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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

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

Open to Public Inspection

		Or the	2 2009 Calendar year, or tax year beginning	9					
	B C	heck if	Please C Name of organization	0	Employer identific	cation number			
	_	Addre	use no						
	-	_chang Name	e punt or ONITED ANTHAL NATIONS		68-0124097				
	\vdash	_lchang ∏Initial	e Doing Business As See Number and street (or P 0 box if mail is not delivered to street address) Room/s	outo E	Telephone number	·			
	\vdash	_lreturn ∏Termir	- ^{Specific} 1722 т Стръбт	Suite E		429-2457			
	=	ated Amend	Illisude-		Gross receipts \$	1,807,224.			
		Jretum]Applic			(a) is this a group re				
	٠	Jtion pendir			for affiliates?	Yes X No			
			SAME AS C ABOVE	l _H	(b) Are all affiliates inc				
	T T	ax-ex	empt status X 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527			list (see instructions)			
			te: WWW.UAN.ORG	н	(c) Group exemption				
						State of legal domicile CA			
		rt I	Summary						
	9	1	Briefly describe the organization's mission or most significant activities TO BRING	G AN	IMALS OUT	OF CRISIS			
	Governance		AND STRENGTHEN THE BOND BETWEEN PEOPLE AND A						
	Ĕ	2	Check this box if the organization discontinued its operations or disposed of	more th	nan 25% of its net aș	sets			
	8	3	Number of voting members of the governing body (Part VI, line 1a)		3	6			
	8	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	6			
2010	es.	5	Total number of employees (Part V, line 2a)		5	17			
2	Activities	6	Total number of volunteers (estimate if necessary)		6	425			
8 0	Act	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12		7a	0.			
0		b	Net unrelated business taxable income from Form 990-T, line 34	_	7b	0.			
JUN		_		-	Prior Year	Current Year			
\Rightarrow	e		Contributions and grants (Part VIII, line 1h)		1,213,753.	912,541.			
	Revenue		Program service revenue (Part VIII, line 2g)		34,381.	26,032.			
SCANNED	R.		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		18,783.	13,227.			
2			Other revenue (Part VIII, column (A)-lines 5, 6d, 8c, 9c, 10c, and 11e)		1,266,917.	952,270.			
			Total revenue Fact (Ind.) (fittle fough 11 (must equal Part VIII, column (A), line 12)		98,771.	88,960.			
O			Grants and similar amounts paid (flat) X, column (A), lines 1-3)		70,1110	00,500.			
Ø		14 15	Benefits paid to or for members (Parist, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		718,104.	644,250.			
	Se	162	Professional fundraising fees (Part X column (A), line 11e)		71071011	011/2301			
	Expens		Total fundralsing expenses (Part X commn (D), line 25) 134,636.						
	Ě		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		741,352.	622,468.			
			Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		1,558,227.	1,355,678.			
			Revenue less expenses Subtract line 18 from line 12		<291,310.				
	es Ses		70.00.00	Begin	nning of Current Year	End of Year			
	Assets or d Balances	20	Total assets (Part X, line 16)		1,678,808.	1,351,052.			
	t Ass	21	Total liabilities (Part X, line 26)		28,036.	21,283.			
	Punc	22	Net assets or fund balances. Subtract line 21 from line 20		1,650,772.	1,329,769.			
		rt II	Signature Block						
			Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statem and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any know	nents, and	to the best of my knowledg	ge and belief, it is true, correct,			
	Sign	1	- Secra Sarafreld		5/7/	10			
	Here	е	Signature of officer U		Date				
			REBECCA SARSFIELD, CHIEF FINANCIAL OFFICE	ER					
			Type or print name and title	Charl	· · · · · · · · · · · · · · · · · · ·				
	Paid		Preparer's Date Date Date	Check self-	(see ins	er's identifying number structions)			
		arer's	signature Chala 1. Olson CPA 5/6/10	emplo	·	P00027123			
	Use		yours if GILDERI ADDOCIATED, INC.		EIN ► 68-	0037990			
		-	2880 GATEWAY OAKS DR, STE 100		D	16 616 6161			
			SACRAMENTO, CA 95833		Phone no ►9	16-646-6464			
	May	tne II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No			

1 Breitly describe the organization's mession: SEE SCHEDULE O FOR CONTINUATION UNAN'S MISSION IS TO BRING ANIMALS OUT OF CRISIS AND STRENGTHEN THE BOND BETWEEN PEOPLE AND ANIMALS THROUGH EMERGENCY SHELTERING, DISASTER RELIEF SERVICES, FINANCIAL ASSISTANCE AND EDUCATION. UNA ACCOMPLISHES TIS MISSION BY ENGAGING VOLUNITEERS AND SUPPORTERS, COLLABORATING WITH 2 Dath the organization undertake any significant program services during the year which were not lated on the prior form 990 or 990-E27 if 'Yea, 'describe these reverses on Schedule O. 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Pai	t III Statement of Program Service Accomplishments
BOND BETWEEN PEOPLE AND ANIMALS THROUGH EMERGENCY SHELTERING, DISASTER RELIEF SERVICES, FINANCIAL ASSISTANCE AND EDUCATION. UNA NACOPELISHES 175 MISSION BY ENCAGING VOLUNTEERS AND SUPPORTERS, COLLABORATING WITH 2 Did the organization undertake any significant program services during the year which were not bated on the prior Form \$90 or \$90±27? 11 "Yes," describe these new services on Schedule O. 2 Did the organization cease conduction, or make significant changes in how it conducts, any program services? 1 "Yes," describe these changes on Schedule O. 2 Describe the exempt purpose an enverwents for each of the organization's three largest program services by expenses. 3 Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) fursts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program services propred. 5 SEE SCHEDULE O FOR CONTINUATION(S) 48 (Code:)[Expenses \$ 381, 058 michaeling states of \$)(Revenue \$ 20,374 .) EMERGENCY ANIMAL RESCUE SERVICE (EARS): TRAINED 284 NEW EARS VOLUNTEERS AT SIX WORKSHOPS IN FIVE U.S. CITITIES, BRINGING OUR ACTIVE VOLUNTEER CORPS TO NEARLY 3,000; EDUCATED THOUSANDS OF PEOPLE ABOUT THE IMPORTANCE OF ANIMAL DISASTER PREPAREDNESS AT 25 EVENTS IN NINE STATES; AND RESPONDED TO 17 EMERGENCIES, WITH 391 VOLUNTEERS PROVIDING 12,517 HOURS OF TEMPORARY SHELTERING SERVICES FOR 4,500 ANIMALS DISPLACED BY NATURAL DISASTERS OR RESCUED FROM ABUSIVE AND NEGLECTFUL CONDITIONS LIKE PUPPY MILLS, HOARDING CASES AND DOGTIGHTING RINGS, INCLUNTEER NOW THAT WAS PART OF THE LARGEST SIMULTANEOUS DOCETIGHTING RINGS, INCLUNTEER FROM ALLEED DOGTIGHTING CASES AND DOGTIGHTING RINGS, INCLUNTEER FROM THE LARGEST SIMULTANEOUS DOCETIGHTING RATION; TO ALBUST, 34 VOLUNTEERS AND THE PROVIDERS AND THE EXAST AND PROPERATION THAT WAS PART OF THE LARGEST SIMULTANEOUS DOCETIGHTING RATION TO ALBUST, 34 VOLUNTEERS AND DOCTION THAT WAS PART OF THE LARGEST SIMULTANEOUS DOCTION ANIMAL RESSCUED FROM ALLEVER AND NOTES AND ANIMAL SINGE	1	Briefly describe the organization's mission: SEE SCHEDULE O FOR CONTINUATION
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4e Total program service expenses ►\$ 1,051,779.	+u	
	4e	Total program service expenses ▶\$ 1,051,779.

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3	ŀ	Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	X	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	_ 5_		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6_		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		Х
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI			
•	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			
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII.	12	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional X	ļ		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	1	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	ļ	X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	ļ	Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization		1	v
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	-	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	1		v
	located outside the United States? If "Yes," complete Schedule F, Part III	16	 	Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			Х
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	-	^
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		Х
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	10		х
20	complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	000 /	

Form 990 (2009) UNITED ANIMAL NATIONS

Part IV Checklist of Required Schedules (continued)

rα	Checkist of nequired coneduces (continued)	Γ	· ·	
04	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the		Yes	No
21	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		X
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		L
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			.,
	Schedule L, Part III	27	ļ. —	X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			v
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
þ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			v
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	-	Α.
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	20		X
•	contributions? If "Yes," complete Schedule M	30	 	
31	Did the organization liquidate, terminate, or dissolve and cease operations?	24		X
20	If "Yes," complete Schedule N, Part I	31	-	
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- JE	-	
33	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity?			
-	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	<u> </u>		
00	If "Yes," complete Schedule R, Part V, line 2	35		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			-
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990	(2009)

orm	990 (2009) UNITED ANIMAL NATIONS 68-0124	097	P	age 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	,,		
	U.S. Information Returns. Enter -0· if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W·3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 17			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country:			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and			
	Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		_ X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services			
	provided to the payor?	7a	<u> </u>	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	1		
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			1
	benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? N/A	7g	ļ	
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? $^{ m N/A}$	7h		ļ
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the			
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings			
_	at any time during the year?	8	ļ	X
9	Sponsoring organizations maintaining donor advised funds.			1
а	•	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	Į	ļ
10	Section 501(c)(7) organizations. Enter:			
a	· · · · · · · · · · · · · · · · · · ·	-		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
11	Section 501(c)(12) organizations. Enter:		•	
a		1		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)	,		1

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

Form **990** (2009)

12b

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

Sec	tion A. Governing Body and Management				
				Yes	No
1a	Enter the number of voting members of the governing body	1a	6		
b	Enter the number of voting members that are independent	1b	6		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi	p with any other			
	officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under the	e direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?		_ 3		Х
4	Did the organization make any significant changes to its organizational documents since the prior Fo	rm 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's asset	ts?	_ 5		X
6	Does the organization have members or stockholders?		6	X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	embers of the			
	governing body?		7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other per		7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken	during the year			
	by the following:		Ì		
	The governing body?		8a	X	
	Each committee with authority to act on behalf of the governing body?		8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ched at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		X
sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenue Code)			
				Yes	No
	Does the organization have local chapters, branches, or affiliates?		10a	-	X
D	If "Yes," does the organization have written policies and procedures governing the activities of such	chapters, affiliates,]	
44	and branches to ensure their operations are consistent with those of the organization?	lea a Ala a faO	10b	Х	
11 11 A	Has the organization provided a copy of this Form 990 to all members of its governing body before fi	ling the form?	11	^	<u></u>
	Describe in Schedule O the process, if any, used by the organization to review this Form 990. Does the organization have a written conflict of interest policy? If "No," go to line 13		10-	X	
	Are officers, directors or trustees, and key employees required to disclose annually interests that cou	ulal anno mas	12a	<u>^</u>	
	to conflicts?	na give rise	12b	X	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Ves " describe	120	1	
•	in Schedule O how this is done	res, describe	12c	X	
13	Does the organization have a written whistleblower policy?	•	13	X	<u> </u>
14	Does the organization have a written document retention and destruction policy?		14	X	
15	Did the process for determining compensation of the following persons include a review and approve	al by independent	1.4		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	ar by moopondom			
а	The organization's CEO, Executive Director, or top management official		15a	X	
	Other officers or key employees of the organization	•	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions)	-	122		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	ment with a			
	taxable entity during the year?		16a		Х
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva	luate its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organic	anization's	İ		
	exempt status with respect to such arrangements?		16b		
Sec	tion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ► See Schedule				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-7	(501(c)(3)s only) availal	ble for		
	public inspection. Indicate how you make these available. Check all that apply.				
	X Own website Another's website X Upon request				
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, c	onflict of interest policy	, and fina	ancıal	
	statements available to the public.				
20	State the name, physical address, and telephone number of the person who possesses the books at	nd records of the organi	ization:	-	
	REBECCA SARSFIELD - 916-429-2457			_	
	1722 J STREET, SUITE 11, SACRAMENTO, CA 95811				

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

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

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

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

(A) Name and Title	(B) Average hours	(c		Pos		app	lv)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
DAVID MIDDLESWORTH	2 00	.,		,,				0	0	0
BOARD CHAIR	2.00	X		Х		┝		0.	0.	0.
KAREN JACQUES BOARD VICE CHAIR	1.00	X		X				0.	ο.	0.
LISA DECARLO						 				
BOARD SECRETARY	1.00	X		Х				0.	0.	0.
DONALD R. GARLIT	1 00	١								
BOARD TREASURER	1.00	X	ļ	X	_	-		0.	0.	0.
DONNA APIDONE BOARD DIRECTOR	1.00	X						0.	0.	0.
ARMAITI MAY	1.00	1	 	\vdash						
BOARD DIRECTOR	1.00	x						0.	0.	0.
NICOLE FORSYTH									_	
PRESIDENT AND CEO	40.00		-	X		ļ		78,000.	0.	11,589.
REBECCA SARSFIELD CHIEF FINANCIAL OFFICER	40.00			x				57,761.	0.	9,664.
						_				
		<u> </u>								

Par	T VII Section A. Officers, Directors, Tru	ustees, Key Ei	mple	oyee	s, a	nd l	High	est	Compensated Employ	ees (continued)				
	(A)	(B)			(0	C)			(D) (E)				(F)	
	Name and title	Average			Pos	itior	1		Reportable	Reportable		Es	tımate	ed
		hours	(c	heck	k all	that	at apply)		compensation	compensation			nount (of
		per	ă						from	from related			other	
		week	dia				 2		the	organizations	<u>,</u>		pensa 	
			5 25	Stee			as a		organization	(W-2/1099-MISC	ا (د		om the	
			Individual trustee or director	Institutional trustee		Кеу етріоуее	Highest compensated employee		(W-2/1099-MISC)			_	anızatı d relat	
			vidua	ografi	×	盲	lest c	Ē		•			nizati	
			ğ	<u>इ</u>	Officer	ş	3 5	[[5-		
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			ļ			<u> </u>								
		·												
1 b	Total						▶		135,761.		0.	2	1,2	53.
2	Total number of individuals (including but r	not limited to th	nose	liste	ed a	bov	e) w	ho r		0.000 in reportable			<u> </u>	
_	compensation from the organization						Ψ,		, , , , , , , , , , , , , , , , , , ,	.,				C
	dompensation from the organization -	•											Yes	No
3	Did the organization list any former officer.	director or tru	ietas	. ka	v on	مامه		or h	nichest compensated er	molovee on	Г	-		
3	line 1a? If "Yes," complete Schedule J for s			s, NO	y Cii	пріо	yee,	011	ngnest compensated et	iipioyee oii	ŀ	3		Х
	•					_+		اهم لم	har samaasastian fram	the executation	ŀ	•		
4	For any individual listed on line 1a, is the si	•							-	the organization				Х
_	and related organizations greater than \$15											4		Λ
5	Did any person listed on line 1a receive or				rom	any	y uni	reiat	ed organization for serv	ices rendered to		_		v
_	the organization? If "Yes," complete Sched	lule J for such	pers	son					···	 		_ 5		Х
	tion B. Independent Contractors													
1	Complete this table for your five highest co	mpensated in	dep	ende	ent c	cont	racto	ors t	that received more than	\$100,000 of comp	ensa	ation f	rom	
	the organization. NONE	· · · · · · · · · · · · · · · · · ·						T		· · ·				
	(A)								(B)		^	(C		_
	Name and business	address							Description of s	services	Ü	ompe	nsatio	11
								İ						
													_	
						_								
2	Total number of independent contractors (ıncludına but r	not li	mite	d to	the	se li	stec	d above) who received n	nore than				
-	\$100,000 in compensation from the organi		"				0		,					
	y , z = a c = c = c ation motif the organi									<u>-</u>			000	

Pa	rt VII	I Statement of Reve	nue		_			
	`				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts	1 a	Federated campaigns	1a					
La La	ь		1b	122,310.				
S, g	С	Fundraising events	1c					
ar a	d	Related organizations	1d					
S, E	е	Government grants (contribu	tions) 1e					
r si	f	All other contributions, gifts, gran	nts, and					
혈취		similar amounts not included abo	ove 1f	790,231.				
Contributions, gifts, grants and other similar amounts	g	Noncash contributions included in line	s 1a-1f \$	2,782.				
ă ŭ	h	Total. Add lines 1a-1f		•	912,541.			
				Business Code				
S	2 a			541900	17,325. 8,707.	17,325. 8,707.		ļ
- S	b	EDUCATIONAL MAT	<u>rerials</u>	541900	<u>8,707.</u>	8,707.		
e S	С							
e a	d							
Program Service Revenue	е							
-	f	All other program service rev	enue		26 022			
		Total. Add lines 2a-2f		.	26,032.			
	3	Investment income (including	g dividends, intei		20 265			38,265.
	_	other similar amounts)		. 💆	38,265.			30,203.
	4	Income from investment of ta	ax-exempt bond	proceeds P				
	5	Royalties	(A.D1	(v) D	, , , , , , , , , , , , , , , , , , , ,		7.41	
	٠.	O B4-	(i) Real	(ii) Personal				
	6 a							
		Less: rental expenses Rental income or (loss)						
		Net rental income or (loss)	L	•		İ		1
		Gross amount from sales of	(i) Securities	(II) Other				
	, u	assets other than inventory	829,916					
	ь	Less: cost or other basis						
	_	and sales expenses	854,954					
0	С	Gain or (loss)	<25,038	.>				
		Net gain or (loss)		•	<25,038.	> !		<25,038.>
a		Gross income from fundraisir	ng events (not	,				
Other Revenue		including \$	of					
ě		contributions reported on line	e 1c). See					
<u>بر</u>		Part IV, line 18	ē					
Ě	b	Less: direct expenses	ł			1		
·	С	Net income or (loss) from fun	draising events		·····			
	9 a	Gross income from gaming a	ctivities. See					
		Part IV, line 19	a a	9				
	b	Less: direct expenses	t	· [
	С	Net income or (loss) from gar	ming activities	<u> </u>				-
ĺ	10 a	Gross sales of inventory, less	s returns					
		and allowances	6	•				
		Less: cost of goods sold	t					
ł	С	Net income or (loss) from sale		<u> </u>				
		Miscellaneous Reven	ue	Business Code	470.	470.		
		OTHER INCOME		900099	4/0.	4/0.		+
	Ь							
	C							
	d	All other revenue Total. Add lines 11a-11d		•	470.			
	12	Total revenue. See instructions			952,270.	26,502.	0	. 13,227.
93200 02-04		- S.21 10 TOTING . OUT INSTRUCTIONS			222/2.00			Form 990 (2009)
J2-04								()

Part IX Statement of Functional Expenses

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

	All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).										
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses						
1	Grants and other assistance to governments and										
	organizations in the U.S. See Part IV, line 21	4,625.	4,625.								
2	Grants and other assistance to individuals in										
	the U.S. See Part IV, line 22	84,335.	84,335.								
3	Grants and other assistance to governments,										
	organizations, and individuals outside the U.S										
	See Part IV, lines 15 and 16			++++							
4	Benefits paid to or for members										
5	Compensation of current officers, directors,										
	trustees, and key employees	157,014.	95,424.	55,317.	6,273.						
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	367,569.	319,438.	29,847.	18,284.						
8	Pension plan contributions (include section 401(k)										
	and section 403(b) employer contributions)	20,416.	18,198.	1,183. 5,648.	1,035. 2,669. 2,132.						
9	Other employee benefits	54,065.	45,748.	5,648.	2,669.						
10	Payroll taxes	45,186.	36,115.	6,939.	2,132.						
11	Fees for services (non-employees)										
а	Management										
b	Legal	2,247.		2,247.							
С	Accounting	17,998.		17,998.							
d	Lobbying										
е	Professional fundraising services See Part IV, line 17										
f	Investment management fees	3,685.	1,478.	2,137.	70.						
9	Other	27,200.	15,200.	12,000.							
12	Advertising and promotion	9,315.	9,315.								
13	Office expenses	336,075.	226,608.	16,906.	92,561.						
14	Information technology	34,544.	28,025.	717.	5,802.						
15	Royalties										
16	Occupancy	68,745.	56,268.	9,729.	2,748.						
17	Travel	74,455.	71,620.	2,773.	62.						
18	Payments of travel or entertainment expenses										
	for any federal, state, or local public officials										
19	Conferences, conventions, and meetings	5,250.	4,808.	372.	70.						
20	Interest										
21	Payments to affiliates										
22	Depreciation, depletion, and amortization	7,288.	6,295.	754.	239.						
23	Insurance	5,728.	4,834.	705.	189.						
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total										
_	expenses shown on line 25 below) DISASTER RELIEF	10,247.	10,159.	88.							
a b	MEDIA & COMMUNICATIONS	6,794.	6,794.								
D C	DUES & SUBSCRIPTIONS	5,887.	3,079.	515.	2,293.						
d	TAXES & FEES	5,768.	2,314.	3,345.	109.						
a e	PREMARIN HORSE RESCUE	701.	701.	0,010.							
e f	All other expenses	541.	398.	43.	100.						
	Total functional expenses. Add lines 1 through 24f	1,355,678.	1,051,779.	169,263.	134,636.						
25 26	Joint costs. Check here X If following	1,000,010.	1,001,170	10012001	101,000						
20	SOP 98-2 Complete this line only if the organization		1								
	reported in column (B) joint costs from a combined										
	educational campaign and fundraising solicitation	211,993.	155,780.	0.	56,213.						
	educational campaign and fundraising solicitation	211,0000	155,700.		50,213						

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			120,783.	1	94,061.
	2	Savings and temporary cash investments			629,610.	2	489,324.
	3	Pledges and grants receivable, net			3	4,342. 2,969.	
	4	Accounts receivable, net	3,663.	4	2,969.		
	5	Receivables from current and former officers, di	s, trustees, key				
		employees, and highest compensated employe	es. Co	mplete Part II			
		of Schedule L			5		
	6	Receivables from other disqualified persons (as	d under section	, , , , , , , , , , , , , , , , , , ,			
		4958(f)(1)) and persons described in section 49					
		Part II of Schedule L			6		
ţ	7	Notes and loans receivable, net			7		
Assets	8	Inventories for sale or use				8	
Ä	9	Prepaid expenses and deferred charges			18,690.	9	22,542.
	10a	Land, buildings, and equipment: cost or other	1				
		basis. Complete Part VI of Schedule D	10a	58,954.			
	ь	Less: accumulated depreciation	10b	46,375.	16,060.	10c	12,579.
	11	Investments - publicly traded securities		250,002.	11	12,579. 374,235.	
	12	Investments - other securities. See Part IV, line	640,000.	12	351,000.		
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equ	al line	34)	1,678,808.	16	1,351,052. 21,283.
	17	Accounts payable and accrued expenses	28,036.	17	21,283.		
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
S	21	Escrow or custodial account liability. Complete	Part IV	of Schedule D		21	
Liabilities	22	Payables to current and former officers, directo	rs, trus	tees, key employees,			
abi		highest compensated employees, and disqualif	ed per	sons. Complete Part II			
=		of Schedule L				22	
	23	Secured mortgages and notes payable to unrela	ated th	ird parties		23	
	24	Unsecured notes and loans payable to unrelate	d third	parties		24	
	25	Other liabilities. Complete Part X of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			28,036.	26	21,283.
		Organizations that follow SFAS 117, check h	ere 🕨	X and complete			
S		lines 27 through 29, and lines 33 and 34.					
ě	27	Unrestricted net assets			1,644,272.	27	1,328,809.
3ala	28	Temporarily restricted net assets			6,500.	28	960.
ğ	29	Permanently restricted net assets				29	
Ē		Organizations that do not follow SFAS 117, o	heck t	nere 🕨 🔲 and			
6		complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds			30		
\ss	31	Paid-in or capital surplus, or land, building, or ed	quipme	ent fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	come,	or other funds		32	
Ž	33	Total net assets or fund balances			1,650,772.	33	1,329,769.
	34	Total liabilities and net assets/fund balances			1,678,808.	34	1,351,052.

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Pa	t XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	_X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			
	review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			
	consolidated basis, separate basis, or both:			
	X Separate basis Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			
	Act and OMB Circular A-133?	3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		
		_	000	

Form **990** (2009)

SCHEDULE A

(Form 990 or 990-EZ)

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section

Employer identification number

Department of the Treasury Internal Revenue Service

4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Open to Public Inspection

OMB No 1545-0047

			UNITED	ANIMAL NATIO	NS			_		68	-0124	097	
Part	I Re	ason	for Public Char	ity Status (All organiz	ations mu	st complet	te this part	t.) See inst	tructions				
he org	anization	is not a	private foundation	because it is: (For lines	1 through 1	11, check	only one b	ox.)	-		_		
1 [_ A chι	ırch, cor	vention of churche	s, or association of chur	ches desc	ribed in se	ction 170	(b)(1)(A)(i)					
2				'0(b)(1)(A)(ii). (Attach Sc									
з 🗆	A hos	ontal or	a cooperative hospi	tal service organization	described	n section	170(b)(1)	(A)(iii).					
4	_	•	•	operated in conjunction					(b)(1)(A)(ii	i). Enter th	ne hospital	's nam	ne.
		and state	-	- ,						•	•		
5				benefit of a college or ur	niversity ov	vned or or	perated by	a governi	mental uni	t describe	d in		
• _		_	(b)(1)(A)(iv). (Comple				,						
6	_			ent or governmental uni	t describer	d in contin	n 170/b\/1	11/41/64					
7 🖸	-	•	,	•					r from the	aonoral n	ublio dono	nbod i	_
1 14		-	•	eives a substantial part	oi its supp	on nom a	governine	intai unit C	n nom me	general p	ublic desci	ibeu i	11
۰ ۲		-	b)(1)(A)(vi). (Comple	· ·	(Ol-4-	Daw III							
8	_	•		section 170(b)(1)(A)(vi).						. .			
9 ∟		_	•	eives (1) more than 33						=	-	-	
			•	nctions - subject to certa	-	-	-				_		
				axable income (less sect	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	inization a	tter June 3	0, 197	5.
	_		509(a)(2). (Complete	•				=00/ \/·					
!0 <u> </u>	_	•	•	perated exclusively to te	•	•			•				
וו נו				perated exclusively for the									or
				ations described in secti				2). See se c	ction 509(a)(3). Che	ck the box	tnat	
		٦.		organization and compl		_					-	S	
Γ-	_ a <u></u>	J Type I		• •		e III • Func	-	_			Type III · C		
e∟	-	_	•	at the organization is not		•	•	•					.n
			•	han one or more publicly		-				a(a)(1) or s	ection 509	(a)(2).	
f		-		ten determination from t	ine ins tha	it it is a Ty	pe i, i ype	ii, or Type	9 111				
		-	ganization, check th										L
9		-		organization accepted ar			•					. .	
	• •	-	·	lirectly controls, either al	one or tog	etner with	persons c	escribed	ın (II) and (iii) below,	44.43	Yes	No
		_		upported organization?							11g(i)		
		-	-	n described in (i) above?							11g(ii)		ļ
				person described in (i)							11g(iii)	ii	l
h	Provi	de the to	ollowing information	about the supported or	ganization	(S).							
				(iii) Type of	(: .)		() 2	4.4 . 41	(vi) to	tho			
٠,,	me of sup		(ii) EIN	organization	(iv) is the o				(vi) Is organizatio	on in col	(vii) Am		f
(organizatio	n		(described on lines 1-9	governing			support?	(i) organiz U S	ed in the	sup	port	
				above or IRC section (see instructions))	Yes	No	Yes	No	 	No			
			· · · · · · · · · · · · · · · · · · ·	(acc manachona))	163	140	163	No	Yes	140			-
									-	+ +			
										 -			
					-		-		-	+ +			
]					
									 	 -			
			•										

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007(d) 2008 (e) 2009 (f) Total 1 Gifts, grants, contributions, and membership fees received (Do not 2265278. 1619613. 1163001. 1214353. 912,541. 7174786. include any "unusual grants.") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 1619613. 1163001. 1214353. 912,541. 7174786. 2265278. 4 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, 395,512. column (f) 6779274. 6 Public support. Subtract line 5 from line 4 Section B. Total Support (f) Total Calendar year (or fiscal year beginning in)▶ (b) 2006 (c) 2007 (d) 2008 (e) 2009 (a) 2005 912,541 2265278. 1619613. 1163001. 1214353. 7174786. 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties 29,238 71,377 91,023. 61,663. 38,265. 291,566. and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital 225 6,508. 470. 8,023. 820. assets (Explain in Part IV.) 7474375. 11 Total support. Add lines 7 through 10 256,314. 12 Gross receipts from related activities, etc. (see instructions) 12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 90.70 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 % 91.36 15 15 Public support percentage from 2008 Schedule A, Part II, line 14 16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and $\triangleright X$ stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2009

Sche Pa	edule A (Form 990 or 990 EZ) 2009 rt III Support Schedule for C)rganizations	Described in	Section 509(a)(2) (Complete onl	y if you checked the t	Page 3
Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")				1	_	
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						İ
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						
Sec	tion B. Total Support						· ·
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support (Add lines 9, 10c, 11, and 12)		<u> </u>				
14	First five years. If the Form 990 is for	the organization'	s first, second, thi	rd, fourth, or fifth t	ax year as a sect	ion 501(c)(3) organ	zation,
	check this box and stop here						<u> </u>
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2009 (line 8, column (f) c	livided by line 13,	column (f))		15	%
16	Public support percentage from 2008	Schedule A, Part	: III, line 15			16	
Sec	tion D. Computation of Inve		•				
17	Investment income percentage for 20					17	%
18	Investment income percentage from			.,,		18	%
	33 1/3% support tests - 2009. If the			on line 14, and line	e 15 is more than	L	
	more than 33 1/3%, check this box a	-					
b	33 1/3% support tests - 2008. If the						and
	line 18 is not more than 33 1/3%, che	-					
20	Private foundation. If the organization						<u> </u>

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

2009

Open to Public Inspection

Schedule C (Form 990 or 990-EZ) 2009

Department of the Treasury

Complete if the organization is described below.

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

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

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

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

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

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

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

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

Name of orga	or(c)(4), (5), or (6) organization	ions Complete Part III.	·	Empl	oyer identification number
	UNITED	ANIMAL NATIONS			68-0124097
Part I-A	Complete if the org	anization is exempt und	der section 501(c	or is a section 527 o	rganization.
1 Provide	a description of the organiz	ation's direct and indirect politi	cal campaign activities	ın Part IV.	
2 Political	expenditures			▶\$	
3 Voluntee	er hours				
Part I-B	Complete if the ord	anization is exempt und	der section 501(c)(3).	
		incurred by the organization un		▶\$	
2 Enter the	amount of any excise tax	incurred by organization manag	gers under section 495	. .	
3 If the org	ganization incurred a sectio	n 4955 tax, did it file Form 4720) for this year?		Yes No
4a Was a c	orrection made?				Yes No
b If "Yes,"	describe in Part IV.				
Part I-C	Complete if the org	anization is exempt un	der section 501(c), except section 501(c)(3).
1 Enter the	e amount directly expended	d by the filing organization for se	ection 527 exempt fund	ction activities > \$	
2 Enter the	e amount of the filing organ	ization's funds contributed to o	ther organizations for s	section 527	
exempt	function activities			▶\$	
3 Total ex	empt function expenditures	. Add lines 1 and 2 Enter here	and on Form 1120-PO		
line 17b				▶\$	
4 Did the f	iling organization file Form	1120-POL for this year?			Yes No
		nployer identification number (E	•	-	• •
	•	he amount paid from the filing of	•	·	
		vered to a separate political org I, provide information in Part IV.		eparate segregated fund or a	a political action committee
	· · · · · · · · · · · · · · · · · · ·		I ·	(-1) A	(a) Amount of molitical
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds. If none, enter -0-	promptly and directly
					delivered to a separate
					political organization If none, enter 0.
	 				
			1	į.	i

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

LHA

Schedule C (Form 990 or 990-EZ) 2009	UNITED ANIM	MAL NATIONS		68-0	124097 Page 2
Part II-A Complete if the org	janization is exem	pt under section	n 501(c)(3) and file	ed Form 5768	
(election under sec					
	tion belongs to an affilia tion checked box A and		visions apply		
Limi	ts on Lobbying Expend ditures" means amoun	ditures	visions apply.	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditures to infli	rence public opinion (a	rass roots lobbying)		152.	
b Total lobbying expenditures to influ				282.	
c Total lobbying expenditures (add li		(eeveee)g ,		434.	
d Other exempt purpose expenditure	·		Ì	1,051,345.	
e Total exempt purpose expenditure	s (add lines 1c and 1d)		ĺ	1,051,779.	
f Lobbying nontaxable amount. Enter	er the amount from the	following table in both	columns	180,178.	
If the amount on line 1e, column (a) o	r (b) is: The lobb	ying nontaxable amo	ount is:		
Not over \$500,000	20% of th	ne amount on line 1e			
Over \$500,000 but not over \$1,000	0,000 \$100,000	plus 15% of the exce	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5	00,000 \$175,000	plus 10% of the exce	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17	,000,000 \$225,000	plus 5% of the exces	ss over \$1,500,000.		
Over \$17,000,000	\$1,000,00	00.	J		
g Grassroots nontaxable amount (er	ater 25% of line 1ft			45,045.	
h Subtract line 1g from line 1a. If zer	•			0.	
i Subtract line 1f from line 1c If zero	•			0.	
j If there is an amount other than ze	•	ne 11, did the organiza	tion file Form 4720		·
reporting section 4911 tax for this					Yes No
•	ations that made a se lumns below. See the	instructions for lines	do not have to comp s 2a through 2f on pa		
	Lobbying Expend	ditures During 4-Yea	r Averaging Period	-	
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount	208,654.	194,312.	198,895.	180,178.	782,039.
b Lobbying ceiling amount			, ,		1 172 050
(150% of line 2a, column(e))					1,173,059.
c Total lobbying expenditures	4,370.	2,505.	7,540.	434.	14,849.
d Grassroots nontaxable amount	52,164.	48,578.	49,724.	45,045.	195,511.
e Grassroots ceiling amount (150% of line 2d, column (e))			.,		293,267.

475.

5,440.

2,172.

152. 8,239. Schedule C (Form 990 or 990-EZ) 2009

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2009 UNITED ANIMAL NATIONS 68-012409

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)).

•		3)	(b) <u> </u>
	Yes	No	Amo	ount
During the year, did the filing organization attempt to influence foreign, national, state or	.,,,	"		
Paid staff or management (include compensation in expenses reported on lines 1c through 1)?	•			
			-	
· ·				
Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? If "Yes," describe in Part IV Total Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912				
•		<u> </u>		,
			· · · · · · · · · · · · · · · · · · ·	
·				
				···
	n E01(a)	/E\ 07.00	otion	
) 1 30 1 (C)	(o), or se	Cuon	
==:1=1			Yes	N
Were substantially all (90% or more) dues received nondeductible by members?		1		
		2		
"Yes."				
		1		 .
Dues, assessments and similar amounts from members	nal .	1		
Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic	eal	1		
Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).	cal			·
Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year	cal	2a		
Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year	cal	2a 2b		
Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total	eal	2a 2b 2c		
Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		2a 2b		
Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds	ess	2a 2b 2c		
Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and paid to the control of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and paid to the control of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and paid to the control of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and paid to the control of the exceeds the carryover to the reasonable estimate of nondeductible lobbying and paid to the carryover to the reasonable estimate of nondeductible lobbying and paid to the carryover to the reasonable estimate of nondeductible lobbying and paid to the carryover to the reasonable estimate of nondeductible lobbying and paid to the carryover to the reasonable estimate of nondeductible lobbying and paid to the carryover to the reasonable estimate of nondeductible lobbying and paid to the carryover to the reasonable estimate of nondeductible lobbying and paid to the carryover to the reasonable estimate of nondeductible lobbying and paid to the carryover to the reasonable estimate of nondeductible lobbying and paid to the carryover to the carryov	ess	2a 2b 2c 3		
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Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and paid to the control of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and paid to the control of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and paid to the control of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and paid to the control of the exceeds the carryover to the reasonable estimate of nondeductible lobbying and paid to the carryover to the reasonable estimate of nondeductible lobbying and paid to the carryover to the reasonable estimate of nondeductible lobbying and paid to the carryover to the reasonable estimate of nondeductible lobbying and paid to the carryover to the reasonable estimate of nondeductible lobbying and paid to the carryover to the reasonable estimate of nondeductible lobbying and paid to the carryover to the reasonable estimate of nondeductible lobbying and paid to the carryover to the reasonable estimate of nondeductible lobbying and paid to the carryover to the reasonable estimate of nondeductible lobbying and paid to the carryover to the carryov	ess	2a 2b 2c 3		
Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and perpenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Supplemental Information	ess olitical	2a 2b 2c 3		
Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year? Taxable amount of lobbying and political expenditures (see instructions)	ess olitical	2a 2b 2c 3		
	Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? If "Yes," describe in Part IV Total Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filling organization incurred a section 4912 tax, did it file Form 4720 for this year? III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1 and 2 are answe	or referendum, through the use of: Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? If "Yes," describe in Part IV Total Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)	or referendum, through the use of: Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? If "Yes," describe in Part IV Total Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carryover lobbying and political expenditures from the prior year? 3 Sill-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(5), or section 501(c)(5), or section 501(c)(5), or section 501(c)(5), or section 501(c)(5), or section 501(c)(5), or section 501(c)(5), or section 501(c)(6), section 501(c)(5), or section 501(c)(5), or section 501(c)(6), section 501(c)(5), or section 501(c)(6), section 501(c)(5), or section 501(c)(6), section 501(c)(6), or section 501(c)(6), or section 501(c)(6), section 501(c)(6), or section 501(c)(6), or section 501(c)(6), or section 501(c)(6), or section 501(c)(6), or section 501(c)(6), or section 501(c)(6), or section 501(c)(6)	or referendum, through the use of: Volunteers? Pard staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Media advertisements? Mullings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? If "Yes," describe in Part IV Total Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filling organization incurred a section 4912 tax, did it file Form 4720 for this year? III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? 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

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

2009
Open to Public Inspection

Name of the organization

UNITED ANIMAL NATIONS

Employer identification number 68-0124097

Pa	t I Organizations Maintaining Donor Advise		Is or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		of 7toodaritor complete if the
	organization answered Tes to Form 550; Fait 14, init	(a) Donor advised funds	(b) Funds and other accounts
4	Total number at and af year	(a) Barrar davisas rainas	(6) 1 511.05 011.05 011.05
1 2	Total number at end of year		
	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year	westing that the appets hold in departative	Lood fundo
5	Did the organization inform all donors and donor advisors in	-	Yes No
	are the organization's property, subject to the organization's	<u> </u>	
6	Did the organization inform all grantees, donors, and donor a		-
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	
Pa	impermissible private benefit? rt II Conservation Easements. Complete if the organization.	canization answered "Ves" to Form 990	
			rait (V, line /
1	Purpose(s) of conservation easements held by the organization	· · · · · · · · · · · · · · · · · · ·	totama allu tura auta at landa aura
	Preservation of land for public use (e.g., recreation or p	·	istorically important land area
	Protection of natural habitat	Preservation of a ce	rtified historic structure
_	Preservation of open space	f	f
2	Complete lines 2a through 2d if the organization held a quality	fled conservation contribution in the form	n of a conservation easement on the last
	day of the tax year.		Held at the Fed of the Tee Vee
_	Total acceptance of acceptance acceptance		Held at the End of the Tax Year
a	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements	weekwas to almada al ta (a)	26
c	Number of conservation easements on a certified historic str	, ,	2c
d	Number of conservation easements included in (c) acquired		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by tr	ne organization during the tax
	year >		
4	Number of states where property subject to conservation ea		.
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements i		
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 17	∪(n)(4)(B)(i)
•	and section 170(h)(4)(B)(ii)?	ton cocomonto in its revenue and evacue	
9	In Part XIV, describe how the organization reports conservat	· ·	
	include, if applicable, the text of the footnote to the organiza	tion's imancial statements that describes	s the organization's accounting for
Da	conservation easements rt III Organizations Maintaining Collections o	f Art Historical Treasures or (Other Similar Assets
. 43	Complete if the organization answered "Yes" to Form		other onliner Assets.
15	If the organization elected, as permitted under SFAS 116, no	at to report in its revenue statement and	halance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	·	
	the footnote to its financial statements that describes these	·	ublic service, provide, arr arr xiv, the text of
b	If the organization elected, as permitted under SFAS 116, to		ance sheet works of art, historical treasures
U	or other similar assets held for public exhibition, education, c	•	
	these items:	or research in furtherance of public service	se, provide the following amounts relating to
			> ¢
	(i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical tre	asures or other similar assets for financia	
~	the following amounts required to be reported under SFAS 1		iai gaili, piovide
_	Revenues included in Form 990, Part VIII, line 1	To relating to these fields	▶ €
a	·		► \$ ► \$
b	Assets included in Form 990, Part X		• •

		ANIMAL NAT	IONS					<u> 8-01</u>	<u> 24097</u>	Page 2
Par	t III Organizations Maintaining C	ollections of A	rt, His	torical Tr	easures, o	or Othe	r Simila	ar Asse	ts (contin	ued)
3	Using the organization's acquisition, accessi	on, and other record	ds, chec	k any of the	following tha	it are a siç	gnificant	use of its	collection	ıtems
	(check all that apply):									
а	Public exhibition	c	, 🗀	Loan or exc	hange progra	ams				
b	Scholarly research	•	, 🗀	Other						
c	Preservation for future generations			·						
4	Provide a description of the organization's co	ollections and explain	n how th	ney further ti	he organizati	on's exen	npt purpo	se in Par	t XIV	
5	During the year, did the organization solicit o									
	to be sold to raise funds rather than to be ma								Yes	☐ No
Par	t IV Escrow and Custodial Arran					s" to Forn	n 990, Pa	rt IV, line	9, or	
	reported an amount on Form 990, Par	rt X, line 21.								
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for	contribution	s or other as	sets not	ncluded			
	on Form 990, Part X?		•						Yes	☐ No
ь	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowina	table:						
									Amount	
С	Beginning balance						1c			
	Additions during the year						1d			
-	Distributions during the year						1e			
f	Ending balance						1f			
	Did the organization include an amount on Fe	orm 990. Part X. line	212				<u> </u>		Yes	No
	If "Yes," explain the arrangement in Part XIV	01111 000, 1 art 71, mile	, _ ,						03	
Par		f the organization ar	swered	"Yes" to Fo	rm 990. Part	IV. line 10	<u> </u>			
		(a) Current year	I	rior year	(c) Two yea			rears back	(e) Four	ears back
1a	Beginning of year balance	(b) content year	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	nor your	(0) 1110 700	J Duon	<u></u>	0010 0001	70/1001	Touro buon
	Contributions									
	Net investment earnings, gains, and losses			,				·····		
d	Grants or scholarships	,						analar re		
	Other expenditures for facilities		-							
٠	and programs									
	Administrative expenses							·		
٠	End of year balance		-			···	******	**********	'	
g	•	r and balance hold :			E	t			E	
2	Provide the estimated percentage of the yea Board designated or quasi-endowment	ir end balance neld a	as. %							
a	Permanent endowment	%								
		% %								
			-4 45.					4		
Sa	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are nelo a	nu auministe	erea for th	ie organiz	zation	Г	Yes No
	by								-	res No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations	- h-k- d d -	0	ata la Do					3a(ii)	
	If "Yes" to 3a(ii), are the related organizations	•							3ь	
Da.	Describe in Part XIV the intended uses of the 1 VI Investments - Land, Building				Dort V line	10			<u>-</u>	
rai	·								(0 0	1
	Description of investment	(a) Cost or obasis (investi		1 ''	or other (other)		cumulate reciation	ea	(d) Book	value
1a	Land									
ь	Buildings									
С	Leasehold improvements									
d	Equipment			4	5,807.		36,7			,065.
е	Other				3,147.		9,6	33.	3	,514.
Total	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, colur	mn (B), line 1	0(c))			>	12	,579.

Schedule D (Form 990) 2009

Part VII Investments - Other Securities. Se	ee Form 990, Part X, line	12.		
(a) Description of security or category (including name of security)	(b) Book value	Co	(c) Method of valua ost or end-of-year mar	
Financial derivatives				
Closely-held equity interests				
Other				
LT CERTIFICATES OF DEPOSIT	351,000	• END-OF-Y	YEAR MARKET	VALUE
			· · · · · · · · · · · · · · · · · · ·	
			_	
			<u>,</u>	· <u></u>

Total. (Col (b) must equal Form 990, Part X, col (B) line 12)	351,000			
Part VIII Investments - Program Related. S	See Form 990, Part X, line	13.		
(a) Description of investment type	(b) Book value	Co	(c) Method of valua ost or end-of-year mar	
- "				
Total. (Col (b) must equal Form 990, Part X, col (B) line 13)				
Part IX Other Assets. See Form 990, Part X, line	e 15.			
(a)	Description			(b) Book value
		······································		
Total. (Column (b) must equal Form 990, Part X, col (B) lin			>	
Part X Other Liabilities. See Form 990, Part X	, line 25.			
(a) Description of liability		(b) Amount	4	
Federal income taxes		···	4	
			4	
			-	
			4	
			-	
<u></u>			-	
			4	
			4	
			4	
	· · · · · · · · · · · · · · · · · · ·		-	
Total. (Column (b) must equal Form 990, Part X, col (B) lin	e 25)		<u> </u>	

2. FIN 48 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. 932053 02-01-10

	3.00			_		
Par	t XI Reconciliation of Change in Net Assets from Form 990 to A	Audit	ed Financial :	State	ment	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1			952,270.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2			1,355,678.
3	Excess or (deficit) for the year Subtract line 2 from line 1		3	L		<403,408.
4	Net unrealized gains (losses) on investments		4			82,405.
5	Donated services and use of facilities		5	L		·
6	Investment expenses		6			
7	Prior period adjustments		7	<u> </u>		
8	Other (Describe in Part XIV.)		8			
9	Total adjustments (net) Add lines 4 through 8		9			82,405.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and		10			<321,003.
Par	t XII Reconciliation of Revenue per Audited Financial Statemen	nts W	ith Revenue <u>j</u>	<u>per R</u>	eturn	
1	Total revenue, gains, and other support per audited financial statements				1	1,037,255.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains on investments	2a	82,4	05.		
b	Donated services and use of facilities	2b	2,5	80.		
С	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIV.)	2d				
е	Add lines 2a through 2d				2e	84,985.
3	Subtract line 2e from line 1				3	952,270.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV)	4b				
С	Add lines 4a and 4b				4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)				5	952,270.
Pai	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents V	Vith Expenses	s per	Retu	
1	Total expenses and losses per audited financial statements				1	1,358,258.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.					
а	Donated services and use of facilities	2a	2,5	80.		
b	Prior year adjustments	2b				
С	Other losses	2c				
d	Other (Describe in Part XIV.)	2d				
е	Add lines 2a through 2d				2e	2,580.
3	Subtract line 2e from line 1				3	1,355,678.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV.)	4ь				
С	Add lines 4a and 4b				4c	0.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)				5	1,355,678.
	t XIV Supplemental Information					
Com	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III,	, lines 1	a and 4; Part IV,	lines 1	b and 2	2b; Part V, line 4; Part
X, lin	e 2; Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comple	lete this	part to provide a	any ado	ditional	information.
PAI	RT X, LINE 2:					
IAU	I IS PUBLICLY SUPPORTED AND EXEMPT FROM INC	COME	TAXES UN	IDER	IN	TERNAL
REV	VENUE CODE SECTION 501(C)(3). ACCORDINGLY,	TH:	E FINANCI	AL	STA	TEMENTS DO
NO.	REFLECT ANY PROVISION FOR INCOME TAXES.	UAN	HAS IMPI	EME	NTE	D FINANCIAL
<u>AC</u>	COUNTING STANDARDS BOARD (FASB) ASC 740, AC	CCOU	NTING FOR	UN S	CER	TAINTY IN
INC	COME TAXES, AND HAS DETERMINED THERE IS NO	MAT:	ERIAL IME	PACT	ON	THE
ነተዣ	JANCIAL STATEMENTS. WITH SOME EXCEPTIONS.	UAN	IS NO LO	NGF.	R SI	UBJЕСТ ТО

U.S. FEDERAL AND CALIFORNIA INCOME TAX EXAMINATIONS BY TAX AUTHORITIES FOR

Schedule [(Form 990)	2009		UNI	red an	IIM	IAL NATIONS		68-0124097 Page	5
Part XI	(Form 990) Supple:	ment	al Infor	mation	(continued	d)				
YEARS	PRIOR	10	2006	AND	2005,	K	RESPECTIVELY.			_
										
										_
						- -	·····			_
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									· · · · · · · · · · · · · · · · · · ·	
										_

SCHEDULEI (Form 990) Department of the Treasury Internal Revenue Service

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

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

OMB No 1545-0047	2009
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Open to Public Inspection Employer identification number **2** 68-0124097 (h) Purpose of grant or assistance X Yes recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000 Use Part IV and Schedule I-1 (Form 990) if additional space is needed

(d) Amount of els Amount of or government

(d) Amount of or government

(d) Amount of or government

(e) Amount of or government

(a) Amount of or government

(b) Amount of or government

(a) Amount of or government

(b) Amount of or government

(c) IRC section or gash grant assistance or government

(d) Amount of or government

(e) Amount of or government

(b) Amount of or government

(b) Amount of or government

(c) IRC section or gash grant assistance or government

(d) Amount of or gash grant assistance or government

(e) Amount of or gash grant assistance or government

(n) Method of or gash grant or gash grant assistance or government

(n) Method of or gash grant assistance or gash Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any 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 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Enter total number of section 501(c)(3) and government organizations UNITED ANIMAL NATIONS General Information on Grants and Assistance criteria used to award the grants or assistance? Enter total number of other organizations 1 (a) Name and address of organization Name of the organization Part Partil

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

Schedule I (Form 990) 2009

Page 2 68-0124097 UNITED ANIMAL NATIONS

Schedule I (Form 990) 2009 UNITED ANIMAL NATIONS

Part ## Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
ASSISTANCE WITH VETERINARY CARE COSTS, PAID DIRECTLY TO PROVIDER ON BEHALF OF INDIVIDUAL	512	84,335.	.0		
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	ide the information	n required in Part I,	line 2, and any other	additional information.	
SCHEDULE I, PART I, LINE 2: GRANTEE IS	1	REQUIRED TO S	TO SUBMIT PHOTOGRAPHS	OGRAPHS OF	
THE ANIMALS AIDED BY GRANT FUNDS AND M	UST	BE PREPARED	D TO REPORT ON ITS	T ON ITS	
PROJECT IN THE ORGANIZATION'S JOURNAL.	RNAL.				

Schedule I (Form 990) 2009

SCHEDULE O (Form 990)

Department of the Treasury

Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public Inspection

Internal Revenue Service

Name of the organization

UNITED ANIMAL NATIONS

Employer identification number 68-0124097

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
OTHERS AND MAXIMIZING THE USE OF ONLINE TECHNOLOGY.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS
APPROXIMATELY 550 DOGS FROM A PUPPY MILL IN KAUFMAN COUNTY, WHERE
MAINLY SMALL-BREED DOGS WERE FOUND LIVING IN FILTHY CONDITIONS AND
SUFFERING FROM CHRONIC WOUNDS, PARASITES AND SERIOUS INFECTIONS.
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS
MEDICATION AFTER THEY SUFFERED A PERSONAL TRAGEDY, SUCH AS A HOUSE FIRE
OR DOMESTIC VIOLENCE SITUATION.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
HUMANE EDUCATION AMBASSADOR READER PROGRAM (HEAR): EXPANDED THE HEAR
PROGRAM, WHICH HELPS CHILDREN DEVELOP CRITICAL THINKING SKILLS AND
EMPATHY FOR ANIMALS THROUGH STORIES AND DISCUSSION; TRAINED AND
SUPPORTED VOLUNTEERS, WHO REACHED MORE THAN 1,000 CHILDREN THROUGH 133
HEAR VISITS THROUGHOUT THE U.S.; COMMISSIONED A PROFESSIONAL RESEARCH
FIRM TO EXAMINE THE BENEFITS OF HEAR AS A PROGRAM MODEL FOR HUMANE
EDUCATION, THE STUDY SHOWING THAT HEAR OFFERS AN ENGAGING,
THOUGHT-PROVOKING AND SUBSTANTIVE LEARNING EXPERIENCE TO STUDENTS, ADDS
VALUE TO STUDENTS EVERYDAY EDUCATION, EXPANDS CHILDREN'S KNOWLEDGE OF
THE HUMAN-ANIMAL BOND AND RESPONSIBLE PET CARE, AND REINFORCES
PERSPECTIVE-TAKING SKILLS.
EXPENSES \$ 158160. INCLUDING GRANTS OF \$ 0. REVENUE \$ 1955.

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

UNITED ANIMAL NATIONS

Employer identification number 68-0124097

PREMARIN AWARENESS CAMPAIGN: EDUCATED WOMEN, DOCTORS AND OTHERS ABOUT HORMONE DRUGS MADE FROM PREGNANT MARES' URINE (PMU) AND HOW THIS AFFECTS HORSES AND WOMEN; FACILITATED THE ADOPTION OF 185 HORSES DISCARDED FROM THE PMU INDUSTRY THROUGH THE PMURESCUE.ORG WEB SITE, BRINGING THE TOTAL ADOPTED SINCE LATE 2003 TO MORE THAN 3,000; ADVERTISED PMURESCUE.ORG IN MULTIPLE PRINT AND ONLINE OUTLETS TO DRIVE TRAFFIC TO THE SITE AND ENCOURAGE ADOPTION OF PMU MARES AND FOALS; AND DISTRIBUTED 6,243 PIECES OF EDUCATIONAL LITERATURE ABOUT HOW HORSES ARE USED IN THE HORMONE REPLACEMENT DRUG INDUSTRY AND HOW WOMEN CAN FIND HUMANE ALTERNATIVES. INCLUDING GRANTS OF \$ 0. **EXPENSES \$ 59907.** REVENUE \$ 0. ADVOCACY: SUPPORTED OR OPPOSED 51 STATE AND FEDERAL BILLS RELATED TO ANIMAL CRUELTY, HORSE SLAUGHTER, EQUINE WELFARE, ANIMALS IN DOMESTIC VIOLENCE CASES AND ANIMALS IN DISASTERS; EDUCATED OUR MEMBERS ABOUT MANY OF THESE BILLS AND GAVE THEM THE INFORMATION THEY NEEDED TO CONTACT THEIR LEGISLATIVE REPRESENTATIVES IN SUPPORT/OPPOSITION; AS A MEMBER OF THE CALIFORNIA ANIMAL ASSOCIATION, ENCOURAGED THE STATE LEGISLATURE TO PASS AB 1122 IN CALIFORNIA TO PROHIBIT THE SALE OF A LIVE ANIMAL ON ANY STREET, HIGHWAY, PUBLIC RIGHT-OF-WAY, COMMERCIAL PARKING LOT, OR AT ANY OUTDOOR SPECIAL SALE, SWAP MEET, FLEA MARKET, PARKING LOT SALE, CARNIVAL OR BOARDWALK. EXPENSES \$ 29365. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

MY DOG IS COOL CAMPAIGN: EDUCATED PEOPLE ABOUT THE DANGERS OF LEAVING

SCHEDULE O

Supplemental Information to Form 990

(Form 990)

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

Department of the Treasury Internal Revenue Service

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

UNITED ANIMAL NATIONS

Employer identification number 68-0124097

TO SPREAD THIS VITAL SAFETY MESSAGE; DISTRIBUTED MORE THAN 25,000

EDUCATIONAL FLIERS, "DON'T LEAVE ME IN HERE, IT'S HOT," AND MAINTAINED

INTERACTIVE WEB SITE, WWW.MYDOGISCOOL.COM.

EXPENSES \$ 18488. INCLUDING GRANTS OF \$ 0. REVENUE \$ 2283.

FORM 990, PART VI, SECTION A, LINE 6: THERE IS ONE CLASS OF MEMBERS. THE MEMBERS ARE THOSE PERSONS WHO HAVE PAID THE APPLICABLE ANNUAL DUES FOR THE CURRENT CALENDAR YEAR.

FORM 990, PART VI, SECTION A, LINE 7A: THERE IS ONE CLASS OF MEMBERS. THE MEMBERS ARE THOSE PERSONS WHO HAVE PAID THE APPLICABLE ANNUAL DUES FOR THE CURRENT CALENDAR YEAR.

FORM 990, PART VI, SECTION A, LINE 7B: YES: MEMBERS HAVE THE RIGHT TO VOTE ONLY REGARDING THE FOLLOWING ISSUES: (1) THE ELECTION OF DIRECTORS; (2) THE DISPOSITION OF SUBSTANTIALLY ALL OF THE ORGANIZATION'S ASSETS; (3) THE MERGER OF THE ORGANIZATION; AND (4) THE DISSOLUTION OF THE ORGANIZATION.

IN ADDITION, ANY AMENDMENT OR REPEAL OF THE BYLAWS THAT WOULD MATERIALLY AND ADVERSELY AFFECT THE RIGHTS OF THE MEMBERS AS TO VOTING OR TRANSFER MUST BE APPROVED BY THE MEMBERS (INCLUDING A REQUIREMENT OF UNANIMOUS APPROVAL BY THE MEMBERS AS TO CERTAIN PROVISIONS OF THE BYLAWS).

FORM 990, PART VI, SECTION B, LINE 11: CFO WILL DISTRIBUTE FORM 990 TO

ORGANIZATION'S OFFICERS AND BOARD OF DIRECTORS VIA EMAIL BEFORE DOCUMENT IS

FILED WITH THE IRS AND WILL INCLUDE A SUMMARY REPORT HIGHLIGHTING KEY

POINTS FOR THEIR CONSIDERATION.

SCHEDULE O

Supplemental Information to Form 990

Department of the Treasury
Internal Revenue Service

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

Attach to Form 990.

2009 Open to Public Inspection

Name of the organization

UNITED ANIMAL NATIONS

Employer identification number 68-0124097

FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION'S CONFLICT OF INTEREST POLICY ("POLICY") APPLIES TO ALL DIRECTORS, OFFICERS, AND MEMBERS OF COMMITTEES WITH GOVERNING-BOARD DELEGATED POWERS (EACH AN "INTERESTED PERSON"). EACH INTERESTED PERSON IS PROVIDED WITH A COPY OF THE POLICY ANNUALLY, AND IS REQUIRED TO SIGN A STATEMENT AFFIRMING THAT HE OR SHE HAS RECEIVED A COPY OF THE POLICY, HAS READ AND UNDERSTOOD THE POLICY, HAS AGREED TO COMPLY WITH THE POLICY, AND UNDERSTANDS THAT THE ORGANIZATION IS A CHARITABLE ORGANIZATION AND THAT, TO MAINTAIN ITS FEDERAL TAX EXEMPTION, IT MUST ENGAGE PRIMARILY IN ACTIVITIES THAT ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PURPOSES. EACH INTERESTED PERSON IS REQUIRED TO DISCLOSE TO THE BOARD OF DIRECTORS (THE "BOARD") ANY DIRECT OR INDIRECT INTEREST IN A TRANSACTION OR ARRANGEMENT WHERE THE ORGANIZATION IS ALSO INVOLVED, AND THE BOARD (EXCLUDING ANY INTERESTED PERSON) MUST THEN REVIEW ALL MATERIAL FACTS AND REACH A DETERMINATION OF WHETHER A CONFLICT OF INTEREST EXISTS BY VOTE OF A MAJORITY OF THE DISINTERESTED DIRECTORS. PURSUANT TO THE POLICY, THE BOARD ALSO ANNUALLY REVIEWS OF THE COMPENSATION OF THE CEO AND CFO TO DETERMINE WHETHER SUCH COMPENSATION IS JUST AND REASONABLE.

FORM 990, PART VI, SECTION B, LINE 15: IN 2009, A SALARY SURVEY BASED ON GEOGRAPHIC LOCATION, ORGANIZATION BUDGET AND NONPROFIT FOCUS WAS COMPLETED FOR ALL STAFF POSITIONS. AT THIS TIME, THE BOARD REVIEWED THE CEO AND CFO SALARIES IN DETAIL AND FOUND THEM TO BE CONSISTENT WITH OTHER ORGANIZATIONS OF SIMILAR SIZE AND FOCUS.

SCHEDULE O

Supplemental Information to Form 990

(Form 990)

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization UNITED ANIMAL NATIONS	Employer identification number 68-0124097
AUDITED FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC	ON THE
ORGANIZATION'S WEB SITE. THE FORM 1023 IS AVAILABLE UPON	REQUEST.
FORM 990, PART XI, LINE 2C	
THE ORGANIZATION HAS A COMMITTEE THAT ASSUMES RESPONSIBIL	ITY FOR
OVERSIGHT OF THE FINANCIAL STATEMENT AUDIT, AND THIS PROC	ESS HAS NOT
CHANGED FROM PRIOR YEAR.	
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY	OF FORM 990:
AK, AL, AR, AZ, CA, CO, CT, DC, FL, GA, ID, IL, KS, KY, M	A, MD, ME, MI,
MN, MO, MS, NC, ND, NH, NJ, NM, NV, NY, OH, OK, OR, PA, R	I, SC, TN, UT,
VA, WA, WI, WV	

(L)

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Depreciation and Amortization (Including Information on Listed Property)

➤ See separate instructions.

► Attach to your tax return.

990

OMB No 1545-0172

Business or activity to which this form relates

Identifying number

UNITED ANIMAL NATIONS			FOR	м 99	0 PA	GE 10		68-0124097
Part Election To Expense Certain Prope	rty Under Section 17	9 Note. If you ha	ave any lis	ted pro	perty, co	mplete Part	V before y	ou complete Part I
1 Maximum amount. See the instruction	_·				-		1	250,000.
2 Total cost of section 179 property place	·-						2	
3 Threshold cost of section 179 property before reduction in limitation								800,000.
4 Reduction in limitation. Subtract line 3	from line 2. If zero	or less, enter -0-					4	
5 Dollar limitation for tax year Subtract line 4 from lin	e 1 If zero or less, enter	-0- If mamed filing se	eparately, see	instructio	ns		5	
6 (a) Description of p	roperty	(b) Cost (busine	ess use or	nly)	(c) Elected	cost	
								
7 Listed property. Enter the amount from				_ L	7			
8 Total elected cost of section 179 prop	-	ın column (c), lır	nes 6 and	7			8	
9 Tentative deduction. Enter the smaller							9	
10 Carryover of disallowed deduction from	-				_		10	
11 Business income limitation Enter the s		•		•	e 5		11	· · · · · · · · · · · · · · · · · · ·
12 Section 179 expense deduction. Add l					40		12	
13 Carryover of disallowed deduction to 2					13			
Note: Do not use Part II or Part III below for Part II Special Depreciation Allows				do lietos	d proper	hu 1		
······		-			- `	 -		
14 Special depreciation allowance for qua	lilled property (oth	er man listed pr	operty) pa	aceo in	service	uuring	144	
the tax year							15	
15 Property subject to section 168(f)(1) el	ection						16	7,288.
Part III MACRS Depreciation (Do no	at include listed or	onerty) (See ins	tructions	`			10	17200.
THE THE MINOR DEPRESATION (SO III	ot molade listed pr	Section		<u>' </u>				
17 MACRS deductions for assets placed	in conjice in tay ve			<u> </u>			17	
18 If you are electing to group any assets placed in se	-				ck here	▶ □	ا ''' ا	
Section B - Assets						ral Deprecia	tion Syste	em
(a) Classification of grounds	(b) Month and	(c) Basis for dep		(d) R	ecovery	(a) Convention	/A Mathad	(a) Depresenting deduction
(a) Classification of property	year placed in service	(business/investi only - see instr		period (e) Convention		(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property								
b 5-year property								
c 7-year property	╛							
d 10-year property								
e 15-year property	_							
f 20-year property	_					ļ		
g 25-year property				25	yrs		S/L	
h Residential rental property	/			27 !	5 yrs	MM	S/L	
h Residential rental property	/			27.	5 yrs.	MM	S/L	
i Nonresidential real property	/			39	yrs.	MM	S/L	
	/					MM	S/L	
Section C - Assets	Placed in Service	During 2009 Ta	x Year Us	sing the	Alterna	ative Deprec	iation Sys	tem
20a Class life	_						S/L	
b 12-year				12 yrs.			S/L	
c 40-year	/			40	yrs.	MM	S/L	
Part IV Summary (See Instructions)							F	
21 Listed property. Enter amount from lin							21	
22 Total. Add amounts from line 12, lines	•			•				7 000
Enter here and on the appropriate line	-	•	•	tions · s	ee instr.		22	7,288.
23 For assets shown above and placed in	-	current year, er	nter the		_			
portion of the basis attributable to sec	tion 263A costs			j	23			

.. ...

68-0124097 Page 2

recreation, or anusement? Note: For pay synchoic for you are justing the standard metaper into or disclotting lease expense, complete only 24a, 24b, columns (a) Note: For pay synchoic for pay shock price of Section 8. Depreciation and Other Information (Gautions: See the instructions for limits for passenger authority). Section A. Depreciation and Other Information (Gautions: See the instructions for limits for passenger without an expense of the payon o			utomobiles, ce	rtain oth	ner vehic	les, cell	lular telep	ohone	s, certain	comput	ers, and	property	used fo	or enterta	ınment	
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24a De year have evidence to support the becames directment use claumed? Yes	through (c) of	Section A, all	of Section B, a	and Sec	tion C if	applica	ble.							·	····	
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Type of property (filst vehicles steep libered in services and protections) and the protection of the	24a Do you have evidence to	1		nt use cla	aimed?	Y		_ No		T		nce writt	ten? L			
used more than 50% in a qualified business use: 1	Type of property	Date placed in	Business/ investment	Cost or		l (bu	Basis for depreciation (business/investment		Recovery	Method/		Depreciation		Elected section 179		
Property used more than 50% in a qualified business use: 1	25 Special depreciation all	owance for q	ualified listed p	oroperty	placed	ın servi	ce during	the ta	ax year an	ıd				1		
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2009 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 10

990

Current Year Deduction	7,288.	
Current Sec 179	0	
Accumulated Depreciation	39,085.	
Basis For Depreciation	58,954.	
Reduction In Basis	Ö	
Bus % Excl		
Unadjusted Cost Or Basis	58,954.	
L'ne No	16	
Life	000	
Method		
Date Acquired	VARIESSL	
Description	1VARIOUS ASSETS * TOTAL 990 PAGE 10 DEPR	
Asset	-	

(D) · Asset disposed

928102 06-24-09

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction