** PUBLIC DISCLOSURE COPY **

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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

Open to Public Inspection

Form 990 (2009)

Department of the Treasury Internal Revenue Service

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

A For the 2009 calendar year, or tax year beginning and ending Check if applicable C Name of organization D Employer identification number Please use IRS Address change label or THE HUMANE SOCIETY OF THE UNITED STATES print or Name type. 53-0225390 See Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite Termin-2100 L STREET, NW 202-452-1100 Amende City or town, state or country, and ZiP + 4 G Gross receipts \$ 210,229,641. Applica-tion pending WASHINGTON, DC 20037 H(a) Is this a group return F Name and address of principal officer: WAYNE PACELLE Yes X No for affiliates? SAME AS C ABOVE H(b) Are all affiliates included? Yes No Tax-exempt status: X 501(c) (3) (insert no.) 4947(a)(1) or If "No." attach a list, (see instructions) J Website: WWW.HUMANESOCIETY.ORG H(c) Group exemption number K Form of organization: X Corporation Trust Association Other > L Year of formation: 1954 M State of legal domicile: DE Part I Summary Briefly describe the organization's mission or most significant activities: THE HUMANE SOCIETY OF THE UNITED Activities & Governance STATES SEEKS TO STRENGTHEN THE HUMAN-ANIMAL BOND AND TO STOP ANIMAL 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 25 4 Total number of employees (Part V, line 2a) 5 629 Total number of volunteers (estimate if necessary) 6 627 Total gross unrelated business revenue from Part VIII, column (C), line 12 7a 505,385. Net unrelated business taxable income from Form 990-T, line 34 -100. Prior Year Current Year Contributions and grants (Part VIII, line 1h) 86,727,035 97.027.023. Revenue Program service revenue (Part VIII, line 2g) 2,546,759 3,819,024. Investment income (Part VIII, column (A), lines 3, 4, and 7d) -7.124.637-3.766.139. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 3,688,063. 4,601,272. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 85,837,220 101,681,180. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 4,667,843 6,744,923. Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 37,792,786 35,841,519. Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) 4,009,552 4,977,977. b Total fundraising expenses (Part IX, column (D), line 25) > 22,341,212. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 74.160.734. 53.194.219. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 99.664.400 121,725,153. Revenue less expenses. Subtract line 18 from line 12 -13,827,180-20.043.973. 580 Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 187,700,670. 201,115,609. Total liabilities (Part X, line 26) 21 25,483,526. 40.604.046. Net assets or fund balances. Subtract line 21 from line 20 162,217,144. 160,511,563. Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is basedppr all information of which preparer has any knowledge. Sign Signature of officer Here THOMAS WAITE III, TREASURER AND CFO Type or print name and title Date Check if self-Preparer's Preparer's identifying number (see instructions) Paid signature 9/2/2010 employed > Preparer's Firm's name (or RSM MCGLADREY. INC. EIN > Use Only self-omployed), 8000 TOWERS CRESCENT DR. STE 500 address, and VIENNA. VA 22182-6205 Phone no. ► 703-336-6400 May the IRS discuss this return with the preparer shown above? (see instructions) X Yes No

	990 (2009) THE HUMANE SOCIETY OF THE UNITED STATES 53-0225390 Page 2
Par	t III Statement of Program Service Accomplishments
1	Briefly describe the organization's mission:
	THE HUMANE SOCIETY OF THE UNITED STATES' MISSION IS TO CELEBRATE
	ANIMALS AND CONFRONT CRUELTY. MORE INFORMATION ON THESE PROGRAM
	SERVICE ACCOMPLISHMENTS IS AVAILABLE AT HUMANESOCIETY.ORG.
	BERVICE ACCOMPUISHMENTS IS AVAIDABBE AT HOMEMBOCIDII.ONG.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
•	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported. SEE SCHEDULE O FOR CONTINUATION(S)
	27606002
4a	(Code:) (Expenses \$ 27606802. including grants of \$ 1,713,762.) (Revenue \$ 1,530,746.)
	ADVOCACY AND PUBLIC POLICY
	THE HSUS'S END FACTORY FARMING CAMPAIGN WORKS WITH CONSUMERS,
	CORPORATIONS AND POLICY MAKERS TO BRING REFORM TO ANIMAL AGRIBUSINESS.
	2009 ACCOMPLISHMENTS INCLUDE 100 COMMITMENTS BY CORPORATIONS (INCLUDING
	WENDY'S, RED ROBIN, P.F. CHANG'S AND AU BON PAIN) AND EDUCATIONAL
	INSTITUTIONS TO IMPROVE ANIMAL WELFARE PURCHASING POLICIES, A NEW LAW
	IN CALIFORNIA THAT PROTECTS 1.8 MILLION DAIRY COWS FROM CRUEL TAIL
	DOCKING, NEW LEGISLATION IN MAINE AND MICHIGAN TO PHASE OUT EXTREME
	CONFINEMENT HOUSING SYSTEMS, 5 SHAREHOLDER RESOLUTIONS TO IMPROVE
	CONDITIONS FOR FARM ANIMALS, AND LITIGATION TO STOP POLLUTION FROM
	FACTORY FARMS IN CALIFORNIA AND NEW YORK. (Code:) (Expenses \$ 12862172. including grants of \$ 131,155.) (Revenue \$ 1,171,548.)
4b	(40000) /(Expenses 4
	STRATEGIC COMMUNICATIONS
	THE TAXABLE PROPERTY OF THE PARTY AND THE PA
	THE HSUS COMMUNICATES WITH SUPPORTERS BY PHONE, LETTER AND EMAIL, AND
	ON SOCIAL NETWORKS. THE HSUS HAS OVER 345,000 SUPPORTERS ON FACEBOOK
	AND UPDATES SUPPORTERS VIA TWITTER. THE HSUS REVAMPED ITS WEBSITE IN
	2009, LAUNCHING A NEW SITE WITH ENHANCED TOOLS FOR ENGAGEMENT AND
	SUPPORT. THE HSUS'S PRESIDENT WRITES A DAILY BLOG ABOUT ANIMAL ISSUES
	AND THE ACTIVITIES OF THE HSUS.
	THE PUBLIC RELATIONS DEPARTMENT WORKS TO INFORM THE PUBLIC ABOUT ANIMAL
	PROTECTION. THE HSUS DISTRIBUTED MORE THAN 600 PRESS RELEASES TO
	JOURNALISTS, CONDUCTED INTERVIEWS WITH NEWS OUTLETS, DISTRIBUTED
4-	10205467
4C	(Code:) (Expenses \$ 12325467. including grants of \$ 500,328.) (Revenue \$) FIELD AND DISASTER RESPONSE PROGRAMS
	FIELD AND DISASIER RESPONSE INCOMENS
	THE HSUS DEPLOYED ITS ANIMAL RESCUE TEAM ALL OVER THE NATION TO HELP
	THE HOUS DEPLOYED ITS ANIMAL RESCUE TEAM AND OVER THE NATION TO MADE
	ANIMALS IN DISTRESS, WORKING WITH OTHER ANIMAL WELFARE GROUPS AND ALL
	LEVELS OF LAW ENFORCEMENT OFFICIALS ON MORE THAN 40 RESCUE MISSIONS IN
	2009, RESCUING MORE THAN 10,000 ANIMALS. THE HSUS EMPLOYS STATE
	DIRECTORS IN 36 STATES ACROSS THE COUNTRY. THESE STAFF REPRESENTATIVES
	ADVANCE PROTECTIONS AT THEIR STATE CAPITOLS, NETWORK WITH GRASSROOTS
	ADVOCATES, ASSIST LOCAL SHELTERS AND HELP WITH HSUS FIELD RESCUE WORK.
	IN FLORIDA, THE HSUS WORKED WITH STATE OFFICIALS AND DEVELOPERS TO SAVE
	1,800 TORTOISES FROM BEING BURIED ALIVE ON CONSTRUCTION SITES. IN
	CALIFORNIA WE FUNDED CARE FOR RESCUED DOGS TO AID IN ANTI-POACHING
44	Other program services. (Describe in Schedule O.)
→u	(Expenses \$ 41991284. including grants of \$ 4,393,678.) (Revenue \$ 1,188,794.)
4.	Total program service expenses ▶ \$ 94,785,725.
40	TOTAL PLOSE AND SELVICE EXPENSES F. 4 7 7 1 7 2 2 2

Part IV Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 49x7(q)1) (other than a private foundation)? 1 If Yes, "complete Schedule or ownlete Schedule B, Schedule Of Contributions? 2 Is the organization required to complete Schedule B, Schedule Of Contributions? 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II 4 Section 501(c)(3) organizations. Did the organization subgrated in subgrated to the section 603(c)(4) (501(c)(5) and 501(c)(6) and 501(c)(Yes	No					
2 Is the organization required to complete Schedule E, Schedule of Contributors? 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Fes," complete Schedule C, Part I 4 Section 50 (1c)(8) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II 5 Section 50 (1c)(8), 50 (1c)(8), 50 (1c)(8), 60 (1c	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?								
3			1							
bublic office? If "Yes," complete Schedule C, Part I Section 50 (1c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II Section 50 (1c)(4), 50 (1c)(5), and 50 (1c)(6) organizations is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part II Pol. Did the organization and you not advised funds or any similar funds or accounts where donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts where donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Pol. Did the organization report an amount in Part X, inc 21; serve as a custodian for amounts to reserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Pol. 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 II Pol. Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," organized Schedule D, Part V, VII, VIII, IX, or X as applicable 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10 III "Yes," complete Schedule D, Part V, VIII, VIII, IX, or X as applicable 10 Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part X, VIII assets reported in Part X, line 167 If "Yes," complete Schedule D, Part X, VIII assets reported in Part X, VIII and XIII assets reported in Part X, VIII and XIII assets reported in Part X, VIII and XIII assets or consolidated infancial statements for the tax year?	2		2	X						
Section 501(c)(3) organizations. Did the organization engage in lobbying activities? if "Yes," complete Schedule C, Part II Section 501(c)(4), 501(c)(6), 501(c)(6), and 601(c)(6), and	3		3		х					
reporting requirement and proxy tax? If "Yes," complete Schedule C, Part II Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Did the organization neceive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historics structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II Did the organization sanswer to any of the following questions envioes? If "Yes," complete Schedule D, Part IV Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part IV Did the organization report an amount for investments - other securities 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 IV Did the organization report an amount for investments or the tax year include a footnote that addresses the organization report an amount for other liabilities 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 IV 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	4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Х						
6 Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part I 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 Plant in Complete Schedule D, Part II Plant II Plan	5		5	N/	A					
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 III. Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or dobt negotiation services? If "Yes," complete Schedule D, Part IV. Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V. Is the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V. Is the organization sanwer to any of the following questions "Yes"? If so, complete Schedule D, Part VI, IV, VIII, VIII, IX, or X as applicable. Did the organization report an amount for Inde, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. Did the organization report an amount for other assets 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 IX. Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX. Did the organization included in consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X. Did the organization included in consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X. Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X, IV "Yes," complete Schedule F, Par	6									
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B Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Jill 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 counselling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Jill Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V III Is the organization's answer to any of the following questions "Yes? If so, complete Schedule D, Part V, VII, VIII, IX, or X as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII. Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. 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 X. Did the organization report an amount for other labilities 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 X. Did the organization report an amount for other labilities in Part X, line 15? If "Yes," complete Schedule D, Part X. Did the organization report an amount for other labilities in Part X, line 15? If "Yes," complete Schedule D, Part X. Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X. It was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," lab X III X	7	Did the organization receive or hold a conservation easement, including easements to preserve open space,								
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10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V. 11 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable 11 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 12 Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 18? If "Yes," complete Schedule D, Part VII. 13 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 18? If "Yes," complete Schedule D, Part VIII. 14 Did the organization report an amount for other labilities 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 VIII. 15 Did the organization included in consolidated financial statements for the tax year include a footnote that addresses the organization's separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X, XII, and XIII. 16 Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII is optional 17 If Yes," completing Schedule D, Parts XI, XII, and XIII is optional 18 Is the organization maintain an office, employees, or agents outside of the United States? 19 Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part II 19 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to individuals located outside the United States? If "Yes," comple	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								
11 Is the organization sanswer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, DX, or X as applicable Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. Did the organization report an amount for other labilities 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 X. Did the organization separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X, III, and XIII is optional 12 X 13 Is the organization as school described in section 170(b)(1)A\(\(\(\(\(\(\(\)\)\)\(\(\)\(\(\)\)\)\(\(\)\(\(\)\)\(\(\)\)\(\(\)\)\(\(\)\(\(\)\(\		credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X					
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 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. Did the organization report an amount for other sasets 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 XI. Did the organization report an amount for other liabilities in Part X, line 26? If "Yes," complete Schedule D, Part X. Did the organization report an amount for other liabilities in Part X, line 26? If "Yes," complete Schedule D, Part X. Did the organization separate or consolidated financial statements for the tax year include a footnote that addresses the organization slability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X. Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X, XII, and XIII. It as the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X, XII, and XIII. Did the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States? If "Yes," complete Schedule F, Part II Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part III	11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X								
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21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the		169	140
21	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	L
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,	1		
2.2	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
23	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			l
		23	X	
24a	the state of the s			
24 a	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			ĺ
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
С	any tax-exempt bonds?	24c		
نہ	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
250	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
20 8	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
_	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
D	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified		****	
26	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
07	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
27	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
		27		X
00	Schedule L, Part III Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		
28	instructions for applicable filing thresholds, conditions, and exceptions):	100		8.00
_	s s s s s s s s s s s s s s s s s s s	28a	. 5519415	X
a	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	X	
D	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			
С	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	ļ	X
-00	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
29	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			T
30	contributions? If "Yes," complete Schedule M	30		X
	Did the organization liquidate, terminate, or dissolve and cease operations?			1
31		31		X
~~	If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
32	Schedule N, Part II	32		X
22	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			T
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
24	Was the organization related to any tax-exempt or taxable entity?			T
34	Was the organization related to any tax-exempt of taxable entity: If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	X	
25	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			T
35	If "Yes," complete Schedule R, Part V, line 2	35	X	
26	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			T
36	If "Yes," complete Schedule R, Part V, line 2	36		X
27	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	37		X
90	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		Т	T
38	Note, All Form 990 filers are required to complete Schedule O.	38	X	
	NOTE, AIL FOILIT 330 Illets are required to complete ochequie of.	Form	990	(2009

Part V Statements Regarding Other IRS Filings and Tax Compliance

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of		. [đặc.	NW.	
	U.S. Information Returns. Enter -0- if not applicable	1a	472			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and rules	eportab	le gaming			
	(gambling) winnings to prize winners?			1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		ĺ			
	filed for the calendar year ending with or within the year covered by this return	2a	629	40		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	rns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see					
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered			За	X	
				3b	X	
	At any time during the calendar year, did the organization have an interest in, or a signature or other					
	financial account in a foreign country (such as a bank account, securities account, or other financial			4a		X
b	If "Yes," enter the name of the foreign country:				W	R. Carlo
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign	Bank ar	nd			
	Financial Accounts.					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	action?		5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regard	arding P	rohibited			
	Tax Shelter Transaction?			5c	ļ	<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to	he orga	nization solicit			l
	any contributions that were not tax deductible?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions or	gifts			
	were not tax deductible?	•••••		6b	1.7	<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).				Property.	3000
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	X	
	, , , , , , , , , , , , , , , , , , , ,			7b	X	₩
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as requ	iired	_		l
	to file Form 8282?	1 1		7c	JAC/980	X
	If "Yes," indicate the number of Forms 8282 filed during the year	7d		1.5		
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a	persona	l .			V
	benefit contract?			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont			7f		 ^
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required.			7g	х	
h				7h	A 100 100 100 100 100 100 100 100 100 10	Salate a
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting or					
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have exceed a sponsoring during the condition of the		37 / 3	8	#W7.784	Erent E
^	at any time during the year?	•••••			188	1. 200.000
9	Sponsoring organizations maintaining donor advised funds.		N/A	9a		1750.000
a			37/3	9b	 	\vdash
10					Harry N.	# 12 m
10 a	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12	10a				
a b		10b				
11	Section 501(c)(12) organizations. Enter:					
''a	NT/A	11a				
b						
J	amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form			12a	1 mg . 157 cm	in the order (1)
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		40.304	No.	1,4750

Form **990** (2009)

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

Sect	ion A. Governing Body and Management						
				1		Yes	No
1a	Enter the number of voting members of the governing body	1a		25			
b	Enter the number of voting members that are independent	1b		25			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any other		5.3		
	officer, director, trustee, or key employee?				2		<u>X</u>
3	Did the organization delegate control over management duties customarily performed by or under the	e direc	t supervision				
	of officers, directors or trustees, or key employees to a management company or other person?				3		<u>X</u>
4	Did the organization make any significant changes to its organizational documents since the prior Fo	rm 990) was filed?		4		X
5	Did the organization become aware during the year of a material diversion of the organization's asset	ts?			5		X
6	Does the organization have members or stockholders?				6	X	
7a	The latest and the la	embers	of the				
	governing body?				7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other per	rsons?			7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken	during	the year			1.56	
	by the following:					\$ <u></u>	1
а	The governing body?				8a	X	
b	Each committee with authority to act on behalf of the governing body?				8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea						1
_	organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9	<u></u>	X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	Revenu	e Code.)				,
						Yes	No
10a	Does the organization have local chapters, branches, or affiliates?				10a	X	<u> </u>
b	If "Yes," does the organization have written policies and procedures governing the activities of such	chapt	ers, affiliates,		1		
	the state of the s				10b	X	<u> </u>
11	Has the organization provided a copy of this Form 990 to all members of its governing body before the	filing th	e form?		11	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				303	2.00	
12a	The second secon				12a	X	<u> </u>
b	Are officers, directors or trustees, and key employees required to disclose annually interests that co	uld giv	e rise			١	
	to conflicts?				12b	X	<u> </u>
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes,"	describe				1
	in Schedule O how this is done				12c	X	<u> </u>
13	Does the organization have a written whistleblower policy?				13	X	<u> </u>
14	Does the organization have a written document retention and destruction policy?				14	X	1 30 100 4
15	Did the process for determining compensation of the following persons include a review and approve	/al by i	ndependent		100		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	?			1000		
а	The organization's CEO, Executive Director, or top management official				15a	X	—
b	Other officers or key employees of the organization				15b	X	<u> </u>
	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 arrange	ement v	with a		and a second		
	taxable entity during the year?				16a	X	1
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to ev	aluate	its participation	on			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org				1000		
	exempt status with respect to such arrangements?				16b	<u>.l</u>	<u> </u>
Sec	ction C. Disclosure	~ ~ ~	70 CM 12	C 7	\ TT 7	77	T C
17	List the states with which a copy of this Form 990 is required to be filed AK, AL, AR, AZ,	CA, C	O,CT,F.	<u>., G</u>	·	, 11	<u>, </u>
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	·T (501	(c)(3)s only) a	vallable	e tor		
	public inspection. Indicate how you make these available. Check all that apply.						
	Own website Another's website X Upon request				,	•	
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents,	conflic	t of interest p	olicy, a	and fin	ancia	
	statements available to the public.	_					
20	State the name, physical address, and telephone number of the person who possesses the books	and re	cords of the c	rganiz	ation:	-	
	G. THOMAS WAITE III - 202-452-1100						
	700 PROFESSIONAL DR, GAITHERSBURG, MD 20879						(0000)

Page 7

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

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

Employees, and Independent Contractors

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

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

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

(A)	(B)			((C)	, dire		(D)	(E)	(F)
Name and Title	Average			Posi		3		Reportable	Reportable	Estimated
	hours	(cl	heci	all t	that	арр	ly)	compensation	compensation	amount of
	per	ē						from	from related	other
	week	direc				8		the	organizations (W-2/1099-MISC)	compensation from the
		ite e	nstee		l	ensat		organization (W-2/1099-MISC)	(44-27 1099-141130)	organization
		a Ti	a t		je e	comp		(11 2) 1000 111100)		and related
		Individual trustee or director	nstitutional trustee	Officer	(ey em	Highest compensated employee	ormer			organizations
LESLIE LEE ALEXANDER		_	_		-		_			
DIRECTOR	1.00	x						0.	0.	0.
JEFFREY J. ARCINIACO										
DIRECTOR	1.00	x						0.	0.	0.
PATRICIA MARES ASIP										
DIRECTOR	1.00	х			1		l	0.	0.	0.
PETER A. BENDER			Π							
DIRECTOR	1.00	X						0.	0.	0.
ERIC L. BERNTHAL, ESQ.										
DIRECTOR	1.00	X		L				0.	0.	0.
BARBARA S. BRACK							ŀ		_	
DIRECTOR	1.00	X	L					0.	0.	0.
ANITA W. COUPE, ESQ.	4 00				l				•	
CHAIR	1.00	X	_	<u> </u>		ļ		0.	0.	0.
NEIL B. FANG, ESQ., CPA	1 00	,,		1				0.	0.	^
DIRECTOR JANE GREENSPUN GALE	1.00	X	⊢	┢	\vdash	<u> </u>	<u> </u>	0.	U •	0.
DIRECTOR	1.00	x						0.	0.	0.
PAULA A. KISLAK, D.V.M.	1.00	^	-	├	├	-		0.	0.	0.
DIRECTOR	1.00	X		1			l	0.	0.	0.
JENNIFER LEANING, M.D.	1.00		\vdash	├	\vdash	-	┢	· ·		0.
VICE CHAIR	1.00	х					l	l o.	0.	0.
KATHLEEN M. LINEHAN, ESQ		一	┢╌	<u> </u>	\vdash	<u> </u>	H			
DIRECTOR	1.00	x			ĺ			0.	0.	0.
DWIGHT E. LOWELL, II			†		┢	┢				
DIRECTOR	1.00	X	ł					0.	0.	0.
JOHN MACKEY	***************************************									
DIRECTOR	1.00	X						0.	0.	0.
WILLIAM F. MANCUSO										
DIRECTOR	1.00	X						0.	0.	0.
MARY I. MAX	_	1								_
DIRECTOR	1.00	X	<u> </u>	<u></u>	L	_	<u> </u>	0.	0.	0.
PATRICK L. MCDONNELL DIRECTOR	4								_	
	1.00	ıv	1	1	1	1	ı	0.	0.	0.

					_			ATIED PIWIED	(tinund)	330 Tago 5
Part VII Section A. Officers, Directors, Tru		nplo	yee			ligh	est			/C)
(A)	(B)			_ (0				(D)	(E)	(F)
Name and title	Average	١,,		Pos				Reportable	Reportable compensation	Estimated amount of
	hours	(Cr	neck	all	inat	app	iy)	compensation from	from related	other
	per week	ector						the	organizations	compensation
	1.00.1	or dir	8			ated		organization	(W-2/1099-MISC)	from the
		ustee	trust		88	npen		(W-2/1099-MISC)		organization
		ndividual trustee or director	nstitutional trustee		Key employee	st co	<u></u>			and related
		Indivi	Institu	Officer	Key	Highest compensated employee	Form			organizations
GIL MICHAELS										٥
DIRECTOR	1.00	Х						0.	0.	0.
JUDY NEY	1			İ						,
DIRECTOR	1.00	X			_	<u> </u>		0.	0.	0.
SHARON LEE PATRICK										
DIRECTOR	1.00	X	<u> </u>			<u> </u>	<u> </u>	0.	0.	0.
JUDY J. PEIL		l	ł	l		ŀ	1		0.	0.
DIRECTOR	1.00	X			ļ	<u> </u>	<u> </u>	0.	0.	<u> </u>
MARIAN G. PROBST	1						l		0.	0.
DIRECTOR	1.00	X		<u> </u>	<u> </u>	<u> </u>	┝	0.	0.	· · ·
JOSHUA S. REICHERT, PH.D								0.	0.	0.
DIRECTOR	1.00	X	_	<u> </u>	ļ		<u> </u>	U .	0.	
WALTER J. STEWART, ESQ.	1	l						,	0.	0.
BOARD TREASURER	1.00	X	<u> </u>	<u> </u>	_	-	<u> </u>	0.	· ·	•
JOHN A. TAFT	1							0.	0.	0.
DIRECTOR	1.00	X	_	_	┡	┞	1	U .	0.	
ANDREW WEINSTEIN	1	l							0.	0.
DIRECTOR	1.00	X	<u> </u>	<u> </u>	1		_	0.	0.	· ·
PERSIA WHITE		l			ı	1			0.	0.
DIRECTOR	1.00	X		<u> </u>		Ļ	<u></u>	0.	1	
1b Total	<u></u>				<u></u>	<u> </u>		2,883,100.		1 201,003.
2 Total number of individuals (including but compensation from the organization	not limited to t	hose	e list	ed a	abov	e) w	ho r	eceived more than \$10	0,000 in reportable	29

compensation from the organization

Yes No X

Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on 3 3 line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person ...

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation
QUADRIGA ART 825 HYLTON ROAD, PENNSAUKEN, NJ 08110	DIRECT MAIL	8,213,837.
EURO RSCG EDGE , 2173 SALK AVENUE, SUITE 300, CARLSBAD, CA 92008	MARKETING	7,701,653.
ARIZONA LOCKBOX , 18401 N. 25TH AVENUE SUITE 120, PHOENIX, AZ 85023-1208	LOCKBOX PROCESSOR	2,773,274.
THE SHARE GROUP, INC. 73 CHAPEL STREET, NEWTON, MA 02458	TELEMARKETING	1,840,171.
IMLAY INTERNATIONAL, LLC., 5101 BACKLICK RD. SUITE I #303, ANNANDALE, VA 22003	PRINT MANAGEMENT	1,558,993.
2 Total number of independent contractors (including but not limited to those lis	ted above) who received more than	

\$100,000 in compensation from the organization

SEE SCHEDULE J-2 FOR PART VII, SECTION A CONTINUATION

Form 990 (2009)

	990. (2 t VIII			CIETY OF	THE UNITE	D STATES	53-0225	390 Page 9
		oratement of never			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts st	1 a	Federated campaigns	1a					
grants	b	Membership dues						
an, c	С	Fundraising events	1c	416,753.				
gifts, lar an	d	Related organizations	1d					
	е	Government grants (contribution	ons) 1e					
유의	f	All other contributions, gifts, grant	s, and					
Contributions, and other sim		similar amounts not included abov		96,610,270.				
15 E	g	Noncash contributions included in lines	1a-1f: \$	4668313.				
<u>8</u> 0	h	Total. Add lines 1a-1f		>	97,027,023.			
l				Business Code			and the same of th	
8		OTHER INCOME &		900099	1410170.	1410170.	·	
e e		FUNDRAISING EVE	NTS/REG	561499	1343435.	1343435.	F0F 20F	
u S	_	ADVERTISING		541800	505,385.	462 042	505,385.	
हिं <u>च</u>	d	SUBSCRIPTIONS		511110	163,813.	163,813.		
Program Service Revenue	е	CONSULTATION &	SERVICE	541990	126,152.	126,152.		
۱ ۵		All other program service rever		900099	270,069.	270,069.	Commence of the State of the St	
_	g	Total. Add lines 2a-2f	***		3819024.			
- 1	3	Investment income (including			2502170			2 522 170
		other similar amounts)			3523170.			3,523,170
	4	Income from investment of tax			2020051			2 727 751
	5	Royalties		7	3737751.		Etrementinovina dado	3,737,751
			(i) Real	(ii) Personal				
		Gross Rents	72,306.					
		Less: rental expenses	70 206					
		Rental income or (loss)	72,306.	<u> </u>	70 206			72,306.
		Net rental income or (loss)		>	72,306.	Bases valterelli om och sterli	magata ili maliyata bili sisti Mat	14,300.
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
1		assets other than inventory	99,908,517.					
-	b	Less: cost or other basis	107 107 006					
- 1		1	107,197,826.					
		Gain or (loss)						-7,289,309
l		Net gain or (loss)		·····	-7,289,309.		*#Salte Willet	-7,205,305
e l	8 a	Gross income from fundraising						
Ş		including \$ 416,7		<u> </u>				
Be		contributions reported on line		1,343,435.	TR 1 1974 4			
Other Revenue	_	Part IV, line 18						
ਰ		Less: direct expenses Net income or (loss) from fund		1,550,055.	-7,200.			-7,200
1		Gross income from gaming ac	_		7,200	克克尔特尔斯 克尔克尔基本		
	9 а				14. A. P. S. L. Mar.			
- 1	L	Part IV, line 19 Less: direct expenses				Arre.		
								Sakupata, Maripus da da da
		Gross sales of inventory, less	-	······		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		
	10 a	and allowances						
	h	Less: cost of goods sold						
		Net income or (loss) from sale			A Marie and Late of the Police of States		The first of a state of the sta	and the constitution of th
f	<u>_</u>	Miscellaneous Revenu		Business Code	de la	STREET MARKET		是有数据的。 第一章
Ī	11 a	AMILIAN TARAGON		900099	638,060.	And a constitution and processed and of the constitution of the	1 1980 To It on	638,060
l	b	OTHER FEES		541990	96,709.			96,709
	c	LIST RENTALS		511140	63,646.			63,646
	d							
		Total. Add lines 11a-11d			798,415.		18 A STATE OF STATE	
	е	Total. Add tilles i la i lu				3313639.	505,385.	835,133

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. sizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	All other organizations must compl	ete column (A) but are	not required to comple	ete columns (B), (C), and	I (D).
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
-	organizations in the U.S. See Part IV, line 21	6,114,726.	6,114,726.		Jenga Militari e e e e e e e e e e e e e e e e e e e
	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
	Grants and other assistance to governments,				
_	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16	630,197.	630,197.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,			22 255	255 041
	trustees, and key employees	2,099,117.	1,637,311.	83,965.	377,841.
6	Compensation not included above, to disqualified				
•	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				2 001 601
7	Other salaries and wages	25,779,798.	20,983,692.	814,425.	3,981,681.
8	Pension plan contributions (include section 401(k)				466 600
-	and section 403(b) employer contributions)	2,592,272.	2,021,972.		466,609.
9	Other employee benefits	3,286,867.	2,763,033.	82,132.	441,702.
10	Payroll taxes	2,083,465.	1,691,432.	66,915.	325,118.
11	Fees for services (non-employees):				
	Management				
	Legal	1,742,193.	811,607.	203,469.	727,117.
	Accounting	247,691.	209,741.	8,298.	29,652.
	Lobbying	878,266.	755,851.	29,902.	92,513.
u	Professional fundraising services. See Part IV, line 17	4,977,977.		2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/	4,977,977.
f	Investment management fees	2,088,733.	1,590,660.		389,171.
	A.1	9,559,198.	8,318,946.	351,961.	888,291.
g	Advertising and promotion	11,341,986.	9,525,346.		1,439,807.
12	-	4,788,409.	4,054,755.	160,410.	573,244.
13	Office expenses				
14	Royalties				
15	Occupancy	1,538,742.	1,302,984.	51,548.	184,210.
16	Travel	3,771,450.		126,343.	451,499.
17	Payments of travel or entertainment expenses				
18	for any federal, state, or local public officials				
40	Conferences, conventions, and meetings				
19					
20	Interest Payments to affiliates				
21	Depreciation, depletion, and amortization	1,635,710.	1,385,095	54,796.	195,819.
22		785,131			93,992.
23	Other expenses. Itemize expenses not covered				
24	above. (Expenses grouped together and labeled				
	miscellaneous may not exceed 5% of total	Marie Control	and the second s		A 50 1945
	expenses shown on line 25 below.) INTERNATIONAL ASSISTANC	15,162,716	12,978,790	. 513,456.	1,670,470.
	DIDECT DECDONCE COCTS	11,979,045			4,081,987.
-	EDUCATION MATERIAL PUR	8,430,808			927,293.
	DIE AND OFFED TAYES	210,656			25,219.
9					
	All other expenses	121725153	. 94,785,725	. 4,598,216	22,341,212.
25	Joint costs. Check here X if following	1227233			
26	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
		41.454.101	. 24,870,081	979,121	15,604,899.
	educational campaign and fundraising solicitation				Form 990 (2009)

Part X Balance Sheet (B) (A) Beginning of year End of year 7,500. 8,628. 1 Cash - non-interest-bearing 1 49,037,056. 24,810,216. 2 Savings and temporary cash investments 11,566,430. 9,791,087. Pledges and grants receivable, net 3 3 4,417,008. 8,268,985. 4 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II 5 of Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete 6 Part II of Schedule L 7 Notes and loans receivable, net Inventories for sale or use 347,417. 1,283,940. Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other 28,096,950. basis. Complete Part VI of Schedule D _____ 10a 14,571,183. 14,010,292. b Less: accumulated depreciation 10b 14,086,658. 10c 141,348,072. 101,397,198. Investments - publicly traded securities 11 11 12 12 Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 13 13 14 14 Intangible assets 1,595,517. 6,355,750. 15 Other assets. See Part IV, line 11 15 201,115,609. 187,700,670. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 8,174,228. 7,757,776. 17 17 Accounts payable and accrued expenses 18 18 Grants payable _____ 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties 17,725,750. 32,429,818. 25 Other liabilities. Complete Part X of Schedule D 25 40,604,046. 25,483,526 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117, check here

X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 84,721,713. 98,558,521 27 27 Unrestricted net assets 35,548,412. 45,129,788. Temporarily restricted net assets 28 30,660,062. 28,110,211. Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here complete lines 30 through 34. Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 32 Retained earnings, endowment, accumulated income, or other funds 32 162,217,144. 160,511,563. 33 33 Total net assets or fund balances _____ 201,115,609. 187,700,670. Total liabilities and net assets/fund balances

Form 990 (2009)

	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a b	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a 2b	Х	<u> </u>
	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	х	
d	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			
	consolidated basis, separate basis, or both: Separate basis Consolidated basis Both consolidated and separate basis			
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	За	х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b	х	
	of addition, explain with in contession of all accounts any	Form	990	2009)

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

Employer identification number Name of the organization 53-0225390 THE HUMANE SOCIETY OF THE UNITED STATES Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. a Type I b Type II c Type III - Functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III f supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, 11g(i) the governing body of the supported organization? 11g(ii) (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). h (iii) Type of (vi) Is the (iv) Is the organization (v) Did you notify the (vii) Amount of (i) Name of supported (ii) EIN organization in col. organization organization in col. in col. (i) listed in your organization (i) organized in the support (described on lines 1-9 governing document? (i) of your support? above or IRC section (see instructions)) Yes No Yes No Yes

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Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 THE HUMANE SOCIETY OF THE UNITED STATES 53-0225390 Page 2

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support (f) Total (d) 2008 (e) 2009 (c) 2007 Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 1 Gifts, grants, contributions, and membership fees received. (Do not 477,480,443. 97,027,023 85,224,988 86,727,035 116,960,975 91,540,422 include any "unusual grants.") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge ... 477,480,443. 97,027,023. 85,224,988 86,727,035 116,960,975 91.540.422 4 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a 100 governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 477,480,443. 6 Public support. Subtract line 5 from line 4 Section B. Total Support (e) 2009 (f) Total (d) 2008 (a) 2005 (b) 2006 (c) 2007Calendar year (or fiscal year beginning in) 97,027,023 477,480,443. 86,727,035 85,224,988 116,960,975 91,540,422 7 Amounts from line 4 8 Gross income from interest. dividends, payments received on securities loans, rents, royalties 7,333,227 34,371,191. 8,478,978 8,245,945 4.944.561 5,368,480 and income from similar sources ... 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital 798,415 1,795,221. 255,627 150,410 222,451. 368,318. assets (Explain in Part IV.) 513,646,855. CONTRACTOR 11 Total support. Add lines 7 through 10 13,140,020. 12 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 92.96 % 14 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) % 15 15 Public support percentage from 2008 Schedule A, Part II, line 14 16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions > Schedule A (Form 990 or 990-EZ) 2009

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

	JIII 330 OI 330 LZ) 2003				
Part III Su	apport Schedule for	Organizations Descri	bed in Section 509(a)(2	(Complete only if you checke	d the box on line 9 of Part I.
Section A	Public Support				

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not		•				
include any "unusual grants.")	ı					
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that		<u> </u>		<u> </u>		
are not an unrelated trade or bus-	Į		İ	ļ		
:			ļ			

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 the organization without charge						
6 Total. Add lines 1 through 5						
7a 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						
8 Public support (Subtract line 7c from line 6.)		1-15-15-16-15-2-15-2-15-2-15-2-15-2-15-2	Chip Control	3154 357143	MEDIAN PROPERTY	
Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	1,2,200					
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						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12.)			<u> </u>	<u> </u>	504(-)(0)	
14 First five years. If the Form 990 is fo						▶ 1
check this box and stop here						P
Section C. Computation of Pub					Tan I	
15 Public support percentage for 2009					1 1	%
16 Public support percentage from 200					16	%
Section D. Computation of Inve					T T	
17 Investment income percentage for 2			ine 13, column (f))			%
18 Investment income percentage from	2008 Schedule A	, Part III, line 17			18	%
19a 33 1/3% support tests - 2009. If the						17 is not
more than 33 1/3%, check this box	and stop here. The	e organization qua	lifies as a publicly	supported organiz	zation	▶∟
b 33 1/3% support tests - 2008. If the	organization did	not check a box o	n line 14 or line 19	9a, and line 16 is n	nore than 33 1/3%,	and
line 18 is not more than 33 1/3%, ch	eck this box ands	stop here. The org	anization qualifies	as a publicly supp	oorted organization	▶
20 Private foundation. If the organization						

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Open to Public Inspection

Schedule C (Form 990 or 990-EZ) 2009

Department of the Treasury Internal Revenue Service Complete if the organization is described below.

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

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

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

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

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes." to Form 990, Part IV, line 5 (Proxy Tax), then

	e organization answered "Yes," to Section 501(c)(4), (5), or (6) organizat		y rux,, aron		
	e of organization				ployer identification number
	mitta iiiiM:	ANE SOCIETY OF T	HE UNITED S	TATES	53-0225390
Pa	rt I-A Complete if the org	anization is exempt und	er section 501(c)	or is a section 527	organization.
4	Duride a description of the organiz	ation's direct and indirect politic	al campaign activities	in Part IV.	
2	Political expenditures			>	\$
3	Volunteer hours	•••••			
J					
Pa	rt I-B Complete if the org	anization is exempt und	ler section 501(c)	(3).	
	Estable amount of any avaina toy	incurred by the organization un	der section 4955		\$
2	Enter the amount of any excise tax	incurred by organization manag	ers under section 495	5	Ψ
3	If the organization incurred a section	n 4955 tax, did it file Form 4720	for this year?		······· [
4a	Was a correction made?		*****		Yes No
Pa	art I-C Complete if the org	janization is exempt und	der section 501(c)	, except section 5	J1(c)(3).
1	Enter the amount directly expended	d by the filing organization for se	ection 527 exempt fund	ction activities	\$
2	Enter the amount of the filing organ	nization's funds contributed to o	ther organizations for s	section 527	
	exempt function activities				\$
3	Total axampt function expenditures	Add lines 1 and 2. Enter here	and on Form 1120-POI	- ,	
_	line 17b				* \$
4	Did the filing organization file Form	1120-POL for this year?			
5	Estable manner addresses and or	molever identification number (F	IN) of all section 527 p	olitical organizations to v	which payments were made.
	The state of the s	the emount paid from the filing (organization's funds. A	iso enter the amount of t	JUILLICAL COLLETIONS 10001104
	that were promptly and directly del	livered to a separate political org	ganization, such as a s	eparate segregated tund	or a political action committee
	(PAC). If additional space is neede	d, provide information in Part IV			The state of the s
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fro	
				filing organization' funds. If none, enter	-n- promptly and directly
				Tarias. Il riono, onto	delivered to a separate
					political organization. If none, enter -0
					in money of the control of the
					į.
					1

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

Schedule C (Form 990 or 990-EZ) 2009 Part II-A Complete if the org	janization is exer	SOCIETY OF npt under section	THE UNITED n 501(c)(3) and fil	STATES 53 - 0 ed Form 5768	225390 Page 2
(election under sec					
. —	ition belongs to an affil ition checked box A ar	- '			
Limi	ts on Lobbying Exper ditures" means amou	nditures		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infl	uence public opinion (grass roots lobbying)			
b Total lobbying expenditures to infl					
c Total lobbying expenditures (add l	-				
d Other exempt purpose expenditur					
e Total exempt purpose expenditure					
f Lobbying nontaxable amount. Ent					
If the amount on line 1e, column (a)		bying nontaxable am			
Not over \$500,000		the amount on line 1e.	į		
Over \$500,000 but not over \$1,00	0.000 \$100.00	0 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5		0 plus 10% of the exc			
Over \$1,500,000 but not over \$17		0 plus 5% of the exce			
Over \$17,000,000	\$1,000,0				
g Grassroots nontaxable amount (el	nter 25% of line 1f)				
h Subtract line 1g from line 1a. If ze					
i Subtract line 1f from line 1c. If zer					
j If there is an amount other than ze		line 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this		_			Yes No
	zations that made a solumns below. See th	e instructions for line	n do not have to com es 2a through 2f on p		
	Lobbying Exper	nditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount		State of the State			
b Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount				#10 2 K 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	
(150% of line 2d, column (e))					
((-))	Line status seem all the transport seem to the page 1998 and the	province distribution by a consideration of the first and the A. C. C. C. C. C.	The state of the s	Nascona e recento de la transformación de la contractiona de la contra	
f Grassroots Johnving expenditures	.]				

Schedule C (Form 990 or 990 EZ) 2009 THE HUMANE SOCIETY OF THE UNITED STATES 53 - 0 2 2 5 3 9 0 Page 3. Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

		(a	1)	(b)
		Yes	No	Amo	unt
1 Dı	uring the year, did the filing organization attempt to influence foreign, national, state or				
loc	cal legislation, including any attempt to influence public opinion on a legislative matter		4.5		
	referendum, through the use of:	149-047			
-	olunteers?	X			
b Pa	aid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X			004
	edia advertisements?	X			894.
	ailings to members, legislators, or the public?	X			7,245.
	ublications, or published or broadcast statements?	X			011.
	rants to other organizations for lobbying purposes?	X			,000.
	rect contact with legislators, their staffs, government officials, or a legislative body?	X			3,799.
h R	allies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	X		1,09	7,291.
	ther activities? If "Yes," describe in Part IV		Х	2 60	
	otal. Add lines 1c through 1i				240.
2a D	id the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	N. Tibus	
h 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	The state of			
d If	the filling erganization incurred a section 4912 tax, did it file Form 4720 for this year?	.			
Part I	1 ' '	tion 501(c)(5), or s	ection	
	501(c)(6).				
				Yes	No
1 V	Vere substantially all (90% or more) dues received nondeductible by members?		1		
2 D	old the organization make only in-house lobbying expenditures of \$2,000 or less?		2		<u> </u>
3 D	oid the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), sec		3	l	
	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if F "Yes."		1	<u> </u>	*** <u>**</u>
1 0	Dues, assessments and similar amounts from members	itical	C. S.		
2 8	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pol			1	
	expenses for which the section 527(f) tax was paid).				
	Current year		2b		
	Carryover from last year				
С	Total				
3 /	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues f notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the	excess	180-180		
4 I	f notices were sent and the amount on line 2c exceeds the amount of line 3, what portion of the	d political	1.18		
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying an		1 4	``[
6	expenditure next year?		······	 	
5	Taxable amount of lobbying and political expenditures (see instructions) IV Supplemental Information ete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5		5		

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

➤ Attach to Form 990. ➤ See separate instructions.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization 53-0225390 THE HUMANE SOCIETY OF THE UNITED STATES

Employer identification number

Par	t Is Organizations Maintaining Donor Advised	l Funds or Other Similar Fund	Is or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		
		(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 w	riting that the assets held in donor adv	rised funds
	are the organization's property, subject to the organization's e		
6	Did the organization inform all grantees, donors, and donor ad		
	for charitable purposes and not for the benefit of the donor or		
	impermissible private benefit?		
Par	t II Conservation Easements. Complete if the orga		
1	Purpose(s) of conservation easements held by the organization	n (check all that apply).	
	Preservation of land for public use (e.g., recreation or ple	easure) Preservation of an h	nistorically important land area
	Protection of natural habitat	Preservation of a ce	rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the form	n of a conservation easement on the last
	day of the tax year.		
	•		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		1 1
С	Number of conservation easements on a certified historic stru		1 I
_	Number of conservation easements included in (c) acquired a		
3	Number of conservation easements modified, transferred, rele		
_	year▶	, ,	•
4	Number of states where property subject to conservation eas	ement is located >	
5	Does the organization have a written policy regarding the peri		- of
-	violations, and enforcement of the conservation easements it		1 1 []
6	Staff and volunteer hours devoted to monitoring, inspecting, a		
7	Amount of expenses incurred in monitoring, inspecting, and e		
8	Does each conservation easement reported on line 2(d) above		
	and section 170(h)(4)(B)(ii)?	-	[17]
9	In Part XIV, describe how the organization reports conservation	on easements in its revenue and expen	se statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organizati		
	conservation easements.		
Pa	tilli Organizations Maintaining Collections of	Art, Historical Treasures, or	Other Similar Assets.
	Complete if the organization answered "Yes" to Form 9	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116, not	to report in its revenue statement and	balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed		
	the footnote to its financial statements that describes these it	ems.	
b	If the organization elected, as permitted under SFAS 116, to r	report in its revenue statement and bala	ance sheet works of art, historical treasures,
	or other similar assets held for public exhibition, education, or		
	these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
2	If the organization received or held works of art, historical trea		
_	the following amounts required to be reported under SFAS 1		
а	Revenues included in Form 990, Part VIII, line 1	_	> \$
b	Assets included in Form 990, Part X		
_		••••••	

Part VII Investments - Other Securities. Se	e Form 990, Part X, lin	e 12.		
(a) Description of security or category (including name of security)	(b) Book value	Co	(c) Method of valuati st or end-of-year mark	
Financial derivatives				
Closely-held equity interests				
Other				
				·
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)				
Part VIII Investments - Program Related. S	ee Form 990, Part X, I	ine 13.		
(a) Description of investment type	(b) Book value		(c) Method of valuat ost or end-of-year mark	
	<u> </u>			
	<u> </u>			
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)				经分类 医囊科囊性征炎
Part IX Other Assets. See Form 990, Part X, line	∋ 15.			
) Description			(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) lir	ne 15.)			
Part X Other Liabilities. See Form 990, Part X				
1. (a) Description of liability		(b) Amount	Exercise and a	
Federal income taxes			7. 40.64	
ACCRUED SEVERANCE OBLIGATION		1,533,297		
DEFERRED COMPENSATION ANNUITY	Y CONTRACTS	381,469		
SPLIT INTEREST ARRANGMENTS L	IABILITY	7,366,793		
ACCRUED POSTRETIREMENT BENEF			1.	
OBLIGATION		8,782,274		
DUE TO AFFILIATES		14,365,985		
Total. (Column (b) must equal Form 990, Part X, col (B) lin	ne 25.)	32,429,818		

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

'Schedule F (Form 990)

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 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

THE HIMANE SOCIETY OF THE UNITED STATES

53-0225390

THE HUMANE SOCI					
		ctivities Out	side the United States. Comp	ete if the organization answered "Y	es"
to Form 990, Par					
			ds to substantiate the amount of the g		
grantees' eligibility for th	e grants or assis	stance, and the	selection criteria used to award the gr	ants or assistance?	res L No
2 For grantmakers. Desc	ribe in Part IV the	e organization's	procedures for monitoring the use of	grant funds outside the United Stat	es.
3 Activities per Region. (U	se Schedule F-1	(Form 990) if ac	lditional space is needed.)		
(a) Region		(c) Number of	(d) Activities conducted in region	(e) If activity listed in (d)	(f) Total
	offices	employees or	(by type) (i.e., fundraising,	is a program service,	expenditures
	in the region	agents in	program services, grants to	describe specific type	for region
		region	recipients located in the region)	of service(s) in region	
				SUPPORT FOR WILDLIFE	
				HUMANE EDUCATION	
CENTRAL AMERICA AND				PROGRAM/SUPPORT FOR	
THE CARIBBEAN	0	0	GRANTS TO OTHER SOCIETIES.	VETERINARY CLINIC	19,200.
				SUPPORT ADVOCACY,	
				EDUCATION, VACCINATION	
EAST ASIA AND THE	1	1		PROGRAMS; MERCY RELEASE	
PACIFIC		0	GRANTS TO OTHER SOCIETIES.	AND SHARK-FINNING	27,000.
				SUPPORT SPAY/NEUTER	
		1		PROGRAMS; ANIMAL HEALTH	
		:		PROGRAM; PURCHASE OF	
EUROPE			GRANTS TO OTHER SOCIETIES.	ISOLATION STABLES FOR	266,170.
HOROLD					
MIDDLE EAST AND				SUPPORT SPAY/NEUTER	
NORTH AFRICA	1 .		GRANTS TO OTHER SOCIETIES.	PROGRAMS.	5,000.
NORTH APRICA			5141110 10 0111111 000111111	SUPPORT SPAY/NEUTER	
				PROGRAMS; ON-GOING	
				AWARENESS PROGRAM FOR	
NORTH AMERICA			GRANTS TO OTHER SOCIETIES.	ANIMAL WELFARE IN	257,327.
NORTH AMERICA	 	<u> </u>	GRANTS TO OTHER COCTETIES.		
			1		
				SUPPORT SPAY/NEUTER	
GOVERN AMERICA	l ,		GRANTS TO OTHER SOCIETIES.	PROGRAMS.	9,000.
SOUTH AMERICA	<u> </u>	1	GRANTS TO OTHER SOCIETIES.	ANIMAL RESCUE EDUCATION	
				AND AWARENESS; SUPPORT	
				TO PURCHASE VEHICLE FOR	
		0	GRANTS TO OTHER SOCIETIES.	RESCUE WORK; SPAY AND	35,000.
SOUTH ASIA	<u>'</u>	 	GRANTS TO OTHER SOCIETIES.	SUPPORT ANIMAL	
		1		1	
				VACCINATION; CAPACITY BUILDING; HUMANE	
			SPANIES NO OBURD SOCIESTES	EDUCATION PROGRAM IN	11,500.
SUB-SAHARAN AFRICA		<u> </u>	GRANTS TO OTHER SOCIETIES.	EDUCATION FROGRAF IN	11,500.
			1-2-3-1-011		
_					630,197.
Totals	1	0	Land the second		Earm 990) 2009

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

Schedule F (Form 990) 2009

SEE PART IV FOR COLUMN (E) DESCRIPTIONS

THE HUMANE SOCIETY OF THE UNITED STATES

Page 2

53-0225390

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 Use Schedule F-1 (Form 990) if additional space is needed. Schedule F (Form 990) 2009

Schedule F (Form 990) 2009	Schec					the inc), or lot which the grantee of course has provided account of Enter total number of other organizations or entitles	of other organization:	the inst, or for which the grantee or counsel has progrete total number of other organizations or entities
40		exempt by	, recognized as tax	le foreign country	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by	ions listed above that are	of recipient organizat	2 Enter total number o
		0	WIRE	15,000.	MERCY RELEASE AND SHARK FINNING.	EAST ASIA AND THE PACIFIC		
					CAMPAIGNS AGAINST	in Yes.	av E	
		0	WIRE	2,500.	SPAY/NEUTER SERVICES AND EDUCATION GRANT.	CENTRAL AMERICA AND THE CARIBBEAN		
						Parking and S		
		0	WIRE	2,500.WIRE	CLINIC GRANT.	AND THE CARIBBEAN		10. 10. 10. 10. 10. 10. 10. 10. 10. 10.
					MOBILE SPAY/NEUTER	CENTRAL AMERICA		
		0.	WIRE	2,500.	MEDIA OUTREACH GRANT.	CENTRAL AMERICA AND THE CARIBBEAN	u de la companya de l	
		0	WIRE	2,500.	CATS.	AND THE CARIBBEAN		
					SERVICES TO AS MANY AS 150 DOGS AND 100	CENTRAL AMERICA		
					FUNDS TO OFFER S/N	a k		
		0.	WIRE	5,000.	AMPLIFY ITS EXISTING SPAY/NEUTER,	CENTRAL AMERICA AND THE CARIBBEAN		
		-			VETERINARY CLINIC AND		To the second se	
					FINDS TO MODERNIZE	ant dwa		
		0	WIRE	1 700	HUMANE EDUCATION PEOGRAM (THE PROGRAM	CENTRAL AMERICA		
					SUPPORTING THEIR			
					FUNDS TO CONTINUE			
		0.	WIRE	2,500.	WILDLIFE HUMANE EDUCATION PROGRAMS.	MERICA ARIBBEAN	CENTRAL A	TOTAL Magnetic Control of the Contro
(I) Method of valuation (book, FMV, appraisal, other)	(h) Description of non-cash assistance	(g) Amount of non-cash assistance	(f) Manner of cash disbursement	(e) Amount of cash grant	(d) Purpose of grant	(c) Region	(b) IRS code section and EIN (if applicable)	1 (a) Name of organization

SEE PART IV FOR COLUMN (D) DESCRIPTIONS 26

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53-0225390

Page 3

THE HUMANE SOCIETY OF THE UNITED STATES

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Schedule F (Form 990) 2009

Schedule F (Form 990) 2009 (h) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (c) Number of (d) Amount of recipients cash grant Use Schedule F-1 (Form 990) if additional space is needed. (b) Region (a) Type of grant or assistance

Schedule F (Form 990) 2009 THE HOLDING BOOLETT OF THE	Page 4
Supplemental Information Complete this part to provide the information required in Part I, line 2, and any additional information.	
REGION: SOUTH ASIA	
(E) SPECIFIC TYPES OF SERVICES IN REGION: ANIMAL RESCUE EDUCATION AND	
AWARENESS; SUPPORT TO PURCHASE VEHICLE FOR RESCUE WORK; SPAY AND	
NEUTER/STREET DOG VACCINATION.	
REGION: SUB-SAHARAN AFRICA	
(E) SPECIFIC TYPES OF SERVICES IN REGION: SUPPORT ANIMAL VACCINATION;	
CAPACITY BUILDING; HUMANE EDUCATION PROGRAM IN MINIMIZING AND ERADICATION	NG
CRUELTY AND SUFFERING OF DONKEYS; SPAY/NEUTER PROGRAMS.	
	···
PART II, COLUMN (D):	
(D) PURPOSE OF GRANT: FUNDS TO CONTINUE SUPPORTING THEIR HUMANE	
EDUCATION PROGRAM (THE PROGRAM HAS REACHED 8,500 SCHOOL CHILDREN).	
REGION: CENTRAL AMERICA AND THE CARIBBEAN	
(D) PURPOSE OF GRANT: FUNDS TO MODERNIZE VETERINARY CLINIC AND AMPLIFY	
ITS EXISTING SPAY/NEUTER, VACCINATION AND ADOPTION PROGRAM.	
	
REGION: EUROPE	
(D) PURPOSE OF GRANT: FUNDS TO BUILD/PURCHASE ISOLATION STABLES FOR	
NEWLY ARRIVE DONKEYS TO KEEP SEPARATED FROM HERD UNTIL HEALTH IS CHECKE	ŝD.
REGION: EUROPE	
(D) PURPOSE OF GRANT: SUPPORT SPAY/NEUTER/ VACCINATION/TREATMENT OF	
ANIMALS; AS WELL AS COMMUNITY TRAINING & OUTREACH.	· · · · · · · · · · · · · · · · · · ·
REGION: SOUTH ASIA	

Supplemental Information Complete this part to provide the information required in Part Line 2, and any additional information. (D) PURPOSE OF GRANT: ANNENBERG GRANT. WORK ON IMMUNOCONTRACEPTIVE AGENTS ON WILDLIFE AND WILD HORSES AND RESEARCH PROMOTING THE USE AND 40RE EFFICIENT PRODUCTION OF SUCH AGENTS. SCHEDULE F, PART II: THE INSTRUCTIONS FOR SCHEDULE F REQUIRE GRANTS AND OTHER ASSISTANCE GIVEN TO RECIPIENTS OVER \$5,000 BE REPORTED IN DETAIL. HOWEVER, IN ORDER TO INCREASE TRANSPARENCY AND PROVIDE THE USERS OF THE FORM WITH COMPLETE INFORMATION ABOUT THE ORGANIZATION'S ACTIVITIES, MANAGEMENT HAS CHOSEN TO LIST THE GRANTS OF \$500 OR GREATER IN DETAIL ON SCHEDULE F OF THE HSUS'S FORM 990.	Schedule F (Form 990) 2009 THE HUMANE SOCIETY OF THE UNITED STATES 53-0225390 Page 4
(D) PURPOSE OF GRANT: ANNENBERG GRANT. WORK ON IMMUNOCONTRACEPTIVE AGENTS ON WILDLIFE AND WILD HORSES AND RESEARCH PROMOTING THE USE AND MORE EFFICIENT PRODUCTION OF SUCH AGENTS. SCHEDULE F, PART II: THE INSTRUCTIONS FOR SCHEDULE F REQUIRE GRANTS AND OTHER ASSISTANCE GIVEN TO RECIPIENTS OVER \$5,000 BE REPORTED IN DETAIL. HOWEVER, IN ORDER TO INCREASE TRANSPARENCY AND PROVIDE THE USERS OF THE FORM WITH COMPLETE INFORMATION ABOUT THE ORGANIZATION'S ACTIVITIES, MANAGEMENT HAS CHOSEN TO LIST THE GRANTS OF \$500 OR GREATER IN DETAIL ON SCHEDULE F OF THE HSUS'S	Part IV Supplemental Information
AGENTS ON WILDLIFE AND WILD HORSES AND RESEARCH PROMOTING THE USE AND MORE EFFICIENT PRODUCTION OF SUCH AGENTS. SCHEDULE F, PART II: THE INSTRUCTIONS FOR SCHEDULE F REQUIRE GRANTS AND OTHER ASSISTANCE GIVEN TO RECIPIENTS OVER \$5,000 BE REPORTED IN DETAIL. HOWEVER, IN ORDER TO INCREASE TRANSPARENCY AND PROVIDE THE USERS OF THE FORM WITH COMPLETE INFORMATION ABOUT THE ORGANIZATION'S ACTIVITIES, MANAGEMENT HAS CHOSEN TO LIST THE GRANTS OF \$500 OR GREATER IN DETAIL ON SCHEDULE F OF THE HSUS'S	Complete this part to provide the information required in Part I, line 2, and any additional information.
MORE EFFICIENT PRODUCTION OF SUCH AGENTS. SCHEDULE F, PART II: THE INSTRUCTIONS FOR SCHEDULE F REQUIRE GRANTS AND OTHER ASSISTANCE GIVEN TO RECIPIENTS OVER \$5,000 BE REPORTED IN DETAIL. HOWEVER, IN ORDER TO INCREASE TRANSPARENCY AND PROVIDE THE USERS OF THE FORM WITH COMPLETE INFORMATION ABOUT THE ORGANIZATION'S ACTIVITIES, MANAGEMENT HAS CHOSEN TO LIST THE GRANTS OF \$500 OR GREATER IN DETAIL ON SCHEDULE F OF THE HSUS'S	(D) PURPOSE OF GRANT: ANNENBERG GRANT. WORK ON IMMUNOCONTRACEPTIVE
SCHEDULE F, PART II: THE INSTRUCTIONS FOR SCHEDULE F REQUIRE GRANTS AND OTHER ASSISTANCE GIVEN TO RECIPIENTS OVER \$5,000 BE REPORTED IN DETAIL. HOWEVER, IN ORDER TO INCREASE TRANSPARENCY AND PROVIDE THE USERS OF THE FORM WITH COMPLETE INFORMATION ABOUT THE ORGANIZATION'S ACTIVITIES, MANAGEMENT HAS CHOSEN TO LIST THE GRANTS OF \$500 OR GREATER IN DETAIL ON SCHEDULE F OF THE HSUS'S	AGENTS ON WILDLIFE AND WILD HORSES AND RESEARCH PROMOTING THE USE AND
SCHEDULE F, PART II: THE INSTRUCTIONS FOR SCHEDULE F REQUIRE GRANTS AND OTHER ASSISTANCE GIVEN TO RECIPIENTS OVER \$5,000 BE REPORTED IN DETAIL. HOWEVER, IN ORDER TO INCREASE TRANSPARENCY AND PROVIDE THE USERS OF THE FORM WITH COMPLETE INFORMATION ABOUT THE ORGANIZATION'S ACTIVITIES, MANAGEMENT HAS CHOSEN TO LIST THE GRANTS OF \$500 OR GREATER IN DETAIL ON SCHEDULE F OF THE HSUS'S	MORE EFFICIENT PRODUCTION OF SUCH AGENTS.
THE INSTRUCTIONS FOR SCHEDULE F REQUIRE GRANTS AND OTHER ASSISTANCE GIVEN TO RECIPIENTS OVER \$5,000 BE REPORTED IN DETAIL. HOWEVER, IN ORDER TO INCREASE TRANSPARENCY AND PROVIDE THE USERS OF THE FORM WITH COMPLETE INFORMATION ABOUT THE ORGANIZATION'S ACTIVITIES, MANAGEMENT HAS CHOSEN TO LIST THE GRANTS OF \$500 OR GREATER IN DETAIL ON SCHEDULE F OF THE HSUS'S	
THE INSTRUCTIONS FOR SCHEDULE F REQUIRE GRANTS AND OTHER ASSISTANCE GIVEN TO RECIPIENTS OVER \$5,000 BE REPORTED IN DETAIL. HOWEVER, IN ORDER TO INCREASE TRANSPARENCY AND PROVIDE THE USERS OF THE FORM WITH COMPLETE INFORMATION ABOUT THE ORGANIZATION'S ACTIVITIES, MANAGEMENT HAS CHOSEN TO LIST THE GRANTS OF \$500 OR GREATER IN DETAIL ON SCHEDULE F OF THE HSUS'S	
TO RECIPIENTS OVER \$5,000 BE REPORTED IN DETAIL. HOWEVER, IN ORDER TO INCREASE TRANSPARENCY AND PROVIDE THE USERS OF THE FORM WITH COMPLETE INFORMATION ABOUT THE ORGANIZATION'S ACTIVITIES, MANAGEMENT HAS CHOSEN TO LIST THE GRANTS OF \$500 OR GREATER IN DETAIL ON SCHEDULE F OF THE HSUS'S	SCHEDULE F, PART II:
INCREASE TRANSPARENCY AND PROVIDE THE USERS OF THE FORM WITH COMPLETE INFORMATION ABOUT THE ORGANIZATION'S ACTIVITIES, MANAGEMENT HAS CHOSEN TO LIST THE GRANTS OF \$500 OR GREATER IN DETAIL ON SCHEDULE F OF THE HSUS'S	THE INSTRUCTIONS FOR SCHEDULE F REQUIRE GRANTS AND OTHER ASSISTANCE GIVEN
INFORMATION ABOUT THE ORGANIZATION'S ACTIVITIES, MANAGEMENT HAS CHOSEN TO LIST THE GRANTS OF \$500 OR GREATER IN DETAIL ON SCHEDULE F OF THE HSUS'S	TO RECIPIENTS OVER \$5,000 BE REPORTED IN DETAIL. HOWEVER, IN ORDER TO
LIST THE GRANTS OF \$500 OR GREATER IN DETAIL ON SCHEDULE F OF THE HSUS'S	INCREASE TRANSPARENCY AND PROVIDE THE USERS OF THE FORM WITH COMPLETE
LIST THE GRANTS OF \$500 OR GREATER IN DETAIL ON SCHEDULE F OF THE HSUS'S	INFORMATION ABOUT THE ORGANIZATION'S ACTIVITIES, MANAGEMENT HAS CHOSEN TO

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Cobodulo E.	School de E.1 (Form 990) 2009		THE HUMANE SOCIETY	Y OF THE UNITED	STATES	53-0225390	25390		Page 2
Part II	Continuation o	f Grants and Other	lο		United States.	Schedule F (Form 9:	90), Part II, line 1)		
<u>a</u>	1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region		(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of , valuation (book, FMV, appraisal, other)
			EAST ASIA AND THE	SUPPORT - VET MOBILE PROGRAM AIMED AT STERILIZING AND VACCINATING DOGS.	2,000.WIRE	vire -	0		
		EAST ASIA AND		SUPPORT- ADVOCACY, EDUCATION, AND VACCINATION PROGRAMS.	2,000.WIRE	VIRE	0		
		, and the second second second second second second second second second second second second second second se	THE	SUPPORT FOR VACCINATION OF 60 DOGS, AND FOOD FOR 400.	2,000.	WIRE	0		
		Ci Ri	AST ASIA AND THE	SUPPORT- RURAL VILLAGE DOG STERILIZATION PROGRAM.	2,000.	WIRE	0		
			EAST ASIA AND THE PACIFIC	VACCINATION FOR DOGS.	2,000.	WIRE	.0		
		CC CA	EAST ASIA AND THE	FOOD/VACCINES.	2,000.	WIRE	.0		
			EUROPE	FUNDS TO BUILD/PURCHASE ISOLATION STABLES FOR NEWLY ARRIVE DONKEYS	3,000.	WIRE	.0		
			EUROPE	FUNDS TO SUPPORT ANIMAL HEALTH PROGRAM WITHIN LOW INCOME AREAS.	3,000.	WIRE	.0		
		Market State of the Control of the C	EUROPE	FUNDS TO SUPPORT S/N PROGRAM.	2,500.	WIRE	0.		
								Schedi	Schedule F-1 (Form 990) 2009

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Schedule r. I (r.	Vinitation of	Grants and Other	1 0	. –	United States.	(Schedule F (Form 9)	90), Part II, line 1	(
	rganization	(b) IRS code section and EIN (if applicable)	(c) Region		(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			SOUTH AMERICA	SPAY/NEUTER SERVICES AND EDUCATION GRANT.	2,500.	WIRE	.0		
			SOUTH AMERICA	SPAY/NEUTER SERVICES GRANT AND GENERAL SUPPORT.	2,500.WIRE	WIRE	.0		
			SOITH AMERICA	FUNDS TO SUPPORT S/N PROGRAM IUN VILA DE ABRANTES/CAMACARI/BAH	1,500.WIRE	WIRE	0.		
			COHMH ACTA	ANIMAL RESCUE EDUCATION AND AWARENESS GRANT FOR RANCHI INDIA.	2,500,WIRE	WIRE	.0		
150 po 7	Belloanida T. H. H. S.		HILDOS	18 O	25,000.	WIRE	0.		
	90.00	a b	SOUTH ASIA		5,000.	000. WIRE	0.		
			HILOS	STREET DOG VACCINATION AND SPAY/NEUTER GRANT.	2,500.	MIRE	0.		
146			SUB-SAHARAN AFRICA	ANIMAL VACCINATION PROGRAM.	2,500.	WIRE	0.		
			SUB-SAHARAN AFRICA	CAPACITY BUILDING GRANT.	1,000.	WIRE	0.		
								Schedt	Schedule F-1 (Form 990) 2009

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53-0225390	990), Part II, line	(g) Amount of
	111 International Commissions or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)	(g) Amount of
THE UNITED STATES	United States.	
E UNITED	ies Outside the	
OF TH	ne or Entit	5 2 2
SOCTETY	to Organization	TO OI Baillean
HIIMANE	TATOLINE T	Assistance
	au i	ants and Othe
	20 20 20	Part II Continuation of Gr

Page 2

Part II Continuation o	f Grants and Other	Assistance to Organiza	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, IIII E 1)	United States.	Schedule F (Form 9)	30), Part II, IIIIE 17		th Mothod of
<u>g</u>	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(n) Description of non-cash assistance	valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	FUNDS TO CONTINUE SPAY/NEUTER PROGRAM IN KAMPALA.	2,500.	WIRE	0		
Amount of the control		SUB-SAHARAN AFRICA	ELIMINATE CRUELTY AND SUFFERING OF DONKEYS.	3,000.WIRE	WIRE	o		
	(2) d	SUB-SAHARAN AFRICA	SPAY/NEUTER EDUCATION GRANT.	2,500.	WIRE	0		
	in the second se	UROPE	FUNDS TO SUPPORT ANIMAL PROTECTION ISSUES IN UK AND EUROPE.	234170.	WIRE	0.		
		NORTH AMERICA	FUNDS TO SUPPORT ANIMAL PROTECTION ISSUES IN CANADA.	247327.WIRE	WIRE	.0		
Security (1)								2009 (180rm 990) 2009
								(

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

Open To Public

Department of the Treasury Internal Revenue Service

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

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

Inspection

Schedule G (Form 990 or 990-EZ) 2009

Employer identification number

тнк нім	ANE SOCIETY OF THE	UN	TE:	D STATES	53-0225	390
	Complete if the organization answer				ine 17. Form 990-EZ	filers are not
1 Indicate whether the organization rais a X Mail solicitations b X Internet and email solicitations c X Phone solicitations d X In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, P b If "Yes," list the ten highest paid indicompensated at least \$5,000 by the	ed funds through any of the following Solicitate of X Solicitate of X Special solicitate or oral agreement with any individual art VII) or entity in connection with providuals or entities (fundraisers) purs	ion of ion of fundra (includerofess	non-go govern ising o ding o ional f	overnment grants nment grants events fficers, directors, trus undraising services?	stees or X Yes	
(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have con or con contribu	Did aiser ustody trol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
NAT'L OUTDOOR SPORTS ADVERTISING, INC	DIRECT MAIL CONSULTANT	Yes	No X	47,797,489.	2231408.	45,566,081.
THE SHARE GROUP, INC.	TELE FR TO OBTAIN MULTI YR REVENUE		Х	1924020.	1844688.	79,332.
INFOCISION MANAGEMENT CORP.	TELE FR TO OBTAIN MULTI YR REVENUE		х	1050068.	464,211.	585,857.
WATERSHED COMPANY	WEBSITE MARKETING		х	935,285.	125,118.	810,167.
RESPONSIVE MARKETING GROUP, INC	TELE FR TO OBTAIN MULTI YR REVENUE		х	251,603.	274,347.	-22,744.
DONOR SERVICES GROUP, LLC	TELE FR TO OBTAIN MULTI YR REVENUE		х	8,811.	29,021.	-20,210.
Total	>		1	51,967,276		
3 List all states in which the organizati AL, AK, AZ, AR, CA, CO, CT, NC, ND, OH, OK, OR, PA, RI	FL,GA,HI,IL,KS,KY	<u>, LA ,</u>	or ha	s been notified it is e	ixempt from registra	tion or licensing.

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

Schedule G (Form 990 or 990-EZ) 2009 THE HUMANE SOCIETY OF THE UNITED STATES 53-0225390 Page 2 Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000. (c) Other events (b) Event #2 (a) Event #1 (d) Total events ANIMAL CARE (add col. (a) through EXPO GENESIS col. (c)) (total number) (event type) (event type) Revenue 1,760,189. 586,213. 538,438. 635,538. Gross receipts 416,753. 304,896. 111,857. 2 Less: Charitable contributions 1,343,436. 586,213. 233,542. 523,681. Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Expenses 169,107. 90,403. 17,901. 60,803. Rent/facility costs 456,212. 29,852. 286,507. 139,853. Food and beverages 8 Entertainment 725,317. 332,384. 16,677. 376,256. 9 Other direct expenses 1,350,636, 10 Direct expense summary. Add lines 4 through 9 in column (d) -7,200.11 Net income summary. Combine line 3, column (d), and line 10. Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than Part III \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (c) Other gaming (a) Bingo col. (a) through col. (c)) Revenue bingo/progressive bingo 1 Gross revenue 2 Cash prizes Expenses 3 Noncash prizes _____ Rent/facility costs 5 Other direct expenses Yes Yes Yes No 6 Volunteer labor 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Combine line 1, column (d), and line 7 Yes No 9 Enter the state(s) in which the organization operates gaming activities: a Is the organization licensed to operate gaming activities in each of these states? 9a b If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? b If "Yes," explain: 11 Does the organization operate gaming activities with nonmembers? Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to

administer charitable gaming?

Schedule G (Form 990 or 990-EZ) 2009 THE HUMANE SOCIETY OF THE UNITED STATE	1000 022)]]	Yes	ige 3 No
13 Indicate the percentage of gaming activity operated in: a The organization's facility	%			
b An outside facility 13b	%			
14 Enter the name and address of the person who prepares the organization's gaming/special events books and rec	ords:			
Name >				
Address >				
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		15a		
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the are of gaming revenue retained by the third party ▶\$	nount			
c If "Yes," enter name and address of the third party:				20) 20) 10)
Name				
Address >		100		
16 Gaming manager information:				
Name				Wins.
Gaming manager compensation > \$				
Description of services provided				
Director/officer Employee Independent contractor				
17 Mandatory distributions:				
a Is the organization required under state law to make charitable distributions from the gaming proceeds to		17a		
retain the state gaming license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spe		1/4		
organization's own exempt activities during the tax year > \$.34		1

SCHEDULE (Form 990)

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

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

► Attach to Form 990.

Open to Public Inspection OMB No. 1545-0047

Department of the Treasury	SQ HOO	Complete it tile organization	▼ Attach to Form 990.	. 990.			Inspection
Name of the organization mure urrangement	A A D D D D D D D D D D D D D	CETINII HHT FO	TED STATES				Employer identification number 53-0225390
Coneral Inform	nd Assistance		1				
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	to substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assista	ance, and the select	ion X Yes No
Ontelia used to award the grants of accordance for monitoring the use of grant funds in the United States.	ocedures for monit	oring the use of grant	funds in the United	States.			No. 11 for comp
l & l	Governments and	d Organizations in the	• United States. Co	omplete if the orga an \$5,000. Use Pa	nization answered "Yes" rt IV and Schedule I-1 (Fo	to Form 990, Part orm 990) if addition	lV, line ∠1, for arty al space is needed ▶
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, no FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FUR A GOOD PAWS PET ASSISTANCE LEAGUE - PO BOX 294 - FLORA, IL 62839	56-2397270	501 (C) (3)	721.	0.			SPAY/NEUTER - US
2 X 2 RANCH & REFUGE 2085 CLIFTY ROAD WESTMORELAND, TN 37186	31-1668257	501 (c) (3)	. 570.	0			SPAY/NEUTER - US
A PLACE TO BARK, INC 375 N. JONES RD.	20-4621674	501 (C) (3)	.005	0.			PUPPY MILL RESCUE ASSISTANCE GRANT.
A VOICE FOR ANIMALS, INC. 1765 PLEASANT HILL ROAD BOWLING GREEN, KY 42103	13-4261071	501 (C) (3)	945.	0.			SPAY/NEUTER - US
ACADIANA HUMANE SOCIETY 371 GILLS ROAD P O DRAWER C SUNSET LA 70584	72-1468289	501 (C) (3)	.069	0			SPAY/NEUTER - US
	35-1508888	501 (C) (3)	746.	0.			SPAY/NEUTER - US
	and government	organizations					2/7
3 Enter total number of other organizations	ns						9000 (Jearm 990) 2009
1	uction Act Notice	other instruction of the other	s for Form 990. ESCRIPTION	ន			

53-0225390

Schedule I (Form 990) 2009 THE HUMANE SOCIETY OF THE UNITED STATES

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

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

(d) Amount of non-cash assistance (book, FMV, appraisal, other) (f) Description of non-cash assistance cash assistance			and any other additional information.	UNITED STATES ISSUES		E HAVE (1)	RELATIONSHIP WITH; (3) IN	HT IS ACCOMPLISHED	MEETINGS WITH GRANTEES,	
			Part I, line 2, a	THE	CRITERIA.	EITHER WE	TONSHIE	GRANT OVERSIGHT		
(c) Amount of cash grant			on required in	SOCIETY OF		THAT EI		GRANT C	GRANT REPORTS,	
(b) Number of recipients			le the informatic	HUMANE SOC	OUR MISSION	SNO	EXISTING	EVENT.	AS GRANT	
(a) Type of grant or assistance			Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	SCHEDULE I, PART I, LINE 2: THE HUN	GRANTS TO ORGANIZATIONS THAT MEET (GRANTS ARE USUALLY GIVEN TO ORGANIZATI	THOROUGHLY RESEARCHED; (2) HAVE AN	CONJUNCTION WITH AN HSUS SPONSORED	7 OF METHODS SUCH	

Continuation Sheet for Schedule I (Form 990)

Open to Public Inspection

Employer identification number

53-0225390

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.

Name of the organization

Department of the Treasury Internal Revenue Service

SCHEDULE 1-1

(Form 990)

Schedule I-1 (Form 990) 2009 UMANE, SINGLE INJECTION UNDS TO EXPAND PROGRAM SUPPORT - RESEARCH WITH UPPY MILL AWARENESS DAY SUPPORT DUE TO MORTGAGE F PUBLIC EDUCATION IN THE MUNICIPALITY OF OTENTIAL TO CREATE (h) Purpose of grant or assistance TERILANT FOR DOGS SUANAJUATO, MEXICO SHELTER OPERATIONS SPAY/NEUTER - US SPAY/NEUTER - US ΩS - US FORECLOSURES SPAY/NEUTER SPAY/NEUTER IN PA (g) Description of non-cash assistance Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) valuation (book, FMV, appraisal, other) (f) Method of ö ö °. Ö ö 。 。 0 (e) Amount of non-cash assistance THE UNITED STATES 1,263. 1,500 40,000 595. 000 2,000. LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. (d) Amount of cash grant (c) IRC section if applicable 52-0175067 | 501 (C) (3) 501 (C) (3) 501 (c) (3) (C) (3) 501 (C) (3) 501 (C) (3) **501** (c) (3) 501 (C) (3) OF 501 20-4820854 SOCIETY 26-0095027 41-2185841 04-3535455 63-1027613 20-3110361 36-3683984 (b) EIN THE HUMANE ALLIANCE FOR CONTRACEPTION IN CATS GUANAJUATO - 256 WEST 10TH ST., & DOGS - 14245 NW BELLE COURT NO. 4-D - NEW YORK, NY 10014 ANDERSON HUMANE SOCIETY, INC ALABAMA ANIMAL CONTROL ASSOC. (a) Name and address of organization or government AMIGOS DE LOS ANIMALES DE ALL ABOUT LABS RESCUE INC. ALL ABOUT SPAY NEUTER INC 1802 CENTRAL PARKWAY, SW LAWRENCEBURG, KY 40342 HOWARD BEACH, NY 11414 1410 VERSAILLES ROAD LITTLE ROCK, AR 72204 MA 01475 TOMS RIVER, NJ 08753 PORTLAND, OR 97229 1623 LEANDER DRIVE DECATUR, AL 35601 AHIMSA HAVEN, INC. ADOPT A PET, INC 3 CURACO AVENUE PO BOX 170098 WINCHENDON, P O BOX 73 Part

Name of the organization

Continuation Sheet for Schedule I (Form 990)

Open to Public OMB No. 1545-0047 Inspection

Employer identification number

53-0225390

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.

OF THE UNITED STATES

Schedule I-1 (Form 990) 2009 SAMOA AND WESTERN SAMOA. ANNUAL TRAINING SEMINAR UNDS TO SUPPORT 2 HIGH JOLUME S/N CAMPAIGNS ON THE ISLANDS OF AMERICAN SUPPORT DUE TO MORTGAGE 60 SPONSORSHIP OF THEIR (h) Purpose of grant or assistance (\$5,165) + SPAY DAY DDAF SPAY DAY GRANT PHOTO CONTEST FUNDS SHELTER OPERATIONS COOTOO PET SHELTER SPAY/NEUTER - US us SPAY/NEUTER - US ORECLOSURES SPAY/NEUTER \$690.89) MAKEOVER (g) Description of non-cash assistance Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) appraisal, other) (f) Method of (book, FMV, ٥. ٠. ö ö ο. ö ö (e) Amount of non-cash assistance 676. 1,500. 660. 5,856. 1,668. 000 (d) Amount of cash grant 1,000 10,000 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 'n 33-1195443 501 (C) (3) PENDING (c) IRC section if applicable 501 (C) (3) 501 (C) (3) 501 (c) (3) 501 (C) (3) (C) (3) 501 (C) (3) 501 (C) (3) 501 THE HUMANE SOCIETY 56-2080050 59-3713414 23-7110730 13-4271553 68-0630714 30-0391767 77-0632827 (p) EIN ABC CLINIC TNR PROGRAM 1531 WOODED ANIMAL CONTROL ASSOC OF TENNESSEE ANIMAL ALLIANCE OF BELLE MEAD INC ANIMAL BIRTH CONTROL CLINIC, INC. - GLENVILLE, PA ANGEL ACRES HORSE HAVEN RESCUE, ANIMAL COALITION OF TAMPA INC (a) Name and address of organization or government ANIMAL COMPASSION NETWORK SKYLAND, NC 28776-1704 PLAINVILLE, MA 02762 BELLE MEAD, NJ 08502 KNOXVILLE, TN 37940 ANGELCAT HAVEN, INC. 1719 W LEMON STREET BERKELEY, CA 94704 1920 BLAKE STREET INC. - PO BOX 62 TAMPA, FL 33606 36 BACON SQUARE WACO, TX 76710 ANIMAL BALANCE PO BOX 20124 P O BOX 1704 PO BOX 1285 Part 17329

41

932241 02-01-10

Department of the Treasury Internal Revenue Service
Name of the organization SCHEDULE I-1 (Form 990)

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III. Continuation Sheet for Schedule I (Form 990)

Open to Public

THE HIMANE SOCIETY OF THE UNITED STATES

Employer identification number 53-0225390

THE	SOCIET'Y	HUMANE SOCIETY OF THE UNITED STATES	TED SIRIES	nited States (Sche	dule I (Form 990), Pa	π II.)	
(a) Name and address of organization or government	(a)	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANIMAL DEFENSE LEAGUE ARIZONA, INC P O BOX 33093 PHOENIX, AZ 85067	74-2493030	501 (C) (3)	2,217.	0.			SPAY/NEUTER - US
ANIMAL FRIENDS OF THE VALLEYS 33751 MISSION TRAIL WILDOMAR, CA 92595	33-0276892	501 (C) (3)	1,081.	0.			SPAY/NEUTER - US
ANIMAL FRIENDS RESCUE PROJECT PO BOX 51083 PACIFIC GROVE, CA 93950	77-0491141	501 (C) (3)	1,050.	0.			SPAY/NEUTER - US
ANIMAL FRIENDS, INC. 562 CAMP HORNE ROAD PITTSBURGH, PA 15237	25-0951565	501 (c) (3)	3,687.	0.			SPAY/NEUTER - US
ANIMAL HUMANE ASSOCIATION OF NEW MEXICO, INC 615 VIRGINIA ST. SE - ALHUGIEROUE NM 87108	85-0207652	501 (C) (3)	2,000.	.0			SHELTER OPERATIONS SUPPORT DUE TO MORTGAGE FORECLOSURES
	11-3259425	501 (C) (3)	2,622.	0			SPAY/NEUTER - US
ANIMAL OUTREACH INC PO BOX 892 WESTERVILLE, OH 43086	31-1762536	501 (C) (3)	965.	0			SPAY/NEUTER - US
ANIMAL PROTECTION & EDUCATION 636 SOUTH AVENUE PATON, IA 50217	20-0061405	501 (C) (3)	515.				SPAY/NEUTER - US Schedule I-1 (Form 990) 2009
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	Juction Act Notio	ce, see the Instruction	ns tor Form 990.				

SCHEDULE I-1 (Form 990)
Department of the Treasury Internal Revenue Service

Continuation Sheet for Schedule I (Form 990) Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.

OMB No. 1545-0047
2009
Open to Public
Inspection

Employer identification number

internal Revenue Service
Name of the organization

53-0225390 Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) THE UNITED STATES OF SOCIETY THE HUMANE

Schedule I-1 (Form 990) 2009 TO SUPPORT THE WORK OF AN ANIMAL SHELTER THAT CARES SUPPORT DUE TO MORTGAGE SUPPORT DUE TO MORTGAGE SUPPORT DUE TO MORTGAGE FUNDING - MT. OLIVE THR (h) Purpose of grant or assistance FOR SICK, INJURED, SHELTER OPERATIONS SHELTER OPERATIONS SHELTER OPERATIONS SPAY/NEUTER - US - US TRAY ANIMALS. PORECLOSURES ORECLOSURES PORECLOSURES SPAY/NEUTER SPAY/NEUTER ROJECT (g) Description of non-cash assistance appraisal, other) (f) Method of valuation (book, FMV, ٥. ٥. Ö 。 ο. ö °. 。 (e) Amount of non-cash assistance 2,000. 521. 796. 500. 1,000. 000 2,170 (d) Amount of cash grant 2,000 For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. (c) IRC section if applicable 501 (c) (3) 501 (C) (3) 22-2849700 501 (C) (3) 501 (C) (3) 501 (C) (3) 501 (c) (3) 501 (C) (3) (C) (3) 501 22-1752792 94-2307359 25-0325750 23-7181780 14-0472728 02-0222790 23-7095476 (b) EIN ORANGE COUNTY/PAWS4EVER - 6311-C ANIMAL PROTECTIVE FOUNDATION OF ANIMAL WELFARE ASSOCIATION, INC NICKS ROAD - MEBANE, NC 27302 S ANIMAL RESCUE LEAGUE WEST. PA - 53 MAPLE ANIMAL PROTECTION SOCIETY OF (a) Name and address of organization or government ANIMAL PROTECTION LEAGUE OF ANIMAL RESCUE LEAGUE OF NEW AVENUE - SCOTIA, NY 12302 ANIMAL PROTECTIVE LEAGUE HAMPSHIRE - 545 ROUTE 1 CA 95945 IL 62702 ENGLISHTOWN, NJ 07726 PITTSBURGH, PA 15206 6620 HAMILTON AVENUE HOWE, IN 46746-0575 BEDFORD, NH 03110 SCHENECTADY, INC. 1001 TAINTOR ROAD GRASS VALLEY, SPRINGFIELD, P.O. BOX 174 P O BOX 575 ANIMAL SAVE PO BOX 817 H

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III. Continuation Sheet for Schedule I (Form 990)

2009 2009 Open to Public Inspection

Employer identification number 53-0225390

Name of the organization

THE UNITED STATES OF THE HUMANE SOCIETY

SUPPORT DUE TO MORTGAGE - 12 "WEEKS FOR (h) Purpose of grant or assistance SHELTER OPERATIONS Sn -CONFERENCE GRANT ANIMALS" EVENT SPAY/NEUTER SUPPORT non-cash assistance (g) Description of Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) valuation (book, FMV, appraisal, other) (f) Method of 0 ö ö (e) Amount of assistance non-cash 500 11,500 4,190 (d) Amount of cash grant (c) IRC section if applicable 501 (C) (3) (C) (3) 501 (c) (3) 501 54-0603502 22-3378806 71-0941426 (b) EIN ANIMAL WELFARE LEAGUE OF ARLINGTON ANIMAL WELFARE FEDERATION OF NJ (a) Name and address of organization or government 2650 S ARLINGTON MILL DRIVE MEMPHIS, TN 38111-0126 509 CENTENNIAL BLVD ARLINGTON, VA 22206 VOORHEES, NJ 08043 ANIMAL WORLD USA ANIMALKIND, INC P 0 BOX 11126 Part I

ns S 1 ı ORECLOSURES SPAY/NEUTER SPAY/NEUTER ö ö ö 2,249. 631 1,000 (C) (3) 501 (C) (3) 501 (c) (3) 501 37-1406116 14-1820248 36-3683984 TREATMENT - 420 INDUSTRIAL DRIVE BENEVOLENT SOCIETY 210 N. 3RD PO BOX 902 ANIMALS DESERVING OF PROPER ANIMALS REQUESTING FRIENDS BURNT PRAIRIE, IL 62820 IL 60563 721 WARREN STREET HUDSON, NY 12534 NAPERVILLE,

941. 1,471 For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 54-1699676 501 (C) (3) (C) (3) 501 56-1444098 5424 COVERED BRIDGE ROAD 55 SHILOH ROAD SUITE 6 BEDFORD HUMANE SOCIETY ASHEVILLE, NC 28803 GLADYS, VA 25423

ASHEVILLE HUMANE SOCIETY

Schedule I-1 (Form 990) 2009 SPAY/NEUTER - US

SPAY/NEUTER - US

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► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III. Continuation Sheet for Schedule I (Form 990)

Open to Public Inspection

OMB No. 1545-0047

Schedule I-1 (Form 990) 2009 OOTOO SHELTER MAKEOVER (h) Purpose of grant or assistance CARE FOR FERAL CATS RELOCATED FROM SAN Employer identification number MICHOLAS ISLANDS, - US - US US SPAY/NEUTER - US \mathbf{n} ΩS í ı 53-0225390 SPAY/NEUTER SPAY/NEUTER SPAY/NEUTER SPAY/NEUTER SPAY/NEUTER CALIFORNIA INALIST non-cash assistance (g) Description of Part 1 | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) appraisal, other) (f) Method of valuation (book, FMV, 。 ö ö ċ 6 。 。 (e) Amount of non-cash assistance THE UNITED STATES 938. 10,500, 741. 660. 40,000 790. 786. 670. (d) Amount of cash grant (c) IRC section if applicable 501 (c) (3) 501 (C) (3) 501 (C) (3) 501 (C) (3) (C) (3) 501 (C) (3) 501 (C) (3) (C) (3) OF 501 501 THE HUMANE SOCIETY 95-4347009 71-0977598 58-2154973 94-1580621 01-0824427 43-1763003 61-0653278 56-1787211 (p) EIN INC - P O BOX 104 - RICHMOND HILL, BEND SPAY AND NEUTER PROJECT, INC. BRYAN COUNTY ANIMAL CAREGIVERS, BILLERICA CAT CARE COALITION (a) Name and address of organization or government BUTTE COUNTY HUMANE SOCIETY BOWLING GREEN-WARREN COUNTY NORTH BILLERICA, MA 01862 1925 OLD LOUISVILLE ROAD BOONVILLE HUMANE SOCIETY BRUNSWICK ANIMAL LEAGUE BOWLING GREEN, KY 42101 SHERMAN OAKS, CA 91403 NEW FRANKLIN, MO 65274 SHALLOTTE, NC 28470 185 COUNTY ROAD 441 Name of the organization 61344 PARRELL ROAD C.A.R.E.SANCTUARY 2579 FAIR STREET CHICO, CA 95928 3108 OAK DRIVE OR 97702 PO BOX 56631 P O BOX 141 GA 31324 BEND,

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

Department of the Treasury Internal Revenue Service Name of the organization SCHEDULE 1-1 (Form 990)

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III. Continuation Sheet for Schedule I (Form 990)

2009

Open to Public Inspection

Employer identification number 53-0225390 THE HUMANE SOCIETY OF THE UNITED STATES

Part II.) Part States (Schedule I (Form 990), Part II.)	Assistance to Go	vernments and Organ	nizations in the Ur	nited States (Sche	dule I (Form 990), Par	t II.)	
(a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
C.A.T.S.C.A.N., INC. P O BOX 622543	68-0539788	501 (C) (3)	850.	0			SPAY/NEUTER - US
OVIEDO, FL 52762 CALCASIEU PARISH ANIMAL SERV & ADOPTION CENTER - 5500 A SWIFT PLANT ROAD - LAKE CHARLES, LA 70615			930.	0.			PROVIDES SPAY & NEUTER CLINIC VOUCHER PROGRAM AND ANIMAL LICENSING
CALTIP INC. 27111 E EL MACERO DRIVE EL MACERO, CA 95618-1006	68-0280726	STATE OF CALIFORNIA	MIA 4,000.	0			CARE FOR RESCUED SHELTER DOGS TRAINED FOR POACHING LAW ENFORCEMENT
1 2 U	20-0549531	501 (C) (3)	1,543.	0.			SPAY/NEUTER - US
CARING ABOUT THE STRAYS (CATS), INC - 80 KINDERKAMACK ROAD -	22-3392588	501 (c) (3)	1,072.	.0			SPAY/NEUTER - US
CARNEGIE MELLON UNIVERSITY 5000 FORBES AVENUE PITTSBURGH, PA 15213	25-0969449	501 (C) (3)	20,000	0			FOR KESEARCH RELATED TO UNIQUELY IDENTIFYING WILD HORSES IN THE FIELD (ANNENBERG GRANT)
CARTER COUNTY HUMANE SOCIETY 159 HICKORY HOLLOW ROAD ELIZABETHTON, TN 37643	58-1489853	501 (C) (3)	5,000	0.0			SHELTER BUILDING FUND
CAT HAVEN, INC. P O BOX 86231 RATTON ROUGE LA 70816	72-1454718	501 (C) (3)	736.	.0			SPAY/NEUTER - US
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	duction Act Notic	e, see the Instructio	ns for Form 990.				Schedule I-1 (Form 990) 2009

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III. Continuation Sheet for Schedule I (Form 990)

Open to Public UMIS IND. 1949-0041

Inspection

Employer identification number

53-0225390

STATES UNITED THE OF. THE HUMANE SOCIETY Name of the organization

Schedule I-1 (Form 990) 2009 DUROVILLE EVENT. 280 DOGS ROTECTION OF GREYHOUNDS SUPPORT DUE TO MORTGAGE SUPPORT DUE TO MORTGAGE CONFERENCE SPONSORSHIP SUPPORT - SPAY/NEUTER (h) Purpose of grant S/N; 400 VACCINATED SHELTER OPERATIONS HELTER OPERATIONS or assistance $\mathbf{n}\mathbf{s}$ ΩS i ORECLOSURES ORECLOSURES SPAY/NEUTER SPAY/NEUTER SPAY/NEUTER (g) Description of non-cash assistance Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) valuation (book, FMV, appraisal, other) (f) Method of ٥. 。 ö Ö ٠. ٥. Ö Ö (e) Amount of non-cash assistance 1,000. 2,000 795. 711. 1,000 2,000 (d) Amount of cash grant 1,071 10,000 (c) IRC section if applicable 26-1922162 501 (C) (3) 501 (C) (3) 501 (c) (3) 501 (C) (4) 501 (C) (3) 501 (C) (3) 501 (C) (3) 501 (C) (3) 04-3749543 33-0073522 20-5882660 20-3438964 03-0385844 56-2048523 54-0595009 (b) EIN - PO BOX 334 CITIZENS FOR ANIMAL PROTECTION OF COMPANION ANIMAL ADVOCATES, INC. COLORADO FED ANML WELFARE AGCY CHARLOTTESVILLE/ALBEMARLE SPCA SERVICE - 31110 CALLE CAYUGA COLORADO THOROUGHBRED RESCUE (a) Name and address of organization or government COACHELLA VALLEY VETERINARY COMMITTEE TO PROTECT DOGS VA 22901 CA 92234 2884 SOUTH URSULA COURT SOMERVILLE, MA 02144 CO 80549 GLEN ROCK, NJ 07452 WARREN COUNTY, INC. 55 HARRISTOWN ROAD COLUMBUS, OH 43216 - MACON, NC 27551 AURORA, CO 80014 CHARLOTTESVILLE, 3355 BERKMAR DR CATHEDRAL CITY, P O BOX 442176 PO BOX 163904 COLONY CATS WELLINGTON, PO BOX 884 Part

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

Department of the Treasury Internal Revenue Service
Name of the organization SCHEDULE 1-1 (Form 990)

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III. Continuation Sheet for Schedule I (Form 990)

Open to Public Inspection OMB No. 1545-0047

Employer identification number 53-0225390

Name of the organization THE HUMANE	SOCIETY	OF THE	UNITED STATES	S			53-0225390
	ssistance to Go	vernments and Organ	nizations in the U	nited States (Sche	Organizations in the United States (Schedule I (Form 990), Part II.)	r II.)	
. 1	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAT WELFARE ASSOCIATION INC.							
COLUMBUS, OH 43214	31-6049232	501 (C) (3)	1,412.	0.			SPAY/NEUTER - US
CATNAP FROM THE HEART INC. 1101 BEACH AVENUE 1.a GRANGE PARK II. 60526	22-3860113	501 (C) (3)	.000,8	0			TO PROMOTE ANIMAL ADOPTIONS
10. S	59-3724894	501 (c) (3)	.008	• 0			SPAY/NEUTER - US
CALIFORNIA TUGHES AVE.	94-1207695	(0)	1,879.				TO SUPPORT THE WORK OF THE FRESNO HUMANE SOCIETY
CENTRAL MISSOURI HUMANE SOCIETY 616 BIG BEAR BLVD	43-0666742	501 (C) (3)	15,000	.0			ZOOTOO SHELTER MAKEOVER FINALIST
CENTRAL NEW YORK CAT COALITION PO BOX 6182 SYRACIUSE NY 13217	06-1688749	501 (C) (3)	1,375	.0			SPAY/NEUTER - US
	20-0459806	501 (C) (3)	1,804.	0			SPAY/NEUTER - US
	20_0352197	501 (7.) (3)	80 24	.0			SPAY/NEUTER - US
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	uction Act Notic	e, see the Instruction	ns for Form 990.				Schedule I-1 (Form 990) 2009

Name of the organization

Continuation Sheet for Schedule I (Form 990)

Open to Public OMB No. 1545-0047 Inspection

Employer identification number

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.

53-0225390 Part | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) THE HUMANE SOCIETY OF THE UNITED STATES

SUPPORT - SPAY/NEUTER FOR ANIMAL CRUELTY RAID WORK UPPORT DUE TO MORTGAGE EMERGENCY HAY GRANT FOR SUPPORT DUE TO MORTGAGE COULD NOT AFFORD THEM (h) Purpose of grant or assistance NIMALS WHOSE OWNERS SHELTER OPERATIONS SHELTER OPERATIONS SANCTUARY'S HORSE ΩS SPAY/NEUTER - US CRECLOSURES ORECLOSURES SPAY/NEUTER AND SUPPORT PAY/NEUTER POPULATION (196)(g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) 0 Ö 。 Ö 0 ö Ö ö (e) Amount of non-cash assistance 775. 10,000. 6,215, 1,000 3,000 (d) Amount of cash grant 000 1,285. 2,000, 10, COUNTY OF MONTEREY (c) IRC section if applicable 73-1706969 501 (C) (3) 501 (C) (3) 501 (C) (3) 501 (C) (3) 501 (C) (3) 501 (C) (3) 501 (c) (3) 39-0806335 51-0082499 01-0776195 59-3033317 94-6000524 84-1717770 20-1367583 (b) EIN - 7055 MARIE AVENUE COUNTY OF MONTEREY ANIMAL SERVICES CONCERNED CITIZENS FOR ANIMAL CREEKSIDE VETERINARY HOSPITAL CONRAD STRAYS CAT RESCUE AND (a) Name and address of organization or government DELAWARE HUMANE ASSOCIATION ADOPTION, INC. - PO BOX 84 DANE COUNTY HUMANE SOCIETY DENKAI ANIMAL SANCTUARY DEMING ANIMAL GUARDIANS FL 32504 WILMINGTON, DE 19801 ID 83644 3720 BLACKWOOD ROAD 160 HITCHCOCK ROAD BOZEMAN, MT 59718 SALINAS, CA 93908 MADISON, WI 53718 GROVER, CO 80729 DEMING, MI 88031 5132 VOGES ROAD 36710 WCR 126 WELFARE, INC. 701 A STREET - PENSACOLA, PO BOX 1275 MIDDLETON,

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Schedule I-1 (Form 990) 2009

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III. Continuation Sheet for Schedule I (Form 990)

Open to Public Inspection UMB IND. 1949-004/

Employer identification number 53-0225390

Name of the organization

THE HUMANE SOCIETY OF THE UNITED STATES

ents and Organizations in the United States (Schedule I (Form 990), Part II.)

Part I Continuation of Grants and Other Assistance to Governments and	ssistance to Go	vernments and Orgar	nizations in the Ur	nited States (Sche	Organizations in the United States (Schedule I (Form 990), Fair in,	L 11.7	
(a) Name and address of organization or government	(b) EiN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DESERT DOGS RESCUE, INC. 1021 N. 381ST STREET TONODAH AZ 85354	81-0649416	501 (C) (3)	992.	.0			SPAY/NEUTER - US
ANI 78	05-0587246	501 (C) (3)	1,170.	.0			SPAY/NEUTER - US
DOWNTOWN DOG RESCUE PO BOX 5280 NORTH HOLLYWOOD CA 91616	95-4775990	501 (C) (3)	.000,8	0.			WARE GRANT TO LOCAL GROUP DOING GOOD WORK AGAINST DOGFIGHTING
	39-6125537	501 (C) (3)	2,000.	0.			SHELTER OPERATIONS SUPPORT DUE TO MORTGAGE FORECLOSURES
Y AN	42-1555163	501 (C) (3)	1,230.	0.			SPAY/NEUTER - US
VAI 290 UZ.	85-0406234	501 (C) (3)	1,049.	0			SPAY/NEUTER - US
FAITHFUL FRIENDS INC. 12 GERMANY DRIVE WILMINGTON, DE 19804	51-0410508	501 (C) (3)	2,000.	.0			SHELTER OPERATIONS SUPPORT DUE TO MORTGAGE FORECLOSURES
FERAL CAT COALITION OF OREGON P O BOX 82734 PORTLAND, OR 97282	93-1168181	501 (C) (3)	2,011.	ò			SPAY/NEUTER - US
111 Experience Act and Banarwork Reduction Act Notice, see the Instructions for Form 990.	fuction Act Notic	e, see the Instructior	ns for Form 990.				constant in the second second

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

932241 02-01-10

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III. Continuation Sheet for Schedule I (Form 990)

Open to Public Inspection

OMB No. 1545-0047

Employer identification number 53-0225390 Ather Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) THE HUMANE SOCIETY OF THE UNITED STATES Name of the organization

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Folial 350), 1 at 11.)	ssistance to Go	vernments and Orgar	nizations in the Ur	nted States (Sche	dale I (roll) 330/, r a	1117	
(a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FERAL CAT SPAY/NEUTER PROJECT 11331 ROOSEVELT WAY NE SEATTLE, WA 98125-6227	91-1827152	501 (C) (3)	2,064.	0.			SPAY/NEUTER - US
our 55	62-1836008	501 (C) (3)	2,000.	0			SPAY DAY PHOTO CONTEST
FLORIDA KEYS SPCA 5230 COLLEGE ROAD KRY WRST FT. 33040	65-0891564	501 (C) (3)	1,195.	.0			SPAY/NEUTER - US
ON FC - 446	20-5244649	501 (C) (3)	5,645.	0			SPAY/NEUTER - SUPPORT TO HELP COVER SURGERY EXPENSES
CORN SOX 1	85-0477904	501 (C.) (3)	962.	0			SPAY/NEUTER - US
FRIENDS FOR THE DEARBORN ANIMAL SHELTER - 2661 GREENFIELD - DEARBORN MI 48120	38-3171570		1,160.	0.			SPAY/NEUTER - US
1 6 1 12	61-1395205	501 (c) (3)	.089	.0			SPAY/NEUTER - US
FRIENDS OF MILWAUKEE AREA DOMESTIC ANIMAL CONTROL COMMISSION INC - 3839 W BURNHAM STREET - WEST	<u> </u>						SHELTER OPERATIONS SUPPORT DUE TO MORTGAGE
)26 Pa	26-2650117	501 (C) (3)	2,000.	0			Schedule I-1 (Form 990) 2009

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(Form 990)
Department of the Tressury Internal Revenue Service
Name of the organization SCHEDULE 1-1

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III. Continuation Sheet for Schedule I (Form 990)

Open to Public Inspection 2009

Employer identification number 53-0225390 THE HUMANE SOCIETY OF THE UNITED STATES

The standard of Control Other Assistance to Governments and	Assistance to Go		nizations in the Ur	nited States (Sche	Organizations in the United States (Schedule I (Form 990), Part II.)	t II.)	
(a) Name and address of organization or government	(b) EIN		(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRIENDSHIP ANIMAL PROTECTIVE LEAGUE - 8303 MURRAY RIDGE ROAD -	34-6529498	501 (C) (3)	.000,2	0.		N Z	ZOOTOO PET SHELTER MAKEOVER
GARRETT COUNTY HUMANE SOCIETY INC. 10334 FRIENDSVILLE ROAD FRIENDSVILLE, MD 21531	52-2235454	501 (C) (3)	3,642.	0.			TO SUPPORT THE WORK OF THE GARRETT COUNTY HUMANE SOCIETY
GERMAN SHEPHERD RESCUE AND ADOPTIONS INC - PO BOX 471 - FAQUAY VARINA, NC 27526	56-1857148	501 (C) (3)	2,000.	0.			SHELTER OPERATIONS SUPPORT DUE TO MORTGAGE FORECLOSURES
GLOBAL ANIMAL PARTNERSHIP P.O. BOX 21484 washington DC 20009	20-2234609	501 (C) (3)	10,000.	.0			IMPROVING ANIMAL AGRICULTURE.
GLOBAL FEDERATION OF ANIMAL SANCTUARIES - P.O. BOX 32294 -	26-1676217	501 (c) (3)	11,000,	0			
MS J	52-2238908	501 (C) (3)	1,357	.0			SPAY/NEUTER - US
GREENBRIER HUMANE SOCIETY P O BOX 305 LEWISBURG, WV 24901	55-0596790	501 (C) (3)	685	0.			SPAY/NEUTER - US
GULF SHORE ANIMAL LEAGUE, INC. P O BOX 14291	81-0586833	501 (C) (3)	1,036	0			SPAY/NEUTER - US
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	duction Act Notic	e, see the Instruction	ns for Form 990.				Schedule I-1 (Form 990) 2009

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Open to Public OMB No. 1545-0047 Inspection

Schedule I-1 (Form 990) 2009 SUPPORT DUE TO MORTGAGE ZOOTOO SHELTER MAKEOVER (h) Purpose of grant or assistance EDUCATING YOUTH AND FEACHERS IN HUMANE SHELTER OPERATIONS Employer identification number SO -- US ΩS SO -53-0225390 PORECLOSURES SPAY/NEUTER SPAY/NEUTER SPAY/NEUTER SPAY/NEUTER PAY/NEUTER EDUCATION FINALIST (g) Description of non-cash assistance Part I | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) appraisal, other) (f) Method of valuation (book, FMV, 0 ં 0 Ö 0 0 ö ö (e) Amount of non-cash assistance THE UNITED STATES 5,000, 1,224. 999 1,411, 1,013 1,047 (d) Amount of cash grant 5,000 2,000 (c) IRC section if applicable 501 (C) (3) 501 (C) (3) 501 (C) (3) 501 (C) (3) 501 (C) (3) 501 (C) (3) 501 (C) (3) 501 (c) (3) OF F SOCIETY 41-2055310 76-0586024 39-6108644 86-1157606 86-0264917 56-1713289 56-1574745 87-0728506 (p) EIN THE HUMANE (UNITED HUMANITARIANS A CORP.) - P HAYWOOD ANIMAL WELFARE ASSOCIATION INC. - 7198 SHELL ROAD - WINSTON HUMANE ANIMAL SOCIETY OF WAUKESHA REACHING TEACHERS - PO BOX 738 O BOX 1264 - BRISTOL, VA 24203 HELPING PREVENT HOMELESS PETS, HAPPY HILLS ANIMAL FOUNDATION, INC. - 3143 HAPPY HILLS DRIVE HEAVENLY PAWS ANIMAL SHELTER (a) Name and address of organization or government HOLLY HELP SPAY-NEUTER FUND HUMANE EDUCATION ADVOCATES COUNTY INC. - PO BOX 834 HABITAT FOR HORSES, INC. SEVEN VALLEYS, PA 17360 INC. - 145 WALL STREET WAYNESVILLE, NC 28786 MAMARONECK, NY 10543 HITCHCOCK, TX 77563 WAUKESHA, WI 53187 Name of the organization 3678 ALDINGER ROAD STALEY, NC 27355 P O BOX 213 GA 30187

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III. Continuation Sheet for Schedule I (Form 990)

2009 2009 Open to Public Inspection

Employer identification number 53-0225390

Name of the organization

STATES THE UNITED OF. THE HUMANE SOCIETY

Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

Schedule I-1 (Form 990) 2009 SUPPORT DUE TO MORTGAGE ZOOTOO SHELTER MAKEOVER UPPORT DUE TO MORTGAGE SUPPORT DUE TO MORTGAGE PRANT FOR CERTIFICATION (h) Purpose of grant or assistance SHELTER OPERATIONS HELTER OPERATIONS HELTER OPERATIONS SPAY/NEUTER - US - US - US PORECLOSURES ORECLOSURES ORECLOSURES SPAY/NEUTER SPAY/NEUTER INALIST PROGRAMS non-cash assistance (g) Description of appraisal, other) (f) Method of valuation (book, FMV, ٥. 。 。 ٥. ٥. 。 。 Ö (e) Amount of non-cash assistance 697. 820. 000 2,000 1,000, 2,000, 1,932 50,000 (d) Amount of cash grant 'n, (c) IRC section if applicable 501 (c) (3) (C) (3) 501 (C) (3) (C) (3) 501 (C) (3) 501 (C) (3) (C) (3) 501 (c) (3) 501 501 501 34-1946987 58-1535943 58-1659819 39-1456327 23-1365361 91-0759124 47-0910622 84-0152768 (P) EIN WASHINGTON - 2121 ST FRANCIS LANE - SALEM, OH HUMANE SOCIETY OF CATAWBA COUNTY HUMANE SOCIETY OF BARRON COUNTY HUMANE SOCIETY MOUNTAIN SHELTER HUMANE SOCIETY HARRISBURG, INC HUMANE SOCIETY OF COLUMBIANA HUMANE SOCIETY BOULDER VALLEY HUMANE SOCIETY FOR SOUTHWEST (a) Name and address of organization or government HUMANE FARM ANIMAL CARE HERNDON, VA 20172-0727 WA 98660 GA 30514 - PO BOX 101 HARRISBURG, PA 17111 HICKORY, NC 28603 7790 GRAYSON ROAD BOULDER, CO 80301 BARRON, WI 54812 2323 55TH STREET 1571 GUY AVENUE BLAIRSVILLE, - VANCOUVER, PO BOX 1252 P O BOX 727 PO BOX 63 COUNTY 44460 Part

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OMB No. 1545-0047

Open to Public Inspection

Employer identification number 53-0225390

OF THE UNITED STATES THE HUMANE SOCIETY Name of the organization

SUPPORT DUE TO MORTGAGE (h) Purpose of grant RESCUE SUPPORT/NORTH DAKOTA FLOOD SUPPORT ARKANSAS PUPPY MILL SUPPORT - LIFETIME SHELTER OPERATIONS or assistance CARE TEST PROGRAM - US SPAY/NEUTER - US us SPAY/NEUTER - US - US PORECLOSURES SPAY/NEUTER SPAY/NEUTER SPAY/NEUTER (g) Description of non-cash assistance Part 1 Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) appraisal, other) (f) Method of valuation (book, FMV, 。 ö 0 。 Ö Ö ö ö (e) Amount of non-cash assistance 871. 939. 732. 750. 20,000 (d) Amount of cash grant 1,594 10,000 2,000 (c) IRC section if applicable 501 (C) (3) 501 (C) (3) 501 (C) (3) 501 (C) (3) 501 (C) (3) (C) (3) 501 (C) (3) 501 (C) (3) 501 87-0644812 59-0711176 38-1360926 57-1099596 43-0652638 56-1759771 31-0956829 31-0970405 (p) EIN - MCCORMICK, SC HUMANE SOCIETY OF MCCORMICK COUNTY HUMANE SOCIETY OF DELAWARE COUNTY HUMANE SOCIETY OF JOHNSON COUNTY HUMANE SOCIETY OF DAVIE COUNTY HUMANE SOCIETY OF KENT COUNTY HUMANE SOCIETY OF MOAB VALLEY (a) Name and address of organization or government NORTH MIAMI BEACH, FL 33160 HUMANE SOCIETY OF MISSOURI 16101 WEST DIXIE HIGHWAY 4920 STATE ROUTE 37 EAST HUMANE SOCIETY OF MIAMI GRAND RAPIDS, MI 49534 3077 WILSON DRIVE, NW 1201 MACKLIND AVENUE MOCKSVILLE, NC 27028 ST LOUIS, MO 63110 DELAWARE, OH 43015 3827 N GRAHAM ROAD FRANKLIN, IN 46131 INC. - PO BOX 900 MOAB, UT 84531 PO BOX 1188 P O BOX 153 29835

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Schedule I-1 (Form 990) 2009

SCHEDULE I-1 (Form 990) Department of the Treasury Internal Revenue Service

Continuation Sheet for Schedule I (Form 990) ► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.

Open to Public

Employer identification number 53-0225390

Name of the organization

THE HUMANE SOCIETY OF THE UNITED STATES

OPERATIONS SUPPORT DUE TO SUPPORT DUE TO MORTGAGE ACILITIES AND EQUIPMENT COCTOO SHELTER MAKEOVER SUPPORT DUE TO MORTGAGE SPAY/NEUTER & SHELTER MORTGAGE FORECLOSURES (h) Purpose of grant OR EQUINE AND FARM SHELTER OPERATIONS HELTER OPERATIONS IUPPORT - IMPROVED or assistance - US SPAY/NEUTER - US PORECLOSURES SPAY/NEUTER INALIST MIMALS (g) Description of non-cash assistance Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) appraisal, other) (f) Method of valuation (book, FMV, 。 ö 0 ö ö ö (e) Amount of non-cash assistance 5,000. 1,307, 5,700 2,412 2,000 10,000 (d) Amount of cash grant (c) IRC section if applicable (C) (3) 501 (C) (3) 501 (C) (3) 501 (C) (3) (C) (3) (C) (3) 501 501 501 59-1094757 59-0799907 26-1111681 59-6014943 75-1245911 35-1772608 (p) EIN HUMANE SOCIETY OF THE NATURE COAST HUMANE SOCIETY OF WESTERN MONTANA HUMANE SOCIETY OF SARASOTA COUNTY HUMANE SOCIETY OF TAMPA BAY, INC. - 2009 STANDIFORD # 16-B HUMANE SOCIETY OF PUTNAM, INC HUMANE SOCIETY OF NORTH TEXAS HUMANE SOCIETY OF STANISLAUS (a) Name and address of organization or government CA 95350 3607 NORTH ARMENIA AVENUE BROOKSVILLE, FL 34603 INC . - PO BOX 10328 TAMPA, FL 33607-1322 38503 FORT WORTH, TX 76103 1840 EAST LANCASTER FL 34237 - MODESTO, 2331 15TH STREET Z COOKEVILLE, PO BOX 995 SARASOTA, BOX 156 COUNTY Part I

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Schedule I-1 (Form 990) 2009

SPAY/NEUTER - US

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5,210.

501 (c) (3)

36-4516780

INDIANA SPAY/NEUTER ALLIANCE (PETS

MISSOULA, MT 59804

5930 HWY 93 SOUTH

ALIVE) - 6522 S. EMPIRE ROAD

BLOOMINGTON, IN 47401

ORECLOSURES

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2,000

501 (C) (3)

81-0290933

SCHEDULE I-1 (Form 990) Department of the Treasury Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.

Open to Public Inspection

OMB No. 1545-0047

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Schedule I-1 (Form 990) 2009 SUPPORT FOR WILDLIFE LAW UPPORT DUE TO MORTGAGE ZOOTOO SHELTER MAKEOVER (h) Purpose of grant or assistance Employer identification number SHELTER OPERATIONS ΩS SPAY/NEUTER - US - US SD ΩS 53-0225390 ORECLOSURES SPAY/NEUTER SPAY/NEUTER SPAY/NEUTER SPAY/NEUTER INALIST JOURNAL (g) Description of non-cash assistance Part I | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (book, FMV, appraisal, other) (f) Method of valuation Ö 。 。 Ö ċ ö Ö 。 (e) Amount of non-cash assistance OF THE UNITED STATES 526. 990. 1,030, 1,175 1,260. 1,000. (d) Amount of cash grant 10,000 15,000 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. STATE OF NEW MEXICO (c) IRC section if applicable 501 (C) (3) 501 (C) (3) 501 (C) (3) 501 (c) (3) (C) (3) 501 (C) (3) KERN COUNTY 501 THE HUMANE SOCIETY 91-2028325 20-1231396 38-1474932 48-0554339 15-0552724 62-1755926 95-6000925 85-6000642 (p) EIN CA KITTITAS COUNTY FRIENDS OF ANIMALS STREET SUITE 350 - BAKERSFIELD, KALAMAZOO COUNTY HUMANE SOCIETY STANFORD NE - ALBEQUERQUE, NM SERVICES DEPARTMENT - 2700 M UNIVERSITY OF NEW MEXICO 1117 (a) Name and address of organization or government KEARNEY AREA HUMANE SOCIETY KERN COUNTY ANIMAL CONTROL JOHNSON COUNTY HUMANE SOC INSTITUTE FOR PUBLIC LAW MOUNTAIN CITY, TN 37683 4239 S WESTNEDGE AVENUE 1039 BIG DRY RUN ROAD KANSAS HUMANE SOCIETY JEFFERSON COUNTY SPCA ELLENSBURG, WA 98926 4218 SOUTHEAST BLVD. KALAMAZOO, MI 49008 WATERTOWN, NY 13601 Name of the organization 25056 WATER STREET WICHITA, KS 67210 KEARNEY, NE 68845 1517 SANDERS ROAD 3205 W HWY 30 87131-0001 93301

SCHEDULE 1-1 (Form 990)
Department of the Treasury Internal Revenue Service

Continuation Sheet for Schedule I (Form 990) ► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.

Open to Public

Employer identification number 53-0225390

Name of the organization THE HUMANE SOCIETY

OF THE UNITED STATES

SPAY/NEUTER - MOBILE UNIT DERATIONS SUPPORT DUE TO SUPPORT DUE TO MORTGAGE COOTOO SHELTER MAKEOVER 'INALIST - \$5K; SHELTER MORTGAGE FORECLOSURES (h) Purpose of grant or assistance SHELTER OPERATIONS - US - US - US PAY/NEUTER - US FORECLOSURES SPAY/NEUTER SPAY/NEUTER SPAY/NEUTER non-cash assistance (g) Description of Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (f) Method of valuation (book, FMV, appraisal, other) 。 ٥. ö 。 ٥. o ċ (e) Amount of non-cash assistance 2,000, 5,136, 5,000. 700. 1,640 1,637 7,000 (d) Amount of cash grant (c) IRC section if applicable 501 (C) (3) 501 (C) (3) 501 (c) (3) 501 (C) (3) 501 (C) (3) 501 (c) (3) 501 (C) (3) 16-0743047 55-0874385 22-3585263 54-1952672 31-1105030 23-7225389 61-0444762 (b) EIN LOST AND FOUND DOG RESCUE ADOPTION - NEW S.P.C.A. - P O BOX PET - SOUTH LAKE TAHOE HUMANE SOCIETY AND organization or government LIBERTY HUMANE SOCIETY INC. CENTER, INC - 70 IVY LANE (a) Name and address of KNOX COUNTY HUMANE SOCIETY VA 22408 LEXINGTON HUMANE SOCIETY 1600 OLD FRANKFORT PIKE MOUNT VERNON, OH 43050 JERSEY CITY, NJ 07305 235 JERSEY CITY BLVD LAKE TAHOE, CA 96158 LEXINGTON, KY 40504 FAIRPORT, NY 14450 DE 19720 400 COLUMBUS ROAD FREDERICKSBURG, 99 VICTOR ROAD LIONHEARTS INC LOLLYPOP FARM 452 TV DRIVE CASTLE, Part

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Schedule I-1 (Form 990) 2009

CARE AND MEDICAL SERVICES

OR HOMELESS ANIMALS

Ö

39,250

501 (c) (3)

72-0471368

1700 MARDI GRAS BLVD. NEW ORLEANS, LA 70114

LOUISIANA SPCA

Name of the organization

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III. Continuation Sheet for Schedule I (Form 990)

OF THE UNITED STATES

Open to Public Inspection

Employer identification number 53-0225390

OMB No. 1545-0047

Schedule I-1 (Form 990) 2009 ROBERTS FUND) TO AID WITH GRANT FROM THE SUMMERLEE EXPENSES INCURRED IN THE SUPPORT - MINE-DETECTION POUNDATION (ANNIE LEE (h) Purpose of grant or assistance ΩS SPAY/NEUTER - US - US US SO -SPAY/NEUTER - US SPAY/NEUTER SPAY/NEUTER SPAY/NEUTER SPAY/NEUTER S900 (g) Description of non-cash assistance Part I | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) appraisal, other) (f) Method of (book, FMV, valuation ٥. 。 ö ö ċ 。 ö ο. (e) Amount of non-cash assistance 730. 1,919. 500 634. 2,688 (d) Amount of cash grant 866. 1,020 2,500 (c) IRC section if applicable 501 (C) (3) 501 (c) (3) 501 (c) (3) 501 (C) (3) 501 (c) (3) 501 (C) (3) 501 (C) (3) 501 (c) (3) THE HUMANE SOCIETY 38-3295492 23-7381113 27-0202973 41-1678502 54-1853093 72-1578941 24-0857714 04-3458267 (p) EIN PREVENTION OF CRUELTY TO ANIMALS 2805 REACH ROAD - WILLIAMSPORT, MARC JOHNSON DBA FOSTER PARROTS, 2425 WILSON BOULEVARD SUITE 313 LOVING COMPANIONS ANIMAL RESCUE LYCOMING COUNTY SOCIETY FOR THE MARTINSVILLE HENRY COUNTY SPCA MASSACHUSETTS SPCA-NEVINS FARM MARTIN COUNTY HUMANE SOCIETY (a) Name and address of organization or government 1360 OLD RICHARDSON HIGHWAY 132 JOSEPH MARTIN HIGHWAY MARSHALL LEGACY INSTITUTE MENOMINEE ANIMAL SHELTER MARTINSVILLE, VA 24112 LTD - 35 VERNON STREET N184 HAGGERSON COURT NORTH POLE, AK 99705 MENOMINEE, MI 49858 ARLINGTON, VA 22201 ROCKLAND, MA 02370 FAIRMONT, MN 56031 METHUEN, MA 01844 400 BROADWAY PO BOX 123 PA 17701

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► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III. Continuation Sheet for Schedule I (Form 990)

Open to Public Inspection 2009

Name of the organization

Employer identification number 53-0225390 THE HUMANE SOCIETY OF THE UNITED STATES

Part I Continuation of Grants and Other Assistance to Governments and	Assistance to Go	renments and Organ	nizations in the U	nited States (Sche	Organizations in the United States (Schedule I (Form 990), Part II.)	4 II.)	
_1	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MERRIMACK RIVER FELINE RESCUE 63 ELM ST. ROUTE 110	04-3172322	501 (C) (3)	902.	0			SPAY/NEUTER - US
MID-OHIO VALLEY BOARD OF HEALTH 211 SIXTH STREET PARKERSBURG, WV 26101		MID-OH BOARD HEALTH	лн 7,626.	0.			PAYMENT FOR MATERIALS BORROWED AND USED @ GULF COAST HURRICANE SITE
MINN-KOTA PAAWS 402 RAMONA AVENUE WEST FARGO, ND 58078	30-0245020	501 (C) (3)	6,196.	.0			SPAY/NEUTER - US
MISSISSIPPI SPAY AND NEUTER 2104 OLD BRANDON ROAD PEARL MS 39208	20-2938077	501 (C) (3)	15,515.	°C .			SPAY/NEUTER - US
MISSOURIANS FOR THE PROTECTION OF DOGS - 7584 OLIVE, SUITE 205 - ST	27-1423987	501 (C) (4)	450,000.	0			CAMPAIGN TO END ABUSE AT PUPPY MILLS IN MISSOURI
	56-1432402	501 (C) (3)	670.	0.			SPAY/NEUTER - US
MONROE COUNTY HUMANE SOCIETY PO BOX 1334 BLOOMINGTON IN 47402	35-6064277	501 (C) (3)	2,000	0			SHELTER OPERATIONS SUPPORT DUE TO MORTGAGE FORECLOSURES
ANIC	26-1878333	501 (C) (3)	2,000.	. 0			SHELTER OPERATIONS SUPPORT DUE TO MORTGAGE FORECLOSURES
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	luction Act Notic	e, see the Instruction	s for Form 990.				Schedule I-1 (Form 990) 2009

Name of the organization

► Attach to Form 990 to list additional information for Continuation Sheet for Schedule I (Form 990) Schedule I (Form 990), Part II or Part III

OF THE UNITED STATES

Open to Public Inspection OMB No. 1545-0047

Employer identification number

53-0225390

Schedule I-1 (Form 990) 2009 THE UPPORT DUE TO MORTGAGE SUPPORT DUE TO MORTGAGE UPPORT TO COVER CANINE UNITAL SPONSORSHIP OF IWHA YOUTH CONFERENCE (h) Purpose of grant HELTER OPERATIONS HELTER OPERATIONS or assistance us - US SPAY/NEUTER - US - US ORECLOSURES FORECLOSURES SPAY/NEUTER SPAY/NEUTER SPAY/NEUTER URGERY (g) Description of non-cash assistance Part [5] Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (book, FMV, appraisal, other) (f) Method of valuation ö ö Ö ö Ö ö ö ö (e) Amount of non-cash assistance 515. 2,000. 551. 990. .000 1,261 (d) Amount of cash grant 2,000, 5,000 (c) IRC section if applicable 501 (c) (3) 501 (c) (3) 501 (C) (3) 501 (C) (3) (C) (3) 501 (c) (3) 501 (C) (3) (C) (3) 501 501 SOCIETY 47-0792814 47-0825555 56-2114680 42-1316141 26-1717108 26-2121272 43-1894559 95-2641531 (b) EiN THE HUMANE ASSISTANCE ASSOCIATION, INC - 3303 MOUNTAINEER SPAY NEUTER ASSISTANCE NATIONAL WALKING HORSE ASSOCIATION ΑΓ NORTHEAST NEBRASKA HUMANE SOCIETY NATIONAL CAT PROTECTION SOCIETY 4059 IRON WORKS PARKWAY, STE 4 - HUNTSVILLE, (a) Name and address of organization or government NOAHS ARK ANIMAL FOUNDATION NORTH ALABAMA SPAY NEUTER SPRING VALLEY, CA 91977 NEBRASKA HUMANE SOCIETY PROGRAM - PO BOX 4335 MORGANTOWN, WV 26504 FAIRFIELD, IA 52556 LEXINGTON, KY 40511 FORISTELL, MO 63348 NORFOLK, NE 68701 9031 BIRCH STREET N MEMORIAL PWKY 8929 FORT STREET 83712 552ND AVE OMAHA, NE 68134 MUTTS N STUFF P.O. BOX 187 PO BOX 748 35810

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SCHEDULE I-1 (Form 990)
Department of the Treasury Internal Revenue Service

Continuation Sheet for Schedule I (Form 990) ► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.

Open to Public

Employer identification number 53-0225390

Name of the organization

THE HUMANE SOCIETY OF THE UNITED STATES

Schedule I-1 (Form 990) 2009 SUPPORT - INVESTIGATIONS SUPPORT DUE TO MORTGAGE INTO IN PUPPYMILLS AND PLACEMENT FOR PUPPIES CONTRIBUTION TO OHIO (h) Purpose of grant or assistance SHELTER OPERATIONS UPPY MILL RESCUE SALLOT INITIATIVE ASSISTANCE GRANT. SPAY/NEUTER - US ns - US 0S PORECLOSURES PAY/NEUTER SPAY/NEUTER SPAY/NEUTER CAMPAIGN (g) Description of non-cash assistance Part I. Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) appraisal, other) (f) Method of valuation (book, FMV, 。 ٥. o. 0 ٥. 。 ö Ö (e) Amount of non-cash assistance 580. 1,816. 500. 805. 1,407 1,500,000. 2,000. 2,000 (d) Amount of cash grant A.G (c) IRC section if applicable 501 (C) (3) 501 (C) (3) 501 (C) (3) 501 (C) (3) H (C) (3) 501 (C) (4) (C) (3) OFFICE OF 501 501 31-1746152 39-1709813 06-1818815 83-0360218 20-8682453 27-1083586 41-1487872 35-6000158 (b) EIN REFERRAL, INC - 111 NORMANDY ROAD - INDIANAPOLIS, PARSIPPANY ANIMAL SUPP. SOCIETY CANINES OFFICE OF THE INDIANA ATTORNEY OREGON OUTBACK HUMANE SOCIETY OUT OF THE WOODS RESCUE AND (a) Name and address of organization or government 107 S. HIGH STREET, STE 450 PARSIPPANY, NJ 07054-5210 NORTHWOODS HUMANE SOCIETY OHIOANS FOR HUMANE FARMS OSHKOSH AREA HUMANE SOC. - LITTLE ROCK, AR 72207 PARTNERS AMONG CATS & FRANKLIN, VA 23851 OR 97630 он 43215 GENERAL - INDIANA OSHKOSH, WI 54901 815 DEMPSEY TRAIL HAYWARD, WI 54843 P.O. BOX 1133 PO BOX 5077 PO BOX 206 LAKEVIEW, COLUMBUS, PO BOX 82 IN 46204

Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE 1-1 (Form 990)

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III. Continuation Sheet for Schedule I (Form 990)

Open to Public OMB No. 1545-0047 2009 Inspection

(h) Purpose of grant Employer identification number 53-0225390 or assistance UPPY MILL RESCUE ASSISTANCE GRANT. - US - US ΩS 0S SPAY/NEUTER - US - US - US PAY/NEUTER SPAY/NEUTER SPAY/NEUTER SPAY/NEUTER SPAY/NEUTER SPAY/NEUTER (g) Description of non-cash assistance Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (f) Method of valuation (book, FMV, appraisal, other) <u>.</u> 。 ö ö ٥. ٥. Ö 。 (e) Amount of non-cash assistance THE UNITED STATES 979. 1,282. 1,000 750. 1,215, 2,247 680. 1,069 (d) Amount of cash grant (c) IRC section if applicable 20-5346850 501 (C) (3) 501 (C) (3) 501 (c) (3) 501 (C) (3) 501 (C) (3) 501 (C) (3) 501 (C) (3) 501 (C) (3) OF THE HUMANE SOCIETY 74-2586062 33-0030634 22-2331492 14-1966759 93-1316924 20-5443692 68-0557163 (b) EIN - SAN MARCOS, PET PREVENT A LITTER OF CENTRAL PET OVER-POPULATION PREVENTION ADVOCATES, INC. - PO BOX 5721 PAWS CNTY ANML RESPONSE TEAM (a) Name and address of organization or government PAWS OF NE LOUISIANA INC. 1250 OHIO PIKE SUITE 201 PEOPLE FOR ANIMALS INC. PET PROJECT FOUNDATION PETSHOP PUPPIES, INC. AMELIA, OH 45102-1239 TEXAS - P.O. BOX 401 DANA POINT, CA 92629 22000 STATE ROUTE J BEAVERTON, OR 97006 33671 WINDHAM DRIVE HILLSIDE, NJ 07205 NEWBURG, MO 65550 401 HILLSIDE AVE. PET ALLIANCE INC MONROE, LA 71207 PAXICO, KS 66526 31954 MARIAN ST. P.O. BOX 15432 TX 78667 Parti

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Schedule I-1 (Form 990) 2009

Name of the organization

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III. Continuation Sheet for Schedule I (Form 990)

2009 Open to Public

Employer identification number 53-0225390

d Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) THE HUMANE SOCIETY OF THE UNITED STATES

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Scriedae I (1911) 2007).	Assistance to Go	vernments and Orgai	Izations in the U	lited States (Solle	ממפ ו לו סוווי מיסיי	/::. \	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PHOENIX MORGAINE DBA WILDBIRD REHAB HAVEN - P.O. BOX 11721 - HONOLULU HI 96828-0721	20-0430276	501 (C) (3)	2,500.	.0			TRANSPORT AND CARE OF 200 BIRDS FROM PANG/OAHU ANIMAL SANCTUARY
	47-0659715	501 (c) (3)	539.	0.			SPAY/NEUTER - US
PRAIRIE DOG COALITION 2525 ARAPAHOE ROAD #E4-527 ROHIDER CO 80302	71-1004703	501 (C) (3)	5,000.	0.			PROTECTION OF PRAIRIE DOGS IN THE WESTERN UNITED STATES
PREVENT A LITTER VETERINARY HOSPITAL - 3421 W CARY STREET -	54-1630847	501 (C) (3)	1,553.	0.		·	SPAY/NEUTER - US
EORGE 036 D 207	52-2230525	501 (C) (3)	1,144.	0.			SPAY/NEUTER - US
	91-6073154	501 (C) (3)	1,506.	.0			SPAY/NEUTER - US
	26-0579113	501 (C) (3)	585.	. 0			SPAY/NEUTER - US
PURRFECT CAT RESCUE P.O. BOX 7958	38-3729165	501 (C) (3)	1,036	•			SPAY/NEUTER - US
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	duction Act Notic	se, see the Instruction	ns for Form 990.				Schedule I-1 (Form 990) 2009

SCHEDULE I-1
(Form 990)
Department of the Treasury
Internal Revenue Service
Name of the organization

Continuation Sheet for Schedule I (Form 990) Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.

OMB No. 1545-0047
2009
Open to Public

Open to Public Inspection

SUPPORT - "KAUFELT HUMANE SUPPORT BIG CAT SANCTUARY SPAY/NEUTER SERVICES IN SUPPORT DUE TO MORTGAGE RESERVATION VETERINARY COLETY SCHOLARSHIP" (h) Purpose of grant or assistance CARE FOR 52 MUSTANGS SAVED FROM SLAUGHTER Employer identification number 53-0225390 HELTER OPERATIONS SUPPORT - LOW COST SPAY/NEUTER - US SUPPORT - STUDENT SPAY/NEUTER - US SERVICES (SIRVS) INITIATIVE FOR FORECLOSURES COUISIANA (g) Description of non-cash assistance Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (book, FMV, appraisal, other) (f) Method of valuation ö Ö ٥. ó ٥. ٠. ö 。 (e) Amount of non-cash assistance THE UNITED STATES 745. 860. 785. 4,000, 10,000 2,000 (d) Amount of cash grant 20,000 2,000 ¥ (c) IRC section if applicable UNIVERSITY OF 56-1232358 **5**01 (C) (3) 501 (c) (3) 501 (C) (3) (C) (3) (C) (3) 501 (C) (3) 501 (C) (3) Э 501 501 THE HUMANE SOCIETY 41-6007513 22-3584869 22-1607926 95-3868718 42-1717278 20-8621342 06-1484961 (b) EIN 2221 UNIVERSITY AVE SE SUITE 111 -REGENTS OF THE UNIV OF MINNESOTA UNIVERSITY TAX MANAGEMENT OFFICE RUTHERFORD CNTY ANIMAL PROTECT (a) Name and address of organization or government 6365 OLD AVERY ROAD SUITE 9 RUTGERS PREPARATORY SCHOOL RONDOUT VALLEY ANIMALS FOR ADOPTION - 4628 ROUTE 209 RUTHERFORDTON, NC 28139 DBA UNIV. OF MINNESOTA ROBINSON'S RESCUE INC. SHREVEPORT, LA 71105 504 E KINGS HIGHWAY SOMERSET, NJ 08873 6265 CARDENO DRIVE LA JOLLA, CA 92037 ACCORD, NY 12404 DUBLIN, OH 43016 CA 93438 RASCAL CHARITIES 1345 EASTON AVE ROAR FOUNDATION RETURNTOFREEDOM P.O. BOX 623 PO BOX 926 LOMPOC, Part

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Schedule I-1 (Form 990) 2009

SCHEDULE I-1 (Form 990)

Continuation Sheet for Schedule I (Form 990)

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.

OMB No. 1349-004/ 2009 Open to Public Inspection

Employer identification number 53-0225390 THE HUMANE SOCIETY OF THE UNITED STATES Department of the Treasury Internal Revenue Service
Name of the organization

Till included to Governments and Other Assistance to Governments and	Assistance to Go	vernments and Organ	nizations in the Ur	nited States (Sche	Organizations in the United States (Schedule I (Form 990), Part II.)	t II.)	
	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SACRAMENTO AREA ANML COALITION PO BOX 188890 SACRAMENTO CA 95818	51-0461220	501 (C) (3)	3,803.	0.			SPAY/NEUTER - US
DS 0	68-0577560	501 (C) (3)	855.	.0			SPAY/NEUTER - US
SAVE OHIO STRAYS PO BOX 16 WARNSWORTH OH 44282	20-2549010	501 (C) (3)	2,000.	0.			SHELTER OPERATIONS SUPPORT DUE TO MORTGAGE FORECLOSURES
	52-1765363	501 (C) (3)	3,084.	0.			SPAY/NEUTER - US
SAVING GRACE ANIMALS FOR ADOPTION 13400 OLD CREEDMORE ROAD WAKE FOREST NC 27587	92-0186555	501 (c) (3)	2005	0			PUPPY MILL RESCUE ASSISTANCE GRANT
SAVING HORSES, INC 4480 HUNTER PASS ALPINE, CA 91901	26-0519018	501 (C) (3)	1,000	.0			SHELTER OPERATIONS SUPPORT DUE TO MORTGAGE FORECLOSURES
SAWA-SOCIETY OF ANIMAL WELF-CO 15508 W. BELL RD., SUITE 101-613 SURPRISE, AZ 83374	41-1618666	501 (C) (6)	10,000.	o			CONFERENCE GRANT
SEATTLE ANIMAL SHELTER 2061 15TH AVENUE W. SEATTLE, WA 98119	91-6001275	CITY OF SEATTLE	3,136	0	·		SPAY/NEUTER - US Schedule I-1 (Form 990) 2009
LHA For Privacy Act and Paperwork Reduction Act Notice, see tile filsu uctions for 1 of 11 occurs.	auction Act Notic	e, see ule msu ucuoi	55				

Name of the organization SCHEDULE 1-1 (Form 990)

► Attach to Form 990 to list additional information for Continuation Sheet for Schedule I (Form 990) Schedule I (Form 990), Part II or Part III.

Open to Public Inspection

OMB No. 1545-0047

Employer identification number

53-0225390

Schedule I-1 (Form 990) 2009 SUPPORT DUE TO MORTGAGE (h) Purpose of grant or assistance SHELTER OPERATIONS SPAY/NEUTER - US - US ns - US 0s \mathbf{u} \mathbf{u} PORECLOSURES PAY/NEUTER SPAY/NEUTER SPAY/NEUTER SPAY/NEUTER SPAY/NEUTER PAY/NEUTER (g) Description of non-cash assistance Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) appraisal, other) (f) Method of valuation (book, FMV, 。 ٥. Ö ö ö Ö ö ö (e) Amount of non-cash assistance THE UNITED STATES 751. 1,903. 4,817. 2,518 1,045, .000 2,975. (d) Amount of cash grant 1,048 ~ CITY OF SHERWOOD (c) IRC section if applicable 62-1675393 501 (C) (3) 501 (c) (3) 501 (C) (3) 501 (C) (3) 501 (C) (3) (C) (3) 501 (C) (3) Q 501 THE HUMANE SOCIETY 71-0408925 23-7165004 23-7367199 22-3620633 23-7102713 63-0817987 41-1780387 (p) EIN - KETTERING, SHERWOOD HUMANE ANIMAL SERVICES CONDITIONS FOR STRAY ANIMALS -SOCIETY FOR THE IMPROVEMENT OF SOUTHERN ALLIANCE ANIMAL WELF. SECOND CHANCE FOR ANIMALS, INC SOUTH SUBURBAN HUMANE SOCIETY SHELBY COUNTY HUMANE SOCIETY SECOND CHANCE ANIMAL SHELTER (a) Name and address of organization or government IL 60425 MA 01515 SEQUOIA HUMANE SOCIETY 6500 NORTH HILLS BLVD 2600 WILMINGTON PIKE COLUMBIANA, AL 35051 TN 37202 SHERWOOD, AR 72120 SOMERSET, NJ 08875 CHICAGO HEIGHTS, 6073 LOMA AVENUE CA 95503 EAST BROOKFIELD, 18349 S HALSTED 381 MCDOW ROAD 111 YOUNG ROAD PO BOX 23535 PO BOX 5172 NASHVILLE, он 45419 EUREKA, Parti

Name of the organization

Continuation Sheet for Schedule I (Form 990)

Open to Public Inspection 2009

➤ Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.

OF THE UNITED STATES

SOCIETY

THE HUMANE

Employer identification number 53-0225390

Schedule I-1 (Form 990) 2009 SPAY DAY 09 PHOTO CONTEST SPAY DAY 09 PHOTO CONTEST SUPPORT - NEUTER SCOOTER SPAY/NEUTER SERVICES IN SPAY DAY (\$4,995)/SPAY DORIS DAY ANIMAL FUND (h) Purpose of grant or assistance DAY 09 PHOTO CONTEST UNDS (\$2,773.89); SUPPORT - LOW COST UNDS (\$1,652.89) SPAY/NEUTER - US - US g SPAY/NEUTER - US SPAY/NEUTER SPAY/NEUTER ISSISSIPPI. CLINICS SUNDS (g) Description of non-cash assistance Part I | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) appraisal, other) (f) Method of valuation (book, FMV, 0 ö ٥. ٠. ö ö ö ö (e) Amount of non-cash assistance 5,747. 3,670. 987 1,133 952. 11,137 6,648 (d) Amount of cash grant 38,500 (c) IRC section if applicable STATE OF MAINE 501 (C) (3) 501 (C) (3) 501 (C) (3) (C) (3) 501 (C) (3) 501 (c) (3) 64-0514796 | 501 (C) (3) 501 80-0303411 26-1109903 33-0517862 26-2679583 54-1928018 20-3006686 06-6000001 (p) EIN SPAY NRV VIRGINIA PARTNERSHIP FOR ANIMAL WELFARE AND SUPPORT - 4431 SPAY NEUTER ACTION PROJECT (SNAP) CHRISTIANSBURG PIKE - PILOT, VA SOUTHERN PINES ANIMAL SHELTER (a) Name and address of organization or government SPAY NEUTER IDAHO PETS, INC HATTIESBURG, MS 39403-2021 1531 WOODED ACRES DRIVE 1864 S WADSWORTH BLVD 23206 GRATIOT PMB 331 EASTPOINTE, MI 48021 1077 S GARDEN PLACE LAKEWOOD, CO 80232 LA JOLLA, CA 92038 FALMOUTH, ME 04105 18 JUSTAMERE ROAD BOISE, ID 83705 WACO, TX 76710 SPAY MICHIGAN P.O. BOX 2021 PO BOX 1373 SPAY TODAY SPAY TEXAS SPAY MAINE 24138

Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE 1-1 (Form 990)

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III. Continuation Sheet for Schedule I (Form 990)

OMB No. 1545-0047

Open to Public Inspection

Employer identification number 53–0225390

Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) STATES UNITED THE OF. THE HUMANE SOCIETY

Schedule I-1 (Form 990) 2009 RAND NEW ANIMAL SHELTER AND PURCHASE OF NEW VAN. SPAY - REIMBURSEMENT FOR SUPPORT DUE TO MORTGAGE NWANTED AND ABANDONED SUPPORT - BUILDING OF (h) Purpose of grant or assistance TO SUPPORT CARE FOR SHELTER OPERATIONS - US SO - \mathbf{n} ORECLOSURES PAY/NEUTER SPAY/NEUTER SPAY/NEUTER SPAY/NEUTER SURGERY ETS (g) Description of non-cash assistance appraisal, other) (f) Method of valuation (book, FMV, ٥. Ö 0 。 。 ö Ö Ö (e) Amount of non-cash assistance 885. 284,625 4,987 1,000 9,761, (d) Amount of cash grant 470. 1,916 4.593 72-6001193 ST BERNARD PARISH (c) IRC section if applicable 501 (C) (3) 501 (C) (3) (C) (3) (C) (3) 501 (C) (3) (C) (3) 501 (C) (3) 501 501 501 56-2176896 38-3749218 91-0804542 02-0537086 33-1173160 95-1738153 91-1223929 (p) EIN SPAY-NEUTER ASSISTANCE PROGRAM ST BERNARD PARISH GOVERNMENT (a) Name and address of organization or government VT 05759 SPRING HILL HORSE RESCUE SPOKANE, WA 99202-2867 5026 W JEFFERSON BLVD LOS ANGELES, CA 90016 LOUISVILLE, KY 40256 CHALMETTE, LA 70043 GREENVILLE, NC 27858 SPAY/NEUTER YOUR PET 115 AGRICULTURE RD SPOKANIMAL C.A.R.E. 710 N. NAPA STREET HOUSTON, TX 77270 MEDFORD, OR 97501 108 BRINKLEY ROAD NORTH CLARENDON 175 MIDDLE ROAD SPAY TODAY INC SPOT FUND INC PO BOX 16346 P.O. BOX 477 PO BOX 70286 Parti SPCALA

Continuation Sheet for Schedule I (Form 990)

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.

THE UNITED STATES

Name of the organization

Department of the Treasury Internal Revenue Service

SCHEDULE 1-1

(Form 990)

Open to Public 2009 Inspection

Employer identification number 53-0225390

Schedule I-1 (Form 990) 2009 EQUINE VETERINARY EXPENSE THE PUBLIC IN MISSISSIPPI PAY/NEUTER SERVICES TO AND ADOPTION ACTIVITIES ROVIDE FOR THE CARE OF COOTOO SHELTER MAKEOVER TO SUPPORT ANIMAL CARE (h) Purpose of grant or assistance SUPPORT - LOW COST CONFERENCE GRANT US IOMELESS ANIMALS SPAY/NEUTER SPAY/NEUTER INALIST (g) Description of non-cash assistance Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule | (Form 990), Part II.) (f) Method of valuation (book, FMV, appraisal, other) 0 ö ٥. Ö 。 ö ο. (e) Amount of non-cash assistance 1,500 862. 1,154. 10,000 525. 1,706. ,000 2,000, (d) Amount of cash grant For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. (c) IRC section if applicable 31-1717528 501 (C) (3) 501 (C) (3) 501 (C) (3) (C) (3) 501 (C) (3) 501 (C) (3) 501 (c) (3) 501 (C) (3) SOCIETY OF 501 22-3102844 20-2943037 65-1134062 23-7208051 81-0668011 72-0543369 01-0756138 (P) EIN THE HUMANE 485 WASHINGTON ST. PO BOX 812143 TAILWAGGERS FOR LIFE RESCUE FARM COALITION) - 632 TUMBLEWEED DR. STEUBEN COUNTY HUMANE SOCIETY STRAWBERRY MOUNTAIN MUSTANGS (a) Name and address of organization or government TASC (TEXAS ANIMAL SHELTER CHARLES HUMANE SOCIETY ST. TAMMANY HUMANE SOCIETY Ä STRAY PETS IN NEED OF 20384 HARRISON AVENUE ST. CHARLES, MO 63303 WAYNESBORO, MS 39367 STAND UP FOR ANIMALS WELLESLEY, MA 02482 10550 AVIATION BLVD COVINGTON, LA 70433 ROSEBURG, OR 97470 MARATHON, FL 33050 ANGOLA, IN 46703 HURST, TX 76054 1099 PRALLE LANE P.O. BOX 1008 PO BOX 2133 PO BOX 204 Part LHA

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III. Continuation Sheet for Schedule I (Form 990)

Open to Public

OMB No. 1545-0047 Inspection

Employer identification number 53-0225390

THE UNITED STATES 뎐 SOCIETY THE HUMANE Name of the organization

SUPPORT FOR INTERNATIONAL METHODOLOGIES CONFERENCE OOTOO SHELTER MAKEOVER SPAY/NEUTER VACCINATION ND MEDICAL TREATMENT (h) Purpose of grant or assistance QUIPMENT FOR AFGHAN ION-ANIMAL RESEARCH UNDS TO EXPAND ILLITARY DOGS FINALIST ROGRAM (g) Description of non-cash assistance Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (f) Method of valuation (book, FMV, appraisal, other) ö ö ö ö (e) Amount of assistance non-cash (d) Amount of cash grant 5,000, 6,013, 10,000 1,581 (c) IRC section if applicable 501 (C) (3) 501 (c) (3) 501 (C) (3) 91-6036707 16-1611221 52-2294193 59-3710666 (p) EIN THE ALTERNATIVES CONGRESS TRUST (a) Name and address of organization or government GALTHERSBURG, MD 20879 700 PROFESSIONAL DRIVE NY 14110 THE ANIMALS CRUSADERS THE 50 DEGREE COMPANY 432 KLICKITAT DRIVE LA CONNER, WA 98257 MELBOURNE, FL 32904 315 STAN DRIVE TEN LIVES CLUB NORTH BOSTON, P.O. BOX 253 Part

ö 5,174 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. STATE OF MAINE 06-6000001 28 STATE HOUSE STATION - AUGUSTA, ME 04333-

Schedule I-1 (Form 990) 2009

REIMBURSEMENT SURGERY EXP

DAF SPAY DAY GRANT

SUPPORT DUE TO MORTGAGE

ORECLOSURES

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1,000

TOWN OF SULLIVAN

01-6000388

HELP FIX ME! SPAY/NEUTER PROGRAM

TREASURER, STATE OF MAINE

SULLIVAN, ME 04664 1888 US HIGHWAY 1

TOWN OF SULLIVAN

SHELTER OPERATIONS

ns -

PAY/NEUTER

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520.

501 (C) (3)

39-1937516

WHITEWATER, WI 53190

182 W MAIN STREET TOUCHED BY A PAW

SUPPORT DUE TO MORTGAGE

ORECLOSURES

0

2,000

501 (C) (3)

91-2032325

CA 95067

SCOTTS VALLEY,

PO BOX 66594

THE RABBIT HAVEN

HELTER OPERATIONS

Continuation Sheet for Schedule I (Form 990)

Open to Public 2009 2009

➤ Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.

Inspection

Employer identification number

53-0225390

Name of the organization

Schedule I-1 (Form 990) 2009 SUPPORT - HSVMA STUDENT SPAY DAY PHOTO CONTEST FUNDING FOR WILDLIFE (h) Purpose of grant or assistance EDUCATIONAL EXHIBIT CONFLICT RESOLUTION HAPTER SEED MONEY CONTRACEPTION AND - US SPAY/NEUTER - US Sn -SPAY DAY GRANT SPAY/NEUTER SPAY/NEUTER PFORTS (g) Description of non-cash assistance Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule | (Form 990), Part II.) (f) Method of valuation (book, FMV, appraisal, other) Ö ö 。 ö ö Ö ٥. ó (e) Amount of non-cash assistance THE UNITED STATES 680. 530. 640. 000 20,000. 7,559 500. (d) Amount of cash grant 43,525 (c) IRC section if applicable 501 (C) (3) 501 (c) (3) (C) (3) (C) (3) 501 (C) (3) 501 (C) (3) 501 (C) (3) (C) (3) OF 501 501 501 SOCIETY 20-0430276 20-4402750 26-1415269 52-0796820 62-1640384 04-2103634 64-0646841 04-2103634 (p) EIN THE HUMANE VERMONT COMPANION ANIMAL NEUTERING P.O. BOX 625 719 HICKORY STAR ROAD - LAKE CTR FOR ANIMALS/PUBLIC POLICY 200 WESTBORO ROAD - NORTH GRAFTON, MA VETERINARY EFFORTS IN GIVING TO U.S. CAPITOL HISTORICAL SOCIETY TUFTS UNIV SCHOOL OF VET MEDIC INC - 19A BAILEY MEADOWS ROAD VERNON COUNTY PEOPLE FOR PETS UNION COUNTY HUMANE SOCIETY (a) Name and address of organization or government ANIMALS, INC. - PO BOX 92 TRUSTEES OF TUFTS COLLEGE TUPELO LEE HUMANE SOCIETY 200 WESTBORO RD., BLDG#5 NORTH GRAFTON, MA 01536 TN 37807 VA 22066 VT 05602 ELMORE, VT 05657 NEVADA, MO 64772 TUPELO, MS 38802 MAYNARDVILLE, P 0 BOX 1185 GREAT FALLS, PO BOX 383 MIDDLESEX, PO BOX 553 Part 01536

SCHEDULE I-1 (Form 990)
Department of the Treasury Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.

OMB No. 1545-0047
2009
Open to Public
Inspection

Employer identification number 53-0225390 Dart IV Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) OF THE UNITED STATES THE HUMANE SOCIETY Name of the organization

Part S Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule (Form 390), Fait III)	Assistance to Go	vernments and Organ	nizations in the Un	nted States (Sche	adie i (romi sso), rai	(III.)	
(a) Name and address of organization or government	(b) EiN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VETERNARY MEDICAL CLINIC INC 1407 INDIAN WELLS ROAD ALAMOGORDO, NM 88310	32-0234700	501 (C) (3)	670.	0.		y .	SPAY/NEUTER - US
VOICES FOR ANIMALS PO BOX 4466 CHARLOTTESVILLE, VA 22905	54-1418303	501 (C) (3)	725.	.0		Ĭ	SPAY/NEUTER - US
VOLUNTEERS FOR ANIMAL WELFARE, INC 2824 CLERMONT PL OKLAHOMA CITY, OK 73116	23-7315925	501 (c) (3)	1,566.	0.			SPAY/NEUTER - US
W.A.G.S. OF MONROE CNTY INC. 60035 VAUGHN RD. AMORY, MS 38821	64-0931983	501 (C) (3)	.565.	0.			SPAY/NEUTER - US
WAG ANIMAL RESCUE P.O. BOX 222 WYANDOTTE, MI 48192-0222	38-2820050	501 (C) (3)	1,325.	0.			SPAY/NEUTER - US
WASHINGTON HUMANE SOCIETY 7319 GEORGIA AVENUE NW WASHINGTON, DC 20012	53-0219724	501 (C) (3)	40,442.	0.			WALK FOR ANIMALS 2009
WESTERN UNIVERSITY OF HEALTH SCIENCES - COLLEGE OF VETERINARY MEDICINE 309 E, SECOND STREET - POMONA, CA 91766-1854	95-3127273	501 (C) (3)	500.	0.			SUPPORT - HSVMA STUDENT CHAPTER SEED MONEY
WIND RIVER BEAR INSTITUTE P.O. BOX 1299 FLORENCE, MT 59833-1299	20-3233612	501 (c) (3)	5,000.	0.			SUPPORT - GENERAL OPERATIONS AND NON-LETHAL BEAR SEASON FIELD WORK
			L				School: 16 1-1 (Form 990) 2009

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

Schedule I-1 (Form 990) 2009

Department of the Treasury Internal Revenue Service Name of the organization SCHEDULE I-1 (Form 990)

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III. Continuation Sheet for Schedule I (Form 990)

2009

Open to Public Inspection

Employer identification number 53-0225390

THE HUMANE SOCIETY OF THE UNITED STATES

The Street of Governments and	Secietance to Go	vernments and Organ	izations in the Ur	nited States (Sche	Organizations in the United States (Schedule I (Form 990), Part II.)	t II.)	
(a) Name and address of organization or government	(a)	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WINNEBAGO COUNTY ANIMAL SVC 4517 N. MAIN ST.	36-4185647	501 (C) (3)	711.	0.			SPAY/NEUTER - US
MISCONSIN HUMANE SOCIETY 4500 W WISCONSIN AVENUE MILMAIREE WI 53208-3156	39-0810533	501 (C) (3)	8,128.	0.			SPAY DAY 09 PHOTO CONTEST FUNDS (\$5,000)
YOUTH BUDDHISM COMM, INC. 11 EAST BROADWAY SUITE 6D NEW YORK NY 10038	13-3466676	501 (C) (3)	1,500.	0			OUTREACH ON MERCY RELEASE AND SHARK FINNING
HUMANE SOCIETY INTERNATIONAL, INC 2100 L STREET, NW WASHINGTON DC 20037	52-1769464	501 (C) (3)	2,752,607.	0.			SUPPORT RELATIONSHIPS WITH INTERNATIONAL AGENCIES
HA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	J Juction Act Notic	e, see the Instruction	s for Form 990.				Schedule I-1 (Form 990) 2009

<u>iCHEDULE J</u> Form 990)

Compensation Information

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

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

Part IV, line 23. ➤ Attach to Form 990.
➤ See separate instructions. OMB No. 1545-0047

Open to Public Inspection

epartment of the Treasury lame of the organization

THE HUMANE SOCIETY OF THE UNITED STATES

Employer identification number 53-0225390

Pa	rt Ia Questions Regarding Compensation	T	T	
		\ - 324 C	Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII. Section A. line 1a. Complete Part III to provide any relevant information regarding these items.	314 ₉ 3	374	
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			2007 P. J.
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
			4 14 7	. 1759) 1546-155
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			tari dik
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	lb		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	. 2-34:	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply.			
	X Compensation committee			
	Independent compensation consultant X Compensation survey or study			148 (141) 1824 1834
	Form 990 of other organizations X Approval by the board or compensation committee			
			-8619 	
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			150 Ala 180 Ala
	organization or a related organization:		30	19.43
а	Receive a severance payment or change-of-control payment?	4a	<u> </u>	 -
h	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	Series (1)	 ^ -
_	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:	.24%. -	ABAT S	\ \v
а	The organization?	<u>5a</u>	<u> </u>	X
	Any related organization?	<u>5b</u>	Section .	12
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:	\$ 1.00 m	322.6	X
а	The organization?	6a		$\frac{1}{X}$
	Any related organization?	6b	July Villa	1 625
	If "Yes" to line 6a or 6b, describe in Part III.		ACT.	
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments	7		x
	not described in lines 5 and 6? If "Yes," describe in Part III	7	-	+^
8	Were any amounts reported in Form 990. Part VII, paid or accrued pursuant to a contract that was subject to the			x
	initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	-	+^
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	_		
	Regulations section 53.4958-6(c)?	9		<u></u>
LH	A For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule J	ron	11 99(<i>1)</i> 2005

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

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

		(B) Breakdown of W-2 an	W-2 and/or 1099-Mis	d/or 1099-MISC compensation	(C) Betirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(Q)-(j)(B)	reported in prior Form 990 or Form 990 EZ
	3	234 026	0	0	30,316.	4,838.	269,180.	0
WAYNE DACELLE	€ €	0 0 0	0		٠.	0		0
WAINE FACEULE	3 5	188,972.	0	0	51,874.	9,775.	250,621.	0
G. THOMAS WAITE III) <u>(</u>	٠ı	0				,	00
	ε	181,067.	0		25,491.	8,584.	215,142.	0
ROGER A. KINDLER	<u> </u>	1	0		i	ŀ		
	Ξ	181,215.	0.		49,254.	10,449.	240,918.	0
ANDREW N. ROWAN, PHD.	Ξ	0	0		Ì		ľ	
	€	189,23			12,146.	5,058.	206,437.	0
MICHAEL MARKARIAN	≘					0		
	€	158,63		0	33,576.	794.	193,007.	0
JOHN REED BALZAR	Ξ		0.	0	ľ	- 1		0
	18	157,015.	0	0	30,395.	10,993.	198,403.	0
JOHN W. GRANDY, PHD.		0	0	• 0		- 1	ı	00
	18	145,261.	0	0	38,819.	9,266.	193,346.	0
ROBERT ROOP, PHD.			0.	0		0		0
	18	147,67		0	21,521.	794.	169,99	0
HOLLY ELIZABETH HAZARD	≘	0	0	0		ı	Ì	0
	18	134,287.		0.	10,372.	9,652.	154,311.	0
SCOTLUND HAISLEY	: ≘		0	0.	- 1	ľ	- 1	0
	18	131,154.	0		18,420.	5,231.	154,805.	00
HEIDI PRESCOTT	<u> </u>				Ì	- 1	- 1	0
1	Ξ	137,498.	0		4,018.	6,382.	147,898.	0
RICHARD M CLUGSTON, JR	<u> </u>	0.	0	0	0	0.	0	0
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				1			Schedu	Schedule J (Form 990) 2009

THE HUMANE SOCIETY OF THE UNITED STATES Part III Supplemental Information Schedule J (Form 990) 2009

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

LINE 4A: VIRGINIA AUSTENBERG - A PART TIME EMPLOYEE IN PHILANTHROPY PART I,

- LEFT THE FORMERLY A REGIONAL DIRECTOR OF THE MID-ATLANTIC REGIONAL OFFICE

HSUS AND THEN CAME BACK

LONGEVITY SEVERANCE: 47,972.06

TERMINATION SEVERANCE: \$47,230.00

SENIOR ADVISOR TO EXEC VP OF PROGRAMS ı FORMER EMPLOYEE - RICHARD CLUGSTON

AND POLICY DEVELOPMENT

LONGEVITY SEVERANCE: \$47,231.00

TERMINATION SEVERANCE: \$45,000.00

FORM 990, PART VII

AVERAGE HOURS PER WEEK DEVOTED TO RELATED ORGANIZATIONS

	HSUS	FFA	DDAL	WLT	HSI	HSU	
WAYNE PACELLE	40	Н	4	н		1	
G. THOMAS WAITE III	40	н	Н	4	П		
ANDREW A. ROWAN	40	0	0	П	H		Schedule J (Form 990) 2009

Schedule J (Form 990) 2009

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

MICHAEL MARKARIAN	40	1	0	0	0	0
JANET D. FRAKE	40	0	г	0	~	0
GWEN CRANE	40	П	Н	\leftarrow	0	1
MARY K. BERGE	40	Н		₩	0	0
PATRICIA A. GATONS	20	0	0	0	\leftarrow	1
JOHN W. GRANDY, PH.D	40	0	0	н	н	0
HOLLY ELIZABETH HAZARD 40	40	0	Н	H	0	0
NANCY PERRY	40	0	0	0	0	1

FORM 990, PART VII, LINE 5:

INCOME FROM UNRELATED ORGANIZATION, WILLIAM MORROW/HARPERCOLLINS

CURRENT AS ADVANCE ON ROYALTIES TO WAYNE PACELLE, PUBLISHERS, \$42,098,

PRESIDENT/CEO, FOR AN HSUS-SPONSORED BOOK.

SCHEDULE J-2

Form 990)

epartment of the Treasury iternal Revenue Service

lame of the Organization

Continuation Sheet for Form 990

2009 Open to Public Inspection

OMB No. 1545-0047

► Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

► See the Instructions for Form 990.

THE HUMANE SOCIETY OF THE UNITED STATES

Employer Identification number 53-0225390

TOP OF THE EDUCATION 40.00 IN 147,679. HOLLY ELIZABETH HAZARD	THE HUMAN	ectors Tr	ııı	998	K	EV.	Em	nlo	vees, and Highes	Compensated E	mployees
Name and title			ust	<u> </u>				7	(D)	(E)	(F)
DAVID O. WIEBERS, M.D. DIRECTOR LONA WILLIAMS DIRECTOR LONA WILLIAMS DIRECTOR LONA WILLIAMS TREASURER/CFO ROGER A. KINDLER GENERAL COUNSEL, VP/CLO ANDREW N. ROWAN, PHD. CIO/CSO MICHAEL MARKARIAN EXECUTE & COO JAMET D. FRAKE SECRETARY MICHAEL MARKARIAN EXEC VP & COO JAMET D. FRAKE SECRETARY GWEN CRANE SECRETARY MAY K. BERGE CONTROLLER AND DEPUTY TR 40.00 X W. 181,067. MAY SERGE SECRETARY MOO X W. 189,233. D. 16,410. JAMET D. FRAKE SECRETARY MOO X W. 97,020. D. 13,864. THERESA CANNON REESE ASSISTANT TREASURER 40.00 X W. 101,644. MAY K. BERGE CONTROLLER AND DEPUTY TR 40.00 X W. 101,644. MAY K. BERGE CONTROLLER AND DEPUTY TR 40.00 X W. 101,644. MAY K. BERGE MAY K.				,	-	-					• •
DAVID O. WIEBERS, M.D. DIRECTOR CONA WILLIAMS DIRECTOR ANNE PACELLE PRESIDENT/CEO G. THOMAS WAITE III TREASURER/CPO ANOMAN PHD. CIO/CSO MICHAEL MARKARIAN EXEC UP & COO JANET D. FRAKE SCENERAL COUNSEL, VP/CLO MICHAEL MARKARIAN EXEC VP & COO JANET D. FRAKE SCENERAL CONTROLLER AND DEPUTY TR CONTROLLER AND DEPUTY TR 40.00 X ANOMAN Y. BERGE CONTROLLER AND DEPUTY TR 40.00 X JANET D. FRAKE SCONTROLLER AND DEPUTY TR 40.00 X JONA JANET D. JANET D	Name and title	- 1	(ct					w l		•	
DAVID O. WIEBERS, M.D. DIRECTOR LONA WILLIAMS DIRECTOR RAYNE PACELLE PRESIDENT/CEO S. THOMAS WAITE III TREASURES/CFO AU.00 X BRANDREW N. RINDLER GENERAL COUNSEL, VP/CLO AU.00 X LONA WILLIAMS DIRECTOR WAYNER GENERAL COUNSEL, VP/CLO AU.00 X BRANDREW N. ROWAN, PHD. CIO/CSO MICHAEL MARKARIAN EXEC VP & COO JANET D. FRAKE SECRETARY GWEN CRANE CONTROLLER AND DEPUTY TR AU.00 X BRANDREW N. BERGE CONTROLLER AND DEPUTY TR AU.00 X BRANDREW N. BERGE CONTROLLER AND DEPUTY TR AU.00 X BRANDREW N. BERGE CONTROLLER AND DEPUTY TR AU.00 X BRANDREW N. BERGE CONTROLLER AND DEPUTY TR AU.00 X BRANDREW N. BERGE CONTROLLER AND DEPUTY TR AU.00 X BRANDREW N. BERGE CONTROLLER AND DEPUTY TR AU.00 X BRANDREW N. BERGE CONTROLLER AND DEPUTY TR AU.00 X BRANDREW THERESA CANNON REESE ASSISTANT TREASURER AU.00 X BRANDREW BRA			-(0,	1			7,7	"		from related	
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CR DIR EMERGENCY SERVIC 40.00	SCOTLUND HAISLEY		T					_	104 005		19 252
Schedule J-2 (Form 990) 2009	SR. DIR EMERGENCY SERVIC	40.00	<u>) </u>							<u> </u>	

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

Schedule J-2 (Form 990) 2009

SCHEDULE L

(Form 990 or 990-EZ)

epartment of the Treasury ternal Revenue Service

Transactions With Interested Persons

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. ➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions. OMB No. 1545-0047

Open To Public Inspection

Employer identification number

	HUMAN									5	3-02	25390)	
Part Excess Benefit														
Complete if the orga	ınization ansv	vered "	Yes" o	n Form 9	90, Parl	t IV, lir	ne 25a or 2	b, or For	m 990-E	Z, Part \	/, line 40	<u>b.</u> т		
(a) Name of dis	auglified per	con		Į.			(b) Des	cription c	of transa	ction		ŀ	(c) Corr	
(a) Name of dis	qualified pers	5011					(3, 55)						Yes	No
2 Enter the amount of tax imp														
3 Enter the amount of tax, if a	ıny, on line 2,	above,	, reimbl	ursed by	the org	anızat	ion ,,,,,,	· · · · · · · · · · · · · · · · · · ·			. • •			
Part II Loans to and/o														
Complete if the org	anization ans	wered	"Yes" c						Z, Part \	/, line 3		proved	(a) \/	/ritten
(a) Name of interested	(b) Loan the orga			(c) Origir an	nal princ nount	ipal	(d) Balan	ce due		In ault?	by bo	oard or nittee?	agree	ment?
person and purpose	<u> </u>	1							Yes	No	Yes	No	Yes	No
	То	Fro	om						103	110	1.00			
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		+												
		 												
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														<u> </u>
otal					,	▶ \$			\$NAME	3,40,70	1867	W-1947	类结驳	
Part III Grants or Assi	stance Be	nefiti	ng In	tereste	ed Per	sons	5.							
Complete if the org	anization ans	wered	"Yes"	on Form	990, Pa	ırt IV,	line 27.							
(a) Name of interested	d person		•	(b) Relat	ionship t	betwe	en interest	ed person	and		(c) An	nount an assistar)
							Jul 112411011			_				
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			 							_				
Part IV Business Tran														
Complete if the org	ganization an	swered											T (e) Sh	naring of
(a) Name of intereste	d person		(b) R	elationsh erson ar	nip betw nd the o	/een ir rganiz	nterested ration		ount of action	(d) Descrip transac		organ	ization's enues?
			"			-				-			Yes	No
JODI SMITH			FAM	MBR	OF	FRM	R DIR	8	9,86'	7.EM	PLOY	MENT		X
GRACE MARKARIAN	·			MBR			ICER	6	5,10	4.EM	PLOY	MENT		X
									-				+	+
							1							

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

Schedule L (Form 990 or 990-EZ) 2009

SEE SCHEDULE O FOR SCHEDULE L CONTINUATIONS

SCHEDULE J-2 (Form 990)

Continuation Sheet for Form 990

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the Organization

➤ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

➤ See the Instructions for Form 990.

Employer Identification number 53-0225390

Name of the Organization THE HIMA	NE SOCTE	ers	7 0	F	тн	ΙE	UN	ITED STATES	53-022	
Part I Continuation of Officers, D	irectors, Tr	ust	ees	s, K	ey	Em	plo	yees, and Highes		
(A)	(B)			(C				(D)	(E)	(F)
Name and title	Average			Posi				Reportable	Reportable	Estimated
	hours	(cl	neck	all t	hat	app	y)	compensation	compensation from related	amount of other
	per week					92		from the	organizations	compensation
	week	真				yoldı		organization	(W-2/1099-MISC)	from the
		r direc				ted en		(W-2/1099-MISC)	-	organization
	}	stee 0	ruste			beusa				and related organizations
		ual tr	ional		ploye	tcom	_			organizations
		ndividual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
HEIDI PRESCOTT	<u> </u>									
SR. VP - CAMPAIGNS	40.00					Х		131,154.	0.	22,857.
VIRGINA E AUSTENBERG	40.00		İ			₩.		121 996	0.	1,331.
DIR IN PHILANTHROPY NANCY PERRY	40.00	╀	-	-	-	X	_	121,896.	0.	1,331.
VP, GOV'T AFFAIRS	40.00					x		108,636.	0.	18,527.
RICHARD M CLUGSTON, JR										
SR. ADVISOR	40.00	<u> </u>		<u> </u>			X	137,498.	0.	10,201.
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SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Part I

Noncash Contributions

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

Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Types of Property

THE HUMANE SOCIETY OF THE UNITED STATES

Employer identification number 53-0225390

Pari	Types of Property	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	Method of	d) determining enues
1	Art - Works of art					
	Art - Historical treasures					
	Art - Fractional interests					
	Books and publications	X	(2.44(2) 13.45(2)		FMV	
	Clothing and household goods	X		32,634.	FMV	
	Cars and other vehicles					
7	Boats and planes					
8	Intellectual property					
9	Securities - Publicly traded					
10	Securities - Closely held stock					
11	Securities - Partnership, LLC, or					
	trust interests					
12	Securities - Miscellaneous					
13	Qualified conservation contribution -					
	Historic structures					
14	Qualified conservation contribution - Other					
15	Real estate - Residential					
16	Real estate - Commercial					
17	Real estate - Other					
18	Collectibles	X	4		FMV	
19	Food inventory	X	1	7,296.	FMV	
20	Drugs and medical supplies					
21	Taxidermy					
22	Historical artifacts					
23	Scientific specimens					
24	Archeological artifacts					
25	Other ▶ (LEGAL)	X		4,331,544.		ON VIII, 1G
26	Other (PUB SERV ANNO)	X		4,286,640.	FMV	
27	Other (CONSULTANTS)	X		577,690.		ON VIII, 1G
28	Other (ADVERTISING)	X	3 (222,764.	FMV	
29	Number of Forms 8283 received by the organ	ization duri	ng the tax year for	contributions		
	for which the organization completed Form 8					
	,			-		Yes No
30a	During the year, did the organization receive	by contribut	ion any property re	eported in Part I, lines 1-28 t	hat it must hold for	Mary Carl Service
	at least three years from the date of the initial	contributio	n, and which is no	t required to be used for exe	empt purposes for	
	the entire holding period?					30a X
b	If "Yes," describe the arrangement in Part II.					
31	Does the organization have a gift acceptance	policy that	requires the reviev	v of any non-standard contri	butions?	31 X
	Does the organization hire or use third parties					
						32a X
h	If "Yes," describe in Part II.	•••••				
33	If the organization did not report revenues in	column (c) f	or a type of prope	rty for which column (a) is ch	necked,	
50	describe in Part II.					
LHA		n Act Notic	e, see the Instru	ctions for Form 990.	Schedu	le M (Form 990) 2009

chedule M (Form 990) 2009 HE HOMANE SOCIETI OF THE ONLINE	53-0225390	Page 2.
Part II Supplemental Information. Complete this part to provide the information required by Part I, lines Also complete this part for any additional information.	30b, 32b, and 33.	
PART I, OTHER TYPES OF PROPERTY:		
ANIMAL CARE SUPPLIER		
(B) NUMBER OF CONTRIBUTORS = 2		
(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 44662.		
(D) METHOD OF DETERMINING REVENUE: FMV		
DINNER/OTHER		
(A) CHECK IF APPLICABLE = X		
(B) NUMBER OF CONTRIBUTORS = 91		
(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 34255.		
(D) METHOD OF DETERMINING REVENUE: FMV		
FACILITY/SUPPLIER		
(A) CHECK IF APPLICABLE = X		
(B) NUMBER OF CONTRIBUTORS = 9		
(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 20888.		
(D) METHOD OF DETERMINING REVENUE: FMV		
TRAILER		
(A) CHECK IF APPLICABLE = X		
(B) NUMBER OF CONTRIBUTORS = 1		
(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 7597.		
(D) METHOD OF DETERMINING REVENUE: FMV		
PRINTING AND COMMUNICATIONS		
(A) CHECK IF APPLICABLE = X		
(B) NUMBER OF CONTRIBUTORS = 1		000) 000

Schedule M (Form 990) 2009 THE HUMANE SOCIETY OF THE UNITED STATES 53-0225390 Page 2
Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.
(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 5140.
(D) METHOD OF DETERMINING REVENUE: FMV
SCHEDULE M, LINE 33: THE HSUS HAS OPTED TO INCLUDE ALL NON CASH
MATERIALS AND SERVICES RECEIVED DURING 2009 ON THIS SCHEDULE M. SOME
OF THE ITEMS REPORTED HERE ARE NOT INCLUDED IN PART VIII, LINE 1G.
PART VIII, LINE 1G DOES NOT INCLUDE DONATIONS OF SERVICES OR THE USE OF
MATERIALS, EQUIPMENT OR FACILITIES.

iCHEDULE O

Form 990)

epartment of the Treasury ternal Revenue Service

Supplemental Information to Form 990

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

OMB No. 1545-0047 Open to Public Inspection

lame of the organization

THE HUMANE SOCIETY OF THE UNITED STATES

Employer identification number 53-0225390

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: CRUELTY, WITH ACTIVE PROGRAMS FOCUSING ON COMPANION ANIMALS, WILD ANIMALS AND HABITAT, CAPTIVE ANIMAL ISSUES, FARM ANIMAL WELFARE, MARINE MAMMMALS, ANIMALS IN RESEARCH, EQUINE PROTECTION, EMERGENCY PREPAREDNESS AND CRISIS RESPONSE, HUMANE EDUCATION, AND PUBLIC POLICY. FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: THE HSUS'S STOP PUPPY MILLS CAMPAIGN RESCUED MORE THAN 3,000 ANIMALS FROM MASS DOG BREEDING FACILITIES, ENACTED 10 NEW LAWS TO HELP IMPROVE CONDITIONS IN PUPPY MILLS, AND WORKED WITH 461 PET STORES THAT PLEDGED NOT TO SELL PUPPIES. A CLASS ACTION LAWSUIT AGAINST A PUPPY MILL DEALER RESULTED IN THE BANKRUPTCY AND CLOSURE OF THE FACILITY, AND THE RESCUE ITS REMAINING 32 PUPPIES, WHO WERE ADOPTED TO NEW, LOVING HOMES. HSUS JOINED WITH HUNDREDS OF FORMER PETLAND CUSTOMERS TO FILE THE LARGEST EVER CLASS ACTION LAWSUIT CHALLENGING THE SALE OF PUPPY MILL DOGS TO UNSUSPECTING CONSUMERS IN MORE THAN 40 STATES. THE HSUS'S ANIMAL CRUELTY AND FIGHTING CAMPAIGN WORKS TO END STAGED COMBAT WITH ANIMALS ON MALICIOUS ACTS OF CRUELTY. IN 2009 THE HSUS LAUNCHED A NATIONAL ANIMAL FIGHTING TIP LINE; DISTRIBUTED ITS 50TH CASH REWARD TO FOR INFORMATION LEADING TO ARRESTS FOR VIOLATIONS OF STATE AND FEDERAL ANIMAL FIGHTING LAWS; EXPOSED MORE THAN 3,000 AT-RISK YOUTH TO OUR END DOGFIGHTING PROGRAM IN ATLANTA AND CHICAGO; USED NFL PLAYER AND FORMER DOGFIGHTER MICHAEL VICK TO TELL CHILDREN IN URBAN

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PARTNERED WITH AGENCIES TO RESCUE 5,700 FIGHTING DOGS, ROOSTERS AND
HENS; TRAINED 1,500 LAW ENFORCEMENT OFFICIALS, 300 PROSECUTORS AND 100

JUDGES IN ANIMAL CRUELTY AND FIGHTING CASES; AND ASSISTED LAW
ENFORCEMENT IN HUNDREDS OF ANIMAL FIGHTING CASES, INCLUDING THE LARGEST
DOGFIGHTING RAID IN U. S HISTORY.

THE HSUS'S STOP WILDLIFE ABUSE CAMPAIGN SEEKS TO END THE MOST EGREGIOUS

ABUSES OF WILDLIFE. IN 2009, THE HSUS SUPPLIED A LEGAL ANALYSIS THAT

LED THE U.S. INTERIOR DEPARTMENT TO BAN THE IMPORT OF SPORT-HUNTED

POLAR BEAR TROPHIES. HSUS ATTORNEYS WON A FEDERAL COURT ORDER STRIKING

DOWN A BUSH ADMINISTRATION RULE THAT ALLOWED TROPHY HUNTING OF

ENDANGERED SPECIES IN CANNED HUNT OPERATIONS. ADDITIONALLY, A COALITION

OF WOLF ADVOCATES LED BY THE HSUS REACHED A SETTLEMENT WITH THE U.S.

FISH AND WILDLIFE SERVICE TO RESTORE FEDERAL ENDANGERED SPECIES ACT

PROTECTIONS FOR WOLVES IN THE GREAT LAKES REGION, WHICH STOPPED THE

SPORT HUNTING OF WOLVES IN THE STATES OF MINNESOTA, MICHIGAN, AND

WISCONSIN. THE HSUS ALSO WORKED WITH STATE WILDLIFE AGENCIES TO OFFER

REWARDS FOR INFORMATION LEADING TO THE ARREST AND CONVICTION OF

THE HSUS'S FUR-FREE CAMPAIGN WORKS WITH RETAILERS AND DESIGNERS TO

ENCOURAGE THEM TO GO FUR FREE. CLOSE TO 150, INCLUDING OVERSTOCK.COM,

KENNETH COLE, CALVIN KLEIN, BCBG MAXAZRIA, TOMMY HILFIGER, FOOTLOCKER,

JCPENNEY, AND ED HARDY AND HAVE DONE SO. FASHION DESIGNER ANDREW MARC

AND RETAILER LORD & TAYLOR AGREED TO PHASE OUT ALL USE OF RACCOON DOG

FUR AND TO REFORM THEIR GARMENT LABELING PRACTICES SO CONSUMERS HAVE

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TH.	HUMANE SOCIETY OF THE UN	ITED STATES	53-0225390
	RMATION ABOUT WHAT THEY'RE		DISTRICT OF
	COURT ISSUED A RULING CLEA		
LAWSUIT ACCUSING S	EVERAL OF THE NATION'S LAR	GEST RETAILE	RS OF ENGAGING
IN FALSE ADVERTISI	NG AND MISLABELING OF FUR	GARMENTS. AD	DITIONALLY, 20
FASHION DESIGN SCH	OOLS FEATURED HSUS FUR-FRE	E PRESENTATIO	ons.
THE FAITH OUTREACH	PROGRAM SEEKS TO ENGAGE I	PEOPLE AND IN	STITUTIONS OF
FAITH, ON THE PREM	ISE THAT RELIGIOUS VALUES	CALL UPON US	ALL TO ACT IN
A KIND AND MERCIFU	L WAY TOWARDS ALL CREATURE	ES. THE PROGR	AM ASSISTED
MORE THAN 300 CHUF	CHES AND RELIGIOUS GROUPS	TO INCORPORA	TE ANIMAL
PROTECTION THEMES.			
THE HSUS CONDUCTS	UNDERCOVER INVESTIGATIONS	, PRODUCES VI	DEOS AND
CONDUCTS RESEARCH	THE VIDEOS FOR ITS WEBSI	TE - HUMANESC	CIETY.ORG -
WERE VIEWED MORE	HAN 4 MILLION TIMES. THE	HSUS INVESTIG	ATED ANIMAL
ABUSES AT A VEAL	LAUGHTER PLANT IN VERMONT	AND A CHIMPA	NZEE RESEARCH
LABORATORY IN LOU	SIANA. THE VERMONT INVEST	IGATION LED A	AUTHORITIES TO
CLOSE THE PLANT A	ID LAUNCH A CRIMINAL INVES	TIGATION. THE	HSUS ALSO
INVESTIGATED THE	AVAILABILITY OF HORRIFIC A	NIMAL "CRUSH"	VIDEOS AND
RELEASED A REPORT	BEFORE THE U.S. SUPREME C	OURT HEARD OF	RAL ARGUMENTS IN
A CASE CHALLENGIN	G A FEDERAL ANIMAL CRUELTY	DEPICTIONS I	JAW.
FORM 990, PART II	I, LINE 4B, PROGRAM SERVIC	E ACCOMPLISH	MENTS:
LETTERS TO THE ED	ITOR AND OPINION EDITORIAL	S, PLACED AD	VERTISEMENTS AND
איים שמים איים איים איים איים איים איים איים א	NFORMED THROUGH ITS WEBSIT	E. THESE EFF	ORTS GENERATED

MORE THAN 27,000 NEWS STORIES ABOUT THE HSUS AND ITS WORK,

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53-0225390 THE HUMANE SOCIETY OF THE UNITED STATES AVERAGE 764,515 UNIQUE VISITORS PER MONTH TO HUMANESOCIETY.ORG. 33,000 MEDIA OUTLETS WERE GIVEN PET ADOPTION ADVERTISING BY THE SHELTER PET PROJECT, LAUNCHED BY THE HSUS, MADDIE'S FUND, AND THE AD COUNCIL. THE HSUS HOSTS TRAINING PROGRAMS FOR ANIMAL WELFARE PROFESSIONALS, INCLUDING THE WORLD'S LARGEST CONFERENCE IN THE FIELD. IN 2009 THE HSUS REACHED 2,248 SHELTER PROFESSIONALS, VOLUNTEERS AND RESCUE GROUPS. HSUS ALSO HOSTS CONFERENCES AND EVENTS FOR ANIMAL ADVOCATES. MORE THAN 4,700 PEOPLE PARTICIPATED IN THE ADVOCACY TRAINING PROGRAMS. THE HSUS HOLLYWOOD OFFICE PRODUCES THE ANNUAL GENESIS AWARDS, WHICH HONORS ARTISTS, WRITERS, AND OTHERS IN ENTERTAINMENT AND THE MEDIA WHO HAVE RAISED AWARENESS OF ANIMAL PROTECTION ISSUES. THE HSUS'S ANIMAL CONTENT IN ENTERTAINMENT PROGRAM ENCOURAGES THE INCLUSION OF ANIMAL ISSUES IN NON-FICTION AND NARRATIVE ENTERTAINMENT MEDIA. THE HSUS WORKS WITH CELEBRITIES TO REACH THE PUBLIC ON ISSUES IMPACTING ANIMALS. THE PUBLICATIONS DEPARTMENT CREATES PRINT AND ELECTRONIC MAGAZINES BROCHURES, ADVERTISEMENTS, REPORTS AND OTHER DOCUMENTS. MORE THAN 450,000 PEOPLE RECEIVE THE HSUS'S BI-MONTHLY ALL ANIMALS MAGAZINE. 12,300 SHELTERS, RESCUE GROUPS AND ANIMAL SERVICE AGENCIES SUBSCRIBE TO ANIMAL SHELTERING MAGAZINE AND ITS COMPANION E-NEWSLETTER. FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

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iternal Revenue Service Employer identification number Jame of the organization 53-0225390 THE HUMANE SOCIETY OF THE UNITED STATES FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: ANIMAL CARE FACILITIES IN 2009, HUMANE SOCIETY VETERINARY MEDICAL ASSOCIATION TREATED 8,057 ANIMALS IN UNDERSERVED COMMUNITIES IN THE U.S., MEXICO AND SOUTH AMERICA. THE HSUS'S DUCHESS SANCTUARY IN OREGON IS A 1,120-ACRE OASIS FOR NEARLY 200 FORMERLY ABUSED, ABANDONED, NEGLECTED AND HOMELESS HORSES. INCLUDING GRANTS OF \$ 61060. REVENUE \$ 13. EXPENSES \$ 8136521. WILDLIFE PROGRAMS THE HSUS WILDLIFE PROGRAMS DEFEND ALL WILD ANIMALS, BOTH CAPTIVE AND FREE, FROM CRUELTY AND AVOIDABLE SUFFERING FROM THREATS TO THEIR SURVIVAL OR WELL-BEING. THE HSUS'S HUMANE WILDLIFE SERVICES PROGRAM SAVED 1,200 ANIMALS THROUGH WILDLIFE-CONFLICT SOLUTION SERVICES PROVIDED TO HOMEOWNERS, BUSINESSES, AND INDUSTRY IN THE WASHINGTON AREA. IN 2009 THE HSUS BROUGHT THE PRAIRIE DOG COALITION, WHICH WORKS TO STOP POISONING, SHOOTING AND BULLDOZING OF PRAIRIE DOG COLONIES, UNDER ITS AUSPICES. 14 STATES PASSED LAWS TO PROTECT WILDLIFE, INCLUDING INCREASED PENALTIES FOR POACHING. LITIGATION TO PROTECT ENDANGERED NORTH ATLANTIC RIGHT WHALES LED TO NEW REGULATIONS TO REDUCE THE RISK OF ENTANGLEMENT IN FISHING GEAR. WILDLIFE EXPERTS ADVISED 4,300 HOMEOWNERS WHO SOUGHT HELP TO RESOLVE PROBLEMS WITHOUT KILLING OR ORPHANING ANIMALS.

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REVENUE \$ 111105.

EXPENSES \$ 7640183.

INCLUDING GRANTS OF \$ 53540.

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DOMESTIC CRUELTY PREVENTION PROGRAMS
THE COMPANION ANIMALS SECTION CONDUCTS INITIATIVES AIMED AT REDUCING
EUTHANASIA OF HEALTHY AND TREATABLE ANIMALS, PROMOTES THE DEVELOPMENT
OF LOVING, REWARDING, AND LASTING COMPANION ANIMAL-HUMAN BONDS AND
WORKS WITH SHELTERS AND RESCUE GROUPS TO PREVENT ANIMAL SUFFERING WHEN
THAT BOND BREAKS. IN 2009 THE HSUS'S EFFORTS IN THE U.S. GULF COAST
RESULTED IN MORE THAN 23,000 LOW-COST SPAY/NEUTER SURGERIES. THE HSUS'S
SPAY DAY BROUGHT TOGETHER 400 PROGRAMS THAT SPAYED OR NEUTERED MORE
THAN 40,000 PETS AND RAISED NEARLY \$250,000 FOR SPAY/NEUTER PROGRAMS.
THE FERAL CAT PROGRAM STRIVES TO REDUCE CAT OVERPOPULATION AND INCREASE
QUALITY OF LIFE AND PROVIDED SANCTUARY FOR CATS IN MORTAL DANGER. THE
SECTION EVALUATED 19 ANIMAL CARE AND CONTROL AGENCIES AND GUIDED 3,451
CLIENTS IN NEW YORK CITY TO PREVENT PET RELINQUISHMENT. STATES PASSED
89 LAWS TO ADDRESS PET-PROTECTION ISSUES SUCH AS SPAY/NEUTER, ANIMAL
CRUELTY, PET TRUSTS, HUMANE EUTHANASIA, ANTIFREEZE POISONING AND
DISASTER PLANNING.
THE HSUS'S EQUINE PROTECTION PROGRAM AIMS TO EDUCATE PEOPLE ABOUT
RESPONSIBLE HORSE OWNERSHIP AND COMPANIONSHIP AND TO ADDRESS CRUEL
TREATMENT OF HORSES. THE HSUS PUBLISHED A LIST OF RESOURCES TO
ENCOURAGE HUMANE EUTHANASIA OF HORSES AS AN ALTERNATIVE TO SLAUGHTER,
ADVANCED LEGISLATION TO END SHIPMENTS OF AMERICAN HORSES TO PLANTS IN
MEXICO AND CANADA, AND HELD SEVEN EVENTS TO PROMOTE TRAINING OF RESCUED
HORSES. THE HSUS IS ALSO WORKING WITH THE BUREAU OF LAND MANAGEMENT TO HAS For Privacy Act and Paperwork Reduction Act Notice see the Instructions for Form 990. Schedule O (Form 990) 2009
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IMPLEMENT HUMANE TREATMENT OF WILD HORSES. THE HSUS'S ANIMAL RESEARCH ISSUES DEPARTMENT WORKS TO DECREASE AND EVENTUALLY ELIMINATE HARM TO ANIMALS USED IN RESEARCH AND TESTING WORK WITH SCIENTISTS AND PUBLIC OUTREACH. THROUGH POLICY EFFORTS, FARM ANIMAL PROGRAMS INCLUDE RESEARCH AND ANALYSIS OF TRENDS IN ANIMAL AGRICULTURE AND IDENTIFICATION OF THE LINKS BETWEEN INTENSIVE ANIMAL CONFINEMENT PRACTICES TO CLIMATE CHANGE AND PUBLIC HEALTH CONCERNS LIKE IN 2009, THE OBAMA ADMINISTRATION ANNOUNCED A NEW FEDERAL SWINE FLU. REGULATION BANNING THE SLAUGHTER OF ADULT DOWNED COWS IN RESPONSE TO THE HSUS'S INVESTIGATION OF A CALIFORNIA SLAUGHTER PLANT. THE HSUS AND THE U.S. DEPARTMENT OF JUSTICE JOINED TO PURSUE A \$150 MILLION FEDERAL FRAUD LAWSUIT AGAINST A CALIFORNIA SLAUGHTER PLANT THAT USED SICK AND INJURED DOWNED ANIMALS IN THE FEDERAL SCHOOL LUNCH PROGRAM. **REVENUE \$ 941819.** INCLUDING GRANTS OF \$ 853240. EXPENSES \$ 7944024. RESEARCH AND EDUCATION HUMANE SOCIETY: YOUTH EDUCATES YOUNG PEOPLE ABOUT KINDNESS AND RESPECT FOR ALL ANIMALS AND THEIR NATURAL HABITATS, ACTIVATES YOUTH IN EFFORTS TO PROTECT ANIMALS, AND PROVIDES TEACHING MATERIALS, PROFESSIONAL DEVELOPMENT, AND OTHER SUPPORT TO TEACHERS AND HUMANE EDUCATORS. 868,000 KINDERGARTEN TO 6TH GRADE STUDENTS RECEIVE AGE APPROPRIATE MESSAGES ABOUT ANIMALS AND KINDNESS IN THE MONTHLY PUBLICATION KIND NEWS. HUMANE SOCIETY PRESS PRODUCES BOOKS ON ANIMAL-RELATED POLICY AND Schedule O (Form 990) 2009 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

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CARE ISSUES, MOST RECENTLY ON DOGS IN THE WORKPLACE, HUMANE RESOLUTION IN THE HOME, COMMUNITY-BASED COALITIONS FOR HUMANE OF WILDLIFE PROBLEMS WORK, AND A GUIDE TO EQUINE CARE. **REVENUE \$ 135857.** INCLUDING GRANTS OF \$ 191734. EXPENSES \$ 5961888. INTERNATIONAL ASSISTANCE ALONG WITH ITS AFFILIATE HUMANE SOCIETY INTERNATIONAL (HSI), PROTECTS ANIMALS BEYOND THE U.S. BORDERS, BECAUSE AN EXPANDING NUMBER OF ANIMAL PROTECTION CONCERNS HAVE A STRONG INTERNATIONAL DIMENSION. IN THE 1960S, 1970S, AND 1980S, THE HSUS PURSUED ANIMAL PROTECTION GOALS IN OTHER COUNTRIES VIA TREATY ORGANIZATIONS AND IN COLLABORATION THE HSUS FORMALIZED ITS LONGSTANDING IN 1991, WITH OTHER NGOS. COMMITMENT TO THE GLOBALIZATION OF HUMANE WORK THROUGH THE CREATION OF THE HUSUS BOARD OF DIRECTORS APPROVED A FIRST STRATEGIC IN 2003 HSI. PLAN FOR HSI WITH THE GOAL OF EXPANDING ITS ALLOCATION OF SUPPORT TO INTERNATIONAL PROGRAMS. FOR NEARLY TWO DECADES HSI HAS SOUGHT TO INCREASE THE PRIORITY GIVEN TO ANIMAL PROTECTION AND THE SCOPE AND PROMULGATION OF ANIMAL-FRIENDLY POLICIES, WITHIN POLITICAL AND CORPORATE ENTITIES, INTERNATIONAL FINANCE INSTITUTIONS, NON-GOVERNMENTAL ORGANIZATIONS, TRADE TREATY BODIES, AND OTHER INSTITUTIONS, AND TO CARRY OUT AGREEEMENTS, DIRECT CARE, RESCUE, TRAINING, DISASTER RESPONSE, AND HANDS-ON WORK THROUGHT THE WORLD. IN 2009 THE HSUS'S PROTECT SEALS CAMPAIGN DOCUMENTED CANADA'S ANNUAL

SEAL SLAUGHTER AND PERSUADED MORE THAN 5,000 FOOD RELATED BUSINESSES LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

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AND 600,000 INDIVIDUALS TO PARTICIPATE IN A BOYCOTT OF CANADIAN SEAFOOD, AND CONVINCED THE EUROPEAN PARLIAMENT TO BAN THE SALE OF SEAL PRODUCTS, CLOSING THE INDUSTRY'S LARGEST REMAINING MARKET. TOGETHER THE HSUS ALSO WORKED TO PROHIBIT OR CURB THE INTERNATIONAL WITH HSI, TRADE IN ENDANGERED SPECIES, FROM PORBEAGLE SHARKS TO CENTRAL AMERICAN AT THE INTERNATIONAL WHALING COMMISSION, HSUS AND HSI TREE FROGS. STAFF MEMBERS WORKED TO PRESERVE THE GLOBAL MORATORIUM ON COMMERCIAL THE ARENA OF LABORATORY ANIMAL PROTECTION, HSUS AND HSI IN WHALING. STAFF MEMBERS ADVANCED MAJOR INTERNATIONAL INITIATIVES TO ELIMINATE WITH HSI, THE HSUS ALSO TRAINED ANIMAL USE IN TOXICITY TESTING. VETERINARIANS TO PERFORM SPAY/NEUTER SURGERIES AND TRAINED 343 PEOPLE HSI LAUNCHED A PROGRAM TO TO ENFORCE INTERNATIONAL WILDLIFE LAWS. STERILIZE AT LEAST 75% OF THE DOGS IN BHUTAN AND PROVIDED SUPPORT FOR DISASTER RESPONSE IN CHINA AND ELSEWHERE. REVENUE \$ 0. INCLUDING GRANTS OF \$ 3234104. EXPENSES \$ 12308668. THE HSUS WAS FOUNDED TO COMPLEMENT AND ENHANCE THE WORK OF LOCAL AND REGIONAL HUMANE ORGANIZATIONS, BY PROMOTING THE PROTECTION OF ANIMALS AT THE NATIONAL AND INTERNATIONAL LEVEL AND BY TACKLING ISSUES WHOSE SCOPE AND MAGNITUDE SURPASS WHAT LOCAL ORGANIZATIONS COULD ADDRESS ON THE FOUNDERS OF THE HSUS DID NOT SEEK TO REPLICATE THE WORK THEIR OWN. OF LOCAL ORGANIZATIONS BUT INSTEAD TO PROVIDE A NATIONAL VOICE IN THE FIGHT AGAINST CRUELTY AND THE CELEBRATION OF THE HUMAN-ANIMAL BOND, TO LABOR, AS ONE EARLY MISSION STATEMENT SUGGESTED, "IN EVERY FIELD OF LOCAL HUMANE SOCIETIES ARE BY TRADITION HUMANE WORK - EVERYWHERE." Schedule O (Form 990) 2009

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INDEPENDENT ENTITIES WITH THEIR OWN POLICIES, GOVERNANCE, AND

PRIORITIES, AND THE HSUS SEEKS TO SUPPORT THEM BY PROMOTING BEST

PRACTICES IN ANIMAL CARE AND CONTROL, BY OFFERING PUBLICATIONS,

TRAINING OPPORTUNITIES (SUCH AS OUR ANNUAL ANIMAL CARE EXPO, A

CONFERENCE FOR ANIMAL CARE AND CONTROL PROFESSIONALS, OR TRAINING AND

ACADEMIC COURSES), AND ADVICE AND ASSISTANCE FROM EXPERT STAFF; BY

ASSISTING THEM WITH HUMANE INVESTIGATIONS AND LAW ENFORCEMENT RAIDS; BY

CARRYING OUT LARGE-SCALE INITIATIVES IN SUPPORT OF ADOPTION AND

SPAY/NEUTER TO REDUCE THE HOMELESS ANIMAL POPULATION, AND BY PURSUING

POLICY OBJECTIVES AT BOTH THE STATE AND FEDERAL LEVEL THAT IMPROVE THE

PROSPECTS FOR THOSE SOCIETIES TO FLOURISH AND SUCCEED IN THEIR OWN

COMMUNITIES.

THIS FORM 990 IS TO REPORT ON THE ENTITY INCORPORATED AS THE HUMANE

SOCIETY OF THE UNITED STATES. THE HUMANE SOCIETY OF THE UNITED STATES

IS A SEPARATELY INCORPORATED 501(C)3 AFFILIATE OF THE CONSOLIDATED

GROUP OF THE HUMANE SOCIETY OF THE UNITED STATES AND AFFILIATES.

INTERESTED PERSONS MAY GO TO WWW.HUMANESOCIETY.ORG TO READ THE HUMANE

SOCIETY OF THE UNITED STATES ANNUAL REPORT FOR A CONSOLIDATED REPORT OF

THE HSUS AND AFFILIATES.

FORM 990, PART VI, SECTION A, LINE 1: THE HSUS'S BYLAWS PROVIDE FOR THE

ESTABLISHMENT OF AN EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS. THE

EXECUTIVE COMMITTEE HAS AND MAY EXERCISE ALL THE POWERS OF THE HSUS BOARD

WHEN THE BOARD IS NOT IN SESSION, EXCEPT THE POWER TO ELECT AND REMOVE

OFFICERS. THE BYLAWS REQUIRE THE EXECUTIVE COMMITTEE TO BE COMPOSED OF AT

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LEAST SEVEN (7) MEMBERS OF THE BOARD. DURING 2009, THE EXECUTIVE COMMITTEE HAD NINE VOTING MEMBERS, ALL OF WHOM WERE MEMBERS OF THE BOARD. THE SOCIETY'S GENERAL COUNSEL/CHIEF LEGAL OFFICER IS A NON-VOTING MEMBER, AND THE SOCIETY'S PRESIDENT/CEO MAY PARTICIPATE, BUT WITHOUT VOTE.

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

FORM 990, PART VI, SECTION A, LINE 7A: INDIVIDUALS WHO CONTRIBUTE \$25 OR MORE ANNUALLY ARE "VOTING MEMBERS" OF THE SOCIETY WHO ARE ENTITLED TO VOTE IN THE ANNUAL ELECTION OF MEMBERS OF THE BOARD OF DIRECTORS. A ROTATING ONE-THIRD OF THE TOTAL NUMBER OF DIRECTORS ARE ELECTED EACH YEAR.

FORM 990, PART VI, SECTION A, LINE 7B: ANY AMENDMENTS TO THE BYLAWS, AND ANY OTHER QUESTIONS THAT THE BOARD OF DIRECTORS DECIDES TO SUBMIT TO THE VOTING MEMBERSHIP, MUST BE SUBMITTED FOR APPROVAL TO THAT MEMBERSHIP BY REFERENDUM.

FORM 990, PART VI, SECTION B, LINE 11: AFTER THE HSUS'S INTERNAL

ACCOUNTING STAFF DRAFTS THE 990, THE DRAFT IS SUBMITTED TO THE HSUS'S

OUTSIDE INDEPENDENT TAX PREPARERS FOR THEIR REVIEW, REACTION, AND REVISION.

ADDITIONALLY, THE HSUS'S TREASURER/CFO, WHO IS AN OFFICER, AND THE BOARD'S

AUDIT COMMITTEE CONDUCT A FURTHER REVIEW OF AN ADVANCED OR FINAL DRAFT.

PRIOR TO FILING WITH THE IRS, THE FINALIZED FORM 990 IS DISTRIBUTED TO ALL

MEMBERS OF THE BOARD FOR THEIR REVIEW AND COMMENTS.

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

FORM 990, PART VI, SECTION B, LINE 15: A COMMITTEE OF THE BOARD OF DIRECTORS, THE OFFICER EVALUATION, COMPENSATION AND NOMINATING COMMITTEE ("OECNC"), ESTABLISHED IN 1997, IS CHARGED WITH ANNUALLY EVALUATING THE JOB PERFORMANCE OF THE PRINCIPAL SALARIED HSUS OFFICERS (PRESIDENT/CEO, THE EXECUTIVE VICE PRESIDENTS, THE TREASURER/CFO, THE CORPORATE SECRETARY, AND THE GENERAL COUNSEL/CLO - THE BOARD CHAIR, VICE CHAIR, AND BOARD TREASURER ARE UNPAID VOLUNTEER POSITIONS) AND ANY KEY EMPLOYEES, AND WITH MAKING

RECOMMENDATIONS TO THE BOARD OF DIRECTORS ABOUT EACH OFFICER'S

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Employer identification number lame of the organization THE HUMANE SOCIETY OF THE UNITED STATES 53-0225390 IN ACCORDANCE WITH THE COMPENSATION, WHICH THE FULL BOARD DETERMINES. THE ANNUAL OECNC 53.4958-6, "SAFE HARBOR" PROVISIONS OF TREAS. REG. PROCESSES INVOLVE ATTENTION TO AND AVOIDANCE OF CONFLICTS OF INTEREST, USE OF COMPARABILITY DATA GATHERED AND PRESENTED BY AN OUTSIDE COMPENSATION EXPERT, AND CONTEMPORANEOUS DOCUMENTATION OF THE MEETINGS, DELIBERATIONS, AND DECISIONS. THESE PROCESSES WERE MOST RECENTLY UNDERTAKEN IN 2010, AS WELL AS IN 2009. FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: AK, AL, AR, AZ, CA, CO, CT, FL, GA, HI, IL, KS, KY, LA, MA, MD, ME, MI, MS, MN, MO, NC, ND, NJ, NH NM, NY, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV FORM 990, PART VI, SECTION C, LINE 19: THE HSUS MAKES COPIES OF ITS CERTIFICATE OF INCORPORATION AND BYLAWS AVAILABLE TO MEMBERS THE FORMAL AUDITED FINANCIAL FREE-OF-CHARGE, BY MAIL, UPON REQUEST. STATEMENTS ARE FILED WITH STATE CHARITABLE SOLICITATION REGISTRATIONS, AND PROVIDED TO CALIFORNIA RESIDENTS, AND TO MAJOR DONORS AND THEIR (FINANCIAL INFORMATION IN OTHER REPRESENTATIVES, BY MAIL, UPON REQUEST. FORMATS - E.G., THE FORM 990 AND THE ANNUAL REPORT - IS AVAILABLE ON THE THE CONFLICT OF SOCIETY'S WEBSITE AND WILL ALSO BE MAILED, ON REQUEST.) INTEREST POLICY HAS NOT BEEN MADE AVAILABLE TO THE GENERAL PUBLIC. FORM 990, PART XI, LINE 2C THE PROCESS HAS BEEN CONSISTENT WITH PRIOR YEARS.

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THE HUMANE SOCIETY OF THE UNITED STATES

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FORM 990, SCHEDULE G PART I FUNDRAISING ACTIVITIES THE HSUS AND ITS AFFILIATED ENTITIES RELY ON A SUBSTANTIAL AND LONGSTANDING PROGRAM OF DIRECT MAIL FUNDRAISING TO SUPPORT THE FULL RANGE OF ACTIVITIES THEY UNDERTAKE ON BEHALF OF ANIMALS, WHETHER IT INVOLVES HANDS-ON CARE, POLICY WORK, SCIENTIFIC OR TECHNICAL ANALYSIS, HUMANE EDUCATION, LITIGATION, PUBLICATION, OR COMMUNICATION. DIRECT MAIL HAS PLAYED A FUNDAMENTAL ROLE IN THE DEVELOPMENT OF THE HSUS, IT REMAINS CRUCIAL TO OUR SUCCESS IN HELPING ANIMALS. AS AN EDUCATIONAL TOOL THAT DESCRIBES OUR NUMEROUS PROGRAMS AND CAMPAIGNS TO HELP ANIMALS, DIRECT MAIL FUNDRAISING HELPS TO CREATE GREATER AWARENESS OF OUR CAMPAIGNS AND OUR CONCERNS, AND HAS ALLOWED US TO BUILD A CONSTITUENCY OF SUPPORTERS UNMATCHED IN THE HUMANE FIELD, WITH TREMENDOUS SOCIAL, POLITICAL, AND PRACTICAL BENEFITS TO OUR WORK. TO COMPLEMENT DIRECT MAIL, THE HSUS RELIES ON LARGER INDIVIDUAL GIFTS SOLICITED BY REGIONAL FUNDRAISERS, PLANNED GIVING, FOUNDATION GRANTS, TELEPHONE SOLICITATION, WORKPLACE GIVING, BEQUESTS, AND, MOST RECENTLY THESE METHODS DIRECT RESPONSE TELEVISION ADVERTISEMENTS. TOGETHER, FORM THE BASIS OF A COMPREHENSIVE APPROACH TO SECURING THE FUNDS AND THE CONSTITUENCY NECESSARY TO MEET OUR URGENT AND LONG TERM ANIMAL WELFARE GOALS. FORM 990, SCHEDULE G PART II

FUNDRAISING EVENTS

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WHILE WE ARE REPORTING A NET LOSS ON SCHEDULE G OF \$7,200, IT SHOULD BE 10TED THAT CONTRIBUTIONS ARE BEING EXCLUDED FROM THIS TOTAL. WHEN THE CONTRIBUTIONS ARE ADDED BACK, THE EVENTS GENERATE SUBSTANTIAL PROCEEDS FOR THE ORGANIZATION. BASED ON PAST EXPERIENCE, SOME CONTRIBUTORS WILL BECOME LONG TERM DONORS. THESE LONG TERM FUNDS WOULD NOT HAVE BEEN RAISED WITHOUT THE EVENTS. THE EVENTS GENERATE MORE THAN PROCEEDS FOR THE ORGANIZATION. THEY HELP THE ORGANIZATION FULFILL ITS MISSION TO PROTECT ANIMALS AND THE ENVIRONMENT. FOR EXAMPLE, THE GENESIS AWARDS PROVIDE THE HSUS WITH A CHANCE TO RECOGNIZE PEOPLE IN THE MEDIA AND ENTERTAINMENT INDUSTRY WHO INCORPORATE ANIMAL PROTECTION THEMES IN THEIR REPORTING AND CREATIVE WORKS. DRAWING ATTENTION TO THEIR WORK ENCOURAGES OTHERS IN MEDIA AND ENTERTAINMENT TO FOLLOW IN THEIR FOOTSTEPS. THE ANIMAL CARE EXPO DRAWS HUNDREDS OF ATTENDEES FROM AROUND THE WORLD AND PROVIDES THEM WITH A CHANCE TO LEARN, REJUVENATE AND NETWORK. EXPO PROVIDES ATTENDEES WITH DOZENS OF EDUCATIONAL WORKSHOPS, 100+ EXHIBITORS AND ACCESS TO EMERGENCY MANAGERS AND RESPONDERS IN THE FIELD OF ANIMAL CARE. THE ADDITIONAL SKILLS DEVELOPED BY PARTICIPANTS AT OUR ANNUAL ANIMAL CARE EXPO WILL BENEFIT ANIMALS DURING THE CURRENT YEAR AND FOR YEARS TO COME.

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: JODI SMITH

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(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT WITH THE HSUS

(A) NAME OF PERSON: GRACE MARKARIAN

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT WITH THE HSUS

FORM 990, SCHEDULE M

DONATED SERVICE DISCLOSURE

FORM 990 INSTRUCTIONS DO NOT REQUIRE DONATED SERVICES TO BE REPORTED ON

FORM 990 AND SCHEDULE M. HOWEVER, IN ORDER TO INCREASE TRANSPARENCY

AND PROVIDE THE USERS OF THE FORM WITH COMPLETE INFORMATION ABOUT THE

ORGANIZATION'S ACTIVITIES, MANAGEMENT HAS CHOSEN TO LIST THE DONATED

SERVICES IN DETAIL ON SCHEDULE M OF THE HSUS'S FORM 990 ALONG WITH

NONCASH CONTRIBUTIONS. THE AMOUNTS REFLECT THE FAIR MARKET VALUE OF

IN-KIND SERVICES REPORTED. THESE AMOUNTS ARE NOT INCLUDED ON PART VIII

LINE 1G OF CORE FORM 990 IN ADDITION TO THE STATEMENT OF FUNCTIONAL

EXPENSES.

FORM 990, SCHEDULE O

THE HSUS'S AFFILIATE HUMANE SOCIETY INTERNATIONAL

- ANIMALS ARE IN JEOPARDY AND NEED OF SUPPORT ALL OVER THE WORLD, AND
VIRTUALLY EVERY DOMESTIC ANIMAL CRUELTY ISSUE HAS BROADER INTERNATIONAL
IMPLICATIONS OF MOUNTING IMPORTANCE. WITH ITS AFFILIATE HUMANE SOCIETY
INTERNATIONAL, THE HSUS PROTECTS ANIMALS BEYOND THE BORDERS OF THE
UNITED STATES. HSI SERVES A CRITICAL AND EXPANDING ROLE IN GLOBAL

EFFORTS TO REDUCE ANIMAL SUFFERING. THROUGH FIELD WORK, POLICY

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932211 02-03-10 Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

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THE HUMANE SOCIETY OF THE UNITED STATES

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FORMATION, HUMANE EDUCATION, DIRECT CARE AND SERVICES, AND DIRECT FUNDING OF IN-COUNTRY PARTNERS, HSI HELPS TO ADVANCE THE CAUSE OF ITS WORK ON STREET DOG ANIMALS IN DOZENS OF NATIONS WORLDWIDE. WELFARE, DISASTER RESPONSE, THE ILLEGAL WILDLIFE TRADE, THE PROTECTION OF MARINE MAMMALS, SHARK FINNING, FACTORY FARMING, ANTI-FUR, AND ANIMAL RESEARCH ISSUES HAS MADE HSI A LEADER IN INTERNATIONAL ANIMAL WELFARE. HSI CONDUCTS A SIGNIFICANT AMOUNT OF ITS WORK IN THE UNITED STATES WORKING WITH POLICY MAKERS IN THE U.S. CONGRESS AND THE U.S. GOVERNMENT TO PROMOTE THE GLOBAL PROTECTION OF ANIMALS. HSI CONDUCTS A VARIETY OF PROGRAMS AIMED AT STOPPING WILDLIFE AMONG THE CAMPAIGNS WAGED JOINTLY BY THE HSUS SUFFERING AND ABUSE. AND HSI, THE PROTECT SEALS CAMPAIGN DOCUMENTED CANADA'S ANNUAL SEAL SLAUGHTER AND PERSUADED MORE THAN 5,000 FOOD-RELATED BUSINESSES AND 600,000 INDIVIDUALS TO PARTICIPATE IN A BOYCOTT OF CANADIAN SEAFOOD, AND CONVINCED THE EUROPEAN PARLIAMENT TO BAN THE SALE OF SEAL PRODUCTS, HSI SPONSORS A MAJOR CLOSING THE INDUSTRY'S LARGEST REMAINING MARKET. CAMPAIGN AGAINST SHARK FINNING AND THE CONSUMPTION OF SHARK FIN SOUP, AND ONE TARGETING "MERCY RELEASE" PROGRAMS THAT ENCOURAGE THE CAPTURE AND SUBSEQUENT RELEASE OF WILD ANIMALS, AND CARRIES OUT SUBSTANTIAL WORK ON WILDLIFE TRADE (VIA CITES AND OTHER FORUMS), SEEKS TO END COMMERCIAL WHALING (VIA THE IWC), AND ATTEMPTS TO IMPROVE WILDLIFE PROTECTION MECHANISMS IN INTERNATIONAL TRADE NEGOTIATIONS. ADDITION, HSI IS ACTIVE IN CAMPAIGNING AGAINST FUR GARMENTS AND IN PROMOTING WILDLIFE CONTRACEPTION AS A HUMANE WAY TO MANAGE WILDLIFE

POPULATIONS (PARTICULARLY ELEPHANTS) WITHOUT THE STRESS OF CAPTURE AND

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TRANSLOCATION OR CULLING. IN 2009, HSI ALSO TRAINED 343 PEOPLE TO

ENFORCE INTERNATIONAL WILDLIFE LAWS. AT CITES 2010, THE HSI TEAM

WORKED SUCCESSFULLY TO HELP FEND OFF PROPOSALS BY ZAMBIA AND TANZANIA

TO REDUCE PROTECTIONS FOR AFRICAN ELEPHANTS AND TO OPEN UP THE IVORY

TRADE, A U.S. PROPOSAL TO ELIMINATE CITES PROTECTION FOR THE BOBCAT,

AND A PHILIPPINES PROPOSAL TO OPEN UP THE INTERNATIONAL TRADE IN

CAPTIVE-BORN BIRDS OF FIFTEEN THREATENED AND ENDANGERED BIRD SPECIES.

HSI ACTIVELY SUPPORTS THE GROWTH AND DEVELOPMENT OF ANIMAL PROTECTION ORGANIZATIONS THROUGH A VARIETY OF EDUCATIONAL AND HANDS-ON PROGRAMS. EVERY YEAR, HSI ORGANIZES A TRACK AT THE HSUS ANIMAL CARE EXPO AIMED SPECIFICALLY AT ATTENDEES FROM INTERNATIONAL ANIMAL ORGANIZATIONS. HSI ALSO ORGANIZES AND SUPPORTS WORKSHOPS ACROSS THE WORLD TO ENHANCE THE CAPACITY AND SKILLS OF THE INTERNATIONAL ANIMAL MOVEMENT. AS PART OF THIS APPROACH, HSI HAS BEEN DEVELOPING PROGRAMS AND TECHNOLOGIES THAT THESE PROJECTS TRAIN PERMIT HIGH VOLUME STERILIZATION OF STREET DOGS. VETERINARIANS, VETERINARY TECHNICIANS AND ANIMAL HANDLERS, CHANGE THE WAY COMMUNITIES VIEW STREET ANIMALS, AND INDIRECTLY AND DIRECTLY ENHANCE THE CAPACITY OF LOCAL ORGANIZATIONS WHILE ALSO IMPROVING THE THE NATION OF BHUTAN COMMITTED IN 2009, WELLBEING OF STREET ANIMALS. A HALF MILLION DOLLARS TO AN HSI-LED PROGRAM TO SPAY/NEUTER AND VACCINATE CLOSE TO 50,000 DOGS ACROSS THE COUNTRY OVER THE NEXT 3-5 YEARS.

- IN ADDITION, HSI ALSO RESPONDS TO CASES OF COMPANION ANIMAL SUFFERING

(E.G. RESCUING DOGS FROM PUPPY MILLS IN CANADA) AND TO MAJOR DISASTERS

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THAT AFFECT ANIMALS BY SENDING SKILLED RESPONDERS AND FUNDING SUPPORT
TO AID WHEN DISASTERS OCCUR. IN 2009, HSI RESPONDED TO THE HAITIAN
EARTHQUAKE DISASTER BY SENDING RELIEF PERSONNEL TO PROVIDE DIRECT CARE
AND BY SETTING UP A LONG TERM INITIATIVE TO IMPROVE ANIMAL WELFARE
INFRASTRUCTURE IN HAITI.
- HSI HAS ACTIVE CAMPAIGNS AGAINST CONFINEMENT AGRICULTURE IN INDIA,
BRAZIL AND CANADA. IN ADDITION, HSI IS ENGAGING THE EU, THE FAO AND
THE OIE ON FARM ANIMAL WELFARE AND COOPERATING WITH INTERNATIONAL
ANIMAL NGOS TO PRESS FOR HUSBANDRY IMPROVEMENTS TO REDUCE ANIMAL
SUFFERING ACROSS THE GLOBE. IN CHINA, HSI HAS COOPERATED WITH OTHER
ANIMAL NGOS TO HOLD A SERIES OF WORKSHOPS AIMED AT RAISING CONCERNS
AMONG CHINESE REGULATORS AND FARM INDUSTRY EXECUTIVES ABOUT THE PLIGHT
OF FARM ANIMALS.
- IN 2009, HSI'S WORK ON ANIMAL TESTING IN THE EUROPEAN UNION RESULTED
IN A LEGAL CLARIFICATION THAT SPARED AS MANY AS FOUR MILLION ANIMAL
LIVES, THE ADOPTION OF A BATTERY OF CELLULAR METHODS TO FULLY REPLACE
ANIMAL TESTING FOR SKIN IRRITATION, AND A SUCCESSFUL BID TO COORDINATE
EUROPEAN-FUNDED PROJECTS TO REPLACE, REDUCE, OR REFINE ANIMAL TESTING
OVER THE NEXT FOUR YEARS.
FORM 990, SCHEDULE O
MISSION OF THE AFFILIATES
THE HUMANE SOCIETY OF THE UNITED STATES AND AFFILIATES (COLLECTIVELY,
THE SOCIETY) WHOSE PRIMARY PURPOSE IS THE WORLDWIDE ADVANCEMENT OF

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Name of the organization 53-0225390 THE HUMANE SOCIETY OF THE UNITED STATES HUMANE TREATMENT OF ANIMALS THROUGH PUBLIC EDUCATION AND AWARENESS PROGRAMS. THE CONSOLIDATED FINANCIAL DATA, IS PRESENTED IN THE ANNUAL REPORT, INCLUDES THE OPERATIONS OF THE HSUS AND THE FOLLOWING ENTITIES WHOSE MISSION IS SHOWN BELOW: THE HUMANE SOCIETY WILDLIFE LAND TRUST EIN # 52-1808517 (WLT), FOUNDED IN 1993, PROTECTS NATURAL HABITAT IN PERPETUITY AND WORKS TO ENSURE TRAPPED, OR THAT ANIMALS LIVING ON PROTECTED LANDS ARE NOT HUNTED, FISHED, WORKING ON ITS OWN OR IN COLLABORATION WITH OTHER THE LAND TRUST HAS CREATED MORE THAN 100 PERMANENT ORGANIZATIONS. WILDLIFE SANCTUARIES AND BEEN INVOLVED IN THE PROTECTION AND CONSERVATION OF MORE THAN TWO MILLION ACRES OF HABITAT IN NEARLY 40 SANCTUARIES WHERE RECREATIONAL AND STATES AND SEVEN COUNTRIES, COMMERCIAL HUNTING-AND A VARIETY OF PRACTICES THREATENING TO ANIMALS TRUST STAFF MEMBERS WORK AND THEIR HABITAT-WILL ALWAYS BE PROHIBITED. WITH LAND OWNERS COMMITTED TO PROVIDING PERMANENT PROTECTION FOR THEIR PROPERTIES AND THE WILDLIFE WHO CALL IT HOME. SOMETIMES THAT INVOLVES TRANSFERRING THE LAND TO THE TRUST FOR PROTECTION. OTHER TIMES, INVOLVES PERMANENT CONSERVATION AGREEMENTS, OR CONSERVATION EASEMENTS, WHICH ESTABLISH RESTRICTIONS ON HOW THE LAND CAN BE USED TO ENSURE IT WILL ALWAYS BE A SAFE HOME FOR WILDLIFE THE FUND FOR ANIMALS. EIN #13-6218740 (FFA), SINCE 2005, IS THE ENTITY RESPONSIBLE FOR MOST HSUS ANIMAL CARE FACILITIES INCLUDING, FOR 2009,

THE CLEVELAND AMORY BLACK BEAUTY RANCH (TX), THE CAPE WILDLIFE CENTER THE CLEVELAND

AND THE FUND FOR ANIMALS WILDLIFE CENTER (CA).

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AMORY BLACK BEAUTY RANCH IS A 1300 ACRE REFUGE FOR APPROXIMATELY 1300 ANIMALS, REPRESENTING 51 SPECIES, DOMESTIC AND EXOTIC; IN 2009, RANCH BECAME THE HOME OF THE DORIS DAY HORSE RESCUE AND ADOPTION THE CAPE WILDLIFE CENTER IS A FIVE ACRE FACILITY THAT WORKS CENTER. REHABILITATE NATIVE AND TRANSITORY WILDLIFE, AND THROUGH ITS VARIOUS PROGRAMS HANDLED OVER 1700 ANIMALS DURING 2009. THE FUND FOR ANIMALS WILDLIFE CENTER, A 15 ACRE FACILITY PRIMARILY FOCUSED ON REHABILITATION, RESCUED APPROXIMATELY 400 ANIMALS IN 2009. THE CENTER ALSO HOUSES NEARLY 50 ANIMALS RESCUED FROM CRUELTY CASES AND THE EXOTIC PET TRADE, AND A NUMBER OF NON-RELEASABLE EXOTICS AND WILDLIFE. DORIS DAY ANIMAL LEAGUE EIN# 95-4117651 (DDAL) THE DORIS DAY ANIMAL LEAGUE, FOUNDED IN 1987 BY THE LEGENDARY ACTRESS AND ANIMAL ADVOCATE, DDAL SUPPORTS EFFORTS TO PASS NEW IS A NONPROFIT 501(C)(4) ENTITY. LAWS AND ENFORCE EXISTING LAWS THAT REDUCE THE SUFFERING OF ANIMALS IN 2009, DDAL FUNDED WORK ON REGULATING ANYWHERE THEY ARE MISTREATED. PUPPY MILLS, REFORMING ANIMAL TOXICITY TESTING, REQUIRING THE INCLUSION OF A BITTERING AGENT IN ANTIFREEZE TO PROTECT PETS, AND CREATING PET TRUSTS. HUMANE SOCIETY INTERNATIONAL EIN# 52-1769464 (HSI) HSI COORDINATES THE WORK OF THE HSUS AROUND THE GLOBE AND ADDRESSES ISSUES SUCH AS PROMOTING THE HUMANE MANAGEMENT OF STREET ANIMALS, SEEKING AN END TO ANIMAL TESTING FOR HUMAN HAZARD AND RISK ASSESSMENT, CAMPAIGNS AGAINST FARM ANIMAL SUFFERING, CAMPAIGNS AGAINST WILDLIFE ABUSE AND SUFFERING, CONFRONTING A WIDE RANGE OF ANIMAL CRUELTY, ESPECIALLY CRUELTY THAT IS

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THE HUMANE SOCIETY OF THE UNITED STATES

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THE HUMANE SOCIETY OF THE UNITED STATES 35 CERTIFICATION
ANIMAL PROTECTION STUDIES, AND HAS ATTRACTED RECOGNIZED SCHOLARS IN
ALMOST EVERY DISCIPLINE, INCLUDING ACADEMIC THOUGHT LEADERS FROM THE
HSUS. HSU OFFERS A VARIETY OF ONSITE/ONLINE UNDERGRADUATE DEGREES,
GRADUATE CERTIFICATES, AND PROFESSIONAL DEVELOPMENT PROGRAMS IN ANIMAL
STUDIES. AS OF DECEMBER 2009, HSU HAD ACCEPTED 101 INDIVIDUALS INTO ITS
PROGRAMS, AND WAS CONSIDERING ANOTHER 131 PROSPECTIVE CANDIDATES FOR
ADMISSION. HSU HAD DEVELOPED NEARLY 60 COURSES.
ADMISSION: 1150 11AD DEVELOTED INSERT
TORK COO DARW UT LINE 10D
FORM 990, PART VI, LINE 10B
THE HSUS ENSURES THAT ITS CONTROLLED AFFILIATED ORGANIZATIONS'
ACTIVITIES ARE CONSISTENT WITH ITS OWN PRIMARILY THROUGH THE USE OF
OVERLAPPING PERSONNEL ON BOARDS AND EXECUTIVE STAFF. (THE HSUS DOES
NOT HAVE LOCAL CHAPTERS, BRANCHES, OR UNITS.) ACTIVE CONTROLLED
AFFILIATES HAVE A PROVISION IN THEIR BYLAWS REQUIRING THAT THEIR BOARD
MEMBERS BE APPROVED BY THE HSUS'S BOARD OF DIRECTORS.
MEMBERS DE ATTROVED DE 1112 11202 5
FORM 990, PART VI, LINE 16B
THE HSUS RARELY ENGAGES IN THE TRANSACTIONS DESCRIBED AND DOES NOT HAVE
A WRITTEN POLICY ON THIS SUBJECT PER SE, BUT THE LEGAL AND ACCOUNTANCY
STAFFS ARE WELL-VERSED IN AND ALERT TO ISSUES SURROUNDING TAX-EXEMPT
ORGANIZATIONS' VENTURING WITH FOR-PROFIT ORGANIZATIONS AND UNDERTAKE
THE APPROPRIATE ANALYSES AND PROTECTIVE MEASURES.

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Name of the organization

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

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➤ See separate instructions. ► Attach to Form 990.

STATES

SOCIETY OF THE UNITED

THE HUMANE

Employer identification number 53-0225390

Direct controlling Direct controlling entity entity 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.) N/A N/A N/A End-of-year assets status (if section Public charity 501(c)(3)) **@** Exempt Code Total income section 501(C)(3) 501(C)(3) 501(C)(3) ত্ত DISTRICT OF COLUMBIA Legal domicile (state or Part 1 Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Legal domicile (state or foreign country) foreign country) VEW YORK CANADA Primary activity Primary activity 9 ANIMAL WELFARE ANIMAL WELFARE ANIMAL WELFARE - 52-1769464 - 95-4117651 HUMANE SOCIETY INTERNATIONAL CANADA 1250 RENE-LEVESQUE BLVD, STE 2500 THE FUND FOR ANIMALS - 13-6218740 Name, address, and EIN Name, address, and EIN of related organization of disregarded entity HUMANE SOCIETY INTERNATIONAL DORIS DAY ANIMAL LEAGUE 20037 WEST MONTREAL, CANADA WEW YORK, NY 10019 WASHINGTON, DC 200 W. 57TH ST 2100 L ST. NW 2100 L ST. NW Part

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

20037

WASHINGTON, DC

932161 02-04-10

Schedule R (Form 990) 2009

N/A

501(C)(4)

ALIFORNIA

ANIMAL WELFARE

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Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) Schedule R (Form 990) 2009

		-	(6)	9	(0	E	=	3
(a) Name, address, and EIN	(b) Primary activity	(c) (state or (s	Predomi (related	Shar	end St	Disp ate a	Code V-UBI amount in box	General or managing partner?
טן ופומרכט טוקא ווצמנוטי		foreign country)	sections 512-514)	i c	assett	Yes		Yes No
								-
	-1-1		,,					
Part IV Identification of Related Or	Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated or a comparion of first during the tax year.)	rporation or Trust (Complete	I if the organization ans	wered "Yes" to F	orm 990, Part IV,	line 34 because	it had one or more	related
	EIN on	(b) Primary activity	(c) Legal domicile (state or (state or foreign country)	(d) Direct controlling T (C	(d) Type of entity (C corp., S corp, or trust)	(f) Share of total income	(g) Share of Pend-of-year cassets	(h) Percentage ownership
932162 02-04-10			110				Schedule R (Form 990) 2003	990) 2003

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

The state of the s		Yes
Note. Complete line 1 if any entity is listed in Parts II, III, or IV or this scribdure.		
1 During the tax year, did the organization engage in any or the romaniage against the commence of the commenc		1a X
a Receipt of (I) interest (II) annulties (III) royattes of (IV) term months of this properties of the controlled entity.		1b X
b Gift, grant, or capital contribution to other organization(s)		X
c Gift, grant, or capital contribution from other organization(s)		_
I cans or loan quarantees to or for other organization(s)		DL DL
		1e X
e Loans or loan guarantees by other organization(s)		
		7ŧ
f Sale of assets to other organization(s)		
g Purchase of assets from other organization(s)		X X
Exchange of assets		†
Lycropy of facilities actinioment or other assets to other organization(s)		i.
Lease Of Jaciffles, equipment, of other assets to other organization (s)		
· · · · · · · · · · · · · · · · · · ·		1j X
		*
K Performance of services of membership of juridiansling solicitations of the commission of the commis		∓ X
Performance of services or membership or fundraising solicitations by ourier organization(s)		th X
		-tr
n Sharing of paid employees		等 通過 新
		×
o Reimbursement paid to other organization for expenses		┿
p Reimbursement paid by other organization for expenses		dl dl
		>
o Other transfer of cash or property to other organization(s)		;
		1r X
2 If the answer to any of the above is "Yes." see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	ansaction thresholds	
	<u> </u>	(2)
(a) Name of other organization(s)	Transaction type (a-r)	Amount involved
THE SOCIETY INTERNATIONAL.	0	500,000.
- 1		
(2) THE FUND FOR ANIMALS	0	4,373,432.
A THE FUND FOR ANIMALS	껖	11,499,000.
	0	2,464,101.
(4) DORIS DAY ANIMAL LEAGUE	,	1 -
(5) DORIS DAY ANIMAL LEAGUE	æ	3,195,000.
TO THE STATE OF THE PARTY OF TH	0	3,560,621.
WILLIAM TITUTIN	Sch	Schedule R (Form 990) 2009

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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.

that was not a related organization. See instructions regarding exclusion to contain the second of t	The second secon	[3]	5	(e)	ω)	(b)	Ξ	_
(a)	(a)		Are all partners	Chare		Code V-UBI		al or
Name, address, and EIN	Primary activity	Legal domicile	section 501(c)(3)		tionate allocations?	amount in box 20	managing partner?	ging ier?
of entity			Yes No			(Form 1065)	Yes	Š
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Part II Continuation of Identification of Related Tax-Exempt Organizations

	7-17	3	5	(a)	(£)
(a)	(a)	(c)	Evamot Code	Public charity	Direct controlling
Name, address, and EIN	Primary activity	Legal doffliche (state of	Section	status (if section	entity
of related organization		toreign country)	10000	501(c)(3))	
THE HUMANE SOCIETY WILDLIFE LAND TRUST -					
52-1808517, 2100 L ST. NW, WASHINGTON, DC					
20037	ANIMAL WELFARE	DISTRICT OF COLUMBIA	501(c)(3)	7	N/A
HUMANE SOCIETY UNIVERSITY - 27-0263498					
2100 L ST. NW					:
WASHINGTON, DC 20037	ANIMAL WELFARE	DISTRICT OF COLUMBIA	501(C)(3)	2	N/A
HUMANE SOCIETY OF HONG KONG LIMITED					
3C WING YEE COMMERCIAL BLDG, 5 WING KUT ST					
HONG KONG, CHINA	ANIMAL WELFARE	CHINA	501(C)(3)	7	N/A
HUMANE SOCIETY INTERNATIONAL UK					
2 KENTISH BUILDINGS 125 BOROUGH HIGH STREET					
LONDON, UNITED KINGDOM	ANIMAL WELFARE	UNITED KINGDOM	501(C)(3)	7	N/A
HUMANE SOCIETY INTERNATIONAL LATIN AMERICA					
250 MTS. OESTE DEL MALL SAN PEDRO OFICENTRO					
MEDA, COSTA RICA	ANIMAL WELFARE	COSTA RICA	501(C)(3)	7	N/A
FRIENDS OF HUMANE SOC. INT'L FOR THE					
PROTECTION & CONSERVATION OF ANIMALS, 1250			_		
RENE-LEVESQUE BLVD, STE 2500, WEST MONTREAL,	ANIMAL WELFARE	CANADA	501(C)(3)	7	N/A
NATIONAL ASSOCIATION FOR HUMANE AND					
ENVIRONMENTAL EDUCATION - 23-7327537, 2100					
L ST. NW, WASHINGTON, DC 20037	ANIMAL WELFARE	DISTRICT OF COLUMBIA	501(C)(3)	7	N/A
THE HUMANE SOCIETY VETERINARY MEDICAL					
ASSOCIATION INC - 22-2768664, 2100 L ST. NW,					
WASHINGTON, DC 20037	ANIMAL WELFARE	CALIFORNIA	501(c)(3)	7	N/A
CENTER FOR RESPECT OF LIFE & ENVIRONMENT -					
52-1520451, 2100 L ST. NW, WASHINGTON, DC	· ·				
20037	ANIMAL WELFARE	DISTRICT OF COLUMBIA	501(c)(3)	7	N/A
	,				
	-				
					Schedule R-1 (Form 990) 2009

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Schedule R-1 (Form 990) 2009 3,662,000. 490,729. (c) Amount involved (b) Transaction type (a-r) ద 0 Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2) Name of other organization (7) THE HUMANE SOCIETY WILDLIFE LAND TRUST (8) HUMANE SOCIETY UNIVERSITY (24) (21) (22) 8 (16) 8 (15) (8) 9 E E (12) (13) <u></u> 9 9

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

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No. 1545-1709

 If you ar 	e filing for an Automatic 3-Month Extension, complete only Part I and check this box e filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (Inplete Part II unless you have already been granted an automatic 3-month extension on a	on page 2 (of this form).	▶ ⊠ 3.			
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies nee	ded).					
Part I only				▶ □			
time to file	orporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form income tax returns.						
one of the	Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month au returns noted below (6 months for a corporation required to file Form 990-T). However the file form 990-T is a composite or consolidated Form 990-T. Instead, you must submit the fully completed and more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file	sver, you ca s 990-BL, 6 nd signed pa	6069, or 8870 age 2 (Part II)	, group of Form			
Type or	Name of Exempt Organization	Employer	identification r	number			
print	The Humane Society of the United States	53-	225390				
File by the due date for	Number, street, and room or suite no. If a P.O. box, see instructions.						
filing your	2100 L Street, NW						
return. See instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Washington, DC 20037						
Check tvi	pe of return to be filed (file a separate application for each return):						
X Form			Form 4720				
☐ Form	990-BL		Form 5227				
	990-EZ Form 990-T (trust other than above)		Form 6069				
=	990-PF		Form 8870				
Telepho If the o If this is	oks are in the care of ► G. Thomas Waite III The No. ► (202) 452-1100 FAX No. ► (301) 548-776 Toganization does not have an office or place of business in the United States, check this for a Group Return, enter the organization's four digit Group Exemption Number (GEN note group, check this box ► □ . If it is for part of the group, check this box the names and EINs of all members the extension will cover.	87 s box .		SIS			
1 I re until for t	quest an automatic 3-month (6 months for a corporation required to file For August 15, 2010, to file the exempt organization return for the organization he organization's return for: Calendar year 2009	n named ab	ove. The exte	of time			
	is tax year is for less than 12 months, check reason: Initial return Final return		in accountin	g period			
3a If the	is application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tany nonrefundable credits. See instructions.	ax, 3a	s \$				
b If th	is application is for Form 990-PF or 990-T, enter any refundable credits and estimated ments made. Include any prior year overpayment allowed as a credit.	tax 31	\$				
c Bal	ance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if require osit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Paym tem). See instructions.	ed, ent 3	\$ \$				
Caution.	If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8 ent instructions.	3453-EO an	d Form 8879-	EO			

om 00	69 (Day	4-2008)		_	Page 2
If yo	ou are f	illing for an Additional (Not Automatic) 3-Month Extension, complete complete Part II if you have already been granted an automatic 3-month extension, for an Automatic 3-Month Extension, complete only Part I (on pa	sion on a prev ge 1).	viously filed FC	
Part	П	Additional (Not Automatic) 3-Month Extension of Time. You mu	st file origin	al and one c	ору.
ype orint		Name of Exempt Organization The Humane Society of the United States		Employer ide	5390
ile by t	d	Number, street, and room or suite no. If a P.O. box, see instructions. 2100 L Street, NW	entern entern	For IRS use of	only
lue dat lling the eturn. S nstructi	e See	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Washington, DC 20037		with the second	
Check Fo	k type orm 99 orm 99	D-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 990-T (trust other than above)	orm 1041-A orm 4720 orm 5227		form 6069 form 8870
STOP	Do no	ot complete Part II if you were not already granted an automatic 3-month	n extension c	n a previous	ly filed Form 8868.
If the lifth for the list was 4 5	ie orga is is fo e who ith the I reque For ca	No. ► (202) 452-1100 FAX No. ► (301) solution does not have an office or place of business in the United States or a Group Return, enter the organization's four digit Group Exemption Note group, check this box ► □ . If it is for part of the group, check an additional 3-month extension of time until November 1 lendar year 2009, or other tax year beginning	s, check this umber (GEN) eck this box. 5, 2010, and endin Final return	box	and attach a
b	less a If this estima amou	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the ny nonrefundable credits. See instructions. application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundated tax payments made. Include any prior year overpayment allowed as a not paid previously with Form 8868.	ble credits as credit and a	nd any 8b	
С	Rajana	ce Due. Subtract line 8b from line 8a. Include your payment with this form, or, if ID coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).	required, depo See instruction	ns. 8c	\$
Under	nenaltie	Signature and Verification as of perjury, I declare that I have examined this form, including accompanying schedules and act, and complete, and that I am authorized to prepare this form.			ny knowledge and belief,

Title ►

CONSULTANT

Date > 9/3/2010