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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

AI	or the	2012 calendar year, or tax year beginning $$	nding J	UN 30, 2013				
В	Check if applicable:	C Name of organization		D Employer identific	ation number			
	Address change	ANIMAL WELFARE INSTITUTE						
	Name change	Doing Business As		13-56	555952			
	Initial return		Room/suite	E Telephone number				
	Termin- ated	900 PENNSYLVANIA AVE S.E.		202 3	337 2332			
	Amende return	City, town, or post office, state, and zir code		G Gross receipts \$	7,797,751.			
	Applica-	WASHINGTON, DC 20003		H(a) Is this a group return				
	pending	F Name and address of principal officer: CATHT DISS		for affiliates?	Yes X No			
		SAME AS C ABOVE		H(b) Are all affiliates incl				
		npt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) o	r 527		list. (see instructions)			
		: ► WWW.AWIONLINE.ORG		H(c) Group exemption				
		rganization: X Corporation Trust Association Other	L Year	of formation: 1901 M	State of legal domicile: DC			
	art I	Summary	T 7777 A	חם חטם כווספו	PRINC OF			
ce	1 B	riefly describe the organization's mission or most significant activities: $\overline{ ext{TO}}$ $\overline{ ext{AL}}$	TEVIA	TE THE SUFFI	ERING OF			
Activities & Governance	_	theck this box if the organization discontinued its operations or dispos	ed of more	than 25% of its net as	sets.			
Ver		lumber of voting members of the governing body (Part VI, line 1a)			7			
Ĝ		lumber of independent voting members of the governing body (Part VI, line 1b)			6			
oğ y		otal number of individuals employed in calendar year 2012 (Part V, line 2a)			40			
/itie	1	otal number of volunteers (estimate if necessary)			10			
듷		otal unrelated business revenue from Part VIII, column (C), line 12			0.			
•		let unrelated business taxable income from Form 990-T, line 34			0.			
				Prior Year	Current Year			
9	8 0	Contributions and grants (Part VIII, line 1h)		3,388,254.	5,456,563.			
Revenue	1	rogram service revenue (Part VIII, line 2g)		0.	0.			
3eV	1	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		186,785.	456,094.			
ш	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		52,103.	45,763.			
		otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,627,142.	5,958,420.			
	L	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		243,374.	249,250.			
		Benefits paid to or for members (Part IX, column (A), line 4)	0.000.0000	1,971,107.	2,013,578.			
es	15 9	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.			
Expenses	16a F	Professional fundraising fees (Part IX, column (A), line 11e)		0.				
Exp	Ь Т	otal faticitation g oxpositors (: a.e. is it sees that (2)) miss and		2,579,618.	2,570,080.			
_	11/ (Other expenses (Part IX, column (A), lines 11a·11d, 11f·24e)		4,794,099.	4,832,908.			
		otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		-1,166,957.	1,125,512.			
<u> 8</u>	19 F	Revenue less expenses. Subtract line 16 from line 12		ginning of Current Year	End of Year			
Net Assets or	20 1	otal assets (Part X, line 16)		13,619,470.	15,186,391.			
ASS	21 1	otal liabilities (Part X, line 16)		81,074.	34,620.			
Net.	22	Net assets or fund balances. Subtract line 21 from line 20		13,538,396.	15,151,771.			
	art II	Signature Block						
Un	der penal	ties of perjury, I declare that I have examined this return, including accompanying schedule:	s and staten	nents, and to the best of m	y knowledge and belief, it is			
tru	e. correct	, and complete. Declaration of preparer (other than officer) is based on all information of wh	nich prepare	r has any knowledge.				
		The state of the s						
Sig	gn	Signature of officer		Date				
Не	1	CATHY LISS, PRESIDENT						
_		Type or print name and title		Date / In I	DTIN			
		Print/Type preparer's name Preparer's signature		Date Check [PTIN			
Pa		RICHARD TERRANO		self-employ				
	eparer	Firm's name MARKS PANETH & SHRON LLP		/ / Firm's EIN	11-3518842			
Us	e Only	Firm's address 685 THIRD AVENUE		Dh 2	12 503-8800			
_		NEW YORK, NY 10017		Phone no. 2	X Yes No			
Ma	ay the IF	S discuss this return with the preparer shown above? (see instructions)			TES [140			

Form 990 (2012)

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Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? X 1 If "Yes," complete Schedule A X 2 Is the organization required to complete Schedule B, Schedule of Contributors? 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for Х 3 public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect X 4 during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or 5 Х similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to 6 X provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete X 8 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 counseling, debt management, credit repair, or debt negotiation services? X 9 If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent X 10 endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, X 11a Part VI b Did the organization report an amount for investments · other securities in Part X, line 12 that is 5% or more of its total Х 11b assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total X 11c assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in X 11d Part X, line 16? If "Yes," complete Schedule D, Part IX X e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses X 11f the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X 12a Schedule D, Parts XI and XII b Was the organization included in consolidated, independent audited financial statements for the tax year? X 12b If "Yes," and if the organization answered "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 13 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a **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 Х 14b or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization 15 X or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals 16 X 16 located outside the United States? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17 X 17 column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 18 X 18 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19 X 19 complete Schedule G, Part III X 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

ANIMAL WELFARE INSTITUTE Page 4 Form 990 (2012) Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the Х 21 United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, 22 X 22 column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current 23 and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete X 23 Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete X 24a Schedule K. If "No", go to line 25 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 24c any tax-exempt bonds? 24d d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a Х 25a disqualified person during the year? If "Yes," complete Schedule L, Part I b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete X 25b Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified 26 X person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member X 27 of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a **b** A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation X 30 contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? 31 31 Х If "Yes." complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 X 32 Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 Х 33 sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and 34 Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? Х 36 If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37

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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Note. All Form 990 filers are required to complete Schedule O

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13-5655952 ANIMAL WELFARE INSTITUTE Form 990 (2012) Page 5 Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V Yes No 29 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 0 1b 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? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return ________2a X 2b b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X За 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. X 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?..... 5b c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit Х 6a any contributions that were not tax deductible as charitable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts 6b were not tax deductible? Organizations that may receive deductible contributions under section 170(c). X 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? 7a **7**b b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tanglble personal property for which it was required X 7c to file Form 8282? 7e e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? **7**f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7g g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? ... 7h h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting 8 organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. 9a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9b Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders **b** Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? Section 501(c)(29) qualified nonprofit health insurance issuers. 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.
b 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

c Enter the amount of reserves on hand

14a Did the organization receive any payments for indoor tanning services during the tax year?
 b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

X

13b

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.

	to mine day as, or the below, december the encounterances, proceedings in carried and a continuous new								
	Check if Schedule O contains a response to any question in this Part VI			X					
Sec	tion A. Governing Body and Management								
		·	Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year								
	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	1							
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?	2		Х					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision								
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X					
5	5 Did the organization become aware during the year of a significant diversion of the organization's assets?								
6	Did the organization have members or stockholders?	6		Х					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	-							
	more members of the governing body?	7a		Х					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or								
	persons other than the governing body?	7b		X					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
а	The governing body?	8a	Х						
b	Each committee with authority to act on behalf of the governing body?	8b	Х						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			l					
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)								
			Yes						
	Did the organization have local chapters, branches, or affiliates?	10a		X					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,								
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	37						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	10000000000					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.								
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	ļ					
	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	12c	X	-					
13	Did the organization have a written whistleblower policy?	13	X						
14	Did the organization have a written document retention and destruction policy?	14	X						
15	Did the process for determining compensation of the following persons include a review and approval by independent								
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		v						
a	The organization's CEO, Executive Director, or top management official	15a	X						
þ	Other officers or key employees of the organization	15b	X						
40	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).								
10a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	4.0		Х					
	taxable entity during the year?	16a		Λ					
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	4.01	*******						
	exempt status with respect to such arrangements?	16b							
	tion C. Disclosure	1 777	T475.7	T.7.7					
17	List the states with which a copy of this Form 990 is required to be filed CA, DC, MN, NJ, NY, PA, CT, MI, NO			, W I					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	avallab	ie						
	for public inspection. Indicate how you made these available. Check all that apply.								
	Own website Another's website W Upon request Other (explain in Schedule O)	1.0							
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and the contract of the contract	ia finai	ncial						
00	statements available to the public during the tax year.								
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person of	ation: ▶	_						
	OATHY LISS - 202 337 2332 900 PENNSYLVANIA AVE SE, WASHINGTON, DC 20003								
23200									

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

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

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

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

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

Check this box if neither the organization ne		orga	niza			npei	ısa			
(A)	(B)	(C) Position (do not check more than one						(D)	(E)	(F)
Name and Title	Average					than		Reportable	Reportable compensation from related	Estimated
	hours per	box	box, unless person is both an officer and a director/trustee)				h an tee)	compensation		amount of other
	week	1			1 1 1		,	from the	organizations	compensation
	(list any hours for	Individual trustee or director						1 .	(W-2/1099-MISC)	from the
	related	8	Stee			nsate		(W-2/1099-MISC)	(organization
	organizations	trust	Institutional frustee		88	ad mo		(1121000111100)		and related
	below	idual	ution	is di	Key employee	ester	55			organizations
	line)	Indi	insti	Officer	Key	Highest compensated employee	Form			
(1) CATHY LISS	40.00							İ		0 073
PRESIDENT		Х	<u> </u>	Х		_		95,673.	0.	8,873.
(2) CYNTHIA WILSON	2.00									
CHAIR/VICE PRESIDENT		X		X		<u> </u>		0.	0.	0.
(3) BARBARA K. BUCHANAN	2.00									
SECRETARY		X		X				0.	0.	0.
(4) MARY LEE JENSVOLD, PH. D.	2.00									_
DIRECTOR		X			_			0.	0.	0.
(5) CHARLES M. JABBOUR CPA	2.00									
TREASURER		X		X			L	0.	0.	0.
(6) JOHN BOYD, JR.	2.00									
DIRECTOR		X						- 0.	0.	0.
(7) MICHELLE WALTER	2.00		1							
DIRECTOR		X					L.	0.	0.	0.
(8) SUSAN MILLWARD	36.00									
EXECUTIVE DIRECTOR				X	<u> </u>	_		58,827.	0.	5,529.
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	t VII Section A. Officers, Directors, Trus		ploy	/ees			ghe	st C	1		T
	(A)	(B)	(C)						(D)	(E)	(F)
	Name and title	Average hours per week	box	, unle	ss pe	more	than is bot or/trus	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
		(list any	irector						the	organizations	compensation from the
		related	8 or d	15 15 15			rsated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	organization
		organizations	1 frust	草		86	compe		(= 100000)		and related
		below line)	Individual frustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	omer			organizations
			느	=	-	2	T 85	-	110-10-11		
	4.005.0	1		-			\vdash				
			1	\vdash	_		-	-			
							\vdash				
			\vdash	\vdash							
]	_	╁		-				
1 h	Sub-total						•	<u></u>	154,500.	0	14,402.
	Total from continuation sheets to Part V								0.	0	
d	Total (add lines 1b and 1c)								154,500.		14,402.
2	Total number of individuals (including but recompensation from the organization	not limited to tl	nose	e list	ed a	bov	e) w	ho r	received more than \$100	0,000 of reportable	C
	compensation from the organization		_							100	Yes No
3	Did the organization list any former officer										3 X
4	line 1a? If "Yes," complete Schedule J for any individual listed on line 1a, is the s										3 4
	and related organizations greater than \$15										4 X
5	Did any person listed on line 1a receive or									ridual for services	
	rendered to the organization? If "Yes," con	nplete Schedu	le J	for s	uch	per	son				5 X
-	tion B. Independent Contractors								AL -A Ab	#100 000 of compar	actics from
1	Complete this table for your five highest control the organization. Report compensation for										isation from
	(A)	the Galeridar	rear	GIIU	iiig v	AALEIT	OI V	A I LE I I	(B)	your.	(C)
	Name and business					S			Description of	services	Compensation
	DIMURO GINSBERG PC, 1101 KING STREET, SUITE 610, ALEXANDRIA, VA 22314 LEGAL									174,113.	
50.	ITE 010, ALEXANDRIA, V	A 22314		- 33					пески		1/1/110
-			_					- 50			
			-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							212
2	Total number of independent contractors \$100,000 of compensation from the organ		not l	limite	ed to	the	ose l	iste	d above) who received r	more than	
	4 100,000 of compensation from the organ	TEASION P	_			_		_		- Institute	- 000

Part VIII

Statement of Revenue

Check if Schedule O contains a response to any question in this Part VIII (C) (D) Revenue excluded from tax under sections 512, 513, or 514 Related or Unrelated Total revenue exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1a 1 a Federated campaigns 1b **b** Membership dues 10 c Fundraising events d Related organizations 1d 1e e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above 1f 5,456,563 14,794 Noncash contributions included in lines 1a-1f: \$ 5,456,563 h Total. Add lines 1a-1f **Business Code** Program Service Revenue 2 a f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 205,432. 205,432 other similar amounts) 4 Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 78,706 6 a Gross rents 33,758 **b** Less: rental expenses 44.948. c Rental income or (loss) 44,948. 44,948 d Net rental income or (loss) ... 7 a Gross amount from sales of (i) Securities (ii) Other 2,056,235. assets other than inventory b Less: cost or other basis 1,805,573. and sales expenses c Gain or (loss) 250,662. 250,662. 250,662 d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ _____ of contributions reported on line 1c). See Part IV, line 18a b Less: direct expenses _____b c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19a b Less: direct expenses _____b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowancesa b Less: cost of goods sold _____ b c Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 815. 511130 815 11 a MISCELLANEOUS b d All other revenue 815 e Total. Add lines 11a-11d 501.857. 5,958,420. ٥ Total revenue. See instructions. Form 990 (2012) Form 990 (2012) ANIMAL WELFARE INSTITUTE
Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a respon				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and	107 700	107 722		
	organizations in the United States. See Part IV, line 21	187,722.	187,722.		
2	Grants and other assistance to individuals in	3,808.	3,808.		
3	the United States. See Part IV, line 22 Grants and other assistance to governments,	3,000.	3,000.		
3	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	57,720.	57,720.		1.00
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	160,437.	136,372.	16,044.	8,021.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,513,456.	1,448,193.	56,545.	8,718.
8	Pension plan accruals and contributions (include	20 101	20 010	1 505	201
	section 401(k) and 403(b) employer contributions)	32,134.	30,218.	1,595.	321.
9	Other employee benefits	173,773.	161,886.	10,202.	1,685.
10	Payroll taxes	133,778.	125,890.	6,681.	1,207.
11	Fees for services (non-employees):				
а	Management	270,402.	270,402.		
b	Legal	17,750.	210,402.	17,750.	
	Accounting	51,000.	51,000.	17,750.	
	Lobbying September 17	31,000.	31,000.		
	Professional fundraising services. See Part IV, line 17	11.		11.	
f	Other. (If line 11g amount exceeds 10% of line 25,	+ - •			
9	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion	29,322.	21,019.	180.	8,123.
13	Office expenses				•
14	Information technology				
15	Royalties				
16	Occupancy	110,588.	76,864.	33,370.	354.
17	Travel				
18	Payments of travel or entertainment expenses		F-90.7500		
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	66.005	FO (10	5 062	2 522
22	Depreciation, depletion, and amortization	66,205.	58,610.	5,063.	2,532.
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	CONSULTANTS	720,763.	720,763.		
b	CONFERENCES & TRAVEL	651,289.	648,376.	2,913.	
c	TELEPHONE & OFFICE	165,448.	142,638.	10,360.	12,450.
d	PRINTING & PUBLICATIONS	162,983.	158,695.	69.	4,219.
е	All other expenses	324,319.	264,658.	54,619.	5,042.
25	Total functional expenses. Add lines 1 through 24e	4,832,908.	4,564,834.	215,402.	52,672.
26	Joint costs. Complete this line only if the organization	1			
	reported in column (B) joint costs from a combined		1		
	educational campaign and fundraising solicitation.			1	
	Check here If following SOP 98-2 (ASC 958-720)				

EITEA		Balance Sheet Check if Schedule O contains a response to any	/ questi	on in this Part X			
		Officer in Correction Countries a response to any	4000		(A) Beginning of year		(B) End of year
1		Cash - non-interest-bearing			194,483.	1	322,762.
2		Savings and temporary cash investments			1,163,584.	2	1,097,631.
3		Pledges and grants receivable, net				3	
4		Accounts receivable, net			42,057.	4	1,186,963.
5		Loans and other receivables from current and fo		13			
		trustees, key employees, and highest compensations					
		Part II of Schedule L		5			
6	3	Loans and other receivables from other disquali		D			
		section 4958(f)(1)), persons described in section	4958((3)(B), and contributing			
		employers and sponsoring organizations of sec		12			
		employees' beneficiary organizations (see instr).				6	
7		Notes and loans receivable, net			7		
8		Inventories for sale or use		1		8	
, 8		Prepaid expenses and deferred charges				9	
10		Land, buildings, and equipment: cost or other	1				
		basis. Complete Part VI of Schedule D	10a	6,308,137.			
		Less: accumulated depreciation		560,547.	5,840,725.	10c	5,747,590.
11		Investments - publicly traded securities			6,378,621.	11	6,831,445.
12		Investments - other securities. See Part IV, line		12			
13	3	Investments - program-related. See Part IV, line	i		13		
14	1	Intangible assets		14			
15		Other assets. See Part IV, line 11		15			
16		Total assets. Add lines 1 through 15 (must equ	13,619,470.	16	15,186,391.		
17		Accounts payable and accrued expenses	73,074.	17	23,230.		
18		Grants payable		18			
19	9	Deferred revenue		1		19	
20		Tax-exempt bond liabilities		T T		20	
		Escrow or custodial account liability. Complete		T T		21	
22		Loans and other payables to current and forme		1	2000000		
21		key employees, highest compensated employe					
		Complete Part II of Schedule L				22	11111111111111111111111111111111111111
23	3	Secured mortgages and notes payable to unrel				23	
24	4	Unsecured notes and loans payable to unrelate	d third	oarties		24	
25	5	Other liabilities (including federal income tax, pa	ayables	to related third			
		parties, and other liabilities not included on line	s 17 · 24)	. Complete Part X of			
		Schedule D			8,000.	25	11,390.
26	6	Total liabilities, Add lines 17 through 25			81,074.	26	34,620.
		Organizations that follow SFAS 117 (ASC 95)	B), chec	k here ▶ X and			
3		complete lines 27 through 29, and lines 33 ar	nd 34 .				
27	7	Unrestricted net assets			13,039,831.	27	14,691,690.
28	8	Temporarily restricted net assets			398,565.		360,081.
29	9				100,000.	29	100,000.
5		Organizations that do not follow SFAS 117 (A	ASC 958	3), check here 🕨 📖 📗			
5		and complete lines 30 through 34.					
30	0	Capital stock or trust principal, or current funds				30	· · · · · · · · · · · · · · · · · · ·
2 31	1	Paid-in or capital surplus, or land, building, or e				31	
27 28 29 30 31 32 32	2	Retained earnings, endowment, accumulated in	ncome,	or other funds	40 500 000	32	15 151 051
33	3	Total net assets or fund balances			13,538,396.	33	15,151,771.
34	4	Total liabilities and net assets/fund balances			13,619,470.	34	15, 186, 391.

orm	990 (2012) ANIMAL WELFARE INSTITUTE	13-56	55952	Pag	ge 12
	Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
R5c/)+10					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,958		
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,832		
3	Revenue less expenses. Subtract line 2 from line 1	3	1,125		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	13,538		
5	Net unrealized gains (losses) on investments	5	487	, 8	63.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
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,		0.00	erc 244	1201-27
	column (B))	10	15,151	1,7	71.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		-		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	0000000000	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	50085600000
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	te basis,			
	consolidated basis, or both:				
	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				
	review, or compilation of its financial statements and selection of an independent accountant?		2c	<u> X</u>	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	ired audit			

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form 990 (2012)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

Inspection

Employer identification number

			ANIMAL	WELFARE INST	ITUTE				- 1	1	3-5655	952	
: 6	rt I	Reason		ity Status (All organiz		st complet	e this par	t.) See inst	ructions.				
he	organi	zation is not a	private foundation	because it is: (For lines 1	through 1	11, check	only one b	oox.)					
1		A church, cor	nvention of churches	s, or association of churc	ches desci	ribed in se	ction 170	(b)(1)(A)(i)					
2		A school des	cribed in section 17	0(b)(1)(A)(ii). (Attach Sci	hedule E.)								
3		A hospital or	a cooperative hospi	tal service organization o	described i	in section	170(b)(1)	(A)(iii).					
4				operated in conjunction					(b)(1)(A)(ii	i). Enter t	the hospital	's nam	ıe,
		city, and state											
5		An organizati	on operated for the	benefit of a college or ur	niversity ov	vned or op	erated by	a governr	nental uni	describ	ed in		
			(b)(1)(A)(iv). (Comple										
6				ent or governmental unit	described	d in sectio	n 170(b)(1	1)(A)(v).					
_	X			eives a substantial part					r from the	general	public desc	ribed i	n
•		=	b)(1)(A)(vi). (Comple		pp	-,, ,, -,,, -,	g - 1 - 1 - 1 - 1 - 1			3			
8		•		ection 170(b)(1)(A)(vi). (Complete	Part II.)							
9	一			eives: (1) more than 33 1			om contri	ibutions, m	nembershi	o fees, a	nd aross rea	ceipts	from
•				nctions - subject to certa									
				axable income (less sect									
					ion on ta	x) 110111 0a	311103303 (acquired b	y tric orga	inzation	artor barro c	.0, .0.	٥.
10			509(a)(2). (Complete	perated exclusively to te	et for publi	ic eafaty S	See sectio	n 500(a)(d	1)				
	=			perated exclusively for the						v out the	nurnoses o	of one	or
11				ations described in section									0,
				organization and comple				_/. OCC 300	J.1011 000 (5 ,(5), 5,1		·	
		a Type I				nctionally l			ayT 🔲 t	e III - No	n-functional	lv inte	orated
			•	at the organization is not		-	_		• • •				_
е				han one or more publicly									
f				tten determination from t						<i>γ</i> (α)(1) οι	00011011 000	,(=,(=,	
		-		nis box									
_			•	organization accepted ar							*************		. —
g				lirectly controls, either al							1.	Yes	No
		the gov	erning body of the s	upported organization?	one or tog	001101 11101	poroono	300011300	(, a	, 50.01.	11g(i)	1	110
				n described in (i) above?									
			·	person described in (i) o									
h				about the supported or									
"		Flovide tile i	Ollowing information	about the supported on	garnzanon	(3).							
			40.50	/110 T f i ti	(lv) is the c	organization	(v) Did vo	u notify the	(vi) Is	the	(vil) Amoun	t of mo	notanı
(1)		of supported inization	(li) ElN	(III) Type of organization (described on lines 1-9		sted in your		tion in col.	organization (I) organiz	on in col.	(vil) Amoun	port	iletary
	uiga	illization		above or IRC section	governing	document?	(I) of you	r support?	U.S	.?		Port	
				(see Instructions))	Yes	No	Yes	No	Yes	No	1		
			1										
_								<u> </u>					
									1				
			<u> </u>										
T	-1												

Schedule A (Form 990 or 990-EZ) 2012 ANIMAL WELFARE INSTITUTE

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

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

Sec	ction A. Public Support				7				
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not					E 45 65 60	10006770		
	include any "unusual grants.")	2451267.	2774912.	4915780.	3388256.	5456563.	18986778.		
2	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf								
3	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge						100000000		
4	Total. Add lines 1 through 3	2451267.	2774912.	4915780.	3388256.	5456563.	18986778.		
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)						2937097.		
6	Public support. Subtract line 5 from line 4.						16049681.		
Se	ction B. Total Support								
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total		
7	Amounts from line 4	2451267.	2774912.	4915780.	3388256.	5456563.	18986778.		
8	Gross income from interest,								
	dividends, payments received on				:				
	securities loans, rents, royalties								
	and income from similar sources	231,174.	154,073.	152,115.	142,789.	205,432.	885,583.		
9	Net income from unrelated business								
	activities, whether or not the								
	business is regularly carried on				172				
10	Other income. Do not include gain								
	or loss from the sale of capital								
	assets (Explain in Part IV.)								
11	Total support. Add lines 7 through 10						19872361.		
	Gross receipts from related activities					12	5,151.		
13	First five years. If the Form 990 is fo	r the organization's	s first, second, thi	rd, fourth, or fifth t	ax year as a sectio	on 501(c)(3)			
	organization, check this box and sto	p here			***********		<u> </u>		
Se	ction C. Computation of Pub	lic Support Pe	rcentage				00.76		
	Public support percentage for 2012					14	80.76 %		
15	Public support percentage from 201	1 Schedule A, Part	II, line 14			15	60.27 %		
16	a 33 1/3% support test - 2012. If the								
	stop here. The organization qualifies								
1	o 33 1/3% support test - 2011. If the								
	and stop here. The organization qua								
17	a 10% -facts-and-circumstances tes	st - 2012. If the org	ganization did not	check a box on lin	e 13, 16a, or 16b,	and line 14 is 10%	6 or more,		
	and if the organization meets the "fa								
	meets the "facts-and-circumstances"								
1	b 10% -facts-and-circumstances tes								
	more, and if the organization meets t								
	organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization								
18	Private foundation. If the organization	on did not check a	box on line 13, 16	Sa, 16b, 17a, or 17					
					Sch	edule A (Form 99	0 or 990-EZ) 2012		

Schedule A (Form 990 or 990·EZ) 2012 Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to
qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
•	are not an unrelated trade or bus-						
	iness under section 513						

4	Tax revenues levied for the organization's benefit and either paid to					A	
	· · · · · · · · · · · · · · · · · · ·						
	or expended on its behalf				 		
5	The value of services or facilities	I					
	furnished by a governmental unit to	I					
	the organization without charge						-
	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and	Į	-				
	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		1				
	amount on line 13 for the year						
C	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar sources			L.`			
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital	1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
42	assets (Explain in Part IV.)						
	Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is fo		a first second thi	rd fourth or fifth i	lay year as a sect	on 501(c)(3) organi	zation
14							zation,
80	check this box and stop here ction C. Computation of Publ						
	Public support percentage for 2012 (column (f)		15	%
						16	
16	Public support percentage from 201 ction D. Computation of Inve					1 10 1	
						17	%
17							<u>%</u>
18							
198	33 1/3% support tests - 2012. If the						
	more than 33 1/3%, check this box a						
-	33 1/3% support tests - 2011. If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	<u>on did not check a</u>	a box on line 14, 19	a, or 19b, check t	tnis box and see i	nstructions	

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

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

See separate instructions.

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

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

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

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

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

•	Section 501(c)(4), (5), or (6) organiz	ations: Complete Part III.			
Nan	ne of organization			Empl	oyer identification number
	ANIMAL	WELFARE INSTITUT	E		13-5655952
	art I-A Complete if the or	ganization is exempt und	der section 501(c) or is a section 527 o	rganization.
3	Provide a description of the organ Political expenditures Volunteer hours			►\$	
		ganization is exempt und			
1	Enter the amount of any excise ta	x incurred by the organization un	der section 4955		
2	Enter the amount of any excise ta	x incurred by organization manag	ers under section 495	i5 > \$	
3	If the organization incurred a secti	on 4955 tax, did it file Form 4720	for this year?		
	Was a correction made?				Yes No
b	If "Yes," describe in Part IV.				1/01
337777	art I-C Complete if the or				
	Enter the amount directly expende				
2	Enter the amount of the filing orga				
	exempt function activities				
3	Total exempt function expenditure				
	line 17b				
4	Did the filing organization file Form	•			
5	Enter the names, addresses and a made payments. For each organiz contributions received that were political action committee (PAC). I	cation listed, enter the amount pa promptly and directly delivered to	id from the filing organ a separate political or	nization's funds. Also enter th ganization, such as a separa	ne amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2012

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period										
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total				
2a	Lobbying nontaxable amount	348,471.	347,359.	288,815.	391,645.	1,376,290.				
Ь	Lobbying ceiling amount (150% of line 2a, column(e))					2,064,435.				
С	Total lobbying expenditures	91,817.	32,202.	188,123.	98,616.	410,758.				
d	Grassroots nontaxable amount	87,118.	86,840.	72,204.	97,911.	344,073.				
е	Grassroots ceiling amount (150% of line 2d, column (e))					516,110.				
f	Grassroots lobbying expenditures	11,121.	6,427.	26,871.	16,811.	61,230.				

Schedule C (Form 990 or 990-EZ) 2012

Schedule C (Form 990 or 990-EZ) 2012 ANIMAL WELFARE INSTITUTE 13-5655952 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	r each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description				(b)	
f the	e lobbying activity.	Yes	No	•	Amo	unt
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:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					25
f	Grants to other organizations for lobbying purposes?					
9	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?	322222000000000000000000000000000000000				
j	Total. Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		101			
a	t III-A Complete if the organization is exempt under section 501(c)(4), section 504(c)(6)	on 501(c)(5), o	r se	ction	
	501(c)(6).		-		Yes	No
	M			1	100	110
	Were substantially all (90% or more) dues received nondeductible by members?					
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	on 501(c)(5), o	2 3 r se		ne 3, i
2 3 Par	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? TIMED Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	on 501(c I "No," O)(5), o R (b)	2 3 r se		ne 3, i
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SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

ANIMAL WELFARE INSTITUTE

Employer identification number 13-5655952

organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other a graph of the funds are the organization to (during year) Aggregate contributions to (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization (sheek all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easements day of the tax year. Total number of conservation easements on a certified historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is located Number of s	□ No
Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate value at end of year 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all donors and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to 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., recreation or education) □ Preservation of a natural habitat □ Preservation of a certified historic structure □ Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement aday of the tax year. a Total number of conservation easements on a certified historic structure listed in the National Register 3 Number of conservation easements on a certified historic structure included in (a) 2c 2c 3c	□ No
Aggregate contributions to (during year) Aggregate value at end of year Aggregate value at end of year Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all donors and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yee" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area and a complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement day of the tax year. Total number of conservation easements 2a 2b 2b 2c 2d 2d 2d 2d 2d 2d 2d	No No
Aggregate grants from (during year) 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization (check all that apply). 1 Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land are impreservation of open space 2 Complete lines 2 at through 2d if the organization held a qualified conservation contribution in the form of a conservation easement day of the tax year. 8 Total number of conservation easements 9 Total acreage restricted by conservation easements 1 Conservation easements on a certified historic structure included in (a) 2 All the dat the End 2 and 1 Authors of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 1 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 2 Number of states where property subject to conservation easement is located	No No
Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all donors and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land are impressed in the form of poen space Preservation of open space Preservation of open space Preservation of conservation easements Preservation Preservation Preservation easements Preservation Preserv	No No
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and section 170(h)(4)(B)(ii)? Ye In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance shape to the conservation of the conservation o	
	No
	et, and
include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounti	
conservation easements.	
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.	
Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	
1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet wo	s of art,
historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provi-	
the text of the footnote to its financial statements that describes these items.	
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works	e, in Part XIII,
treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the foll	e, in Part XIII, art, historical
relating to these items:	e, in Part XIII, art, historical
(i) Revenues included in Form 990, Part VIII, line 1	e, in Part XIII, art, historical wing amounts
(ii) Assets included in Form 990, Part X	e, in Part XIII, art, historical wing amounts
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide	e, in Part XIII, art, historical wing amounts
the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	e, in Part XIII, art, historical wing amounts
	e, in Part XIII, art, historical wing amounts
a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X	e, in Part XIII, art, historical wing amounts

		ellections of A				n Oth -	· Cimila: A	200	0/4	- ray	ع ب
	t III Organizations Maintaining C						•			'	—
3	Using the organization's acquisition, accession	on, and other record	ls, check	any of the	following that	are a sig	inificant use o	of its c	ollection	items	
	(check all that apply):	_	<u> </u>								
а	Public exhibition	d			hange progra						
b	Scholarly research	е		Other							
C	Preservation for future generations							_			
4	Provide a description of the organization's co							n Part	XIII.		
5	During the year, did the organization solicit or								ı		
·	to be sold to raise funds rather than to be ma								Yes		No
Par	Escrow and Custodial Arrang reported an amount on Form 990, Par	-	ete if the	organizatio	n answered "	Yes" to F	Form 990, Par	t IV, lir	ne 9, or		
1a	Is the organization an agent, trustee, custodia	an or other intermed	diary for d	ontribution	s or other as	sets not i	ncluded			_	
	on Form 990, Part X?							L	Yes		No
b	If "Yes," explain the arrangement in Part XIII a	and complete the fo	llowing to	able:							
									Amount		
C	Beginning balance						1c				
d	Additions during the year						1d				
e Distributions during the year											
	f Ending balance1f										
	Did the organization include an amount on Form 990, Part X, line 21?										No
b	b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII										
Par	1 V Endowment Funds. Complete if	the organization an	swered '	'Yes" to Fo							
		(a) Current year	(b) Pr	ior year	(c) Two year	s back (d) Three years	back	(e) Four	years ba	ack
1a	Beginning of year balance										
b	Contributions										
C	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses								_		
g	End of year balance										
2	Provide the estimated percentage of the curr	ent year end baland	e (line 1ç	g, column (a	a)) held as:						
а	Board designated or quasi-endowment		%								
b	Permanent endowment	%									
¢	Temporarily restricted endowment ▶	%									
	The percentages in lines 2a, 2b, and 2c shou	ld equal 100%.									
3a	Are there endowment funds not in the posse	ssion of the organiz	ation tha	t are held a	ınd administe	red for th	e organizatio	n	-		
	by:									Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
b	If "Yes" to 3a(ii), are the related organizations	listed as required o	on Sched	ule R?					3ь		
4	Describe in Part XIII the intended uses of the										
201	rt VI Land, Buildings, and Equipm	ent. See Form 990), Part X,	line 10.							
	Description of property	(a) Cost or obasis (investr	- 1		or other (other)		cumulated reciation		(d) Bool	(value	
1a	Land	2,459,	021.						2,459	7,02	1.
b	Buildings			3,84	9,116.	5	60,547		3,28	3,56	9.
C	Leasehold improvements										
d	Equipment										
	Other										
	I. Add lines 1a through 1e. (Column (d) must e		X. colun	nn (B), line	10(c).)		>		5,74	7,59	0.

liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Sche	dule D (Form 990) 2012 ANIMAL WELFARE INSTITUTE			13-5	655952 Pag	ge 4
Pai	t XI Reconciliation of Revenue per Audited Financial Stateme	nts With				
1	Total revenue, gains, and other support per audited financial statements			1	6,446,28	3.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains on investments	2a	487,863.			
b	Donated services and use of facilities					
C	Recoveries of prior year grants					
d	Other (Describe in Part XIII.)					
е	Add lines 2a through 2d			2e	487,86	3.
3	Subtract line 2e from line 1			3	5,958,42	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
ь	Other (Describe in Part XIII.)					
С	Add lines 4a and 4b			4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	5,958,42	0.
Pa	T XII Reconciliation of Expenses per Audited Financial Statem			Retu	rn	
1	Total expenses and losses per audited financial statements			1	4,832,90	8.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	2a				
b	Prior year adjustments					
c	Other losses					
d	Other (Describe in Part XIII.)	1 1				
е	Add lines 2a through 2d			2e		0.
3	Subtract line 2e from line 1			3	4,832,90	8.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b				
C	Add lines 4a and 4b			4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	4,832,90	8.
Pa	1 XIII Supplemental Information					
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II e 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to				b; Part V, line 4; Pa	art
		100	24178 E			
						-
		110000000000000000000000000000000000000				

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

2012 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

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				tside the United States. Compl	ata if the avera	13-565595	02
000000	to Form 990, Pa		ictivities ou	iside the Officed States. Compi	ete ii the organ	ization answered	Y es"
1			maintain record	ds to substantiate the amount of its gr	ants and other	assistance.	
				the selection criteria used to award the			Yes X No
2	For grantmakers. Desc United States.	cribe in Part V the	organization's	procedures for monitoring the use of it	s grants and ot	her assistance out	side the
3	Activities per Region. (T	he following Part	I, line 3 table ca	an be duplicated if additional space is	needed.)		
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	is a prog describe	rity listed in (d) gram service, specific type se(s) in region	(f) Total expenditures for and investments in region
				16			
_							
-							
	Sub-total	0	0	100 March 100 Ma			0.
	Total from continuation sheets to Part I	0	0				0.
C	Totals (add lines 3a and 3b)	0	0	and a second			_
	and out		· U				0.

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Page 2

ANIMAL WELFARE INSTITUTE

Schedule F (Form 990) 2012

Part II

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

valuation (book, FMV, appraisal, other) (i) Method of (h) Description of non-cash assistance ö ö o. 0 (g) Amount of non-cash assistance Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by cash disbursement (f) Manner of of cash grant 8,000 26,940 10,000 7,550 (e) Amount the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter AIRCRAFT TO BE USED SHIPPING A DONATED (d) Purpose of COMPANION ANIMAL FOR COMBATTING grant PREPARING AND MARINE MAMMAL MARINE MAMMAL CONSERVATION. CONSERVATION. CARE. UNITED KINGDON (c) Region ARGENTINA Enter total number of other organizations or entities BOSNIA ISRAEL and EIN (if applicable) (b) IRS code section (a) Name of organization 3 N

SEE PART V FOR COLUMN (D) DESCRIPTIONS

Schedule F (Form 990) 2012

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Page 3

ANIMAL WELFARE INSTITUTE

Schedule F (Form 990) 2012

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

Part III can be duplicated if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other)				9		Schedule F (Form 990) 2012
(g) Description of non-cash assistance						Schedu
(f) Amount of non-cash assistance				,N		
(e) Manner of cash disbursement						
(d) Amount of cash grant						
(c) Number of recipients						
(b) Region						
(a) Type of grant or assistance (b) Region						

	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	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 file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	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 Certain Foreign Corporations. (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Yes	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 Foreign Partnerships. (see Instructions for Form 8865)	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 file Form 5713, International Boycott Report. (see Instructions for Form 5713)	Yes	X No

Schedule F (Form 990) 2012

Schedule F (Form 990) 2012 ANIMAL WELFARE INSTITUTE	13-5655952	Page 5
Part V Supplemental Information		
Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line		
amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (acco		II, column
	TOTTICATOTI.	
PART II, COLUMN (D):		
REGION: ISRAEL		
(D) PURPOSE OF GRANT: PREPARING AND SHIPPING A DONATED AI	RCRAFT TO BE	
USED FOR COMBATTING ILLEGAL WILDLIFE POACHING FOR THE KEN	YA WILDLIFE	
SERVICE.		
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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.

2012
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

ANIMAL WELFARE INSTITUTE

Employer identification number 13–5655952

20 0000002	
FORM 990, PART VI, SECTION B, LINE 11: GOVERNING BODY IS NOT PROVIDED	
RETURN. OFFICER SIGNING THE RETURN AND EXECUTIVE DIRECTOR REVIEWS FOR	
COMPLETENESS.	
FORM 990, PART VI, SECTION B, LINE 12C: ORGANIZATION ANNUALLY REVIEWS &	
MONITORS CONFLICT OF INTEREST POLICY TO ENSURE COMPLIANCE.	
FORM 990, PART VI, SECTION B, LINE 15: THE PRESIDENT'S ANNUAL SALARY IS	
REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS.	
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:	
CA, DC, MN, NJ, NY, PA, CT, MI, NC, VA, WV, WI, MD	
FORM 990, PART VI, SECTION C, LINE 18: PROVIDES COPIES UPON REQUEST.	
FORM 990, PART VI, SECTION C, LINE 19: PROVIDES COPIES UPON REQUEST.	

2012 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 10

990

Current Year Deduction		0.	C	•	0.	0	•	0.			
							0	0		 	
Current Sec 179							U	J			
Accumulated Depreciation		135,905.	224 102	. 701 / 577	2,066.	224.	362,377.	362,377.			
Basis For Depreciation		628,067.	216/022	76501	16,530.	4,470.	3813990.	3813990.			
* Reduction In Basis					•		.0	0			
Bus % Excl											
Unadjusted Cost Or Basis		628,067.	316/923	-010	16,530.	4,470.	3813990.	3813990.			
No.		91	7 9 1		9	16					
Life		000.	:	2	000.	000.					
Method		•				•					
Date Acquired		033003	2002)))	091009	101110					
Description	BUILDINGS	BUILDIINE SS	UILDING	DIEDING	4 IMPROVEMENTS	BUILDING & BUILDING SIMPROVEMENTS	TOTAI	* GRAND TOTAL 990 PAGE 10 DEPR			
Asset No.		N	~)	Ť	S					

(D) - Asset disposed

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

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

Governments, and Individuals in the United States

OMB No. 1545-0047

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

Grants and Other Assistance to Organizations,

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	Open to Public	io io
	T Series	fical
	ō	nployer identification number
	7	er ie
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2

13-5655952 X Yes Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection Ë criteria used to award the grants or assistance?

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ANIMAL WELFARE INSTITUTE General Information on Grants and Assistance Name of the organization Parti

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	ocedures for monite Governments and	oring the use of grant Organizations in the	funds in the United • United States. Co	States. omplete if the orga	inization answered "Y	es" to Form 990, Part	IV, line 21, for any
recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	\$5,000. Part II can	be duplicated if additi	onal space is need	ed.			
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PLANUTA DATA DE LA COMPANA DE							ENICHANCE A ENTHRANCE
1506 19TH ST NW	_						ENVIRONMENTAL & ANIMAL
WASHINGTON, DC 20036	52-1040138		10,159.	0.			WELFARE NEWS.
							2012 CHRISTINE STEVENS
6 VARIOUS ORGANIZATIONS							AWARDS.
C/O 900 PENNSYLVANIA AVE S.E							2012 CHRISTINE STEVENS
WASHINGTON, DC 20003	APPLIED FOR		36,000.	0.			AWARDS
45 VARIOUS ORGANIZATIONS C/O 900 PENNSYLVANIA AVE S.E WASHINGTON DC 20003	APPLIED FOR		77.430.	0		y.	GOOD HUSBANDRY GRANTS.
2100 L STREET NW						•	INTERNATIONAL WILDLIFE
WASHINGTON, DC 20037	52-2133713		5,500.	0			TRADE.
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	and government org	anizations listed in the	e line 1 table				A

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table

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

Schedule i (Form 990) (2012)

(f) Description of non-cash assistance Part 14 Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information (e) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. THE REQUIRING TO FEATURE RESULTS OF WORK UNDERTAKEN OF GRANTS ARE AWARDED BASED ON PROPOSALS A DESCRIPTION ΒY (d) Amount of non-cash assistance 0 0 QUARTERLY NEWSLETTER. AWI MONITORS OVERSEAS GRANTEES TO PROVIDE AWI WITH 8 000 46,873 (c) Amount of cash grant ANIMAL WELFARE INSTITUTE 37 (b) Number of recipients GRANTEES ARE EXPECTED PROJECT OUTCOME AND AIE MAY CHOOSE Part III can be duplicated if additional space is needed. LINE 2: AWI ANIMAL WELFARE APPROVED GOOD HUSBANDRY GRANT (a) Type of grant or assistance SCHEDULE I, PART I, CHRISTINE STEVENS AWARD Schedule I (Form 990) (2012)
Part III Grants and Othe AFTER AWARD, ITS AWI

Page 2

13-5655952

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