Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A F	or the	2017	calendar year, or tax year beginning	JANUARY 1	, 2017	, and en	ding DE	ECEMBER 3	1	, 20	17	
_			C Name of organization					D Employer idea	ntificat	tion numb	er	
Bc	heck if a	pplicable:	ANIMAL EQUALITY					<u> </u>				
Γ	Addre		Doing business as					47-2	2420)444_		
	7 '	change	Number and street (or P.O. box if mail is r	not delivered to street addre	ss)	Room/su	ıite	E Telephone nui	mber			
	Initial	return	8581 SANTA MONICA BLVD. STE	#350				(424	1) 2	250-6	236	
	Final	return/	City or town, state or province, country, a		le			,				
X	termir Amen	ded	LOS ANGELES, CA 900					G Gross receipts	. \$	2 6	67 67	24.00
<u> </u>	Applic	cation	F Name and address of principal officer:		·			H(a) Is this a grou	p return		Yes	X No
_	pendi	ng	· ·					subordinates H(b) Are all subord		********	Yes	No
	T		SAME AS C ABOVE	\	4047(-)(4)		527			st. (see insti		
		empt st	1 1 1) ◀ (insert no.)	4947(a)(1)	or I	521	-			40110110)	
			ANIMALEQUALITY.ORG	A i - i - i - i - i - i - i - i		lı v		H(c) Group exemple ation: 2014 M			mioilo:	<u></u>
				Association Other		LY	ear or forms	ation: 2014 IVI	State	of legal do	micile.	CA
	art I		ımmary		0.00	AUDDI						
	1	Briefly	y describe the organization's mission or	most significant activitie	es: SEE S	CHED	JLE O					
Governance	1											
Tai												
Š	2		k this box 🕨 🔛 if the organization di						1 1			_
	3		er of voting members of the governing						3			6
Activities &	4	Numb	er of independent voting members of the	he governing body (Parl	VI, line 1b) .				4			4
ij	5	Total	number of individuals employed in cale	ndar year 2017 (Part V,	line 2a)				5			21
ŧ	6	Total	number of volunteers (estimate if necess	sary)	. 				6			100
ĕ	7a	Total	unrelated business revenue from Part VI	II, column (C), line 12					7a			
	b	Net u	nrelated business taxable income from f	Form 990-T, line 34				<u> </u>	7b			
								Prior Year		Cur	rent Ye	ar:
•	8	Contri	ibutions and grants (Part VIII, line 1h)				🗀	1,897,710.	00	2,516	5,22	9.00
Revenue	9		am service revenue (Part VIII, line 2g)									
×e	10	_	tment income (Part VIII, column (A), line				í			- 4	. 54	1.00
ď	11		revenue (Part VIII, column (A), lines 5,					16,209.	0.0			9.00
	Į.		revenue - add lines 8 through 11 (must					1,913,919.				59.00
_	12							234,105.				2.00
	13		s and similar amounts paid (Part IX, colu					234,103.	- 0 0		701	2.00
	14		fits paid to or for members (Part IX, colu					363,675.	00	Ω12	99	3.00
ses	15		es, other compensation, employee bene					303,073.	-00	012	, , ,	2.00
ë	16a		ssional fundraising fees (Part IX, column	••		-						
Expenses	b		fundraising expenses (Part IX, column (I	· —				500 F01		1 100	1 1 1	1 00
	17		expenses (Part IX, column (A), lines 11	·				599,581.	-		•	
	18		expenses. Add lines 13-17 (must equal					1,197,361.	1			
	19	Rever	nue less expenses. Subtract line 18 from	n line 12				716,558.	$\overline{}$		_	<u>3.00</u>
S OI							<u>_</u>	inning of Current			of Yea	
alai	20	Total	assets (Part X, line 16)				• •	879,892.	_	1,311		
Net Assets or Fund Balances	21	Total	liabilities (Part X, line 26)					19,913.	_	7.8	,09	1.00
<u>\$₽</u>	22	Net a	ssets or fund balances. Subtract line 21	from line 20		· · · · ·		859,979.	00	1,2	33,22	21.00
	ırt II		gnature Block									
Un	der per	nalties o	of perjury, I declare that I have examined thi complete. Declaration of preparer (other than	is return, including accom	panying sched	lules and	statements,	and to the best of	f my k	nowledge	and be	lief, it is
	e, come	Ct, and	Complete. Declaration of preparer (other trial	TOTICET) IS DESCU OIT AT THE	Jilliadion or wit	non propa	ioi ilao aily i	l l				
Sig			Signature of officer					Date				
He	re									, ,		
			Type or print name and title									
	_	Print	/Type preparer's name	Preparer's signature		Date		Check	if P	TIN		
Paid		יידיגם	RICK S. GUZMAN, CPA					self-employ	ed	P00	35402	9
	parer	Firm's	s name GUZMAN & GRAY, CERTI	FIED PUBLIC ACCOU	INTANTS	•		Firm's EIN	33-			
Use	Only		s address > 4510 E. PCH, SUITE 2					Phone no.	(56:	-	8-0	997
Ma	v the	IRS d	liscuss this return with the preparer	shown above? (see	instructions)			·	$\overline{}$	es	No
	<u> </u>		Reduction Act Notice, see the separat			· · · · ·						(2017)

Form 990 (2017) ANIMAL EQUALITY Part IV Checklist of Required Schedules

4 Section 501(c)(5) organizations. Did the organization engage in lobbying activities, or have a section 501(n) election in effect during the tax year? If Yes, complete Schedule C, Part II. 5 Is the organization a section 501(o)(s), 501(c)(s), 601(c)(s), 601(c)(s				Yes	No
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(x)3 organizations. Did the organization engage in lobbying activities, or have a section 501(n) election in effect during the tax year? If "Yes," complete Schedule C, Part II. 5 Is the organization a section 501(x)(x) 501(x)(5), or 501(x)(5), or 501(x)(5), or 501(x)(5), or 501(x), organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-119? If "Yes," complete Schedule 0, Part III. 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right of the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III. 7 Did the organization report an amount for investment or provides account liability, serve as a custodian for amounts roll sidel of Part X, in provide organization, rheigh or through a related organization, heigh complete Schedule D, Part V. 10 Did the organization's accounts for through a related organization, rheigh accounts for through a related organization, rheigh or through related organization, rheigh or through related organization, rheigh accounts of the part X, line 15? If "Yes, complete Schedule D, Part VI. 10 Did the organization are port an amount fo	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	X	
for public office? If "Yes,' complete Schedule C, Part II. 4 Section 501(Kg) againstrations. Did the organization engage in lobbying activities, or have a section 501(ft) election in effect during the tax year? If "Yes,' complete Schedule C, Part II. 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procodure 88-19? If "Yes,' complete Schedule C, Part III. 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which 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. 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, instinct land areas, or historic structures? If "Yes,' complete Schedule D, Part III. 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, instinct land areas, or historic structures? If "Yes,' complete Schedule D, Part III. 8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide crodic conseiling, debt meanagement, credit regarior, or debt neglosition services? If "Yes, complete Schedule D, Part IV. 9 Did the organization report an amount for land, buildings, and equipment in Part X, line 19? If "Yes, complete Schedule D, Part IV. 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 19? If "Yes, complete Schedule D, Part VI. 11 If the organization slability for the following questions is "Yes," then complete Schedule D, Part XI. 12 Did the organization report an amount for other liabilities 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 XI. 12 Did the organization report an	2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
5 Is the organization a section 50 (c)(4), 501 (c)(5), or 501 (c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 89-197 If Yes, complete Schedule C, Part III. 6 Did the organization maintain any donor advessed funds or any similar funds or accounts for which alrows the right to provide advice on the distribution or investment of amounts in such funds or accounts? If Yes, complete Schedule D, Part II. 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land ariess, or historic structures? If Yes, complete Schedule D, Part II. 8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X or provide credit counseling, debt management, credit repair, or debt negotiation for amounts not listed in Part X or provide credit counseling, debt management, credit repair, or debt negotiation for amounts not listed in Part X or provide credit counseling, debt management, credit repair, or debt negotiation provinces? If Yes, complete Schedule D, Part V. 10 Did the organization report an amount for lond, buildings, and equipment in Part X, line 10? If Yes,' complete Schedule D, Part V. 11 If the organization report an amount for investments – other securities in Part X, line 10? If Yes,' complete Schedule D, Part VIII. 11 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 VIII. 11 Did the organization report an amount for the 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 VIII. 12 Did the organization report an amount for the assets in Part X, line 25? If Yes,' complete Schedule D, Part X. 13 Did the organization separate or consolidated financial statements fo	3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I.	3		Х
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to provide advice on the distribution or investment of amounts in such 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 III. Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III. Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit courseling, debt management, credit repair, or debt negolation provinces? If 'Yes,' complete Schedule D, Part IV. Did the organization and the Part X, or provide credit courseling, debt management, credit repair, or debt negolation provinces? If 'Yes,' complete Schedule D, Part V. It if the organization is answer to any of the following questions is 'Yes,' complete Schedule D, Part V. If If the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part V. Did the organization report an amount for investments – other securities in Part X, line 10? If 'Yes,' complete Schedule D, Part VII. 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 assets in Part X, line 15? If 'Yes,' complete Schedule D, Part XII. Did the organization report an amount for other insbitties in Part X, line 15? If 'Yes,' complete Schedule D, Part X. Did the organization report an amount for other insbitties in Part X, line 15? If 'Yes,' complete Schedule D, Part X. Did the organization report an amount for other insbitties in Part X, line 15? If 'Yes,' complete Schedule D, Part X. Did the organization report an amount for other insbitties in Part	5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
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for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If Y'es, complete Schedule D, Part V. 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If Yes, complete Schedule D, Part V. 11 If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Part V, VIII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VII. b Did the organization report an amount for investments – other securities in Part X, line 12? If 'Yes,' complete Schedule D, Part VIII. b Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII. c 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. c 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. 11 d Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X. 11 d Did the organization included in consolidated financial statements for the tax year include a foothoote that addresses the organization is part at x, possible sunder PIN 48 (ASC YAO)? If 'Yes,' complete Schedule D, Part X. 11 d Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII is optional. 12 a Did the organization maintain an office, employees, or agents outside of the United States? b Did the organization report and part IX, comple	8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х
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b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional. 12b		f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		Х
Is the organization asswered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional. Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E. Is the organization maintain an office, employees, or agents outside of the United States? Is Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV. Is Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV. Is Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV. In Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions). In Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, line 9a? If 'Yes ' omplete Schedule G, Part II. Is Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes '	12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a	Х	
14a Did the organization maintain an office, employees, or agents outside of the United States? 14a X b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV. 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV. 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions). 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II. 18 X 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes '		if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV. 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV. 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions). 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part II. 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' and the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' and the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' and the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' and the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' and the United States, or aggregate foreign investments valued at \$100,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' and the United States, or aggregate foreign investments valued at \$100,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' and the United States, or aggregate foreign investments valued at \$100,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' and the U			<u> </u>		X
business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV. 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV. 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV. 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions). 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II. 18 X			14a	X	
foreign organization? If 'Yes,' complete Schedule F, Parts II and IV. 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV. 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions). 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II. 18 X 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes.'		business, investment, and program service activities outside the United States, or aggregate foreign investments valued	14b	х	
or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV.	15	Х	
column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions).	17		Х
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18	х	
	19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		Х

Part IV

Part	V Checklist of Required Schedules (continued)			
			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	$\overline{}$		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			<u>-</u>
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	Ì		
	through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
		25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,		.	
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		<u>X</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	٠ ا		
	Part I	31		<u>X</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
~~	complete Schedule N, Part II	32	-	<u>X</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,		i	37
35 a	or IV, and Part V, line 1	34		$\frac{x}{x}$
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
J		35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	300		
J J	related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	50		Λ
~ .	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		Х
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	<u> </u>		
	19? Note. All Form 990 filers are required to complete Schedule O.	38	х	

Form 990 (2017) ANIMAL EQUALITY Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V......

			Yes	No
	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	X	
	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 21			
	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X
•	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	. In	A Set	
	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
	b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule Q.	3 b		ļ
	 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? b If 'Yes,' enter the name of the foreign country: ► 	4a		X
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			14.5
5	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a	5 015	Х
	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
		100		
	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		İ
7	Organizations that may receive deductible contributions under section 170(c).		4.54	
	a 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?	7 a		X
	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		Х
	d If 'Yes,' indicate the number of Forms 8282 filed during the year			â.
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e	Programme and	X
	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
1	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		揮動	447
9	Sponsoring organizations maintaining donor advised funds.			
-	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
	b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter:		A 500	4 (27 - 37)
	a Initiation fees and capital contributions included on Part VIII, line 12		1	
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		7	
	Section 501(c)(12) organizations. Enter:			
í	a Gross income from members or shareholders			
ı	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	THE RESERVE AND THE PERSON NAMED IN	on a 25- to 15
	of Yes,' enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
ä	a Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	a Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
ΔΔ	olf 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b		
	TCT 401051 00/0017		^^^	AA 1 7

Form 990 (2017) ANIMAL EOUALITY 47-2420444 Page 6 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. Check if Schedule O contains a response or note to any line in this Part VI. Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year..... 6 1 a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? SEE SCHEDULE O 2 X Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?.... Х 5 Did the organization become aware during the year of a significant diversion of the organization's assets?..... 5 Did the organization have members or stockholders?..... 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 7 a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?..... 8 a X **b** Each committee with authority to act on behalf of the governing body?..... X 8h Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O..... 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. **10a** Did the organization have local chapters, branches, or affiliates?..... 10 a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... 11 a X b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O 100 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... Х 12 a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?... 12b Х c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done ... SEE .SCHEDULE .Q Х 12c 13 Did the organization have a written whistleblower policy?..... X 13 14 Did the organization have a written document retention and destruction policy?..... X 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official.. SEE . SCHEDULE..O........ Х 15a **b** Other officers or key employees of the organization..... Х 15_b If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?.... 16a b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?... 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Another's website Other (explain in Schedule O) Upon request 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. SEE SCHEDULE O 20 State the name, address, and telephone number of the person who possesses the organization's books and records:

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47-2420444

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

Check if Schedule O contains a response or note to any line in this Part VII.

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

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

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

☐ Ch	Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.										
		(C)									
	(A) Name and Title	(B) Average hours per	is	both dir	an c	officer /truste		1	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other compensation
		per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
	SHARON NUNEZ GOUGH	_ 40 _									
	PRESIDENT	0	Х		X				64,762.	0.	4,780.
	JOSE_VALLE_BLANCO SECRETARY	_ <u>40</u> _	Х		Х				64,759.	0.	4,835.
	JAVIER MORENO	2									
	DIRECTOR	0	Х						0.	0.	0.
i	MATTEO CUPI DIRECTOR	2	х						0.	0.	0.
	JORGE DE DIEGO OLIVA DIRECTOR	2	х						0.	0.	0.
(6)	THOMAS HECQUET DIRECTOR	2	Х						0.	0.	0.
<u>(7)</u>			Α.						0.	0.	0.
(8)											
(9)											
(10)											
(11)											
(12)		_ _									
(13)											
(14)											

Part VII Section A. Officers, Directors, Tru	ıstees, (B)	Key	En	ıplo ()		es,	and	d Highest Con	pensated Em	ployees (continued)
(4)	``			•	•	than		(D)	(E)	(F)
(A) Name and title	Average hours per	box	, unle	ess pe	erson	than is bot or/trus	h an	Reportable compensation from	Reportable compensation from	Estimated amount of other
	week (list any hours	Q TO	ज्ञ	유	<u>\$</u>	em H	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the
	for related	or director	nstitutional trustee	Officer	Key employee	nest c	mer			organization and related organizations
	organiza - tions below	y trus	म् ।		loyee	ompe				
	dotted line)	ee	stee			Highest compensated employee				
(15)										
(16)										
(17)										
<u>(18)</u>										
(19)										
(20)		<u> </u>								
(21)										
(22)										
(23)		 								
(24)		<u> </u>								
(24)										
(25)										
1 b Sub-total.							•	129,521.	0	
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)							-	0. 129,521.	<u>0</u> 0	
Total number of individuals (including but not limited							ved			
from the organization 0										Yes No
3 Did the organization list any former officer, direc	tor, or tru	stee,	key	em/	plo	ee,	or h	nighest compensa	ted employee	
on line 1a? If 'Yes,' complete Schedule J for suc. 4 For any individual listed on line 1a, is the sum of										3 X
For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual.	er than \$1	50,00	00?	If 'Y	'es,	com	ıple:	te Schedule J for		4 X
5 Did any person listed on line 1a receive or accrument for services rendered to the organization? If 'Yes	e compen s,' comple	satio te Sc	n fr	om : lule	any <i>J fo</i>	unre r suc	late ch p	ed organization or erson	individual	5 X
Section B. Independent Contractors 1 Complete this table for your five highest compensation.	sated inde	epen	deni	100	ntrac	ctors	tha	t received more the	nan \$100.000 of	
compensation from the organization. Report compen	sation for	the c	alen	dar	year	endi	ng v	vith or within the or	ganization's tax yea	
Name and business addi	ess							Description (of services	(C) Compensation
2 Total number of independent contractors (including b	ut not limi	ited to	tho	se l	istec	l abo	ve)	who received more	than &	a non any ana ana
\$100,000 of compensation from the organization										种的激星的发展,

Pai	t V	III Statement of Rev					47 2420444	, age s
	n pol	Check if Schedule O		nonse or note to ar	ny line in this Part \	/III		
		Sheek in Schedule C	the state of the s	poise of flote to al	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
Contributions, Gifts, Grants and Other Similar Amounts	1 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions grants) f All other contributions, gifts, granilar amounts not included granilar amounts included to the total. Add lines 1a-1f	1 b 1 c 1 d 1 d 1 d 1 d 1 d 1 d 1 d 1 d 1 d 1 d	12,773. 2,503,456. 15,204.		revenue		512-514
Program Service Revenue	i	All other program services Total. Add lines 2a-2f	e revenue					
	ŧ	Investment income (include other similar amounts). Income from investmen Royalties	t of tax-exemp	t bond proceeds .				
	7 a	Rental income or (loss)	SS)	(ii) Other 4,541.				
Other Revenue	8 a	Net gain or (loss)	12,773. d on line 1c).	a 151,395. b 156,214.	-4,541.	-4,541.		
O	9 a	Gross income from gam See Part IV, line 19 Less: direct expenses Net income or (loss) fro	ing activities.	a b	-4,819.			110
	b	Gross sales of inventory and allowances Less: cost of goods sold the income or (loss) from Miscellaneous Revenue.	l m sales of inv	b		\$ 22 m		
	11 a b c	I All other revenue			7.2.420350000			
	е	Total. Add lines 11a-11c Total revenue. See instr	1		2,506,869.	-4,541.	0.	0.

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX..... **(D)** Fundraising (A) Total expenses (C) Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. Program service Management and expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21..... Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 226,842. 226,842 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 129,521 103,617 12,952 12,952. Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)..... 588,419 322,348 57,441 208,630. Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 36,793 25,131 2,521 9,141. 10 Payroll taxes..... 58,260. 35,614. 6,344 16,302. 11 Fees for services (non-employees): 9,374. 9,374 **c** Accounting..... 50,515. 50,515 **d** Lobbying..... 25,000. 25,000. e Professional fundraising services. See Part IV, line 17. . . f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.SCH. Q 257,994. 219,192 15,479 23,323. Advertising and promotion..... 113,645. 111,645 972 1,028. 4,682. 845. 3,428 409. 14 Information technology..... Royalties.... Occupancy..... 115,061. 98,437 6,415 10,209. 17 170,534. 100,550 12,959 57,025. Payments of travel or entertainment expenses for any federal, state, or local public officials..... Conferences, conventions, and meetings.... 16,635 5,354. 9,133. 2,148. Interest 21 Payments to affiliates..... 22 Depreciation, depletion, and amortization . . . 27,497 25,828 745 924. 12,902 7.956 3,205 741 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.). a MEALS 27,918 39,607 3,987 7,702. b COMPUTER AND EQUIPMENT 28,952 28,317 450 185. c EXTERNAL EVENTS 28,725 13,799 375 14,551. d PRINTING AND PUBLICATIONS 28,196 19,582 203 8,411. e All other expenses..... 171,122 115,257 8,725. 47,140. 25 Total functional expenses. Add lines 1 through 24e. . . . 2,140,276. 1,517,011 198,238. 425,027. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following

SOP 98-2 (ASC 958-720).....

2 Savings and temporary cash investments 2 3 Savings and temporary cash investments 3 Savings and grants receivable, net 3 3 Savings and grants receivable from current and former officers, directors, fuscless, key employees, and highest compensated employees. Complete Part I of Schedule 5 Savings and section 4958(0)(10), persons described in section 4958(0)(10), persons described i			Check if Schedule O contains a response or note to any line in this Part X			
2 Savings and temporary cash investments. 2 3 Savings and grains receivable, net. 3 3 Accounts receivable, net. 190. 4 244,857.				(A) Beginning of year		(B) End of year
3 Piedges and grants receivable, net		1			1	859,870.
190		2			2	
1		3	Pledges and grants receivable, net		3	
Substitution		4	Accounts receivable, net	190.	4	244,857.
Section 4986(f)(1)), persons described in section 4958(c)(3)(8), and contributing employees and sponsoring organizations of section 5016(c)(9) voluntary employees beneficiary organizations (see instructions). Complete Part II of Schedule L		5	trustees, key employees, and highest compensated employees. Complete		5	
10 Notes and loans receivable, net. 7 7 Notes and loans receivable, net. 8 Inventories for sale or use. 8 9,000. 8 9 Prepaid expenses and deferred charges. 11,067. 9 25,465. 10a Land, buildings, and equipment: cost or other basis. 10a 197,405. 11,067. 9 25,465. 10a Land, buildings, and equipment: cost or other basis. 10a 197,405. 11,067. 9 25,465. 10a Land, buildings, and equipment: cost or other basis. 10a 197,405. 11,067. 9 25,465. 10a Land, buildings, and equipment: cost or other basis. 10a 197,405. 11,067. 12,000. 12,000. 12,000. 12,000. 13,000. 13,000. 12,000. 13,000. 13,000. 12,000. 13,000		6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	Section 1	6	
10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D. 10b 33, 994 148, 172 10c 163, 411 11 11 11 12 11 12 11 12 11 13 11 12 11 13 13	ţ	7			7	
10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D. 10b 33, 994 148, 172 10c 163, 411 11 11 11 12 11 12 11 12 11 13 11 12 11 13 13	Se	8	Inventories for sale or use		8	9,000.
10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D. 10b 33, 994 148, 172 10c 163, 411 11 Investments – publicly traded securities. 11 Investments – other securities. See Part IV, line 11 12 Investments – other securities. See Part IV, line 11 13 Investments – program-related. See Part IV, line 11 13 14 Intangible assets. 3, 727 14 2, 982 15 Other assets. See Part IV, line 11 15 5, 727 16 70 70 70 70 70 70 70 7	ž	9	Prepaid expenses and deferred charges	11.067	9	
b Less: accumulated depreciation.		10 a	Land, buildings, and equipment: cost or other basis.	在2012年第二次是	i i	All the second
11 Investments - publicly traded securities. 11 12 Investments - other securities. See Part IV, line 11. 12 Investments - other securities. See Part IV, line 11. 12 Investments - program-related. See Part IV, line 11. 13 Intangible assets. 3,727. 14 2,982. 15 Other assets. See Part IV, line 11. 15 5,727. 15 5,727. 16 Total assets. Add lines 11 through 15 (must equal line 34). 879,892. 16 1,311,312. 17 Accounts payable and accrued expenses. 13,730. 17 30,577. 18 Grants payable and accrued expenses. 18 19 20 Tax-exempt bond liabilities. 20 21 22 Loans and other payables to current and former officers, directors, trustees, kee yendloyees, highest compensated employees, and disqualified persons. 22 Complete Part II of Schedule L. 22 23 24 Unsecured notes and loans payable to unrelated third parties. 24 Unsecured notes and loans payable to unrelated third parties. 24 Unsecured notes and loans payable to unrelated third parties. 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities included on lines 17-24). Complete Part X of Schedule D. 6,183. 25 47,514. 27 27 27 27 27 27 27 2					10 c	163 411
12 Investments — other securities. See Part IV, line 11.		11		210/2/21		103/111.
13 Investments - program-related. See Part IV, line 11. 13 3,727. 14 2,982. 15 15 5,727. 15 15 5,727. 16 15 5,727. 16 15 5,727. 16 15 5,727. 16 15 5,727. 17 17 18 15 5,727. 18 15 5,727. 18 15 5,727. 18 17 Accounts payable and accrued expenses 13,730. 17 30,577. 18 18 30,577. 18 18 30,577. 18 30,577. 18 30,577. 30		12	Investments – other securities. See Part IV, line 11		12	
14 Intangible assets. 3,727. 14 2,982. 15 Other assets. See Part IV. line 11. 16 Total assets. Add lines 1 through 15 (must equal line 34). 879,892. 16 1,311,312. 17 Accounts payable and accrued expenses 13,730. 17 30,577. 18 Grants payable 18 18 19 Deferred revenue 19 20 21 Escrow or custodial account liabilities. 20 21 Escrow or custodial account liabilities. 21 Escrow or custodial account liabilities. 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. 22 Complete Part II of Schedule L. 23 Secured mortgages and notes payable to unrelated third parties. 24 Unsecured notes and loans payable to unrelated third parties. 24 Unsecured notes and loans payable to unrelated third parties. 24 Unsecured notes and loans payable to unrelated third parties. 24 Unsecured notes and loans payable to unrelated third parties. 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities included on lines 17-24). Complete Part X of Schedule D. 6,183. 25 47,514. 27 27 27 27 27 27 27 2		13			13	
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20 Tax-exempt bond liabilities		18			18	
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Organizations that follow SFAS 117 (ASC 958), check here lines 27 through 29, and lines 33 and 34. Unrestricted net assets. Temporarily restricted net assets. Permanently restricted net assets. Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds. Paid-in or capital surplus, or land, building, or equipment fund. Retained earnings, endowment, accumulated income, or other funds. Total net assets or fund balances. Total liabilities and net assets/fund balances. 19,913. 26 78,091. 19,913. 26 19,913.		24	Unsecured notes and loans payable to unrelated third parties		24	
Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets. 28 Temporarily restricted net assets. 29 Permanently restricted net assets. Organizations that do not follow SFAS 117 (ASC 958), check here And complete lines 30 through 34. 30 Capital stock or trust principal, or current funds. 31 Paid-in or capital surplus, or land, building, or equipment fund. 32 Retained earnings, endowment, accumulated income, or other funds. 33 Total net assets or fund balances. 34 Total liabilities and net assets/fund balances. 37 And complete lines 33 and 34. 859, 979. 87 973, 920. 88 259, 301. 89 973, 920. 89 97 9, 97 9		25		6,183.	25	47,514.
Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets. Temporarily restricted net assets. Permanently restricted net assets. Organizations that do not follow SFAS 117 (ASC 958), check here And complete lines 30 through 34. Capital stock or trust principal, or current funds. Paid-in or capital surplus, or land, building, or equipment fund. Retained earnings, endowment, accumulated income, or other funds. Total net assets or fund balances. Total liabilities and net assets/fund balances. Organizations that follow SFAS 117 (ASC 958), check here And complete lines 30 through 34. State And complet		26				78,091.
34 Total liabilities and net assets/fund balances	ces	27	lines 27 through 29, and lines 33 and 34.			Trackets 11 and 12
34 Total liabilities and net assets/fund balances	<u>a</u>			859,979.		
34 Total liabilities and net assets/fund balances	8					259,301.
34 Total liabilities and net assets/fund balances	2	29			29	
34 Total liabilities and net assets/fund balances	집		and complete lines 30 through 34.			
34 Total liabilities and net assets/fund balances	ध					
34 Total liabilities and net assets/fund balances	88					
34 Total liabilities and net assets/fund balances	4					
34 Total liabilities and net assets/fund balances	₽					
			Total liabilities and net assets/fund balances.	879,892.	34	

Pa	Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI.							
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,506,869.					
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,140,276.					
3	Revenue less expenses. Subtract line 2 from line 1	3	366,593.					
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	859,979.					
5	Net unrealized gains (losses) on investments	5						
6	6 Donated services and use of facilities							
7	Investment expenses	7						
8	Prior period adjustments	8	6,649.					
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.					
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,233,221.					
Pa	t XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII							
	Chook in Concession Concession and Coopering of Theoretical Conference on the Conference of Concession Conference on Conference		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.							
2 8	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a X					
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewe separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	d on a						
١	b Were the organization's financial statements audited by an independent accountant?		2b X					
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separa basis, consolidated basis, or both:	te						
	X Separate basis Consolidated basis Both consolidated and separate basis							
•	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c X					
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.							
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?								
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								
BAA			3 b Form 990 (2017					
	•		101111 330 (2017					

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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2017

Open to Public

Name of the organization Employer identification number ANIMAL EOUALITY 47-2420444 Part | 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 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 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: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X 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.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college 9 or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 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.) 10 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. C Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (described on lines 1-10 above (see instructions)) (iv) Is the organization listed (v) Amount of monetary (vi) Amount of other support (see instructions) support (see instructions) in your governing document? Yes No (A) (B) (C) (D) (E) Total

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support	<u> </u>			·		
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.').		9,595.	338,188.	1,957,823.	2,516,229.	4,821,835.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	0.	9,595.	338,188.	1,957,823.	2,516,229.	4,821,835.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						2,248,835.
6	Public support. Subtract line 5 from line 4						2,573,000.
Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4	0.	9,595.	338,188.	1,957,823.	2,516,229.	4,821,835.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						0.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0.
11	Total support. Add lines 7 through 10			为表 实现是			4,821,835.
12	Gross receipts from related activ	rities, etc. (see ins	structions)				0.
	First five years. If the Form 990 is organization, check this box and	stop here					> X
Sec	tion C. Computation of Pu	blic Support P	ercentage				
14	Public support percentage for 20						<u>%</u>
15	Public support percentage from						%
16a	33-1/3% support test—2017. If t and stop here. The organization	he organization di qualifies as a put	d not check the b olicly supported o	ox on line 13, an rganization	d line 14 is 33-1/3	3% or more, check	this box
b	33-1/3% support test—2016. If the and stop here. The organization	e organization did qualifies as a pu	d not check a box blicly supported o	on line 13 or 16a	a, and line 15 is 3	3-1/3% or more, o	check this box
1 7 a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts'	meets the 'facts-a	and-circumstance:	s' test, check this	box and stop he	re. Explain in Part	: VI how
	10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances'	and-circumstance: test. The organiza	s' test, check this ation qualifies as	box and stop he a publicly support	re. Explain in Part ted organization	: VI how the
18	Private foundation. If the organi	zation did not che	ck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and see ins	structions >

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If	the organization
fails to qualify under the tests listed below, please complete Part II.)	

	tion A. Public Support							
	lar year (or fiscal year beginning in) F Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	7	(f) Total
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that are not an unrelated trade or business under section 513.							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.							
С	Add lines 7a and 7b							
8	Public support. (Subtract line 7c from line 6.)	3.3			(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)			
	tion B. Total Support							
	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	'	(f) Total
1 0 a	Amounts from line 6							
	income (less section 511 taxes) from businesses acquired after June 30, 1975							
-	Add lines 10a and 10b							
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)							
	Total support. (Add lines 9, 10c, 11, and 12.)					.		
	First five years. If the Form 990 organization, check this box and	stop here		nd, third, fourth, c	or fifth tax year as	a section 50)1(c)(3) ► □
	tion C. Computation of Pu							
	Public support percentage for 20	•	•				15	<u> </u>
	Public support percentage from						16	%
	tion D. Computation of Inv				(6)	T	17	<u> </u>
17	Investment income percentage f	· · · · · · · · · · · · · · · · ·		*		-	17	90
18	Investment income percentage f					L	18	
	33-1/3% support tests—2017. If is not more than 33-1/3%, check	this box and sto	p here. The orgar	nization qualifies a	as a publicly supp	orted organi	zation	
	33-1/3% support tests—2016. If the line 18 is not more than 33-1/3%	6, check this box a	and stop here. Th	ie organization qu	alifies as a public	ly supported	organ	ization ►
20	Private foundation. If the organi	zation did not che	ck a box on line	14, 19a, or 19b, c	neck this box and	see instruc	ions.	·····

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in **Part VI** what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If 'Yes,' provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If 'Yes,' provide detail in Part VI*.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
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3b		- 1 ME
3c		
4.4	1.1.4.	
4a	A CONTRACTOR OF	\$6785at-704-1416
4b	U.A. STORY	
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5b		
5c		
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		4.0
9с		
10a		
	1	10.50
10b		

Sche	edule A (Form 990 or 990-EZ) 2017 ANIMAL EQUALITY	47-2420444	Р	age 5
Pa	HIV Supporting Organizations (continued)			
11	Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
	a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) belo governing body of a supported organization?	w, the 11a		
1	b A family member of a person described in (a) above?	116		,
	c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail	in Part VI. 11c		
Sec	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' de Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization that more than one supported organization, describe how the powers to appoint an directors or trustees were allocated among the supported organizations and what conditions or restrict applied to such powers during the tax year.	escribe in ion's activities. d/or remove		* 5
2	Did the organization operate for the benefit of any supported organization other than the supported or that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how pubenefit carried out the purposes of the supported organization(s) that operated, supervised, or control supporting organization.	roviding such		
Sec	ction C. Type II Supporting Organizations			
		Spiriture and the second	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or man supporting organization was vested in the same persons that controlled or managed the supported organization.	nagement of the	n entre d	
Sec	ction D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month organization's tax year, (i) a written notice describing the type and amount of support provided during year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) co organization's governing documents in effect on the date of notification, to the extent not previously p	the prior tax pies of the		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the suporganization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Pathe organization maintained a close and continuous working relationship with the supported organization.	art VI how		
3	By reason of the relationship described in (2), did the organization's supported organizations have a svoice in the organization's investment policies and in directing the use of the organization's income or all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizin this regard.	assets at		
Sec	ction E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (s	see instructions).		
;	The organization satisfied the Activities Test. Complete line 2 below.			
	b The organization is the parent of each of its supported organizations. Complete line 3 below.			
	The organization supported a governmental entity. Describe in Part VI how you supported a gover	nment entity (see instruc	ctions).	
2	Activities Test. Anguar (s) and (h) halour		[V]	
	Activities Test. Answer (a) and (b) below.		Yes	No
i	a Did substantially all of the organization's activities during the tax year directly further the exempt purp supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those sup organizations and explain how these activities directly furthered their exempt purposes, how the organ responsive to those supported organizations, and how the organization determined that these activities substantially all of its activities.	pported Inization was		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the the organization's position that its supported organization(s) would have engaged in these activities be organization's involvement.	ne reasons for		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
,	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, of each of the supported organizations? Provide details in Part VI.	or trustees of 3a		

BAA

Pai	Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Type III Non-Functionally Integrated 509(a)(3)	aniza	itions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organizatio	t on N	Nov. 20, 1970 (explain in l ust complete Sections A t	Part VI). See hrough E.
Sec	tion A — Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		
Sec	tion B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			1940年
í	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
7	I Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other factors (explain in detail in Part VI):		以	的数据数据
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4	100	
5	Income tax imposed in prior year	5	《生物》	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally inte (see instructions).	egrate	d Type III supporting orga	anization

Schedule A (Form 990 or 990-EZ) 2017

	dule A (Form 990 or 990-EZ) 2017 ANIMAL EQUALITY		47-242	20444 Page 7
Pai	↑ V ♦ Type III Non-Functionally Integrated 509(a)(3) S	upporting Organizat	tions (continued)	
Sec	tion D — Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt p	urposes		
2	Amounts paid to perform activity that directly furthers exempt purposes in excess of income from activity	,		
3	Administrative expenses paid to accomplish exempt purposes of s	supported organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the organizar in Part VI). See instructions.	tion is responsive (provide	details	
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
	tion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reasonable cause required — explain in Part VI). See instructions.	the special particles and		TESTAGE.
3	Excess distributions carryover, if any, to 2017	AGA:		医复数性性性 医皮肤
а	Company of the Compan	a feet to the control of	企业制度的 企业系列等	
k	From 2013	。其故"正知是多 利"种 从	· 据 艾沙 斯 斯里 基 新能	
C	From 2014			
C	From 2015			
E	From 2016			
1	f Total of lines 3a through e			
g	Applied to underdistributions of prior years			沙拉特斯斯 医骨髓
h	Applied to 2017 distributable amount	A Property Commencer	Section 1	
· · · ·	i Carryover from 2012 not applied (see instructions)	AND THE PROPERTY.	医外部化排除的 系统	
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
	Distributions for 2017 from Section D, line 7:			
а	Applied to underdistributions of prior years	三二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十		
b	Applied to 2017 distributable amount		建基本企业等	
C	Remainder. Subtract lines 4a and 4b from 4.			A Great Contact
5	Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j and 4c.		对:"我们的 好好	
8	Breakdown of line 7:	12/2/15/20 - 12 /20	经产品的 基本	全种的数据 类系统数
а	Excess from 2013	15.8ELF 18.6AE	《大学教教》	
	Excess from 2014		A. 人名西德里尔斯	
C	Excess from 2015	美国 和阿特色的	进入以外提供 企业	
d	Excess from 2016			

e Excess from 2017..... BAA

Schedule A (Form 990 or 990-EZ) 2017

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

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 Publici

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to at www.irs.gov/Form990 for instructions and the latest information

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

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

If the organization answered 'Yes,' on 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,' on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

	Section 501(c)(4), (5), or (6) o	organizations: Complete Part III.			
	of organization ANIMAL E	 		Employer identifica	
		~		47-242044	
Pai	rt I-A Complete if the o	rganization is exempt under section	on 501(c) or is a s	section 52/ organiz	zation.
1	Provide a description of the (see instructions for definition	organization's direct and indirect political c in of 'political campaign activities')	ampaign activities in	Part IV.	
2	Political campaign activity ex	xpenditures (see instructions)		▶\$	
3	Volunteer hours for political	campaign activities (see instructions)			
Pai		rganization is exempt under section			
1	Enter the amount of any exc	ise tax incurred by the organization under	section 4955	▶\$	0.
		cise tax incurred by organization managers			
3	If the organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?		Yes No
4:	a Was a correction made?				Yes No
	b If 'Yes,' describe in Part IV.				
Pa		rganization is exempt under section			
1	Enter the amount directly ex	pended by the filing organization for section	n 527 exempt function	n activities ▶ \$	
2	Enter the amount of the filing of function activities	organization's funds contributed to other organ	izations for section 52	7 exempt ► \$	
3	Total exempt function expendine 17b	ditures. Add lines 1 and 2. Enter here and	on Form 1120-POL,	▶\$	
4	Did the filing organization fil	e Form 1120-POL for this year?			Yes No
5	organization made payments	and employer identification number (EIN) s. For each organization listed, enter the ans received that were promptly and directly delal action committee (PAC). If additional spa	mount paid from the inverse to a	filing organization's fund olitical organization, such	ds. Also enter the as a separate
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter-0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

Schedule C (Form 990 or 990-EZ) 2017

Part II-A Complete if section 501(the organizatior (h)).	is exempt under sec	ction 501(c)(3) and	filed Form 5768 (el	ection under
		s to an affiliated group (and	list in Part IV each affilia	ted group member's name	е,
		I share of excess lobbying			
B Check ► if the filir	ng organization chec	cked box A and 'limited cor	ntrol' provisions apply.		
(The term	Limits on Lobby 'expenditures' mea	ing Expenditures ns amounts paid or incuri	red.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expendite	ures to influence pu	blic opinion (grass roots lo	bbying)		
b Total lobbying expendite	ures to influence a l	egislative body (direct lobb	oying) [
c Total lobbying expendit	ures (add lines 1a a	nd 1b)			
d Other exempt purpose	expenditures				****
e Total exempt purpose e	expenditures (add lin	nes 1c and 1d)			
		ount from the following tat			_
If the amount on line 1e, col	lumn (a) or (b) is:	The lobbying nontaxable	amount is:		P. Children and
Not over \$500,000		20% of the amount on line 1e.			
Over \$500,000 but not over \$1	,000,000	\$100,000 plus 15% of the excess	over \$500,000.		建筑建设
Over \$1,000,000 but not over \$	\$1,500,000	\$175,000 plus 10% of the excess	over \$1,000,000.		40年ままりた
Over \$1,500,000 but not over \$	\$17,000,000	\$225,000 plus 5% of the excess of	over \$1,500,000.	A DEALLY AND A STATE OF THE STA	
Over \$17,000,000		\$1,000,000.			
g Grassroots nontaxable	amount (enter 25%	of line 1f)			
h Subtract line 1g from lin	ne 1a. If zero or less	s, enter -0			
i Subtract line 1f from lin	ne 1c. If zero or less	, enter -0			
j If there is an amount othe section 4911 tax for this	er than zero on either s year?	line 1h or line 1i, did the org	ganization file Form 4720	reporting	Yes No
(Son	ne organizations tha	4-Year Averaging Period I It made a section 501(h) el Iow. See the separate inst	lection do not have to o	complete all of the five rough 2f.)	
	Lobb	ying Expenditures During	4-Year Averaging Peri	od	
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
2 a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))				(a) (b) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	***
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					
BAA				Schedule C (For	m 990 or 990-EZ) 201

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)).

)	(b)	
For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	Yes	No	Amount	
SEE PART IV 1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
a Volunteers?		X		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Х		
c Media advertisements?		Х		
d Mailings to members, legislators, or the public?		Х		
e Publications, or published or broadcast statements?		Х		
f Grants to other organizations for lobbying purposes?	1	Х		
g Direct contact with legislators, their staffs, government officials, or a legislative body?		Х		
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Χ		
i Other activities?	Х		25,000.	
j Total. Add lines 1c through 1i	1.4	alle Part	25,000.	
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х	312 W. F. 1223	
b If 'Yes,' enter the amount of any tax incurred under section 4912	1.4			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			PROPERTY HIS SERVE	

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

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3		

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

1	Dues, assessments and similar amounts from members	_1_	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
	a Current year	2a	
	b Carryover from last year	2 b	
	c Total	2 c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

PART II-B - DESCRIPTION OF LOBBYING ACTIVITY

ANIMAL EQUALITY FINANCIALLY SUPPORTED PREVENT CRUELTY CALIFORNIA (NOW REFERRED TO AS CALIFORNIA PROPOSITION 12). PCC/PROP 12 IS AN INITIATIVE TO PROHIBIT INTENSIVE CONFINEMENT PRACTICES IN ANIMAL AGRICULTURE WITHIN CALIFORNIA AND FOR ANIMAL PRODUCTS IMPORTED INTO CALIFORNIA.

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered 'Yes' on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

	ANIMAL EQUALITY			47-2420444
Pai	t Organizations Maintaining Dono	r Advised Funds or Other	Similar Funds or A	
	Complete if the organization answ	vered 'Yes' on Form 990,	Part IV, line 6.	
		(a) Donor advised fu	nds (i	b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donore the organization's property, subject to the organization's	or advisors in writing that the as	ssets held in donor advis	sed funds
6	Did the organization inform all grantees, donor for charitable purposes and not for the benefit impermissible private benefit?	s, and donor advisors in writing of the donor or donor advisor, o	that grant funds can be or for any other purpose	used only conferring Yes No
Pai	Conservation Easements. Complete if the organization answ	vered 'Yes' on Form 990,	Part IV, line 7.	
1	Purpose(s) of conservation easements held by	the organization (check all that	apply).	
	Preservation of land for public use (e.g., re	ecreation or education)	Preservation of a histor	ically important land area
	Protection of natural habitat		Preservation of a certifi	ed historic structure
	Preservation of open space	_		
2	Complete lines 2a through 2d if the organization he	eld a qualified conservation contrib	oution in the form of a cor	servation easement on the
	last day of the tax year.		1400 No. 100	
	T. I			Held at the End of the Tax Year
	Total number of conservation easements			
	Total acreage restricted by conservation easen			
	Number of conservation easements on a certifi		` '	
(Number of conservation easements included in structure listed in the National Register	(c) acquired after 7/25/06, and	not on a historic 2 d	
3	Number of conservation easements modified, trans			ration during the
-	tax year	sierrea, released, extinguished, or	terrificated by the organiz	attori daring the
4	Number of states where property subject to conser	vation easement is located ►		
5	Does the organization have a written policy reg and enforcement of the conservation easement	arding the periodic monitoring,	inspection, handling of	violations,
6	Staff and volunteer hours devoted to monitoring, in			
7	Amount of expenses incurred in monitoring, inspec	sting bandling of violations, and a	nforcing consequation one	amonto durina the year
,	>\$	cung, nandring of violations, and e	morcing conservation eas	ements during the year
8	Does each conservation easement reported on and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requ	irements of section 170	(h)(4)(B)(i)
9	In Part XIII, describe how the organization reports include, if applicable, the text of the footnote to conservation easements.	conservation easements in its revolution the organization's financial sta	enue and expense statem atements that describes	ent, and balance sheet, and the organization's accounting for
Da.	Organizations Maintaining Collections	tions of Art. Historical Te	reasures or Other	Similar Assets
	Complete if the organization answ	vered 'Yes' on Form 990,	Part IV, line 8.	
1 a	If the organization elected, as permitted under art, historical treasures, or other similar assets hel- in Part XIII, the text of the footnote to its finance	d for public exhibition, education,	or research in furtherance	ment and balance sheet works of of public service, provide,
ŀ	If the organization elected, as permitted under historical treasures, or other similar assets held for following amounts relating to these items:			
	(i) Revenue included on Form 990, Part VIII, I			
	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of art, his amounts required to be reported under SFAS 1	storical treasures, or other similar 16 (ASC 958) relating to these	assets for financial gain, items:	provide the following
	Revenue included on Form 990, Part VIII, line			
Ł	Assets included in Form 990, Part X			

Part III Organizations Maintaining C	collections c	or Art, Histo	oricai Treasures, o	r Other Similar Ass	sets (C	<u>วทนทน</u>	леа) <u> </u>
3 Using the organization's acquisition, access items (check all that apply):	ion, and other re	cords, check a	iny of the following that a	re a significant use of its	collectio	n	
a Public exhibition		d Loan	or exchange programs				
b Scholarly research		e Other					
c Preservation for future generations							
4 Provide a description of the organization's c Part XIII.	ollections and ex	oplain how they	y further the organization	's exempt purpose in			
5 During the year, did the organization soli to be sold to raise funds rather than to be	e maintained as	s part of the c	organization's collection	.?	Yes		No
Part IV Escrow and Custodial Arrar line 9, or reported an amoun	ngements. C at on Form 99	omplete if t 90, Part X,	the organization an line 21.	swered 'Yes' on Fo	orm 990), Par	rt IV,
1 a Is the organization an agent, trustee, custon Form 990, Part X?				er assets not included	Yes	[No
b If 'Yes,' explain the arrangement in Part	XIII and comple	ete the followi	ing table:				
					Amount	1	
c Beginning balance							
d Additions during the year							
e Distributions during the year							
f Ending balance							—
2a Did the organization include an amount of				-			No
b If 'Yes,' explain the arrangement in Part	XIII. Check her	e if the explai	nation has been provide	ed on Part XIII		· · · · · L	
Bod V. Endoument Funda Comple	to if the even	mi-alian au	namerad Wast on E	orm 000 Dort IV I	no 10		
Part V Endowment Funds. Complete	T						ra baali
1 a Beginning of year balance	Current year	(b) Prior yea	r (c) Two years bac	k (d) Three years back	(e) i	Four year	IS DACK
b Contributions					+		
b Contributions					+		
c Net investment earnings, gains, and losses							
d Grants or scholarships					_		
e Other expenditures for facilities and programs							
f Administrative expenses							
g End of year balance							
2 Provide the estimated percentage of the	current year en	id balance (lir	ne 1g, column (a)) held	as:			
a Board designated or quasi-endowment ▶		[%]					
b Permanent endowment ▶	[%]						
c Temporarily restricted endowment		8					
The percentages on lines 2a, 2b, and 2c sho	ould equal 100%	•					
3 a Are there endowment funds not in the posse	ession of the org	anization that a	are held and administere	d for the	-		-
organization by:						Yes	No
(i) unrelated organizations					3a(i)		
(ii) related organizations	• • • • • • • • • • • • • • • • • • • •				3a(ii)		
b If 'Yes' on line 3a(ii), are the related orga		•			3b		
4 Describe in Part XIII the intended uses o	f the organizati	on's endowme	ent funds.				
Part VI Land, Buildings, and Equipmediate if the organization		′es' on Fori	m 990, Part IV, line	e 11a. See Form 99	90, Par	t X, li	ine 10.
Description of property	(a) Cost o	r other basis stment)	(b) Cost or other basis (other)	(c) Accumulated depreciation		Book v	
1 a Land		* * * * * * * * * * * * * * * * * * * *					
b Buildings		***************************************					
c Leasehold improvements							
d Equipment			93,529.	33,713.		59	,816.
e Other			103,876.	281.			,595.
Total. Add lines 1a through 1e. (Column (d) ma		990, Part X.					,411.
BAA	· · · · · · · · · · · · · · · · · · ·				dule D (Fo		

Part VII Investments - Other Securities.	D/1 F 00/	N/A
), Part IV, line 11b. See Form 990, Part X, line 12
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(3) Other		
(A)		
(B)		
<u>(Ć)</u>		
(D)		
(E)		
<u>(F)</u>		
(G)		
(H)		
(1)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)		N/A
Complete if the organization answered	'Yes' on Form 990	N/A), Part IV, line 11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) >		
Total. (Column (b) must equal Form 330, Fart A, Column (b) me 13.)		The state of the s
Part IX Other Assets.	N/A	
Part IX Other Assets. Complete if the organization answered	N/A 'Yes' on Form 990), Part IV, line 11d. See Form 990, Part X, line 15.
Part IX Other Assets. Complete if the organization answered (a) Des	N/A	
Part IX Other Assets. Complete if the organization answered	N/A 'Yes' on Form 990), Part IV, line 11d. See Form 990, Part X, line 15.
Complete if the organization answered (a) Des (1) (2) (3)	N/A 'Yes' on Form 990), Part IV, line 11d. See Form 990, Part X, line 15.
Complete if the organization answered (a) Des (1) (2) (3) (4)	N/A 'Yes' on Form 990), Part IV, line 11d. See Form 990, Part X, line 15.
Complete if the organization answered (a) Des (1) (2) (3) (4) (5)	N/A 'Yes' on Form 990), Part IV, line 11d. See Form 990, Part X, line 15.
Complete if the organization answered (a) Des (1) (2) (3) (4) (5) (6)	N/A 'Yes' on Form 990), Part IV, line 11d. See Form 990, Part X, line 15.
Complete if the organization answered (a) Des (1) (2) (3) (4) (5)	N/A 'Yes' on Form 990), Part IV, line 11d. See Form 990, Part X, line 15.
Complete if the organization answered (a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9)	N/A 'Yes' on Form 990), Part IV, line 11d. See Form 990, Part X, line 15.
Complete if the organization answered (a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)	N/A 'Yes' on Form 990 scription	0, Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value
Complete if the organization answered (a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (E)	N/A 'Yes' on Form 990 scription	0, Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value
Complete if the organization answered (a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (E) Part X Other Liabilities.	Yes' on Form 990 scription), Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value
Complete if the organization answered (a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (E) Part X Other Liabilities. Complete if the organization answered 'Yes' on Fo	N/A 'Yes' on Form 990 scription 3) line 15.)), Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value
Complete if the organization answered (a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (E) Part X Other Liabilities.	Yes' on Form 990 scription), Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value
Complete if the organization answered (a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (E) Part X Other Liabilities. Complete if the organization answered 'Yes' on Fo (a) Description of liability (1) Federal income taxes (2) ACCRUED VACATION	N/A 'Yes' on Form 990 scription 3) line 15.)	Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value
Complete if the organization answered (a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (E) Part X Other Liabilities. Complete if the organization answered 'Yes' on Fo (a) Description of liability (1) Federal income taxes (2) ACCRUED VACATION (3)	N/A 'Yes' on Form 990 scription B) line 15.)	Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value
Complete if the organization answered (a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (E) Part X Other Liabilities. Complete if the organization answered 'Yes' on Fo (a) Description of liability (1) Federal income taxes (2) ACCRUED VACATION (3) (4)	N/A 'Yes' on Form 990 scription B) line 15.)	Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value
Complete if the organization answered (a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (E) Part X Other Liabilities. Complete if the organization answered 'Yes' on Fo (a) Description of liability (1) Federal income taxes (2) ACCRUED VACATION (3) (4) (5)	N/A 'Yes' on Form 990 scription B) line 15.)	Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value
Complete if the organization answered (a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (E) Part X Other Liabilities. Complete if the organization answered 'Yes' on Fo (a) Description of liability (1) Federal income taxes (2) ACCRUED VACATION (3) (4) (5) (6)	N/A 'Yes' on Form 990 scription B) line 15.)	Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value
Complete if the organization answered (a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (E) Part X Other Liabilities. Complete if the organization answered 'Yes' on Fo (a) Description of liability (1) Federal income taxes (2) ACCRUED VACATION (3) (4) (5)	N/A 'Yes' on Form 990 scription B) line 15.)	Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value
Complete if the organization answered (a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (E) Part X Other Liabilities. Complete if the organization answered 'Yes' on Form (a) Description of liability (1) Federal income taxes (2) ACCRUED VACATION (3) (4) (5) (6) (7) (8) (9)	N/A 'Yes' on Form 990 scription B) line 15.)	Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value
Complete if the organization answered (a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (E) Part X Other Liabilities. Complete if the organization answered 'Yes' on Form (a) Description of liability (1) Federal income taxes (2) ACCRUED VACATION (3) (4) (5) (6) (7) (8) (9) (10)	N/A 'Yes' on Form 990 scription B) line 15.)	Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value
Complete if the organization answered (a) Des (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (E) Part X Other Liabilities. Complete if the organization answered 'Yes' on Form (a) Description of liability (1) Federal income taxes (2) ACCRUED VACATION (3) (4) (5) (6) (7) (8) (9)	N/A 'Yes' on Form 990 scription B) line 15.)	Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value

2. Liability for uncertain tax positions. In Part XIII, 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 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

Part XI Reconciliation of Revenue per Audited Financial Statements With F	Revenue per Return.	
Complete if the organization answered 'Yes' on Form 990, Part IV, li	ne 12a.	
1 Total revenue, gains, and other support per audited financial statements		2,511,408.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants 2c d Other (Describe in Part XIII.) SEE PART XIII 2d	4,539.	
e Add lines 2a through 2d		4,539.
3 Subtract line 2e from line 1)—————————————————————————————————————	2,506,869.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.) 4b		
c Add lines 4a and 4b.	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	├	2,506,869.
Part XII Reconciliation of Expenses per Audited Financial Statements With	- Leve	
Complete if the organization answered 'Yes' on Form 990, Part IV, Ii		•
1 Total expenses and losses per audited financial statements		2,144,815.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities	6.4 s	
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIII.) SEE PART XIII 2d	4,539.	
e Add lines 2a through 2d		4,539.
3 Subtract line 2e from line 1		2,140,276.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b.		
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	2,140,276.
Part XIII Supplemental Information.		
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line 1ine 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this SCHEDULE D, PART XI, LINE 2D OTHER REVENUE INCLUDED IN F/S BUT NOT INCLUDED ON FORM 990	part to provide any additior	al information.
LOSS ON DISPOSAL	\$	4,539.
	TOTAL \$	4,539.
SCHEDULE D, PART XII, LINE 2D OTHER EXPENSES AND LOSSES PER AUDITED F/S		
LOSS ON DISPOSAL	TOTAL \$	4,539. 4,539.

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

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

► Go to www.irs.gov/Form990 for instructions and the latest information

2017

OMB No. 1545-0047

Open to Public + Inspection

Name of the organization

ANIMAL EQUALITY

Employer identification number

47-2420444

Par	General Information on Activities Outside the United States. Complete if the organization answered 'Ye on Form 990, Part IV, line 14b.	s'
1	or grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, e grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? XYes	No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. PART V

3	Activities per Region.	The following Part I, line 3 table can be duplicated if additional space is needed.)	

3 Activities per Region. (The	following Part I,	line 3 table can b	e duplicated if additional space	e is needed.)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
				CORP OUTREACH &	
(1) EUROPE		1	GRANTS AND PROGRAMS	EDUCATION	283,121.
				INVESTIGATIONS,	•
(2) NORTH AMERICA	1	8	PROGRAMS	OUTREACH & EDU	209,630.
				INVESTIGATIONS,	
(3) SOUTH ASIA		5	PROGRAMS	OUTREACH & EDU	45,096.
				INVESTIGATIONS,	
(4) SOUTH AMERICA		4	PROGRAMS	OUTREACH & EDU	179,375.
(5)					
(6)					
<u>(7)</u>					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3 a Sub-total	1	18			717,222.
b Total from continuation sheets to Part I			To the late of the	31-20	
c Totals (add lines 3a and 3b)	1	18	The Property of the Party of th	"我们是我的时候 "	717,222.
544 - 5 1 - 1					

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

Schedule F (Form 990) 2017

Part III Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
**************************************		edes (A)		GENERAL &				EQUIPMENT &	
-(1)		Construction (EUROPE	PROGRAMS	210,689.	WIRE	2,367.		FMV
/2 0	一种,他们的 他们是一种强烈。	5 146 2 EN	SOUTH AMERICA			WIRE	3,279.	EQUIPMENT &	FMV
(2)	The state of the s	THE REPORT OF THE PARTY.				WIRE	3,213.	EQUIPMENT &	1111
(3)	121, 17 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	THE PERSON NAMED IN	SOUTH ASIA			WIRE	10,507.		FMV
100	The the court of the court of								
- (O ₁₄₁)	and the course of the course o								
(5)		12 14 15 15 15 15 15 15 15 15 15 15 15 15 15							
1000	A STATE OF THE STA	The latest and the la							
(6)	第1 年 10年 10年 10日	。 第二章							
	And Later than the state of the								
(/)									
(8)					_				
, marginalis	4 2年 地震活动长度	Section 1987							
(9)									
(10)		A CONTRACTOR							
ungunung sec.	Land Company	(45p.) 1895					- 100		
(11)	The state of the s	2.37							
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2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter. 3 Enter total number of other organizations or entities

Schedule F (Form 990) 2017

(13)

(14)

(15)

(16)

(17)

(18)

Schedule F (Form 990) 2017 ANIMAL EQUALITY 47-2420444 Page 3 Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (a) Type of grant or assistance (c) Number of recipients (b) Region (d) Amount of (h) Method of valuation (book, FMV, appraisal, other) (e) Manner of (g) Description of noncash assistance (f) Amount of cash grant cash noncash assistance disbursement (1) (3) (4) (5) (6) (7) (8) (9) (10)(11)(12)

Sch	edule F (Form 990) 2017 ANIMAL EQUALITY	47-2420444	Page 4
Pa	rt IV Foreign Forms	2120111	
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926).	·····Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If 'Yes,' the organization may be required to separately file Form 3520, Annual Return To Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To C Foreign Corporations (see Instructions for Form 5471).	Certain	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a quallecting fund during the tax year? If 'Yes,' the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621).		X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If 'Yes,' the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreig Partnerships (see Instructions for Form 8865)	n Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If 'Yes,' the organization may be required to separately file Form 5713, International Boycott Report (se Instructions for Form 5713; do not file with Form 990)	ee ·····Yes	X No

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Schedule F (Form 990) 2017

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PARTI, LINE 2-GRANTMAKERS EXPLANATION FOR MONITORING USE OF FUNDS OUTSIDE US
GRANTEES ARE REQUIRED TO PROVIDE A DETAILED GRANT REQUEST AND PROPOSAL SPECIFICALLY
DETAILING HOW THE REQUESTED FUNDS WILL BE USED. EACH GRANT PROPOSAL IS THEN VOTED ON
BY THE ORGANIZATION'S DIRECTORS IN THE IMMEDIATELY PROCEEDING BOARD MEETING
(INTERESTED BOARD MEMBERS, IF ANY, ARE SEQUESTERED FROM THE VOTING PROCESS). IF THE
BOARD VOTES TO MAKE THE GRANT AS PROPOSED, THE GRANTOR AND GRANTEE ENTER INTO A GRANT
AGREEMENT, DETAILING EXACTLY HOW THE FUNDS WILL BE USED. GRANTEE IS THEN REQUIRED TO
PROVIDE PERIODIC REPORTS, BEGINNING BETWEEN 30 AND 60 DAYS FOLLOWING THE GRANT
TRANSFER, DETAILING THE USE OF THE FUNDS. ANY AMOUNT NOT USED WILL BE REIMBURSED TO
THE GRANTOR. GRANTOR OVERSEES AND SCHEDULES PERIODICAL PROGRESS CHECKS AND MONITORS
THE USE OF THE FUNDS.

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered 'Yes' on Form 990, Part IV, line 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.

► Go to www.irs.gov/Form990 for the latest instructions.

OMB No. 1545-0047

2017

Openic Public Inspection

Name of the organization Employer identification number ANIMAL EQUALITY 47-2420444 Fundraising Activities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply, a X Mail solicitations e X Solicitation of non-government grants | Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events d X In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key **b** If 'Yes,' list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (iii) Did fundraiser (vi) Amount paid to (i) Name and address of individual (or retained by) fundraiser listed in (iv) Gross receipts (ii) Activity have custody or control of contributions? (or retained by) or entity (fundraiser) from activity organization column (i) Yes No 1 2 3 5 6 R 9 10 Total... 0. List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Schedule G (Form 990 or 990-EZ) 2017 ANIMAL EQUALITY 47-2420444 Part II Fundraising Events. Complete if the organization answered 'Yes' on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (d) Total events (a) Event #1 (b) Event #2 (c) Other events (add column (a) GALA NONE through column (c)) (total number) REVENUE (event type) (event type) 1 Gross receipts..... 164,168. 164,168. 12,773. 12,773. 3 Gross income (line 1 minus line 2)..... 151,395 151,395. 4 Cash prizes..... DIRECT Rent/facility costs..... 7 Food and beverages 46,645. 46,645. EXPENSES 8 Entertainment 43,922. 43,922. Other direct expenses..... 65,647. 65,647. 10 Direct expense summary. Add lines 4 through 9 in column (d)...... 156,214. 11 Net income summary. Subtract line 10 from line 3, column (d)..... -4,819.Gaming. Complete if the organization answered 'Yes' on 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 REVENUE (add column (a) through column (c)) (a) Bingo (c) Other gaming bingo/progressive bingo Gross revenue..... 2 Cash prizes...... DIRENSES T 4 Rent/facility costs..... 5 Other direct expenses..... Yes Yes Yes No No 7 Direct expense summary. Add lines 2 through 5 in column (d)..... 9 Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states?..... **b** If 'No,' explain: 10 a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?.....

b If 'Yes,' explain:

Schedule G (Form 990 of 990-EZ) 2017 ANIMAL EQUALITY	7-2420444	1 Page 3
11 Does the organization conduct gaming activities with nonmembers?	· · · · · · · · · · · ·	Yes No
12 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?	 	Yes No
13 Indicate the percentage of gaming activity conducted in:		
a The organization's facility	12.	0.
b An outside facility.		<u>%</u>
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records		
Name •		
Address •		
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue		
b If 'Yes,' enter the amount of gaming revenue received by the organization ► \$ and th	e amount	les No
of gaming revenue retained by the third party ► \$	o amount	
c If 'Yes,' enter name and address of the third party:		
Name •		
Address •		i
16 Gaming manager information:		
Name •		
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 retain the state gaming license?		Yes No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		ites []ito
organization's own exempt activities during the tax year ► \$		
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, column and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any information. See instructions.	ımns (iii) a additional	nd (v);
PART I, LINE 2B - FUNDRAISER ADDITIONAL INFORMATION		
ORGANIZATION IS REGISTERED IN ALL 50 U.S. STATES.		

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

Open to Public
Inspection

Department of the Treasury Internal Revenue Service Name of the organization

ANIMAL EQUALITY

Employer identification number

47-2420444

FORM 990, PART I, LINE 1 - ORGANIZATION MISSION OR SIGNIFICANT ACTIVITIES

ANIMAL EQUALITY IS AN INTERNATIONAL ORGANIZATION WORKING WITH SOCIETY, GOVERNMENTS, AND COMPANIES TO END CRUELTY TO FARMED ANIMALS.

EDUCATION

ANIMAL EQUALITY EMPLOYS A VARIETY OF ONLINE AND OFFLINE EDUCATIONAL TOOLS TO SUPPORT LONG-TERM BEHAVIORAL CHANGE. THE LONG-TERM GOALS OF THE EDUCATIONAL DEPARTMENT ARE TO INCREASE THE NUMBER OF PEOPLE CHANGING TO A PLANT-BASED DIET, DECREASE THE CONSUMPTION OF ANIMALS AND ANIMAL PRODUCTS, AND TO INCREASE THE DEMAND FOR PLANT-BASED PRODUCTS.

INVESTIGATIONS

ANIMAL EQUALITY CONDUCTS UNDERCOVER INVESTIGATIONS EMPLOYING INNOVATIVE METHODS INCLUDING DRONES, UNDERWATER FILMING, HIDDEN CAMERAS, AND 360-DEGREE CAMERAS, TO CAPTURE AND EXPOSE THE CRUELTY OF FARMED ANIMALS.

CORPORATE OUTREACH

ANIMAL EQUALITY'S CORPORATE OUTREACH AND CAMPAIGNS ENCOURAGE COMPANIES AROUND THE WORLD TO ADOPT IMPORTANT ANIMAL PROTECTION POLICIES. ANIMAL EQUALITY WORKS TO ELIMINATE THE CRUELEST STANDARD PRACTICES, SUCH AS THE CAGING OF HENS USED IN THE EGG INDUSTRY. ANIMAL EQUALITY'S CORPORATE CAMPAIGNS ALSO REACH MILLIONS OF PEOPLE THROUGH THE MEDIA BY EDUCATING THE PUBLIC ABOUT THE PLIGHT OF FARMED ANIMALS.

LEGAL ADVOCACY

ANIMAL EQUALITY WORKS TO ADVANCE ANIMAL PROTECTION BY ADVOCATING FOR THE

FORM 990, PART I, LINE 1 - ORGANIZATION MISSION OR SIGNIFICANT ACTIVITIES

AND REGULATIONS ARE STRICTLY ENFORCED TO THE BENEFIT OF ALL FARMED ANIMALS. ANIMAL EQUALITY ENCOURAGES GOVERNMENTS TO INTRODUCE INITIATIVES THAT LEAD TO THE REDUCTION OF THE CONSUMPTION OF ANIMAL PRODUCTS, AND ASSIST ITS MEMBERS AND VOLUNTEERS IN VOICING THEIR SUPPORT FOR THESE INITIATIVES. ANIMAL EQUALITY'S LONG-TERM GOALS ARE TO IMPROVE THE ENFORCEMENT OF EXISTING LAWS AND TO HAVE ITS WORK LEAD TO GREATER LEGAL PROTECTIONS FOR ANIMALS.

FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS

EDUCATION

2017 HAS BEEN A MOMENTOUS YEAR FOR OUR GROUNDBREAKING AND AWARD-WINNING VIRTUAL REALITY SERIES IANIMAL. IN JULY, WE RELEASED OUR LATEST FILM, WHICH OPENS PEOPLE'S EYES TO THE DARK REALITY OF DAIRY FARMING AND FEATURES BRAND NEW FOOTAGE FILMED BY EIGHT INVESTIGATORS IN THREE COUNTRIES OVER SIX MONTHS. THE FILM 'IANIMAL: THE DAIRY INDUSTRY IN 360 DEGREES', NARRATED BY HARRY POTTER ACTRESS AND ANIMAL ADVOCATE EVANNA LYNCH, WAS PRESENTED IN THE UNITED KINGDOM, UNITED STATES, MEXICO, GERMANY, AND SPAIN. THE RELEASE WAS COVERED BY SOME OF THE MOST IMPORTANT MEDIA OUTLETS AROUND THE WORLD, INCLUDING THE NEW YORK TIMES. THE UK'S PRESTIGIOUS AND LARGEST INDEPENDENT FILM FESTIVAL, RAINDANCE, SHORTLISTED OUR VIRTUAL REALITY FILM 'IANIMAL: 42 DAYS IN THE LIFE OF A CHICKEN', FOR THE BEST SOCIAL IMPACT EXPERIENCE AWARD WHICH WAS ALSO NOMINATED IN THE CATEGORY OF VIRTUAL REALITY FILMS AT THE CHELSEA FILM FESTIVAL IN NEW YORK CITY. IN ITALY, WE WERE SELECTED AS FINALIST FOR THE BEST VIDEO STORYTELLING OF 2017 BY 'TELETOPI', AN AWARD PROMOTED BY THE FINANCIAL JOURNAL 'SOLE 24 ORE' ALONG WITH THE UNIVERSITY OF BOLOGNA.

OUR LOVE VEG WEBSITE, WHICH LAUNCHED IN AUGUST, IS A LEADING RESOURCE FOR ALL THINGS PLANT-BASED. RICH CONTENT ON THE SITE INSPIRES FUTURE GENERATIONS OF VEGANS IN THE

Employer identification number

47-2420444

FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS

UNITED STATES, UNITED KINGDOM AND GERMANY. OUR LOVE VEG E-NEWSLETTERS HAVE ALREADY REACHED OVER 200,000 SUBSCRIBERS. ANIMAL EQUALITY IS WORKING ON THE UPCOMING LAUNCH IN INDIA AND BRAZIL AND PROMOTING MORE COMPASSIONATE CHOICES ALL AROUND THE WORLD.

ANIMAL EQUALITY HAS HELD IANIMAL EVENTS AROUND THE WORLD, INCLUDING SEVERAL TOURS BY ENTHUSIASTIC TEAMS OF ACTIVISTS WHO HAVE TAKEN IANIMAL TO COLLEGES AND UNIVERSITIES ACROSS THE UNITED STATES. WE ALSO SHARED OUR IANIMAL HEADSETS AND FILMS WITH ACTIVISTS AND OVER 80 ORGANIZATIONS WORLDWIDE. THANKS IN PART TO OUR COLLABORATION WITH OTHER GROUPS, IANIMAL HAS BEEN VIEWED BY OVER 60,000 PEOPLE AND A FURTHER 10,000 PEOPLE VIA 2D AT NEARLY 500 EVENTS AROUND THE GLOBE. OVER 935,000 PEOPLE HAVE SUBSCRIBED TO ANIMAL EQUALITY NEWSLETTERS THIS YEAR. ANIMAL EQUALITY REACHED 4.2 MILLION FOLLOWERS ON FACEBOOK AND A TOTAL REACH OF 725 MILLION ON FACEBOOK ACROSS SEVEN COUNTRIES. ANIMAL EQUALITY HAS EXPANDED ITS SOCIAL MEDIA PRESENCE ACROSS SEVERAL COUNTRIES THROUGHOUT 2017, GAINING 150,000 TWITTER FOLLOWERS AND ALMOST 190,000 INSTAGRAM FOLLOWERS.

FORM 990, PART III, LINE 4B - PROGRAM SERVICE ACCOMPLISHMENTS

CORPORATE OUTREACH

IN 2017, ANIMAL EQUALITY WON 41 CORPORATE POLICIES BANNING THE CAGES THAT CRUELLY CONFINE HENS USED FOR EGGS IN ITALY, BRAZIL, MEXICO, AND SPAIN. CUMULATIVELY, THESE POLICIES REDUCE THE SUFFERING OF AT LEAST 20 MILLION HENS EVERY SINGLE YEAR.

STARTING IN JANUARY, ANIMAL EQUALITY CONDUCTED OUTREACH TO NEARLY 600 COMPANIES ACROSS THE AFOREMENTIONED FOUR COUNTRIES PLUS INDIA IN AN EFFORT TO BEGIN THE IMPORTANT DIALOGUE THAT WOULD ULTIMATELY RESULT IN CORPORATE POLICIES. COMPANIES INCLUDED SOME OF THE BIGGEST NAMES IN FOOD BUSINESS FROM THE RESTAURANT, RETAIL, FOOD SERVICE, CONSUMER PACKAGED GOODS AND HOSPITALITY SECTORS.

FORM 990, PART III, LINE 4B - PROGRAM SERVICE ACCOMPLISHMENTS

ANIMAL EQUALITY ALSO EMBARKED ON PUBLIC EDUCATION CAMPAIGNS TO INFORM CONSUMERS

ABOUT THE PLIGHT OF BIRDS IN CAGES. AS PART OF THOSE CAMPAIGNS ANIMAL EQUALITY HELD

NEARLY 40 PROTESTS ATTENDED BY AROUND 3,000 VOLUNTEERS. WE ALSO RECRUITED 30,000

VOLUNTEERS TO TAKE ONLINE ACTIONS AS PART OF THE ORGANIZATION'S NEWLY-FORMED "ANIMAL DEFENDERS" PROGRAM DESIGNED SPECIFICALLY FOR THE CORPORATE OUTREACH DEPARTMENT. OUR

POLICY SUCCESSES AND CAMPAIGN ACTIONS RESULTED IN MORE THAN 220 MILLION MEDIA

IMPRESSIONS WORLDWIDE.

FORM 990, PART III, LINE 4C - PROGRAM SERVICE ACCOMPLISHMENTS

INVESTIGATIONS

IN 2017, ANIMAL EQUALITY RELEASED 23 HARD-HITTING INVESTIGATIONS INTO THE VIOLENT FACTORY FARMING INDUSTRY IN BRAZIL, INDIA, ITALY, SPAIN, THE UNITED KINGDOM, GERMANY AND MEXICO THAT HAD OVER 1.9 BILLION VIEWS WORLDWIDE.

AS PART OF OUR CAMPAIGN AGAINST THE EGG INDUSTRY, WE RELEASED THREE MAJOR INVESTIGATIONS INSIDE HEN FARMS IN SPAIN, ITALY AND INDIA. ANIMAL EQUALITY RELEASED THE FIRST-EVER INVESTIGATION OF BRAZIL'S EGG INDUSTRY, REVEALING DISTURBING ANIMAL ABUSE INSIDE THE COUNTRY'S EGG FACTORY FARMS THAT CAGE HENS. ANIMAL EQUALITY ALSO RELEASED THE FIRST-EVER INVESTIGATION INTO HEN FARMS IN INDIA. A THIRD IANIMAL FILM ON DAIRY COWS, NARRATED BY EVANNA LYNCH WAS INTRODUCED.

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION

LEGAL ADVOCACY

IN MAY, THE GOVERNMENT OF INDIA INTRODUCED THE PREVENTION OF CRUELTY TO ANIMALS

(REGULATION OF LIVESTOCK MARKETS) RULES 2017, WHICH WILL REDUCE THE SUFFERING OF

MORE THAN 300 MILLION COWS AND BUFFALOES IN INDIA. THIS ACHIEVEMENT IS, IN PART, A

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION

RESULT OF OUR INVESTIGATION INTO THE SHOCKING CRUELTIES INFLICTED ON COWS AND BUFFALOES AT CATTLE MARKETS WHICH WERE COLLECTED THROUGH GRANTS GIVEN TO ANIMAL EQUALITY INDIA .

IN JULY, THE LAW COMMISSION OF INDIA DRAFTED AND RECOMMENDED TO THE GOVERNMENT THE "PREVENTION OF CRUELTY TO ANIMALS (EGG LAYING HENS) RULES, 2017" AND THE "PREVENTION OF CRUELTY TO ANIMALS (BROILER CHICKEN) RULES 2017", WHICH INCLUDED RECOMMENDATIONS FROM ANIMAL EQUALITY AND INFORMATION ON OUR INVESTIGATIONS INTO EGG AND CHICKEN FARMS. THESE RULES WILL REDUCE THE CRUELTY EXPERIENCED BY MORE THAN 530 MILLION CHICKENS EVERY YEAR.

IN MARCH, ANIMAL EQUALITY AND MEXICAN SENATOR DIVA GASTÉLUM INTRODUCED A HISTORIC INITIATIVE, THE VERY FIRST OF ITS KIND, CALLING ON THE MEXICAN SENATE TO MODIFY CURRENT FEDERAL LEGISLATION TO MAKE THE ABUSE OF FARMED ANIMALS A CRIME. THE INITIATIVE, BASED ON THE 31 MEXICAN SLAUGHTERHOUSES INVESTIGATED BY ANIMAL EQUALITY IN MEXICO THROUGH GRANTS FROM ANIMAL EQUALITY, PROPOSES MAKING CRUELTY TO ANIMALS A FELONY CRIME PUNISHABLE BY UP TO FOUR YEARS IN PRISON. IN PARALLEL WITH THE INITIATIVE, ANIMAL EQUALITY IN MEXICO HOSTED A GROUNDBREAKING EVENT TO PRESENT OUR VIRTUAL REALITY SERIES, IANIMAL, TO THE NATION'S LEADING POLICYMAKERS. ANIMAL EQUALITY'S INITIATIVE HAS ADVANCED THROUGH THE SENATE COMMITTEE, AND WE ARE TAKING PROACTIVE MEASURES TO ENSURE THAT IT IS SOON VOTED UPON BY THE FULL CHAMBER. WHEN PASSED, THIS INITIATIVE WILL REDUCE THE SUFFERING OF 1.8 BILLION ANIMALS KILLED ANNUALLY IN MEXICAN SLAUGHTERHOUSES.

IN JULY, FUNDED BY GRANTS FROM ANIMAL EQUALITY, ANIMAL EQUALITY IN MEXICO INTRODUCED AN INITIATIVE IN THE MEXICAN STATE OF JALISCO TO MAKE CRUELTY TO FARMED ANIMALS A

FORM 990, PART III. LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION

FELONY CRIME PUNISHABLE BY UP TO THREE YEARS IN PRISON. IMPORTANTLY, THIS LAW INCLUDES CHICKENS AND OTHER ANIMALS WHO ARE USUALLY NOT OFFERED SUCH PROTECTIONS.

THE TEXT OF THE INITIATIVE ACKNOWLEDGES THAT IT WAS INTRODUCED AS A RESULT OF ANIMAL EQUALITY INVESTIGATION INTO MULTIPLE SLAUGHTERHOUSES IN JALISCO.

IN NOVEMBER, ANIMAL EQUALITY IN MEXICO PRESENTED THE SECOND PORTION OF OUR HISTORIC INVESTIGATION INTO MEXICAN SLAUGHTERHOUSES AT AN UNPRECEDENTED PRESENTATION AT THE STATE CONGRESS IN JALISCO. JALISCO IS MEXICO'S LEADER IN MEAT PRODUCTION AND THIS INITIATIVE WILL AFFECT MORE THAN 3.4 MILLION PIGS, 836,000 COWS, 182,000 SHEEP AND LAMBS, 76,000 GOATS AND 183 MILLION BIRDS EVERY YEAR.

ANIMAL EQUALITY FURTHERMORE PROVIDED FUNDING FOR INVESTIGATIONS INSIDE EUROPEAN RABBIT FARMS, WHICH CONTRIBUTED TO THE EUROPEAN PARLIAMENT VOTING ON MAJOR ANIMAL WELFARE IMPROVEMENTS FOR RABBITS IN MARCH THAT WILL PAVE THE WAY TO END CAGES FOR RABBITS IN EUROPE. AS THE PROMINENT POLITICAL MEDIA JOURNAL POLITICO NOTED, "THE CHANGE IN POSITION IS A DIRECT RESULT OF A LOBBYING CAMPAIGN ORGANIZED BY ANIMAL EQUALITY." THIS MONUMENTAL PROGRESS FOR RABBITS WILL DIRECTLY BENEFIT 340 MILLION RABBITS EVERY YEAR.

ANIMAL EQUALITY ALSO FUNDED A DECEMBER 2016 DAIRY INVESTIGATION IN THE UNITED KINGDOM LED TO THE 2017 CONVICTION OF A FARM WORKER ON TWO COUNTS OF CRUELTY UNDER THE ANIMAL WELFARE ACT. IN ADDITION, HE WAS GIVEN A 12-WEEK SUSPENDED PRISON SENTENCE, 150 HOURS OF COMMUNITY SERVICE, AND A TWO-YEAR BAN ON WORKING WITH FARMED ANIMALS.

FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS, DIRECTORS, ETC.

TWO OF THE DIRECTORS, SHARON MARIA NUNEZ GOUGH AND JOSE ANTONIO VALLE BLANCO, ARE MARRIED TO EACH OTHER.

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

ALL OFFICERS OF ANIMAL EQUALITY ARE EMAILED AN ELECTRONIC COPY OF THE FORM 990 WITH ITS RELATED STATEMENTS AND SCHEDULES FOR THEIR REVIEW AND APPROVAL PRIOR TO SUBMITTING IT TO THE IRS.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

BOARD MEMBERS ABSTAIN FROM DISCUSSION AND VOTING ON ANY MATTERS THAT MAY RESULT IN A CONFLICT OF INTEREST. THE BOARD WILL ONLY DECIDE TO HIRE OR CONTRACT WITH THE BOARD MEMBER IF THE GOOD OR SERVICES ARE NEEDED AND THE INDIVIDUAL IS THE MOST QUALIFIED AND PROVIDES THE BEST PRICE. IT IS RESPONSIBILITY OF THE BOARD TO RECORD IN THE MINUTES OF THE BOARD MEETING THE POTENTIAL CONFLICT OF INTEREST. IN ADDITION, EACH BOARD MEMBER IS REQUIRED TO COMPLETE AND SIGN A CONFLICT OF INTEREST STATEMENT ON AN ANNUAL BASIS.

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT COMPENSATION FOR OFFICERS AND KEY EXECUTIVES IS DETERMINED BY THE BOARD AND INCLUDES ANALYZING THE COMPENSATION OF SIMILAR POSITIONS AT COMPARABLE ORGANIZATIONS, WITH CONSIDERATION OF BACKGROUND, EXPERIENCE, EDUCATION, PERFORMANCE, AND THE FINANCIAL CONDITION OF THE ORGANIZATION.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

NO OTHER DOCUMENTS AVAILABLE TO THE PUBLIC.

FORM 990, PART IX, LINE 11G OTHER FEES FOR SERVICES

	(A) <u>TOTAL</u>	(B) PROGRAM SERVICES	(C) MANAGEMENT & GENERAL	(D) FUND- RAISING
BANK FEES	6,992.	1,468.	5,393.	131.
FOREIGN EXCHANGE FEE	1,155.	972.	180.	3.
PAYROLL FEES	14,824.	8,855.	1,729.	4,240.

Name of the organization

ANIMAL EQUALITY

Employer identification number

47-2420444

FORM 990, PART IX, LINE 11G (CONTINUED) OTHER FEES FOR SERVICES

		(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT & GENERAL	(D) FUND- RAISING
PROFESSIONAL FEES	TOTAL \$	235,023. 257,994.	207,897. \$ 219,192.	8,177. \$ 15,479.	18,949. \$ 23,323.