1	-0	400 -
C	Add lines 4a and 4b					428.>
5			***************************************	5	5,123,	265.
	t XIV Supplemental Information					<del></del>
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II	I, lines 1a a	and 4; Part IV, lines	1b and 2	2b; Part V, line	4; Part
X, IIn	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comp	olete this pa	art to provide any ac	ditional	information.	
PAI	RT XII, LINE 4B - OTHER ADJUSTMENTS:					
	12 3328 /		•			
ונוים	NDRAISING EXPENSES REPORTED ON PART VIII L	TMR SE	2428.			
FUI	WARIBING BAFEMBED REPORTED ON TAKE VILL D.	11111 01	71 22201			<del></del>
				<del></del>	····	
	om statt i tam An Omilion an Thomasimo.					
<u>PA</u>	RT XIII, LINE 4B - OTHER ADJUSTMENTS:	<del></del>			<del> </del>	
			0.400			
FUI	NDRAISING EXPENSES REPORTED ON PART VIII L	TNE 8E	s: -2428.			

**SCHEDULE G** (Form 990 or 990-EZ) **Supplemental Information Regarding Fundraising or Gaming Activities** 

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047

Open To Public

Department of the Treasury Inspection internal Revenue Service ➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions. Name of the organization Employer identification number 13-6218740 THE FUND FOR ANIMALS, INC Fundralsing Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ flers are not Part I required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. a X Mail solicitations e Solicitation of non-government grants Solicitation of government grants X Internet and email solicitations X Phone solicitations g X Special fundraising events d X In-person solicitations 2 a Dld the organization have a written or oral agreement with any individual (including officers, directors, trustees or X Yes ... No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions (v) Amount paid (vi) Amount paid (Iv) Gross receipts (i) Name of individual to (or retained by) (ii) Activity to (or retained by) from activity fundraiser or entity (fundraiser) organization listed in col. (i) NATIONAL OUTDOOR FUNDRAISING Yes No 595,993 77,170. 518,823. X SPORTS CONSULTANT TELE FR TO OBTAIN 21,899. 13,779. 35,678 THE SHARE GROUP, INC MULTI YR REVENUE X 99,069.1,532,602. 1,631,671. 3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing. AK, AL, AR, AZ, CA, CO, CT, FL, GA, HI, IL, KS, KY, LA, 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

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

Schedule G (Form 990 or 990-EZ) 2009

		e G (Form 990 or 990-EZ) 2009 THE FU	IND FOR ANIMA	LS, INC		13-	-6218	740	Pag	<u> 1e 2</u>
Pa	rt I	Fundraising Events. Complete if the on Form 990-EZ, Ine 6a. List events with	ne organization answered	"Yes" to Form 990, an \$5 000	Part IV, line	18, or reported	more th	an \$15	,000	
		on Form 990-E2, the 68, List events with	(a) Event #1 GOLF	(b) Event #2		Other events		Total e		
			TOURNAMENT			<del></del>	- (000	col. (c		9
9			(event type)	(event type)	(to	tal number)	<del>                                     </del>			<del></del>
Revenue	1	Gross receipts	16,187.				<u> </u>	16	,18	37.
	2	Less: Charitable contributions	7,384.		_		-	7	,38	34.
	3	Gross income (line 1 minus line 2)	8,803.				1	8	,80	<u>)3.</u>
	4	Cash prizes					ļ			
88	5	Noncash prizes								
xpens	6	Rent/facility costs					<u> </u>			
Direct Expenses	7	Food and beverages				······-	ļ		<del> </del>	
	8	Entertainment								
	9	Other direct expenses	2,428.				<del>  ,                                   </del>		, 4	
	10	Direct expense summary. Add lines 4 through					<u> </u>		3,4: 5,3	<u>40 d</u> 75.
Pa		Net income summary. Combine line 3, colun	n (d), and line 10, answered "Yes" to Form	990. Part IV. line 19	, or reported	d more than			,,,	13.
ra		\$15,000 on Form 990-EZ, ine 6a.		,						
			(a) Bingo	(b) Pull tabs/instan		Other gaming		otal gar		
inue			(a) Dirigo	bingo/progressive bir	190		col. (a	) throug	gh co	I. (C))
Revenue	1	Gross revenue					-			
98	2	Cash prizes				<del></del>				
Direct Expenses	3	Noncash prizes				A- # MT				
Direct E	4	Rent/facility costs								
	5	Other direct expenses			<u> </u>					
			Yes%	Yes		/es %	Ó	90 P		
	6	Volunteer labor	No No	No	ا بـــــا ر	<u> </u>				
	7	Direct expense summary. Add lines 2 through	gh 5 in column (d)			<b>&gt;</b>				
	8	Net gaming income summary. Combine line	1, column (d), and line 7			<b>&gt;</b>	<u>,                                    </u>		Yes	No
۵	Fr	nter the state(s) in which the organization oper	ates gaming activities:				_			<u></u>
37	ىا Is	the organization licensed to operate gaming a	activities in each of these	states?				9a		
		"No," explain:							2	
40		ere any of the organization's gaming licenses	revoked suspended or to	aminated during the	tax vear?		-	10a	1	
		ere any of the organization's gaining incenses "Yes," explain:	revoked, suspended or to	, manacou dum, go				142		
		pes the organization operate gaming activities	with nonmembers?				•	11		
11	DX	pes the organization operate gaming activities the organization a grantor, beneficiary or trus	tee of a trust or a membe	r of a partnership or	other entity	formed to			-	
12		the organization a grantor, beneficiary of trus					•••••	12		

## 

Schedule G (Form 990 or 990-EZ) 2009 THE FUND FOR ANIMALS, INC		13-621	8/4	U P	age 3
				Yes	No
3 Indicate the percentage of gaming activity operated in:			ii .	* 3	
a The organization's facility		%	5 g		
b An outside facility	13b	- %	2 7		4.1
4 Enter the name and address of the person who prepares the organization's gaming/special events book	and reco	rds:			
Name			5		
				8	
Address >				-	1/2
			12	11.00	37 ×
5a Does the organization have a contract with a third party from whom the organization receives gaming re-	renue?		15a		$oxed{igspace}$
			565		
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$a	nd the amo	ount		8 2	34
of garning revenue retained by the third party >\$				22	
c If "Yes," enter name and address of the third party:				721	5
			s ^T	ranta ^{/2}	150
Name				84	/2
			al E R	ī	
Address >			1	25	
			a pero	ě:	
6 Gaming manager information:			20		
			6.8		8
Name			27	16 SH	
			35.35	×	
Gaming manager compensation > \$			2	8	=22
			85		
Description of services provided				- 3	
			10	.00	
				. 1	
Director/officer Employee Independent contractor				60 10	
				20	
7 Mandatory distributions:			ļ	Ì	
a is the organization required under state law to make charitable distributions from the gaming proceeds t	0				1
retain the state gaming license?			17a	<u> </u>	<u> </u>
b Enter the amount of distributions required under state law to be distributed to other exempt organization			1		
organization's own exempt activities during the tax year > \$			1		1

SCHEDULE			Store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store of the store	Grands and Other Assistance to Organizations	oroiteriarion of			OMB No. 1545-0047	1545-0047
(Form 990)			Government	Governments, and Individuals in the United States	In the United State			2003	60
Department of the Treasury Internal Revenue Service		Complete if	44	n answered "Yes" on Fo  ▶ Attach to Form 990.	on Form 990, Par m 990.	the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.		Open to	Open to Public Inspection
Name of the organization	THE FUND	FOR ANIMALS	T.S. INC					Employer identification number 13-6218740	lentification number
Part ( General In	n Grants	nd Assistance	1				1		
1 Does the organiz	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	o substantiate the	e amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	istance, and the select		Į
criteria used to an 2 Describe in Part I	criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	stance? xeedures for mont	toring the use of grant	funds in the United	1 States.			X Yes	Š.
= 1	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, fine 21, for any	Governments an	d Organizations In the	e United States. C	omplete if the orga	inization answered "Y	'es* to Form 990, Part	IV, line 21, for any	
recipient th	recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule 1-1 (Form 990) if additional space is needed	5,000. Check this	s box if no one recipier	nt received more th	an \$5,000. Use Pa	irt iV and Schedule I-1	(Form 990) if addition	al space is needed	
1 (a) Name and ad or gov	1 (a) Name and address of organization or government	( <b>b</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	grant
OHIOANS FOR HUMANE FARMS	E FARMS								
1799 W 5TH AVE #318 COLUMBUS, OH 43212	18	27~1083586	501(C)(4)	10,000.	0			CITIZENS BACKED BALLOT INITIATIVE,	BALLOT
	SAL					- -		Ñ	
833 FAIRVIEW ROAD	ONT.		=						
SIMPSONVILLE, SC 29680	29680	20-5315478	501(C)(4)	29,000.	0			RABBIT SHBLTER.	
2 Enter total numb	Enter total number of section 501(c)(3) and government organizations	nd government or						<b>A</b>	
3 Enter total numb	Enter total number of other organizations	9	- 1		***************************************	***************************************	7	<b>A</b>	2
LHA For Privacy Act	For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990	ction Act Notice,	see the Instructions	for Form 990.				Schedule 1 (Form 990) 2009	n 990) 2009

932101 02-02-10

	ANIMALS, IN	INC			13-6218740 Page 2	011
Part III Grants and Other Assistance to Individuals in the United States. G. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.	ited States. Com ace is needed.	plete if the organiza	ation answered "Yes"	Complete if the organization answered "Yes" to Form 990, Part IV, line 22. d.		
(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	,
						Case
		+0				1:07-cv-0
						1532-EGS
						Docu
						ment 66
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	de the information	required in Part I,	ine 2, and any other	additional information.		-5
THE FUND FOR ANIMALS ISSUES GRANTS	වූ	ORGANIZATIONS	THAT MEET (	OUR		Filed
MISSION CRITERIA. GRANTS ARE USUALLY	5	VEN TO ORGANIZATIONS		тнат наув		\E0 t
BEEN THOROUGHLY RESEARCHED BY US OR TO ONES WITH WHICH WE HAVE	R TO ONE	S WITH WHI	CH WE HAVE	AN		'04/1
EXISTING RELATIONSHIP. GRANT OVERSIGHT		IS ACCOMPLISHED	нвр тнкопен	I A		1 F
VARIETY OF METHODS SUCH AS GRANT R	REPORTS, 1	MEETINGS W	WITH GRANTEES	SS, AND		Page
SITE VISITS.						32
						of 45
				The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s		200 -
932102 02-02-10		32			Schedule I (Form 990) 2009	

Department of the Treasury Internal Revenue Service

## **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.

OMB No. 1545-0047

Open to Public Inspection

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

ra	art i Questions Regarding Compensation				
		-		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the	e following to or for a person listed in Form 990,	3.5	25	ĺ
	Part VII, Section A, line 1a. Complete Part III to provide any relevant	information regarding these items.	₀ 10	ev i	san f
	First-class or charter travel	Housing allowance or residence for personal use		5957	304.0 U
	Travel for companions	Payments for business use of personal residence			155
	Tax indemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (e.g., maid, chauffeur, chef)	2	33.5	
h	If any of the boxes on line 1a are checked, did the organization follo	w a written policy regarding payment or			
~	reimbursement or provision of all of the expenses described above?		1b		
2	Did the organization require substantiation prior to reimbursing or al				
_	trustees, and the CEO/Executive Director, regarding the items chec		2		1
	notion, and the open photon of the training the terms of the		981.1		1
3	Indicate which, if any, of the following the organization uses to estal	hlish the compensation of the organization's	•	5 G W	1986
3	CEO/Executive Director. Check all that apply.	olds) the compensation of the organization of	16. N		
	Compensation committee	Written employment contract		A . 3	1
		Compensation survey or study	-		E
	Independent compensation consultant	Approval by the board or compensation committee		~	
	Form 990 of other organizations	J Approval by the board of compensation committee		11 8	
	During the year, did any person listed in Form 990, Part VII, Section	A line 1e with respect to the filing			17
4		A, line 1a, with respect to the ming		23	
	organization or a related organization:	<b>=</b>	4-		x
	Receive a severance payment or change-of-control payment?		4a 4b		X
	Participate in, or receive payment from, a supplemental nonqualified				X
C	Participate in, or receive payment from, an equity-based compensal		4c		A
	If "Yes" to any of lines 4a-c, list the persons and provide the applica	Die amounts for each item in Part III.		1 1	7.7
	Out. and the Code (O) and Code (A) are calculated as a much complete	a linea 5 O			
_	Only section 501(c)(3) and 501(c)(4) organizations must complet			19	100
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the continued to the section A.	rganization pay or accrue any compensation			
	contingent on the revenues of:		5a :		x
	The organization?				X
b	Any related organization?		5b	At .	<u> </u>
	If "Yes" to line 5a or 5b, describe in Part III.				\$9
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the o	organization pay or accrue any compensation		2	
	contingent on the net earnings of:			4-1	7.0
	The organization?		ва		X
þ	Any related organization?		6b		X
	If "Yes" to line 6a or 6b, describe in Part III.				1
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the c				
	not described in lines 5 and 6? If "Yes," describe in Part III		7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued p	and the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second s			
	initial contract exception described in Regs. section 53.4958-4(a)(3)		8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable pres	sumption procedure described in			
	Regulations section 53.4958-6(c)?		9	L	<u> </u>

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

Schedule J (Form 990) 2009

13-6218740

THE FUND FOR ANIMALS,

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.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	0	<u>@</u>	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incertive compensation	(iii) Other reportable compensation	Hetirement and other deferred compensation	Nonaxable benefits	(B)(0-(D)	reported in prior Form 990 or Form 990-EZ
	€		0.	0.		0		0.
MICHAEL MARKARIAN		189,223	0	0	12,146.	5,058.	206,427.	0
	€ ;	0 100	0	0	30 316	0 V	269 180	
WAINE FACELIE	3 5	PC 2		0	0.00	0	7 2 2 2	0
G. THOMAS WAITE III	(ii)	188,972.		0	51,874.	9,775.	250,62	0
	(E)							
	€							
	€							
	8							
	8							
	8							
	8		33					
	8							
	8							
	ε							
	<b>E</b>							
	8							
	(1)							
	8							
	8							
	≘				7277.			
	3							
	8							
	8							
	: €							
	€							
	8							
	0							
	•							
							Schedu	Schedule J (Form 990) 2009

34

932112 02-02-10

#### **Noncash Contributions**

Employer identification number

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

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990.

Inspection

		R ANIMALS, INC				13-0	13-6218740			
Par	t I Types of Property	(a) Check if applicable	(b) Number of contributions	(c) Revenues repor Form 990, Part VII		(d Method of d reven	letermini	ng		
1	Art - Works of art		· · · · · · · · · · · · · · · · · · ·							
2	Art · Historical treasures									
3	Art - Fractional interests									
4	Books and publications		2.4							
5	Clothing and household goods									
6	Cars and other vehicles									
7	Boats and planes									
8	Intellectual property									
9	Securities - Publicly traded	1								
10	Securities - Closely held stock									
11	Securities - Partnership, LLC, or									
	trust interests									
12	Securities · Miscellaneous									
13	Qualified conservation contribution -									
	Historic structures					<u> </u>				
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	Archeological artifacts									
25	Other (ARCHITECTURAL)	X	1		067.	FMV	<del></del>			
26	Other (ANIMAL SUPPLI)	X	14		435.			·······	· · · · · · · · · · · · · · · · · · ·	
27	Other (EQUIPMENT)	Х	2		000.					
28	Other ► (OFFICE SUPPLI)	X	3		870.	FMV				
29	Number of Forms 8283 received by the organ									
	for which the organization completed Form 83	283, Part IV, I	Donee Acknowled	gment	29					
								Yes	No	
30a	During the year, did the organization receive to	by contribution	on any property re	ported in Part I, line	es 1.28 th	nat it must hold for				
	at least three years from the date of the Initial	contribution	, and which is not	required to be use	d for exe	mpt purposes for			v	
	the entire holding period?	•••••	•••••		•••••		30a		X	
b	If "Yes," describe the arrangement in Part II.								7.	
31	Does the organization have a gift acceptance						31		X	
32a	Does the organization hire or use third parties								- V	
	contributions?		•••••			••••••	32a		X	
b	If "Yes," describe in Part II.				- <b>/-</b> \	t d				
33	If the organization did not report revenues in	column (c) fo	r a type of propert	y tor which column	ı (a) is ch	eckea,	8 186	14	1	
	describe in Part II.	A - 4 A 1 - 45				Only dist	30 (Eas-	- 000		
LHA	For Privacy Act and Paperwork Reduction	n Act Notice	, see the instruct	ions for Form 990	J.	Schedule	IN LLOU	וו אפען	) ZUUS	

#### 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 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 SQUTHERN CALIFORNIA, IS A 15 ACRE FACILITY DESIGNED FOR REHABILITATION OF NATIVE WILDLIFE. 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 S 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, PACELLE, WAITE, 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.

## **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.

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.

## **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.

2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service

932211 02-03-10

Name of the organization

THE PINT PAR ANTMALS INC

Employer identification number 13-6218740

Schedule O (Form 990) 2009

THE FUND FOR ANIMALS, INC   13-0210740
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
BODM GOD THEMDELOWING DO NOW DECLIED DONAMED SERVICES WO BE DEDORMED ON

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

Department of the Treasury

## **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.



Internal Revenue Service Employer identification number Name of the organization 13-6218740 THE FUND FOR ANIMALS, INC 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.

SCHEDULE R (Form 990) Department of the Tressury	Complete if the		Related Organizations and Urrelated Partnerships organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Attach to Form 990.	13, 34, 35, 36, or 37 ons.		OMB No. 1645-047 2009 Open to Public
Name of the organization	THE FUND FOR	ANIMALS, INC			E	Employer identification number 13-6218740
Part I Identification	Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)	if the organization answered "Yes" to	o Form 990, Part IV, line 33.)			
Name, of dis	(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 organizations	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.)	ons (Complete if the organization ans	swered "Yes" to Form 990, Pe	rt IV, line 34 becaus	e it had one or more n	elated tax-exempt
Name, of rela	(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
HUMANE SOCIETY OF THE UNITED STATES 53-0225390, 2100 L ST, NW, WASHINGT 20037	ON, DC	ANIMAL WELFARB	DELAWARE	501(0)(3)	7	N/A
LHA For Privacy Act an	LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions for Form 990.	, see the Instructions for Form 990				Schedule R (Form 990) 2009

Page 2 Percentage ownership General or managing partner? Yes No Schedule R (Form 990) 2009 Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, fine 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Ξ Code V-UBI amount in box 20 of Schedule 4 K-1 (Form 1065) identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) 13-6218740 Share of end-of-year assets 9 ate allocations? Disproportion-Yes No  $\varepsilon$ Share of total income (g)
Share of end-of-year assets Type of entity (C corp., S corp. or trust) (f) Share of total income (d)
(Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) e Legal domicile (state or foreign country) Ø (d)
Direct controlling
entity 41 Primary activity 2 INC Legal domicile (state or foreign country) THE FUND FOR ANIMALS, Primary activity Name, address, and EIN of related organization Name, address, and EIN of related organization <u>a</u> Schedule R (Form 990) 2009 932162 02-04-10 Part III Part IV

13-6218740 Schedule R (Form 990) 2009 THE FUND FOR ANIMALS, INC

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

			_ L	Ţ
Note: Complete line I is any entity is listed in Parts II, III, of this schedule.		<del>ک</del> ا ا	Yes	اه
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II:N?				ı
a Receipt of (I) interest (ii) annulties (iii) royatties or (iv) rent from a controlled entity		Ta.	×	
b Gift, grant, or capital contribution to other organization(s)		£	×	ر ا
(6)		٤	×	۱.
d Coars or loan distantese to or for other organization(s)		2 ;	>	۱.
		2	4	ار
e Loans or loan guarantees by other organization(s)		19	×	ای
			+	I.
		=	×	ام
g Purchase of assets from other organization(s)		10	×	ام
h Exchange of assets		ŧ	×	ا ا
i Lease of facilities, equipment, or other assets to other organization(s)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		×	ر.[
		L	_	l
j Lease of facilities, equipment, or other assets from other organization(s)		=	×	
k Performance of services or membership or fundraising solicitations for other organization(s)		¥	×	١.,
l Performance of services or membership or fundraising sollcitations by other organization(s)		=	×	۔ ا
m Sharing of facilities, equipment, mailing lists, or other assets		Ę	×	1.
n Sharing of paid employees		=	×	ر ا
o Reimbursement paid to other organization for expenses		10	×	در
p Reimbursement paid by other organization for expenses		Ш		
			-	
q Other transfer of cash or property to other organization(s)		19 X	~	
<ul> <li>Other transfer of cash or property from other organization(s)</li> </ul>		Ч	×	انا
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.	ransaction threshold	ó		1
(B)	<b>(2)</b>			
Name of other organization(s)	Transaction	Amount involved	pay.	
	(i m) and (i			1
(1) HUMANE SOCIETY OF THE UNITED STATES	Д	4,373,432.	432	ا ۽ ۽
			0	
- 1	O	• 000' KA#' TT		<u>.</u>
(9)				1
(4)				ı
(9)				I
(9)				
932163 02-04-10 42	Sct	Schedule R (Form 990) 2009	90) 200	8

40 Page 4

13-6218740 P

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.) Schedule R (Form 990) 2009 THE FUND FOR ANIMALS, INC

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

		3	1	177	9		
Name and the Man	(a)	(5)	(0)	(e)		(6)	
of entity	רוווומוץ מכווווץ		section 501(c)(3) organizations?	year assets	tionate allocations?	amount in box 20	General or managing partner?
		- 1	Yes No			(Form 1065)	, ,
				and the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of t			
							·
						Schedule R (Form 990) 2009	990) 2009

932164 02-04-10 Form **8868** 

# Application for Extension of Time To File an

(Rev. April	1 2009)		Exempt	Organization	Return		QMB No.	1545-170 <del>9</del>
nternal Rever				eparate application for eac				
If you a	re filing for an Aut	omatic 3-Mo	nth Extension, comp	lete only Part I and check	this box			. <b>▶</b> 🗓
if you a	re filing for an Add	itional (Not A	utomatic) 3-Month :	extension, complete only	LABILITY (OLI PAÑA 5 OLI 1119	ioiiiy.		
o not co	omplete Part II un	less you have	already been granted	l an automatic 3-month ex	tension on a previously fi	ied Form	8868.	
Pill	•			19. Only submit original (r				
				omatic 6-month extension				.▶□
				MICs, and trusts must use				
o file inco	ome tax returns.							
noted bek not autor	ow (6 months for a matic) 3-month ext submit the fully co	a corporation a ension or (2) y ompleted and	equired to file Form 9	Form 8868 if you want a 3- 90-T). However, you canno 6069, or 8870, group retu ) of Form 8868. For more o	ot the Form 8868 electron irns, or a composite of Co	insolidat	ed Form 990- is form, visit	r. Instead,
Type or	Name of Exemp					Emplo	yer identifica	ition number
orint	nt 12 C010740							
File by the the date for Number, street, and room or suite no. If a P.O. box, see instructions.								
dus date for lling your	Number, street,	and room or 57TH 9	STREET, NO.	705				
return. See instructions.	City, town or po	ost office, stat	e, and ZIP code. For a	foreign address, see inst	ructions.			
				each ratum).				
Check ty	pe of return to be	mied (ine a se	parate application for			300		
	m 990	<u> </u>	Form 990-T (corpora	•	Form 5			
=	m 990-BL	<u></u>	Form 990-T (sec. 40		Form 6			
	m 990-EZ	ļ <del>-</del> -	Form 990-T (trust of	ner man abovej	Form 8			
L FOI	m 990-PF		710111107171					·
		c.	THOMAS WAI	TE, III			2000	
<ul><li>The be</li></ul>	ooks are in the car	e of ▶ <u>70</u>	PROFESSIO	NAL DRIVE - G	AITHERSBURG,	MD .	406/9	
Teleph	none No. ► <u>20</u> 2	2-452-1	100	FAX No.				
<ul><li>If the</li></ul>	organization does	not have an o	ffice or place of busin	ess in the United States, og git Group Exemption Num	check this box	hle is for	the whole are	Check this
• If this	is for a Group Ret	um, enter the	organization's four di	and attach a list with	the names and FINs of a	il membr	ers the extens	ion will cover.
box 🕨	. It it is for pa	rt of the group	, check this box	and attach a list with	dia harias and circo or d			
1 ire	squest an automat	ic 3-month (6-	months for a corporat	ion required to file Form 9	90-T) extension of time u	ntil		
, ,,,	AUGUST 1	5, 2010	, to file the exe	mpt organization return fo	r the organization named	above.	The extension	
is f	for the organization							
<b>&gt;</b>	X calendar yea	r <u>2009</u> or						
<b>&gt;</b>	tax year beg	inning		, and ending			<b>-</b> •	
2 lft	his tax year is for i	ess than 12 π	onths, check reason:	Initial return	Final return		Change in acc	counting perio
3a Ift	his application is 1	or Form 990-E	IL, 990-PF, 990-T, 472	20, or 6069, enter the tent	ative tax, less any			
no	nrefundable credi	ts. See instruc	tions.			3a	\$	
				refundable credits and es	timated			
			rior year overpaymen			3b	5	
с Ва	alance Due. Subtr	act line 3b fro	m line 3a. Include you	r payment with this form,	or, it required,			
		upon or, if req	uired, by using EFTPS	6 (Electronic Federal Tax P	аупіені бувіені).	3c	\$	N/A
	e instructions.							
Caution	. If you are going t	o make an ele	ctronic fund withdray	val with this Form 8868, se	e Form 8453-EO and For	m 8879-	EO for payme	nt Instruction
						•		989 (Rev. 4-20

## 

•					Page 2
	68 (Rev. 4-2009)				X
• If you	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this bo	K			, LVI
Note. C	only complete Part II if you have already been granted an automatic 3-month extension on a previously filed	Form 8	568.		
<ul><li>If you</li></ul>	are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).				
	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no co	pies ne	eaea).		
<b></b>	Name of Exempt Organization	Emplo	yer ide	ititicatioi	number
Type or print		4.2	x_621	8740	
-	THE FUND FOR ANIMALS, INC				<del></del>
File by the extended due date t	Number, street, and room of suite no. If a P.O. 60X, see institutions.	POPIN	S use or	ily	
filing the return. Se instruction					
Obsek	type of return to be filed (File a separate application for each return):				
	orm 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A	Fo	m 5227		Form 8870
	orm 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720	Fo	m 6069		
		. b . 49 .	· F (		<del></del>
STOP	Do not complete Part II if you were not already granted an automatic 3-month extension on a previou	SIY THE	3 Pomi c		
	G. THOMAS WAITE, III				
• The	books are in the care of > 700 PROFESSIONAL DRIVE - GAITHERSBURG,	MD	2087		
Tele	phone No. ► 202-452-1100 FAX No. ►			_	
<ul> <li>If the</li> </ul>	e organization does not have an office or place of business in the United States, check this box	• • • • • • • • • • • • • • • • • • • •		▶	ليبا
• if th	is is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If th	is is for	the who	le 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	memb	ers the e	xtension	s for.
	request an additional 3-month extension of time until NOVEMBER 15, 2010.				
5 F	or calendar year 2009, or other tax year beginning, and ending				·
	this tax year is for less than 12 months, check reason: Initial return		Change	n accoun	ting period
7 8	State in detail why you need the extension		-		FTF
- 1	ADDITIONAL TIME IS REQUIRED TO GATHER INFORMATION AND	FIL	E A	COMPL	EIE
	AND ACCURATE TAX RETURN.	T			
8a i	f this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any				
г	nonrefundable credits. See Instructions.	8a	\$	<del></del>	
<b>b</b> I	f this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated				
t	ax payments made. include any prior year overpayment allowed as a credit and any amount paid				
	previously with Form 8868.	8b	\$		
c E	Balance Due, Subtract line 8b from line 8a. include your payment with this form, or, if required, deposit				AL / A
١	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	. 8c	\$		N/A
	Signature and Verification				
Under p	penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the correct, and complete, and that I am authorized to prepare this form.				
	Salar Dank	Date	<b>▶</b> 4	121	10
Signatu	110			orm 9889	(Bay 4-2009)

## UNITED STATES DISTRICT COURT FOR THE DISTRICT OF COLUMBIA

FELD ENTERTAINMENT, INC.

٧.

Plaintiff,

: Case No. 07- 1532 (EGS)

:

AMERICAN SOCIETY FOR THE PREVENTION OF CRUELTY ANIMALS, et al.

Defendants.

#### **ORDER**

This matter came before the court upon the supplemental motion of defendant to dismiss the plaintiff's First Amended Complaint. (DE 55). Upon consideration of the motion and memorandum in support, the opposition and the reply, and the entire record herein, it is hereby

**ORDERED** that the motion is **DENIED**.

SO ORDERED.

Signed: Emmet G. Sullivan

**United States District Judge** 

April ___, 2011