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132001 01-23-12

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

benefit trust or private foundation)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

	A F	or the	2011 calendar year, or tax year beginning and end	ling		
	B c	heck if oplicable	C Name of organization		D Employer identifie	cation number
		Addres	UNITED ANIMAL NATIONS DBA REDROVER			
	X	Name change			68-0	124097
		Initial retum Termin- ated		m/suite	E Telephone numbe 916-	r 429-2457
		Amend			G Gross receipts \$	2,654,205.
		Applica			H(a) Is this a group re	eturn
		pendin	F Name and address of principal officer.NICOLE FORSYTH		for affiliates?	Yes X No
			SAME AS C ABOVE		H(b) Are all affiliates inc	luded? Yes No
			mpt status X 501(c)(3) 501(c)( ) ( (Insert no ) 4947(a)(1) or □	527	If "No," attach a	list. (see instructions)
	J V	Vebsit	e: ▶ WWW.REDROVER.ORG	l	H(c) Group exemptio	
,				L Year o	of formation 198/N	A State of legal domicile CA
	Pa	rtl	Summary	אזרי או	NITMATC OUT	OF CRICIC
.,	Activities & Governance	1 8	Briefly describe the organization's mission or most significant activities $\begin{tabular}{c} TO & BRI \\ AND & STRENGTHEN & THE BOND & BETWEEN PEOPLE & AND \\ \end{tabular}$	ANI	MALS.	OF CRISIS
7 0 7	erne		Check this box   if the organization discontinued its operations or disposed	of more	than 25% of its net as	
	Š		Number of voting members of the governing body (Part VI, line 1a)		' 3	6
<b>N</b>	8		Number of independent voting members of the governing body (Part VI, line 1b)		1 4	1.0
 ~	ies		Total number of individuals employed in calendar year 2011 (Part V, line 2a)		5	16
⊴	ξį		Total number of volunteers (estimate if necessary)		6	315
<u>,</u>	AC		Total unrelated business revenue from Part VIII, column (C), line 12		7a 7b	0.
SCANNED JUN 1		DI	Net unrelated business taxable income from Form 990-T, line 34		Prior Year	Current Year
Ž		8 (	Contributions and grants (Part VIII, line 1h)		1,391,302.	2,337,176.
Ķ	Revenue		Program service revenue (Rart-VIII, line 2g)		31,920.	16,931.
တ္တ	eve		nvestment income (PartVIII, column A) lines 3, 4, and 7d)		66,087.	40,467.
3,3	œ		Other revenue (Part VIII, column (A), lines 5,,6d, 8c, 9c, 10c, and 11e)		200.	2,549.
			Total revenue add lines/8/through 12, (must equal Part VIII, column (A), line 12)		1,489,509.	2,397,123.
		13 (	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		113,947.	90,839.
			Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
	es		Salaries, other <u>compensation, employee</u> benefits (Part IX, column (A), lines 5-10)		652,506.	650,026.
	Expenses		Professional fundraising fees (Part IX, column (A), line 11e)	-	0.	0.
	×		Fotal fundraising expenses (Part IX, column (D), line 25) 154,651	<u>•</u>	E O E 100	672 002
	_		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	-	585,489. 1,351,942.	673,892. 1,414,757.
			Fotal expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		137,567.	982,366
	<u>- 8</u>	19	Revenue less expenses Subtract line 18 from line 12	Por	ginning of Current Year	End of Year
	ags agg	20	Fotal assets (Part X, line 16)	DEL	1,505,217.	2,448,896.
	Ass		Fotal liabilities (Part X, line 26)		22,492.	16,678.
	Net Assets or Fund Balances		Net assets or fund balances. Subtract line 21 from line 20		1,482,725.	2,432,218.
	Pa		Signature Block			· · · · · · · · · · · · · · · · · · ·
	Unde	er penal	ties of perjury, I declare that I have examined this return, including accompanying schedules and	d stateme	ents, and to the best of m	y knowledge and belief, it is
	true,	correct	, and complete. Declaration of preparer (other than officer) is based on all information of which	preparer	has any knowledge	<u></u>
		ŀ	* Kebecca Sarafield		<u>  5/7/1</u>	<u>2</u>
	Sigr	۱ ۱	Signalure of officer	ann	Date	
	Her	е	REBECCA SARSFIELD, CHIEF FINANCIAL OFFICE Type or print name and title	CER		
				l n	late Check	PTIN
	Paid		Print/Type preparer's name  DARLA A. COLSON  Preparer's signature  Oala A. Blam C		5/a/12 it self-employ	
	Prep	t t	Firm's name GILBERT ASSOCIATES, INC.	<u>- 1.111</u>	Firm's EIN	68-0037990
	Use	ł	Firm's address 2880 GATEWAY OAKS DR, STE 100		, , , , ,	
		-	SACRAMENTO, CA 95833		Phone no 9	16-646-6464
	14		S discuss this return with the preparer shown above? (see instructions)		i i	X Yes No

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2011)

4d Other program services (Describe in Schedule O.)

200,625 · including grants of \$

) (Revenue

6,695.)

4e Total program service expenses ▶

1,107,968

# Form 990 (2011) UNITED ANIMAL NATIONS DBA REDROVER Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	$\Box$	103	140
•	If "Yes," complete Schedule A	1	Х	ŀ
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	- <del>-</del>		
•	public office? If "Yes," complete Schedule C, Part I	3		Х
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	Х	l
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	-	<b>⊢</b> -	
•	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	-	<del> </del>	
٠	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,	-		1
•	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		Х
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		x
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	10		x
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			1
• •	as applicable.			
9	Did the organization report an amount for land, buildings, and equipment in Part X, line 10° If "Yes," complete Schedule D,			
u	Part VI	11a	Х	
<b>h</b>	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	110		
Ų		116	,	х
_	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	110		
٠	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	}	X
ď	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	116		
ŭ	Part X, line 167 If "Yes," complete Schedule D, Part IX	11d		Х
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f				
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	!
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<del>                                     </del>		
	Schedule D, Parts XI, XII, and XIII	12a	Х	
ь	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		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	1.15		
-	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		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
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	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
	1	Form	990 (	2011)
			•	,

Part IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the X 21 United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, Х 22 column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current 23 and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Х 23 Schedule J 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 X Schedule K. If "No", go to line 25 24a 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c 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 X disqualified person during the year? If "Yes," complete Schedule L, Part I 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 X 25b Schedule L. Part I Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified 26 Х person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial i contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member  $\mathbf{X}_{\underline{\phantom{a}}}$ 27 of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 28 instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer. Х director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c Х Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation Х contributions? If "Yes," complete Schedule M 30 31 Did the organization liquidate, terminate, or dissolve and cease operations? X If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 X 32 Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations X sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 33 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 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of Х section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 Х 36 If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 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

X Form **990** (2011)

37

38

Х

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Page 5

Pa	Statements Regarding Other IRS Filings and Tax Compliance		ı			_
	Check if Schedule O contains a response to any question in this Part V				1	Щ
			1 1 40	J	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	12			8
b	Enter the number of Forms W-2G Included in line 1a. Enter -0- If not applicable	1b_	<u> </u>	4	```	Ì.
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eporta	ible gaming			1
	(gambling) winnings to prize winners?	i	1	1c	X	ļ
<b>2</b> a	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	16	-1		١.
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b	X	ļ
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a	<u> </u>	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	<u> </u>	<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other		' <del>-</del> '		j	
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a	ļ	X
ь	If "Yes," enter the name of the foreign country:					١,
	See Instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accou	nts. ,			
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 transa	action	? ,	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		ļ
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to	he org	anization solicit		1	
	any contributions that were not tax deductible?			6a	ļ	X
Ь	If "Yes," did the organization include with every solicitation an express statement that such contribute	tions c	or gifts			
	were not tax deductible?			6b	ļ	ļ
7	Organizations that may receive deductible contributions under section 170(c).		1			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices	provided to the payor?	7a	ļ	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		ļ
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as rec	uired			
	to file Form 8282?	ı		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	_7d		4		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		ct? t	7e	ļ	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit conti			7 <del>f</del>	-	X
9	If the organization received a contribution of qualified intellectual property, did the organization file February		•	<u>7g</u>		N/Z
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		N/I
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D					
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any tin	ne during the year?	8		ļ
9	Sponsoring organizations maintaining donor advised funds.					1
а	Did the organization make any taxable distributions under section 4966?		1	9a	<b> </b>	ļ
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		ļ
10	Section 501(c)(7) organizations. Enter:	1 .	ı			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a		-		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		┨`	,	
11	Section 501(c)(12) organizations. Enter:	l	1 :			
a	Gross income from members or shareholders	11a	<u> </u>	┥		
b	Gross income from other sources (Do not net amounts due or paid to other sources against	l	i			
	amounts due or received from them.)	11b		┨	•	
	Section 4947(a)(1) non-exempt charitable trusts. is the organization filing Form 990 in lieu of Form	1	? I	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	L	-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	·			13a		<del> </del>
_	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the	1	, [			
	organization is licensed to issue qualified health plans	13b		1		
	Enter the amount of reserves on hand	13c	<u>l,</u>	ļ	ļ	<del></del>
	Did the organization receive any payments for indoor tanning services during the tax year?			14a	<del> </del> -	Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	eυ		14b	L	l

UNITED ANIMAL NATIONS DBA REDROVER 68-0124097 Form 990 (2011) 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 Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 1a 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 committee, explain in Schedule O. 6 **b** Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 X 2 officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X 7a more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or Х persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following. Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? 8ь Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the 9 organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes 10a 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with the organization's exempt purposes? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe Х in Schedule O how this was done 12c X Did the organization have a written whistleblower policy? 13 13 X 14 14 Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a Х 15b b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed SEE SCHEDULE O. Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply

X Own website Another's website X Upon request

- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization: REBECCA SARSFIELD - 916-429-2457 1122 S STREET, SACRAMENTO, CA 95811

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. 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.

(A) Name and Title	(B) Average hours per		not c	Pos heck	more	than		(D) Reportable compensation	(E) Report compen	able	(F) Estimated amount of
	week (describe hours for related organizations in Schedule O)	stee or director			irecto	Highest compensated Ay	tee)	from the organization (W-2/1099-MISC)	from re organiza (W-2/1099	ations	other compensation from the organization and related organizations
(1) DEBRA FERGUSON										_	_
BOARD DIRECTOR	1.00	X				ļ		0.		0.	0.
(2) JAMIE SICKLES	1 00			ļ						•	
BOARD DIRECTOR	1.00	X	<u> </u>					0.		0.	0.
(3) JEFF DE CAGNA	1 1 00	v		, l						^	_
BOARD VICE CHAIR	1.00	X	<u> </u>	X		<del> </del>		0.		0.	0.
(4) LISA DECARLO	1 00	J		v					1	^	_
BOARD CHAIR	1.00	Х	_	Х		-		0.	<del></del> _	0.	0.
(5) ARMAITI MAY	1.00	x		х				0.	1	0.	0.
BOARD SECRETARY	1.00	^	-	Λ		-		0.		<u> </u>	
(6) LYMAN YIP	1.00	Х		Х				0.	1	0.	0.
BOARD TREASURER (7) NICOLE FORSYTH	1.00	Δ.		^		<del>                                     </del>		- 0.		<u> </u>	
PRESIDENT AND CEO	40.00		ĺ	х				81,426.		0.	14,235
(8) REBECCA SARSFIELD	10.00	-	$\vdash$	21				01,1201			11/233
CHIEF FINANCIAL OFFICER	40.00			x	1			57,862.		0.	10,507.
									1		

1 41	WILL Section A. Officers, Directors, 11	<del></del>	npic	yee			nıgh	est						
	(A)	(B)				C)	_		(D)	(E)			(F)	
	Name and title	Average	(do		Pos heck		ገ e than	one	Reportable	Reportable			tımate	
		hours per	box	, unle	ss pe	rson	is bot or/trus	h an	compensation	compensation			ount	of
		week (describe		July ar			J., ., us		from	from related	- 1		other	*10-
		hours for	Indiwdual trustee or director				_		the organization	organization (W-2/1099-MIS			pensa om th	
		related	20 20	饕			rsafe		(W-2/1099-MISC)	(44-57 1099-14110	,,		anızat	-
		organizations	trus#	a tr	}	85	ж		(	ı		_	d relat	
		ın Schedule	1dua	Institutional trustee	83	Key employee	oyee Oyee	ğ					ınızatı	
		O)	_rigi	Tage .	Officer	Key	Highest compensated employee	Former						
			L	L		L.					1			
										1				
					i				is .					
						Г								
					1									
		-				<del>                                     </del>	<del>                                     </del>							
			<del>                                     </del>	<del> </del>	<del> </del>		<u> </u>	$\vdash$	-					
					-	├	┼	-	<u>                                     </u>			-		
						-		$\vdash$	<del> </del> -	1	-			
			-		ļ	<del> </del>	<del> </del>							
						}				ŀ				
			_	_	-	<u> </u>		<u> </u>		<del> </del>	-			
			<u> </u>	L		<u> </u>	Ļ	L	120 000	,	_		4 7	40
1 b	Sub-total								139,288.		0.	2	4,7	42.
С	Total from continuation sheets to Part V	II, Section A							0.		0.			0.
<u>d</u>									139,288.	L	0.	2	4,7	42.
2	Total number of individuals (including but i	not limited to th	ose	liste	ed al	bov	e) wi	no r	eceived more than \$100	,000 of reportab	le			_
	compensation from the organization													0
											r		Yes	No
3	Did the organization list any former officer	, director, or tru	uste	e, ke	y er	mplo	oyee	, or	highest compensated e	mployee on				
	line 1a? If "Yes," complete Schedule J for s	such individual										3		X
4	For any individual listed on line 1a, is the s	um of reportab	le co	omp	ensa	atior	n and	d ot	her compensation from	the organization				
	and related organizations greater than \$15	0,000? If "Yes,	" со	mpl	ete S	Sch	edule	e J f	for such individual		ļ	4		X
5	Did any person listed on line 1a receive or	accrue compe	nsat	ion f	from	any	y unr	elat	ed organization or indiv	dual for services				
	rendered to the organization? If "Yes," con	nplete Schedul	e J 1	or s	uch	per	son					5	i	X
Sec	tion B. Independent Contractors									l				
1	Complete this table for your five highest co	mpensated in	depe	ende	ent c	ont	racto	ors t	hat received more than	\$100,000 of con	pens	ation f	rom	
	the organization. Report compensation for	the calendar y	ear	endı	ng v	<u>vith</u>	or w	ithir	n the organization's tax	year.				
	(A)								(B)			(C		
	Name and business	address	N	INC	Ξ				Description of s	ervices	С	ompe	nsatio	n
								T		;				
								_						
										'				
								$\neg$						
								7						
2	Total number of independent contractors (	includina but n	ot li	mite	d to	the	se le	stec	d above) who received m	ore than		·· <del>·····</del>		
-	\$100,000 of compensation from the organ				0		0							
	4.00,000 or ouriportoution from the organ											Form (	990 (	2011)

Form 990 (2011)

Statement of Revenue Part VIII (D) (A) (B) (C) Revenue excluded from tax under sections 512. Related or Unrelated Total revenue exempt function business revenue revenue 513, or 514 1a 1 a Federated campaigns 96,750 1b **b** Membership dues 1c c Fundraising events d Related organizations 1d 1e e Government grants (contributions) f All other contributions, gifts, grants, and 11 2,240,426 similar amounts not included above 9,979. 9 Noncash contributions included in lines 1a-1f \$ 2,337,176. h Total. Add lines 1a-1f Business Code 11,759. 5,172. 541900 11,759. 2 a WORKSHOP FEES 541900 EDUCATIONAL MATERIALS f All other program service revenue 16,931 g Total. Add lines 2a-2f Investment income (including dividends, interest, and 32,217. 32,217. other similar amounts) 4 Income from investment of tax-exempt bond proceeds Royalties (i) Real (II) Personal 6 a Gross rents **b** Less rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities (II) Other 7 a Gross amount from sales of 265,332. assets other than inventory b Less: cost or other basis 257,082 and sales expenses 8,250 c Gain or (loss) 8,250. 8,250. ▶ d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold ▶ c Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 900099 2,549. 2,549 11 a OTHER INCOME d All other revenue 2,549. Total. Add lines 11a-11d 2,397,123. 19,480 40,467. Total revenue. See instructions

## 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).

COTTIF	Diete Columns (B), (C), and (D).				
	Check if Schedule O contains a respor		s Part IX (B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and			i	
	organizations in the United States See Part IV, line 21	3,500.	3,500.		<del></del>
2	Grants and other assistance to individuals in	07.000	07 000	1	
	the United States. See Part IV, line 22	87,339.	87,339.		**************
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	164 020	97,042.	56,392.	10,596.
_	trustees, and key employees	164,030.	91,042.	30,392.	10,390.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and			1	
_	persons described in section 4958(c)(3)(B)	366,828.	323,068.	23,901.	19,859.
7	Other salaries and wages	300,020.	323,000.	23,901.	17,037.
8	Pension plan accruals and contributions (include	21 127	17 069	3 348	710
•	section 401(k) and section 403(b) employer contributions)	21,127. 52,779.	17,069. 43,144.	3,348. 6,741.	710. 2,894. 2,611.
9	Other employee benefits	45,262.	35,850.	6,801.	2,634.
10	Payroll taxes	43,202.	33,030.	0,001.	
11	Fees for services (non-employees):			1	
a	Management	7,292.	7,292.		
b	Legal Accounting	19,727.	948.	18,713.	66.
c d	Lobbying	237.270		207.200	
u	Professional fundraising services See Part IV, line 17				
f	Investment management fees	5,041.		5,041.	<u> </u>
g g	Other	57,271.	57,271.	· · · · · · · · · · · · · · · · · · ·	
12	Advertising and promotion	756.	756.		
13	Office expenses	353,698.	234,967.	13,357.	105,374.
14	Information technology	41,825.	33,465.	279.	8,081.
15	Royalties				
16	Occupancy	44,694.	36,354.	6,097.	2,243. 195.
17	Travel	76,102.	73,029.	2,878.	<u> 195.</u>
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials		<u>-</u> .		<del></del>
19	Conferences, conventions, and meetings	19,479.	17,714.	749.	1,016.
20	Interest		_		
21	Payments to affiliates	6 202	F 054	024	215
22	Depreciation, depletion, and amortization	6,293.	5,054.	924.	315.
23	Insurance	4,806.	4,173.	408.	225.
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	DISASTER RELIEF	22,465.	22,426.		39.
ь	TAXES & FEES	6,210.		6,190.	20.
С	MEDIA & COMMUNICATIONS	5,540.	5,460.	80.	
d					
е	•	2,693.	2,047.	239.	407.
25	Total functional expenses. Add lines 1 through 24e	1,414,757.	1,107,968.	152,138.	154,651.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined	•			
	educational campaign and fundraising solicitation	102 201	120 040		62 252
	Check here X If following SOP 98-2 (ASC 958-720)	192,301.	129,949.	. 0.	62,352.

Par	t X	Balance Sheet			, ,	
		· · · · · · · · · · · · · · · · · · ·		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		129,719.	1	245,675.
	2	Savings and temporary cash investments		590,162.	2	1,461,876.
	3	Pledges and grants receivable, net	Ì	72,369.	3	1,461,876. 136,656.
	4	Accounts receivable, net		3,275.	4	13,148.
	5	Receivables from current and former officers, di	rectors trustees key	- ,		
		employees, and highest compensated employee	i			
		of Schedule L	os. Complete Fart II		5	
	6	Receivables from other disqualified persons (as	defined under section	Pione Tim verm or to the con-		To de the second
		4958(f)(1)), persons described in section 4958(c				
		employers and sponsoring organizations of section				
		employees' beneficiary organizations (see instru			6	
ţ	7	Notes and loans receivable, net	Ctions)		7	
Assets	7	Inventories for sale or use	ŀ	-	8	
ď	8			23,897.	9	10,425.
	9	Prepaid expenses and deferred charges	, , }	23,031.	9	10/1231
	10a	Land, buildings, and equipment: cost or other	40- 49 317			
		basis. Complete Part VI of Schedule D	10a 49,317. 10b 38,204.	6,506.	10c	11 113
		Less: accumulated depreciation	10b 38,204.	474,545.		11,113. 467,789.
!	11	Investments - publicly traded securities		204,744.	11	102,214.
	12	Investments - other securities. See Part IV, line	ì	204,744.		102,214.
	13	Investments - program-related. See Part IV, line	11		13	
į	14	Intangible assets	1		14	
	15	Other assets See Part IV, line 11	11. 30	1,505,217.	15	2 //8 896
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)	22,492.	16 17	2,448,896. 16,678.
	17	Accounts payable and accrued expenses	}	221472.	18	10,070.
	18	Grants payable		19		
	19	Deferred revenue		20		
	20	Tax-exempt bond liabilities		21		
Liabilities	21	Escrow or custodial account liability. Complete				
Ē	22	Payables to current and former officers, director				
Ë		highest compensated employees, and disqualifi	ed persons. Complete Part II		00	
		of Schedule L			22	
	23	Secured mortgages and notes payable to unrela	· ·		23	
	24	Unsecured notes and loans payable to unrelate			24	
	25	Other liabilities (including federal income tax, pa	-			
		parties, and other liabilities not included on lines	(17-24) Complete Part X of		25	
	00	Schedule D		22,492.	26	16,678.
	26	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check he	ere X and complete	22/1720	20	
(0		lines 27 through 29, and lines 33 and 34.	ere P 21 and complete			
ĕ	27	Unrestricted net assets		1,412,453.	27	2.397.562.
lan	28	Temporarily restricted net assets		70,272.	28	2,397,562. 34,656.
8	29	Permanently restricted net assets		,0,2,20	29	017000
Ĕ	29	Organizations that do not follow SFAS 117, c	heck here 🕨 🗀 and			••••
Ē		<del>-</del>	neck nere P and			
Net Assets or Fund Balances	30	complete lines 30 through 34.  Capital stock or trust principal, or current funds			30	
Se	31	Paid-in or capital surplus, or land, building, or ed	unment fund		31	
ξ		·	ſ		32	
Ž	32 33	Retained earnings, endowment, accumulated in Total net assets or fund balances	come, or other futius	1.482.725.		2,432,218.
	34	Total liabilities and net assets/fund balances		1,482,725. 1,505,217.	34	2,448,896.
	-	Total natimites and their assets/fully data/fices		2,000,221	<u> </u>	Form <b>990</b> (2011)

Form	990 (2011) UNITED ANIMAL NATIONS DBA REDROVER	68-	-0124	097	Pag	ge <b>12</b>
Par	TXI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI					X
			-			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2	,39	7,1	23.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1	,414	1,7	<del>57</del> .
3	Revenue less expenses Subtract line 2 from line 1	3		982	2,3	66.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1	,482	2,7	<del>25.</del>
5	Other changes in net assets or fund balances (explain in Schedule O)	5		<32	2,8	73.>
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	2	,432	2,2	$\overline{18.}$
	rt XII Financial Statements and Reporting			<del></del>		
	Check if Schedule O contains a response to any question in this Part XII	1				X
	Oncold Control of Cont				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	0				1
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	ne audit	,			
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	ĺ
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule C	).			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue					
	separate basis, consolidated basis, or both:	1				
	X Separate basis Consolidated basis Both consolidated and separate basis	1				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	ngle Au	dıt			
	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	ııred au	dıt			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3ь		L

**3b** Form **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.

2011

OMB No 1545-0047

Open to Public Inspection

Name of the organization

UNITED ANIMAL NATIONS DBA REDROVER

Employer identification number 68-0124097

P	art I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	e this par	t) See inst	ructions.	1			
The	organ	ization is not a	private foundation	because it is: (For lines 1	through	11, check o	only one b	ox)					
1				s, or association of churc									
2				<b>70(b)(1)(A)(ii).</b> (Attach Sc									
3				ital service organization of			170(b)(1)	(A)(iii).		ı			
4				operated in conjunction					(b)(1)(A)(ii	ii). Enter th	e hospital	s nam	e,
		city, and stat											
5		An organizati	on operated for the	benefit of a college or ur	niversity o	wned or op	erated by	a governi	nental uni	t described	d in		
		section 170	(b)(1)(A)(iv). (Comple	ete Part II.)									
6		A federal, sta	ite, or local governm	ent or governmental unit	t describe	d ın sectio	n 170(b)(1	I)(A)(v).					
7	X			eives a substantial part					r from the	general pu	ıblıc desc	rıbed i	n
		section 170(	<b>b)(1)(A)(vi)</b> . (Comple	ete Part II.)									
8		A community	trust described in s	section 170(b)(1)(A)(vi).	(Complete	Part II.)							
9		An organizati	on that normally rec	eives: (1) more than 33 f	1/3% of its	support fi	om contri	butions, m	nembershi	p fees, and	d gross red	eipts t	from
		activities rela	ted to its exempt fu	nctions · subject to certa	ıın exceptı	ons, and (2	2) no more	than 33 1	/3% of its	support fr	om gross	ınvest	ment
		income and i	unrelated business t	axable income (less sect	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	inization af	ter June 3	0, 197	5.
		See section	509(a)(2). (Complete	e Part III.)						i			
10				perated exclusively to te									
11		-	-	perated exclusively for th									or
		more publicly	supported organiza	ations described in secti	on 509(a)(	1) or section	on 509(a)(2	2) See <b>sec</b>	tion 509(	a)(3). Chec	k the box	that	
		describes the	e type of supporting	organization and compl									
		a Type I b Type II c Type III · Functionally integrated d Type III · Other											
•	• 📖			at the organization is not									n
				than one or more publicly						9(a)(1) or se	ection 509	(a)(2).	
	f			tten determination from t	the IRS th	at it is a Ty	pe I, Type	II, or Type	e III	1			_
			rganization, check ti							_			
9	9			organization accepted ar									
				directly controls, either al	one or tog	ether with	persons o	described	n (II) and (	(III) below,	(44.0)	Yes	No
				upported organization?							11g(i)	-	
				n described in (i) above?							11g(ii)		
_			· · · · · · · · · · · · · · · · · · ·	a person described in (i) o							11g(iii)	l	
	ר	Provide the f	ollowing information	about the supported or	ganization	(S).							
(	-	of supported anization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section	in col (i) li	organization sted in your document?	organizat	u notify the tion in col r support?	(vi) is organizati (l) organiz U S	on in col led in the	(vii) An sup	nount o	f
				(see instructions))	Yes	No	Yes	No	Yes	No			
										<u> </u>		_	
		<del> </del>											
						-							
Tot	al												

Schedule A (Form 990 or 990-EZ) 2011 UNITED ANIMAL NATIONS DBA REDROVER 68-01240

[Part II | 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 or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Sec	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not					1		
	include any "unusual grants.")	1163001.	1214353.	912,541.	1391302.	2337176.	7018373.	
2	Tax revenues levied for the organ-	-				İ		
	ization's benefit and either paid to							
	or expended on its behalf							
3	The value of services or facilities					1		
	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3	1163001.	1214353.	912,541.	1391302.	2337176.	7018373.	
5	The portion of total contributions							
	by each person (other than a							
	governmental unit or publicly							
	supported organization) included							
	on line 1 that exceeds 2% of the							
	amount shown on line 11,							
	column (f)						902,045.	
6	Public support. Subtract line 5 from line 4						6116328.	
Sec	ction B. Total Support			· · · · · · · · · · · · · · · · · · ·	<del>,</del>			
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total	
7	Amounts from line 4	1163001.	1214353.	912,541.	1391302.	2337176.	7018373.	
8	B Gross income from interest,							
	dividends, payments received on					!		
	securities loans, rents, royalties							
	and income from similar sources	91,023.	61,663.	38,265.	35,449.	32,217.	258,617.	
9	Net income from unrelated business					ı		
	activities, whether or not the				:			
	business is regularly carried on							
10	Other income. Do not include gain							
	or loss from the sale of capital							
	assets (Explain in Part IV.)						7076000	
11	<b>Total support.</b> Add lines 7 through 10						7276990.	
	Gross receipts from related activities,					12	168,292.	
13	First five years. If the Form 990 is for		s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	<b>.</b> —	
<u> </u>	organization, check this box and stor		togo				<u>▶</u>	
	ction C. Computation of Publ						84.05 %	
	Public support percentage for 2011 (			column (t))		15	84.05 %	
	Public support percentage from 2010			n line 12 and line	14 10 22 1/20/ 07 0			
10a	33 1/3% support test - 2011. If the c stop here. The organization qualifies				14 15 33 1/3 76 01 11	iore, check this bo	► X	
	33 1/3% support test - 2010. If the c		-		l line 15 is 33 1/3%	or more check th		
U	and stop here. The organization qual				11110 10 10 00 170 7	or more, encor a	<b>▶</b> □	
17:	10% -facts-and-circumstances tes	•			e 13, 16a, or 16b a	and line 14 is 10%	or more.	
	and if the organization meets the "fac							
	meets the "facts-and-circumstances"					and organ	▶ 🗀	
ь	10% -facts-and-circumstances tes					17a, and line 15 is	10% or	
	more, and if the organization meets ti							
	organization meets the "facts-and-circ							
18	Private foundation. If the organization						s	
						dule A (Form 990		

## 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 A. Public Support

Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	.(6	e) 2011	(f) Total
1	Gifts, grants, contributions, and	1						
	membership fees received. (Do not							
	include any "unusual grants.")							
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose					1		
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					1		
	or expended on its behalf							
5	The value of services or facilities							
_	furnished by a governmental unit to				1	,		
	the organization without charge					1		
6	Total. Add lines 1 through 5							
	Amounts included on lines 1, 2, and							
	3 received from disqualified persons					'		
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
c	Add lines 7a and 7b	<u> </u>						
8	Public support (Subtract line 7c from line 6)			<u> </u>				
Sec	ction B. Total Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010		e) 2011	(f) Total
9	Amounts from line 6							
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
b	Unrelated business taxable income							
	(less section 511 taxes) from businesses acquired after June 30, 1975							
c	Add lines 10a and 10b							
	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)							
	Total support (Add lines 9, 10c, 11, and 12)			L				<del></del>
14	First five years. If the Form 990 is for	the organization's	s first, second, thii	rd, fourth, or fifth t	ax year as a secti	on 501(	c)(3) organiz	ation,
	check this box and stop here							<u> </u>
	ction C. Computation of Publ					1 1		
	Public support percentage for 2011 (I		· ·	column (f))		15		<u>%</u>
	Public support percentage from 2010					16		<u>%</u>
	ction D. Computation of Inves					т т		
	Investment income percentage for 20			ne 13, column (f))		17		<u>%</u>
	Investment income percentage from					18		<u>%</u>
19a	33 1/3% support tests - 2011. If the	-					%, and line 1	7 is not
	more than 33 1/3%, check this box a							▶
b	33 1/3% support tests - 2010. If the	=						and
	line 18 is not more than 33 1/3%, che							<b>&gt;</b>
20_	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t				<u> </u>
3203	23 01-24-12				Sc	hedule	A (Form 99)	0 or 990-EZ) 2011

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

Political Campaign and Lobbying Activities

► See separate instructions.

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

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service ➤ Complete if the organization is described below. ➤ Attach to Form 990 or Form 990-EZ.

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

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

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

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

If the organization answered "Yes" to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35c (Proxy Tax), then

	Section 501(c)(4), (5), or (6) organiza	tions: Complete Part III			
Nan	ne of organization				oyer identification number
		ANIMAL NATIONS I			68-0124097
Pa	art I-A Complete if the org	ganization is exempt un	der section 501(c)	or is a section 527 or	rganization.
2	Provide a description of the organize Political expenditures Volunteer hours	zation's direct and indirect polit	ical campaign activities	ın Part IV.  ▶ \$	
D	art I-B Complete if the org	ganization is exempt un	der section 501(c)	)(3)	
	Enter the amount of any excise tax			<b>▶</b> \$	
2		• •		5 <b>▶</b> \$	
	If the organization incurred a section				Yes No
4a	Was a correction made?		·	I	Yes No
b	olf "Yes," describe in Part IV.				
Pa	art I-C Complete if the org	ganization is exempt un	der section 501(c)	, except section 501(	c)(3).
1	Enter the amount directly expende	d by the filing organization for s	ection 527 exempt fund	ction activities > \$	
2	Enter the amount of the filing organ	nization's funds contributed to d	other organizations for s	section 527	
	exempt function activities			▶\$	
3	Total exempt function expenditures	s Add lines 1 and 2 Enter here	and on Form 1120-POL	L,	
	line 17b			<b>▶</b> \$	
4	• •		-11.0 6 11 507	. 1.4 1	Yes No
5	made payments. For each organiza	ation listed, enter the amount pa	aid from the filing organi	ization's funds. Also enter th	e amount of political
	contributions received that were pr				te segregated fund or a
	political action committee (PAC). If	T			I
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

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

Schedule C (Form 990 or 990-EZ) 2011

Schedule C (Form 990 or 990-EZ) 2011	UNITED ANIM	AL NATIONS	DBA_REDROVE	R 68-0	124097 Page 2
Part II-A Complete if the org	ganization is exe	mpt under section	n 501(c)(3) and fil	ed Form 5768	
(election under sec				· ·	
A Check ▶ ☐ If the filing organiza	ation belongs to an affi	iliated group (and list in	Part IV each affiliated	group member's nam	e, address, EIN,
expenses, and sha	re of excess lobbying	expenditures)			
B Check ▶  if the filing organiza	ation checked box A a	nd "limited control" pro	visions apply.	<del></del>	· · · · · · · · · · · · · · · · · · ·
	its on Lobbying Expe ditures" means amou	nditures unts paid or incurred.)	•	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infl	uence public opinion (	(grass roots lobbying)		, 0.	
<b>b</b> Total lobbying expenditures to infl	87.				
c Total lobbying expenditures (add l		, (,		87.	
d Other exempt purpose expenditur				1,414,670.	
e Total exempt purpose expenditure		d)		1,414,757.	
f Lobbying nontaxable amount. Ent			h columns.	216,476.	
If the amount on line 1e, column (a)		bying nontaxable am			
Not over \$500,000		the amount on line 1e.			
Over \$500,000 but not over \$1,00	0,000 \$100,00	00 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5		00 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17	,000,000 \$225,00	00 plus 5% of the exce	ss over \$1,500,000.		
Over \$17,000,000	\$1,000,	000.			
g Grassroots nontaxable amount (en	nter 25% of line 1f)			54,119.	
h Subtract line 1g from line 1a If zei	ro or less, enter -0-			0.	
i Subtract line 1f from line 1c If zero	o or less, enter -0-			0.	
j If there is an amount other than ze	ero on either line 1h or	line 1, did the organiza	ation file Form 4720	1	
reporting section 4911 tax for this					Yes No
	zations that made a s	eraging Period Under section 501(h) election se instructions for line	n do not have to comp		
	Lobbying Expe	nditures During 4-Yea	ar Averaging Period		<del></del>
Calendar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(d) 2011	(e) Total	
2a Lobbying nontaxable amount	198,895.	180,178.	210,194.	216,476.	805,743.
<ul> <li>b Lobbying ceiling amount (150% of line 2a, column(e))</li> </ul>				,	1,208,615.
c Total lobbying expenditures	7,540.	434.	564.	87.	8,625.
d Grassroots nontaxable amount	49,724.	45,045.	52,549.	54,119.	201,437.
e Grassroots ceiling amount					302.156.

152.

354.

5,440.

Schedule C (Form 990 or 990-EZ) 2011

5,946.

f Grassroots lobbying expenditures

## Schedule C (Form 990 or 990-EZ) 2011 UNITED ANIMAL NATIONS DBA REDROVER 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)).

or each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description	(a)			(b)		
the lobbying activity.	s	No	Δ	mount		
During the year, did the filing organization attempt to influence foreign, national, state or						
local legislation, including any attempt to influence public opinion on a legislative matter						
or referendum, through the use of:						
a Volunteers?						
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		ı				
c Media advertisements?						
d Mailings to members, legislators, or the public?						
e Publications, or published or broadcast statements?		l				
f Grants to other organizations for lobbying purposes?						
g Direct contact with legislators, their staffs, government officials, or a legislative body?		1				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		1				
i Other activities?		1 1				
j Total. Add lines 1c through 1i						
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		1				
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912						
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912	l.					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		ļ.				
art III-A Complete if the organization is exempt under section 501(c)(4), section 5	)1(c)(	5), or	section			
501(c)(6).		1				
			Yes	N		
		١ .	1			
Were substantially all (90% or more) dues received nondeductible by members?						
		<b>⊢</b>	2			
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No	)1(c)( " OR	5), or	section	line 3,		
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Part III-B Complete if the organization is exempt under section 501(c)(4), section 5	)1(c)( " OR	5), or (b) Pa	section	line 3,		
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes."  Dues, assessments and similar amounts from members	)1(c)( " OR	5), or (b) Pa	section art III-A,	line 3,		
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  art III-B  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes."  Dues, assessments and similar amounts from members	01(c)( " OR	5), or (b) Pa	section art III-A,	line 3,		
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	)1(c)( " OR	5), or (b) Pa	section art III-A,	line 3,		
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes."  Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	)1(c)( " OR	5), or (b) Pa	section art III-A,	line 3,		
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  The section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year	01(c)( " OR	5), or (b) Pa	section art III-A,	line 3,		
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  The prior year year year year year year.  The prior year year year year year year.  The prior year year year year year year year.  The prior year year year year year year year yea	01(c)( " OR	5), or (b) Pa	section art III-A,	line 3,		
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  The prior year?  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political 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	01(c)( " OR	5), or (b) Pa	section art III-A,	line 3,		
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  The prior year was paid.  The prior year	" OR	5), or (b) Pa	section art III-A,	line 3,		
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Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c 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 excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and politic expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)  Part IV Supplemental Information  Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5; Part III-D	" OR	5), or (b) Pa	section art III-A,			
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### **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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990. ► See separate instructions.

2011
Open to Public Inspection

Name of the organization

UNITED ANIMAL NATIONS DBA REDROVER

Employer identification number 68-0124097

Pat	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a		e used only <sup> </sup>
	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?	•	Yes No
Pa		ganization answered "Yes" to Form 990,	Part IV, line 7
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (e.g., recreation or e		storically important land area
	Protection of natural habitat		tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		1
	,,		Held at the End of the Tax Year
а	Total number of conservation easements		2a
ь	Total acreage restricted by conservation easements		2b'
c	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d		• •	ture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by th	ne organization during the tax
	year▶	•	
4	Number of states where property subject to conservation ea	sement is located >	1
5	Does the organization have a written policy regarding the pe		
	violations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	, and enforcing conservation easements of	during the year ►
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) about	ve satisfy the requirements of section 170	0(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservat	ion easements in its revenue and expens	se statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza		
	conservation easements.		
Pa	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or C	Other Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue state	ment and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	hibition, education, or research in further	ance of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that descri	ibes these items	
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statemer	nt and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of po	ublic service, provide the following amounts
	relating to these items:		<u> </u>
	(i) Revenues included in Form 990, Part VIII, line 1		<b>▶</b> ¹\$
	(ii) Assets included in Form 990, Part X		►   \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financi	al gain, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		<b>▶</b> '\$
b	Assets included in Form 990, Part X		<b>&gt;</b> \$

		ANIMAL NAT							24097	Page Z				
	t III   Organizations Maintaining C													
3	Using the organization's acquisition, accession	on, and other record	ds, check	any of the	following tha	it are a s	ignificant	use of its	collection it	ems				
	(check all that apply):													
а	Public exhibition	C			hange progra	ams								
b	Scholarly research	•	• 🗀 •	Other										
С	Preservation for future generations						1	_						
4	Provide a description of the organization's co							ose in Parl	XIV.					
5	During the year, did the organization solicit or					er sımıla	r assets	<del></del>	١ ا	<b>—</b>				
	to be sold to raise funds rather than to be ma								Yes	No_				
Par	t IV Escrow and Custodial Arrang		ete if the	organizatio	on answered	"Yes" to	Form 990	), Part IV, I	ine 9, or					
	reported an amount on Form 990, Par				<del> </del>				<del></del>					
1a	Is the organization an agent, trustee, custodia	an or other interme	diary for	contribution	ns or other as	sets not	included		1.,	<u> </u>				
	on Form 990, Part X?													
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing 1	able:				[						
	_								Amount					
	Beginning balance						1c							
d	Additions during the year						1d							
е	Distributions during the year						1e_							
f	Ending balance						1f	L	1.,					
	Did the organization include an amount on Fo	orm 990, Part X, line	217					<u> </u>	Yes	L No				
	If "Yes," explain the arrangement in Part XIV	Ab		"Voo" to Co	rm 000 Dord	IV line 1								
Par	t V Endowment Funds. Complete if								(-) Faces					
	_	(a) Current year	(b) P	rior year	(c) Two yea	rs back	(d) Inree	years back	(e) Four ye	ars back				
1a	Beginning of year balance		-		-	+		-						
b	Contributions			· · · -	·									
С	Net investment earnings, gains, and losses		ļ	<u>-</u>	<del></del>		-		***************************************	***************************************				
d	Grants or scholarships					+								
е	Other expenditures for facilities													
_	and programs		-											
f	Administrative expenses								***************************************	***************************************				
9	End of year balance				-\\ 11-1	1				······				
2	Provide the estimated percentage of the curr	ent year end baland		g, column (	a)) neid as:									
a	Board designated or quasi-endowment	0/	%											
b	Permanent endowment	%												
С	Temporarily restricted endowment	%												
•	The percentages in lines 2a, 2b, and 2c shou		ation the	t ara bald s	and administr	rad far t	ho orachi	zation						
3a	Are there endowment funds not in the posses	ssion of the organiz	ation the	it are nero a	ano aoministe	ered for t	ne organi	Zation	[v	es No				
	by:								3a(i)	140				
	(i) unrelated organizations								3a(ii)					
L	(ii) related organizations  If "Yes" to 3a(ii), are the related organizations	listed as required	on Sobor	tulo D2					3b	<del></del>				
ь 4	Describe in Part XIV the intended uses of the	· ·												
Property laws	t VI Land, Buildings, and Equipm													
1 (1)	Description of property	(a) Cost or o			t or other	(c) A	ccumulat	ed	(d) Book v	alue				
	bescription of property	basis (invest			(other)		preciation	l l	, =, = = = ·					
12	Land				- '.									
	Buildings													
	Leasehold improvements					<del></del>								
ų	Equipment		-	4	14,825.		33,9	19.	10	906.				
	Other				4,492.		4,2			207.				
	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Par	t X, colur	nn (B), line	· · · · · · · · · · · · · · · · · · ·			<b>•</b>	11,	113.				

Part VII Investments - Other Securities.	. See Form 990, Part X, line	12.		
(a) Description of security or category (including name of security)	(b) Book value	Co	(c) Method of valua st or end-of-year mar	
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				<del></del>
(E)		<del>                                     </del>	<del></del>	
<u>(F)</u>				
(G)			·	· · · · · · · · · · · · · · · · · · ·
(H) (I)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 12)	<b>&gt;</b>			······································
Part VIII Investments - Program Related		= 13.	i	
(a) Description of investment type	(b) Book value		(c) Method of valua st or end-of-year mar	
(1)				
(2)				
(3)				
(4)				
(5)		_		
(6)			<u> </u>	
(8)				
(9)				<del></del>
(10) Total. (Col (b) must equal Form 990, Part X, col (B) line 13)	<b>S</b>			
Part IX Other Assets. See Form 990, Part X,		L		
	(a) Description			(b) Book value
(1)				
(2)				<u> </u>
(3)			·	
(4)				
(5)			<del></del>	
(6)				
		· · · · · · ·		
(8)	· · · · · · · · · · · · · · · · · · ·			
(9)				
(10)	\ (n = 45 \			
Total. (Column (b) must equal Form 990, Part X, col (B) Part X   Other Liabilities. See Form 990, Pai				
(a) Description of liability	177, 11116 25	(b) Book value		
(1) Federal income taxes			1	
(2)			1	
(3)			1	
(4)			1	`
(5)			]	
(6)			]	
(7)			]	
(8)			_	
(9)			1	
(10)			1	
(11)			-	
Total. (Column (b) must equal Form 990, Part X, col (B FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footn 2. FIN 48 (ASC 740)	) line 25)	itements that reports the organ	ization's liability for uncerte	in tax positions under
2. FIN 48 (ASC 740)			Undomy for uncorta	

	dule D (Form 990) 2011 UNITED ANIMAL NATIONS DBA R					712403	/ Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to	Audite	<u>d Financial</u>	State	ment		~ 100
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1				7,123.
2	Total expenses (Form 990, Part IX, column (A), line 25)		_2				4,757.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3				2,366.
4	Net unrealized gains (losses) on investments		4			<3	2 <b>,</b> 873.
5	Donated services and use of facilities		5				
6	Investment expenses		6				
7	Prior period adjustments		7				
8	Other (Describe in Part XIV.)		8	<del>                                     </del>			
9	Total adjustments (net). Add lines 4 through 8		9			< 3	2,873.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and			<del></del>			9,493.
Par	t XII Reconciliation of Revenue per Audited Financial Statemer	nts Wit	h Revenue	per H	eturn	2 20	0 000
1	Total revenue, gains, and other support per audited financial statements				1	2,38	0,026.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		-20	020			
а	Net unrealized gains on investments	2a	<32,	8/3.	<b>P</b>		
b	Donated services and use of facilities	2b	15,	776.			
С	Recoveries of prior year grants	2c					
d	Other (Describe in Part XIV)	2d					7 007
е	Add lines 2a through 2d				2e	<u>~ ~ 1</u>	7,097. 7,123.
3	Subtract line 2e from line 1				3	2,39	/,123.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		1			
b	Other (Describe in Part XIV.)	4b			1		•
C	Add lines 4a and 4b				4c	2 20	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			-	5		7,123.
Pa	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents W	ith Expense	es per	Retu	<u>rn</u>	0 500
1	Total expenses and losses per audited financial statements				1	1,43	0,533.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 . 1	1 -	776			
а	Donated services and use of facilities	2a	15,	776.	-		
þ	Prior year adjustments	2b			-		
C	Other losses	2c					
d	Other (Describe in Part XIV.)	2d			-	1	E 776
е	Add lines 2a through 2d				2e_	1 / 1	<u>5,776.</u> 4,757.
3	Subtract line 2e from line 1				3	1,41	4,757.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			1		
	Other (Describe in Part XIV.)	4b	<del></del>		-		Λ
С	Add lines 4a and 4b				4c	1 /1	0. 4 757
5					5	1,41	4,757.
	t XIV Supplemental Information						4.5.
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III						
	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b Also compl					information	
PAI	RT X, LINE 2: REDROVER HAS IMPLEMENTED THE	AITEN	DED ACC	OONI	ING		
מם	INCIPLES RELATED TO THE ACCOUNTING FOR UNCE	FDTNT	אייע דאז	TNCC	י שאו	TAYES	מואב
PK.	INCIPLES RELATED TO THE ACCOUNTING FOR UNCE	CIVIAI	.1411 114	11100	/1111	IANDO .	11111
נוא	S DETERMINED THERE IS NO MATERIAL IMPACT ON	и тнг	י דואאאר	TΔT.	STA	темемт	S.
пА	5 DETERMINED THERE IS NO MATERIAL THEACT OF	. 1111	TIME	TAL	DIM	I DI IDIY I	<u> </u>
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Schedule I (Form 990) (2011) 2 **Employer identification number** 68-0124097 OMB No 1545-0047 Open to Public Inspection 2011 (h) Purpose of grant or assistance X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed ame and address of organization

(d) Amount of or government

(a) Amount of or government

(a) Amount of or government

(a) Amount of or government

(b) Method of organization of recipient received more than \$5,000. Part II can be duplicated if additional space is needed

(b) Description of recipient received more than \$5,000. Part II can be duplicated if additional space is needed

(c) IRC section or gash grant or government or gash grant in cash grant in cash grant in cash assistance or government or gash grant in cash g 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 Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ▶ Attach to Form 990. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table DBA REDROVER For Paperwork Reduction Act Notice, see the Instructions for Form 990. UNITED ANIMAL NATIONS Enter total number of other organizations listed in the line 1 table **General Information on Grants and Assistance** criteria used to award the grants or assistance? 1 (a) Name and address of organization Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE (Form 990) Part ! Part II

UNITED ANIMAL NATIONS DBA REDROVER Schedule I (Form 990) (2011)

Page 2

68-0124097

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Part III

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. 2: GRANTEE IS REQUIRED TO SUBMIT PHOTOGRAPHS OF THE THE ANIMALS AIDED BY GRANT FUNDS AND MUST BE PREPARED TO REPORT ON (d) Amount of non-cash assistance o. 87,339. (c) Amount of cash grant 447 (b) Number of recipients ASSISTANCE WITH VETERINARY CARE OR OTHER ANIMAL EMERGENCY COSTS, PAID DIRECTLY TO PROVIDER ON (a) Type of grant or assistance LINE ANIMALS' PROGRESS PART BEHALF OF INDIVIDUAL SCHEDULE I,

## SCHEDULE O (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.

▶ Attach to Form 990 or 990-EZ.

2011 Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

UNITED ANIMAL NATIONS DBA REDROVER

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

Employer identification number 68-0124097

MAXIMIZING THE USE OF ONLINE TECHNOLOGY.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
VOLUNTEERS TO CARE FOR MORE THAN 500 CATS, DOGS AND OTHER COMPANION
ANIMALS WHO WERE DISPLACED BY FLOODING IN KENNETT, MISSOURI. IN JULY,
DEPLOYED 15 VOLUNTEERS TO CARE FOR APPROXIMATELY 300 PETS DISPLACED BY
FLOODING IN MINOT, NORTH DAKOTA. IN NOVEMBER, DEPLOYED 12 VOLUNTEERS TO
CARE FOR 170 DOGS REMOVED FROM A PUPPY MILL IN GARLAND COUNTY,
ARKANSAS. PUPPIES WERE FOUND LIVING IN THEIR OWN FILTH AND IN
SUBSTANDARD CONDITIONS, WITH SKIN INFECTIONS AND FLEA INFESTATIONS.
TRAINED 148 NEW REDROVER RESPONDERS VOLUNTEERS AT 7 WORKSHOPS IN 6
CITIES THROUGHOUT THE UNITED STATES. CONTINUED OUR CHARTER MEMBERSHIP
AND BOARD LEADERSHIP IN THE NATIONAL ANIMAL RESCUE AND SHELTERING
COALITION.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
REDROVER READERS (FORMERLY HUMANE EDUCATION AMBASSADOR READERS, HEAR) -
THROUGH THIS INNOVATIVE, COMMUNITY-BASED LITERACY PROGRAM THAT ALIGNS
WITH ACADEMIC CONTENT STANDARDS, 40 REDROVER READERS VOLUNTEERS HELPED
2,684 CHILDREN EXPLORE THE BOND BETWEEN PEOPLE AND ANIMALS THROUGH
STORIES AND DISCUSSION. THESE CAREFULLY SCREENED AND TRAINED VOLUNTEERS
WORKED WITH STAFF TO PROVIDE 321 VISITS IN ELEMENTARY SCHOOL
CLASSROOMS, AFTER-SCHOOL PROGRAMS, ANIMAL SHELTERS AND OTHER VENUES TO
READ TO CHILDREN AND LEAD MEANINGFUL DISCUSSIONS, HELPING CHILDREN
DEVELOP CRITICAL THINKING SKILLS AND EMPATHY. REDROVER CONTINUED TO
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2011) 01-23-12

FORM 990, PART VI, SECTION A, LINE 6: THERE IS ONE CLASS OF MEMBERS. MEMBERS ARE THOSE PERSONS WHO HAVE PAID THE APPLICABLE ANNUAL DUES FOR THE Schedule O (Form 990 or 990-EZ) (2011)

EXPENSES \$ 200,625. INCLUDING GRANTS OF \$ 0. REVENUE \$ 6,695.

Employer identification number 68-0124097

CURRENT CALENDAR YEAR.

FORM 990, PART VI, SECTION A, LINE 7A: MEMBERS HAVE THE RIGHT TO VOTE ON THE ELECTION OF DIRECTORS.

FORM 990, PART VI, SECTION A, LINE 7B: 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 A, LINE 8B: THE ORGANIZATION HAD NO SUCH COMMITTEES. THEREFORE, THERE WERE NO MEETINGS TO DOCUMENT.

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.

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

UNITED ANIMAL NATIONS DBA REDROVER

Employer identification number 68-0124097

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 THE COMPENSATION OF THE CEO AND CFO TO

FORM 990, PART VI, SECTION B, LINE 15: IN 2011, A COMPREHENSIVE 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.

FORM 990, PART VI, SECTION C, LINE 19: THE IRS FORM 990 AND CURRENT

AUDITED FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC ON THE

ORGANIZATION'S WEB SITE. THE FORM 1023 AND 990-T ARE AVAILABLE UPON

REQUEST.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED LOSSES ON INVESTMENTS:

-32,873.

FORM 990, PART XII, LINE 2C

THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

132212 01-23-12

Name o									IMA	L N	AT.	IONS	DBA	REI	DROVE	R			Εm		identifi 0 1 2 4	cation number
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MN,	MO	, 1	MS,	N	С,	ND	,_	NH,	ŊJ	, N	Μ,	NV,	NY,	OH,	, OK,	OR,	PA,	RI	Ι,	sc,	TN,	UT,
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