Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Α	For the 2	2023 calend	dar year, or tax	year beginn	ing 10	/01	, 202	3, an	d endin	g 9/3	30	, 2	20 2024	
В	Check if ap	plicable:	С								D Employ	er identifi	ication number	
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	Initial		110001011,								541	-816-	-5085	
	Final ret	turn/terminated												
	Amend	ded return									G Gross r	eceipts \$	8,541	.,653.
	Applic	ation pending	F Name and addr	ess of principal	officer: .T	ANTS ROSE	INTHAT.			H(a) Is this a	a group return	for subord	dinates? Yes	X No
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$\overline{}$	Tax-exen	npt status:	X 501(c)(3)	501(c) ()	(insert no.)	4947(a)(1)	or	527	. IT "INO,"	attach a list	. See Instr	ructions.	
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						1	Ε.	1		H(c) Group				
K		organization:	X Corporation	Trust	Association	Other	Į.	∟ Year	of format	ion: 2010	() M	State of lec	gal domicile: C	A
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			e – add lines 8								8,828,2	119.		L,653.
	13 Gra	ants and si	milar amounts p	paid (Part IX	۲, column	(A), lines 1-3)			. 6	5,421,2	252.	8,984	1,151.
	14 Be	nefits paid	to or for member	ers (Part IX	, column	(A), line 4)								
	15 Sa	laries, othe	er compensation	ı. emplovee	benefits ((Part IX. colur	nn (A). lines	s 5-10	0)					
es			fundraising fees											
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ğ	b To	tal fundrais	sing expenses (F	⊃art IX, colu	ımn (D), I	ine 25)	1,2	279,	555.					
ш	17 Oth	her expens	es (Part IX, colu	umn (A), lin	es 11a-11	d, 11f-24e)				. 2	,068,4	100.	1,557	7,764.
	18 To	tal expense	es. Add lines 13	-17 (must e	qual Part	IX. column (A	A), line 25),				,489,6		10,541	
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절	21 To		, , , ,	- /							176,1			2,616.
			fund balances.	Subtract lin	e 21 from	line 20				. 3	3,006,7	/17.	1,006	5,455.
Pa	art II	Signatur	e Block											
Unde	er penalties o	of perjury, I dec	lare that I have exami arer (other than office	ned this return, i	including acco	ompanying schedul	es and statemen	ts, and	to the bes	t of my knowle	edge and beli	ef, it is true	e, correct, and	
com	plėte. Declar	ration of prepa	arer (other than office	r) is based on a	all informatio	n of which prepar	er has any know	vledge.		•	•			
		Janis Rosentha	(May 9, 2025 11-40 PDT)								05/0!	5/2025)	
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Par	t III	Statement of Program							3.7
	Deiafle	Check if Schedule O contains		any line in this Pa	rt III				. Х
1	_	y describe the organization's m SCHEDULE 0							
	<u> </u>	SCUEDOFE O							
2		e organization undertake any s							
		990 or 990-EZ?					Yes	s X	No
		s," describe these new services							
3		e organization cease conductir	-	changes in how it	conducts, any p	rogram services?		s X	No
		s," describe these changes on							
4	Section	ibe the organization's program on 501(c)(3) and 501(c)(4) orga	inizations are required t	to report the amou	int of grants and	allocations to others	easured by e s, the total e	xpenses, xpenses,	
	and re	evenue, if any, for each prograi	m service reported.						
					A				
	(Code		9,200,253. inc	cluding grants of	\$ 8,984	<u>, 151.</u>) (Revenue	Ş)
	SEE_	SCHEDULE O							
4b	(Code	::) (Expenses \$_	inc	cluding grants of	\$) (Revenue	\$)
4c	(Code	e:) (Expenses \$_	in	cluding grants of	\$) (Revenue	\$)
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4d		program services (Describe or		f Ċ	\	lovonuo ¢		`	
<u>/</u> 10	(Expe	program service expenses	including grants o) (R	levenue \$)	
	iotal	program sorvice expenses	3,400,4	J J •					

Form 990 (2023) SOI DOG FOUNDATION USA Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Х
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
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I.</i>	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, 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? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If "Yes," complete Schedule D, Part V.	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a		Х
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? <i>If "Yes," complete Schedule D, Part VII</i>	11b		Х
С	Did the organization report an amount for investments — program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
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)? <i>If "Yes," complete Schedule D, Part X</i>	11f		Х
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII.	12a	Х	
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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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.	14b	Х	
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	
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? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> . See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		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 domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	

Form 990 (2023) SOI DOG FOUNDATION USA Part IV Checklist of Required Schedules (continued)

			Yes	No
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? <i>If "Yes," complete Schedule J.</i>	23		Х
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.	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? <i>If "Yes," complete Schedule L, Part I</i>	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II.</i>	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.	28a		Χ
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Χ
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
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		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Χ
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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 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 and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI.</i>	37		Х
	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38	Χ	
Par	TV Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V.			. L
1-	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Χ	
ВΛΛ		ᄂ	990 (2002

Form 990 (2023) SOI DOG FOUNDATION USA

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			162	NO
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 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	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)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Χ
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	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?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	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		Х
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
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?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.	7h		
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?	8		
	Sponsoring organizations maintaining donor advised funds.	_		
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter:			
	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	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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	1/-		Х
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Λ
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b		
13	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities that would	4-		
	result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		

Form 990 (2023) SOI DOG FOUNDATION USA 27-1600444 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 on 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 No Yes 1a Enter the number of voting members of the governing body at the end of the tax year 6 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 on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent..... 6 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Χ 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?..... Χ 4 X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Χ Did the organization have members or stockholders?..... 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?..... Χ 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, Χ stockholders, or persons other than the governing body? 7h Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Χ a The governing body?..... 8a X 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the Χ 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Χ 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 Χ 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. Χ 12a Did the organization have a written conflict of interest policy? If "No," go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Χ Schedule O how this was done..... 13 Χ 14 Did the organization have a written document retention and destruction policy?..... 14 Χ 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? Χ a The organization's CEO, Executive Director, or top management official..... 15a X 15h If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year?.... 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed SEE SCHEDULE O Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, 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. Own website Another's website Upon request Other (explain on Schedule O) 19 Describe on 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

State the name, address, and telephone number of the person who possesses the organization's books and records. JANIS ROSENTHAL 1240 SW HIGHLAND RD PORTLAND OR 97221 541-816-5085

Part VII 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

- 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

<u> </u>		1							•	
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box.	unles	heck i ss pei	ition more rson i irecto	than on a both s both s r/trustHighest compensated	an I	(D) Reportable compensation from the organization (W-2/1099- MISC/1099-NEC)	Reportable compensation from related organizations (W-2/1099- MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) JANIS ROSENTHAL PRESIDENT	$-\frac{20}{0}$	Х		Х				0.	0.	0.
(2) ANNIE KEENEY TREASURER	<u>15</u>	Х		Х				0.	0.	0.
(3) ALEX HESTERBERG SECRETARY	<u>5</u> 0	Х		Х				0.	0.	0.
(4) JOHN HIGGS DIRECTOR	<u>5</u>	Х						0.	0.	0.
(5) ELIZABETH NEUBRAND DIRECTOR	<u>5</u> 0	Х						0.	0.	0.
(6) PETER FITZGERALD DIRECTOR	<u> </u>	Х						0.	0.	0.
		-								
<u>(9)</u>										
(10)										
<u>(11)</u>										
(12)										
(13)										
(14)										

Form 990 (2023) SOI DOG FOUNDATION USA									27-160044	4 Page 8
Part VII Section A. Officers, Directors, Tru	ustees,	Key	<u>En</u>			es,	an	d Highest Cor	npensated Em	ployees (continued)
(A) Name and title	(B) Average hours per week	box,	unles er and	Posi neck r ss per d a di	more rson is irecto	than or s both a r/truste	an e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from
	(list any hours for related organiza- tions below dotted line)	Former Highest compensated employee Key employee Officer Institutional trustee Individual trustee Individual trustee Individual trustee				Highest compensated employee	Former	(W-2/1099- MISC/1099-NEC)	(W-2/1099- MISC/1099-NEC)	the organization and related organizations
<u>(15)</u>										
<u>(16)</u>										
(17)										
(18)										
(19)										
(20)										
(21)										
(22)	2)									
(23)										
(24)										
(25)										
1b Subtotal								0.	0.	0.
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)								0.	0.	0.
2 Total number of individuals (including but not limi from the organization 0	ted to tho	se lis	sted	abo	ve) v	who r	ece	eived more than \$	100,000 of reportab	le compensation
3 Did the organization list any former officer, directors										Yes No
on line 1a? If "Yes,"complète Schedule J for such For any individual listed on line 1a, is the sum of	reportable	e con	npen	ısati	on a	and ot	ther	r compensation from		3 X
the organization and related organizations greater such individual									dividual	4 X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>										. 5 X
1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.										
(A) Name and business addr	ess							Description of	of services	(C) Compensation
2 Total number of independent contractors (including	g but not	limite	ed to	o the	ose I	listed	ab	ove) who received	I more than	
\$100,000 of compensation from the organization	0									

Form 990 (2023) SOI DOG FOUNDATION USA 27-1600444 Page 9 Part VIII | Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII.....

							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
हैं, ही	1a	Federated campaign			1a					
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues			1b					
A, G	С	Fundraising events.			1c					
ar,	d	Related organizatio	ns .		1d					
ir.	е	Government grants (cont			1e					
er di	f	All other contributions, g similar amounts not inclu			1f	0 446 760				
흎	a	Noncash contributions in				8,446,760.				
E P	9	lines 1a-1f			1g					
	h	Total. Add lines 1a-	1f				8,446,760.			
пe					-	Business Code				
₽	2a									
ě	b									
Ş.	C									
Se	a									
ä	e	All other program s								
Program Service Revenue	, i	Total. Add lines 2a-			L					
Δ.	g									
	3	Investment income other similar amour					44,893.			44,893.
	4	Income from investi	men [.]	t of tax-ex	empt	bond proceeds	11/0501			11,000
	5	Royalties								
				(i) Re	eal	(ii) Personal				
	6a	Gross rents	6a							
	b	Less: rental expenses	6b							
		Rental income or (loss)	6с							
	d	Net rental income of	r (lo							
	7a	Gross amount from		(i) Secu	rities	(ii) Other				
		sales of assets other than inventory	7a							
	b	Less: cost or other basis	71.							
		and sales expenses	7b							
		Gain or (loss) Net gain or (loss)	7c							
venue	8a	Gross income from fundr (not including \S of contributions reported	•	•	_					
æ		See Part IV, line 18			88	1				
Other Rev	b	Less: direct expens	es.		8t)				
₹	С	Net income or (loss) fro	m fundrai	sing e	vents				
		Gross income from gamin See Part IV, line 19			98					
		Less: direct expens			9t					
	С	Net income or (loss) fro	m gaming	activi	ties				
		Gross sales of inventory, returns and allowances			10:					
		Less: cost of goods			101					
	С	Net income or (loss) tro	m sales o	ınver	Business Code				
SIZ	112	CDEDIM CND	ייות	מת עניי			E0 000	E0 000		
Miscellaneous Revenue	11a b c d	CREDIT CARD	<u>KĽ</u>	WAKD2		900099	50,000.	50,000.		
ĕ ≅	c									
Sce.	d	All other revenue								
Ξ̈́		Total. Add lines 11a			<u>_</u>		50,000.			
	12	Total revenue. See					8,541,653.	50,000.	0.	44,893.

Form 990 (2023) SOI DOG FOUNDATION USA Part IX | Statement of Functional Expenses

	TIA Statement of Functional Expens				
Sec	tion 501(c)(3) and 501(c)(4) organizations must c	complete all columns. A	III other organizations m	ust complete column (A).
	Check if Schedule O contains a re	esponse or note to any	line in this Part IX		
	not include amounts reported on lines 7b, 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 domestic organizations and domestic governments. See Part IV, line 21	300,000.	300,000.		·
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	8,684,151.	8,684,151.		
4 5	Benefits paid to or for members	0.	0.	0.	0.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
	Management				
	Legal				
	Accounting.				
	_				
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule 0.)	47,159.		47,159.	
12	Advertising and promotion	1,279,308.			1,279,308.
13	Office expenses	2,838.		2,591.	247.
14	Information technology	2,000.		2,331.	211.
15	Royalties				
16	Occupancy.				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local				
19 20	public officials				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
	·	1 000		1 000	
23 24	Insurance. Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.).	1,088.		1,088.	
а	BANK FEES	216,227.	216,102.	125.	
b	REGISTRATION AND FEES	11,144.	210,102.	11,144.	
c		11,177.		11,177.	
d					
	All other expenses				
	All other expenses.	10 5/1 015	0 200 252	60 107	1 270 555
25	Total functional expenses. Add lines 1 through 24e	10,541,915.	9,200,253.	62,107.	1,279,555.
26	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).				

		Check if Schedule O contains a response or note to	any line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing		1,070,946.	1	757,704.
	2	Savings and temporary cash investments		1,941,532.	2	1,947,121.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		170,417.	4	324,246.
	5	Loans and other receivables from any current or forme trustee, key employee, creator or founder, substantial controlled entity or family member of any of these persons.	contributor, or 35%		5	
	6	Loans and other receivables from other disqualified pe section 4958(f)(1)), and persons described in section 4	· · · · · · · · · · · · · · · · · · ·		6	
	7	Notes and loans receivable, net			7	
S	8	Inventories for sale or use			8	
Assets	9	Prepaid expenses and deferred charges			9	
As	-	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a			
	b	Less: accumulated depreciation	10b		10c	
	11	Investments — publicly traded securities			11	
	12	Investments – other securities. See Part IV, line 11			12	
	13	Investments – program-related. See Part IV, line 11			13	
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11		15		
	16	Total assets. Add lines 1 through 15 (must equal line 3	33)	3,182,895.	16	3,029,071.
	17	Accounts payable and accrued expenses		176,178.	17	222,616.
	18	Grants payable			18	
	19	Deferred revenue	 		19	
	20	Tax-exempt bond liabilities			20	
ies	21	Escrow or custodial account liability. Complete Part IV			21	
Liabilities	22	Loans and other payables to any current or former offi key employee, creator or founder, substantial contribu- controlled entity or family member of any of these pers	tor, or 35%		22	
_	23	Secured mortgages and notes payable to unrelated thi	_		23	
	24	Unsecured notes and loans payable to unrelated third	· ·		24	1,800,000.
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Comp	s to related third parties, blete Part X of Schedule D		25	2,000,000.
	26	Total liabilities. Add lines 17 through 25		176,178.	26	2,022,616.
nces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.	X			
alaı	27	Net assets without donor restrictions		2,200,901.	27	906,455.
B	28	Net assets with donor restrictions		805,816.	28	100,000.
Net Assets or Fund Balance		Organizations that do not follow FASB ASC 958, checand complete lines 29 through 33.	ck here			
ō	29	Capital stock or trust principal, or current funds		29		
ets	30	Paid-in or capital surplus, or land, building, or equipment	ent fund		30	
SSI	31	Retained earnings, endowment, accumulated income,	or other funds		31	
it A	32	Total net assets or fund balances		3,006,717.	32	1,006,455.
Ne	33	Total liabilities and net assets/fund balances	1	3,182,895.	33	3,029,071.
RΔ	Δ		TEEA0111L 08/23/23			Form 990 (2023)

Form **990** (2023)

Par	rt XI 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	8,5	41,6	553.
2	Total expenses (must equal Part IX, column (A), line 25)	2 1	0,5	41,9	915.
3	Revenue less expenses. Subtract line 2 from line 1	3 -	2,0	00,2	262.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))				717.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities. 6	6			
7		7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,		1 0	0.0	
Day	column (B))	U	1,0	06,4	155.
rai	<u> </u>				
	Check if Schedule O contains a response or note to any line in this Part XII.				· · _
	A 15 11 A 15 200 DO A 17 A 1 DOU	ī		Yes	No
ı	Accounting method used to prepare the Form 990:				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.				
2a	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 reviewed on separate basis, consolidated basis, or both.	ı a			
	Separate basis Consolidated basis Both consolidated and separate basis	ł			
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
_	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	Ì			
	basis, consolidated basis, or both.				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the au review, or compilation of its financial statements and selection of an independent accountant?	udit,	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain	ļ			
_	on Schedule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Unifor Guidance, 2 C.F.R. Part 200, Subpart F?	orm 	За		Χ
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
3AA	TEEA0112L 08/23/23		Form	1 990 ((2023)

SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

Open to Public Inspection

Employer identification number

SOI	D	OG FOUNDATION USA					27-160044	4
Part		Reason for Public Char						ns.
The or	ga	nization is not a private found	,	•		-	•	
1		A church, convention of church	ches, or association o	f churches described in	section	170(b)	(1)(A)(i).	
2		A school described in section	n 170(b)(1)(A)(ii). (Atta	ach Schedule E (Form 9	90).)			
3		A hospital or a cooperative h	ospital service organiz	zation described in sect	ion 1 70 ((b)(1)(A)	(iii).	
4		A medical research organizat	tion operated in conju	nction with a hospital de	escribed	in sect	ion 170(b)(1)(A)(iii). Ent	er the hospital's
		name, city, and state:						
5		An organization operated for section 170(b)(1)(A)(iv). (Col	the benefit of a collect mplete Part II.)	ge or university owned o	r operat	ed by a	governmental unit desc	cribed in
6 7		A federal, state, or local gove	· ·					
,	X	An organization that normally in section 170(b)(1)(A)(vi).	/ receives a substantia Complete Part II.)	al part of its support from	m a gov	ernment	al unit or from the gene	eral public described
8		A community trust described	in section 170(b)(1)(A	A)(vi). (Complete Part II.)			
9		An agricultural research orga	nization described in	section 170(b)(1)(A)(ix)	operate	d in con	junction with a land-gra	int college
		or university or a non-land-gr	ant college of agricult	ture (see instructions). E	Enter the	name,	city, and state of the co	ollege or
		university:				. — — — -		
10		An organization that normally from activities related to its e investment income and unrel June 30, 1975. See section 5	exempt functions, subj ated business taxable	ect to certain exceptions income (less section 5	s; and (2	 no mo 	ore than 33-1/3% of its	support from gross
11		An organization organized ar	nd operated exclusivel	y to test for public safet	y. See	section	509(a)(4).	
12		An organization organized ar or more publicly supported or lines 12a through 12d that de	rganizations described	in section 509(a)(1) or	section	509(a)(2). See section 509(a)(3	the purposes of one 3). Check the box on
а		Type I. A supporting organization(s) the power to complete Part IV, Sections A	ation operated, superv regularly appoint or e	ised, or controlled by its	s suppor	ted oraz	anization(s), typically by	giving the supported anization. You must
b		Type II. A supporting organizemanagement of the supporting must complete Part IV, Secti	ation supervised or co	ontrolled in connection was in the same persons the	vith its s nat contr	upported ol or ma	d organization(s), by ha anage the supported org	ving control or ganization(s). You
С		Type III functionally integrate organization(s) (see instruction	ed. A supporting organ	nization operated in con	nection	with, an	d functionally integrated	d with, its supported
d		Type III non-functionally inte functionally integrated. The o instructions). You must comp	egrated. A supporting organization generally	organization operated in must satisfy a distribution	connec	tion with	n its supported organiza and an attentiveness re	ation(s) that is not quirement (see
е		Check this box if the organization integrated, or Type III non-ful	ation received a writte	n determination from th	e IRS th	at it is a	a Type I, Type II, Type I	II functionally
f	Er	iter the number of supported o						
g	Pr	ovide the following information	about the supported	organization(s).				
(i) Na	me of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	organizat	s the ion listed overning nent?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
(A)								
(B)								
<u>(B)</u>								
(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	ndar year (or fiscal year	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
_	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	8,548,103.	9,844,421.	10152522.	8,733,472.	8,446,760.	45,725,278.
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	8,548,103.	9,844,421.	10152522.	8,733,472.	8,446,760.	45,725,278.
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)						0.
6	Public support. Subtract line 5 from line 4						45,725,278.
Sec	tion B. Total Support						<u> </u>
	ndar year (or fiscal year nning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	8,548,103.	9,844,421.	10152522.	8,733,472.	8,446,760.	45,725,278.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	22,068.	335.	325.	52,366.	44,893.	119,987.
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						45,845,265.
12	Gross receipts from related activi	ities, etc. (see ins	tructions)			12	113,573.
13	First 5 years. If the Form 990 is forganization, check this box and						
Sec	tion C. Computation of Pu	blic Support F	Percentage				
14	Public support percentage for 20	23 (line 6, column	(f), divided by line	e 11, column (f)).			99.74%
15	Public support percentage from 2	2022 Schedule A,	Part II, line 14			15	99.83%
16a	33-1/3% support test—2023. If the and stop here. The organization						
b	33-1/3% support test—2022. If the and stop here. The organization						
17a	10%-facts-and-circumstances te or more, and if the organization rethe organization meets the facts-	meets the facts-ar	id-circumstances t	est, check this bo	ox and stop here.	Explain in Part VI	how
	10%-facts-and-circumstances te or more, and if the organization rorganization meets the facts-and	meets the facts-ar -circumstances te	nd-circumstances t st. The organization	est, check this bon qualifies as a p	ox and stop here. bublicly supported	Explain in Part VI organization	how the
18	Private foundation. If the organiz	ation did not chec	k a box on line 13	8, 16a, 16b, 17a, d	or 17b, check this	box and see instr	uctions

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.)

Sec	tion A. Public Support							
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 202	3	(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 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							
	Public support. (Subtract line 7c from line 6.)							
Sec	tion B. Total Support		T	1	1			
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 202	3	(f) Total
-	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.							
	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 on line 10b, whether or not the business is regularly carried on.							
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)							
	Total support. (Add lines 9, 10c, 11, and 12.)							
	First 5 years. If the Form 990 is f organization, check this box and	stop here						
	tion C. Computation of Pu							
	Public support percentage for 202	•	•				15	%
	Public support percentage from 2						16	%
Sec	tion D. Computation of Inv			/				
17	Investment income percentage for	•		•			17	%
	Investment income percentage fr					J.	18	%
	33-1/3% support tests—2023. If the is not more than 33-1/3%, check	this box and stop	here. The organi	zation qualifies as	a publicly suppor	ted organiza	ation	
	33-1/3% support tests—2022. If the line 18 is not more than 33-1/3%	, check this box a	nd stop here. The	organization qual	lifies as a publicly	supported of	rganizatio	1
20	Private foundation. If the organiz	ation did not ched	ck a box on line 14	4, 19a, or 19b, che	eck this box and s	ee instructio	ns	

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

			Yes	No
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.	1		
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).	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
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.	3b		
С	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.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
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.	4b		
С	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.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c 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).	5a		
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?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с		
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? <i>If "Yes," provide detail in Part VI.</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
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.	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	: Did a disqualified person (as defined on 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.	9с		
0 a	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,"	10		
	answer line 10b below.	10a		
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.)	10b		

Pa	<u>rt I\</u>	V Supporting Organizations (continued)			
11	На	as the organization accepted a gift or contribution from any of the following persons?		Yes	No
	ı A	person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, e governing body of a supported organization?	11a		
ŀ		family member of a person described on line 11a above?	11b		
	,	family member of a person described on line fra above:	110		
		35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .	11c		
Sec	tio	n B. Type I Supporting Organizations		V	NI -
1	or off org tha	d the governing body, members of the governing body, officers acting in their official capacity, or membership of one more supported organizations have the power to regularly appoint or elect at least a majority of the organization's ficers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported reganization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more an one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees ere allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers uring the tax year.	1	Yes	No
2	Die tha	d the organization operate for the benefit of any supported organization other than the supported organization(s) at operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such enefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the upporting organization.	2		
Sec	tio	n C. Type II Supporting Organizations			
				Yes	No
1	of	ere a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the upporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sec	tio	n D. All Type III Supporting Organizations			
1	<u>.</u>			Yes	No
))	org ye	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?			
2	We	ere any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported ganization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how e organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	vo all	y reason of the relationship described on line 2, above, did the organization's supported organizations have a significant pice in the organization's investment policies and in directing the use of the organization's income or assets at I times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played this regard.	3		
Sec	tio	n E. Type III Functionally Integrated Supporting Organizations			
		heck the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction	ons).		
i	а	The organization satisfied the Activities Test. Complete line 2 below.			
ı	b =	The organization is the parent of each of its supported organizations. Complete line 3 below.			
(c _	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	nstruct	tions).	
2	Ac	ctivities Test. <i>Answer lines 2a and 2b below.</i>		Yes	No
i	su or re:	d substantially all of the organization's activities during the tax year directly further the exempt purposes of the apported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was asponsive to those supported organizations, and how the organization determined that these activities constituted			
	su	ubstantially all of its activities.	2a		
ļ	re:	In the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or ore of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the exact the organization's position that its supported organization(s) would have engaged in these activities at for the organization's involvement.	2b		
3		arent of Supported Organizations. <i>Answer lines 3a and 3b below.</i>			
	a Dio	d the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of ach of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
ı	b Die	d the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its apported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Pa				
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust instructions. All other Type III non-functionally integrated supporting organization	on Nov s must	. 20, 1970 (explain in F complete Sections A th	Part VI). See nrough 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):			
a	Average monthly value of securities	1a		
ŀ	Average monthly cash balances	1b		
(: Fair market value of other non-exempt-use assets	1c		
C	I Total (add lines 1a, 1b, and 1c)	1d		
•	Discount claimed for blockage or other factors (explain in detail in Part VI):			
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 0.015 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 0.035.	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 0.85 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		
5	Income tax imposed in prior year	5		
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 integrated (see instructions).	grated T	ype III supporting orga	nization

BAA Schedule A (Form 990) 2023

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)		
Sec	tion D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	4	
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions.	6	
_ 7	Total annual distributions. Add lines 1 through 6.	7	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details		
	in Part VI). See instructions.	8	
9	Distributable amount for 2023 from Section C, line 6	9	
10	Line 8 amount divided by line 9 amount	10	

Section E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1 Distributable amount for 2023 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2023 (reasonable cause required — explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2023			
a From 2018			
b From 2019			
c From 2020			
d From 2021			
e From 2022			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2023 distributable amount			
i Carryover from 2018 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2023 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2023 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2024. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2019			
b Excess from 2020			
c Excess from 2021			
d Excess from 2022			
e Excess from 2023			

BAA Schedule A (Form 990) 2023

Part VI

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 B (Form 990)

PUBLIC DISCLOSURE COPY
Schedule of Contributors

Employer identification number

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information.

SOI DOG FOUNDATION USA 27-1600444 Organization type (check one): Filers of: Section: 501(c)(3) Form 990 or 990-EZ (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line

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

2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023) Name of organization Employer identification number

SOI DOG FOUNDATION USA 27-1600444 Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (d) Type of contribution (c) Total contributions (a) No. Name, address, and ZIP + 4 Χ Person **Payroll** 200,000. Noncash (Complete Part II for noncash contributions.) (b) Name, address, and ZIP + 4 (d) Type of contribution (c) Total contributions (a) No. Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) No. (b) Name, address, and ZIP + 4 (c)
Total contributions (d) Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (b) Name, address, and ZIP + 4 (a) No. (c) Total contributions (d) Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) No. (c) Total contributions (d) Type of contribution (b) Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II for noncash contributions.) (d) Type of contribution (a) No. (c)
Total contributions (b) Name, address, and ZIP + 4 Person **Payroll** Noncash

(Complete Part II for noncash contributions.)

Employer identification number

SOI DOG FOUNDATION USA

27-1600444

raitii	Noticash Property (see instructions). Use duplicate copies of Part II if additional spa	ace is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	N/A		
			
		\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
		٧	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		ls	
		Y	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		s	
		٧	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		٩	
		Ÿ	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		ls	
	<u> </u>	l [*]	
D A A	TEE \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	C - I I I	D (Farmer 000) (2022

Name of organization
SOI DOG FOUNDATION USA

Employer identification number 27-1600444

Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
	N/A						
	(e) Transfer of gift Transferee's name, address, and ZIP + 4			ationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
	(e) Transfer of gift Transferee's name, address, and ZIP + 4			ft Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
	Transferee's name, addres	ft Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
	Transferee's name, addres	gift Relationship of transferor to transferee					

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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.

Open to Public Inspection Employer identification number

SOI	DOG FOUNDATION USA	27-1600444
Par		Funds or Accounts
	Complete if the organization answered "Yes" on Form 990, Part IV	, line 6.
	(a) Donor advised funds	(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.	
7		
5	Did the organization inform all donors and donor advisors in writing that the assets held in do 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 function charitable purposes and not for the benefit of the donor or donor advisor, or for any other	ds can be used only
	impermissible private benefit?	····· Yes No
Par	t II Conservation Easements	
	Complete if the organization answered "Yes" on Form 990, Part IV	, line 7.
1	Purpose(s) of conservation easements held by the organization (check all that apply).	,
		ation of a historically important land area
		ation of a certified historic structure
	Preservation of open space	ation of a doration mistorio structuro
2		the form of a concernation accoment on the
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in last day of the tax year.	the form of a conservation easement on the
	aut auf or the tax your	Held at the End of the Tax Year
a	Total number of conservation easements.	
	Total acreage restricted by conservation easements	
	: Number of conservation easements on a certified historic structure included on line 2a	
C	Number of conservation easements included on line 2c acquired after July 25, 2006, and not a historic structure listed in the National Register.	on 2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminat tax year	ted by the organization during the
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, har	ndling of violations,
	and enforcement of the conservation easements it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enfor	cing conservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing	conservation easements during the year
8	Does each conservation easement reported on line 2d above satisfy the requirements of sect and section 170(h)(4)(B)(ii)?	
9	In Part XIII, describe how the organization reports conservation easements in its revenue and include, if applicable, the text of the footnote to the organization's financial statements that d	right of the contract of the c
_	conservation easements.	
Par	Organizations Maintaining Collections of Art, Historical Treasures Complete if the organization answered "Yes" on Form 990, Part IV	s, or Other Similar Assets , line 8.
1a	If the organization elected, as permitted under FASB ASC 958, not to report in its revenue st historical treasures, or other similar assets held for public exhibition, education, or research in Part XIII the text of the footnote to its financial statements that describes these items.	atement and balance sheet works of art, n furtherance of public service, provide in
b	If the organization elected, as permitted under FASB ASC 958, to report in its revenue stater historical treasures, or other similar assets held for public exhibition, education, or research i following amounts relating to these items.	n furtherance of public service, provide the
	(i) Revenue included on Form 990, Part VIII, line 1	\$
	(ii) Assets included in Form 990, Part X	\$
2	If the organization received or held works of art, historical treasures, or other similar assets f amounts required to be reported under FASB ASC 958 relating to these items.	
а	Revenue included on Form 990, Part VIII, line 1	\$
	Assets included in Form 990. Part X	

Part III Organizations Maintaining Col	iections	ot Art, Histo	rıcaı	reasures, or C	itner Similar Asset	.s (cont	:inuea))
Using the organization's acquisition, accessio items (check all that apply).	n, and oth	ner records, che	ck any	of the following the	nat make significant use	e of its	collectio	'n
a Public exhibition		d Loan	or exc	hange program				
b Scholarly research		e Other						
c Preservation for future generations								
4 Provide a description of the organization's col Part XIII.	llections a	and explain how	they f	urther the organiza	tion's exempt purpose	in		
5 During the year, did the organization solicit or to be sold to raise funds rather than to be ma	intained a	as part of the org	histor ganiza	rical treasures, or or tion's collection?.	ther similar assets	Yes		No
Part IV Escrow and Custodial Arrange Complete if the organization a Form 990, Part X, line 21.	gements answere	s ed "Yes" on F	orm	990, Part IV, I	ine 9, or reported	an an	nount (on
1a Is the organization an agent, trustee, custodia on Form 990, Part X?	an, or othe	er intermediary f	or cor	ntributions or other	assets not included	Yes	Г	No
b If "Yes," explain the arrangement in Part XIII						163	L	
. ,	·					Amoun	t	
c Beginning balance					1c			
d Additions during the year					1d			
e Distributions during the year					1e			
f Ending balance					1f			
2a Did the organization include an amount on Fo	rm 990, F	Part X, line 21, f	or esc	row or custodial ad	count liability?	Yes		No
b If "Yes," explain the arrangement in Part XIII.	Check he	ere if the explana	ation I	has been provided	in Part XIII			1
Part V Endowment Funds			_					
Complete if the organization a	answere	ed "Yes" on F	orm	990, Part IV, I	ine 10.			
(a) Currer	nt year	(b) Prior year		(c) Two years back	(d) Three years back	(e)	Four years	back
1a Beginning of year balance	,	• • • • • • • • • • • • • • • • • • • •			, , ,	, ,		
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 curre	ent year e	· ·	1g, c	olumn (a)) held as	:			
a Board designated or quasi-endowment		જ						
	8							
c Term endowment %								
The percentages on lines 2a, 2b, and 2c shou	ıld equal	100%.						
3a Are there endowment funds not in the posses	sion of th	e organization th	hat are	e held and adminis	tered for the			
organization by:						_	Yes	No
(i) Unrelated organizations?						3a(i)		
(ii) Related organizations?						` '		
b If "Yes" on line 3a(ii), are the related organization						3b		
4 Describe in Part XIII the intended uses of the		ion's endowmen	nt fund	ls.				
Part VI Land, Buildings, and Equipm	ent							
Complete if the organization answered	d "Yes" on	Form 990, Part	IV, lir	ne 11a. See Form 9	90, Part X, line 10.			
Description of property	(a) Cost	or other basis	(b)	Cost or other	(c) Accumulated	(d)	Book va	lue
	(in	vestment)		pasis (other)	depreciation			
1a Land								
b Buildings								
c Leasehold improvements								
d Equipment								
e Other								
Total. Add lines 1a through 1e. (Column (d) must e	qual Form	n 990, Part X, Iir	ne 10c	, column (B))				0.

	Investments — Other Securities Complete if the organization answered "Yes" o	n Form 990 Part IV lin	N/A e 11h See Form 990 Part X line 12	
	on of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
	derivatives		, ,	•
	eld equity interests			
(3) Other				
(A) (B) (C) (D) (E)				
(C)				
(D)				
(F)				
(F)				
(G) (H)				
(l) T-1-1 (0-1	(1)			
	b) must equal Form 990, Part X, line 12, column (B))		27.72	
Part VIII	Investments — Program Related Complete if the organization answered "Yes" o	n Form 990 Part IV lin	N/A	
	a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	t-of-vear market value
	bescription of investment	(b) Book value	(c) Method of Valuation. Cost of Cite	1-01-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	(b) must equal Form 990, Part X, line 13, column (B))			
	Other Assets	N/A		
	Complete if the organization answered "Yes" o	<u>n Form 990, Part IV, IIN</u> scription	e 11d. See Form 990, Part X, line 15.	(b) Book value
(1)	(a) De	scription		(b) book value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Colum	n (b) must equal Form 990, Part X, line 15, co	olumn (B))		
	Other Liabilities			1
1 0.1071	Complete if the organization answered "Yes" o	n Form 990, Part IV, lin	e 11e or 11f. See Form 990, Part X, line	25.
1.		iption of liability	· · · · · · · · · · · · · · · · · · ·	(b) Book value
(1) Federal	income taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
Total. (Columi	n (b) must equal Form 990, Part X, line 25, co	lumn (B))		
	certain tax positions. In Part XIII, provide the text of the fo			liability for uncertain
	er FASB ASC 740. Check here if the text of the footnote has		, , , , , , , , , , , , , , , , , , , ,	·

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Retu	irn	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	. 1	8,541,653.
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		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	. 2e	
3 Subtract line 2e from line 1	. 3	8,541,653.
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.)	. 5	8,541,653.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Re	eturn	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	. 1	10,541,915.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	. 2e	
3 Subtract line 2e from line 1	. 3	10,541,915.
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.		40.544.615
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	. 5	10,541,915.
Part XIII Supplemental Information		

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

BAA Schedule D (Form 990) 2023

SCHEDULE F (Form 990)

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.

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

Name of the organization				Employer identi	fication number
SOI DOG FOUNDATION U	JSA			27-16004	144
General Information on Form 990, Pa	on on Activities rt IV, line 14b.	Outside the Un	ited States. Complete if the	organization answe	red "Yes"
			ubstantiate the amount of its grelection criteria used to award the		
2 For grantmakers. Describe United States.	in Part V the orga	anization's proced	ures for monitoring the use of i	ts grants and other assi	stance outside the
3 Activities per Region. (The	following Part I, Ii	ne 3 table can be	duplicated if additional space i	s needed.) PART V	
(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
EAST ASIA AND THE					
(1) PACIFIC			GRANTMAKING	SEE PART V	8,684,151.
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Subtotal					8,684,151.
b Total from continuation sheets to Part I					

0

c Totals (add lines 3a and 3b). . .

8,684,151.

0

27-1600444

Schedule F (Form 990) 2023

Part II 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.

									other)	(i) Method of valuation (book, EMV, appraisal.
- - 										(h) Description of noncash assistance
e foreign country, recognized as a tax exempt 501(c)(3) quivalency letter Schedul										(g) Amount of noncash assistance
ecognized as a tax								WIRE		(f) Manner of cash disbursement
foreign country, re uivalency letter								8, 684, 151.		(e) Amount of cash grant
cognized as charities by the vided a section 501(c)(3) eq								GRANT	PART V	(d) Purpose of grant
at are recognized a								EAST ASIA		(c) Region
ations listed above the grantee or counsel ins or entities										(b) IRS code section and EIN (if applicable)
 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization 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. 										(a) Name of organization
								GRANT 8, 684, 151.	PART V	(b) IRS code section and EIN of grant cash grant (f applicable)

SOI DOG FOUNDATION USA

Schedule F (Form 990) 2023

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.

Page 3

27-1600444

(h) Method of valuation (book, FMV, appraisal, other)																			Schedule F (Form 990) 2023
(g) Description of noncash assistance																			Schedule F
(f) Amount of noncash assistance																			
(e) Manner of cash disbursement																			
(d) Amount of cash grant																			20,10,11
(c) Number of recipients																			
(b) Region																			
(a) Type of grant or assistance																			
	(1)	(2)	(3)	(4)	(5)	(9)	6	(8)	6)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	BAA

rai	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 the 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 the Instructions for Forms 3520 and 3520-A; don't 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 Certain Foreign Corporations (see the 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 the 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 the 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 separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)	Yes	X No

BAA Schedule F (Form 990) 2023 TEEA3505L 11/01/23

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.

PART I - ADDITIONAL SUPPLEMENTAL INFORMATION

GRANT MAKING TO SUPPORT THE EFFORTS OF SOI DOG FOUNDATION, A REGISTERED CHARITY IN THAILAND. ALL GRANTS IN LINE WITH EXPRESSED DESIRE OF OUR DONORS AS DETAILED IN OTHER SECTIONS OF THIS FORM.

PART II, LINE 1 - ADDITIONAL SUPPLEMENTAL INFORMATION

ALL GRANTS WERE MADE TO SOI DOG FOUNDATION BASED IN PHUKET, THAILAND. SOI DOG
FOUNDATION IS A LEGALLY RECOGNIZED CHARITY AND THAILAND AND IS INDEPENDENTLY
AUDITED. GRANTS ARE MADE BASED ON THE EXPRESSED DESIRE OF INDIVIDUAL DONORS TO SOI
DOG FOUNDATION USA. WHEN NO SPECIFICATION IS PROVIDED BY THE DONOR, DONATIONS ARE
USED TO SUPPORT SOI DOG FOUNDATION AS UNRESTRICTED GRANTS TO CARRY OUT THEIR
PURPOSES AND MISSION. GRANT UTILIZATION IS MONITORED BY PUBLIC DOCUMENTATION OF
EFFORTS AND SUCCESSES VIA NEWSLETTERS, WEBSITE UPDATES, VIDEO UPDATES AND THROUGH
ROUTINE COMMUNICATION WITH SOI DOG FOUNDATION LEADERSHIP IN THAILAND. ADDITIONALLY,
SOI DOG FOUNDATION USA RECEIVES REGULAR FINANCIAL UPDATES AND YEARLY REPORTS ON HOW
OUR GRANTS WERE UTILIZED.

BAA TEEA3504L 11/01/23 Schedule F (Form 990) 2023

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Attach to Form 990. Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Open to Public Inspection

ջ □ (h) Purpose of grant or assistance PROGRAM SUPPORT Employer identification number X 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 27-1600444 0 "Yes" Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. (g) Description of noncash assistance Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered SEE PART IV 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance; and the selection criteria used to award the grants or assistance? (f) Method of valuation (book, FMV, appraisal, other) 0 (e) Amount of noncash assistance 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (d) Amount of cash grant 300,000 (c) IRC section (if applicable) 26-2118543 501 (C) (3) Enter total number of other organizations listed in the line 1 table. Part I General Information on Grants and Assistance (**p**) EIN **1 (a)** Name and address of organization or government SOI DOG FOUNDATION USA EL CAJON, CA 92020 | i (1) THE BARKING LOT 486 RALEIGH AVE İ İ | | | | | 1 Name of the organization İ İ İ İ I 1 1 I 1 1 | 1 | 1 I 1 1 8 I 4 6 (5) (9) (3) (8)

SOI DOG FOUNDATION USA Schedule I (Form 990) 2023 Part III

Page 2

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. (f) Description of noncash assistance Part IV | Supplemental Information. 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) (d) Amount of noncash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance

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9

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PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANTS FUNDS IN U.S.

GRANT UTILIZATION IS MONITORED BY PUBLIC DOCUMENTATION OF EFFORTS AND SUCCESSES VIA

NEWSLETTERS, WEBSITE UPDATES, VIDEO UPDATES AND THROUGH ROUTINE COMMUNICATION WITH

GRANTEES.

SCHEDULE O (Form 990)

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 Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

SOI DOG FOUNDATION USA

Employer identification number

27-1600444

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

SOI DOG FOUNDATION USA (THE "FOUNDATION") IS A NONPROFIT PUBLIC BENEFIT CORPORATION ORGANIZED IN CALIFORNIA IN 2010. THE FOUNDATION IS GOVERNED BY ELECTED OFFICERS AND DIRECTORS.

THE FOUNDATION ACHIEVES ITS MISSION OF IMPROVING ANIMAL WELFARE OF DOGS AND CATS IN ASIA PRIMARILY AS A FUNDRAISING AND GRANT-MAKING ORGANIZATION THAT MAKES GRANTS TO SOI DOG FOUNDATION ("SOI DOG"), A THAI CHARITY WHOSE PURPOSES ALIGN WITH THE FOUNDATION'S. FOLLOWING IS A SUMMARY OF THE FOUNDATION'S PROGRAMS.

DONATIONS ARE USED TO SUPPORT THE FOUNDATION'S OVERALL MISSION TO CARE FOR THE STREET DOGS AND CATS IN ASIA AND REDUCE SUFFERING THROUGH A VARIETY OF PROGRAMS. A PRIMARY INITIATIVE OF THE FOUNDATION IS TO RAISE FUNDS IN SUPPORT OF SOI DOG'S CVNR (CAPTURE, VACCINATE, NEUTER, RETURN) PROGRAM WHICH CURBS THE POPULATION GROWTH AND MINIMIZES INSTANCES OF ABUSE AND INJURY THAT OFTEN ACCOMPANY GROWING STREET DOG AND CAT POPULATIONS. THESE FUNDS ARE ALSO UTILIZED TO SUPPORT SHELTER OPERATIONS AND OTHER NECESSARY ACTIVITIES RELATED TO THE FOUNDATION'S MISSION TO CARE FOR STREET DOGS AND CATS THAT, FOR A VARIETY OF REASONS, CANNOT BE RETURNED TO THEIR COMMUNITY AFTER STERILIZATION. FUNDS ARE ALSO USED IN THE EFFORT TO END THE DOG MEAT TRADE.

FORM 990, PART III, LINE 1 - ORGANIZATION MISSION

SOI DOG FOUNDATION USA (THE "FOUNDATION") IS A NONPROFIT PUBLIC BENEFIT CORPORATION ORGANIZED IN CALIFORNIA IN 2010. THE FOUNDATION IS GOVERNED BY ELECTED OFFICERS AND DIRECTORS.

THE FOUNDATION ACHIEVES ITS MISSION OF IMPROVING ANIMAL WELFARE OF DOGS AND CATS IN

FORM 990, PART III, LINE 1 - ORGANIZATION MISSION

SOI DOG FOUNDATION ("SOI DOG"), A THAI CHARITY WHOSE PURPOSES ALIGN WITH THE FOUNDATION'S. FOLLOWING IS A SUMMARY OF THE FOUNDATION'S PROGRAMS.

DONATIONS ARE USED TO SUPPORT THE FOUNDATION'S OVERALL MISSION TO CARE FOR THE STREET DOGS AND CATS IN ASIA AND REDUCE SUFFERING THROUGH A VARIETY OF PROGRAMS. A PRIMARY INITIATIVE OF THE FOUNDATION IS TO RAISE FUNDS IN SUPPORT OF SOI DOG'S CVNR (CAPTURE, VACCINATE, NEUTER, RETURN) PROGRAM WHICH CURBS THE POPULATION GROWTH AND MINIMIZES INSTANCES OF ABUSE AND INJURY THAT OFTEN ACCOMPANY GROWING STREET DOG AND CAT POPULATIONS. THESE FUNDS ARE ALSO UTILIZED TO SUPPORT SHELTER OPERATIONS AND OTHER NECESSARY ACTIVITIES RELATED TO THE FOUNDATION'S MISSION TO CARE FOR STREET DOGS AND CATS THAT, FOR A VARIETY OF REASONS, CANNOT BE RETURNED TO THEIR COMMUNITY AFTER STERILIZATION. FUNDS ARE ALSO USED IN THE EFFORT TO END THE DOG MEAT TRADE.

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

ADOPTIONS: THE FOUNDATION MAKES GRANTS TO SOI DOG INTERNATIONAL TO SUPPORT THE COSTS OF CAT AND DOG ADOPTION EXPENSES SUCH AS CRATES, VET EXAMS, CUSTOMS CLEARANCE, TRAVEL PAPERWORK AND FLIGHT COSTS. MONTHLY SPONSORSHIPS BY DONORS PROVIDE AN ONGOING AND DEDICATED LEVEL OF SUPPORT FOR FOOD, MEDICAL CARE, SOCIALIZATION, AND STAFF TO WORK WITH THE DOGS TO PREPARE THEM FOR ADOPTION.

SHELTER OPERATIONS: THE FOUNDATION MAKES GRANTS TO SOI DOG INTERNATIONAL FOR THE PURPOSE OF CARE FOR FERAL, ABANDONED AND INJURED DOGS AND CATS; THIS SUPPORT INCLUDES ANY MEDICAL, HOUSING AND FEEDING NEEDS.

THE CAMPAIGN TO END THE DOG AND CAT MEAT TRADE: THE FOUNDATION FUNDS SOI DOG'S
INITIATIVE TO END THE DOG AND CAT MEAT TRADE. IN VARIOUS LOCATIONS IN ASIA, A CRUEL
MEANS OF CAPTURE AND TRANSPORT OFTEN MEANS THAT MANY DOGS DIED ON THEIR JOURNEY TO

27-1600444

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

THE SLAUGHTERHOUSE, AND THOSE THAT SURVIVE TRANSPORT FACE A CRUEL AND PAINFUL DEATH AS PART OF THE PROCESS OF PREPARING DOG AND CAT MEAT. SOI DOG WORKS WITH ASIAN GOVERNMENTS, RAISING PUBLIC AWARENESS AS WELL AS PROVIDING NECESSARY CARE FOR THOSE DOGS RESCUED FROM THE TRADE. DONATIONS MADE TO THE CAMPAIGN TO END THE DOG AND CAT MEAT TRADE DIRECTLY SUPPORT SOI DOG'S EFFORTS TO END THIS TRADE - FIRST IN THAILAND AND NOW, INCREASINGLY, IN NEIGHBORING COUNTRIES SUCH AS VIETNAM AND THE PHILIPPINES.

EMERGENCY RESPONSE TEAM (ERT): THE FOUNDATION RAISES FUNDS THAT ENABLE EMERGENCY SUPPORT TO COMMUNITIES DURING AND AFTER NATURAL DISASTERS. SOI DOG'S ERT DELIVERS FOOD, MEDICAL SUPPLIES, AND HANDS-ON CARE TO ANIMALS IN AREAS THAT ARE DEVASTATED AND, IN MANY CASES, INACCESSIBLE.

HUMANE EDUCATION PROGRAM: THE FOUNDATION RAISES FUNDS TO SUPPORT SOI DOG'S HUMANE EDUCATION PROGRAM WHICH TEACHES SCHOOL-AGED CHILDREN COMPASSION TOWARDS ANIMALS, THE ONLY WAY TO SUSTAINABLY END ANIMAL CRUELTY.

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

NO REVIEW WAS OR WILL BE CONDUCTED.

FORM 990, PART VI, LINE 17 - LIST OF STATES WHICH THIS RETURN IS FILED

OR CA AL AK AR CT DC FL GA HI IL KS KY ME MD MA MI MN MS NV NH NJ NM NY NC ND OH
OK PA RI SC TN UT VA WA WV WI

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

NO OTHER DOCUMENTS AVAILABLE TO THE PUBLIC.