etile	e GRAPHIC	C print - DO NOT PROCESS As Filed Data -		DLN: 9	
(990	Return of Organization Exempt From	Income Tax	(OMBNo 1545-0047
Form S	330	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue benefit trust or private foundation)	Ing	2011	
	ent of the Treasury Revenue Service	► The organization may have to use a copy of this return to satisfy st	ate reporting requiren	nents	Open to Public Inspection
A For	r the 2011 c	alendar year, or tax year beginning 01-01-2011 and ending 12-31-2011			
B Che	ck if applicable	C Name of organization THE HUMANE SOCIETY OF THE UNITED STATES	D Emplo	oyer ide	ntification number
Add	ress change	Doing Business As		22539 hone nu	
∏ Nam	ne change				
🖵 Initi	al return	Number and street (or P O box if mail is not delivered to street address) Room/suit	e –)452-1	
Terr	minated	2100 L STREET NW	Gloss	receipts	\$ 215,571,410
🔽 Ame	ended return	City or town, state or country, and ZIP + 4 WASHINGTON, DC 20037	-		
☐ App	lication pending				
		F Name and address of principal officer	H(a) Is this a grou	p return	ı for
		WAYNE PACELLE 2100 L STREET NW	affiliates?		🔽 Yes 🔽 No
		WASHINGTON, DC 20037	H(b) Are all affiliates	s includ	ed?
			If "No," attacl	h a lıst	(see instructions)
I Tax	exempt status	▼ 501(c)(3) 501(c) () (Insert no) 4947(a)(1) or 527	H(c) Group exemp	tion nu	mber 🕨
J We	e bsite: 🕨 WV	WW HUMANESOCIETY ORG			
K Form	n of organizatior	Corporation Trust Association Other 🕨	L Year of formation 1	954 M	State of legal domicile DE
Pa	rt I Sum	imary			
Governance		-WILDLIFECONFLICT,FARM ANIMAL WELFARE, MARINE MAMMMAL CTION, EMERGENCY PREPAREDNESS AND RESPONSE, HUMANE ED			
	2 Check t 3 Number 4 Number	CTION, EMERGENCY PREPAREDNESS AND RESPONSE, HUMANE ED	UCATION, AND PUB	s net as	ssets 26 26
Activities & Governance	PROTEC 2 Check t 3 Number 4 Number 5 Total nu	CTION, EMERGENCY PREPAREDNESS AND RESPONSE, HUMANE ED his box Main if the organization discontinued its operations or disposed of of voting members of the governing body (Part VI, line 1a) of independent voting members of the governing body (Part VI, line 1b) mber of individuals employed in calendar year 2011 (Part V, line 2a) .	UCATION, AND PUB	s net as 3 4 5	ssets 26 26 657
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Activities &	PROTEC PROTEC 2 Check t 3 Number 4 Number 5 Total nu 6 Total nu 7a Total nu b Net unre 8 Contr 9 Progra	CTION, EMERGENCY PREPAREDNESS AND RESPONSE, HUMANE ED his box is if the organization discontinued its operations or disposed of of voting members of the governing body (Part VI, line 1a) of independent voting members of the governing body (Part VI, line 1b) mber of individuals employed in calendar year 2011 (Part V, line 2a) . imber of volunteers (estimate if necessary) irelated business revenue from Part VIII, column (C), line 12 elated business taxable income from Form 990-T, line 34 ibutions and grants (Part VIII, line 1h)	UCATION, AND PUB	s net as 3 4 5 6 7a 7b ,949 ,576	DLICY Ssets 26 26 26 26 26 26 289 942 -170,987 Current Year 105,049,788
×5	PROTEC PROTEC	CTION, EMERGENCY PREPAREDNESS AND RESPONSE, HUMANE ED his box if the organization discontinued its operations or disposed of of voting members of the governing body (Part VI, line 1a) of independent voting members of the governing body (Part VI, line 1b) mber of individuals employed in calendar year 2011 (Part V, line 2a) . imber of volunteers (estimate if necessary) irelated business revenue from Part VIII, column (C), line 12 elated business taxable income from Form 990-T, line 34 ibutions and grants (Part VIII, line 1h) am service revenue (Part VIII, line 2g) tment income (Part VIII, column (A), lines 3, 4, and 7d) revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	UCATION, AND PUB	SLIC PC s net as 3 4 5 6 7a 7b ,949 ,576 ,471	Sets 26 26 26 657 661 289,942 -170,987 Current Year 105,049,788 2,735,672
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Under penalties of perjury, I declare that I have examined this return, including acco knowledge and belief, it is true, correct, and complete. Declaration of preparer (othe knowledge.

Sign Here	****** Signature of officer <u>G THOMAS WAITE III TREASURER AND CFO</u> Type or print name and title					
Paid	Preparer's signature JAMES P SWEENEY CPA	Date				
Preparer's Use Only	ıf self-employed),					
eee enig	address, and ZIP + 4					
	MCLEAN, VA 22102					

May the IRS discuss this return with the preparer shown above? (see instructio

Par	t 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)? <i>If "Yes,"</i> complete Schedule A	1	Yes	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🗐	2	Yes	
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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 🔂	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i> 🕏	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> 🕄	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI. 🕏	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
с	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX. 🕏	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i>	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 🖫	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States? \ldots . \ldots	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If</i> " <i>Yes," complete Schedule F, Part I</i>	14b	Yes	
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 U S ? <i>If "Yes," complete Schedule F, Part II and IV</i> 😕	15	Yes	
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 US? <i>If "Yes," complete Schedule F, Part III and IV</i> .	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? <i>If</i> "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	t IV Checklist of Required Schedules (continued)			
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? <i>If "Yes," complete Schedule I, Parts I and II</i> 😨	21	Yes	
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? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
23	DId the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .	23	Yes	
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? <i>If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? \ldots .	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		No
Ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If</i> " <i>Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If</i> " <i>Yes," complete Schedule L, Part II</i> .	26		No
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? <i>If</i> " <i>Yes</i> ," <i>complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i> 🔞	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🖢	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N,</i> Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
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? <i>If "Yes," complete Schedule R, Part I</i>	33		No
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	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a	Yes	
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
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		No
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		No
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	Yes	

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Pai	t V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V .	е		•	.୮	
		I			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	_				
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1a 1b	617			
с	Did the organization comply with backup withholding rules for reportable payments t	o veno			N	
2a	gaming (gambling) winnings to prize winners? Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return	 2a	657	1c	Yes	
b	If at least one is reported on line 2a, did the organization file all required federal emp		ent tax returns?	2Ь	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-fil	e (se	e instructions)		105	
За	Did the organization have unrelated business gross income of \$1,000 or more durin year?			3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Sch	edule (o	Зb	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a s over, a financial account in a foreign country (such as a bank account or securities account)?	-	re or other authority	4a		No
b	If "Yes," enter the name of the foreign country 🕨					
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Ba	nk an	d Financial Accounts	-		
5a	Was the organization a party to a prohibited tax shelter transaction at any time duri	ng the	tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited	tax sh	elter transaction?	5b		No
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			50 5c		
6a	Does the organization have annual gross receipts that are normally greater than \$1 organization solicit any contributions that were not tax deductible?			6a		No
b	If "Yes," did the organization include with every solicitation an express statement the were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
	Did the organization receive a payment in excess of \$75 made partly as a contribut services provided to the payor?			7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services ${\tt p}$			7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal prope file Form 8282?	rty for	which it was required to	70		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a p contract?	persor	al benefit	7e		No
f g	Did the organization, during the year, pay premiums, directly or indirectly, on a pers If the organization received a contribution of qualified intellectual property, did the o					No
h	required? If the organization received a contribution of cars, boats, airplanes, or other vehicle Form 1098-C?	s, dıd	the organization file a	7g 7h	Yes	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) su the supporting organization, or a donor advised fund maintained by a sponsoring org business holdings at any time during the year?	anızat	ion, have excess	8		
9	Sponsoring organizations maintaining donor advised funds.			<u>ب</u>		L
a	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person			9b		<u> </u>
10	Section 501(c)(7) organizations. Enter					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 99 If "Yes," enter the amount of tax-exempt interest received or accrued during the year	0 ın lı 12b	eu of Form 1041?	12a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	l		1		
а	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they qualified health plans, the amount of reserves required by each state, and the amoun allocated to each state			13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
С	Enter the aggregate amount of reserves on hand	13c				
	Did the organization receive any payments for indoor tanning services during the ta			14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explan	ation i	n Schedule O 🔒 .	14b		

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Par	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or chan O. See instructions. Check if Schedule O contains a response to any question in this Part VI			
Se	ection A. Governing Body and Management			
			Yes	No
la	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent1b26			
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		No
5	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		No
ŀ	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		 No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
5	Did the organization have members or stockholders?	6	Yes	
'a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
B	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
)	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
	ection B. Policies (This Section B requests information about policies not required by the Internal evenue Code.)			
			Yes	No
0a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10Ь	Yes	
.1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
L2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
4	Did the organization have a written document retention and destruction policy?	14	Yes	·
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)			
L6a	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		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
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, GA LA, MA, MD, ME, MI, MS, MN, MO, I NM, NY, OH, OK, OR, PA, RI, SC, TI WI, WV	NĊ,N	ID,NJ	,NH,
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection Indicate how you made these available Check all that apply V Own website Another's website V Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the G THOMAS WAITE III 700 PROFESSIONAL DR	e orga	nızatıor	n ⊫

GAITHERSBURG,MD 20879 (202)452-1100

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

Check if Schedule O contains a response to any question in this Part VII

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid

List all of the organization's current key employees, if any See instructions for definition of "key employee "

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

• List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

🖵 Check this box if neither the organization nor any related organizations compensated any current or former officer, director, or trustee

(B) Average hours per week (describe	more unles an	on (d e thai s per offic	ono none son erai	e box is bo nd a	k, oth		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and		
for	for related organizations in Schedule	for related organizations in Schedule	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensitied employiee	Former		MISC)	related organızatıons
	A verage hours per week (describe hours for related organizations in Schedule	Average Positiv hours more per unles week an (describe dire hours	Average Position (d hours more than per unless per week an offic (describe director, hours	Average Position (do no hours more than one per unless person week an officer an (describe director/trus	Average Position (do not che hours more than one box per unless person is bo week an officer and a (describe director/trustee)	A verage Position (do not check more than one box, unless person is both week an officer and a (describe hours for the section of the sectio	A verage hoursPosition (do not check more than one box, unless person is both an officer and a (describedirector/trustee)	Average hoursPosition (do not check more than one box, unless person is bothReportable compensation from the organization (W- 2/1099-MISC)describedirector/trustee)2/1099-MISC)	Average hoursPosition (do not check more than one box, perReportable compensationReportable compensationper weekunless person is both an officer and a (describefrom the organization (W- 2/1099-MISC)organizations (W- 2/1099-		

Form	990 (2011)												Page 8			
Par	t VII Section A. Officers, D	Directors, Trust	ees, K	ey Ei	mple	oye	es, an	nd Hi	ighest Compensa	ted Employees	s (coi	ntinued))			
	(A) Name and Title	(B) Average hours per week (describe	mor unles ar	ion (d e tha is per n offic	n on rson :er a	C) o not check n one box, son 1s both er and a (trustee)			(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensatior from related organizations (W- 2/1099-		(F) Estima amount of compens from tl	ated fother sation			
	ho fo rela orga I Sch	hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)		·		MISC)		relat organiza	ed
See A	dditional Data Table															
											+					
											+					
								\vdash			+					
								$\left \right $			+					
	Sub-Total							<u> </u> ▶								
	Total from continuation sheets							•								
d	Total (add lines 1b and 1c) .							•	2,838,332	172,1	24		716,520			
2	Total number of individuals (ind \$100,000 of reportable compe						above) wh	o received more tha	n						
												Yes	No			
3	Did the organization list any fo on line 1a? <i>If "Yes," complete S</i> e										3		No			
4	For any individual listed on line organization and related organi	zations greater t	nan \$1	50,00	. < OC	If "Y	'es," co	omple								
	ındıvıdual		• •	•	•	•	• •	•			4	Yes				

5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for	
	services rendered to the organization? If "Yes," complete Schedule J for such person	5

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A)	(B)	(C)
Name and business address	Description of services	Compensation
EURO RSCG EDGE 2173 SALK AVENUE SUITE 300 I CARLSBAD, CA 92008	MARKETING	8,439,157
QUADRIGA ART 825 HYLTON ROAD I PENNSAUKEN, NJ 08110	DIRECT RESPONSE	7,745,609
NATIONAL OUTDOOR SPORTS AD 5151 WISCONSIN AVE NW 4TH FL WASHINGTON, DC 20001	FUNDRAISING CONSULTANTS	2,301,368
IMLAY INTERNATIONAL LLC 5101 BACKLICK RD SUITE I 303 ANNANDALE, VA 22003	PRINT MANAGEMENT	1,622,328
ARIZONA LOCKBOX 18401 N 25TH AVENUE SUITE 120 PHOENIX, AZ 850231208	LOCKBOX PROCESSOR	1,150,407
2 Total number of independent contractors (including but not limited to those listed above) \$100,000 of compensation from the organization ►38	who received more than	

Yes

nt (-f D

Form 99								Page 9
Part V		Statement o	ot Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts nts	1a	Federated cam	paıgns 1a					
Contributions, gifts, grants and other similar amounts	Ь	Membership du	es 1b					
ts, (am	c	Fundraising eve	ents 1c	825,836				
gift İlar	d	Related organiz	zations 1d					
ns, úmi	e	Government grants	s (contributions) 1e					
ttiol er s	f	All other contribution similar amounts not	ons, gifts, grants, and 1f	104,223,952				
otte	g	Noncash contri	butions included in					
d at the		lines 1a-1f \$ $\frac{1}{2}$,396,167					
al	h	Total. Add lines	s1a-1f	••••	105,049,788			
ae Le				Business Code				
мел	2a	FUNDRAISING EVE	NTS	561499	1,385,900	1,385,900		
Be	Ь	OTHER PROG SRV	/C REV	900099	589,818	589,818		
Program Service Revenue	С	ADVERTISING		541800	506,935		325,927	181,008
Serv	d	SUBSCRIPTIONS		511110	138,566	138,566		
Ľ,	e	CONSULTATION &		541990	76,382	76,382		
subc	f	All other progra	am service revenue		38,071	38,071		
ž	g	Total. Add lines	s2a-2f	.	2,735,672			
	3		ome (ıncludıng dıvıden					
		and other simila	aramounts)	•	4,711,346		-35,985	4,747,331
	4	Income from inves	stment of tax-exempt bond	proceeds 🕨				
	5	Royalties	<u></u>		4,647,164			4,647,164
			(I) Real	(11) Personal				
	6a	Gross rents	14,090 0					
	Ь	Less rental expenses						
	c	Rental income or (loss)	14,090					
	d	Net rental inco	me or (loss)	· · · · •	14,090			14,090
			(I) Securities	(11) Other				
	7a	Gross amount from sales of	96,799,694					
		assets other than inventory						
	Ь	Less cost or other basis and	98,242,122					
		sales expenses						
	C .	Gain or (loss)	-1,442,428	L	1 442 429			1 442 429
	d		ss)		-1,442,428			-1,442,428
e	8a	events (not inc	rom fundraısıng ludıng					
nw		Ψ	,836					
eve		See Part IV, lin	s reported on line 1c)					
μ Π		,	a	1,385,900				
Other Revenue	Ь		penses b	_,,				
Ō	с		(loss) from fundraising	events 🕨	-59,320			-59,320
	9a	Gross income f See Part IV, lin	rom gaming activities					
			a					
	Ь	Less dırectex	penses b					
	с		(loss) from gamıng actı	vities 🕨				
	10a	Gross sales of		[
		returns and allo	owances . a					
	Ь	Less costofa	oodssold b					
	c		(loss) from sales of inv	entory . 🕨				
		Miscellaneous		Business Code				
	11a	LIST RENTALS	3	900099	132,956			132,956
	Ь	OTHER FEES		541990	94,800			94,800
	с							
	d	All other reven	ue					
	e	Total. Add lines	s11a-11d	· · · .	227,756			
				•	061,122			
	12	Total revenue.	See Instructions .	🕨	115,884,068	2,228,737	289,942	8,315,601
	-			·				Form 990 (2011)

	Section 501(c)(3) and 501(c)(4) organizations mu Il other organizations must complete column (A) but are not required to co heck if Schedule O contains a response to any question in this Part IX	mplete columns	5 (B), (C), and ([
Do no	ot include amounts reported on lines 6b, b, 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 United States See Part IV, line 21	6,506,518	6,506,518		<u> </u>
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	242,621	242,621		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	2,470,333	1,976,266	74,110	419,957
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	29,076,310	22,829,439	1,002,327	5,244,544
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,493,898	1,956,193	86,545	451,160
9	Other employee benefits	2,765,264	2,171,780	95,139	498,345
10	Payroll taxes	2,528,645	1,987,811	86,436	454,398
11	Fees for services (non-employees)				
а	Management				
b	Legal	873,009	721,932	31,392	119,685
с	Accounting	237,386	196,306	8,536	32,544
d	Lobbying	776,077	641,775	27,906	106,396
е	Professional fundraising See Part IV, line 17 .	4,343,746			4,343,746
f	Investment management fees	2,928,594	2,421,792	105,307	401,495
g	Other	13,855,888	11,456,104	498,643	1,901,141
12	Advertising and promotion	12,276,390	10,096,584	452,934	1,726,872
13	Office expenses	4,493,369	3,715,778	161,573	616,018
14	Information technology				
15	Royalties				
16	Occupancy	1,797,295	1,486,268	64,627	246,400
17	Travel	4,635,881	3,832,584	166,914	636,383
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	357,389	295,542	12,851	48,996
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,357,785	1,122,817	48,823	186,145
23	Insurance	889,151	735,281	31,972	121,898
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	DIRECT RESPONSE COSTS	11,045,801	5,042,655	1,247,373	4,755,773
b	EDUCATION MATERIAL	3,453,676	2,856,007	124,188	473,481
с	EQUIPMENT	458,501	379,156	16,487	62,858
d	OTHER TAXES	215,090	177,867	7,734	29,489
e f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	110,078,617	82,849,076	4,351,817	22,877,724
26	Joint costs. Check here F 🗸 If following	110,070,017	02,0+9,070	7,551,617	22,011,124
	SOP 98-2 (ASC 958-720) Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	41,180,876	24,335,136	915,376	15,930,364 rm 990 (2011)

Part X Balance Sheet

						-	
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			7,409		6,600
	2	Savings and temporary cash investments			21,607,092	2	23,403,868
	3	Pledges and grants receivable, net			9,939,838	3	9,929,680
	4	Accounts receivable, net			4,918,241	4	4,955,450
	5	Receivables from current and former officers, directors, trustees highest compensated employees Complete Part II of	s, key	employees, and			
						5	
	6	Receivables from other disqualified persons (as defined under s persons described in section 4958(c)(3)(B) Complete Part II c		n 4958(f)(1)) and			
		Schedule L				6	
ets	7	Notes and loans receivable, net			7		
Assets	8	Inventories for sale or use				8	
A	9	Prepaid expenses and deferred charges			552,009	9	718,800
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	 10a	22,087,889			
	Ь	Less accumulated depreciation	10b	9,684,081	13,147,925	10c	12,403,808
	11	Investments—publicly traded securities		·	150,935,351	11	158,175,691
	12	Investments—other securities See Part IV, line 11				12	
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			14,053,440	15	7,423,391
	16	Total assets. Add lines 1 through 15 (must equal line 34)			215,161,305	16	217,017,288
	17	Accounts payable and accrued expenses .			8,664,945	17	9,359,666
	18	Grants payable				18	
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities		20			
	21	Escrow or custodial account liability Complete Part IV of Schedu		21			
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
įdi		persons Complete Part II of Schedule L		. <u>.</u>		22	
Li;	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to relate and other liabilities not included on lines 17-24) Complete Par	ed thu	rd parties,			
		D			18,981,059	25	24,441,792
	26	Total liabilities. Add lines 17 through 25			27,646,004	26	33,801,458
Fund Balances		Organizations that follow SFAS 117, check here 🕨 🔽 and comp through 29, and lines 33 and 34.	lete l	ines 27			
ant	27	Unrestricted net assets			138,009,419	27	134,776,460
Ba	28	Temporarily restricted net assets			18,336,013	28	16,336,810
N N	29	Permanently restricted net assets			31,169,869	29	32,102,560
r Fur		Organizations that do not follow SFAS 117, check here ▶ ┌─ ar lines 30 through 34.	id con	nplete			
Assets or	30	Capital stock or trust principal, or current funds				30	
set:	31	Paid-in or capital surplus, or land, building or equipment fund				31	
A S:	32	Retained earnings, endowment, accumulated income, or other fu				32	
Net	33	Total net assets or fund balances			187,515,301	33	183,215,830
Ź	34	Total liabilities and net assets/fund balances			215,161,305	34	217,017,288
	I	· · · · · · · · · · · · · · · · · · ·			L , , , , , , , , , , , , , , , , , , ,		Form 990 (2011)

Form	990	(201)	1)

Pa	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI			. 🔽	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		115,8	384,068
2	Total expenses (must equal Part IX, column (A), line 25)	2		110,0	78,617
3	Revenue less expenses Subtract line 2 from line 1	3		5,8	305,451
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		187,5	515,301
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-10,1	104,922
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		183,2	215,830
Par	t XII Financial Statements and Reporting Check If Schedule O contains a response to any question in this Part XII			ম	
				Yes	No
1	Accounting method used to prepare the Form 990 Cash 🔽 Accrual Cother 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? \cdot .		2a		No
b	Were the organization's financial statements audited by an independent accountant? \ldots \ldots \ldots		2b	Yes	
С	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were i on a separate basis, consolidated basis, or both	ssued			
	🔽 Separate basis 🛛 🔽 Consolidated basis 👘 Both consolidated and separated basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	Зa		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the r audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

Software ID:

Software Version:

EIN: 53-0225390

Name: THE HUMANE SOCIETY OF THE UNITED STATES

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code) (Expenses \$	8,113,337 includi	ng grants of \$	67,831) (Revenue \$	120,624)
DIRECT CARE A	ND SERVICE THE HSUS HAS A	STRONG COMMITM	1ENT TO DIRECT O	CARE AND SERVICE FOR ANIM	ALS ACROSS A
WIDE RANGE OF	ISSUE AND PROGRAM AREAS	AS A CORE CONCI	ERN OF THE HSUS	, DIRECT CARE AND SERVICE	COMPRISES
THE WORK OF SI	UCH SECTIONS AS EMERGENC	Y SERVICES, HUMA	NE SOCIETY VET	ERINARY MEDICAL ASSOCIAT	ION, AND OUR
	IFE SERVICES PROGRAM ON T				
SEE ENTRIES CO	DNCERNING THE FUND FOR AN	IMALS AND THE BR	NOWARD COUNTY	SPCA ON SCHEDULE O, THE F	UND FOR
	FORM 990, AND THE BROWARD				
	N 2011, VIA THE HUMANE SOC				
	ED COMMUNITIES IN THE U S				
· ·	HE TOTAL FIGURE INCLUDED				
	1ENTS FROM PINE RIDGE, SOU		,		
	, SOME 234 OF THEM STUDEN				
	CTICAL EXPERIENCE WITH SU				
	VOLUNTEERS THROUGH SPEC	,			
	VETERINARY ADVOCATE OF T			,	,
	ES WILDLIFE-CONFLICT SOLU				
	REA, RESCUED MORE THAN 12				
	LDLIFE CONFLICTS HWS ALSO				
	ESULTING IN 1096 ANIMALS H	ELPED, AND PROVI	DED WILDLIFE-CO	ONFLICT TRAINING SERVICES	TO OVER 30
MUNICIPALITIE	S AND COMMUNITIES				
(Code) (Expenses \$	ıncludı	ng grants of \$) (Revenue \$)

(Code) (Expenses \$ including grants of \$) (Revenue \$) DONATED IN-KIND SERVICES REPORTED PER INSTRUCTIONS PSAS \$17,693,590LEGAL SERVICES \$4,519,996DONATED ADS \$319,793FACILITY USAGE \$6,037DM CONSULTING \$11,450 ------ TOTAL \$22,550,866

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) A verage hours	(C) Position (check all that apply)				III		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organızatıon (W- 2/1099-MISC)	from related organızatıons (W- 2/1099- MISC)	compensation from the organization and related organizations
ANITA W COUPE ESQ CHAIR OF BOARD	3 00	х		х				0	0	0
JENNIFER LEANING MD SMH VICE CHAIR	2 0 0	х		х				0	0	0
ERIC L BERNTHAL ESQ SECOND VICE CHAIR	2 00	х		х				0	0	0
KATHLEEN M LINEHAN ESQ BOARD TREASURER	2 0 0	х		х				0	0	0
JEFFREY J ARCINIACO DIRECTOR	1 00	х						0	0	0
MICHAEL J BLACKWELL DVM MPH DIRECTOR	1 00	х						0	0	0
BARBARA BRACK DIRECTOR	1 00	х						0	0	0
JERRY CESAK DIRECTOR	1 00	х						0	0	0
NEIL B FANG ESQ CPA DIRECTOR	1 00	х						0	0	0
JANE GREENSPUN GALE DIRECTOR	1 00	х						0	0	0
JONATHAN D KAUFELT ESQ DIRECTOR	1 00	х						0	0	0
PAULA A KISLAK DVM DIRECTOR	1 00	х						0	0	0
JOHN MACKEY DIRECTOR	1 00	х						0	0	0
MARY I MAX DIRECTOR	1 00	х						0	0	0
PATRICK L MCDONNELL DIRECTOR	1 00	х						0	0	0
JUDY NEY DIRECTOR	1 00	х						0	0	0
SHARON LEE PATRICK DIRECTOR	1 00	х						0	0	0
JUDY J PEIL DIRECTOR	1 00	х						0	0	0
MARIAN G PROBST DIRECTOR	1 00	х						0	0	0
JONATHAN M RATNER DIRECTOR	1 00	х						0	0	0
JOSHUA S REICHERT PHD DIRECTOR	1 00	х						0	0	0
WALTER J STEWART ESQ DIRECTOR	1 00	х						0	0	0
ANDREW WEINSTEIN DIRECTOR	1 00	х						0	0	0
JASON WEISS DIRECTOR	1 00	х						0	0	0
DAVID O WIEBERS MD DIRECTOR	1 00	х						0	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) A verage hours	Pos		C) (che	ck a			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustaa or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organızatıon (W- 2/1099-MISC)	from related organızatıons (W- 2/1099- MISC)	compensation from the organization and related organizations
LONA WILLIAMS DIRECTOR	1 00	х						о	0	0
WILLIAM F MANCUSO DIRECTOR	1 0 0	х						0	0	0
PERSIA WHITE DIRECTOR	1 0 0	х						0	0	0
ARNOLD BAER ASSISTANT TREASURER/PART OF YEAR	40 00			х				81,655	0	42,803
GWEN CRANE CONTROLLER & DEPUTY TREASURER	40 00			х				120,747	0	25,569
JANET D FRAKE SECRETARY	40 00			х				87,999	0	45,162
PATRICIA A GATONS ASSISTANT SECRETARY	20 00			х				52,106	0	5,429
GEOFFREY HANDY ASSISTANT TREAS/PART OF YEAR	40 00			х				117,622	0	39,415
ROGER KINDLER GENERAL COUNSEL, VP AND CLO	40 00			х				193,684	0	40,162
LAURA MALONEY CHIEF OPERATING OFFICER	40 00			х				161,860	0	13,463
MICHAEL MARKARIAN CHIEF PROGRAM & POLICY OFFICER	36 00			х				185,936	20,660	18,019
DONNA MOCHI ASSISTANT SECRETARY	40 00			х				74,912	0	15,920
WAYNE PACELLE PRESIDENT AND CEO	40 00			х				268,226	0	31,295
THERESA CANNON REESE SECOND DEPUTY TREASURER	40 00			х				101,778	0	35,340
ANDREW ROWAN CHIEF INTN'L OFFICER AND CHIEF SCIENTIFIC OFFICER	16 00			х				77,717	116,575	80,477
BERNARD UNTI ASSISTANT TREASURER	40 00			х				95,640	0	20,521
G THOMAS WAITE III TREASURER AND CFO	40 00			х				199,594	0	68,425
JOHN BALZAR SVP, COMMUNICATIONS	40 00				x			168,740	0	40,096
HOLLY HAZARD SVP, PROGRAMS & INNOVATIONS	32 00					x		139,557	34,889	32,719
JOHN W GRANDY SVP, WILDLIFE PROGRAMS	40 00					x		163,566	0	85,568
HEIDI PRESCOTT SVP, CAMPAIGNS & OUTREACH	40 00					x		142,720	0	28,038
DEBORAH PEEPLES VP, PHILANTHROPY	40 00					x		141,130	0	25,075
MARTIN STEPHENS VP, ANIMAL RESEARCH ISSUES	40 00					x		136,569	0	5,449
JONATHAN LOVVORN SVP, ANIMAL PROTECTION LITIGATION & RESEARCH	40 00					x		126,574	0	17,575

efi	le GR	АРНІС р	rint - D	O NOT PROCESS	As File	ed Data -				DLN: 9349	93039007134	
		OULE A or 990EZ)		Public (Charity S	Status a	nd Publ	ic Suppo	ort	ОМ	B No 1545-0047	
Departr	ment of th	e Treasury e Service		Complete if the o	4947(a)(1)	nonexempt	charitable tr	ust.		C	ZUII Dpen to Public	
				🏲 Attach to I	Form 990 or	Form 990-EZ	. 🕨 See sepa	rate instruct		identificatio	Inspection	
		ie organizat SOCIETY OF		ED STATES					Employer		on number	
								<u> </u>	53-0225			
	rt I			blic Charity Sta		_				nstructions		
1 ne	organi			te foundation becaus ion of churches, or a	•			•	(X)			
2	'r			d in section 170(b)(1								
3	Ē			operative hospital se				on 170(b)(1)	(A)(iii).			
4	Ē	A medica	l researc	h organization opera ity, and state	_					(1)(A)(iii). I	Enter the	
5	Г			perated for the benefi (A)(iv). (Complete P		e or universi	ty owned or o	operated by a	governmer	ntal unit desc	cribed in	
6	Г				-	tal unıt desc	rıbed ın sect	ion 170(b)(1)(A)(v).			
7	ম	described	ederal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). organization that normally receives a substantial part of its support from a governmental unit or from the general public cribed in t ion 170(b)(1)(A)(vi) (Complete Part II)									
8	Г			t described in sectio	-	A)(vi) (Con	nplete Part I	I)				
9	Ē			at normally receives					outions, mer	nbership fee	s, and gross	
		receipts f	rom activ	vities related to its e	xempt functı	ons—subjec	t to certain e	exceptions, a	nd (2) no m	ore than 331	/3% of	
		ıts suppo	rt from gr	ross investment inco	me and unre	lated busine	ss taxable II	ncome (less s	section 511	tax) from bu	isinesses	
		acquired	by the or	ganızatıon after June	30,1975 S	See section 5	509(a)(2).((Complete Par	tIII)			
10				ganized and operate								
11	Γ	one or mo the box th	ore public	ganized and operate Ily supported organiz ibes the type of supp b Type I	ations descr	ibed in section	ion 509(a)(1 complete line) or section §	509(a)(2) S gh 11h	See section 5		
e	Г		n foundat	oox, I certify that the non managers and ot	-			•				
f		If the org	anization	received a written d	etermination	from the IR	S that it is a	Туре I, Туре	e II or Type	III supporti	ng organization,	
g		check thi		2006, has the organ	ization accei	nted any diff	or contribut	ion from any	ofthe		I	
y		following				sted any grit	or contribut		or the			
				rectly or indirectly o	-		-	persons des	cribed in (ii		Yes No	
				governing body of th			ation?			110		
			-	er of a person descri			h			11g		
h				lled entity of a perso ng information about						11g	(III)	
				(iii)	(iv)							
	(1)			Type of organization	Isth	e	(v) Did you no		(vi Isti			
	(i) Name		(ii)	(described on	organızat col (ı) lıs		organizat		organiza		(vii)	
	suppo		EIN	lines 1- 9 above	your gove		col (ı) o		col (i) or	-	A mount of support?	
0	rganız	ation		or IRC section (see	docume	-	support? In the U S ? support					
				(see instructions))	Yes	No	lo Yes No Yes No					
Tota				1		1	1	1	1	1	1	

For Paperwork Reduction Act Notice, see the Instructions for Form 990

Schedule A	(Form	990	or 990-EZ) 201:	1
Selledule A	(10111	550	01 200 227201.	-

Page **2**

F	Part II	Support Schedule (Complete only if y						
		under Part III. If th						
S	ection A.	Public Support	ie ergamzation					
		or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	membersh	ts, contributions, and p fees received (Do any "unusual	85,224,98	8 84,588,129	92,517,620	115,481,949	105,049,788	482,862,474
2	organizatio	ies levied for the in's benefit and either expended on its						
3	furnished b	of services or facilities by a governmental unit nization without						
4	-	lines 1 through 3	85,224,98	8 84,588,129	92,517,620	115,481,949	105,049,788	482,862,474
5	by each pe governmen	n of total contributions rson (other than a ital unit or publicly organization) included						1,237,710
	on line 1 th amount she (f)	nat exceeds 2% of the own on line 11, column						
6	Public Sup from line 4	port. Subtract line 5						481,624,764
S		Total Support		•				
	endar year	(or fiscal year	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
_		jinning in)			.,			
7	A mounts fi		85,224,988	84,588,129	92,517,620	115,481,949	105,049,788	482,862,474
8	dıvıdends, on securiti	me from interest, payments received es loans, rents, nd income from irces	8,245,945	8,478,978	7,333,227	8,317,712	9,408,585	41,784,447
9	business a not the bus carried on	e from unrelated ctivities, whether or siness is regularly						
10	IV)Donot	me (Explain in Part t include gain or loss ile of capital	255,627	150,410	798,415	672,872	227,756	2,105,080
11	Total support	ort (Add lines 7						526,752,001
12		י איף ts from related activi	ties, etc (See ins	structions)			12	12,374,063
13		Years If the Form 990 is box and stop here	s for the organıza	tion's first, seconc	l, thırd, fourth, or	fifth tax year as a	501(c)(3) organı	zation,
S		Computation of Pu						
14	Public Sup	port Percentage for 20	11 (lıne 6 column	(f) divided by line	11 column (f))		14	91 430 %
15	Public Sup	port Percentage for 20	10 Schedule A, P	art II, lıne 14			15	92 290 %
16a	33 1/3% s	upport test—2011. If th	e organization di	d not check the bo	x on line 13, and	line 14 is 33 1/3%	% or more, check	this box
	33 1/3% s	ere. The organization que support test—2010. If the op here. The organizati and-circumstances test and-circumstances test of the substances test of test of the substances test of tes	ne organızatıon dı on qualıfıes as a	d not check the bo publicly supported	x on line 13 or 1 organization	,	· · · · ·	check this
174	ıs 10% or	more, and if the organiz how the organization me	ation meets the '	facts and circums	tances" test, che	eck this box and s	top here. Explain	rted
b	10%-facts 15 is 10% Explain in	- and-circumstances tes or more, and if the organize Part IV how the organize	anızatıon meets t	he "facts and circi	umstances" test,	check this box ar	nd stop here.	y
18		organization undation If the organiza Is	ation did not chec	k a box on line 13	, 16a, 16b, 17a c	or 17b, check this	box and see	►Γ ►Γ

Pa	rt III	Support Schedule f							
		(Complete only if you							
		Part II. If the organiz	ation fails to c	ualify under th	e tests listed be	elow, please co	omplete F	Part II.)
		Public Support		-			-		
Cale	ndar year	(or fiscal year beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2	011	(f) Total
	Ciffe area	ın) nts, contributions, and							. ,
1		hip fees received (Do not							
		ny "unusual grants ")							
2		eipts from admissions,							
-		lise sold or services							
	performed	l, or facilities furnished in							
		ty that is related to the							
	-	ion's tax-exempt							
_	purpose								
3		elpts from activities that nunrelated trade or							
		under section 513							
4		nues levied for the							
-		on's benefit and either							
	paid to or	expended on its							
	behalf								
5		of services or facilities							
		by a governmental unit to							
		ization without charge							
6		d lines 1 through 5							
7a		Included on lines 1, 2, eived from disqualified							
	persons	eiveu nom uisquaimeu							
Ь		included on lines 2 and 3							
		from other than							
	dısqualıfı	ed persons that exceed							
	the greate	er of \$5,000 or 1% of the							
		n line 13 for the year							
С		7a and 7b							
8		pport (Subtract line 7c							
	from line (,							
		Total Support		1					
Cale	ndar year	(or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 20)11	(f) Total
9	Amounts	from line 6							
, 10a		ome from interest,							
IVa		, payments received on							
		s loans, rents, royalties							
	and incon	ne from similar							
	sources								
b		l business taxable							
	•	ess section 511 taxes)							
	June 30,	nesses acquired after							
с		10a and 10b							
11		ne from unrelated							
		activities not included							
		b, whether or not the							
	business	is regularly carried on							
12		ome Do not include							
	5	ss from the sale of							
	Capital as IV)	ssets (Explain in Part							
13		port (Add lines 9, 10c,							
13	11 and 12								
14		Years If the Form 990 is f	or the organizati	on's first, second	, thırd, fourth, or	fifth tax year as a	a 501(c)(3) organ	ızatıon,
	check this	s box and stop here							►
Se		Computation of Pub							
15	Public Su	pport Percentage for 2011	(lıne 8 column	(f) dıvıded by lıne	13 column (f))		15		
16	Public sup	oport percentage from 201	0 Schedule A, P	art III, line 15			16		
		· · · -	,						
Se	ction D	Computation of Invo	estment Inco	me Percenta	ae				
17		nt income percentage for 2				ו (f))	17		
			-			N. 77			
18		nt income percentage from					18		
19a		support tests—2011. If the							
L		33 1/3%, check this box							1/20/4 and lung
Ь		support tests—2010. If the more than 33 1/3%, check							
20		oundation If the organizati							

Part IV Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

Schedule A (Form 990 or 990-EZ) 2011

efile GRA	PHIC pri	nt - DO NO	T PROCESS	As Filed Data			DLN:	93493039007134
SCHEDU	JLE C		Political C	Campaign and	Lobbying <i>I</i>	Activities		OMBNo 1545-0047
(Form 990 or Department of the T Internal Revenue Se	r 990-EZ) reasury	For Organi	► Com	pt From Income Ta: plete if the organizat orm 990 or Form 990-1	ion is described b	elow.	tion 527	2011 Open to Public Inspection
If the organ then	ization an	swered "Ye	s," to Form 990), Part IV, Line 3, or	Form 990-EZ, Pa	rt V, line 46 (Poli	tical Cam	paign Activities),
 Section 501 Section 501 Section 527 	l(c) (other ⁷ organızatı	than section 5 ons Complete	01(c)(3)) organı Part I-A only	and B Do not complet zations Complete Part D, Part IV, Line 4, or	s I-A and C below			ctivities), then
 Section 501 If the organ 	l(c)(3) orga ization an	anizations that swered "Ye	have NOT filed	5768 (election under Form 5768 (election ui), Part IV, Line 5 (Pr o e Part III	nder section 501(h	n)) Complete Part	I-B Do not	t complete Part II-A
Name of the THE HUMANE		TION THE UNITED ST	ATES			Emplo	yer ıdentı	fication number
							25390	
	-			s exempt under s	•			organization.
in oppo	sition to c	andıdates for	ganızatıon's dıre publıc office ın l	ect and indirect politic Part IV	al campaıgn actı	rities on behalf of	or	
_	al expendıt eer hours	ures					▶ \$	í
				s exempt under s)(3).		
			-	the organization und			► \$	
				organization manage		4955	► \$;
	-		ection 4955 ta>	k, dıd it file Form 472	0 for this year?			Yes No
	correction							Yes No
		e in Part IV	anization is	s exempt under s	section 501/c	Avcent secti	on 501/	(c)(3)
				ng organization for se				s
2 Entert		of the filing o		nds contributed to oth				·
·			tures Add lines	1 and 2 Enter here a	ind on Form 1120	-POL, lıne 17b	•	
	-		Form 1120-POL f				\$, └ Yes └ No
5 Enter t organiz amoun	he names, zation mad t of politica	addresses ar e payments f al contributior	nd employer ider For each organiz ns received that	ntification number (EI ation listed, enter the were promptly and di committee (PAC) If a	amount paid from rectly delivered to	n the filing organiz o a separate politi	ation's fui cal organi	nds Also enter the Ization, such as a
	(a) Name		(b)	Address	(c) EIN	(d) Amount pai filing organiza funds If none, ei	tion's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

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Sc	nedule C (Form 990 or 990-EZ) 2011			Page 2				
Р	art II-A Complete if the organizatio under section 501(h)).	n is exempt under section 501(c)(3)	and filed Form 5768	(election				
	expenses, and share of excess lol	an affiliated group (and list in Part IV each affi obying expenditures) ox A and "limited control" provisions apply	liated group member's name	, address, EIN,				
	Limits on Lobbying (The term "expenditures" means	Expenditures	(a) Filing Organization's Totals	(b) Affiliated Group Totals				
1a	Total lobbying expenditures to influence public	opinion (grass roots lobbying)						
b	Total lobbying expenditures to influence a legis	slative body (direct lobbying)						
С	Total lobbying expenditures (add lines 1a and	1b)						
d	O ther exempt purpose expenditures							
е	Total exempt purpose expenditures (add lines	1c and 1d)						
f	Lobbying nontaxable amount Enter the amoun columns							
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:						
	Not over \$500,000	20% of the amount on line 1e						
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000						
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000						
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000						
	Over \$17,000,000	\$1,000,000						
g	Grassroots nontaxable amount (enter 25% of l	ıne 1f)						
h	Subtract line 1g from line 1a If zero or less, er	iter -0 -						
i	Subtract line 1f from line 1c If zero or less, en	ter - 0 -						
j	if there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting Section 4911 tax for 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 on page 4.)

	Lobbying Expendit	ures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(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))					
f	Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2011

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)).

		(4	a)	(b)	
		Yes	No	Amount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?	Yes			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes			
с	Media advertisements?	Yes		9,280	
d	Mailings to members, legislators, or the public?	Yes		653,335	
е	Publications, or published or broadcast statements?	Yes		551,507	
f	Grants to other organizations for lobbying purposes?	Yes		465,838	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		681,598	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	Yes		130,973	
i	Other activities? If "Yes," describe in Part IV	Yes		74,753	
j	Total lines 1c through 1i			2,567,284	
2a	Did the activities in line 1 cause the organization to be not described in section $501(c)(3)^{2}$		No		
b	If "Yes," enter the amount of any tax incurred under section 4912				
с	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)(5), o	r section	

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			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 Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
b	Carryover from last year	2b	
С	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 excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

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

Identifier	Return Reference	Explanation
PART IV, SUPPLEMENTAL		PART II-B, LINES 1(A)- 1(I) 1A VOLUNTEERS THE HSUS
INFORMATION		UTILIZES UNPAID VOLUNTEERS TO COLLECT
		SIGNATURES FOR REFERENDA, CONTACT LEGISLATORS
		AND THEIR STAFFS, AND PARTICIPATE IN RALLIES,
		DEMONSTRATIONS, SEMINARS, AND CONVENTIONS 1B
		PAID STAFF OR MANAGEMENT HSUS MANAGEMENT AND
		STAFF PLAN, COORDINATE, AND IMPLEMENT A PUBLIC
		POLICY PROGRAM THIS PROGRAM INCLUDES
		MAINTAINING AND EXPANDING CONTACTS WITH
		MEMBERS OF CONGRESS, STATE LEGISLATORS,
		EXECUTIVE AND REGULATORY AGENCIES, ANIMAL
		WELFARE COALITIONS, AND OTHER NATIONAL AND
		LOCAL ORGANIZATIONS 1C MEDIA ADVERTISEMENTS
		THE HSUS PUBLISHED ADVERTISEMENTS THROUGH THE
		MEDIA IN AN EFFORT TO INFLUENCE LEGISLATION AND
		TO INFLUENCE PUBLIC OPINION ON LEGISLATIVE
		MATTERS OR REFERENDA 1D MAILINGS TO MEMBERS,
		LEGISLATORS, OR THE PUBLIC THE HSUS SENT
		ELECTRONIC UPDATES ON ANIMAL WELFARE
		LEGISLATION AND BALLOT INITIATIVES TO UNPAID
		VOLUNTEERS, MEMBERS, AND OTHER INTERESTED
		PARTIES IN ADDITION, THE HSUS ASSISTED INTERESTED
		PARTIES IN SENDING EMAIL AND FAXES TO LAWMAKERS
		THROUGH THE SOCIETY'S WEBSITE 1E PUBLICATIONS,
		OR PUBLISHED OR BROADCAST STATEMENTS IN
		FURTHERANCE OF ITS EFFORTS TO IMPROVE THE
		WELFARE OF PETS, FARM ANIMALS, WILDLIFE, AND OTHER
		ANIMALS, THE HSUS MADE STATEMENTS IN ITS
		ELECTRONIC AND PRINT PUBLICATIONS, AS WELL AS IN
		PUBLISHED OR BROADCAST STATEMENTS INTENDED TO

INFLUENCE LEGISLATION AND TO INFLUENCE PUBLIC OPINION ON LEGISLATIVE MATTERS OR REFERENDA 1F GRANTS TO OTHER ORGANIZATIONS THE HSUS MADE SEVERAL GRANTS TO STATE BALLOT COMMITTEES TO FURTHER ANIMAL WELFARE LEGISLATION 1G DIRECT CONTACT WITH LEGISLATORS, THEIR STAFFS, GOVERNMENT OFFICIALS, OR A LEGISLATIVE BODY IN FURTHERANCE OF ITS EFFORTS TO INFLUENCE LEGISLATION AND TO INFLUENCE PUBLIC OPINION ON LEGISLATIVE MATTERS OR REFERENDA, HSUS STAFF, UNPAID VOLUNTEERS, AND PAID CONSULTANTS HAVE DIRECT CONTACT WITH LEGISLATORS AND THEIR STAFF, GOVERNMENT OFFICIALS, AND LEGISLATIVE BODIES 1H RALLIES, DEMONSTRATIONS, SEMINARS, CONVENTIONS, SPEECHES, LECTURES, OR ANY SIMILAR MEANS THE HSUS HELD LOBBY DAYS IN VARIOUS STATE CAPITALS FOR CITIZENS WHO ARE CONCERNED ABOUT ANIMAL WELFARE ISSUES, AND WHO WISH TO PARTICIPATE IN THE LEGISLATIVE PROCESS AND INFLUENCE PUBLIC POLICY THE HSUS ALSO HELD A "TAKING ACTION FOR ANIMALS" CONFERENCE WHICH INCLUDED A LOBBYING DAY FOR VOLUNTEERS AND ATTENDEES 11 OTHER ACTIVITIES THE HSUS UTILIZED PAID CONSULTANTS TO ASSIST WITH MEDIA ADVERTISEMENTS AND ENGAGE IN DIRECT CONTACT WITH LEGISLATORS AND THEIR STAFFS CONSULTANTS ALSO PROVIDED ASSISTANCE WITH MAILINGS, PUBLICATIONS, AND RALLIES AND DEMONSTRATIONS

efile GRAPHIC p	orint - DO NOT PROCESS	As Filed Data -			DLN:	93493039	007134
SCHEDULE D						OMB No 154	45-0047
Form 990)		mental Financi				201	1
epartment of the Treasury nternal Revenue Service	Part IV, line 6, ► Attach		ered "Yes," to Form 990 11d, 11e, 11f, 12a, or 12 parate instructions.	2b		Open to Inspec	tion
Name of the organi THE HUMANE SOCIETY (OF THE UNITED STATES			53-0	0225390	ication numb	
	izations Maintaining Dono ation answered "Yes" to Forr			unds	or Accour	ts. Comple	ete if the
Organiz	auon answered tes to for		radvised funds	((b) Funds an	d other acco	unts
1 Total number at	t end of year						
2 Aggregate cont	ributions to (during year)						
Aggregate gran	ts from (during year)						
Aggregate valu	e at end of year						
funds are the o	ation inform all donors and donor rganization's property, subject to	the organization's exc	lusive legal control?			∏ Yes	∏ No
used only for cl	ation inform all grantees, donors, haritable purposes and not for the ermissible private benefit					∏ Yes	∏ No
	rvation Easements. Comp	lete if the organizat	ion answered "Yes" t	o Forn	า 990, Part	IV, line 7.	
PreservatiProtectionPreservati	onservation easements held by t on of land for public use (eg, rec of natural habitat on of open space 2a–2d if the organization held a	reation or pleasure)	Preservation of an Preservation of a	certified	d historic str	-	2a
	he last day of the tax year	4				he End of the	e Year
a Total number o	f conservation easements			2a	i ioiu ut t		
b Total acreage r	estricted by conservation easem	ents		2b			
c Number of cons	servation easements on a certifie	d historic structure ind	cluded in (a)	2c			
d Number of cons	servation easements included in ((c) acquired after 8/17	/06	2d			
	servation easements modified, tra ar ▶	ansferred, released, ex	tinguished, or terminate	ed by th	e organızatı	on during	
Number of stat	es where property subject to con:	servation easement is	located 🕨				
Does the organ	ization have a written policy rega the conservation easements it h	rding the periodic mor			violations, a	and Ves	∏ No
Staff and volun	teer hours devoted to monitoring,	, inspecting and enforc	ing conservation easem	nents di	uring the yea	ar 🕨	
A mount of expe	enses incurred in monitoring, insp	pecting, and enforcing	conservation easement	s durınç	g the year		
Does each con	servation easement reported on l) and 170(h)(4)(B)(II)?	ıne 2(d) above satısfy	the requirements of sec	ction		∏ Yes	∏ No
balance sheet,	scribe how the organization repo and include, if applicable, the tex n's accounting for conservation e	t of the footnote to the					
art III Örgani	izations Maintaining Colle	ctions of Art, Hist		or Otl	her Simila	r Assets.	
art, historical t	cion elected, as permitted under S reasures, or other similar assets : XIV, the text of the footnote to r	held for public exhibiti	on, education or resear	ch ın fu			e,
historical treas	tion elected, as permitted under S ures, or other similar assets held owing amounts relating to these i	for public exhibition,					
(i) Revenues ir	ncluded in Form 990, Part VIII, li	ne 1			►\$_		
(ii) Assets Incl	uded in Form 990, Part X						
If the organizat	nts required to be reported under			or finan			
a Revenues inclu	ided in Form 990, Part VIII, line	1			►\$		
	d ın Form 990, Part X						
					· +		

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990 Cat No 52283D Schedule D (Form 990) 2011

Sche	dule D (Form 990) 2011						Page 2		
Part	tIIII Organizations Maintaining Co	llections of Art,	, Historical Tr	easures, or Oth	ner Similar As	sets (cc	ntinued)		
3	Using the organization's accession and othe items (check all that apply)	r records, check any	of the following t	hat are a sıgnıfıcan	t use of its collect	lion			
а	Public exhibition		d F Loan d	or exchange program	ns				
b			e 🔽 Other						
с	Preservation for future generations								
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV								
5	During the year, did the organization solicit assets to be sold to raise funds rather than					☐ Yes	∏ No		
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an ar				"Yes" to Form 9	90,			
1a	Is the organization an agent, trustee, custoc included on Form 990, Part X?	lian or other interme	diary for contribu	tions or other asset	s not	T Yes	∏ No		
b	If "Yes," explain the arrangement in Part XI	/ and complete the f	following table						
					An	nount			
C	Beginning balance			1					
d	Additions during the year			10	d				
e	Distributions during the year			10	-				
f	Ending balance			1					
2a	Did the organization include an amount on Fe		21?			🗌 Yes	∏ No		
b	If "Yes," explain the arrangement in Part XIV		1.05.6						
Ра	rt V Endowment Funds. Complete	(a)Current Year	(b)Prior Year		<pre>'art IV, line 10. (d)Three Years Back</pre>	(e)Four Y	/ears Back		
1a	Beginning of year balance	27,569,938	26,491,737	21,999,540	20,303,141	. ,	Curs Back		
b	Contributions	15,712	56,342	2,553,351	879,100	,			
с	Investment earnings or losses	-429,288	1,916,328	2,498,299	817,299	,			
d	Grants or scholarships								
e	Other expenditures for facilities and programs	1,029,986	894,469	559,453					
f	Administrative expenses								
g	End of year balance	26,126,376	27,569,938	26,491,737	21,999,540				
2	Provide the estimated percentage of the yea	r end balance held a	S						
а	Board designated or quasi-endowment 🕨	1 000 %							
b	Permanent endowment 🕨 99 000 %								
с	Term endowment 🕨								
За	Are there endowment funds not in the posse	ssion of the organiza	ation that are held	and administered f	or the		,		
	organization by (i) unrelated organizations				32(Yes	No No		
	(ii) related organizations				3a(No		
ь	If "Yes" to 3a(II), are the related organization								
4	Describe in Part XIV the intended uses of th						L		
Par	t VI Land, Buildings, and Equipme	ent. See Form 99	0, Part X, line 1	0.					
	Description of property		(a) Cost or o basis (investr		er (c) Accumulated depreciation	(d) Bo	ok value		
1a	Land			6,189,0	10		6,189,010		
b	Buildings			12,309,82	6,738,89	7	5,570,930		
с	Leasehold improvements								
Ь	Faupment								

			Schedule D	(Form 990) 2011
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) .		F	12,403,808
e Other		3,589,052	2,945,184	643,868
d Equipment				

Schedule	р	(Form	9901	2011
Scheuule	υ	(FUIII	, , , ,	2011

Part VII Investments-Other Securities. See	Form 990, Part X, line 1	2.
 (a) Description of security or category (including name of security) 	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. See		13.
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, III		
(a) Descrij		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1Part XOther Liabilities. See Form 990, Part >		
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes		
ACCRUED SEVERANCE OBLIGATION	1,521,141	
DEFERRED COMPENSATION ANNUITY CONTRACTS	4 2 0 , 0 5 5	
SPLIT INTEREST ARRANGMENTS LIABILITY	7,921,747	
ACCRUED POSTRETIREMENT BENEFIT OBLIGATION	11,559,327	
DUE TO AFFILIATES	3,019,522	

 Total. (Column (b) should equal Form 990, Part X, col (B) line 25)
 24,441,792

 2. Fin 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC740)

Schedule D (Form 990) 2011 Page 4 Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements 1 1 115,884,068 Total revenue (Form 990, Part VIII, column (A), line 12) 2 2 110,078,617 Total expenses (Form 990, Part IX, column (A), line 25) 3 3 5,805,451 Excess or (deficit) for the year Subtract line 2 from line 1 4 4 -5,253,993 Net unrealized gains (losses) on investments 5 5 Donated services and use of facilities 6 6 Investment expenses 7 7 Prior period adjustments 8 8 -4,850,929 Other (Describe in Part XIV) 9 -10,104,922 9 Total adjustments (net) Add lines 4 - 8 10 10 -4,299,471 Excess or (deficit) for the year per financial statements Combine lines 3 and 9 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Total revenue, gains, and other support per audited financial statements 139,866,060 1 1 Amounts included on line 1 but not on Form 990, Part VIII, line 12 2 Net unrealized gains on investments . . . 2a а Donated services and use of facilities . . . 2b 22,550,866 b Recoveries of prior year grants . . . С 2c Other (Describe in Part XIV) 2d d . Add lines 2a through 2d 2e 22,550,866 e Subtract line **2e** from line **1** . 3 117,315,194 з . . A mounts included on Form 990, Part VIII, line 12, but not on line 1 4 Investment expenses not included on Form 990, Part VIII, line 7b . а 4a 4b b Other (Describe in Part XIV) -1,431,126С **4**c -1,431,126 . Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12) . 5 115,884,068 5 Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Total expenses and losses per audited financial 144,165,531 1 statements . 1 Amounts included on line 1 but not on Form 990, Part IX, line 25 2 Donated services and use of facilities а 2a 22,550,866 Prior year adjustments 2b b . Other losses 2c С . Other (Describe in Part XIV) d 2d 11,536,048 . . Add lines 2a through 2d 34,086,914 2e e . . 3 3 110,078,617 Amounts included on Form 990, Part IX, line 25, but not on line 1: 4 Investment expenses not included on Form 990, Part VIII, line 7b . . 4a а 4b b Add lines 4a and 4b . . . **4**c 0 С 110,078,617 Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18) . . . 5 5 Part XIV Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

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

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	INCOME FROM ENDOWMENTS IS EXPENDABLE TO SUPPORT THE FOLLOWING DEFRAY BUILDING OPERATING EXPENSES, AWARD SCHOLARSHIPS TO CONNECTICUT SECONDARY SCHOOL STUDENTS, AND SUPPORT FOR THE BEST INTERESTS OF THE ORGANIZATION AND OTHER HUMANE ORGANIZATIONS, INCLUDING THE NORMA TERRIS HUMANE EDUCATION AND NATURE CENTER ADDITIONALLY, FUNDS SUPPORT THE STATE OF NEW HAMPSHIRE WILDLIFE AND THE BETTERMENT OF SONG BIRDS
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE SOCIETY FOLLOWS THE ACCOUNTING STANDARD FOR UNCERTAINTY IN INCOME TAXES, WHICH ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS UNDER THIS GUIDANCE, THE SOCIETY MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE-LIKELY-THAN-NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH A POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50 PERCENT LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT THE GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ALSO ADDRESSES DE-RECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES ON INCOME TAXES, AND ACCOUNTING IN INTERIM PERIODS MANAGEMENT EVALUATED THE SOCIETY 'S TAX POSITIONS AND CONCLUDED THAT THE SOCIETY HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE CONSOLIDATED FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF THIS GUIDANCE GENERALLY, THE SOCIETY IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY THE U S FEDERAL, STATE OR LOCAL TAX AUTHORITIES FOR YEARS BEFORE 2008
PART XI, LINE 8 - OTHER ADJUSTMENTS		POST RETIREMENT BENEFITS ADJUSTMENT -4,839,631 ADDED FMV OF DONATED VEHICLES -70,618 LOSS FROM FUNDRAISING EVENT 59,320 TOTAL TO SCHEDULE D, PART XI, LINE 8 -4,850,929
PART XII, LINE 4B - OTHER ADJUSTMENTS		LOSS ON SALE OF SECURITIES -1,442,428 LOSS FROM FUNDRAISING EVENTS -59,320 ADDED FMV OF DONATED VEHICLES 70,618 ROUNDING 4
PART XIII, LINE 2D - OTHER ADJUSTMENTS		POST RETIREMENT BENEFITS ADJUSTMENT 4,839,631 REALIZED & UNREALIZED LOSS ON INVESTMENTS 6,696,420 ROUNDING ADJUSTMENT -3

Schedule D (Form 990) 2011

efi	le GRAPHIC pri	nt - DO NOT	PROCESS	As Filed Da	N: 93493039007134		
SCH	IEDULE F	Stat	ement of	Activities (Outside the Unit	ed States	OMBNo 1545-0047
Departr	rm 990) ment of the Treasury Revenue Service	Clu	► Complete	if the organizatio Part IV, line h to Form 990. ►	2011 Open to Public Inspection		
	e of the organization					Employer i	dentification number
THE	HUMANE SOCIET	Y OF THE UN.	LIED STATES			53-02253	90
Ра			n on Activiti rt IV, lıne 14b		he United States. Co	omplete if the org	anızatıon answered
1 2	assistance, the grants or as	grantees' elig sistance?	gibility for the	grants or assu	ls to substantiate the a stance, and the selecti res for monitoring the use	on criteria used to	award 🔽 Yes 🦵 No
	United States						
3	Activites per Region (a) Region	on (Use Part	V If additional s (b) Number of offices in the region	(c) Number of employees or) (d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (a program service, des specific type of service(s) in region	cribe expenditures for region/investments
	CENTRAL AMERI CARIBBEAN	CA AND THE	0	0	GRANTMAKING		42,488
	EAST ASIA AND PACIFIC	THE	0	0	GRANTMAKING		70,536
	EUROPE (INCLUI ICELAND & GREE		0	0	GRANTMAKING		60,597
	SOUTH AMERICA		0	0	GRANTMAKING		12,000
	SOUTH ASIA (AFGHANISTAN, BANGLADESH, BI INDIA, MALDIVE PAKIST		0	0	GRANTMAKING		18,000
	SUBSAHARAN AR	FRICA	0	0	GRANTMAKING		39,000
	Sub-total Total from continu	ation sheets	0	-			242,621
	to Part I : Totals (add lines 3		0	0			242,621
	aud intes :		. U	U		1	242,021

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	
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Schedule F (Form 990) 2011

Page **2**

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
See Add'l Data								
2 Enter total nu tax-exempt b	mber of recipier y the IRS, or foi	nt organizations lis r which the grante	ted above that are e or counsel has pro	recognized as charit ovided a section 50:	ties by the foreign c L(c)(3) equivalency	country, recognized letter	as . 🕨	36
3 Enter total nu	mber of other o	rganızatıons or en	tities				. ►	0

Schedule F (Form 990) 2011

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method o valuation (book, FMV, appraisal, oth
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Schedule F (Form 990) 2011

Schedule F (Form 990) 2011 Page 4 Part IV Foreign Forms 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes," the 7 Yes Νo organization may be required to file Form 926 (see instructions for Form 926) 2 Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be Yes 7 No required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A) 3 Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Yes Νo ন Corporations. (see instructions for Form 5471) 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a 7 Yes Νo Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621) 5 Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. 7 Yes Νo (see instructions for Form 8865) 6 Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form Yes No ন 5713).

Schedule F (Form 990) 2011

Part V Supplemental Information Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional

information.

ldentifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS OUTSIDE THE U S		SCHEDULE F, PART I, LINE 2 THE HUMANE SOCIETY OF THE UNITED STATES ISSUES GRANTS TO ORGANIZATIONS THAT MEET OUR MISSION CRITERIA GRANTS ARE USUALLY GIVEN TO ORGANIZATIONS THAT EITHER WE HAVE (1) THOROUGHLY RESEARCHED, (2) HAVE AN EXISTING RELATIONSHIP WITH, (3) INTERACTED WITH IN CONJUNCTION WITH AN HSUS-SPONSORED EVENT GRANT OVERSIGHT IS ACCOMPLISHED THROUGH A VARIETY OF METHODS SUCH AS GRANT REPORTS, MEETINGS WITH GRANTEES, AND SITE VISITS

ldentifier	Return Reference	Explanation
		SCHEDULE F, PART II THE INSTRUCTIONS FOR SCHEDULE F REQUIRE GRANTS AND OTHER ASSISTANCE GIVEN TO RECIPIENTS OVER \$5,000 BE REPORTED IN DETAIL 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 GRANTS OF \$500 OR GREATER IN DETAIL ON SCHEDULE F OF THE HSUS'S FORM 990

Schedule F (Form 990) 2010

Software ID:

Software Version:

EIN: 53-0225390

Name: THE HUMANE SOCIETY OF THE UNITED STATES

(a) Name o organizatioi	I Section		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash dısbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(I) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICAN & CARIBBEAN	SUPPORT RESCUE CENTER OPERATIONS AND SEA TURTLE HATCHERY	2,750	WIRE			
		CENTRAL AMERICAN & CARIBBEAN	SUPPORT SPAY & NEUTER PROGRAM FOR RURAL AREA	3,000	WIRE			
		CENTRAL AMERICAN & CARIBBEAN	SUPPORT SPAY & NEUTER	2,000	WIRE			

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash dısbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(I) Method of valuation (book, FMV, appraisal, other)
			SUPPORT RESCUE AND PROTECTION OF MORELET CROCODILES	10,086	WIRE			
		CENTRAL AMERICAN & CARIBBEAN	SEA TURTLE HATCHERY AND COMMUNITY CONSERVATION PROGRAM	1,850	WIRE			
		CENTRAL AMERICAN & CARIBBEAN	SUPPORT STRENGTHEN LOCAL WILDLIFE RESCUE CENTERS	14,500	WIRE			

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(1) Method of valuation (book, FMV, appraisal, other)
			SUPPORT SPAY & NEUTER	1,700	WIRE			
		AMERICAN & CARIBBEAN	SUPPORT TRANSPORTATION COST FOR NGO REP TO ATTEND IWC MEETING	3,602	WIRE			
		AMERICAN & CARIBBEAN	SUPPORT EDUCATION AND COMMUNITY OUTREACH PROGRAM	3,000	WIRE			

		uitii olu	nes of Enddes					
(a) Name of organızatıon	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash dısbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(I) Method of valuation (book, FMV, appraisal, other)
			SUPPORT SPAY & NEUTER, AWARENESS PROGRAM, POST- RESCUE CARE OF DOGS					
		EAST ASIA AND THE PACIFIC	SUPPORT SHELTER DESIGN AND CONSTRUCTION IN TAIPEI	37,930	WIRE			
		EAST ASIA AND THE PACIFIC	SUPPORT CNVR PROGRAM	2,000	WIRE			

orm 990 Schedule r Part II - Grants or Entities Outside The United States									
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash dısbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(I) Method of valuation (book, FMV, appraisal, other)	
		EAST ASIA AND	SUPPORT	3,000	WIRE				
		THE PACIFIC	PURCHASE						
			LANDOF						
			HOSPITAL						
		EAST ASIA AND	SUPPORT	9,845	WIRE				
		THE PACIFIC	SUMMER						
			САМР						
			DESIGNED TO						
			SPREAD THE						
			MESSAGE OF						
			LOVEOF						
			ANIMALS AND						
			RESPECT FOR						
			LIVES	<u> </u>					
			WELL-BEING	5,000	WIKE				
		P.	OFANIMALS						
		GREENLAND)							
			S OF Endices Of			-			
-----------------------------	---	---	--	---------------------------------	---------------------------------------	--	---	---	
(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash dısbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(I) Method of valuation (book, FMV, appraisal, other)	
		(INCLUDING ICELAND AND GREENLAND)	HIRE A WESTERN VETERINARIAN FOR 1YR/CNTRL OF STRAY/STREET DOGS AND THE ATTENDANT PROBLEMS OF RABIES AND ZOONOTIC ILLNESS	19,000	WIRE				
		(INCLUDING ICELAND AND GREENLAND)	SUPPORT CAT POPULATION MANAGEMENT GUIDANCE MANUAL COMPILATION AND PRODUCTION SUPPORT SPAY	2,597					
			& NEUTER	1,000	WIKE				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	cash	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(1) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND AND GREENLAND)	HUMANE MANAGEMENT OF STRAY COMMUNITY DOGS	3,000	WIRE			
		EUROPE (INCLUDING ICELAND AND GREENLAND)	SUPPORT WILDLIFE CONSERVATION UNIT RESEARCH PROJECT DEPT OF ZOOLOGY	30,000	WIRE			
			SUPPORT EQUINE RESCUE AND RECOVERY	4,000	WIRE			

(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash dısbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(1) Method of valuation (book, FMV, appraisal, other)
	SOUTH		SUPPORT FOR EDUCATIONAL PROGAM/AWARENESS OF THE NEED OF ANIMALS	2,000	WIRE			
		SOUTH AMERICA	SUPPORT SPAY & NEUTER, HUMANE EDU	2,000	WIRE			
			SUPPORT SPAY & NEUTER	2,000	WIRE			

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash dısbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(I) Method of valuation (book, FMV, appraisal, other)
			SUPPORT SPAY & NEUTER	2,000	WIRE			
			SUPPORT HUMANE EDU PROGRAM	3,000	WIRE			
			TO ASSIST IN CARING FOR ABANDONED ANIMALS IN NEW DELHI	10,000	СНЕСК			

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash dısbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(I) Method of valuation (book, FMV, appraisal, other)
			PURCHASE EQUIPMENT FOR S/N CLINIC	2,000	WIRE			
			SUPPORT HUMANE MANAGEMENT OF STRAY COMMUNITY DOGS	3,000	WIRE			
		SAHARAN AFRICA	SUPPORT SPAY & NEUTER, HUMANE EDU PROGRAM	3,000	WIRE			

(b) IRS (h) (1) Method of code (e) A mount (f) Manner of (g) A mount of Description of valuation (a) Name of section (c) Region (d) Purpose of grant cash non-cash (book, FMV, of organization and EIN(If cash grant disbursement appraısal, assistance non-cash applicable) other) assistance SUB-SUPPORT BASIC 2,000 WIRE SAHARAN CARE/TREATMENT AFRICA & TRAINING OF DONKEY-OWNED COMMUNITIES 2,000 WIRE SUB-SUPPORT HUMANE SAHARAN EDU PROGRAM AFRICA SUB-IMMUNOCONTRACEPTION 25,000 WIRE SAHARAN FUNDING FOR AFRICA ELEPHANTS

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash dısbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(I) Method of valuation (book, FMV, appraisal, other)
		SAHARAN	SUPPORT TRAINING FACILITY CONVERSION	3,000	WIRE			
		SAHARAN	SUPPORT HUMANE EDU PROGRAM	2,000	WIRE			
		SAHARAN	SUPPORT HUMANE EDU PROGRAM	2,000	WIRE			

efile GRAPHIC print - D	O NOT PROCESS	As Fi	led Data	a -	DLN	: 93493039007134
SCHEDULE G (Form 990 or 990-EZ)	Fund	draisir	ng or G	rmation Regard Baming Activitie	es	омв № 1545-0047 2011
Department of the Treasury nternal Revenue Service	or if the orga	nization en	tered more th	s" to Form 990, Part IV, lines aan \$15,000 on Form 990-EZ,)-EZ. 🏲 See separate instructi	line 6a.	Open to Public Inspection
Name of the organization THE HUMANE SOCIETY OF ⁻						entification number
					53-022539	0
Part I Fundraising A	ctivities. Complete	e if the o	organizat	ion answered "Yes"	to Form 990, Part I'	V, line 17.
1 Indicate whether the org	anızatıon raısed funds	through a	any of the	-		
a			e		-government grants	
b Internet and e-mail: c Phone solicitations	solicitations		r q	Solicitation of gov Special fundraisin	-	
d 🔽 In-person solicitatio	ns		9		gevents	
2a Did the organization hav	e a written or oral agre	ement wi	th any indi	widual (including office	re duractore trustaas	
 bit the organization hav or key employees listed b If "Yes," list the ten high 	In Form 990, Part VII)) or entity	in connec	ction with professional f	undraising services?	
to be compensated at lea						
(i) Name and address of	(ii) Activity) Did	(iv) Gross receipts	(v) A mount paid to	(vi) A mount paid to
ındıvıdual or entıty (fundraıser)			serhave ody or	from activity	(or retained by) fundraiser listed in	(or retained by) organization
or entry (lunarabery		cont	rolof		col (i)	organization
		Yes	outions? No			
	FUNDRAISING					
NATIONAL OUTDOOR SPORTS	CONSULTANTS					
5151 WISCONSIN AVE NW			No	40,826,074	2,090,27	1 38,735,803
WASHINGTON, DC 20016	TELE FR TO					
INFOCISION MANAGEMENT	OBTAIN MULTI YR					
CORPORATION 325 SPRINGSIDE DRIVE	REVENUE		No	2,683,985	333,22	9 2,350,756
AKRON, OH 44333	TELE FR TO					
DONOR SERVICES GROUP	OBTAIN MULTI YR REVENUE					
5715 SUNSET DRIVE BLVD			No	2,524,599	1,089,97	6 1,434,623
_OSANGELES, CA 90028						
	WEBSITE MARKETING					
WATERSHED COMPANY 100 BUSH STREET SUITE	MARKETING		No	1,500,000	116,18	1 1,383,819
350				1,500,000	110,10	1,505,015
SAN FRANCISCO, CA 94104						
THE SHARE GROUP INC	TELE FR TO OBTAIN MULTI YR					
73 CHAPEL ST	REVENUE		No	1,047,664	532,08	8 515,576
NEWTON, MA 02458						
ADESA IMPACT	AUTO RECOVERY SERVICES					
13085 HAMILTON		Yes		318,932	70,61	8 248,314
CROSSING STE 500				510,552	, 0,01	
CARMEL, IN 46032						
DONOR CARE CENTER INC	FUNDRAISING CONSULTANTS					
80 W TUSCARAWAS AVE			No	74,876	57,64	1 17,235
BARBERTON, OH 44203						
PUBLIC INTEREST	DIRECT RESPONSE					
COMMUNICATIONS						
7700 LEESBURG PIKE STE 301			No	44,002	53,74	2 -9,740
FALLS CHURCH, VA 22043						
Total			►	49,020,132	4,343,74	6 44,676,386

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

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

Sche	dule	G (Form 990 or 990-EZ) 2011				Page 2
Pai	rt I	Fundraising Events. Com more than \$15,000 on Form				
			(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events (Add col (a) through
			NY GALA	ANIMAL CARE EXPO	5	col (c)
			(event type)	(event type)	(total number)	
Энне	1	Gross receipts	787,832	584,380	839,524	2,211,736
Revenue	2	Less Charıtable contributions	563,451		262,385	825,836
	3	Gross income (line 1 minus line 2)	224,381	584,380	577,139	1,385,900
	4	Cash prizes				
မွ	5	Non-cash prizes				
euse	6	Rent/facility costs	195,225	5,873	74,244	275,342
Expenses	7	Food and beverages			253,332	253,332
Direct	8	Entertainment				
ō	9	Other direct expenses .	66,232	583,601	266,713	916,546
	10	Direct expense summary Add lir	nes 4 through 9 in columr	n (d)		(1,445,220)
	11	Net income summary Combine l		-	🕨	-59,320
Par	t II	I Gaming. Complete if the o \$15,000 on Form 990-EZ, li	rganization answered ne 6a.	"Yes" to Form 990, Pa	rt IV, line 19, or repo	orted more than
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
	1	Gross revenue				
ee	2	Cash prizes				
bens	3	Non-cash prizes				
Direct Expenses	4	Rent/facility costs				
DIG	5	Other direct expenses				
	c	Voluptoor labor	Γ Yes			

	6	volunteerlador		Г No	Г No	
	7	Direct expense summary Add line	es 2 through 5 in column	(d)	🕨	()
	8	Net gaming income summary Con	nbine lines 1 and 7 in col	umn (d)		
I	Ent	er the state(s) in which the organiz	ation operates gaming ac	tivities		

а	Is the organization licensed to operate gaming activities in each of these states?	•	•	•	•	•	•	•	• •	•	• •	•	ſ	Yes	No
b	If "No," Explain														

]
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	•	•	•	• •	Γı	′es	Г _N	. 0
b	If "Yes." Explain								

9

Sche	dule G (Form 990 or 990-EZ) 20	11		Page 3
11	Does the organization operate g	aming activities with nonmembers?		Г Yes Г No
12		neficiary or trustee of a trust or a men		
	formed to administer charitable	gamıng?		· · · · F Yes F No
13	Indicate the percentage of gami	ng activity operated in		
а				13a
b				
14		f the person who prepares the organiza	ation's gaming/special events books	s and
	records			
	Name 🕨			
	Address 🕨			
15a	Does the organization have a co	ntract with a third party from whom the	e organization receives gaming	
	revenue?			F Yes F No
b	If "Yes," enter the amount of ga	ming revenue received by the organiza	tion 🕨 \$ and	d the
		ned by the thırd party 🏲 💲		
с	If "Yes," enter name and addres	S		
	Name 🕨			
	Address 🕨			
16	Gaming manager information			
	Name 🕨			
	Gaming manager compensation			
	Gaming manager compensation	▶ \$		
	Description of services provided	i 🕨		
	Director/officer	F Employee		
17	Mandatory distributions	i Employee	I Independent contractor	
а	Is the organization required und	er state law to make charıtable dıstrıb	utions from the gaming proceeds to	
	retain the state gaming license?			· · Fyes FNo
b		s required under state law distributed 1 t activities during the tax year 🕨 💲	to other exempt organizations or sp	ent
Par		provide additional information for	responses to quuestion on Sch	nedule G (see
—	instructions.)	1		
	Identifier	ReturnReference	Explanat	
FUN	DRAISING ACTIVITIES	FORM 990, SCHEDULE G, PART I	THE HSUS AND ITS AFFILIATED SUBSTANTIAL AND LONGSTANI	
			MAIL FUNDRAISING TO SUPPOR	RT THE FULL RANGE OF
			ACTIVITIES THEY UNDERTAKE WHETHER IT INVOLVES HANDS	
			SCIENTIFIC OR TECHNICAL AN	ALYSIS, HUMANE
			EDUCATION, LITIGATION, PUB COMMUNICATION DIRECT MAI	
			FUNDAMENTAL ROLE IN THE DE	VELOPMENT OF THE
			HSUS, AND IT REMAINS CRUCIA HELPING ANIMALS AS AN EDUC	
			DESCRIBES OUR NUMEROUS PR	
			TO HELP ANIMALS, DIRECT MAI CREATE GREATER AWARENESS	
			OUR CONCERNS, AND HAS ALLO	WED US TO BUILD A
			CONSTITUENCY OF SUPPORTER HUMANE FIELD, WITH TREMEND	
			AND PRACTICAL BENEFITS TO	DUR WORK TO
			COMPLEMENT DIRECT MAIL, TH LARGER INDIVIDUAL GIFTS SO	
			FUNDRAISERS, PLANNED GIVIN TELEPHONE SOLICITATION, WO	G, FOUNDATION GRANTS,
			BEQUESTS, AND, MOST RECENT	
			TELEVISION ADVERTISEMENTS	TOGETHER, THESE
			METHODS FORM THE BASIS OF APPROACH TO SECURING THE I	FUNDS AND THE
			CONSTITUENCY NECESSARY TO	D MEET OUR URGENT AND
<u> </u>		I	LONG TERM ANIMAL WELFARE G	JUALS

Schedule G (Form 990 or 990-EZ) 2011

(Form 990) Grants and Other Assistance to Organizations, Governments and Individuals in the United States 2 Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.	93039007134
Department of the Ireasury Internal Revenue Service ► Attach to Form 990 Contract Employer identification is 53-0225390 Part I General Information on Grants and Assistance 53-0225390 Part I General Information on Grants and Assistance 53-0225390 Part II General Information on Grants and Assistance 53-0225390 Part II General Information on Grants and Assistance 53-0225390 Part II General Information maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 53-0225390 Part II Grants and Other Assistance to Governments and Organizations in the United States Complete if the organization answered "Yes' Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Up Part IV and Schedule I-1 (Form 990) if additional space is needed (a) Name and address of organization or government (b) EIN (c) IRC Code 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 0	1545-0047 D11 to Public
THE HUMANE SOCIETY OF THE UNITED STATES 53-0225390 Part I General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yees" Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Up Part IV and Schedule I-1 (Form 990) if additional space is needed.	pection
Part I General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	number
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	
Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Up Part IV and Schedule I-1 (Form 990) if additional space is needed. (a) Name and address of organization or government (b) EIN (c) IRC Code 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 (e) Amount of non-cash assistance	r Yes r No
organization section grant cash valuation non-cash assistance o or government if applicable assistance (book, FMV, appraisal, other) other) other other	se
See Additional Data Table	h) Purpose of grant r assistance
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	262

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
	1			1	

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S		SCHEDULE I, PART I, LINE 2 THE HUMANE SOCIETY OF THE UNITED STATES ISSUES GRANTS TO ORGANIZATIONS THAT MEET OUR MISSION CRITERIA GRANTS ARE USUALLY GIVEN TO ORGANIZATIONS THAT EITHER WE HAVE (1)THOROUGHLY RESEARCHED, (2) HAVE AN EXISTING RELATIONSHIP WITH, (3) INTERACTED WITH IN CONJUNCTION WITH AN HSUS SPONSORED EVENT GRANT OVERSIGHT IS ACCOMPLISHED THROUGH A VARIETY OF METHODS SUCH AS GRANT REPORTS, MEETINGS WITH GRANTEES, AND SITE VISITS
		SCHEDULE I, PART II THE INSTRUCTIONS FOR SCHEDULE I REQUIRE GRANTS AND OTHER ASSISTANCE GIVEN TO RECIPIENTS OVER \$5,000 BE REPORTED IN DETAIL 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 GRANTS OF \$500 OR GREATER IN DETAIL ON SCHEDULE I OF THE HSUS'S FORM 990

Schedule I (Form 990) 2011

Software ID:

Software Version:

EIN: 53-0225390

Name: THE HUMANE SOCIETY OF THE UNITED STATES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ACTOR AND OTHERS FOR ANIMALS11523 BURBANK BLVD NORTH HOLLY WOOD, CA 91601	95- 2783139	501(C)(3)	2,000				SUPPORT SPAY & NEUTER
AFGHAN STRAY ANIMAL LEAGUE 3823 SOUTH 14TH STREET ARLINGTON, VA 22204	20- 2119782	501 (C)(3)	3,200				GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALABAMA ANIMAL ALLIANCE5316 ATLANTA HWY MONTGOMERY,AL 36109	-20 8251059	501 (C)(3)	906				SUPPORT SPAY & NEUTER
ALABAMA ANIMAL CONTROL ASSOCIATION1802 CENTRAL PARKWAY SW DECATUR, AL 35601	63- 1027613	501 (C)(3)	2,000				SUPPORT SPAY & NEUTER

(a) Name and address (**b**) EIN (c) IRC Code (d) Amount of (e) A mount of (f) Method of (g) Description (h) Purpose of of organization section cash grant non-cash valuation grant of or government ıfapplıcable assistance (book, FMV, non-cash or assistance appraisal, assistance other) ALL ABOUT ANIMALS RESCUE SUPPORT 20-INC23205 501 (C)(3) SPAY & 3006686 GRATIOT AVE 331 2,544 NEUTER EASTPOINTE, MI 48021 ALLEY CAT GUARDIANS1430 SUPPORT CARPENTER LN STE 03-501 (C)(3) SPAY & 0478130 В 1,300 NEUTER MODESTO,CA 95351

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	• •	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALLIANCE FOR CONTRACEPTION IN CATS & DOGS14245 NW BELLE COURT PORTLAND, OR 97229	41- 2185841	1 501 (C)(3)	40,000				SUPPORT FOR HUMANE CONTROL OF CATS & DOGS THROUGH CONTRACEPTION
ALMOST HOME FOUNDATIONPO BOX 308 ELK GROVE VILLAGE, IL 60009	-04 3805366	I 501 (C) (3)	671				SUPPORT SPAY & NEUTER

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALTERNATIVES CONGRESS TRUST 2100 L STREET NW WASHINGTON, DC 20037	-52 2294193	501 (C)(3)	56,657				SUPPORT 8TH WORLD CONGRESS- ALTERNATIVE
ANGEL ACRES HORSE HAVEN RESCUE INCPO BOX 62 GLENVILLE, PA 17329	13- 4271553	501(C)(3)	1,500				HELP CARE FOR 2 TENNESSEE WALKING HORSES TO BALTIMORE CNTY ANML CNTRL

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANIMAL ANGELS INC622 EAST COLLEGE ST LAKE CHARLES,LA 70602	-72 1461961	501 (C)(3)	2,000				SUPPORT SPAY & NEUTER
ANIMAL BALANCE 1920 BLAKE STREET BERKELEY,CA 94704	-68 0630714	I 501 (C) (3)	3,000				SUPPORT SPAY & NEUTER

F (c) IRC Code (d) Amount of (e) Amount of (f) Method of (g) Description (h) Purpose of grant section of or assistance (a) Name and **(b)** EIN address of

Form 990,Schedule I, Part II, Grants and Other Assistance to Governm	nents and Organizations in the United States
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organization or government		if applicable	cash grant	assistance	(book, FMV, appraisal, other)	non-cash assistance	
ANIMAL CARE AND CONTROL OF NEW YORK CITY11 PARK PLACE STE 805 NEW YORK, NY 10007	13- 3788986	501 (C)(3)	5,000				SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES
ANIMAL COALTION OF TAMPA INC1719 W LEMON STREET TAMPA,FL 33606	59- 3713414	501 (C)(3)	2,000				SUPPORT SPAY & NEUTER

(a) Name and (**b**) EIN (c) IRC Code (d) A mount of (e) A mount of (f) Method of (g) Description (h) Purpose of cash grant address of section non-cash valuation grant of organization ıfapplıcable assistance (book, FMV, non-cash or assistance or government appraisal, assistance other) ANIMAL DEFENSE LEAGUE OF SUPPORT ARIZONA INCP O 74-501 (C) (3) SPAY & 2493030 BOX 3393 3,036 NEUTER PHOENIX, AR 85067 ANIMAL FRIENDS RESCUE PROJECT SUPPORT 77-PO BOX 51083 501 (C) (3) SPAY & 0491141 1,650 PACIFIC GROVE, NEUTER CA 93950

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANIMAL HEALTH CENTERTAILS OF LOVE FOUNDATION 190624 HWY 26 SCOTTSBLUFF, NE 69361	32- 0089048	501(C)(3)	4,077				SUPPORT SPAY & NEUTER
ANIMAL KIND INC 5311 MISSION WOODS RD MISSION WOODS, KS 66205	-74 3105423	501 (C)(3)	5,000				SUPPORT SPAY & NEUTER

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANIMAL LOVERS LEAGUE40 SHORE ROAD GLEN COVE,NY 11542	11- 3259425	501 (C)(3)	665				SUPPORT SPAY & NEUTER
ANIMAL PROTECTION LEAGUE OF NJPO BOX 174 ENGLISHTOWN, NJ 07726	22- 2849700	501(C)(3)	1,093				SUPPORT SPAY & NEUTER

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANIMAL PROTECTION SOCIETY OF CASWELL COUNTY PO BOX 193 YANCEYVILLE, NC 27379	-56 1925043	501 (C)(3)	2,500				SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES
ANIMAL PROTECTION SOCIETY OF DURHAM INC2117 EAST CLUB BLVD DURHAM,NC 27704	56- 1047100	501 (C)(3)	5,000				SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES

(a) Name and address (**b**) EIN (c) IRC Code (d) Amount of (e) Amount of (f) Method of (g) Description (h) Purpose of grant of organization section cash grant non-cash valuation or assistance of or government ıfapplıcable assistance (book, FMV, non-cash appraisal, assistance other) ANIMAL RESCUE FUND OF THE SUPPORT SPAY & HAMPTONSPO 23-NEUTER, VET 501 (C) (3) BOX 901 90 7400663 CARE, PET 7,567 DANIELS HOLE RD ADOPTIONS WAINSCOTT, NY 11975 ANIMAL RESCUE SUPPORT SPAY & LEAGUE OF IOWA NEUTER, DISNEY-5452 NE 22ND 42-SHELTER AID TO 501 (C) (3) STREET 0680427 5,929 REDUCE PET DES MOINES, IA HOMELESSNESS 503132528 AND SAVE LIVES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANIMAL RESCUE LEAGUE WESTERN PA662 HAMILTON AVENUE PITTSBURGH, PA 15206	25- 0325750	501 (C)(3)	3,567				SUPPORT SPAY & NEUTER
ANIMAL WELFARE LEAGUE10305 SOUTHWEST HWAY CHICAGO,IL 60415	36- 2235155	501 (C)(3)	1,500				REPLACE STOLEN AIR CONDITIONING UNITS IN SHELTER

(a) Name and address of (**b**) EIN (c) IRC Code (d) Amount of (e) Amount of (f) Method of (g) Description (h) Purpose of non-cash organization section cash grant valuation of grant or government ıfapplıcable assistance (book, FMV, non-cash or assistance appraısal, assistance other) ANIMAL WELFARE LEAGUE OF SUPPORT ARLINGTON2650 S 54-501 (C) (3) ARLINGTON MILL SPAY & 0603502 1,707 DRIVE NEUTER ARLINGTON, VA 22206 ANIMAL WELFARE LEAGUE OF MONTGOMERY SUPPORT 20-COUNTYPO BOX 501 (C) (3) SPAY & 3382175 4,234 7040 NEUTER GAITHERSBURG, MD 208987041

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANIMALS DESERVING OF PROPER TREATMENT 42 INDUSTRIAL DRIVE NAPERVILLE, IL 60563	-36 3683984	501 (C)(3)	1,266				SUPPORT SPAY & NEUTER
ARIZONA EQUINE RESCUE ORGANIZATION INC HAY FOR HORSES FUND - ACTHA CHARITY 34522 N SCOTTSDALE ROAD SCOTTSDALE, AR 85266	86- 1029061	501 (C)(3)	500				TO SUPPORT A SPECIALIZED TECHNICAL RESCUE TEACHING CLASS

(a) Name and address (**b**) EIN (c) IRC Code (d) A mount of (e) A mount of (f) Method of (g) Description (h) Purpose of of organization section cash grant non-cash valuation grant of or government ıfapplıcable assistance (book, FMV, non-cash or assistance appraısal, assistance other) ASHEVILLE HUMANE SOCIETY SUPPORT INC55 SHILOH 56-501 (C)(3) SPAY & 1444098 ROAD 516 NEUTER ASHVILLE, NC 28803 BEND SPAY AND NEUTER PROJECT SUPPORT 71-501 (C)(3) 61344 PARRELL SPAY & 0977598 513 ROAD NEUTER BEND, OR 97702

(a) Name and address of organızatıon or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BEST FRIENDS ANIMAL SOCIETY DBANO MORE HOMELESS PETS IN UTAH500 ANGEL CANYON RD KANAB,UT 84741	23- 7147797	501(C)(3)	1,029				SUPPORT SPAY & NEUTER
BIDEAWEE INC 410 EAST 38 STREET NEW YORK, NY 10016	13- 1655210	501 (C)(3)	7,251				SUPPORT SPAY & NEUTER, VET CARE, PET ADOPTIONS

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIG CAT RESCUE CORP12802 EASY STREET TAMPA,FL 12802	- 59 3330495	501 (C)(3)	1,000				SUPPORT GENERAL OPERATIONS
BILLERICA CAT CARE COALITION P O BOX 141 NORTH BILLERICA, MA 01862	01- 0824277	501 (C)(3)	793				SUPPORT SPAY & NEUTER

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	• •	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BLOOMINGTON PETS ALIVE INC 6522 S EMPIRE RD BLOOMINGTON, IN 47401	-36 4516780	501 (C)(3)	2,226				SUPPORT SPAY & NEUTER
BLUE MOUNTAIN HUMANE SOCIETY7 E GEORGE STREET WALLA WALLA, WA 99362	91- 0828499	501 (C)(3)	2,500				SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BLUEGRASS BOXER RESCUEPO BOX 21134 OWENSBORO,KY 423041134	-59 3774289	501 (C)(3)	853				SUPPORT SPAY & NEUTER
BORN FREE USA UNITED WITH ANIMAL PROTECTION INSTITUTE1122 S ST SACRAMENTO,CA 958116525	94- 6187633	501 (C)(3)	2,500				SUPPORT SPAY & NEUTER

(a) Name and address of organızatıon or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRAZOS FERAL CAT ALLIESPO BOX 10738 COLLEGE STATION,TX 77842	74- 2971863	501 (C)(3)	929				SUPPORT SPAY & NEUTER
BROOKINGS REGIONAL HUMANE SOCIETY INC1027 MAIN AVENUE SOUTH BROOKINGS, SD 57006	46- 0452504	501 (C)(3)	2,500				SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BROWN COUNTY HUMANE SOCIETY INCPO BOX 746 NASHVILLE, IN 474489376	23- 7276105	501 (C)(3)	8,371				SUPPORT SPAY & NEUTER, SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES, DOG TRAINING AND ADOPTION PROGRAM
CALTIP INC27111 E EL MACERO DRIVE EL MACERO,CA 956181006	-68 0280726	501 (C)(3)	5,000				FOOD AND VET CARE FOR FIVE RESCUED SHELTER DOGS

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAMDEN COUNTY ANIMAL SHELTERP O BOX 475 BLACKWOOD,NJ 08012	20- 0549531	501 (C)(3)	543				SUPPORT SPAY & NEUTER
CANYON COUNTY ANIMAL SHELTER PO BOX 1447 CALDWELL,ID 83607	20- 8179233	I 501 (C) (3)	1,500				SUPPORT REPLACEMENT OF BROKEN EQUIPMENT

(a) Name and address of (**b**) EIN (c) IRC Code (d) Amount of (e) Amount of (f) Method of (g) Description (h) Purpose of organization cash grant non-cash valuation grant section of or government ıfapplıcable assistance (book, FMV, non-cash or assistance appraisal, assistance other) CARING ABOUT THE STRAYS (CATS) INC8 SUPPORT KINDERKAMACK 22-501 (C) (3) SPAY & 3392588 ROAD 836 NEUTER WESTWOOD, NJ 07675 SUPPORT TO CASA DEL TORO HELP PREVENT BULLY BREED DOG EDUCATION & 42-FIGHTING, RESCUE4765 N 501 (C) (3) 1708651 HELP REDUCE 11,500 COUNTY ROAD 500 E STRESS OF PITTSBORO, IN BEING 46167 KENNELED
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	• •	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAT WELFARE ASSOCIATION INC 741 WETMORE ROAD COLUMBUS,OH 43214	31- 6049232	501 (C)(3)	821				SUPPORT SPAY & NEUTER
CEDAR VALLEY HUMANE SOCIETY 7411 MT VERNON RD SE CEDAR RAPIDS, IA 52403	42- 0814023	501 (C)(3)	2,500				SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTRAL AROOSTOOK HUMANE SOCIETY 26 CROSS STREET PRESQUE ISLE,ME 04769	23- 7333853	501 (C)(3)	5,000				SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES
CENTRAL NEBRASKA HUMANE SOCIETY 1312 SKY PARK RD GRAND ISLAND, NE 68801		501 (C)(3)	2,500				SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTRAL NEWYORK CAT COALITIONPO BOX 6182 SYRACUSE,NY 13217	-06 1688749	501 (C)(3)	999				SUPPORT SPAY & NEUTER
CENTRAL PENNSYLVANIA ANIMAL ALLIANCE 182 SILVER PINE CIRCLE MECHANICSBURG,PA 17050	- 20 0459806	501 (C)(3)	836				SUPPORT SPAY & NEUTER

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable		(e) Amount of non-cash assistance	 Description of	(h) Purpose of grant or assistance
CHARLOTTESVILLEALBEMARLE SPCA3355 BERKMAR DR CHARLOTTESVILLE,VA 22901	-54 0595009	501(C)(3)	5,581			SUPPORT SPAY & NEUTER
CHIMP HAVEN INC13HSI CHIMPANZEE PLACE KEITHVILLE,LA 71129	-74 2766663	501 (C)(3)	72,480			SUPPORT CARE AND RESCUE OF CHIMPANZEES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHIMPANZEE SANCTUARY NORTHWESTPO BOX 952 CLE ELUM, WA 98922	68- 0552915	501 (C)(3)	16,000				TO HELP BUILD OUTDOOR ENCLOSURE - CHIMPS
CINCINNATI SPCA 3949 COLERAIN AVE CINCINNATI,OH 45223	-31 0543284	501 (C)(3)	5,000				SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES

(a) Name and address of organızatıon or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITIZENS FOR ANIMAL PROTECTION OF WARREN CTYPO BOX 334 MACON,NC 27551	-56 2048523	501 (C)(3)	601				SUPPORT SPAY & NEUTER
CITIZENS IN CHARGE FOUNDATION2050 OLD BRIDGE RD STE 103 LAKE BRIDGE, VA 22192	13- 4070270	501 (C)(3)	4,000				SUPPORT 100TH ANNIVERSARY CELEBRATION OF CALIFORNIA'S INITIATIVE AND REFERENDUM

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITY OF CORINTHPO BOX 669 CORINTH, MS 38835	-64 6000295	CITY OF CORINTH					TO SUPPORT PUCHASE OF CAGES FOR ANIMALS
CITY OF PLANO PO BOX 860358 PLANO,TX 75086	75- 6000640	CITY OF PLANO					SUPPORT SPAY & NEUTER

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COALITION TO UNCHAIN DOGS INCPO BOX 3259 DURHAM,NC 27715	-26 2584285	501 (C)(3)	912				SUPPORT SPAY & NEUTER
COMMUNITY ANIMAL RESCUE EFFORT OF SOUTH BEND INCPO BOX 1481 SOUTH BEND, IN 46624	26- 2636028	501 (C)(3)	1,010				SUPPORT SPAY & NEUTER

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMPANION ANIMAL ADVOCATES INC55 HARRISTOWN ROAD GLEN ROCK, NJ 07452	26- 1922162	501(C)(3)	996				SUPPORT SPAY & NEUTER
CONCERNED CITIZENS FOR ANIMAL WELFARE OF VOLUSIA CO INC216 YORK TOWN DR DAYTONA BEACH, FL 32119	06- 1650925	501(C)(3)	716				SUPPORT SPAY & NEUTER

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONCERNED CITIZENS FOR ANIMAL WELFARE INC755 MARIE AVE PENZACOLA,FL 32504	59- 3033317	501 (C)(3)	531				SUPPORT SPAY & NEUTER
CONNECTICUT HUMANE SOCIETY 701B RUSSELL RD NEWINGTON, CT 06111	06- 0667605	501 (C)(3)	2,471				SUPPORT SPAY & NEUTER

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COUNTY OF RANDOLPH725 MCDOWELL RD ASHEBORO,NC 27205	56- 6001526	CNTY OF RANDOLPH					HUMANE EUTHANASIA FUND / TO OPEN MORE SPACE AND DO SOME REPAIRS
DAKIN PIONEER VALLEY SOCIETY 171 UNION STREET SPRINGFIELD, MA 01101	- 20 5318898	501 (C)(3)	5,000				TO HELP CENTER RECOVER FROM TORNADO

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section If applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DANE COUNTY FRIENDS OF FERALS627 POST RD MADISON, WI 53713	51- 0534813	501 (C)(3)	3,029				SUPPORT SPAY & NEUTER
DELAWARE COUNTY SPCA555 SANDY BANK ROAD MEDIA,PA 19063	23- 1440112	501 (C)(3)	2,000				SUPPORT SPAY & NEUTER

(a) Name and address of organızatıon or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	 (f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DELAWARE SPCA455 STANTON CHRISTIANA RD NEWARK,DE 19713	-51 0064307	501 (C)(3)	2,000			SUPPORT SPAY & NEUTER
DEMING ANIMAL GUARDIANSTOMAHAWK LIVE TRAP COMPPO BOX 1275 DEMING,MI 88031	01- 0776195	1 501 (C)(3)	564			SUPPORT FOR 8 FERAL CAT TRAPS

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DENKAI ANIMAL SANCTUARY 36710 WCR 126 GROVER,CO 80729	73- 1706969	501 (C)(3)	1,500				HORSE RESCUE IMPROVEMENTS
DENVER DUMB FRIENDS LEAGUE 2080 S QUEBEC STREET HUMANE SOCIETY OF DENVER INC DENVER, CO 802313298	84- 0405254	501 (C)(3)	2,000				CARE/RESCUE LOST & ABANDONED ANIMALS/IRENE C EVANS CHARITABLE TRUST

(a) Name and address (**b**) EIN (c) IRC Code (d) Amount (e) Amount of (f) Method of (g) (h) Purpose of grant of organization Description of section ofcash non-cash valuation or assistance or government If applicable grant assistance (book, FMV, non-cash appraisal, assistance other) DIAN FOSSEY GORILLA FUND SUPPORT GRACE INTERNATIONAL 52-501 (C) (3) FOUNDATION/GORILLA INC800 CHEROKEE 1118866 5,000 AVE SE SHELTERING ATLANTA,GA 30315 DOG & CAT SHELTER INC84 E 83-SUPPORT SPAY & 501 (C) (3) RIDGE RD 0211418 2,000 NEUTER SHERIDAN, WY 82801

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EAST BAY SPCA 8323 BALDWIN ST OAKLAND,CA 94621	94- 1322202	501 (C)(3)	1,927				SUPPORT SPAY & NEUTER
ENCORE PETS INC 3513 MEADOW DRIVE MOREHEAD CITY, NC 28557	-26 1577374	501 (C)(3)	2,212				SUPPORT SPAY & NEUTER

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EQUINE OUTREACH INC 63220 SILVIS RD BEND,OR 97701	51- 0484049	501 (C)(3)	500				TRANSPORT TWO RESCUED HORSES TO S OREGON
ESPANOLA VALLEY HUMANE SOCIETYP O BOX 29 SANTA CRUZ, NM 87567	85- 0406234	501 (C)(3)	793				SUPPORT SPAY & NEUTER

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(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FARM SANCTUARY INCPO BOX 150 WATKINS GLEN, NY 14891	51- 0292919	501 (C)(3)	8,900				SUPPORT 25TH GALA ANNV /COMBAT THE ABUSES OF FACTORY FARMING, CATTLE RELOCATION
FERAL CAT COALITION- SAN DIEGO9528 MIRAMAR RD PMB 160 SAN DIEGO, CA 92126	- 33 0590141	501 (C)(3)	1,008				SUPPORT SPAY & NEUTER

(a) Name and (**b**) EIN (c) IRC Code (d) Amount of (e) A mount of (f) Method of (g) Description (h) Purpose of grant address of cash grant non-cash valuation or assistance section of organization ıfapplıcable assistance (book, FMV, non-cash or government appraisal, assistance other) SUPPORT SPAY & FINGER LAKES NEUTER, SHELTER SPCA INC7315 AID TO REDUCE 16-501 (C) (3) 0772023 STATE ROUTE 54 1,781 ΡΕΤ BATH,NY 14810 HOMELESSNESS AND SAVE LIVES FOOTHILLS ANIMAL SHELTER 84-SUPPORT SPAY & 580 MCINTYRE ST 501 (C)(3) 1287053 NEUTER 726 GOLDEN,CO

80401

(a) Name and address (**b**) EIN (c) IRC Code (d) Amount of (e) A mount of (f) Method of (g) Description (h) Purpose of cash grant valuation of organization section non-cash grant of or government ıfapplıcable assistance (book, FMV, non-cash or assistance appraısal, assistance other) FORT COLLINS CAT RESCUE2321 E SUPPORT 20-MULBERRY ST 1 501 (C)(3) SPAY & 4969731 989 FORT COLLINS, CO NEUTER 80524 FOUNDATION FOR PROTECTION OF ANIMALSSPAY SUPPORT 20-COLORADO PO BOX 501 (C)(3) SPAY & 5244649 2,000 3334 NEUTER DURANGO,CO 81301

(a) Name and address (**b**) EIN (c) IRC Code (d) A mount of (e) A mount of (f) Method of (g) Description (h) Purpose of cash grant of organization section non-cash valuation grant of or government ıfapplıcable assistance (book, FMV, non-cash or assistance appraisal, assistance other) FRIENDS FOR THE DEARBORN SUPPORT ANIMAL SHELTER 38-501 (C) (3) SPAY & 2661 GREENFIELD 3171570 582 NEUTER DEARBORN, MI 48120 FRIENDS OF CULLMAN ANIMAL SUPPORT SHELTERPO BOX 37-501 (C) (3) SPAY & 1551779 463 612 NEUTER CULLMAN,AL 35056

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRIENDS OF THE JEFFERSON ANIMAL SHELTER PO BOX 1079 METAIRIE, LA 700041079	72- 1500381	501 (C)(3)	740				SUPPORT SPAY & NEUTER
FRIENDS OF THE POCATELLO ANIMAL SHELTER PO BOX 281 3100 AVENUE OF THE CHIEFS POCATELLO, ID 83204	82- 0491932	501 (C)(3)	2,500				SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES

(a) Name and address (**b**) EIN (c) IRC Code (d) Amount of (e) Amount of (f) Method of (g) Description (h) Purpose of of organization section cash grant non-cash valuation grant of or government ıfapplıcable assistance (book, FMV, non-cash or assistance appraısal, assistance other) GLOBAL FEDERATION OF MONTANA ANIMAL 26-LARGE ANIMAL SANCTUARIESPO 501(C)(3) 1676217 SANCTUARY & 3,000 BOX 32294 RESCUE WASHINGTON, DC 597190248 GREEN MOUNTAIN ANIMAL DEFENDERSPO BOX 03-SUPPORT SPAY 501 (C)(3) 4577 0283740 & NEUTER 907 BURLINGTON, VT 05406

(e) A mount of (a) Name and (**b**) EIN (c) IRC Code (d) Amount of (f) Method of (g) Description (h) Purpose of grant section cash grant address of non-cash valuation or assistance of organization If applicable assistance (book, FMV, non-cash or government appraısal, assistance other) GREENHILL HUMANE SHELTER AID TO SOCIETY88530 93-REDUCE PET 501 (C) (3) 0467412 HOMELESSNESS GREEN HILL RD 1,500 EUGENE, OR AND SAVE LIVES 97402 HAPPY DOGS RESCUEPO BOX 20-FOOD COST FOR 501 (C) (3) 161 1235675 DOG RESCUE 1,502 OSBORN, MO 64474

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HELLO BULLYAMERICAN PIT BULL TERRIER ADVOCACY4885A MCKINGHT RD 197 PITTSBURG, PA 15237	-26 0447525	501 (C)(3)	500				HELP REPAIR BULLY BREEDS REPUTATION THROUGH EDUCATION
HELP FOR ANIMALS INCPO BOX 250 BARBOURSVILLE, WV 25504	31- 1000816	501 (C)(3)	3,500				SUPPORT SPAY & NEUTER

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HELP SPAY NEUTER CLINIC300 N OSAGE STREET INDEPENDENCE, MO 64050	- 27 1864552	501 (C)(3)	897				SUPPORT SPAY & NEUTER
HELPING PREVENT HOMELESS PETS INC 7198 SHELL ROAD WINSTON, GA 30187	86- 1157606	501 (C)(3)	516				SUPPORT SPAY & NEUTER

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section If applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HINSDALE HUMANE SOCIETY22 N ELM ST HINSDALE,IL 60521	36- 2441177	501(C)(3)	1,394				SUPPORT SPAY & NEUTER
HOLLY HELP SPAY- NEUTER FUND UNITED HUMANITARIANS A CORPP O BOX 1264 BRISTOL,VA 24203	86- 0264917	501 (C)(3)	3,271				SUPPORT SPAY & NEUTER

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	• •	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HORSE HAVEN MONTANAPO BOX 599 FRENCHTOWN, MT 59834	-26 0672842	501 (C)(3)	2 ,0 0 0				SUPPORT HORSE RESCUE IMPROVEMENT
HOUSTON HUMANE SOCIETY14700 ALMEDA ROAD HOUSTON,TX 77053	74- 1340341	501 (C)(3)	9,500				SUPPORT VET CARE & TREATMENT, SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HUI PONO HOLOHOLONAPO BOX 943 MT VIEW,HI 96771	20- 8567302	501 (C)(3)	1,341				SUPPORT SPAY & NEUTER
HUMANE ANIMAL WELFARE SOCIETY OF WAUKESHA COUNTY INC701 NORTHVIEW RD WAUKESHA, WI 53188	-39 6108644	501 (C)(3)	562				SUPPORT SPAY & NEUTER

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HUMANE EDUCATION ADVOCATES REACHING TEACHERSPO BOX 738 MAMARONECK,NY 10543	41- 2055310	501 (C)(3)	7,500				SUPPORT HUMANE EDUCATION TRAINING- HUMANE EDUCATION ADVOCATES REACHING TEACHERS
HUMANE SOCIETY BOULDER VALLEY 2323 55TH STREET BOULDER,CO 80301	84- 0152768	501 (C)(3)	1,567				SUPPORT SPAY & NEUTER

(a) Name and address of organızatıon or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	Description of	(h) Purpose of grant or assistance
HUMANE SOCIETY BROWARD COUNTY INC2070 GRIFFIN ROAD FORT LAUDERDALE, FL 333125997	59- 6002321	501 (C)(3)	5,000				SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES
HUMANE SOCIETY CALUMET AREA INC421 45TH AVE MUNSTER, IN 46321	35- 0895837	501 (C)(3)	1,276				TO HELP COVER THE COST OF MICRO- CHIPPING/VACCINATING OF ANIMALS OF LOW- INCOME FOLKS, SPAY & NEUTER

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HUMANE SOCIETY FOR TACOMA AND PIERCE COUNTY 2608 CENTER STREET TACOMA, WA 98409	91- 0577128	I 501 (C) (3)	10,000		other)		SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES
HUMANE SOCIETY OF ANGELINA COUNTYPO BOX 472 LUFKIN,TX 75902	75- 6038557	501 (C)(3)	661				SUPPORT SPAY & NEUTER

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount 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
HUMANE SOCIETY OF CENTRAL OREGON61170 SE 27TH STREET BEND,OR 97702	-93 0616957	501 (C)(3)	2,500				SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES
HUMANE SOCIETY OF CHARLOTTE INC2700 TOOMEY AVE CHARLOTTE, NC 28203	-58 1342479	501 (C)(3)	4,096				SUPPORT SPAY & NEUTER

(a) Name and address (**b**) EIN (c) IRC Code (d) Amount of (e) A mount of (f) Method of (g) Description (h) Purpose of cash grant of organization section non-cash valuation of grant or government ıfapplıcable assistance (book, FMV, non-cash or assistance appraısal, assistance other) HUMANE SOCIETY OF DAVIE COUNTY SUPPORT 56-P O BOX 153 501 (C)(3) SPAY & 1759771 597 MOCKSVILLE, NC NEUTER 27028 HUMANE SOCIETY OF GREATER SUPPORT DAYTON1661 31-501 (C)(3) SPAY & NICHOLAS RD 0537073 745 NEUTER DAYTON, OH 45417

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HUMANE SOCIETY OF GREATER MIAMI16101 W DIXIE HIGHWAY N MIAMI, FL 33160	59- 0711176	501 (C)(3)	1,884				SUPPORT SPAY & NEUTER
HUMANE SOCIETY OF MISSOURI 1201 MACKLIND AVENUE ST LOUIS,MO 63110	43- 0652638	501 (C)(3)	8,500				SUPPORT SPAY & NEUTER

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HUMANE SOCIETY OF MORGAN COUNTYPO BOX 705 BERKELEY SPRINGS, WV 25411	-55 0594927	501 (C)(3)	2,500				SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES
HUMANE SOCIETY OF NORTH TEXAS 1840 EAST LANCASTER FORT WORTH,TX 76103	75- 1245911	501 (C)(3)	2,500				SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES
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(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HUMANE SOCIETY OF NW INDIANA6100 MELTON ROAD GARY,IN 46403	35- 1139637	501 (C)(3)	1,000				MEDICAL COST HELP FOR ANIMAL WHOSE OWNERS ARE AFFECTED BY THE ECONOMY
HUMANE SOCIETY OF PARK COUNTY - PARK COUNTY ANIMAL SHELTER 5537 GREYBULL HWY CODY,WY 82414		501 (C)(3)	1,000				SHELTERS IN CRISIS GRANT/GENERAL EXPENSES

(a) Name and address (**b**) EIN (c) IRC Code (d) A mount of (e) A mount of (f) Method of (g) Description (h) Purpose of cash grant of organization section non-cash valuation grant of or government If applicable assistance (book, FMV, non-cash or assistance appraısal, assistance other) HUMANE SOCIETY OFPUTNAM SUPPORT COUNTY INCPO 58-501 (C)(3) SPAY & 1387894 BOX 995 4,698 NEUTER COOKEVILLE, TN 38503 HUMANE SOCIETY SHELTER IN OF SOUTH CRISIS MISSISSIPPI2615 64-501 (C)(3) FUND/FIRE 6034439 25TH AVE SUITE B 1,500 DAMAGES GULPORT, MS REPAIRS 39501

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HUMANE SOCIETY OF SOUTHERN ARIZONA3450 N KELVIN BLVD TUCSON, AZ 85716	86- 0112798	501 (C)(3)	3,871				SUPPORT SPAY & NEUTER
HUMANE SOCIETY OF ST THOMAS 7041 ESTATE NADIR 26 ST THOMAS, VI 00802	67- 0254280	501 (C)(3)	6,843				SUPPORT SPAY & NEUTER

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HUMANE SOCIETY OF THE BLACK HILLS 1820 E SAINT PATRICK ST RAPID CITY, SD 57703	46- 0396967	501 (C)(3)	614				SUPPORT SPAY & NEUTER
HUMANE SOCIETY OF YUMA INC285 N FIGUEROA AVE YUMA,AZ 85364	86- 6053617	501 (C)(3)	2,500				SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	 (f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IDAHO HUMANE SOCIETY INC4775 W DORMAN ST BOISE,ID 83705	82- 0212536	501 (C)(3)	5,000			SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES
INDY FERAL INCPO BOX 30054 INDIANAPOLIS,IN 46230	37- 1459375	501 (C)(3)	1,500			SUPPORT SPAY & NEUTER, FERAL CAT ADVOCACY PROGRAM

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INTERNATIONAL SOCIETY FOR ANTHROZOOLOGY (ISAZ)38 COLLEGE PARK DAVIS,CA 95616	30- 0275851	501 (C)(3)	4 ,6 2 4			SUPPORT STUDIES OF THE INTERACTIONS OF PEOPLE AND ANIMALS- ANTHROZOOLOGY
INTERNATIONAL SPAYNEUTER NETWORK15127 PERDIDO DR ORLANDO,FL 328285219	20- 2892114	501 (C)(3)	3 ,0 0 0			SUPPORT SPAY & NEUTER

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IOWA FEDERATION OF HUMANE SOCIETIES5452 NE 22ND STREET DES MOINES,IA 50313	42- 1178225	501 (C)(3)	500				SUPPORT ANIMAL WELFARE CONFERENCE
IO WA HUMANE ALLIANCE308 E BURLINGTON STREET IO WA CITY,IA 52240	26- 1992986	501 (C)(3)	2,231				SUPPORT SPAY & NEUTER

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CATVANDO NFP CORPPO BOX 851 MAYWOOD,IL 60153	-26 1999297	501 (C)(3)	1,216				SUPPLIES & EQUIPMENT
JOHN'S HOPKINS UNIVERSITY- CENTER FOR ALTERNATIVES TO ANIMAL TESTINGS 615 N WOLFE ST W7032 BALTIMORE, MD 21205	52- 0595110	501 (C)(3)	10,000				TO ASSIST IN THE COST OF THE 8TH ANNUAL WORLD CONGRESS ON ALTERNATIVES AND ANIMAL USE IN LIFE SCIENCES

(a) Name and (**b**) EIN (c) IRC Code (d) A mount (e) Amount of (f) Method of (g) Description (h) Purpose of grant of cash grant address of section non-cash valuation or assistance of organization ıfapplıcable assistance (book, FMV, non-cash or government appraisal, assistance other) JOHNSTON COUNTY ANIMAL TO CONSTRUCT SERVICES115 56-VET 501 (C) (3) 6000311 SHELTER WAY CARE/EUTHANASIA 3,000 SMITHFIELD, NC SUITE 27542 KENT COUNTY SPCA32 SHELTER 51-SUPPORT SPAY & CIRCLE 501 (C) (3) 6018851 NEUTER 891 CAMDEN, DE 19934

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KITSAP HUMANE SOCIETY9167 DICKEY RD NW SILVERDALE, WA 98383	- 91 0728353	501 (C)(3)	5,000				SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES
LEE COUNTY HUMANE SOCIETY 1140 WARE DRIVE AUBURN,AL 36832	-63 0713052	501(C)(3)	2,500				SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LEWIS & CLARK HUMANE SOCIETY 2112 E CUSTER AVE PO BOX 445 HELENA,MT 59604	81- 6014910	501 (C)(3)	2 ,0 0 0				SUPPORT SPAY & NEUTER
LEWIS CLARK ANIMAL SHELTER INC6 SHELTER RD LEWINGSTON, ID 83501	82- 0207503	501(C)(3)	1,719				SUPPORT SPAY & NEUTER

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section If applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOCKWOOD ANIMAL RESCUE PO BOX 1510 FRAZIER PARK, CA 93225	-26 0040658	501 (C)(3)	5,000				WOLF CARE & MEDICAL SUPPLIES
LOLLYPOP FARM99 VICTOR ROAD FAIRPORT, NY 14450	16- 0743047	501 (C)(3)	965				SUPPORT SPAY & NEUTER

(a) Name and (**b**) EIN (c) IRC Code (d) A mount of (e) A mount of (f) Method of (g) Description (h) Purpose of address of section cash grant non-cash valuation grant of organization ıfapplıcable assistance (book, FMV, non-cash or assistance or government appraisal, assistance other) LOST AND FOUND DOG RESCUE ADOPTION 55-SUPPORT SPAY 501 (C) (3) CENTER INC70 0874385 & NEUTER 36,117 IVY LANE NEW CASTLE, DE 19720 LOVE-A-BULL TO SUPPORT 5401 CARBINE NATIONALPIT 30-CIRCLE 501 (C) (3) BULL 0501857 500 AUSTIN, TX AWARENESS 78738 CAMPAIGN

(a) Name and address of organızatıon or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOWELL HUMANE SOCIETY951 BROADWAY ST LOWELL, MA 01854	04- 2104400	501 (C)(3)	572				SUPPORT SPAY & NEUTER
LYCOMING COUNTY SPCA2805 REACH ROAD WILLIAMSPORT, PA 17701	-24 0857714	501 (C)(3)	726				SUPPORT SPAY & NEUTER

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MARSHALL LEGACY INSTITUTE2425 WILSON BOULEVARD ARLINGTON,VA 22201	54- 1853093	501 (C)(3)	5,000				SUPPORT MINE DETECTION DOG PARTNERSHIP PROGRAM, THE CHILDREN AGAINST MINES PROGRAM, AND THE SURVIVORS ASSISTANCE PROGRAM
MARTIN COUNTY HUMANE SOCIETY PO BOX 123 FAIRMONT, MN 56031	41- 1678502	501 (C)(3)	823				SUPPORT SPAY & NEUTER

(a) Name and address of (**b**) EIN (c) IRC Code (d) A mount of (e) A mount of (f) Method of (g) Description (h) Purpose of organızatıon section cash grant non-cash valuation of grant or government ıfapplıcable assistance (book, FMV, non-cash or assistance appraısal, assistance other) MARYLAND SPCA SUPPORT 3300 FALLS ROAD 52-501 (C) (3) SPAY & 6001558 BALTIMORE, MD 2,500 NEUTER 21211 MASSACHUSETTS SPCA-NEVINS FARM SUPPORT 35-501 (C) (3) SPAY & 350 SOUTH 2336082 1,985 HUNTINGTON AVE NEUTER BOSTON, MA 11217

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	• •	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MCKAMEY ANIMAL CARE & ADOPTION CENTER4500 N ACCESS RD CHATTANOOGA,TN 37415	01- 0824858	1 501703733	1,500				BREEDER/HOARDER COST
MENOMINEE ANIMAL SHELTER INC361 N184 HAGGERSON COURT MENOMINEE, MI 49858	38- 3295492	501 (C)(3)	521				SUPPORT SPAY & NEUTER

(a) Name and address of organızatıon or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MERRIMACK RIVER FELINE RESCUE SOCIETY 63 ELM ST RTE 110 SALISBURY, MA 01952	-04 3172322	501 (C)(3)	2,671				SUPPORT SPAY & NEUTER
MICHIGAN HUMANE SOCIETY 30300 TELEGRAPH ROAD SUITE 220 BINGHAM FARMS, MI 48025	38- 1358206	I 5017CY73Y	7,500				SUPPORT THE ANIMAL WELFARE CONFERENCE, SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MIDLAND COUNTY HUMANE SOCIETY PO BOX 1034 MIDLAND,MI 486411034	- 38 6114132	501 (C)(3)	5,000				SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES
MINNESOTA HOOVED ANIMAL RESCUE FOUNDATIONPO BOX 47 ZIMMERMAN, MN 55398	31- 1708503	501 (C)(3)	2,500				SUPPORT OPERATIONAL EXPENSES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MINNESOTA SPAY NEUTER ASSITANT PROGM10000 HIGHWAY 55 STE,MN 55441	90- 0397515	I 501 (C) (3)	2,000				SUPPORT SPAY & NEUTER
MINN-KOTA PAAWS21251ST AVES FARGO,ND 58103	-30 0245020	I 501 (C) (3)	4,334				SUPPORT SPAY & NEUTER

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MISSISSIPPI ANIMAL RESCUE 5221 GREENWAY DRIVE EXTENSION JACKSON, MS 39204	23- 7100847	501 (C)(3)	2,500				SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES
MISSISSIPPI SPAY AND NEUTER2104 OLD BRANDON ROAD PEARL,MS 39208	-20 2938077	501 (C)(3)	2,316				SUPPORT SPAY & NEUTER

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount 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
MISSOURIANS FOR THE PROTECTION OF DOGS7584 OLIVE SUITE 205 ST LOUIS,MO 63130	27- 1423987	501 (C)(4)	85,838				SUPPORT BALLOT MEASURE TO ESTABLISH COMMON-SENSE STANDARDS FOR THE CARE OF DOGS AT LARGE- SCALE COMMERCIAL BREEDING OPERATIONS
MONMOUTH COUNTY SPCA260 WALL STREET EATONTOWN, NJ 07724	21- 0679893	501 (C)(3)	5,000				SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	 (f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MOUNTAINEER SPAY NEUTER ASSISTANCE PROGRAM INCPO BOX 4335 MORGANTOWN, WV 26504	26- 2121272	501 (C)(3)	806			SUPPORT SPAY & NEUTER
NATIONAL MILL DOG RESCUEPO BOX 88468 COLORADO SPRINGS,CO 80908	26- 0574783	501 (C)(3)	15,000			SUPPORT PUPPY MILL DOGS RESCUE AND TRANSPORTATION, SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NAVAJO NATION VETERINARY & LIVESTOCK PROGRAMPO BOX 1450 WINDOW ROCK,AZ 865151450	86- 0092335	NAVAJO NATION	512				SUPPORT SPAY & NEUTER
NEW BEGINNINGS FOR CATS7701 E 3500 RD MOMENCE, IL 60954	- 36 4538177	501(C)(3)	2,000				SUPPORT SPAY & NEUTER

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and (b) EIN (c) IRC Code (d) Amount of (e) Amount of (f) Method of (g) Description (h) Purpose of grant

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW HAMPSHIRE HUMANE SOCIETY 1305 MEREDITH CENTER RD LACONIA,NH 03247	02- 6006374	I 501 (C) (3)	2,500				SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES
NEW ROCHELLE HUMANE SOCIETY 70 PORTMAN RD NEW ROCHELLE, NY 10801	13- 1740009	I 501 (C) (3)	1,500				SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NO MORE HOMELESS PETS INCPO BOX 141023 GAINESVILLE, FL 326141023	02- 0536968	501(C)(3)	849				SUPPORT SPAY & NEUTER
NORTHWEST ORG FOR ANIMAL HELP PO BOX 1603 STANWOOD, WA 98292	91- 1362069	501 (C)(3)	794				SUPPORT SPAY & NEUTER

(a) Name and address (**b**) EIN (c) IRC Code (d) A mount of (e) A mount of (f) Method of (g) Description (h) Purpose of cash grant of organization section non-cash valuation grant of or government ıfapplıcable assistance (book, FMV, non-cash or assistance appraısal, assistance other) OKLAHOMA ALLIANCE FOR SUPPORT 84-ANIMALS2642 E 501 (C) (3) SPAY & 1640954 21ST STREET 2,551 NEUTER SUITE 12 TULSA,OK 74114 ONE OF A KIND SUPPORT PET RESCUE INC 20-501 (C) (3) SPAY & 1485 MARION AVE 4631002 636 NEUTER AKRON, OH 44313

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OREGON OUTBACK HUMANE SOCIETY PO BOX 206 LAKEVIEW, OR 97630	-20 8682453	501 (C)(3)	527				SUPPORT SPAY & NEUTER
OREGON SPAYNEUTER FUND 2475 GARMISCH DR 4 VAIL,CO 81657	-93 0683959	501 (C)(3)	2 ,0 0 0				SUPPORT SPAY & NEUTER

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OREGONIANS FOR HUMANE FARMS 2236 SE 10 TH AVENUE PORTLAND,OR 97214	45- 1774205	PENDING C(4)	25,000				SUPPORT IMPROVE THE LIVES OF EGG- LAYING HENS
PAL HUMANE SOCIETYPO BOX 3085 22148 HWY 18 APPLE VALLEY,CA 92307	95- 4516403	501 (C)(3)	541				SUPPORT SPAY & NEUTER

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PARKER PAWS587 OX MILL CREEK RD WEATHERFORD,TX 76087	-26 1458532	501 (C)(3)	1,064				SUPPORT SPAY & NEUTER
PAWS ANIMAL WELFARE SOCIETY INCPO BOX 94 FORT KENT MILLS, ME 04744	-22 2564622	501 (C)(3)	2,000				SUPPORT SPAY & NEUTER

(a) Name and address of organızatıon or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PAWS OF MICHIGANPO BOX 2184 RIVERVIEW, MI 48193	32- 0213112	501 (C)(3)	636				SUPPORT SPAY & NEUTER
PAWS OF NE LOUISIANA INC 205 LAKESHORE DRIVE MONROE, LA 712034947	68- 0557163	501 (C)(3)	865				SUPPORT SPAY & NEUTER

a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PEOPLE FOR ANIMALS INC401 HILLSIDE AVE HILLSIDE,NJ 07205	22- 2331492	501 (C)(3)	2,614				SUPPORT SPAY & NEUTER
PET ALLIANCE INC1250 OHIO PIKE SUITE 201 AMELIA,OH 451021239	14- 1966759	501 (C)(3)	3,746				SUPPORT SPAY & NEUTER

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	• •	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PET PREVENT A LITTER OF CENTRAL TEXASPO BOX 41 SAN MARCO,TX 78667	-74 2586062	501 (C)(3)	742				SUPPORT SPAY & NEUTER
PHILADELPHIA ANIMAL WELFARE SOCIETY100 N 2ND ST PHILADELPHIA,PA 191061902	26- 3862631	501 (C)(3)	1,500				SHELTER IN CRISIS FUND/REPLACE OF BROKEN WASHER/DRYER UNITS

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PRESTON COUNTY HUMANE SOCIETY PO BOX 395 KINGWOOD, WV 26537	-52 2422279	501(C)(3)	672				SUPPORT SPAY & NEUTER
PRINCE WILLIAM SPCAPO BOX 6631 WOODBRIDGE, VA 22195	20- 1399213	501 (C)(3)	774				SUPPORT SPAY & NEUTER

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RED LAKE ROSIE'S RESCUE INC23880 SOUTH GOOD ROAD TRAIL, MN 56684	-20 3917194	501 (C)(3)	5,000				SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES
RED SKY RESCUE INC8305 W COUNTY ROAD 150 N MEDORA, IN 47260	27- 0737457	501 (C)(3)	1,500				SUPPORT CONSTRUCTION OF FENCE TO BUILD A YARD FOR DOGS

(a) Name and address of (**b**) EIN (c) IRC Code (d) Amount (e) Amount of (f) Method of (g) Description (h) Purpose of grant of cash grant organization valuation section non-cash of or assistance or government ıfapplıcable assistance (book, FMV, non-cash appraisal, assistance other) RICHMOND SOCIETY SUPPORT FOR THE MISSOURI DOGS PREVENTION OF **RESCUE AND** CRUELTY TO 54-CARE, SHELTER 501 (C)(3) 0506328 ANIMALS2519 18,043 AID TO REDUCE HERMITAGE ROAD PET RICHMOND, VA HOMELESSNESS 23220 AND SAVE LIVES ROCKINGHAM-SHELTER AID TO HARRISONBURG 54-REDUCE PET SPCAPO BOX 413 501 (C) (3) 0935739 HOMELESSNESS 2,500 HARRISONBURG, VA AND SAVE LIVES 22803
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ROMANIA ANIMAL RESCUE INC8000 MORGAN TERRITORY ROAD LIVERMORE, CA 94551	72- 1546354	501(C)(3)	3,000				SUPPORT SPAY & NEUTER
SACRAMENTO AREA ANIMAL COALITION PO BOX 161043 SACRAMENTO,CA 95816	-51 0461220	501(C)(3)	1,422				SUPPORT SPAY & NEUTER

(a) Name and address (**b**) EIN (c) IRC Code (d) Amount of (e) A mount of (f) Method of (g) Description (h) Purpose of of organization section cash grant non-cash valuation grant of or government ıfapplıcable assistance (book, FMV, non-cash or assistance appraısal, assistance other) SAFE HAVEN ABUSED EQUINE RESCUE 75-501 (C)(3) ANIMALS 2839955 4994 FM 2088 1,500 RESCUE GILMER,TX 75644 SALEM FRIENDS OF FELINES980 SUPPORT 68-COMMERICAL 501 (C)(3) SPAY & 0577560 1,021 STREET SE NEUTER SALEM,OR 97302

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
SANTA CRUZ SPCA 2685 CHANTICLEER AVENUE SANTA CRUZ, CA 95065	-94 6171565	501 (C)(3)	5,000				SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES
SAVE A KITTY FERAL CAT PROGRAMPO BOX 1442 PARKERSBURG, WV 26102	20- 1356147	501 (C)(3)	800				SAVE A KITTY RESCUE

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAVE A STRAY'S LIFE2845 FM 1516 SOUTH SAN ANTONIO, TX 78263	-74 2753901	501 (C)(3)	500				SAVE THE LIFE OF UNWANTED AND ABUSED PET POPULATION
SAVE THE ANIMALS RESCUE TEAM (START)PO BOX 1098 LITTLE FALLS,NJ 07424	52- 1765363	501 (C)(3)	686				SUPPORT SPAY & NEUTER

(a) Name and address of organızatıon or government	(b) EIN	(c) IRC Code section If applicable	(d) A mount 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
SAVE THE CHIMPS INCPO BOX 12220 FORT PIERCE, FL 34979	-65 0789748	501 (C)(3)	25,000				FUNDS TO SUPPORT THE SANCTUARY
SAWA-SOCIETY OF ANIMAL WELFARE ADMINISTRATORS 15508 W BELL RD STE 101-613 SURPRISE,AZ 85374	41- 1618666	501 (C)(6)	15,000				SUPPORT ANNUAL CONFERENCE PROGRAM

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SEATTLE ANIMAL SHELTER600 FOURTH AVENUE SEATTLE, WA 98104	-27 2834182	501 (C)(3)	1,492				SUPPORT SPAY & NEUTER
SECOND CHANCE ANIMAL SHELTER 111 YOUNG ROAD EAST BROOKFIELD, MA 01515	41- 1780387	501 (C)(3)	5,000				SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SHEBOYGEN COUNTY HUMANE SOCIETY3107 N 20TH STREET SHEBOYGEN, WI 53020	39- 1050684	501 (C)(3)	5,000				SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES
SHELTER FROM THE STORM ANIMAL3120 EDMONTON DR STE 500 SUN PRAIRIE, WI 53590	20- 3627106	501 (C)(3)	3,500				SUPPORT SPAY & NEUTER, REPLACEMENT OF DOG KENNELS

(a) Name and address (**b**) EIN (c) IRC Code (d) A mount of (e) A mount of (f) Method of (g) Description (h) Purpose of of organization section cash grant non-cash valuation of grant or government ıfapplıcable assistance (book, FMV, non-cash or assistance appraisal, assistance other) SHERWOOD HUMANE ANIMAL SUPPORT 71-CITY OF SERVICES6500 SPAY & 0408925 SHERWOOD NORTH HILLS BLVD 621 NEUTER SHERWOOD, AR 72120 SOCIETY FOR THE IMPROVEMENT OF CONDITIONS FOR SUPPORT STRAY ANIMALS 23-501 (C) (3) SPAY & 7367199 2600 WILMINGTON 532 NEUTER PIKE KETTERING, OH 45419

(a) Name and address (**b**) EIN (c) IRC Code (d) A mount of (e) A mount of (f) Method of (g) Description (h) Purpose of cash grant of organization section non-cash valuation grant of or government ıfapplıcable assistance (book, FMV, non-cash or assistance appraısal, assistance other) SOS STRAY OR STRANDED SUPPORT ANIMAL RESCUE 38-501 (C) (3) SPAY & PO BOX 1135 3562588 1,488 NEUTER MIDLAND, MD 486411135 SOURIS VALLEY SHELTER ANIMAL SHELTER 45-501 (C) (3) SUPPORT FOR 1935 20TH AVE SE 0345317 5,000 FLOOD RELIEF MINOT,ND 58701

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTH UMPQUA RURAL COMMUNITY PARTNERSHIP COMMUNITY PARTNERSHIP TILLER,OR 97484	33- 1131242	501 (C)(3)	1,000				SUPPORT LIVING W/BEAVER/PROTECTION OF NATURAL RESOURSES
SOUTHEAST LLAMA RESCUE INC678 MILL CREEK RD LURAY, VA 22835	- 56 2272041	501 (C)(3)	3 ,0 0 0				SUPPORT FOR ABUSED AND NEGLECTED LLAMAS AND ALPACAS

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTHERN OREGON HUMANE SOCIETY2910 TABLE ROCK ROAD MEDFORD, OR 97501	93- 0391640	501 (C)(3)	1,500				SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES
SPARTANBURG HUMANE SOCIETY 150 DEXTER RD SPARTANBURG, SC 29303	57- 0481019	501 (C)(3)	2,500				SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SPAY ARKANSAS INC200 SOUTH BARTON AVE FAYETTEVILLE, AR 72701	-06 1833843	501 (C)(3)	2,000				SUPPORT SPAY & NEUTER
SPAY NEUTER A ACTION PROJECT OF SAN DIEGOPO BOX 1373 LA JOLLA, CA 92038	33- 0517862	501(C)(3)	826				SUPPORT SPAY & NEUTER

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States(a) Name and address
of organization(b) EIN(c) IRC Code
section(d) Amount of
cash grant(e) Amount of
non-cash(f) Method of
valuation(g) Description
of(h) Purpose of
grant

of organization or government		section if applicable	cash grant	non-cash assistance	valuation (book, FMV, appraisal, other)	of non-cash assistance	grant or assistance
SPAY TEXAS1531 WOODED ACRES DR WACO,TX 72710	26- 1109903	1 501 (C) (3)	2,000				SUPPORT SPAY & NEUTER
SPAY TODAY1864 S WADSWORTH BLVD LAKEWOOD,CO 80232	80- 0303411	I 501 (C) (3)	726				SUPPORT SPAY & NEUTER

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SPAYNEUTER KANSAS INC319 S HYDRAULIC ST WICHITA,KS 67211	42- 1753707	501 (C)(3)	2,000				SUPPORT SPAY & NEUTER
SPAYGEORGIA INC PO BOX 492739 LAWRENCEVILLE, GA 30049	-58 1860046	501 (C)(3)	4 ,0 0 0				SUPPORT SPAY & NEUTER

(a) Name and address (**b)** EIN (c) IRC Code (d) A mount of (e) A mount of (f) Method of (g) Description (h) Purpose of cash grant of organization section non-cash valuation of grant or government ıfapplıcable assistance (book, FMV, non-cash or assistance appraisal, assistance other) SPAY-NEUTER ASSISTANCE SUPPORT PROGRAMPO BOX 76-501 (C) (3) SPAY & 0608925 70286 1,496 NEUTER HOUSTON,TX 77270 SPCA LA5026 W SUPPORT JEFFERSON BLVD 95-501 (C) (3) SPAY & LOS ANGELES, CA 1738153 4,318 NEUTER 90016

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SPCA OF NORTHEASTERN NC INC100 WILSON STREET PO BOX 1772 ST ELIZABETH, NC 27909	-58 1674663	I 501 (C) (3)	553				SUPPORT SPAY & NEUTER
SPCA TAMPA BAY INC9099 130TH AVE NORTH LARGO,FL 33773	-59 0715928	I 501 (C) (3)	1,010				SUPPORT SPAY & NEUTER

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SPECIES SURVIVAL NETWORK2100 L STREET NW WASHINGTON, DC 20037	-52 2133713	501 (C)(3)	40,000				PREVENT THE EXPLOITATION OF ANIMALS
SPOKANE COUNTY REGIONAL ANIMAL PROTECTION SERVICES1116 W BROADWAY SPOKANE, WA 99260	-91 6001370	SPO KANE COUNTY	1,000				SHELTERS IN CRISIS GRANT/RESCUE HELP

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SPOKANIMAL CARE 710 N NAPA STREET SPOKANE, WA 99202	91- 1223929	501 (C)(3)	2,000				SUPPORT SPAY & NEUTER
SPRING HILL HORSE RESCUE175 MIDDLE RD N CLARENDON,VT 057599430	02- 0537086	501 (C)(3)	1,680				DISASTER RELIEF HURRICANE IRENE RECOVERY ASSISTANCE

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST CHARLES HUMANE SOCIETY1099 PRALLE LANE ST CHARLES,MO 63303	01- 0756138	501(C)(3)	542				SUPPORT SPAY & NEUTER
STONE COUNTY SPCA321 ELMER AVE E WIGGINS,MS 39577	27- 1359759	501 (C)(3)	2 ,0 0 0				TO SUPPORT ANIMAL RESCUE PROGRAM

(a) Name and address **(b)** EIN (c) IRC Code (d) Amount of (e) Amount of (f) Method of (g) Description (h) Purpose of grant of organization section cash grant non-cash valuation or assistance of or government ıfapplıcable assistance (book, FMV, non-cash appraisal, assistance other) SUNCOAST HUMANE SOCIETY SHELTER AID TO CORP6781 SAN 23-REDUCE PET 501 (C) (3) 7174193 CASA DR HOMELESSNESS 2,500 ENGLEWOOD, FL AND SAVE LIVES 34224 SWEET ONION ANIMAL PROTECTION 58-SUPPORT SPAY & SOCIETY1416 501 (C) (3) 2589689 636 NEUTER HARRIS IND BLVD VIDALIA, GA 30474

(a) Name and address (**b**) EIN (c) IRC Code (d) A mount of (e) A mount of (f) Method of (g) Description (h) Purpose of of organization section cash grant non-cash valuation grant of or government ıfapplıcable assistance (book, FMV, non-cash or assistance appraısal, assistance other) THE ANIMAL'S SUPPORT CRUSADERS INC SPAY & 91-432 KLICKITAT NEUTER, 501 (C) (3) 6036707 MEDICAL DRIVE 1,500 LA CONNER, WA CARE 98257 PROGRAM THE ANIPLANT TO AID SPAY-PROJECT INCPO 27-501 (C) (3) NEUTER BOX 451 2345012 4,000 PROGRAM OSPREY, FL 34229

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE ANTI-CRUELTY SOCIETY157 W GRAND AVE CHICAGO,IL 60654	-36 2179814	501 (C)(3)	5,000				SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES
THE ARKPO BOX 276 60 BARBER LANE CHERRYFIELD,ME 04622	01- 0401717	501 (C)(3)	2,500				SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE BELIZE ECONOMIC AND ECOLOGICAL1414 VIRGINIA STREET EAST CHARLESTON, WV 25301	-26 3899112	501 (C)(3)	8,000				SUMMERLEE GRANT/TO SUPPORT AMERICAN CROCODILE EDUCATION SANCTUARY RESCUE EFFORT
THE FIX FOUNDATION2132 KENNET UTLEY DRIVE FRANKLIN, KY 42134	81- 0660851	501 (C)(3)	2,000				SUPPORT SPAY & NEUTER

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE KIBBLE KITCHEN PET PANTRY 3348 SWANSON ROAD PORTAGE, IN 46368	45- 2042461	501 (C)(3)	1,000				REPLENISH PET FOOD PANTRY TO HELP LOW- INCOME FAMILIES KEEP THEIR ANIMALS
THE WILDLIFE SOCIETY INC5410 GROSVENOR LANE SUITE 200 BETHESDA, MD 208142144	52- 0788946	501 (C)(3)	5,000				PROTECTION AND THE RESOLUTION OF WILDLIFE CONFLICT SCENARIOS

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	 (f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TOLEDO AREA HUMANE SOCIETY 1920 INDIAN WOOD CIRCLE MAUMEE,OH 435374001	34- 4429093	501 (C)(3)	5,000			SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES
TUFTS UNIVERSITY SCHOOL OF VETERINARY MEDICINE CENTER FOR ANIMALSPUBLIC PO 200 WESTBORO ROAD BLDG 5 NORTH GRAFTON, MA 01536	04- 2103634	501 (C)(3)	65,265			TO SUPPORT CONTRACEPTION STUDIES ON WHITE-TAILED DEER AND WILD HORSES

(a) Name and address of organızatıon or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount 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
TUNICA HUMANE SOCIETYPO BOX 236 1375 MAIN STREET TUNICA,MS 38676	26- 3100061	501 (C)(3)	2,500				SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES
UNIVERSITY OF TOLEDO RESEARCHUNIV OF TOLEDO HEALTH SCIENCE CAMPUS 3000 ARLINGTON AVENUE TOLEDO,OH 436142598	34- 6401483	501 (C)(3)	15,871				IN-VITRO 6-7 MO STUDY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VA FEDERATION OF HUMANE SOC ROUTE 1 BOX 782 ROSELAND,VA 22967	-51 0208873	501 (C)(3)	2,000			SUPPORT SPAY & NEUTER
VANDERBURGH HUMANE SOCIETY 400 MILLNER INDUSTRIAL DR PO BOX 6711 EVANSVILLE,IN 47719	35- 1068837	501 (C)(3)	5,000			SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	valuation (book, FMV ,	(g) Description of non-cash	(h) Purpose of grant or assistance
					appraisal, other)	assistance	
VERMONT COMPANION ANIMAL NEUTERING INC 19A BAILEY MEADOWS ROAD MIDDLESEX,VT 05602	26- 1415269	501 (C)(3)	6,256				SUPPORT SPAY & NEUTER
VERMONT HUMANE FEDERATIONPO BOX 311 WATERBURY,VT 05676	03- 6006500	501 (C)(3)	14,051				SUPPORT FOR ANIMAL CRUELTY TASK FORCE, AND RESPONSE SYSTEM IMPROVEMENT

(a) Name and address of organızatıon or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	 (f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VIRGINIA BEACH SPCA3040 HOLLAND RD VIRGINIA BEACH, VA 23453	-54 6061532	501(C)(3)	1,500			DISASTER RELIEF HURRICANE IRENE
VOTER PROTECTION ALLIANCEPO BOX 190201 ST LOUIS,MO 63119	27- 5278582	PENDING C (4)	50,000			TO SUPPORT YOUR VOTE COUNTS COMMITTEE/VOTER PROTECTION CAMPAIGNS

(f) Method of (g) Description (a) Name and address (**b)** EIN (c) IRC Code (d) Amount of (e) A mount of (h) Purpose of non-cash valuation of organization section cash grant grant of or government If applicable assistance (book, FMV, non-cash or assistance appraisal, assistance other) WAGS AND WHISKERS PET SUPPORT RESCUE INC121 75-501 (C) (3) SPAY & CREEK VIEW DRIVE 3149358 812 NEUTER CROSSVILLE, TN

6,308

38555

NW

20011

WASHINGTON ANIMAL RESCUE LEAGUE71

OGLETHORPE ST

WASHINGTON, DC

53-

0162440

501 (C) (3)

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

DOG RESCUE

AND VET CARE

(a) Name and address of (**b**) EIN (c) IRC Code (d) Amount of (e) Amount of (f) Method of (g) Description (h) Purpose of section organization cash grant non-cash valuation grant of or government ıfapplıcable assistance (book, FMV, non-cash or assistance appraısal, assistance other) WASHINGTON HUMANE SOCIETY SUPPORT 7319 GEORGIA AVE 53-501 (C) (3) 24TH ANNUAL 0219724 NW 2,500 BARK BALL WASHINGTON, DC 20012 WASHINGTONIANS FOR HUMANE FARMS SUPPORT 27-PENDING C STATE BALLOT 1037 NE 65TH STREET 4636726 (4) 305,000 INITIATIVE 186 SEATLLE, WA 98115

(f) Method of (g) Description (a) Name and address (**b**) EIN (c) IRC Code (d) Amount of (e) A mount of (h) Purpose of grant of organization section cash grant non-cash valuation or assistance of or government ıfapplıcable assistance (book, FMV, non-cash appraısal, assistance other) WEBARK ESTATES INCRT 1 BOX 431A 02-SUPPORT SPAY CAMPBELL HILL 501 (C) (3) 0644795 & NEUTER ROAD 1,401 MOUNDSVILLE, WV 26041 WEST TENNESSEE ANIMAL RESCUE HELP RESCUE/CARE 6210 OLD UNION 20-501 (C) (3) 1899386 CHURCH RD DOGS, BIRDS 1,000 HOLLADAY, TN AND PEACOKS 38341

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	 (f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WHATCOM HUMANE SOCIETY 3710 WILLIAMSON WAY BELLINGHAM, WA 98226	-91 0677564	501 (C)(3)	2,500			SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES
WILDLIFE RESCUE & REHABILITATION INCPO BOX 369 335 OLD BLANCO RD KENDALIA,TX 780270369	74- 2012897	501 (C)(3)	5,000			SUPPORT COST ASSOCIATED WITH THE TRANSFER OF ONE LEMUR- HOUSE/FEED/VET CARE

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	 (f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WINDHAM COUNTY HUMANE SOCIETY PO BOX 397 916 WEST RIVER RD BARATTLEBORO, VT 50302	03- 6016140	I 501 (C) (3)	2,500			SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES
WISCONSIN HUMANE SOCIETY 4500 W WISCONSIN AVE MILWAUKEE, WY 532083156	39- 0810533	I 501 (C)(3)	2,426			SUPPORT SPAY & NEUTER

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YALE UNIVERSITY 47 COLLEGE ST STE 203 NEW HAVEN, CT 06520	-06 0646973	501 (C)(3)	75,000				SUPPORT RESEARCH & SCHOLARSHIP
YELLOWSTONE VALLEY ANIMAL SHELTER INCPO BOX 20920 BILLINGS,MT 59104	26- 1389957	501 (C)(3)	2,500				SHELTER AID TO REDUCE PET HOMELESSNESS AND SAVE LIVES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HUMANE SOCIETY INTERNATIONAL INC2100 L STREET NW WASHINGTON, DC 20037	52- 1769464	501 (C)(3)	3,200,000				SUPPORT RELATIONSHIPS WITH INTERNATIONAL AGENCIES			
HUMANE SOCIETY UNIVERSITY2100 L STREET NW WASHINGTON, DC 20037	27- 0263498	501 (C)(3)	1,700,000				THE HSUS SUPPORTS THE WORK AND DEVELOPMENT OF HSU AS AN INDEPENDENT, ACADEMIC INSTITUTION DEVOTED TO HUMAN-ANIMAL STUDIES AND RELATED FIELDS, AND THEY SHARE A GENERAL ORIENTATION CONCERNING THE VALUE AND IMPORTANCE OF HUMANE ATTITUDES AND THE HUMANE TREATMENT OF ANIMALS			
efil	e GRAPHIC p	orint - DO NOT PROCESS	s Filed Data	a -		DLN:	9349303	9007	134	
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Schedule J		Com	pensation	n Inforr	nation		OMBNo 1	545-0	047	
	m 990)		s, Directors, Trustees, Key Employees, and Highest Compensated Employees the organization answered "Yes" to Form 990,					2011 Open to Public		
•	nent of the Treasury Revenue Service	► Attach to	Part IV, que Form 990. 🕨 Se		e instructions.		Inspe			
Nar	me of the organi	•		ee separae		Employer ident if				
THE	HUMANE SOCIETY	OF THE UNITED STATES				52 0225200				
Pa	tt T Questi	ons Regarding Compensation	on			53-0225390				
	Quebe	ono kegarang compensati	011					Yes	No	
1a	Check the appr	ropiate box(es) if the organization p	rovided any of t	he follown	ng to or for a person	listed in Form				
	990, Part VII,	Section A, line 1a Complete Part I	II to provide an	ny relevan	t information regard	ing these items				
	,	s or charter travel	F Hous	sıng allowa	ance or residence fo	r personal use				
		companions			ousiness use of pers					
		ification and gross-up payments	•		al club dues or initia					
	Discretion	ary spending account	Pers	onal servi	ces (e g , maıd, chaı	uffeur, chef)				
b		xes in line 1a are checked, did the corprovision of all the expenses des								
`		ation require substantiation prior to					1b			
2		ors, trustees, and the CEO/Executiv					2			
				-						
3	Indicate which	, if any, of the following the organiza	tion uses to es	tahlish the	compensation of th					
-		CEO/Executive Director Check all								
	Compensa	tion committee	☐ Writt	ten employ	/ment contract					
		nt compensation consultant			survey or study					
	Form 990	of other organizations	Appr	roval by th	e board or compens	ation committee				
4	During the year or a related org	r, dıd any person lısted ın Form 990 Janızatıon	, Part VII, Sec	tion A , line	e 1a with respect to	the filing organiza	tion			
а	Receive a seve	rance payment or change-of-contro	ol payment?				4a		No	
Ь	Participate in,	or receive payment from, a supplem	nental nonqualıf	ied retiren	nent plan?		4b		No	
с		or receive payment from, an equity-					4c		No	
	If "Yes" to any	of lines 4a-c, list the persons and j	provide the app	licable am	ounts for each item	ın Part III				
		and 501(c)(4) organizations only n	-							
5		ted in form 990, Part VII, Section A contingent on the revenues of	A, line 1a, did th	ne organiza	ation pay or accrue	any				
а	The organization)n?					5a		No	
b	Any related org						5b		No	
	-	e 5a or 5b, describe in Part III								
6		ted in form 990, Part VII, Section A contingent on the net earnings of	A, line 1a, did th	ne organiza	ation pay or accrue	any				
а	The organization	u.>					6a		No	
b	Any related org	janization?					6b		No	
	If "Yes," to line	e 6a or 6b, describe in Part III								
7		ted in Form 990, Part VII, Section , described in lines 5 and 67 If "Yes,'			ation provide any no	on-fixed	7		No	
8		ints reported in Form 990, Part VII nitial contract exception described					8		No	
٩		8 did the organization also follows	ha rahuttahla s	racumptio	n procedure describ	ad in Regulations	0			
9	section 53 495	8, dıd the organızatıon also follow t 58-6(c)?	ine reputtable p	nesumptio	n procedure describ	eu III Kegulations	9			

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990 Cat No 50053T

Schedule J (Form 990) 2011

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space 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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & (iii) Other incentive reportable compensation compensation		other deferred compensation	benefits	(B)(ı)-(D)	reported ın prıor Form 990 or Form 990-EZ
(1) GEOFFREY HANDY	(1) (11)	117,622 0	0 0		18,257 0	21,158 0	157,037 0	0 0
(2) ROGER KINDLER	(1) (11)	193,684 0	0 0	C	21,755 0	18,407 0	233,846	0
(3) LAURA MALONEY	(1) (11)	161,860 0	0 0	C	6,413 0	7,050 0	175,323 0	0
(4) MICHAEL MARKARIAN	(1) (11)	185,936 20,660	0	C	9,857 1,095	6,360 707	202,153 22,462	0
(5) WAYNE PACELLE	(1) (11)	268,226 0	0	C	25,045	6,250 0	299,521 0	0
(6) ANDREW ROWAN	(1) (11)	77,717 116,575	0	C	23,450 35,176	8,741 13,110	109,908 164,861	0
(7) G THOMAS WAITE III	(1) (11)	199,594 0	0 0	C	51,662 0	16,763 0	268,019 0	0
(8) JOHN BALZAR	(1) (11)	168,740 0	0	C	39,275 0	821 0	208,836 0	0
(9) HOLLY HAZARD	(1) (11)	139,557 34,889	0	C	24,506 6,127	1,669 417		0
(10) JOHN W GRANDY	(1) (11)	163,566 0	0	C	66,476 0	19,092 0	249,134 0	0
(11) HEIDI PRESCOTT	(1) (11)	142,720 0	0	C	20,972 0	7,066 0	170,758 0	0
(12) DEBORAH PEEPLES	(1) (11)	141,130 0	0 0	C	7,945 0	17,130 0	166,205 0	0 0

Schedule J (Form 990) 2011

Part III Supplemental Information

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

Identifier	Ret urn Reference	Explanation
SUPPLEMENTAL	PART III	FORM 990, PART VII, LINE 5 INCOME FROM UNRELATED ORGANIZATION, WILLIAM MORROW/HARPER COLLINS \$21,250 ROYALTIES RECEIVED
INFORMATION		BY WAYNE PACELLE, CURRENT PRESIDENT/CEO, FOR AN HSUS-SPONSORED BOOK

Schedule J (Form 990) 2011

efile GRAPHIC pr	int - DO NC)T PRC	DCESS	As File	d Data	a –			C	DLN: 93	4930390	0713	
Schedule L Form 990 or 990-EZ)		T				nterested F		ons		0 M	1B No 154		
	Complete if the organization answered orm 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 2 or Form 990-EZ, Part V lines 38a or 40b.), or 28c,			201	011				
Department of the Treasury nternal Revenue Service		► Atta)-EZ. ⊫See separa		uctions.			Open to F Inspect		
Name of the organiza THE HUMANE SOCIETY OF		ATES						E	mployer i	dent if ica	ition numb	er	
									3-02253				
						and section 501 Part IV, line 25a					ıne 40b		
	Name of disqu									·		(c) Corrected?	
1 (a)	Name of disqu	uanneu	person			(b) Desc	ription	oftransa	action		Yes	No	
2 Enter the amoun section 4958			-		-	disqualified pers				r • \$			
3 Enter the amount										•\$			
Part II Loans t	o and/or F	rom	Intere	ested Pers	sons.								
						, Part IV, line 26	, or For	m 990-E			а		
			oan to			(4			(f) (e) In Approved			en	
(a) Name of intereste purpose		on and or from the organization		(c)Orig principal a		(d)Balance due			by board or		(g)Written agreement?		
		То	From				Yes	No	committee?		Yes	No	
											_		
					b 4								
Total Part III Grants (or Assistan	ice Be	nefitt	ing Intere	► \$ ested F	Persons.							
			on ans	wered "Yes	" on Fo	rm 990, Part IV	-	27.					
(a) Name of in	terested pers	on	(en interested per ganization	rson	(c) Am	nount of g	rant or ty	pe of assis	stance	
					;								

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

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
	organization			Yes	No
(1) GRACE MARKARIAN	FAM MBR OF OFFICER	71,701	EMPLOYMENT		No

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier	Ret urn Reference	Explanation
SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS		(A) NAME OF PERSON GRACE MARKARIAN(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION GRACE MARKARIAN IS A FAMILY MEMBER OF OFFICER (D) DESCRIPTION OF TRANSACTION GRACE MARKARIAN, FAMILY MEMBER OFOFFICER, WORKS AT THE HUMANE SOCIETY OF THE UNITED STATES

Schedule L (Form 990 or 990-EZ) 2011

efil	e GRAPHIC p	orint - DO NOT	PROCES	S As Filed Data -		DLN: 93	349303	9007	134
	EDULE M		1	NonCash Contr	ributions	0	MBNo 1	545-0	047
(Form 990) Department of the Treasury				e if the organization an 990, Part IV, lines ► Attach to Form	2011 Open to Public				
nternal Revenue Service									า
		tion THE UNITED STATES	S			Employer ident if i	cation nu	mber	
_	_					53-0225390			
Pa	tI Types	of Property			1	1			
			(a) Check ıf applıcable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line 1g		(d) f determi tion amou	-	
L	Art—Works of a	rt							
	Art—Historical t								
	Art—Fractional I								
	Books and publi Clothing and ho								
,	-								
6	Cars and other v	vehicles	Х	382	318,932	FMV			
	Boats and plane								
	Intellectual prop								
	Securities—Pub	•	X	50	877,235				
	Securities—Clos Securities—Part	sely held stock .							
•	or trust interest								
	Qualified consei contribution—H	istoric							
1	structures Qualified consei								
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5	Real estate—Re	sidential .	Х	1	200,000	FMV			
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	Other►(
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3 9			L by the ora	I anızatıon durıng the tax yea	l ar for contributions				
			• •	8283, Part IV, Donee Ackr		29			
								Yes	No
)a	must hold for a	t least three year	rs from the o	e by contribution any prope date of the initial contributi	on, and which is not require	ed to be used			
				period?			30a		No
b	It "Yes," descri	be the arrangem	ent in Part I	11					
1	Does the organ	lization have a gif	ft acceptand	ce policy that requires the	review of any non-standard	contributions?	31		No
2a	=		-	ies or related organizations	to solicit, process, or sell	non-cash	32a	Yes	
	If "Yes," descri If the organizat		t revenues 1	ın column (c) for a type of p	roperty for which column (a	a) is checked,			

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

describe in Part II

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
NON REPORTING OF REVENUE		ADESA IMPACT ACTS AS HSUS'S AGENT FOR THE VEHICLE DONATION PROGRAM FOR THE PROCESSING OF DONATED VEHICLES ADESA IMPACT MAKES PAYMENTS TO HSUS FOR UNITS SOLD UNDER THEIR AGREEMENT NET OF FEES AND EXPENSES

Schedule M (Form 990) 2011

efile GRAPHIC pr	int - DO NOT PROCESS	As Filed Data -	- DLN: 93493039007			
SCHEDULE O (Form 990 or 990-EZ)			o Form 990 or 990-EZ	омв № 1545-0047 2011		
Department of the Treasury Internal Revenue Service	Complete to provi Form 99	Open to Public Inspection				
Name of the organizati THE HUMANE SOCIETY OF T		Employe	r identification number			
			53-022	5390		

ldentifier	Return Reference	Explanation
ORGANIZATION MISSION STATEMENT	FORM 990, PART III, LINE 1	THE HSUS IS THE NATIONS LARGEST ANIMAL PROTECTION ORGANIZATION, PROTECTING ANIMALS THROUGH ADVOCACY, DIRECT CARE, EDUCATION, EMERGENCY RESPONSE, FIED WORK, INVESTIGATIONS, RESEARCH, SCIENTFIC AND TECHNICAL ANALYSIS, LITIGATION, MEDIA OUTREACH, AND PUBLIC POLICY INITIATIVES FROM ITS FOUNDING, THE HSUS HAS SOUGHT TO COMPLEMENT AND ENHANCE THE WORK OF LOCAL AND REGIONAL HUMANE ORGANIZATIONS, BY PROMOTING THE PROTECTION OF ANIMALS AT THE NATIONAL LEVEL, BY TACKLING ISSUES WHOSE SCOPE AND MAGNITUDE SURPASS WHAT LOCAL ORGANIZATIONS COULD ADDRESS, AND BY WORKING TO EXPAND HUMANE WORK THROUGHOUT THE UNITED STATES AND ABROAD THE FOUNDERS OF THE HSUS DIO NOT SEEX TO REPLICATE THE WORK OF LOCAL ORGANIZATIONS BUT INSTEAD TO PROVIDE A NATIONAL VOICE IN THE FIGHT AGAINST CRUE_TY AND THE CELEBRATION OF THE HUMAN-ANIMAL BOND, AND TO LABOR AS ONE EARLY MISSION STATEMENT SUGGESTED, "IN EVERY FIELD OF HUMANE WORK EVERYWHERE" THE HSUS CONFONTS LARGESCALE INATIONAL ANDINETRIATION AL PROPULATION, SEAL KILLING, THE WILDLIFE TRADE, COMMERCIAL TRAPPING, INHUMANE SLAUGHTER, AND FACTORY FARMING THE HSUS HAS DIVISIONS FOCUSING ON CONVENNION ANIMAL OVERPOPULATION, SEAL KILLING, THE WILDLIFE TRADE, COMMERCIAL TRAPPING, INHUMANE SLAUGHTER, AND FACTORY FARMING THE HSUS HAS DIVISIONS FOCUSING ON CONVENNION ANIMAL, WILD REPOTECTION, ANIMAL CRUELTY AND RESCUE HUMANE EDUCATION, AND GLOBAL ANIMAL ROTECTION THE HSUS STAFF INCLUDES SCIENTISTS AND OTHER EXPERTS IN ANIMALS IN RESEARCH, EQUINE PROTECTION, ANIMAL CRUELTY AND RESCUE HUMANE EDUCATION, AND GLOBAL ANIMAL ROTECTION THE HSUS STAFF INCLUDES SUESTISTS AND OTHER EXPERTS IN ANIMAL WELFARE. THE HSUS IS A LEADING ADVOCATE FOR LOCAL ANIMAL SHELTERS AND ROVVIDES SUESTANTIAL DIRECT CARE FOR ANIMALS, SECUING THOUSANDS EVERY YEAR FROM NATURAL AND HUMAN-CAUSED DISASTERS, SUPPORTING SANCTUARES, WAGING A MAJOR ADVERTISING CAMPAIGN TO ROMOTE ADDPTION AND SPAY ING AND NELTENNG, AND PROVIDING LOW- COST SPAY/NEUTER FORCED, AND CONDUCTS PUBLIC AVARENESS CAMPAIGNS AND INDERCOVER INVESTIGATIONS TO HEINGLILLY T

ldentifier	Return Reference	Explanation
PROGRAM SERVICE STATEMENT	FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS	ANIMAL RESEARCH ISSUES THE ANIMAL RESEARCH ISSUES DEPARTMENT WORKS TO MINIMIZE AND EVENTUAL LLY END HARNITO ANIMALS IN RESEARCH, TESTING, AND EDLCATION THROUGH POLICY EFFORTS, WORK WITH SIGENTISS, AND PUELC AND INSTITUTIONAL OUTREACH ENDING THE LUSE OF ANIMALS IN TOXICO LOGY TESTING IS A PRORITY INJUNE 2011, FOLLOWING A CAMPAGNEY THE HESU, ALLEGRAIN ANIVOUNCED ADDIFINITIONAL OUTREACH ENDING THE LUSE OF ANIMALS INTOXICO LOGY TESTING IS A PRORITY INJUNE 2011, PICLOWING A CAMPAGNEY THE LISE OF ANIMALS FOR BOTOX TESTING, WHICH INVOLVED SUFFERING AND DEATH OF ANIMALS IN2011, WE CONTINUED OUR TEAD ROLE IN THE HUMAN TOXICOL GRY TESTING ON ANIMALS THE HISU SHOLD ESTORED CONTINUED OUR TEAD ROLE ON THE HUMAN TOXICOL GRY TESTING ON ANIMALS THE HISU ALSO CONTINUED OUR DED TOWNED BRONG TOXICOL GRY TESTING ON ANIMALS THE HISU ALSO CONTINUED TO AND ANDER THEY FOR 2020, IN PARTICULAR BY CH ALLENGING UNIVERSITES INANIMAL RESEARCH TO ADO'NT PLY FOR 2020, IN PARTICULAR BY CH ALLENGING UNIVERSITES INANIMAL RESEARCH BY THEY FOR 2020, IN PARTICULAR BY CH ALLENGING UNIVERSITES INANIMAL RESEARCH TO ADO'NT FOLICES PROHIBITING SEV DER SUF FERING THROUGH PUELCE BIKAGE/HEIT, MEDIA RESSURE AND THE HIGH LIGHTING SEV DUCATIONS OF ANI MAL RESEARCH AND FERMINANEIT FEITREMENT FOR THESE ANIMALS IN JANUARY 2011, THE HSUS ENTYTE OF MOLEXINA HUMAN FEITREMENT FOR THESE ANIMALS IN JANUARY 2011, THE HSUS ENTYTE OF MEDICINE REFORT THAT CONCLUDED THAT CHIPMALESS THAT ANAZEES TO ANACTIVE LABORATORY IN TEXAS THE HSUS ALSO REVOLUED THAT CHIPMALES ANAL HARELY 2011, THE HSUS AND CATS FROMENDES ASSOCIATED WITH ALSO TEMPORARLY HALTED ANY NEW EBEPAULLY. FUNDED SETUDES NOVOLING AND WALE HEAD THE HESUS CONTINUE DEFORTS TO ADD CESS THE FROELEMAS ASSOCIATED WITH ALSO TEMPORARLY HALTED ANITINE OF THE LISE CONCLUS AND ALCONG SINCE SO AND SET THAT DESCRIPTING AND ALLERE AND ALTIVE LISE OF CONTRAL ON AND ALLERE AND ALLERE AND ALTIVE THAT ALSO TEMPORARLY HALTED ANTINA AND ALLERE AND ALLERE AND ALTIVE AND ALLERE AND ALLERE AND ALLERE AND ALLERE AND

ldentifier	Return Reference	Explanation
PROGRAM SERVICE STATEMENT	FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS	NAND RESOURCES ON THE BUREAU OF LAND MANAGEMENTS WILD HORSE MANAGEMENT ROGRAM AND WORKE D WITH ENERGY TO PROMOTE THE USE OF PORCIRE ZONA PELLUCIDA (PZP) VACCINE AS A CONTRACEPTIVE A GENT IN HORSES THE SECTION CAMPAIGNED AGAINST THE WORST REDATOR CONTROL PRACTICES EMPLOYED OR SANCTIONED BY THE USDA'S WILDLIFE SERVICES DIVISION IN A FEW LOCATIONS, THE SECTION ENGAGED THE NATIONAL PARK SERVICE ON EQUINE, UNGULATE, PREDATOR, AND EXOTIC SPECIES MA NAGEMENT POLICES AND PROCEDURES, AND IT CONTINUED ITS EFFORTS TO PROTECT HUNDREDS OF SEA LIONS AT BONNEVILLE DAM ON THE COLUMBIA RIVER ALONG THE BORDER OF OREGON AND WASHINGTON T HE SECTION ALSO WORKS ON PHEASANT STOCKING, FOX PENNING, DOVE SHOOTING, RATTLESNAKE ROUNDU PS, FISHERES, TROPHY HUNTING, SUBSTANDARD AND ROADSIDE ZOOS, AND INTERNET HUNTING IN OCT OBER, THE SECTION MOBILIZED TO SPEAK OUT AGAINST THE RRIVATE OWNERSHIP OF EXOTICS IN THE A FTERMATH OF THE ZANESVILLE, OHIO TRAGEDY IN WHICH A SUICIDAL COLLECTOR OF ANIMALS RELEASED THEM BEFORE KILLING HIMSELF, CREATING A CRISS IN WHICH LAW ENFORCEMENT AGENTS KILLED THE ANIMALS. THE SECTION ALSO RELEASED A REPORT OUTLINING THE ARGUMENTS AND SCIENTIFICE VIDEN CE AGAINST THE PUBLIC DISPLAY OF KILLER WHALES, OR ORCAS, ON ANIMAL WELFARE GROUNDS, IN THE WAKE OF AN INVESTIGATION INTO A TRAINER'S DEATH AT SEAWORLD IN ORLANDO, FLORDA THE FUSU S JOINED WITH OTHER PARTNERS TO FILE A PETITION WITH THE DEPARTMENT OF INTERIOR TO LIST AF RICAN LIONS AS ENDANGERED UNDER THE US BIDANGERED SPECES ACT, TO GENERALLY PROHIBIT IMP ORTING LION TROPHIES INTO THE UNITE STATUS THAT FILED A LAWSUIT ASKING A FEDERAL COURT IN MASSACHUSETTS TO HOLD THE NATIONAL MARINE FISHERES SERVICE ACCOUNTABLE FOR CONTINUING TO ALLOW FOUR FED ERAL FISHERES TO INJURE AND KILL ENDANGERED WHALES, INCLUDING THE CRITICALLY ENDANGERED NORTH ATLANTIC RIGHT WHALE AT PRIME HOOK IN ATONNAL GRASSLAND THE HANDING SANDA DEER STANDS CONSTRUCTED, DEVELOPMENTS COMPLETED, AND HUNTING SEASOND FOR PRATES SERVICE ACCOUNTABLE FOR VIDED, THE FWRSTOR ACTION TO

ldentifier	Return Reference	Explanation
PROGRAM SERVICE STATEMENT	FORM 990, PART II, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS	PUPPY MILLS CAMPAGN THE PUPPY MILLS CAMPAGN PROMOTES ANIMAL SHELTERS INSTEAD OF PET STORES OR INTERNET SITES AS THE PRORTIY SOURCE FOR ADOPTING DOGS WHILE SEEMING TO HGHLIGHT THE PROBLEMS ASSOCIATE DWITH EXTRADE MEEDING PRACTICES AND HIGH WOLLWE COMMERCIAL BREEDING E INTERPRISES THE SECTION SUPPORTS RESPONSELLE DREEDER BREEDERS BY GIVING INFORMATION TO THE HOLLCO NI-NOW TO SELECT A RESPONSELLE BREEDER AND BY WORKING WITH A BREEDER'S ADVISORY CO LINCL. THE SECTION CELEBRATED ITS 2011 PUPY MILL ACTION WEEK LAND TOMOTE UTENDS THE WEEK OF MOTHER'S DAVI, WITH RASA WITH GRAMMY-WINNING SINGER-SONGWRITER COLEIE CALLAT. REGULAR INVESTIGATIONS HIGHLIGHT THE ONSONG REVEALED WITH PUPPY MILLS AND OFTEN LEAD TO REFORM FOR EXAMPLE. A NOVEMBER 2011 EXPOSE OF OVER 100 NEW YORK PET STORES DEMONSTRATED THAT NEARLY ALL PLEY STORES ARE SUPPLIED BY PLEYY MILLS. AND OFTEN LEAD TO REFORM FOR EXAMPLE. A NOVEMBER 2011 EXPOSE OF OVER 100 NEW YORK PET STORES DEMONSTRATED THAT NEARLY ALL PLEY SELLER. RUEREDED REEDERS, LLC WAS BROADCAST ON THE TODA'S HOW, AND FOLLOWED BY LED AL ACTION AGAINST THE SELLERS THE SECTION ALSO HELPS TO PASS STRONGER LAWS TO PROTECT DOS SIN PUPPY MILLS OFTEN LEADNG TO PAYS STRONGER LAWS TO RROTECT DOS SIN PUPPY MILLS OFTEN LEADNG TO PAYS MISTIN STRONGER LAWS TO ROTECT DOS SIN PUPPY MILLS OFTEN LEADNG TO PAY MISTIN STRONGER LAWS TO ROTECT DOS SIN PUPPY MILLS OFTEN LEADNG TO PAY SHULL CLOSURES AND RESCURES, SINCE 2006, THE HOLD HAS RESCUED MORE THAN 8000 DOS FROM A LIFE OF MISRY NINPY MILLS CALLFORNA, MARTLAND, MISSOLTI ALSO HELPS TO RESCARCH AND INVESTIGATIER POBLEMARTPY MILLS. OFTEN LEADNG TO PAY MILL CLOSURES AND RESCURES, SINCE 2006, THE HOLD HAS RECOLUDING POACHING, CAPTIVE HANTING AND COS FROM A LIFE OF MISRY NINPY MILLS WOLD RESTORED THE COMPACING AND LOCUYOTE ENTRIES AND CAMPAGN FOR NORMATION IN POACHING, DARST AND AND HE MISSING HIGHLIGHT HE MOST STATE BULLS (ECONOMIC AND SELECT AND AND AND RESCURE AND AND HE MISSING HIGHLIGHT WORKING TO NATIVITY. LIFE AUSLITHE WILL LIFFE ADEVENTION AND LOCE THE MISSING HIG

ldentifier	Return Reference	Explanation
PROGRAM SERVICE STATEMENT	FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS	TED TO FUR SOURCING THE CAMPAIGN FURTHERED ESTABLISHED RELATIONSHIPS WITH TWO OF THE TOP FASHION SCHOOLS IN THE UNITED STATES, PARSONS THE NEW SCHOOL OF DESIGN, AND THE FASHION IN STITUTE OF TECHNOLOGY, AND EXPANDED ITS OUTREACH INTO SEVERAL ADDITIONAL SCHOOLS MORE THA N 500 STUDENTS PARTICIPATED IN PRESENTATIONS AND DISCUSSIONS HOSTED BY CAMPAIGN STAFF ON P ROBLEMS WITH THE FUR TRADE CAMPAIGNERS ALSO ATTENDED THE KEY FASHION TRADE SHOW MAGIC AS WELL AS MANY OTHER EVENTS FEDERAL AFFARS THE HSUS FEDERAL AFFARS SECTION FOCUSES ON SUP PORT AND PASSAGE OF ANIMAL PROTECTION LEGISLATION AND REGULATORY MEASURES AT THE FEDERAL LEVEL FEDERAL AFFARS WORKED IN SUPPORT OF SUCH BILLS AS THE ANIMAL FIGHTING SPECTATOR PRO HIBTION ACT (HR 2429) 1947). THE BATTLIFFIED EXCELLENCE THROUGH SUPERIOR TRAINING FRA CTICES ACT (HR 1417), THE CAPTIVE PRIMATE SAFETY ACT (S 1324/H R 4306), THE DOWNED ANIMAL AND FOOD SAFETY ROTECTION ACT (HR 3704), THE GREAT AFE ROTECTION AND COST SAVINGS ACT (HR 1517) S10, THE HORSE TRANSPORTATION SAFETY ACT (S 1281), THE INTERSTATE HORSE RACING IMPROVEMENT ACT (HR 1733/S 886), THE PRESERVATION OF ANTIBOTICS FOR MEDICAL TREATMENT ACT (HR 955/S 1211), THE FRESERVATION OF ANTIBOTICS FOR MEDICAL TREATMENT ACT (HR 955/S 1211), THE FUPPY UNFORM PROTECTION AND SAFETY ACT (HR 835 S 70 7), THE SPORTSMANSHIPIN HUNTING ACT (HR 2210), AND THE VETERAINS DOG TRAINING THERAPY ACT (HR 198/S 1838) THE SECTION ALSO SUPPORTED MEASURES FOCUSING ON REAUTHORIZATION FOR PROGRAMS DEALING WITH MARKIE TURTLE CONSERVATION, GREAT APE POPULATIONS AND THER HABITATS, THE PROTECTION OF THE AFRICAN AND ASIAN LEPHANT, RHINCEEROSES, AND TIEGRS, AND NEO-TROP ICAL MIGRATORY BIRD CONSERVATION THE SECTION WORKED TO OFPOSE HARMFUL INITIATIVES CONCERN ING WILDLIFF, INCLUDING HR 3069 (LETHAL CONTROL OF SEA LIONS IN THE EXCIDENT AND BASIN), H H 991.1 A BILL PERMITTING POLAR BEAR TROPHY IMPORTS BY BIG GAME HUNTERS, AND HR 28 34, A ROPOSAL TO RIGRITZE HUNTING ON FEDERAL LANDS AT THE EXPENSE OF NON- CONSERVATION, SECTION WORKED TO OFPOSE HARMFUL INI

ldentifier	Return Reference	Explanation
		THE DIVISION HELPED TO INCREASE FUNDS FOR ANIMAL WELFARE ACT INSPECTIONS BY NEARLY 20% (55 MILLION), ON TOP OF A 54 MILLION REDIRECTION OF FUNDS FOR PLYMILL ENFORCEMENT, HELPED TO SECURE A NEARLY 40% JUMP IN FUNDS FOR USDA'S INVESTIGATIVE AND ENFORCEMENT SERVICES (32.32 MILLION), AND SUPPORTED A CALL FOR 54.8 MILLION IN VETERINARY STUDENT LOAN FORGVENESS ALLOCATIONS, 54 MILLION TO STUDY AND COMBAT WHITE-NOSE SYNDROME IN BATS, AND S20 MILLION TO HELP ENSURE MIRLEMENTATION OF LADOR AND ENVIRONMENTAL PROVISIONS - INCLUDING WILDLEF PROTECTION PROGRAMS - UNDER INTERNATIONAL FREE TRADE AGREEMENTS THE PROGRAM ALSO WORKED WITH APPROPRIATIONS, 54 MILLION OF LADOR AND ENVIRONMENTAL PROVISIONS - INCLUDING WILDLIFE PROTECTION PROGRAMS - UNDER INTERNATIONAL FREE TRADE AGREEMENTS THE PROGRAM ALSO WORKED WITH APPROPRIATIONS COMMITTEES TO INCLUDE HELPFUL REPORT LANGUAGE FOR FEDERAL AGENCIES ON SUCH TOPICS AS HUMANE SLAUGHTER, ANIMAL FIGHTING, ANTIBIOTICS IN ANIMAL AGRICULTURE, PET THET FOR RESEARCH, AND ALTERNATIVES DEVELOPMENT STAFF MEMBERS HELPED TO SECURE A MEASURE PROHIBITING AGRIBUSINESS SUBJPY DIRECT PAY MENTS TO MILLIONAIRES, TO DEPEAT AN ANTI-WILDLIFE RIDER IN THE INTERIOR DEPARTMENT FUNDING BILL WHICH WOULD HAVE PREVENTED THE LISTING OF SPECIES AND DESIGNATION OF CRITICAL HABITAT UNDER THE DIDANCERED SPECIES ACT, TO INCLUDE A PROVISION BARRING THE KILLING OF UNADOPTED WILD HORSES AND BURROS BY THE BUREAU OF LAND MANAGEMENT, TO RESTORE A BAN ON BESTIALTY IN THE UNFORM CODE OF MILLTARY CODE, AND TAM MANAGEMENT, TO RESTORE A BAN ON BESTIALTY IN THE UNFORM CODE OF MILLTARY CODE, AND TO ANIMAL CRIENT'S AND ENEXTING ON MONKEYS INVESTIGATIONS CONSISTENT WITH THE VISION OF ITS FOUNDERS, THE HSUS CONDUCTS UNDERCOVER INVESTIGATIONS ONSISTENT WITH THE VISION OF ITS FOUNDERS, THE HSUS CONDUCTS UNDERCOVER INVESTIGATIONS ONSISTENT WITH THE VISION OF ITS FOUNDERS, THE HSUS CONDUCTS UNDERCOVER INVESTIGATIONS NTO ANIMAL CRIENT OF LINDS, STATE CHARGES AND DEARS, DOCUMENTING THE DEATHS OF 5 TIGERS AND A TIGER CLIB

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	INDIVIDUALS WHO CONTRIBUTE \$25 OR MORE ANNUALLY ARE "VOTING MEMBERS" OF THE SOCIETY

ldentifier	Return Reference	Explanation
		INDIVIDUALS WHO CONTRIBUTE \$25 OR MORE ANNUALLY AND WHO ARE IN GOOD STANDING ARE "VOTING MEMBERS" OF THE SOCIETY WHO ARE ENTITLED TO VOTE IN THE ANNUAL ELECTION OF MEMBERS OF THE BOARD OF DIRECTORS A ROTATING ONE-THIRD OF THE TOTAL NUMBER OF DIRECTORS ARE ELECTED EACH YEAR

ld	entifier	Return Reference	Explanation
			ANY AMENDMENTS TO THE BY LAWS, AND ANY OTHER QUESTIONS THAT THE BOARD OF DIRECTORS DECIDES TO SUBMIT TO THE VOTING MEMBERSHIP, MUST BE SUBMITTED FOR APPROVAL TO THAT MEMBERSHIP BY REFERENDUM

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	AFTER THE HSUS'S INTERNAL ACCOUNTING STAFF DRAFTS THE 990, THE DRAFT IS SUBMITTED TO THE HSUS'S CORPORATE OFFICERS AND OUTSIDE INDEPENDENT TAX PREPARERS FOR THEIR REVIEW, REACTION, AND REVISION ADDITIONALLY, THE HSUS'S TREASURER/CFO, WHO IS AN OFFICER, AND THE BOARD'S AUDIT COMMITTEE CONDUCT A FURTHER REVIEW OF AN ADVANCED OR FINAL DRAFT PRIOR TO FILING WITH THE IRS, THE FINALIZED FORM 990 IS DISTRIBUTED TO ALL MEMBERS OF THE BOARD FOR THEIR REVIEW AND COMMENTS

ldentifier Return Referenc	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE HSUS'S POLICY OF NOT DOING BUSINESS WITH DIRECTORS OR THEIR COMPANIES, AND OTHER CONFLICT- AVOIDANCE PRACTICES, ARE SUBJECTS COVERED IN ORIENTATION SESSIONS HELD FOR NEW BOARD MEMBERS COPIES OF THE FULL DISCLOSURE POLICY AND RELATED QUESTIONNAIRE ARE DISTRIBUTED, ON AN ANNUAL BASIS, TO MEMBERS OF THE BOARD OF DIRECTORS AND TO HSUS OFFICERS AND SELECTED SENIOR STAFF MEMBERS THE QUESTIONNAIRES ARE COMPLETED, SIGNED, AND RETURNED TO THE CORPORATE SECRETARY, WHO NOTIFIES THE GENERAL COUNSEL OF ANY CONCERNS ADDITIONAL QUESTIONNAIRES SENT TO BOARD MEMBERS AND OFFICERS TO ENABLE THE ORGANIZATION TO ANSWER PART VI, LINES 1B AND 2, COVER MUCH THE SAME GROUND A COMMITTEE OF THE BOARD OF DIRECTORS - THE LEGAL, BY LAWS, AND ETHICS COMMITTEE - WHICH WAS ORIGINALLY ESTABLISHED IN 1988, IS CHARGED WITH CONSIDERING ETHICS QUESTIONS AND CASES BROUGHT TO ITS ATTENTION BY ANY BOARD MEMBER OR OFFICER OR BY THE BOARD ITSELF, AND WITH MAKING RECOMMENDATIONS THEREON TO THE BOARD OR COMMITTEE DELIBERATIONS ON THE SUBJECT, OR BE COUNTED TOWARD MEETING A QUORUM (THEY MAY ANSWER QUESTIONS)

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	A COMMITTEE OF THE BOARD OF DIRECTORS, THE OFFICER EVALUATION, COMPENSATION AND NOMINATING COMMITTEE ("OECNC"), ESTABLISHED IN 1997, IS CHARGED WITH ANNUALLY EVALUATING THE JOB PERFORMANCE OF THE PRINCIPAL SALARIED HSUS OFFICERS (PRESIDENT/CEO, THE EXECUTIVE VICE PRESIDENTS, THE TREASURER/CFO, THE CORPORATE SECRETARY, AND THE GENERAL COUNSEL/CLO - THE BOARD CHAIR, VICE CHAIR, AND BOARD TREASURER ARE UNPAID VOLUNTEER POSITIONS) AND ANY KEY EMPLOY EES, AND WITH MAKING RECOMMENDATIONS TO THE BOARD OF DIRECTORS ABOUT EACH OFFICER'S COMPENSATION, WHICH THE FULL BOARD DETERMINES IN ACCORDANCE WITH THE "SAFE HARBOR" PROVISIONS OF TREAS REG 53 4958-6, THE ANNUAL OECNC PROCESSES INVOLVE ATTENTION TO AND AVOIDANCE OF CONFLICTS OF INTEREST, USE OF COMPARABILITY DATA GATHERED AND PRESENTED BY AN OUTSIDE COMPENSATION EXPERT, AND CONTEMPORANEOUS DOCUMENTATION OF THE MEETINGS, DELIBERATIONS, AND DECISIONS THESE PROCESSES WERE MOST RECENTLY UNDERTAKEN IN 2011, AS WELL AS IN 2010

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE HSUS MAKES COPIES OF ITS CERTIFICATE OF INCORPORATION AND BY LAWS AVAILABLE TO MEMBERS FREE-OF-CHARGE, BY MAIL, UPON REQUEST THE FORMAL AUDITED FINANCIAL STATEMENTS ARE FILED WITH STATE CHARITABLE SOLICITATION REGISTRATIONS, AND PROVIDED TO CALIFORNIA RESIDENTS, AND TO MAJOR DONORS AND THEIR REPRESENTATIVES, BY MAIL, UPON REQUEST (FINANCIAL INFORMATION IN OTHER FORMATS - E.G., THE FORM 990 AND THE ANNUAL REPORT - IS AVAILABLE ON THE SOCIETY'S WEBSITE AND WILL ALSO BE MAILED, ON REQUEST) THE CONFLICT OF INTEREST POLICY HAS NOT BEEN MADE AVAILABLE TO THE GENERAL PUBLIC

ldentifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -5,253,993 POST RETIREMENT BENEFITS ADJUSTMENT -4,839,631 ADDED FMV OF DONATED VEHICLES -70,618 LOSS FROM FUNDRAISING EVENT 59,320 TOTAL TO FORM 990, PART XI, LINE 5 -10,104,922

ldentifier	Return Reference	Explanation
	FORM 990, PART XII, LINE 2C	THE PROCESS FOR OVERSEEING THE AUDIT OF THE FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT THAT AUDITED THE FINANCIAL STATEMENTS HAS BEEN CONSISTENT WITH PRIOR Y EARS

ldentifier	Return Reference	Explanation
MISSION OF THE AFFILIATES	FORM 990, SCHEDULE O	THE HUMANE SOCIETY OF THE UNITED STATES AND AFFILIATES (COLLECTIVELY, THE SOCIETY) IS A NO T-FOR PROFIT ORGANZATION WHOSE PRIVALE AND ALL REPORTS IN EWORLDWICE ADVANCEMENT OF HUMANE TRE ATMENT OF ANIMALS THROUGH PUBLIC DUCATION AND AWARENESS PROCRAMS. THE COMPACTORS OF THE FINANC ALL DATA, PRESENTED IN THE ANNUAL REPORT OF THE HISU, INCLUES THE OPERATIONS OF THE HSUS AND THE FOLLOWING ENTITIES WHOSE MISSION IS DESCRIED BE OWN THE HUMANE SOCIETY WILD FEL HAD TRUSTEIN #62-1808517 (HSUSINLT), FOUNDED IN 1983, CELEBRATES AND PROTECTS WILD ANIMALS BY CREATING AND MAINAGINS FERMANENT SANCTUARES, BY PRESERVING AND DEHANCONS NATURAL HABIT AT TAND BY COMPRCTITING GRUNDALLY THE HSUSINLT PROTECTS NATURAL HABITAT IN REPRETUTY AND WORK IS TO INSURE THAT ANIMALS LIVING ON IRROTECTED LANDS ARE NOT HUNTED. TRAPPED, OR FISHED WORKIG ON ITS OWN OR IN COLLABORATION WITH OTHER ORGANIZATIONS. THE LAND TRUST HAS CREATED MORE THAN 100 FERMANENT WILD, FE SANCTUARES AND BEEN INVOLVED IN THE RROTECTION AND COLMARES CONTIS OWN OR IN COLLABORATION WITH OTHER OTRADUCTIONS - AND A VARIETY OF PRACTICES WORK (WITH LIANDWINERS COMMITTED TO ROVIDINS PRAVANNY BE PROHIBITED TRUST STAFF MEMBERS WORK WITH LIANDWIRES COMMITTED TO ROVIDINS PRAVANSITI RANSFERRING THE LAND TO THE TRUST FOR FROETING OTHER TIMES, INVOLVES PRAVANENT CONSERVATION AGREEMENTS, ON CONSERVATION EASE MEMTS, WHICH ESTABLISH RESTRICTIONS ON HOW THE LAND CAN BE ESTITIS TAFF MEMBERS WORK WITH LIANDWIRES COMMITTED TO ROVIDINS PRAVANSITI RANSFERRING THE LAND TO THE TRUST FOR FROETISS, WHICH ESTABLISH RESTRICTIONS ON HOW THE LAND CAN BE DESTING CONSULTATION EASE MEMTS, WHICH ESTABLISH RESTRICTIONS ON HOW THE LAND CAN BE DESTITIS TO REASE THE CONSULTATION AND RECENTS, WHICH ESTABLISH RESTRICTIONS ON HOW THE LAND CAN BE DESTITIS AND CONSULTATION ESTA ESTAFF ENTRY ON THE RUMANE SULLATE TO REPORT TO ACCURSTICATION AND RECENTS, WHICH ESTABLISH RESTRICTIONS ON HOW THE LAND CAN BE DESTITIS AND THE ROWN ON THE AND THE TRUST TO ACCURSTICATION AND RECENTS, WHICH ESTABLISH RESTRICTIONS ON HOW TH
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ldentifier	Return Reference	Explanation
MISSION OF THE AFFILIATES	FORM 990, SCHEDULE O	HE CENTER SERVES AS A SHELTER FOR A COLONY OF 40 FERAL CATS RESCUED FROM SAN NICOLAS ISLAN D DORIS DAY ANIMAL LEAGUE EIN #95-4117651 (DDAL) THE DORIS DAY ANIMAL LEAGUE, FOUNDED IN 1987 BY THE LEGENDARY ACTRESS AND ANIMAL ADVOCATE, IS A NONPROFIT, NATIONAL, CITIZEN'S LOB BY ING ORGANIZATION WORKING FOR THE HUMANE TREATMENT OF ANIMALS SINCE ITS INCEPTION, DDAL, A 501(C) (4) ENTITY, HAS BEEN ONE OF THE LEADING ORGANIZATIONS WORKING ON LEGISLATION AND PUBLIC POLICY DDAL WORKS WITH THE U S CONGRESS, GOVERNMENT AGENCIES, STATE AND LOCAL OFF ICIALS, AND OTHER POLICY STAKEHOLDERS TO PASS NEW LAWS AND ENFORCE EXISTING LAWS THAT REDU CE THE SUFFERING OF ANIMALS ANY WHERE THEY ARE MISTREATED IN 2011, AT THE FEDERAL LEVEL, D DAL WORKED ON LEGISLATION AND POLICY APPROACHES TO INCREASE ANIMAL WELFARE ACT ENFORCEMENT FUNDING, REGULATE PUPPY MILLS, REFORM ANIMAL TOXICITY TESTING AND PROMOTE SUITABLE ALTERN ATIVES, REQUIRE THE INCLUSION OF A BITTERING AGENT IN ANTIFREEZE TO PROTECT PETS, PREVENT THE SLAUGHTER OF AMERICAN HORSES FOR CONSUMPTION ABROAD, CREATE PENALTIES FOR SPECTATORSHI P AT ANIMAL FIGHTING EVENTS, SUPPORT DOG THERAPY PROGRAMS INVOLVING VETERANS, AND RETIRE C HIMPANZEES FROM ANIMAL RESEARCH LABORATORIES OPERATED BY THE FEDERAL GOVERNMENT DDAL ALSO SUPPORTED THE PASSAGE OF STATE LAWS TO REQUIRE THE ADDITION OF A BITTERING AGENT INTO ANT IFREEZE AND ENGINE COOLANT TO MAKE THEM BITTER TO PETS AND WILLS AND ANTIFREEZE BIT TERING AGENTS IN TEXAS

ldentifier	Return Reference	Explanation
MISSION OF THE AFFILIATES (CONTINUED)	FORM 990, SCHEDULE O	HUMANE SOCETY INTERNATIONAL EIN#52-1769464 (HS) IN 1991, THE HSUS FORMALZED ITS COMMIT MENT TO GLOBAL HUMANE WORK THROUGH THE CREATION OF HSI HSI EDUCATES AUDICESS WORLDBACE A BOUT COMPASSION TOWARD AND MAILS, CARRES OUT DREED SI WOLLS' MAKERS, INUESTED IN REFERENCE HIGHTY GYUEN WORLDWIE TO ANIMAL FORTECTION ISSUES BY POLLS' MAKERS, INUESTED IN REFERENCE AND DIAMETERS TO INFORMATING SUPPORT TO LOCAL PARTNERS, AND STRVES TO INCERASE THE PRIORITY GYUEN WORLDWIE TO ANIMAL FORTECTION ISSUES BY POLLS' MAKERS, INUESTRY AND C VILL SOCETY HSIS CORE CAMPAIGNS FOOLIS ON THE HUMANE MANAGEMENT OF STREET ANIMALS, DISAS TER RELEF, AN IPO TO HAZARD AND RSK ASSESSMENT TESTING SING ANIMALES, FARM ANIMALS, SUPPER NG, WILDLIFE ABUSE AND SUFFENING, THE RELATIONSHIP BETWEEN ORLETY TO ANIMALS, AND INTERVE ROSONLL VIOLENCE THE APPLICATION OF SCHELSCAN DECHNOLOGY TO ANIMAL WELFARE PROGLEMS, AND THE CELEBRATION OF THE HUMAN ANIMAL BOND HEIR SEPECIALLY ACTIVE IN ROMOTING THE HUMANE E MANAGEMENT OF STREET ANIMALS IN INDA. BUTTANI BANCALDESH THE PHILEPARE, RANGE HUMA, C INDUCTING ACTIVE CAMPAKINES TO RIDI THE CONFINEMENT OF FARMANIMALS IN FACTORY FARMING IN IN DA BRAZL. MERICA, DOMENTIAL HAZARD AND RSK ASSESSMENT, AND SUPPORTING OTHER MORE LOCAL, CA MPAGING NEWTON MENTAL HAZARD AND RSK ASSESSMENT, AND SUPPORTING THE HUMANE. THE STOPPINS VILLE SUFFERING AND ABUSE THESE INCLUE A MAJOR CAMPACEN AMUED AT STOPPING THE HUMAN AND BWIRDOMENTIAL HAZARD AND RSK ASSESSMENT, AND SUPPORTING THE MORE LOCAL, CA MPAGINS IN SECIOR COMMERCIAL PURPOSES, A CAMPAKINI TO STOP SHARK FINING AND THE COOLS HUMANI AND BWIRDOMENTIAL HAZARD AND RSK ASSESSMENT, AND SUPPORTING THE HUMAN. T STOPPINS VILLE SUFFERING AND ABUSE THESE INCLUE A MAJOR CAMPACEN AMUED AT STOPPING THE KILLING OF SALLS FOR COMMERCIAL PURPOSES, A CAMPAKINI TO STOP SHARK FINING AND THE COULCA. CANTER AND AND SUPPORT TO A CAMPAKINA AGAINST THE CRANCEN AND AND THE COUNT AND THE KILLING OF SALLS FOR COMMERCIAL PURPOSES OF THE MASING IN THERWATIONAL TRADE NEOCOTING WITHOUT THE SUPPORT AND ALCARE OF WIL

ldentifier	Return Reference	Explanation
MISSION OF THE AFFILIATES (CONTINUED)	FORM 990, SCHEDULE O	DUATE DEGREES, GRADUATE CERTIFICATES, AND PROFESSIONAL DEVELOPMENT PROGRAMS IN ANIMAL STUD IES THE HIGHER EDUCATION DIVISION OFFERS UNDERGRADUATE DEGREES AND MASTERS CERTIFICATES IN ANIMAL STUDIES, ANIMAL POLICY AND ADVOCACY, AND HUMANE LEADERSHIP HSU PROVIDES ACADEMI CALLY RIGOROUS, INTERDISCIPLINARY DISTANCE LEARNING OPPORTUNITES RELATING TO ANIMAL WELFA RE THAT ROMOTE FERSIONAL, INTELLECTUAL, AND PROFESSIONAL GROWTH HSU HAS RECRUITED LEADING SCHOLARS IN THE FIELD TO ITS FACULTY, AND SERS TO ATTRACT STUDENTS WHO WISH TO BE IN THE FORERONT OF CREATING A MORE HUMANE SOCIETY AND TO GIVE THEM THE TOOLS THEY NEED TO SUCCE ED AS OF DECEMBER, 2011 HUMANE SOCIETY AND TO GIVE THEM THE TOOLS THEY NEED TO SUCCE ED AS OF DECEMBER, 2011 HUMANE SOCIETY AND TO GIVE AN TOTAL OF 81 HAVE BEN DEVLOPED TO DATE. IN 2011, HUMANE SOCIETY UNIVERSITY HAS ACCEPTED 287 STUDENTS, WITH ANOTHER 82 PROSPECTIVE CANDIDATES WHO HAVE SUBMITTED AFPLICATIONS FOR ADMISSIONS 26 COLLEGE CLAS SES WERE OFFERED IN THE '11 - '12 ACADEMIC YEAR, A TOTAL OF 81 HAVE BEN DEVLOPED TO DATE. IN 2011, HUMANE SOCIETY UNIVERSITY WAS GRAINED PERMISSION TO CONFER MASTER DEGREES, 35 S TUDENTS HAVE ENROLLED IN THE MASTER DEGREE PROGRAMS HSU ALSO OFFERS PROFESSIONAL TRAINING AND DEVELOPMENT COURSES FOR THE FLEID OF ANIMAL RESCUE. EMERGENCY ANIMAL SHELTERING, COMBATING ILLEGAL ANIMAL, FIGHTING, AND THE RESCUE. EMERGENCY ANIMAL SHELTERING, COMBATING ILLEGAL ANIMAL, FIGHTING, AND THE RESCUE. EMERGENCY ANIMAL SHELTERING COMBATING ILLEGAL ANIMAL, FIGHTING, AND THE RESCUE. EMERGENCY ANIMAL SHELTERING COMBATING ILLEGAL ANIMAL, FIGHTING, AND THE MESS OF COMPASSION FATIGUE HSU ALSO OFFERED FOR WORKSHORS HAU ALSO ANNUALLY SPONSORS AN ANIMALS AND SOCIETY COULREE CONTEST, HONORING THE BEST UNVERSITY CLASSES IN ANIMAL STUDIES, AND THE SHIN SOCIETY COULSES CONTEST, HONORING THE BEST UNVERSITY CLASSES INANIMAL STUDIES, AND THE SHIN SOCIETY COURSE CONTEST, HONORING THE BEST UNVERSITY AND CASES THE ANIMAL STUDIES, AND THE SHIN SOCIETY COURSE CONTEST AN ANIMAL RELET DOLLOCY AND CARE. S

ldentifier	Return Reference	Explanation
		THE HSUS'S BY LAWS PROVIDE FOR THE ESTABLISHMENT OF AN EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS THE EXECUTIVE COMMITTEE HAS AND MAY EXERCISE ALL THE POWERS OF THE HSUS BOARD WHEN THE BOARD IS NOT IN SESSION, EXCEPT THE POWER TO ELECT AND REMOVE OFFICERS THE BY LAWS REQUIRE THE EXECUTIVE COMMITTEE TO BE COMPOSED OF AT LEAST SEVEN (7) MEMBERS OF THE BOARD DURING 2011, THE EXECUTIVE COMMITTEE HAD TEN VOTING MEMBERS, ALL OF WHOM WERE MEMBERS OF THE BOARD THE SOCIETY'S GENERAL COUNSEL/CHIEF LEGAL OFFICER IS A NON-VOTING MEMBER, AND THE SOCIETY'S PRESIDENT/CEO MAY PARTICIPATE, BUT WITHOUT VOTE

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, LINE 10B	THE HSUS ENSURES THAT ITS CONTROLLED AFFILIATED ORGANIZATIONS' ACTIVITIES ARE CONSISTENT WITH ITS OWN PRIMARILY THROUGH THE USE OF OVERLAPPING PERSONNEL ON BOARDS AND EXECUTIVE STAFF (HSUS DOES NOT HAVE LOCAL CHAPTERS, BRANCHES, OR UNITS) ACTIVE CONTROLLED AFFILIATES TYPICALLY HAVE A PROVISION IN THEIR BY LAWS REQUIRING THAT THEIR BOARD MEMBERS BE APPROVED BY HSUS'S BOARD OF DIRECTORS

ldentifier	Return Reference	Explanation
AVERAGE HOURS PER WEEK DEVOTED TO RELATED ORGANIZATIONS	FORM 990, PART VII	FFA DDAL WLT HSI SFWC HSV MA WAY NE PACELLE 2 2 1 1 2 0 G THOMAS WAITE III 2 2 2 2 2 2 GWEN CRANE 2 2 2 2 2 2 ANDREW N ROWAN 0 0 2 24 0 1 JOHN W GRANDY 0 0 2 0 0 0 HOLLY HAZARD 0 2 2 0 1 2 MICHAEL MARKARIAN 4 0 0 0 0 0 JANET FRAKE 0 2 0 0 2 0 LAURA MALONEY 0 0 0 0 1 0

ldentifier	Return Reference	Explanation
AMENDED RETURN	FORM 990, BOX B	THIS AMENDED RETURN IS FLED TO CHANGE DISCLOSED REPORTING POSTURES RESENTED ON THE REALIZATIONS ORGINALLY PLED RETURN AS A RESULT. THE CHANGES ON THIS RETURN INCLUDE THE POLLOWING REMOVALS (DECREASES) AND ADDITIONS (INCREASES) AS FOLLOWS 11 REMOVED FROM PART VIII, LINE 1F AND 16, \$17, 993,590 OF IN-KIND PSA CONTRIBUTIONS THIS AMOUNT, WHICH WAS DISCLOSED ON SCHEDULE M, PART I, LINE 25 THIS CHANGE RESULTS IN A DECREASE. IN THE SAME AMOUNT (\$17, 993,590 THAT CARRY OVER AS REPEAT INFORMATION TO OTHER AREAS OF FORM \$90 (AS DECREASES) TOTAL CONTRIBUTIONS ON PART I, LINE 40, AND 12, CURRENT YEAR TOTAL REVENUE REPORTED ON PART VIII, LINE 12, COLUMN A, TOTAL REVENUE REPORTED ON FORM \$90 ON PART XI, LINE 1, TOTAL REVENUE ON FORM \$90 ON SCHEDULE, D, PART XI, LINE 4, TOTAL REVENUE TO MITCH SCHEDULE, D, PART XI, LINE 1, ON SCHEDULE, D, PART XI, LINE 1, TOTAL REVENUE TO MITCH SCHEDULE, D, PART XI, LINE 1, TOTAL REVENUE ON FORM \$90 ON SCHEDULE, D, PART XI, LINE 1, TOTAL REVENUE TO MITCH SCHEDULE, D, PART XI, LINE 1, TOTAL REVENUE ON FORM \$90 ON SCHEDULE, D, PART XI, LINE 3, FORM \$90 WHET THE ABOVE CHANCE & REFLECTED AS AN EXPANSION OF INFORMATION REPORTING. OR AN INCREASE IN THE AMOUNT ORGINALLY REPORTED ON FORM \$90 PART II, LINE 4 40 (AS DISCLOSED ON SCHEDULE, O, EXPANSION OF INFORMATION REPORTING), SCHEDULE, D, PART XI, LINE 28 (RECONCILITATION OF FORM \$90 REVENUE TO ADDITED FINANALLY REPORTED ON FORM \$90 FRAFT II, LINE 4 40 (AS DISCLOSED ON SCHEDULE, O, EXPANSION OF INFORMATION REPORTING), SCHEDULE D, ADAWT XI, RECONCILITA REPORTED), LINE 2E (INCREASE IN THAL AND/LINT REPORTED ON FORM \$90 FRAFT XII, LINE 28 (RECONCILITA REPORTED), LINE 2E (INCREASE IN TOTAL OF LINE 2 AMOUNTS AND INCREASE IN AMOUNT ORGINALLY REPORTED), AS AR ESSLUT OF ALD ADDIT RECENTING, MORTEN, ADARS SEI INAMOUNT ORGINALLY REPORTED), LINE 2E (INCREASE IN TRADAVINCE AND WHET RECONTED AND INCREASES INTO ADAX SCHEDULE A, PARTII, LINE 14, TO 91 43 FERCENT FROM \$21 BIT AND ADARS AS THE CORGINALLY FLED RETURN DON ATED INAVELUE AND WHET THE C

efile GRAPHIC print -	DO NOT PROCESS As Filed Data	a –				DLN: 934	<u>930390</u>	07134
SCHEDULE R (Form 990)		Organizations			-		1545- 2011	
Department of the Treasury		rganization answered ▶ Attach to Form 990.			5, 36, or 37.	Оре	n to Pul	blic
Internal Revenue Service Name of the organization					Employerida	ntification number	spectio	1
THE HUMANE SOCIETY OF THE UNIT	ED STATES				53-0225390			
Part I Identificatio	n of Disregarded Entities (Comp	lete if the organizati	on answered "Yes	" on Form 990, Pa	art IV, line 33.)			
Name, address, a	(a) Ind EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (stat or foreign country)		(e) End-of-year assets	(f) Direct controlling entity		
or more relate	n of Related Tax-Exempt Organi ed tax-exempt organizations during t (a) EIN of related organization		(c) Legal domicile (state	n answered "Yes" (d) Exempt Code section	(e) Public charity status	(f) Direct controlling	(Section 5	g) 512(b)(13) trolled
			or foreign country)		(if section 501(c)(3))	entity	organization	
See Additional Data Table							Yes	No
							1	
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For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat No 50135Y

Schedule R (Form 990) 2011

Part III Identification of Related Organizations Taxable as a Partnership (Complete of the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) (h) (i) (i) (c) (f) (a) (e) (g) Code V-UBI Disproprtionate General or Legal (b) (d) Name, address, and EIN (k) Predominant income Share of total Share of end-ofallocations? amount in box 20 of Direct controlling managing Primary activity domicile (related, unrelated, income Percentage year Schedule K-1 partner? (state or entity excluded from tax related organization assets ownership (Form 1065) foreign under sections 512country) 514) Yes No Yes No Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete of the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) (f) (h) (a) (c) (d) (e) (g) (b) Share of total Name, address, and EIN of related organization Legal domicile Direct controlling Type of entity Share of Percentage Primary activity income (C corp, S corp, end-of-year (state or entity ownership foreign or trust) assets country)

Schedule R (Form 990) 2011

Page **2**

Part V	Transactions With Related Organizations (Complete of the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)			
Note	e. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 During	the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Rec	eıpt of (i) ınterest (ii) annuıtıes (iii) royaltıes (iv) rent from a controlled entıty	1a		No
b Gift	, grant, or capital contribution to related organization(s)	1b	Yes	
c Gıft	grant, or capital contribution from related organization(s)	1 c		No
d Loa	ns or loan guarantees to or for related organization(s)	1d		No
e Loa	ns or loan guarantees by related organization(s)	1e		No
f Sale	of assets to related organization(s)	1f		No
g Pur	chase of assets from related organization(s)	1g		No
h Exc	hange of assets with related organization(s)	1h		No
i Leas	e of facilities, equipment, or other assets to related organization(s)	1 i		No
j Lea:	se of facilities, equipment, or other assets from related organization(s)	1j		No
k Per	ormance of services or membership or fundraising solicitations for related organization(s)	1k		No
l Perf	ormance of services or membership or fundraising solicitations by related organization(s)	11		No
m Sha	ring of facilities, equipment, mailing lists, or other assets with related organization(s)	1m	Yes	
n Sha	ring of paid employees with related organization(s)	1n	Yes	
o Rei	nbursement paid to related organization(s) for expenses	10		No
p Rei	nbursement paid by related organization(s) for expenses	1p	Yes	
q Oth	er transfer of cash or property to related organization(s)	1q	Yes	
r Oth	er transfer of cash or property from related organization(s)	1r	Yes	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, in	cluding covered relati	onships and transact	ion thresholds
(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) See Additional Data Table			
(2)			
(3)			
(4)			
(5)			
(6)			

Schedule R (Form 990) 2011

Part VI Unrelated Organizations Taxable as a Partnership (Complete of the organization answered "Yes" on Form 990, Part IV, line 37.)

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	Inant Are all Elated, partners ed, section from 501(c)(3) der organizations? 512-		partners section to 501(c)(3)		(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropitionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	K-1 partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No			

Schedule R (Form 990) 2011

Part VII Supplemental Information Complete this part to provide additional information for responses to questions on Schedule R (see instructions) Identifier Return Reference Explanation Schedule R (Form 990) 2011

Software ID: Software Version: EIN: 53-0225390 Name: THE HUMANE SOCIETY OF THE UNITED STATES

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

Form 990, Schedule R, Part II - Ide			Exempt orgo				
(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 501(c) (3))	(f) Direct Controlling Entity	g Sectio (b)(: contro organi:	n 512 13) olled
THE HUMANE SOCIETY WILDLIFE LAND TRUST 2100 L ST NW WASHINGTON, DC 20037	A NIMAL WELFARE	DC	501(C) (3)		THE HUMANE SOCIETY OF THE UNITED STATES	Yes	
52-1808517 DORIS DAY ANIMAL LEAGUE 2100 L ST NW WASHINGTON, DC 20037	A NIMAL WELFARE	СА	501(C) (4)				No
95-4117651 THE FUND FOR ANIMALS 200 W 57TH ST NEW YORK, NY 10019 13-6218740	A N I M A L WELFA RE	NY	501(C) (3)		THE HUMANE SOCIETY OF THE UNITED STATES	Yes	
HUMANE SOCIETY INTERNATIONAL 2100 L ST NW WASHINGTON, DC 20037 52-1769464	ANIMAL WELFARE	DC	501(C) (3)	7	THE HUMANE SOCIETY OF THE UNITED STATES	Yes	
SOUTH FLORIDA WILDLIFE CENTER INC 3200 SW 4TH AVE FT LAUDERDALE, FL 33315 23-7086391	ANIMAL WELFARE	FL	501(C) (3)		THE HUMANE SOCIETY OF THE UNITED STATES	Yes	
HUMANE SOCIETY OF HONG KONG LIMITED 3C WING YEE COMMERCIAL BLDG 5 WING HONG KONG CH	A NIMAL WELFARE	СН	NGO	7	THE HUMANE SOCIETY OF THE UNITED STATES	Yes	
THE HUMANE SOCIETY VETERINARY MEDICAL ASSOCIATION INC 2100 L ST NW WASHINGTON, DC 20037 22-2768664	A N I M A L WELFA RE	СА	501(C) (3)		THE HUMANE SOCIETY OF THE UNITED STATES	Yes	
NATIONAL ASSOCIATION FOR HUMANE AND ENVIRONMENTAL EDUCATION 2100 L ST NW WASHINGTON, DC 20037 23-7327537	A N I M A L WELFA RE	DC	501(C) (3)	7	THE HUMANE SOCIETY OF THE UNITED STATES	Yes	
HUMANE SOCIETY INTERNATIONAL UK 5 UNDERWOOD ST LONDON N1 7LY UK	ANIMAL WELFARE	UK	NGO	7	THE HUMANE SOCIETY OF THE UNITED STATES	Yes	
HUMANE SOCIETY INTERNATIONAL CANADA 460 ST CATHERINE WEST SUITE 506 MONTREAL,QUEBEC H3B 1A7 CA	ANIMAL WELFARE	СА	NGO	7	THE HUMANE SOCIETY OF THE UNITED STATES	Yes	
FRIENDS OF HUMANE SOC INT'L FOR THE PROTECTION & CONSERVATION OF ANIMALS 1250 RENE-LEVESQUE BLVD STE 2500 WEST MONTREAL, QUEBEC CA	A N I M A L WELFA RE	СА	NGO	7	THE HUMANE SOCIETY OF THE UNITED STATES	Yes	
HUMANE SOCIETY INTERNATIONAL LATIN AMERICA 250 MTS OESTE DEL MALL SAN PEDRO O SAN JOSE SE1 1NP CS	ANIMAL WELFARE	CS	NGO		THE HUMANE SOCIETY OF THE UNITED STATES	Yes	
HUMANE SOCIETY INTERNATIONAL INDIA 112 SAFAL PEGASUS NR PRAHLADNAGAR 100 FEET RD, AHMEDABAD, GUJARAT IN	ANIMAL WELFARE	IN	NGO	7	THE HUMANE SOCIETY OF THE UNITED STATES	Yes	

(a) Name of other organization		(b) Transaction type(a-r)	(c) A mount Involved (\$)	(d) Method of determining amount involved	
(1)	THE FUND FOR ANIMALS	Р	7,518,835	ACTIVITY ON GL	
(2)	THE FUND FOR ANIMALS	R		CASH TRANSFERS ON BANK STATEMENTS	
(3)	DORIS DAY ANIMAL LEAGUE	Р	2,623,159 ACTIVITY ON GL		
(4)	DORIS DAY ANIMAL LEAGUE	R	3,955,000	CASH TRANSFERS ON BANK STATEMENTS	
(5)	THE HUMANE SOCIETY WILDLIFE LAND TRUST	Р	2,871,618	INTERCOMPANY ACTIVITY ON GL	
(6)	THE HUMANE SOCIETY WILDLIFE LAND TRUST	R		CASH TRANSFERS ON BANK STATEMENTS	
(7)	SOUTH FLORIDA WILDLIFE CENTER INC	Р	304,228	INTERCOMPANY ACTIVITY ON GL	
(8)	SOUTH FLORIDA WILDLIFE CENTER INC	R	4,029,618	CASH TRANSFERS ON BANK STATEMENTS	
(9)	HUMANE SOCIETY INTERNATIONAL	В	3,200,000	GL ACTIVITY	
(10)	HUMANE SOCIETY INTERNATIONAL	Р	4,486,717	INTERCOMPANY ACTIVITY ON GL	
(11)	HUMANE SOCIETY INTERNATIONAL	R	824,108	CASH TRANSFERS ON BANK STATEMENTS	
(12) ASSOC	THE HUMANE SOCIETY VETERINARY MEDICAL IATION INC	Р	806,892	INTERCOMPANY ACTIVITY ON GL	
(13)	HUMANE SOCIETY INTERNATIONAL	N	121,622	SALARIES	
(14)	THE FUND FOR ANIMALS	N	158,064	SALARIES	
(15) ASSOC	THE HUMANE SOCIETY VETERINARY MEDICAL IATION INC	Ν	32,248	SALARIES	
(16)	THE HUMANE SOCIETY WILDLIFE LAND TRUST	N	45,429	SALARIES	

Form 990, Schedule R, Part V - Transactions With Related Organizations