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Form **990**

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Dep: Inter	artment of nai Reven	the Treasury ue Service	The organization ma	y have to u	use a copy of this	return to satisf	fy state rep	orting requi	ements	Inspect	ion
A	For the	2011 cale	ndar year, or tax year beg	inning	01/01	, 2011, a	and ending	12	12/31 , 20 11		
В	Check if	applicable	C Name of organization Anim	nals Asia F	oundation				D Employe	er identification n	ımber
	Address	change	Doing Business As							31-1802788	
	Name ch	nange	Number and street (or P O b	ox if mail is	not delivered to stre	et address)	Room/suit	е	E Telephor	ne number	
	Initial ret	urn	300 Broadway Suite 32							415-677-9601	
	Terminat	ted	City or town, state or country	y, and ZIP +	4						
	Amende	d return	San Francisco, CA 94133						G Gross re	ceipts \$	946,320
	Applicat	ion pending	F Name and address of princip	al officer	Jill Robinson			H(a) Is this	group return	for affiliates? 🔲 Yes	✓ No
			300 Broadway, Suite 32, S	San Franci: 501(c) (sco, CA 94133					icluded? 🔲 Yes	
<u></u>	Tax-exe	o," attach a	list. (see instruction	ıns)							
<u>J</u>	Website	. ► ww	w animalsasia.org					H(c) Grou	exemption	number 🕨	
K	Form of	organization	Corporation Trust	Association	Other ►	L Ye	ar of formati	on 2001	M State	of legal domicile.	CA
P	art I	Summ			· · · · · · · · · · · · · · · · · · ·						
	1	Briefly de	escribe the organization's	s mission	or most signific	ant activities:	Advisu	ng and pron	otion of t	he just and kind	1
0		treatmen	nt of animals in Asia.								
ä											
Activities & Governance											
Š	2	Check th	nis box 🕨 🔲 if the organiz	ation disc	ontinued its op	erations or di	isposed c	f more than	1 25% of	its net assets.	
g	3	Number	of voting members of the	e governin	g body (Part VI	, line 1a) . .			3		5
es 4	4	Number	of independent voting m	embers of	f the governing	body (Part VI	l, line 1b)		4		2
ž	5	Total nu	mber of individuals emplo	oyed in ca	lendar year 20°	I1 (Part V, line	e 2a)		5		4
Ċ	6	Total nu	mber of volunteers (estim	nate if nec	essary)			, .	6		25
٩	7a	Total uni	related business revenue	from Part	t VIII, column (C), line 12			7a		54,566
	b	Net unre	elated business taxable in	come from	n Form 990-	ine 34	· .		7b		54,566
	Ī			I	RECE			Prior Y	ear	Current Y	ear
0	8	Contribu	itions and grants (Part VI	II, line th)	.		ol. [784,136		891,141
Revenue	9	9 Program service revenue (Part VIII, line 201) 10 Investment income (Part VIII, column (Al 47hes 3, 4, and 70) 2013									0
eve	10	Investme	ent income (Part VIII, coli		512		613				
Œ	11	Other re	venue (Part VIII, column ((A), lines 5	,6d, 8c, 9c, 10	c. and 11e)	œ . T		10,388		54,566
	12	Total rev	renue-add lines 8 throug	h 11 (musi	equel/Pertivitt.	լջջluդող (//) , li	ine (2)		795,036		946,320
	13	Grants a	and similar amounts paid	(Part IKc	olumn Al fines	₹{\28) ♥ I			420,000		500,000
	14	Benefits	paid to or for members ((Part IX, co	olumn (A), line 4	1)	̄ . 「				0
Ø	15	Salaries,	other compensation, emp	loyee ben	efits (Part IX, co	lumn (A), lines	5–10)		125,978		166,164
Expenses	16a	Professi	onal fundraising fees (Pa	rt IX, colur	mn (A), line 11e	e)	[20,160		0
g	ь	Total fur	ndraising expenses (Part	IX, columi	n (D), line 25)	2	28,602				
û	17	Other ex	penses (Part IX, column	(A), lines	11a-11d, 11f-2	4e)			184,136		253,819
	18	Total ex	penses Add lines 13-17	(must equ	al Part IX, colu	mn (A), line 2:	5) . [750,274		919,983
	19	Revenue	e less expenses Subtrac	t line 18 fr	om line 12 .		[44,762		26,337
ets or	Sel							Beginning of C	urrent Year	End of Y	
sets	20	Total as	sets (Part X, line 16)				[319,569		344,852
Not Ass	21	Total lia	bilities (Part X, line 26)				[1,270		216
ž,	22	Net asse	ets or fund balances. Sub	tract line	21 from line 20	<u>.</u> .	[318,299		344,636
F	art II	Signa	ature Block						_		
			jury, i declare that I have examin							my knowledge an	d belief, it if
tr	ue, corre	ct, and comp	plete. Declaration of preparer (of	ther than offic	cer) is based on all	information of wh	nich prepare	has any knov	rledge		
			and	lope	na			T	10/11/0	2012	
Si	gn	Sig	nature of officer		•			D	ale		
H	ere	lit.	I Robinson, CEO								
_		Тур	e or print name and title								
P	 aid	Print/T	ype preparer's name	Pre	parer's signature	A 1		ate/ /	Check	[Z] If PTIN	
	aiu repar	Annet	te Cook	10	unette A	oth	&	2/21/12	self-em		17286 6
	se On)	//	-			m's EIN ▶	20-4728	
J	Je Oli	עיי –	address ► 510 3rd Street		Oakland, CA 946	507			one no.	510-350-2	
M	ay the I		ss this return with the pre				3				s No

	0 (2011)				Page 2					
art l		ment of Program Service A		·						
	Check	if Schedule O contains a re	sponse to any question in this Part	<u>m</u>	<u> C</u>					
1		ribe the organization's missio								
	Advising an	d promotion of the just and kin	d treatment of Animals in Asia							

2	Did the org	anization undertake any signi	ficant program services during the ye	ar which were not listed on the						
	prior Form	990 or 990-EZ?			☑ No					
		scribe these new services on								
3	Did the or	ganization cease conducting	, or make significant changes in h	ow it conducts, any program						
	services?									
		scribe these changes on Sch								
4	Describe th	e organization's program ser	vice accomplishments for each of its	three largest program services, as me	asured b					
	grants and	section 50 (c)(3) and 50 (c)(a) organizations and section 4947(a expenses, and revenue, if any, for ea	(1) trusts are required to report the a	lmount o					
	grants and	anocations to others, the total	expenses, and revenue, if any, for ea	acii program service reported.						
4a	(Code:	\ (Expenses \$	619 478 including grants of \$	0) (Revenue \$	0 1					
	Advising ar	d promotion of the just and kin	d treatment of Animals in Asia		/					

					.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
		·								
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$)					
		·····			**********					
		· ·								
	_^^^									

				•						
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)					
		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~								
	***************************************									
				***********************************						
	************									
		~~~~~								
			•••••••••••••••	***************************************						

4d	Other prog	ram services (Describe in Sch \$ 0 including g								

orm 990	0 (2011)		F	age 3
Part I	V Checklist of Required Schedules			
			Yes	No
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	<	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	7	
	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		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		√
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		√
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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			V
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	9		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	10_		1
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI			
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	11a		V
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16° If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	<u> </u>	1
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	1	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV.		1	<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	15		_
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	16	 	1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			/
19	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	\vdash	/
20 -	If "Yes," complete Schedule G, Part III	19		1
20 a	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		Ľ

	0 (2011)		ا	Page 4
Part	Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization		Yes	No
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		✓
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		1
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		1
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		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		/
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		1
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		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	,,,,,,,,	28a		✓
С	Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28b		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
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	1	
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)? Did the organization receive any payment from or engage in any transaction with a controlled entity within the	35a		1
36	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	\vdash	1
37	related organization? If "Yes," complete Schedule R, Part V, line 2	36		+
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
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	1	

Part	V Statements Regarding Other IRS Filings and Tax Compliance	 -		age 3
	Check if Schedule O contains a response to any question in this Part V			
		Ť	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0		1	\$
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	✓	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 4			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	✓	
30	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).			ال ۱۰۰۰
3a	Old the organization have unrelated business gross income of \$1,000 or more during the year?	3a	V	
b 4a	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	✓	
44	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)?	40		1
h	If "Yes," enter the name of the foreign country: ▶	4a		-
-	See instructions for 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		· /
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		-
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	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		✓
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
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	✓	
р	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	1	<u></u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			١.
	required to file Form 8282?	7c		/
d	If "Yes," indicate the number of Forms 8282 filed during the year	_		-,-
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7e		/
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7f	1	
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h	1	 -
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	 '''	<u> </u>	<u> </u>
	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	_	1
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		\square
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12	1	ļ	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	Į		
11	Section 501(c)(12) organizations. Enter:		1	Ì
a	Gross income from members or shareholders	-		1
р	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		l	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	 -	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . 12b	120	 	\vdash
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		1
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	†	t^-
-	Note. See the instructions for additional information the organization must report on Schedule O.	1		t^-
b	Enter the amount of reserves the organization is required to maintain by the states in which		1	1
	the organization is licensed to issue qualified health plans		1	
С	Enter the amount of reserves on hand	1	L	1
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		

Form 99					Page 6
Part '	, , , , , , , , , , , , , , , , , , , ,				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Sc	chedule O. Se	ee ins	tructi	ons.
	Check if Schedule O contains a response to any question in this Part VI	<u> </u>		<u>.</u> .	<u> 7</u>
Section	on A. Governing Body and Management				
4		r		Yes	No
па	Enter the number of voting members of the governing body at the end of the tax year . 1a	5	- 1		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar		}	i	
	committee, explain in Schedule O.		ł		
b	Enter the number of voting members included in line 1a, above, who are independent . 1b	2			!
2	Did any officer, director, trustee, or key employee have a family relationship or a business relation		- 1	ľ	1 :
	any other officer, director, trustee, or key employee?		2		1
3	Did the organization delegate control over management duties customarily performed by or under	the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other personal company or oth	ion? . [3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was	F	4		✓
5	Did the organization become aware during the year of a significant diversion of the organization's a	ssets? .	5		✓
6	Did the organization have members or stockholders?		6		✓
7a	Did the organization have members, stockholders, or other persons who had the power to elect one or more members of the governing body?	or appoint	_		١,
h	Are any governance decisions of the organization reserved to (or subject to approval by)		7a		-
b	stockholders, or persons other than the governing body?	members,	7.		1
8	Did the organization contemporaneously document the meetings held or written actions underta	ken during	7b	_	
•	the year by the following:	nen danng	ı		
а	The governing body?		8a	- <u>-</u> '	
b	Each committee with authority to act on behalf of the governing body?		8b	1	t
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be	reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		✓
Secti	on B. Policies (This Section B requests information about policies not required by the Inte	emal Reveni	ue Co		T
		ſ		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		/
b	If "Yes," did the organization have written policies and procedures governing the activities of sucl affiliates, and branches to ensure their operations are consistent with the organization's exempt pu		40h		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing		10b 11a	1	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	,	112	_	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	<i>.</i>	12a	1	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to conflicts?	12b	1	T
С	Did the organization regularly and consistently monitor and enforce compliance with the policy	ı? If "Yes,"			
	describe in Schedule O how this was done		12c	<u> </u>	<u> </u>
13	Did the organization have a written whistleblower policy?		13		✓
14	Did the organization have a written document retention and destruction policy?		14	<u> </u>	 ✓
15	Did the process for determining compensation of the following persons include a review and a independent persons, comparability data, and contemporaneous substantiation of the deliberation and				
_	The organization's CEO, Executive Director, or top management official	accision:	15a		1
a b	Other officers or key employees of the organization	• •	15b		1
J	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	• • •	.55	 	†
16a		лаngement	ļ		1
	with a taxable entity during the year?		16a	1	1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to				
	participation in joint venture arrangements under applicable federal tax law, and take steps to sa		 	~	
	organization's exempt status with respect to such arrangements?		16b	<u> </u>	<u></u>
	ion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 9	On-T (Section	501	(0)(3)	e oak
18	available for public inspection. Indicate how you made these available Check all that apply.	20-1 (28CHOL	. 501	(0)(0):	, orna
	Own website Another's website Upon request				
19	Describe in Schedule O whether (and if so, how), the organization made its governing documer	its, conflict c	of inte	rest i	policy
	and financial statements available to the public during the tax year.				,
20	State the name, physical address, and telephone number of the person who possesses the books	and records	of the	Э	
	organization: ► Alice Ng. (415)677-9601				

F	^^^	M0441	
rom	agû	(2011)	

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Para	•

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

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

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization nor	any relate	d orga	aniz	atio	n c	ompe	nsa	ited any curren	t officer, director	, or trustee.
				(0	>)					
(A)	(B)	١			ition			(D)	(E)	(F)
Name and Title	Average	(do n	ot ch	eck	more	than o	one one	Reportable	Reportable	Estimated
	hours per	office	a aux	ad	irect	or/trust	(99)	compensation	compensation from	amount of
	week (describe	익글	5	Q	~	3 =	تر	from the	related organizations	other compensation
	hours for	윷뚩	1 to 1	Officer	37 6	룡융	Former	organization	(W-2/1099-MISC)	from the
	related	용률	함	•	죑	31 C	🖺	(W-2/1099-MISC)	· ·	organization
	organizations in Schedule	ำสู	ᇍ		Key employee	뎚	!	1	[and related organizations
	O)	Individual trustee or director	Institutional trustee		•	1 25				o.ga.nza.co.z
			#			Highest compensated employee				
I'll Dakina an										
Jill Robinson		/		/			ŀ	1		
CEO	0.5		-	<u> </u>	⊢		├	0	0	91,819
John Warham		1	1	/	1	1		1		_
CFO Porio Chico	0.5	-	-	<u> </u>		├─	├	0	0	0
Boris Chiao	٠, ١	1								74 000
Director	0.5	\ <u> </u>	⊢	\vdash	-		⊢	0		74,280
Tamara Bond	1 .	1								50.004
Director	11	-	┝	┝	-	 -	╂—	0	0	53,331
Gail Cochrane	1 00	1	1		1	ļ	l	١ .		
Director Moreon Leanne	0.5		╁		╁		┢╌		0	0
Morgan Lance	40		l	/				55 000		
Officer	40	╁	┢	ľ	\vdash		╁	55,000	 	
							L			
	-									
	 	├─	╁	├─	⊢	-	╁	 	 	
	1			1						
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	 	\vdash		↓_		├	╄	_		
	1									
•	1		T	Γ	T		1			
	 	—	┼	⊢	₩	↓	╀	_		_
	4									}
		1	T	T	✝	1	\top		<u> </u>	
***************************************	1		1		1		1		1	

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
	(A) Name and title	(B) Average hours per	box, i	Position not check many to unless person cer and a direct		ition mare	is both	าฮก	(D) Reportable compensation	(E) Reportable compensation	from amour		nated unt of	
		week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizatlor (W-2/1099-MI		compe from organi and re	her insation in the ization elated zations	
												_		
				L										
		<u> </u>			_	L					_			
		-		_				_						
			-	_				_						
		ļ			_			L		<u></u>				
1b	Sub-total	1					<u> </u>	<u> </u>	55,000		0		211	0.430
С	Total from continuation sheets to Part Total (add lines 1b and 1c)		оп А					*	55,000		0			9,430
2	Total number of individuals (including bu reportable compensation from the organ	t not limited	d to th									of		7,430
3	Did the organization list any former of employee on line 1a? If "Yes," complete	fficer, direc	ctor, o								nsated		Yes	No 🗸
4	For any individual listed on line 1a, is the organization and related organizations individual													- 🗸
5	Did any person listed on line 1a receive of for services rendered to the organization									zation or ind	ividual			<u>▼</u>
Secti	on B. Independent Contractors										_			
	Complete this table for your five highest compensation from the organization. Re year.													3X
	(A) Name and business ad	dress		-					(B) Description of	services		(C) Compens	ation	
								+						
								†						
								\bot						
2	Total number of independent contract received more than \$100,000 of comper							o t		ove) who				
	received more man \$100,000 or comper	isation non		oi ga	unzi	auUl			0	,				

Part	VIII	Statement of Revenue				
			(A) Total rovenuo	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ats ts	1a	Federated campaigns 1a 0				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b 0			1	
S, E	С	Fundraising events 1c 0				
Gift	d	Related organizations 1d 0		\	İ	
ıs, i	е	Government grants (contributions) 1e 0				
ition er S	f	All other contributions, gifts, grants,				
ot C		and similar amounts not included above 1f 891,141				
onti od (g	Noncash contributions included in lines 1a-1f. \$				
	h	Total. Add lines 1a–1f	891,141			
Program Service Revenue	_	Business Code			1	
өле	2a					
8	ь					
7	C					
Š	ď					
Fai	e	All other program control revenue				
5	f g	All other program service revenue Total. Add lines 2a–2f	<u> </u>			
	3	Investment income (including dividends, interest,	0		···	
		and other similar amounts)	613	613	o	•
	4	Income from investment of tax-exempt bond proceeds ▶	0	0	0	0
	5	Royalties	0	0	0	
		(i) Real (ii) Personal				
	6a	Gross rents .				
	ь	Less: rental expenses				
	С	Rental income or (loss) 0 0				
	d	Net rental income or (loss) . ▶	1		-	
	7a	Gross amount from sales of (i) Securities (ii) Other				
	ь	assets other than inventory Less cost or other basis				
	_	and sales expenses				
	d	Gain or (loss)	1			=
er Revenue	8a	Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c). See Part IV, line 18				
ot P	Ь	Less: direct expenses b	1]	
J	i	Net income or (loss) from fundraising events . >	1	<u> </u>		
	9a	Gross income from gaming activities. See Part IV, line 19 a				
		Less. direct expenses b Net income or (loss) from gaming activities ▶	1			-
		Gross sales of inventory, less returns and allowances a				
	ь	Less: cost of goods sold b	_			
	<u> </u>	Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code	ļ			
	11a	Miscellaneous Provenue Business Code	4	-		
	b		-	 -	 	
	C		 	 	 	
	d	All other revenue	54,566	j	54,566	0
	l e	Total. Add lines 11a-11d	54,566		34,366	
	12	Total revenue. See instructions.	946,320		54,566	0
			2.0,020			Form 990 (2011)

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).

- 7	1-77 (-77				
	Check if Schedule O contains a respons	se to any question i	n this Part IX		
	t include amounts reported on lines 6b, 7b, , 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			general en person	g.i.perioes
	organizations in the United States. See Part IV, line 21	اه	0		i ,
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0			
3	Grants and other assistance to governments,				,
Ū	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	500 000			
4	Benefits paid to or for members	500,000	500,000		
5	Compensation of current officers, directors,	0	0		
9	trustees, and key employees				
		55,000	22,000	11,000	22,000
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and				
	persons (as defined under section 4958(c)(3)(B)]	
_		0	0	0	0
7	Other salaries and wages	99,387	39,755	19,877	39,755
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)	0	0	0	0
9	Other employee benefits	0	0	0	0
10	Payroll taxes	11,777	4,711	2,355	4,711
11	Fees for services (non-employees).				
а	Management	62,721	0	0	62,721
b	Legal	10	0	10	0
С	Accounting	4,050	0	4,050	0
d	Lobbying	0	0	0	0
е	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	0	0	0	0
9	Other	2,223	889	667	667
12	Advertising and promotion	55,987	16,796	0	39,191
13	Office expenses	61,332	15,799	10,396	35,137
14	Information technology	3,570	1,968	534	1,068
15	Royalties	0	0	0	0
16	Occupancy	10,800	3,240	4,320	3,240
17	Travel	22,785	6,835	0	15,950
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	o	0	o	0
19	Conferences, conventions, and meetings .	3,327	3,327	0	0
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	. 0
22	Depreciation, depletion, and amortization .	0	0	0	0
23	Insurance	10,395	4,158	2,079	4,158
24	Other expenses, Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	Bank and credit card fees	16,619	0	16,615	4
b					
c					
d					
e	All other expenses				
25	All other expenses Total functional expenses. Add lines 1 through 24e	919,983	619,478	71,903	228,602
26	Joint costs. Complete this line only if the	2,2,000			
-	organization reported in column (B) joint costs	1			
	from a combined educational campaign and fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)	\	l		

art X	Balance Sheet			
		(A) Beginning of year		(B) End of year
1	Cash—non-interest-bearing	24,020	1	156,46
2	Savings and temporary cash investments	174,268	2	147,82
3	Pledges and grants receivable, net	45,997	3	38,97
4	Accounts receivable, net	0	4	
5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary			
	employees' beneficiary organizations (see instructions)	0	6	
7	Notes and loans receivable, net	0	7	
8	Inventories for sale or use	0	8	
9	Prepaid expenses and deferred charges	3,100	9	1,60
10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
Ь	Less: accumulated depreciation 10b	0	10c	
11	Investments—publicly traded securities	0	11	
12	Investments—other securities. See Part IV, line 11	0	12	
13	Investments—program-related. See Part IV, line 11	0	13	
14	Intangible assets	0	14	
15	Other assets. See Part IV, line 11	72,184	15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	319,569	16	344,8
17	Accounts payable and accrued expenses	1,270	17	2
18	Grants payable	0	18	
19	Deferred revenue	0	19	
20	Tax-exempt bond liabilities	0	20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D.	0	21	
22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons.			
	Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties	0	23	ļ
24	Unsecured notes and loans payable to unrelated third parties	0	24	ļ
25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	o	25	
26	Total liabilities. Add lines 17 through 25	1,270	_	
	Organizations that follow SFAS 117, check here ▶ □ and complete lines 27 through 29, and lines 33 and 34.	1,270		
27	Unrestricted net assets		27	
28	Temporarily restricted net assets		28	
29	Permanently restricted net assets		29	
27 28 29 30 31 32 33	Organizations that do not follow SFAS 117, check here ▶ ☑ and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds	0	30	
31	Paid-in or capital surplus, or land, building, or equipment fund	0	31	
32	Retained earnings, endowment, accumulated income, or other funds	318,299	32	344,6
33	Total net assets or fund balances	318,299		344,0
34	Total liabilities and net assets/fund balances	319,569		344,8

Form 99	0 (2011)		Pa	ige 12
Part	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response to any question in this Part XI	<u></u>	<u></u>	
1	Total revenue (must equal Part VIII, column (A), line 12)		94	6,320
2	Total expenses (must equal Part IX, column (A), line 25)		91	9,983
3	Revenue less expenses. Subtract line 2 from line 1		2	6,337
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		31	8,299
5	Other changes in net assets or fund balances (explain in Schedule O)			0
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,			
	column (B))		34	4,636
Part	XII Financial Statements and Reporting		-	
	Check if Schedule O contains a response to any question in this Part XII	· · · ·		
			Yes	No
1	Accounting method used to prepare the Form 990. Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain a Schedule O.	n		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	. 2a	l	1
b	Were the organization's financial statements audited by an independent accountant?	2b		1
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh	ıt 🗀		
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain i Schedule O	n 📗		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year wer issued on a separate basis, consolidated basis, or both:	е		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		1	۱ ,
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth the Single Audit Act and OMB Circular A-133?	n 3a	-	1
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	e 3b		
		For	m 990	(2011)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

Open to Public Inspection

	J. U.							ļ	unpioyer la	enuncation	number	
Anım	als /	Asia Foundation								31-180		
Par	t I	Reason fo	or Public Char	ity Status (All organ	nizations	must co	omplete	this par	t.) See ıı	nstructio	ns.	
The c				tion because it is: (For								
1		A church, conv	ention of church	nes, or association of	churches	describe	d in sect	ion 170(b)(1)(A)(i)).		
2				170(b)(1)(A)(ii). (Attac								
3				pital service organiza			ection 1	70(b)(1)(Alfiii).			
4		A medical rese	arch organizatio	n operated in conjunc	ction with	a hospita	al describ	ed in se	ction 170	(b)(1)(A)(i	iii). Enter	the
			e, city, and state							1-11-10-90	,,, =	
5			n operated for t	he benefit of a colleg	ge or univ	versity ov	vned or o	perated	by a go	vernment	al unit de	escribed in
6	\Box	A federal, state	e or local govern	ment or governmenta	al unit des	scribed in	section	170(5)(1	1(Δ1(ν)			
7		An organizatio	n that normally i	receives a substantia (A)(vi). (Complete Par	part of	its suppo	rt from a	governn	nental un	it or from	the gen	eral public
8		A community to	rust described in	section 170(b)(1)(A)	(vi). (Con	nplete Pa	rt II.)					
9		An organization receipts from support from	n that normally i activities related gross investmei	receives. (1) more that it to its exempt function in the income and unrelifter June 30, 1975. Se	an 331/3% ions—sub ated bus	of its su oject to c siness tax	pport fro ertain ex able inc	ceptions ome (les	, and (2) is section	no more	than 33	1/3% of its
10		An organizatioi	n organized and	operated exclusively	to test fo	r public s	afetv. Se	e sectio	n 509(a)(4).		
11				d operated exclusive							or to car	roy out the
•		purposes of o	ne or more pub	licly supported organ describes the type of	nizations	described	in secti	on 509(a)(1) or se	ection 509	9(a)(2). So	ee section
		a ☐ Type I	ь 🗆 1			III-Functi		•			Type III	-Other
				that the organization					u bu ono			
C			ndation manage	rs and other than one								
f			ation received a theck this box.	written determination	on from t	the IRS t	hat it is	a Type	i, Type i	I, or Typ	e III sup	porting
g		Since August	17, 2006, has th	ne organization accep	oted anv	aift or co	ntributio	n from a	nv of the	.		_
Ū		following perso		,	•	•			,			
		(i) A person v	vho directly or in	ndirectly controls, eithody of the supported o						d in (ii) ar	11g(i)	Yes No
			-	on described in (i) abo	-					•		
		·									11g(ii)	
				a person described in							11g(iii)	<u> </u>
h				on about the supporte								
(1)		e of supported ganization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	in col (i) lis	erganization sted in your document?	the organ	ou notify nization in of your oort?	organiza (i) organi	s the tion in col zed in the S.?		mount of pport
				(300388000113))	Yes	No	Yes	No	Yes	No	ĺ	
/A\		·										
(A)								<u> </u>			·	
(B)												
(C)												
(D)		_										
(E)												
				· · · · · · · · · · · · · · · · · · ·	1		<u> </u>	<u> </u>		1		

Total

18

Schedul	e A (Form 990 or 990-EZ) 2011						Page 2
Part		tions Descri	bed in Section	ons 170(b)(1)	(A)(iv) and 1	70(b)(1)(A)(vi)
	(Complete only if you checked th	e box on line	5, 7, or 8 of	Part I or if the	organization	n failed to qua	llify under
	Part III. If the organization fails to	qualify unde	<u>r the tests lis</u>	ted below, pl	ease comple	te Part III.)	
	on A. Public Support						
	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and					·	
	membership fees received. (Do not include any "unusual grants.")						
2	· · · · · · · · · · · · · · · · · · ·	445,028	652,084	659,940	784,136	891,141	3,432,329
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge			_			
4	Total. Add lines 1 through 3	445,028	652,084	659,940	784,136	891,141	3,432,329
5	The portion of total contributions by each person (other than a				÷	, ,	
	governmental unit or publicly						
	supported organization) included on				.	2	
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)			İ		ļ	
_ 6	Public support. Subtract line 5 from line 4.						3,432,329
	on B. Total Support						
	dar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total_
7	Amounts from line 4	445,028	652,084	659,940	784,136	891,141	3,432,329
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	5.140					
9	Net income from unrelated business	6,148	2,083	728	512	613	10,084
3	activities, whether or not the business			j			
	is regularly carried on	12,029	16,319	18,139	10,388	54,566	111,441
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	12,020	10,313	10,100	10,000	34,000	0
11	Total support. Add lines 7 through 10						3,553,854
12	Gross receipts from related activities, etc	. (see instruction	ons)			12	
13	First five years. If the Form 990 is for the	ne organization	i's first, secon	d, third, fourth	, or fifth tax y	ear as a sectio	n 501(c)(3)
	organization, check this box and stop he			<u> </u>	<u> </u>	<u> </u>	🕨 🗆
Secti	on C. Computation of Public Suppor						
14	Public support percentage for 2011 (line to		-			14	96.58 %
15 16a	Public support percentage from 2010 Sci 331/3% support test—2011. If the organi	zation did not	check the box	on line 13, and			
	box and stop here. The organization qua	•		•			_
b	331/3% support test—2010. If the organ					e 15 is 33½%	
	check this box and stop here. The organ	•		.,	•		. ▶ 🗀
17a	10%-facts-and-circumstances test—2 10% or more, and if the organization me Part IV how the organization meets the "i	ets the "facts- facts-and-circu	and-circumsta ımstances" tes	nces" test, che	eck this box a	nd stop here. E	Explain in
_	organization						
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organiza Explain in Part IV how the organization in supported organization	ition meets the neets the "fact	e "facts-and-ci s-and-circums	ircumstances" tances" test. T	test, check to The organization	his box and st on qualifies as a	op here.

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below, please complete Part II.)

Section	on A. Public Support	under the te	ests listed bei	ow, please co	omplete Part	11.}	
	dar year (or fiscal year beginning in) ▶	(a) 2007	(h) 2000	(-) 0000	L (4) 0040	1.1.0044	(0 T.1.1
1	Gifts, grants, contributions, and membership fees	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise		· · · · · · · · · · · · · · · · · · ·			 	
	sold or services performed, or facilities furnished in any activity that is related to the		1	Ì		ì	
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an		··			-	
	unrelated trade or business under section 513					1	
4	Tax revenues levied for the		****	 	· · · · · · · · · · · · · · · · · · ·		
	organization's benefit and either paid to or expended on its behalf						:
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5			 		<u> </u>	
	Amounts included on lines 1, 2, and 3		 			 	1
	received from disqualified persons .			1		j	
b	Amounts included on lines 2 and 3						1
	received from other than disqualified		1				
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year			<u> </u>			
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from			4		養之類子	1
	líne 6.)		1	<u> </u>			<u> </u>
	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6		 	ļ		<u> </u>	
10a							
	payments received on secunties loans, rents, royalties and income from similar sources.				1		1
	·		 	<u> </u>	 	 	
D	Unrelated business taxable income (less						
	section 511 taxes) from businesses acquired after June 30, 1975						
	•		- 	<u> </u>		 	
	Add lines 10a and 10b		 				
11	Net income from unrelated business activities not included in line 10b, whether		ļ				
	or not the business is regularly carried on						
12	Other income. Do not include gain or		 			 	
12	loss from the sale of capital assets			1		1	
	(Explain in Part IV.)			Ì]	}
13	Total support. (Add lines 9, 10c, 11,			 		 	1
-	and 12.)						
14	First five years. If the Form 990 is for the	ne organizatio	on's first, seco	nd, third, fourt	h, or fifth tax	year as a sec	tion 501(c)(3)
	organization, check this box and stop he	re					▶ [
Sect	ion C. Computation of Public Support			-			
15	Public support percentage for 2011 (line	8, column (f)	divided by line	13, column (f))		. 15	%
16	Public support percentage from 2010 Sci	hedule A, Par	t III, line 15 .	<u> </u>	<u> </u>	. 16	%
Sect	ion D. Computation of Investment In						
17	Investment income percentage for 2011					. 17	%
18	Investment income percentage from 2010					. 18	%
19a	331/2% support tests—2011. If the organ						
	17 is not more than 331/3%, check this box		=	•		-	_
b	• • • • • • • • • • • • • • • • • • • •						
	line 18 is not more than 331/2%, check this		_				·
20	Private foundation. If the organization d	id not check	a box on line 1.	4, 19a, or 19b,	, cneck this bo	x and see inst	ructions 🕨 📗

Scuedrie V (1	-om 980 or 980-EZ) 2011	Page 4
Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).	<u> </u>

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### SCHEDULE F (Form 990)

Department of the Treasury

# Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

2011

Open to Public Inspection

	venue Service					ins	spection
Name of the	he organization					Employer ider	ntification number
	Asia Foundation			·		31-1	1802788
Part I	Form 990, Part IV, line 1	14b.		the United States. Comp			ered "Yes" to
1 F	For grantmakers. Does the	organization	maintain reco	rds to substantiate the am	ount of its grants	and other	
	assistance, the grantees' elig grants or assistance?		e grants or as				
,	grants or assistance:		• •				
	For grantmakers. Describe assistance outside the Unite		he organizati	on's procedures for monit	toring the use of	its grants	and other
3 /	Activities per Region (The fo	llowing Part	l, line 3 table o	can be duplicated if addition	nal space is need	ed.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity lister a program ser describe specific service(s) in re	vice. type of	(f) Total expenditures for and investments in region
(1) E	ast Asia and the Pacific	0	0	Program Services	AAF Vietnam pro	tecting	500,000
(2)			1			ļ	
_(2)	<del></del>						
(3)							
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(15)							
(16)							
(17)							
	Sub-total	<u> </u>	<del> </del>		7, 47.	- 1	······
D	Total from continuation	1	1	1	1 "	`	

sheets to Part I . . . . . . c Totals (add lines 3a and 3b)

Page 2

Schedule F (Form 990) 2011

Schadulo F (Form 990) 2011

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Enter total number of other organizations or entities

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Page 3

Schedule F (Form 990) 2011

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance Part III

(1)				
(2)				
(6)				
(4)				
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(16)				
(11)				
(18)				

Schedulo F (Form 990) 2011

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PAGE	-

Part I	V Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	☐ Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Yes	<b></b> No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	☐ Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)		✓ No

Part V	Form 990) 2011 Supplemental Information	Page 5
	Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part	ll
	provide any additional information (see instructions).	
Schedule	F, Part I, Line 2 - Periodic reports are required from the NGO to the organization with detail accounting of all expenses.	
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### **SCHEDULE 0** (Form 990 or 990-EZ)

# Supplemental Information to Form 990 or 990-EZ

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

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ▶ Attach to Form 990 or 990-EZ.

Inspection

Name of the organization	Employer identification number
Animals Asia Foundation	31-1802788
Form 990, Part VI, Section B, Line 11b - The Board of Directors is provided with a draft of the IRS Form	1 990 through email for review and
input prior to finalization and submission to the IRS.	
Form 000 Part VI Section P. Line 12a. Hembers of the Board of Directors are required to displace on	efficient of Interest content of the second
Form 990, Part VI, Section B, Line 12c - Members of the Board of Directors are required to disclose co during voting sessions and annual as part of the new year renewal of Board membership.	nflicts of interest contemporaneously
during voting sessions and armad as part of the fiew year tenewal or board membership.	***************************************
Form 990, Part VI, Section C, Line 19 - The organization makes its governing documents, conflict of in	terest policy, and financial
statements available to the public upon request.	
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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Animals Asia Foundation

Partl

Name of the organization

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" to Form 890, Part IV, line 33, 34, 35, 36, or 37.

► See separate instructions. ■ Attach to Form 890.

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

Open to Public Inspection 2011

OMB No. 1545-0047

Employer identification number 31-1802788

(i) Direct controlling antity (g) Section 512(b)(13) controlled entity? Schedule R (Form 990) 2011 Š Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) Yes (f) Direct controlling entity (e) End-of-year assets Š (o)

Public charity status
(if section 501(c)(3)) (d) Total income (d) Exempt Code section Treat as 501(c)(3) (c) Legal domicile (state or foreign country) Cat. No. 50135Y (c) Legal domicile (state or foreign country) **Hong Kong** (b) Primary sctivity (b) Primary activity For Paperwork Reduction Act Notice, see the instructions for Form 990. (a) Name, address, and EIN of disregarded entity (a) Name, address, and EIN of related organization B Part II ල € 9 8 € (9) Ξ 8 <u>o</u> ම 9

(a) Name, address, and EiN of related organization (1)				1					-		İ	
(5)	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling antity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income		(8) Share of end-of- year assets	(h) Osproportonate ellocations?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1085)		General or meneging periner?	(N) Percentage ownership
€				i				Yes No		Yes	ટ્ટ	ŀ
(2)												
(3)												
(4)												}
(5)												
(9)												
ω						-						
Part IV Identification line 34 becau	Identification of Related Organizations line 34 because it had one or more related	i n	Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, organizations treated as a corporation or trust during the tax year.)	rporation or T	rust (Compl	lete if the rust durin	organiza g the tax	tion ansv year.)	wered "Yes" to	Form 99	0, Pari	r. ≷
Name, address, and	(a) Name, address, and EIN of related organization		(b) Primary activity	vity L	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	rolling T	(e) Type of entity (C corp. S corp. or trust)	Share of total income	(8) Share of end-of-year assets		(h) Percentage ownership
(1)												
(2)												<u> </u>
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Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.) Schedule R (Form 990) 2011

Part V Transactio

	Note Complete line 1 if any entity is listed in Bade II III or IV of this schodule			Yes	N
-	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	zations listed in Parts II-IV?		1.	-
a	Receipt of (i) interest (ii) annuities (iii) royalties or		•	1a	>
Q	Gift, grant, or capital contribution to related organization(s)		·	1p	>
O	Gift, grant, or capital contribution from related organization(s)		•	1c	/
ס	Loans or loan guarantees to or for related organization(s)		•	14	/
a	Loans or loan guarantees by related organization(s)		•	e e	>
-	Sale of assets to related organization(s)			=	>
01	Purchase of assets from related organization(s)		•	19	>
ے د	Exchange of assets with related organization(s)			ŧ	>
	Lease of facilities, equipment, or other assets to related organization(s)		•	÷	>
	Lease of facilities, equipment, or other assets from related organization(s)			=	>
. ×	Performance of services or membership or fundraising solicitations for related organization(s)		•	¥	>
-	Performance of services or membership or fundraising solicitations by related organization(s)		•	=	>
Ε				1m	>
C	Sharing of paid employees with related organization(s)			1n	/
0	Reimbursement paid to related organization(s) for expenses		· .	9	`
α	Reimbursement paid by related organization(s) for expenses			유	>
0				19	`
-	Other transfer of cash or property from related organization(s)			11	>
7	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	ling covered relationships and	transaction	thresho	olds.
	(a) Name of other organization	(b) (c) Transaction Amount involved type (a-r)		(d) Method of determining amount involved	mining /ed
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(2)					
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£			-		
2			-		
9					
		07	Schedule R (Form 990) 2011	Form 990	1) 2011

Schedule R (Form 990) 2011 Part VI

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

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

of gloss tevelide) that was not a lotated organ										
- E	(b)	(c)	(d) Predominant	(e) Are all partners	(f) Shara of	(6) Share of	(h) Despronontone	O Code V=UBI	O (Brienes)	(k) Percentene
		(state or foreign country)	income (related, unrelated, excluded	section 501(c)(3)		_	allocations?	amount in box 20 of Schedule K-1		ownership
			from tax under	organizations?				(Form 1065)		
				Yes No			Yes No		Yes No	
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								Sched	ute R (Forn	Schedule R (Form 990) 2011

эспеаль н (г	-am 990) 2011	Page 5
Part VII	Supplemental Information Complete this part to provide additional information for responses to questions on Schedule R (see instructions).	

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Schedule R (Form 990) 2011