Forr	9 9	90	Re	eturn of	⁻ Organizatio	n Fx	empt Fro	m Inc	ome Ta	ах		OMB No. 1545-0047
		of the Treasury venue Service	Under se ►	ction 501(c), ► Do not e Go to www	527, or 4947(a)(1) of the social security nun <i>v.irs.gov/Form</i> 990 for i	ne Inter obers o	rnal Revenue Cod n this form as it r ctions and the	le (except nay be ma latest ir	private foun de public. nformation	dations)		Open to Public Inspection
4	For t	he 2020 calend		year begin	nning 10/01		, 2020 , ai	nd endin	ng 9/3		-	20 2021
В	A I N. In Fit	ddress change ame change hitial return nal return/terminated mended return	HOUSTON,	ND DRIV TX 7704	7E SUITE 3905 13					27- E Telepho 541	16004 one numbe -816- eceipts \$	5085 9,844,787.
	A	pplication pending	Name and add	ress of principa	^{al officer:} JANIS R	OSEN	ITHAL		H(a) Is this a			
			SAME AS C	ABOVE					H(b) Are all s If "No,"	subordinates attach a list	s included? . See instri	uctions
			X 501(c)(3)	501(c) () < (insert no.)	4947(a)(1) or	527	-			
J	-		PS://WWW	.SOIDOG					H(c) Group e	· · ·		
K			X Corporation	Trust	Association Other	r Þ	L Yea	ar of format	ion: 2010) M :	State of leg	al domicile: CA
Pa	rt I	Summary	<u>,</u>		sion or most signific							
Activities & Governance	2 3 4 5 6 7a	Check this box Number of voti Number of inde Total number of Total number of	if the ing members of pendent votin of individuals of volunteers (organizatio of the gove ng member employed i ćestimate if	on discontinued its of ming body (Part VI rs of the governing b n calendar year 202 necessary)	operat , line body (20 (Pa	ions or dispos 1a) Part VI, line 1 rt V, line 2a).	ed of mo	 ore than 25			
4					from Form 990-T, I						7u 7b	0
_										rior Year		Current Year
Revenue	8 9 10 11 12	Program servic Investment inc Other revenue	ce revenue (P come (Part VII (Part VIII, col	art VIII, lin I, column (lumn (A), li	e 1h) e 2g) A), lines 3, 4, and 7 nes 5, 6d, 8c, 9c, 1 (must equal Part \	7d) 0c, ar	nd 11e)		· 8	,548,1 22,0)68. 542.	9,844,421 335 31 9,844,787
	13	Grants and sin	nilar amounts	paid (Part	IX, column (A), line	s 1-3))			,658,5		7,728,849
	14				X, column (A), line					, , -		,,,,
	15				e benefits (Part IX,							
ses	16a	Professional fu	undraising fee	s (Part IX,	column (A), line 11	e)						
Expenses			-		lumn (D), line 25)		1,391					
Щ	17			•				, 3 / 1 .	1	7 00 0	250	1 770 645

1,773,645.

9,502,494.

4,297,999.

4,281,857.

End of Year

342,293.

16,142.

1,730,353.

6,388,943.

2,184,770.

5,449,747.

1,510,183.

3,939,564.

Beginning of Current Year

Under penalties of complete. Declar	of perjury, I declare that I have exa ation of preparer (other than office	amined this retur er) is based on a	n, including accompanying schedules and st Il information of which preparer has any know	atements, and to the b wledge.	est of my knowledge	and bel	ief, it is true, correct,	and	
Sign Here	 Signature of officer JANIS ROSENTH 		Date DIR.						
	Type or print name and title			1	1		1		
	Print/Type preparer's name		Preparer's signature	Date	Check	if	PTIN		
Paid	ERNST J WINTTER				self-emplo	yed	P00012828		
Preparer	Firm's name FIRNST								
Use Only	Firm's address 🏼 675 Y	GNACIO V	ALLEY ROAD, SUITE A20	200 Firm's EIN ► 4			-5646335		
	WALNU'		Phone no.	(92	5) 933-262	6			
May the IRS	discuss this return with th	ne preparer	shown above? See instructions				X Yes	No	
BAA For Pa	BAA For Paperwork Reduction Act Notice, see the separate instructions. TEEA0101L 01/19/21 Form 990 (2020)								

Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e).

Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25).....

Revenue less expenses. Subtract line 18 from line 12.....

Total liabilities (Part X, line 26).....

Total assets (Part X, line 16).....

Net assets or fund balances. Subtract line 21 from line 20.....

17

18

19

20

21

Signature Block

Assets or I Balances

Net A Fund I 22

Part II

	n 990 (2020) SOI DOG FOUNDATION USA	27-1600444	Page 2
Pa	statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III		X
1			·····
	SEE_SCHEDULE_O		
2	Did the organization undertake any significant program services during the year which were not listed on the	prior	
	Form 990 or 990-EZ?	Yes	X No
~	If "Yes," describe these new services on Schedule O.		JZ N.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program s If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program service Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocati and revenue, if any, for each program service reported.	ervices, as measured by ons to others, the total e	expenses. expenses,
4	a (Code:) (Expenses \$ 7,409,848. including grants of \$ 7,409,848.) SOI DOG FOUNDATION USA CONTINUED SUPPORTING SOI DOG FOUNDATION' WELFARE EFFORTS IN THAILAND. WE SOLICITED GENERAL (UNRESTRICTED SOI DOG'S MISSION. SOI DOG'S SUCCESS IN PHUKET IS NOW BEING REP PROVINCES WITHIN THAILAND. A MAJOR AREA OF FOCUS MOVING FORWARD AS MANY OF THE ESTIMATED 640,000 STREET DOGS IN BANGKOK WITH TH STERILIZE 100,000 DOGS PER YEAR. THE FUNDS WERE ALSO USED TO PR OF SOI DOG'S FACILITIES AND STAFF, TO CONTINUE TO COMBAT DISTEM OUTBREAKS AND TO CONTINUE WITH SHELTER IMPROVEMENTS SUCH AS THE OUT NEW DOG RUNS WHERE SHELTERED DOGS COULD BE BETTER SEGREGATE AND HEALTH. FINALLY, ANOTHER MAJOR INITIATIVE WAS TO CONTINUE T OPERATIONAL SOI DOG CLINIC IN BANGKOK.	S_ONGOING_ANIMA) DONATIONS_TO LICATED IN OTHE WILL_BE_TO_STE E_GOAL_TO_BE_TO OVIDE_ONGOING_S PER_AND_OTHER CONTINUED_BUIL D_BY_AGE,_DISPO	SUPPORT R RILIZE UPPORT DING SITION
4	b (Code:) (Expenses \$176,245. including grants of \$176,245.) AS IN YEAR'S PAST, MUCH OF SOI DOG'S WORK IS TO CARE FOR THE DO CARE AT ITS SHELTERS IN THAILAND. THIS PAST YEAR, SOI DOG FOUND OUR FUNDRAISING EFFORTS TO SUPPORT THIS VITAL EFFORT. THE DOGS DIRECT CARE OF SOI DOG ARE NOT ABLE TO SURVIVE ON THEIR OWN DUE PHYSICAL CONDITION AND/OR THE THREAT OF INJURY OR DEATH SHOULD TO THEIR LOCAL COMMUNITIES. SOI DOG'S EFFORTS TO CARE FOR THE M ANIMALS IN PHUKET AND BANGKOK HAS MADE A HUGE DIFFERENCE. THE O PROGRAM AND THE CAT AND PUPPY CARE PROGRAMS HAVE PROVIDED THESE TO LIVE WITH MEDICAL CARE, FOOD AND SOCIALIZATION.	GS AND CATS UND ATION USA CONTI AND CATS UNDER TO THEIR HEALT THEY BE RELEASE OST NEGLECTED O NGOING DOG SPON ANIMALS A SAFE	NUED THE H, D BACK F SORSHIP PLACE
Λ.	c (Code:) (Expenses \$ 104,357. including grants of \$ 104,357.)		3 400)
	AS SOI DOG FOUNDATION HAS GROWN, MORE AND MORE DOGS AND CATS AR CARED FOR AT ITS SHELTERS. SOI DOG'S VISIBILITY AND ADVANCED ME FACILITIES HAVE PROVIDED THE OPPORTUNITY TO SAVE MORE ANIMALS. CLINICS ARE NOW TREATING OVER 200 ANIMALS PER WEEK WITH LIFESAV UP WITH THE NEED AND DEMAND FOR THIS LEVEL OF MEDICAL CARE, SOI SUPPORTED THE DEVELOPMENT OF AN EMERGENCY RESPONSE FUND. DONATI THIS AND THE ANGELS FOR DOGS APPEAL PROVIDE MUCH NEEDED AND CON THE LIFE-SAVING MEDICAL TREATMENT AND ONGOING CARE OF ANIMALS W	E_BEING_TREATED DICAL_TREATMENT AS_A_RESULT,_SO ING_TREATMENT. DOG_FOUNDATION ONS_SOLICITED_U SISTENT_FUNDING	AND I DOG TO_KEEP USA NDER FOR AND
1	d Other program services (Describe on Schedule O.) SEE SCHEDULE O		
	(Expenses \$ 38,399, including grants of \$ 38,399,) (Revenue	\$ 284	`

(Expenses	ېې	38,399.	including grants of
4e Total program	n service	expenses 🕨	7,728,849.

Pai	t IV	Checklist of Required Schedules			
1	ls the	e organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete		Yes	No
	Sche	dule A	1	Х	
2 3		e organization required to complete <i>Schedule B, Schedule of Contributors</i> See instructions?	2		Х
3	for pı	ublic office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Secti in eff	on 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election ect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
5	Is the asses	e organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, ssments, or similar amounts as defined in Revenue Procedure 98-19? <i>If 'Yes,' complete Schedule C, Part III</i>	5		Х
6	to pro	e organization maintain any donor advised funds or any similar funds or accounts for which donors have the right wide advice on the distribution or investment of amounts in such funds or accounts? <i>If 'Yes,' complete Schedule D,</i> <i>I</i>	6		х
7	Did th envir	e organization receive or hold a conservation easement, including easements to preserve open space, the onment, historic land areas, or historic structures? <i>If 'Yes,' complete Schedule D, Part II</i>	7		Х
8	Did th comp	ne organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' Dete Schedule D, Part III	8		Х
9	for an	e organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian nounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation ces? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did tł or in	ne organization, directly or through a related organization, hold assets in donor-restricted endowments quasi endowments? <i>If 'Yes,' complete Schedule D, Part V</i>	10		Х
11	If the or X a	organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VII, IX, as applicable.			
ä	Did th <i>D, Pa</i>	e organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule</i> art VI.	11 a		Х
ł	Did th asset	e organization report an amount for investments – other securities in Part X, line 12, that is 5% or more of its total s reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		Х
(Did th asset	e organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total is reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
(l Did th in Pa	e organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported rt X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
		ne organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
1	the o	e organization's separate or consolidated financial statements for the tax year include a footnote that addresses rganization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If 'Yes,' complete Schedule D, Part X</i>	11 f		Х
	Sche	e organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete dule D, Parts XI and XII	12a	Х	
ł) Was t <i>if the</i>	he organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		Х
13	ls the	e organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14 a	a Did th	ne organization maintain an office, employees, or agents outside of the United States?	14a		Х
	busin at \$1	e organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, ess, investment, and program service activities outside the United States, or aggregate foreign investments valued 00,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b	Х	
15	Did th foreig	ne organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any gn organization? <i>If 'Yes,' complete Schedule F, Parts II and IV</i>	15	Х	
16	Did th or for	e organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
17	Did th colun	e organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, nn (Å), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I See instructions	17		Х
18	Did th lines	e organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		Х
19	Did th <i>comp</i>	ne organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' Dete Schedule G, Part III	19		Х
20 a	Did th	ne organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20 a		Х
Ł	If 'Ye	s' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did th dome	ne organization report more than \$5,000 of grants or other assistance to any domestic organization or estic government on Part IX, column (A), line 1? <i>If 'Yes,' complete Schedule I, Parts I and II.</i>	21		Х

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Page 3

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 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If 'Yes,' complete* 23 Х Schedule J..... 23 **24 a** 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*..... Х 24a **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?..... 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?.... 24c d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?..... 24d 25 a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit 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 disgualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I..... 25b Х 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? *If 'Yes,' complete Schedule L, Part II.* 26 Х 26 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key 27 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. Х 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions): 28 a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If Yes,' complete Schedule L, Part IV. Х 28a **b** A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV..... Х 28b c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If Yes,' complete Schedule L, Part IV..... 28c Х Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M..... Х 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 Х contributions? If 'Yes,' complete Schedule M..... 30 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N. Part I..... Χ 31 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.... Х 32 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 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, 34 Х and Part V, line 1..... 34 **35 a** Did the organization have a controlled entity within the meaning of section 512(b)(13)? Х 35a **b** If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If 'Yes,' complete Schedule R, Part V, line 2*..... 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2..... 36 36 Х 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? *If 'Yes,' complete Schedule R, Part VI......* 37 37 Х Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 38 Note: All Form 990 filers are required to complete Schedule O. Х 38 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V..... Yes No 1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable..... 1 a 3 **b** Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1 b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming Х (gambling) winnings to prize winners?..... 1 c

	,	DOG FOUND		-
Part IV	Checklist of	of Required	Schedules	(continued)

В	A	A

Form 990		27-1600444	1	F	Page 5
Part V	Statements Regarding Other IRS Filings and Tax Compliance (co	ntinued)			
				Yes	No
2 a En [.]	ter the number of employees reported on Form W-3. Transmittal of Wage and Tay State-				
me	ter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statents, filed for the calendar year ending with or within the year covered by this return	2 a 0			
b If a	t least one is reported on line 2a, did the organization file all required federal employmer	It tax returns?	2 b		
Not	te: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
3 a Dic	the organization have unrelated business gross income of \$1,000 or more during the year	ar?	3 a		Х
b If 'Y	'es,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation on Schedule 0		3 b		
4 a At a	any time during the calendar year, did the organization have an interest in, or a signature or othe	er authority over, a	_		v
	ancial account in a foreign country (such as a bank account, securities account, or other f	inancial account)?	4a		X
	Yes,' enter the name of the foreign country►				
	e instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial		F -		X
	s the organization a party to a prohibited tax shelter transaction at any time during the ta I any taxable party notify the organization that it was or is a party to a prohibited tax shell	-	5a 5b		X
	Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5 D 5 C		
			50		
6 a Do- sol	es the organization have annual gross receipts that are normally greater than \$100,000, a icit any contributions that were not tax deductible as charitable contributions?	nd did the organization	6 a		X
b If '` not	(es,' did the organization include with every solicitation an express statement that such contribut tax deductible?	ions or gifts were	6 b		
7 Or	ganizations that may receive deductible contributions under section 170(c).				
a Dic	the organization receive a payment in excess of \$75 made partly as a contribution and p	artly for goods and			
ser	vices provided to the payor?		7 a		Х
	Yes,' did the organization notify the donor of the value of the goods or services provided?		7 b		
	the organization sell, exchange, or otherwise dispose of tangible personal property for which it v		7.		x
	m 8282?		7 c		
	the organization receive any funds, directly or indirectly, to pay premiums on a personal		7 e		X
	the organization during the year, pay premiums, directly or indirectly, or pay premiums on a personal ber		7e 7f		X
	ne organization received a contribution of qualified intellectual property, did the organization file		/1		
	required?	-0111 0099	7 g		
h lf t	he organization received a contribution of cars, boats, airplanes, or other vehicles, did the	organization file a			
Foi	m 1098-C?		7 h		
	onsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	-	0		
	anization have excess business holdings at any time during the year?		8		
-	onsoring organizations maintaining donor advised funds. I the sponsoring organization make any taxable distributions under section 4966?		0.0		
	the sponsoring organization make a distribution to a donor, donor advisor, or related per		9 a 9 b		<u> </u>
	ction 501(c)(7) organizations. Enter:	5011?	90		
	iation fees and capital contributions included on Part VIII, line 12	10a			
	bss receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
	ction 501(c)(12) organizations. Enter:				
	biss income from members or shareholders	11 a			
	oss income from other sources (Do not net amounts due or paid to other sources				
aga	ainst amounts due or received from them.).	11 b			
12 a Se	ction 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu c	f Form 1041?	12 a		
b f '`	Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b			
13 Se	ction 501(c)(29) qualified nonprofit health insurance issuers.				
a ls t	he organization licensed to issue qualified health plans in more than one state?		13a		
No	te: See the instructions for additional information the organization must report on Schedu	le O.			
b En wh	ter the amount of reserves the organization is required to maintain by the states in ich the organization is licensed to issue qualified health plans	13b			
c En	ter the amount of reserves on hand	13c			
14 a Dic	the organization receive any payments for indoor tanning services during the tax year?		14a		X
b f '`	Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on	Schedule O	14 b		
	the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in cess parachute payment(s) during the year?		15		x
	(es,' see instructions and file Form 4720, Schedule N.		-		
	he organization an educational institution subject to the section 4968 excise tax on net in	vestment income?	16		X
lf "	Yes,' complete Form 4720, Schedule O.				

2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X	
-		2		
	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents			v
_	since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X X
6	Did the organization have members or stockholders?	6		A
	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?	7 a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: SEE SCHEDULE O			
a	The governing body?	8 a	Х	
b	Each committee with authority to act on behalf of the governing body?	8 b		Х
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If 'Yes,' provide the names and addresses on Schedule O</i> .SEE.SCHEDULE.O	9	X	
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venu	ie Co	de.)
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10 a		Х
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?	10 b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O			
	Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	х	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was doneSEE. SCHEDULE. O	12 c		
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official.	15 a		Х
b	Other officers or key employees of the organization	15 b		Х
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).			
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a		X
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?	16 b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► _CA			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 5 available for public inspection. Indicate how you made these available. Check all that apply.	01(c)(3)s on	ıly)
	Own website Another's website X 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 availate the public during the tax year. SEE SCHEDULE O	ble to		
20	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			
BAA	TEEA0106L 10/07/20	Form	n 990 ((2020)

Section A. Governing Body and Management

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. Χ

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

1 a Enter the number of voting members of the governing body at the end of the tax year..... If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad

b Enter the number of voting members included on line 1a, above, who are independent.....

authority to an executive committee or similar committee, explain on Schedule O.

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21-1	.600444	

1 a

1 b

Page 6

No

Yes

6

6

Form 990 (2020) SOI DOG FOUNDATION USA	27-1600444	Page 7
Part VII Compensation of Officers, Directors, Trus Independent Contractors	stees, Key Employees, Highest Compensated Employe	es, and
Check if Schedule O contains a response or note to	any line in this Part VII	
Section A. Officers, Directors, Trustees, Key Emple	oyees, and Highest Compensated Employees	
1 a Complete this table for all persons required to be listed. Report co organization's tax year.	impensation for the calendar year ending with or within the	
• List all of the organization's current officers, directors, trus compensation. Enter -0- in columns (D), (E), and (F) if no comp	stees (whether individuals or organizations), regardless of amount of ensation was paid.	
• List all of the organization's current key employees, if any	. See instructions for definition of 'key employee.'	

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

ſ

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

				(C))					
(A) Name and title		than i:	n one s both dire	box, an o ector/	unles officer /truste		on	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other
	per week (list any hours for related organiza- tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) ELIZABETH NEUBRAND	5									
DIRECTOR	0	X						0.	0.	0.
(2) ALEX_HESTERBERG	5									
DIRECTOR	0	X						0.	0.	0.
(3) JANIS ROSENTHAL	_20_									
PRES/EXEC DIR	0	X		Х				0.	0.	0.
_(4)_JOHN_HIGGS	_ <u>15</u> _									
TREASURER/DIREC	0	X		Х				0.	0.	0.
_(5)_ELAINE_SLOAN	5									
SECRETARY	0	X		Х				0.	0.	0.
_(6)_ANNIE_KEENEY	5	ł								
DIRECTOR	0	X						0.	0.	0.
		-								
(10)										
		1								
(11)		1								
(12)		-								
(13)										
(14)										
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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (B) (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) (D) (E) (F) (A) Average hours Reportable compensation from Reportable compensation from Name and title Estimated amount per week (list any of other compensation from the organization and related the organization (W-2/1099-MISC) related organizations (W-2/1099-MISC) Officer Individual trustee Key employee employee Former Highest compensated Institutional trustee hours directo for related organiza - tions organizations below dotted line) (15) (16) (17) (18) (19) (20) (21) (22) (23) (24) (25) 1 b Subtotal 0. 0. 0. ► c Total from continuation sheets to Part VII, Section A 0. 0. 0. d Total (add lines 1b and 1c) 0 0. 0. Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation 2 from the organization **>** 0 Yes No Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? *If 'Yes,' complete Schedule J for such individual*..... 3 3 Х For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? *If 'Yes,' complete Schedule J for* 4 4 Х such individual Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If 'Yes,' complete Schedule J for such person..... 5 5 Х Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (C) Name and business address Description of services Compensation Total number of independent contractors (including but not limited to those listed above) who received more than 2 \$100,000 of compensation from the organization **b** Λ

Part VIII Statement of Revenue

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						(A)	(B)	(C)	_ (D)
						Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded fro under sect 512-514
1 a	Federated campaig	gns		1a					
b	Membership dues.			1 b					
c	Fundraising events	5		1 c					
d	Related organization	ons		1 d					
	Government grants (con			1 e					
	All other contributions, similar amounts not inc	luded a	above	1 f	9,844,421.				
	Noncash contributions in lines 1a-1f.			1 g					
h	Total. Add lines 1a	-1f				9,844,421.			
2				+	Business Code				
2a b		· ·							
c L									
d d									
e									
f	All other program s	servic	e revenu	e					
	Total. Add lines 2a				►				
3	Investment income								
	other similar amou	nts).			••••••	335.	335.		
4	4 Income from investment of tax-exempt bond proc								
5									
(i) Real			eal	(ii) Personal					
	6 a Gross rents 6a								
	Less: rental expenses	6b							
	c Rental income or (loss) 6c d Net rental income or (loss)				>				
					(ii) Other				
/ a	/ a Gross amount from sales of assets				.,				
h	other than inventory Less: cost or other basis	7a							
	and sales expenses	7b							
c	Gain or (loss)	7c							
d	Net gain or (loss).				•••••				
8 a	Gross income from fund	raising	events						
	(not including \$								
	of contributions reported								
.	See Part IV, line 18			88		-			
	Less: direct expent Net income or (los			81					
9a	Gross income from gam See Part IV, line 19	ing act	ivities.	92					
				91					
c Net income or (loss) from gaming activities.					ities►				
10 a Gross sales of inventory, less									
	returns and allowances			10;					
	Less: cost of good			101	-				
c	Net income or (los	s) fro	m sales o	of inve	-				
1 -					Business Code				
11a	MISCELLANEO	J <u>S</u>			900099	31.	31.		
b c	!								
C וה	: All other revenue .								
- u				L	>	31.			
<u>ہ</u> ا	Intal Add upon 11								

Part IX Statement of Functional Expenses

	tion 501(c)(3) and 501(c)(4) organizations must com		ner organizations must co	mplete column (A)				
Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX								
	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							
2	Grants and other assistance to domestic individuals. See Part IV, line 22							
3	Grants and other assistance to foreign organizations, foreign governments, and for- eign individuals. See Part IV, lines 15 and 16.	7,728,849.	7,728,849.					
4 5	Benefits paid to or for members	0	0					
6	trustees, and key employees 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		0.		0.			
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	66,453.		66,453.				
	Lobbying.							
	Professional fundraising services. See Part IV, line 17							
	Investment management fees							
	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.).							
	Advertising and promotion	1,391,371.			1,391,371.			
13	Office expenses	2,135.		2,135.				
14	Information technology.							
15	Royalties.							
16	Occupancy							
17	Travel							
18	Payments of travel or entertainment expenses for any federal, state, or local public officials							
19 20	Conferences, conventions, and meetings							
21	Payments to affiliates.							
22	Depreciation, depletion, and amortization							
23	Insurance.	1,152.		1,152.				
24	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.)	1,102.		1,102.				
ā	BANK FEES	308,384.		308,384.				
	BUSINESS REGISTRATION FEE	4,150.		4,150.				
Ċ	、T							
c	+							
	All other expenses							
	Total functional expenses. Add lines 1 through 24e	9,502,494.	7,728,849.	382,274.	1,391,371.			
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		.,		1,001,0,11			
B AA	SOP 98-2 (ASC 958-720)				Earm 000 (2020)			

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Part X Balance Sheet

			(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing	1,878,825.	1	1,994,080
	2	Savings and temporary cash investments	2,282,140.	2	2,055,149
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	1,286,630.	4	247,560
	5	Loans and other receivables from 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		5	
		Loans and other receivables from other disqualified persons (as defined und			
		section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
3	8	Inventories for sale or use.		8	
		Prepaid expenses and deferred charges.		9	1,210
٤ .		Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			_,
		Less: accumulated depreciation 10b		10 c	
.	11	Investments – publicly traded securities		11	
.		Investments – other securities. See Part IV, line 11		12	
.		Investments – program-related. See Part IV, line 11		13	
.		Intangible assets		14	
-	15	Other assets. See Part IV, line 11		15	
•	16	Total assets. Add lines 1 through 15 (must equal line 33)		16	4,297,99
+	17	Accounts payable and accrued expenses	10,183.	17	16,142
		Grants payable	/	18	10,14
		Deferred revenue	_,,	19	
	20	Tax-exempt bond liabilities		20	
		Escrow or custodial account liability. Complete Part IV of Schedule D		21	
4 L		Loans and other 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		22	
		Secured mortgages and notes payable to unrelated third parties		23 24	
		Unsecured notes and loans payable to unrelated third parties		24	
1	25	Other liabilities (including federal income tax, payables to related third partie and other liabilities not included on lines 17-24). Complete Part X of Schedu	le D.	25	
	26	Total liabilities. Add lines 17 through 25.	1,510,183.	26	16,142
		Organizations that follow FASB ASC 958, check here ► X and complete lines 27, 28, 32, and 33.			
	27	Net assets without donor restrictions	2,213,607.	27	2,673,683
š ;	28	Net assets with donor restrictions	1,725,957.	28	1,608,17
		Organizations that do not follow FASB ASC 958, check here ► and complete lines 29 through 33.			
5	29	Capital stock or trust principal, or current funds		29	
2		Paid-in or capital surplus, or land, building, or equipment fund.		30	
8		Retained earnings, endowment, accumulated income, or other funds		31	
ζ	32	Total net assets or fund balances		32	4,281,85
		Total liabilities and net assets/fund balances			4,297,999

Form 990 (2020) SOI DOG FOUNDATION USA 27-	-1600444		Pa	ge 12
Part 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	9,84	14,7	/87.
2 Total expenses (must equal Part IX, column (A), line 25)	2	9,50		
3 Revenue less expenses. Subtract line 2 from line 1	3			293.
4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)).	4	3,93		
5 Net unrealized gains (losses) on investments	5			
6 Donated services and use of facilities	6			
7 Investment expenses	7			
8 Prior period adjustments	8			
9 Other changes in net assets or fund balances (explain 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,				
column (B)).	10	4,28	31,8	357.
Part XII Financial Statements and Reporting				
Check if Schedule O contains a response or note to any line in this Part XII				
			Yes	No
1 Accounting method used to prepare the Form 990: Cash X Accrual Other				
If the organization changed its method of accounting from a prior year or checked 'Other,' explain				
in Schedule O.				
2 a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review	ed on a			
separate basis, consolidated basis, or both:				
Separate basis Consolidated basis Both consolidated and separate basis				
b Were the organization's financial statements audited by an independent accountant?		2 b	Х	
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separ	ate			
basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis				
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audii review, or compilation of its financial statements and selection of an independent accountant?	i, 	2 c	Х	
If the organization changed either its oversight process or selection process during the tax year, explain				
on Schedule O.				
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3a		Х
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required au	dit			
or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
BAA TEEA0112L 10/19/20		Form	990 ((2020)

SCHEDULE A (Form 990 or 990-EZ)

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.

2020	
Open to Public Inspection	

OMB No. 1545-0047

Name after organization Entropy elementation SOL DOG FOUNDATION USA Extra 6000000000000000000000000000000000000	Departmer Internal Re	nt of the Treasury evenue Service	► (io to <i>www.irs.gov/Fo</i>	rm990 for instructions	and the	latest i	nformation.	Inspection
Part Increase of for Public Charity Status, (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) Image: A check only one box.) Image	Name of the	ne organization	I					Employer identific	ation number
The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(T(A)(i). 2 A school described in section 170(b)(T(A)(i). (Attach Schodule E (Form 990 or 900 E2).) 3 A notical research organization operated in conjunction with a hospital described in section 170(b)(T(A)(ii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(T(A)(i). (Complete Part II.) 6 A tederal, state, or local government a upter state association 170(b)(T(A)(i). (Complete Part II.) 7 X An organization that normally receives a substantial part of its support from a governmental unit described in section 170(b)(T(A)(i). (Complete Part II.) 8 A community trust described in section 170(b)(T(A)(i). (Complete Part II.) 9 An organization that normally receives a substantial part of its support from conjunction with a land-grant college or university: 10 An organization that normally receives (1) more than 33-13% of its support from contributions, membership fees, and gross receipt from advites related to its evering functions, subport to reproduct that subport from gonization described in section 170(b)(T)(A)(b). 11 An organization that normally receives (1) more than 33-13% of its support from contributions, membership fees, and gross receipt from advites related to its evering interview (1) more than 33-13% of its support from gross receipt from advites									
1 A church, convention of churches, or association of churches described in section 170(b)(1(A)(i). 2 A school described in section 170(b)(1(A)(i). (Match Schedule E (Form 390 or 990 E2).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1(A)(ii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1(A)(iii). 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1(A)(V)). 7 X An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1(A)(V)). 8 A community trust describe of a section 170(b)(1(A)(V)). (Complete Part II.) 9 An organization that normally receives a substantial part of its support from a governmental unit of from the general public described in section 170(b)(1(A)(V)). 9 An organization operated organization described in section 170(b)(1(A)(V)). (Complete Part II.) 9 Or norganization operated unicolline (see instructions). Enter the name, city, and state of the college or university: 10 An organization oparized and operated exclusively to test for public safety. See section 599(a)(3. 11 An organization oparized and operated exclusively to test for public safety. See section 599(a)(3. 12 An organizat									ctions.
A school described in section 170(b)(1/A)(ii). (Attach Schedule E (Form 990 or 990-E2).) A hospital or a cooperative hospital service organization described in section 170(b)(1/A)(iii). A notical research organization operated in conjunction with a hospital described in section 170(b)(1/A)(iii). A notical research organization operated in conjunction with a hospital described in section 170(b)(1/A)(iii). A corganization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1/A)(i). A corganization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1/A)(i). (Complete Part II.) B A community trust described in section 170(b)(1/A)(i). (Complete Part II.) B A community trust described in section 170(b)(1/A)(i). (Complete Part II.) B A community trust described in section 170(b)(1/A)(i) complete Part II.) B A companization part not described in section 170(b)(1/A)(i) complete Part II.) B A companization part not described in section 170(b)(1/A)(i) complete Part II.) B A companization part not be section 170(b)(1/A)(i) complete Part II.) B A companization part not described in section 170(b)(1/A)(i) complete Part II.) B A companization section 170(b)(1/A)(i) complete Part II.) B A companization section 170(b)(1/A)(i). (Complete Part II.) B A companization section 170(b)(1/A)(i). (Complete Part II.) B A	The org	-		· ·	5,			,	
3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, (ity, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(v). 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit of from the general public described in section 170(b)(1)(A)(v). 9 A community trust described in section 170(b)(1)(A)(v). (Complete Part II.) 9 An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from double or university: 10 An organization organized and operated exclusively to test to public safety. See section 509(a)(2). 11 An organization organized and operated exclusively for the benefit of, to perform the functions, subport for organization and comparization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of on or more publicly supporting organization specified in section 509(a)(2), section 509(a)(3). Check the box if its apporting organization specified areas and portal directions or thises section 509(a)(3). See section 509(a)(3). Check the box if the supporting organization operated exclusively for the benefit of, to p		-		,				i).	
4 A medical research organization operated in conjunction with a hospital described in section 170(b)(T)(A)(ii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(T)(A)(v). 6 A federal, state, or local government or governmental unit described in section 170(b)(T)(A)(v). 7 AA norganization optimality receives a substantial part of its support form a governmental unit of from the general public described in section 170(b)(T)(A)(v). (Complete Part II).) 9 AA argicultural research organization described in section 170(b)(T)(A)(v). (Complete Part II).) 9 AA organization of part and unaverage of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 AA organization and unvelated bio is sevenori functions, subject to certain exceptions; and (2) no more than 33-1/3% of its support form gross meeting the organization and unvelated bio is sevenori functions, subject to certain exceptions; and (2) no more than 33-1/3% of its support or granization and unvelated exclusively to test for public safety. See section 599(a)(A). 11 AA organization organized and operated exclusively to test for public safety. See section 599(a)(A). 12 An organization organized and operated exclusively for the banefit of, to perform the functions 500(a)(A). 12 An organization organization and operated exclusively or controlled by this supported organization(S), by having control or management of t	_	-			•		•		
name, city, and state:	-			1 0					
S An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) G A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). T An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(v). (Complete Part II.) S A community trust described in section 170(b)(1)(A)(v). (Complete Part II.) S A norganization that normally receives (1) more than 33-103% of its support from contributions, membership fees, and gross receipted or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives (1) more than 33-103% of its support from contributions, membership fees, and gross receipted university: 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(3). Check the box in organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of on or more publicly supported organizations described in sections 509(a)(2). See section 509(a)(3). Check the box in times 12a through 12d that describes the type of supporting organization administration with its supported organization(3). Check the box in times 12a through 12d that describes of the upport of granization supportite dist an adminy of the directions of trusite	4		•	tion operated in conju	unction with a hospital o	describe	d in sec	tion 1 70(b)(1)(A)(iii) . E	Enter the hospital's
In the generative space of the series of a college of university while of operated by a governmental unit described in section 170(b)(1)(A)(v). (Complete Part II.) A norganization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(v). (Complete Part II.) A norganization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(v). (Complete Part II.) A norganization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) norme than 33-1/3% of its support from process investment income and unrelated business taxable income (less section 501 to 20)(A). A organization organized and operated exclusively to test for public safety. See section 509(a)(A). An organization organized and operated exclusively to the buenefit of, to perform the functions of, or to carry out the purposes of on or more publicly supported organization sdescribed in section 509(a)(A). An organization organized and operated exclusively for the benefit of, to perform the functions of 509(a)(A). Complete Part III.) Type I. A supporting organization supervised or controlled by its supported organization. So or to carry out the purposes of on or more publicly supported organization supervised or controlled by its supported organization(S), typically by giving the supported organization and complete Iners 1.20, 200 (A). Type I. A supporting organization supervised or controlled in connection with its supported organization(S), by aving control or management of the supporting organization operated in connection with its supported organization(S). You must complete Part IV, Sections A and B. Type II. A supporting organization operated and operated exclusively must ast		7							
7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(v). (Complete Part II.) 9 An agricultural research organization described in section 170(b)(1)(A)(v). (Complete Part II.) 9 An agricultural research organization described in section 170(b)(1)(A)(v). (Complete Part II.) 9 An agricultural research organization described in section 170(b)(1)(A)(v). (Domplete Part II.) 10 An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33-1/3% of its support from goanization organized and operated exclusively to the tof public safety. See section 509(a)(4). 11	5	An organizati section 170(I	ion operated for b)(1)(A)(iv). (Co	the benefit of a colle mplete Part II.)	ge or university owned	or oper	ated by	a governmental unit d	escribed in
An organization transmit receives a substantial part of its support from a governmental unit or from the general public described in section 770(b/t)A(v)A(v). (Complete Part II.) A community trust described in section 170(b/t)(A(x)(x), (Complete Part II.) A a gricultural research organization described in section 170(b/t)(A(x)(x) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: A norganization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipte from activities related to its seempt functions, subject to certain exceptions; and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) A norganization organized and operated exclusively to test for public safety. See section 509(a)(2). See section 509(a)(2). Check the box in innes 12a through 12d that describes the type of supporting organization and completed innes 12e, 12f, and 12g. Type I. A supporting organization supervised, or controlled by its supported organization(s), by laving control or must complete Part IV. Sections A and C. Type II. A supporting organization supervised or controlled in connection with its supported organization(s) the supported organization(s) (see instructions). You must complete Part IV. Sections A, and C. Type II non-functionally integrated. A supporting organization organization organization reserved and the organization organization organization (see instructions). You must complete Part IV. Sections A and C. (C) Type II non-functionally integrated supporting organization supervised or controlled in connection with its supported organization(s) that is not functionally integrated. The organization oreserved a supporting organization (0) Fine		A federal, sta	ate, or local gov	ernment or governme	ental unit described in s	ection 1	70(b)(1)	(A)(v).	
9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from issuesses acquired by the organization organized and operated exclusively to test for public safety. See section 509(a)(A). 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(A). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of on or more publicly supported organization gradination and complete lines 12e, 12r, and 12g. a Type I. A supporting organization operated, supervised, or controlled in connection with its supported organization(s), by laving control or management of the supporting organization operated in connection with its supported organization(s). You must complete Part IV, Sections A and C. c Type II non-functionally integrated. A supporting organization operated in connection with its supported organization(s). You must complete Part IV, Sections A and C. d Type III functionally integrated. A supporti	7 }	An organizatio	on that normally r ′ 0(b)(1)(A)(vi). (eceives a substantial p Complete Part II.)	part of its support from a	governm	ental uni	t or from the general pu	iblic described
or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). Complete Part III) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(2). See section 509(a)(2	8	A community	trust described	in section 170(b)(1)(A)(vi). (Complete Part I	l.)			
Image: Second	9	or university o	or a non-land-gram	nt college of agriculture	e (see instructions). Enter	the nan	ne, city, a		
12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of on or more publicly supported organizations described in section 509(a)(2). See section 509(a)(3). Check the box in lines 12 at https://a.adl.22. a Type I. A supporting organization operated, supervised, or controlled by its supported organization. You must complete Part IV, Sections A and B. b Type I. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. c Type II. A supporting organization operated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s). You must complete Part IV, Sections A and C. c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and Part V. e Check this box if the organization received a written determination from the IRS that it is a Type II, Type III functionally integrated supporting organization. g Provide the following information about the supported organization(s). (o) Name of supported organization. g Provide the following information about the supported organization. (o) See inst	10	from activitie investment ir	s related to its encome and unre	exempt functions, sub lated business taxable	ject to certain exceptio e income (less section	ns; and	(2) no n	nore than 33-1/3% of i	its support from gross
or more publicly supported organizations described in section 599(a)(1) or section 599(a)(2). See section 599(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization. You must complete Part IV, Sections A and B. b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. e Check this box if the organizations. (i) EIN g Provide the following information about the supported organization(s). (ii) EIN (iii) EIN (iv) Name of supported organization (iii) EIN (iii) EIN (iv) Is the organization isupreavention integrated organizations instructi	11	An organizati	ion organized ar	nd operated exclusive	ely to test for public safe	ety. See	sectior	ı 509(a)(4).	
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d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. e Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (b) eige instructions) (iv) Is the organization support (see instructions) (A) (A) (B) (a)	b _	- management	of the supporting	organization vested in	ontrolled in connection the same persons that c	with its ontrol or	support manage	ed organization(s), by the supported organiza	having control or tion(s). You
Generative of the organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organization about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (described on lines 1-10) above (see instructions)) (v) Amount of monetary support (see instructions) (A) (A) (B) (B) (B)		Type III function	onally integrated (s) (see instructi	. A supporting organizat ons). You must comj	ion operated in connection olete Part IV, Sections A	n with, ai 4, D, an	nd functio d E.	onally integrated with, its	supported
integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization (s). (i) Name of supported organization (ii) EIN (iii) Type of organization (described on lines 1-10 above (see instructions)) Yes (A) (B)	d _	Type III non-fu functionally in instructions).	unctionally integ ntegrated. The o You must com	rated. A supporting org organization generally plete Part IV, Section	anization operated in cor must satisfy a distribu s A and D, and Part V.	nnection tion req	with its s uiremen	supported organization(s t and an attentiveness	s) that is not requirement (see
g Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (described on lines 1-10 above (see instructions)) (iv) Is the organization listed in your governing document? (v) Amount of monetary support (see instructions) (A) (A) Image: Colored organization (B) Image: Colored organization (Colored organization (Colored organization (Colored organization)) Image: Colored organization (Colored organization) (v) Amount of monetary support (see instructions) (A) Image: Colored organization (Colored organization) (A) Image: Colored organization (Colored organization) Image: Colored organization) Image: Colored organization (Colored organization) Image: Colored organization) Image: Colored organization) Image: Colored organization) I	L	integrated, or	r Type III non-fu	nctionally integrated	supporting organizatior	۱.			
(i) Name of supported organization (ii) EIN (iii) Type of organization (described on lines 1-10 above (see instructions)) (iv) Is the organization listed in your governing document? (v) Amount of monetary support (see instructions) (A) (A) <t< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>									
Yes No (A)					(iii) Type of organization (described on lines 1-10	organizat	ion listed		(vi) Amount of other support (see instructions)
(A) (B) (C) (C) <td></td> <td></td> <td></td> <td></td> <td>above (see instructions))</td> <td>in your g docur</td> <td>overning nent?</td> <td></td> <td></td>					above (see instructions))	in your g docur	overning nent?		
(A) (B) (C) (C) <td></td> <td></td> <td></td> <td></td> <td></td> <td>Yes</td> <td>No</td> <td></td> <td></td>						Yes	No		
(B)						103			
	(A)								
(C)	<u>(B)</u>								
	(C)								
(D)	<u>(D)</u>								
(E)	<u>(E)</u>								
Total	Total								

Schedule A (Form 990 or 990-EZ) 2020 SOI DOG FOUNDATION USA

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.)

Section A. Public Support

	ndar year (or fiscal year nning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total			
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	3,921,626.	4,955,119.	6,225,510.	8,548,103.	9,844,421.	33,494,779.			
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	3,921,626.	4,955,119.	6,225,510.	8,548,103.	9,844,421.	33,494,779.			
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						33,494,779.			
Sec	tion B. Total Support									
	ndar year (or fiscal year nning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total			
7	Amounts from line 4	3,921,626.	4,955,119.	6,225,510.	8,548,103.	9,844,421.	33,494,779.			
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources				22,068.	335.	22,403.			
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.) SEE FART VI				3,542.	31.	3,573.			
11	Total support. Add lines 7 through 10						33,520,755.			
12	Gross receipts from related activ	vities, etc. (see ins	structions)			12	0.			
13	3 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.									
Section C. Computation of Public Support Percentage										
	Public support percentage for 20		•••				99.92 %			
15	Public support percentage from	2019 Schedule A,	Part II, line 14				99.90 %			
16a	6a 33-1/3% support test—2020. If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization► X									
b	b 33-1/3% support test—2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization									
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the facts	meets the facts-a	nd-circumstances	test, check this t	box and stop here	. Explain in Part	VI how			
	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-an Private foundation . If the organi	meets the facts-a d-circumstances	nd-circumstances test. The organiza	test, check this b ation qualifies as a	box and stop here a publicly support	e. Explain in Part ed organization	VI how the			
	Private foundation. If the organi		ion a bux on nne	13, 108, 100, 178						
BAA					Scl	hedule A (Form 9	90 or 990-EZ) 2020			

Schedule A (Form 990 or 990-EZ) 2020

27-1600444

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) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(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						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1,						
	2, and 3 received from disgualified persons						
b	Amounts included on lines 2						
	and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or						
	1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
8	Public support. (Subtract line						
<u> </u>	7c from line 6.)						
	tion B. Total Support	() 0010	4 > 0017	() 0010	(1) 0010	() 0000	(0 T)
	dar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
-	Amounts from line 6						
i ud	payments received on securities loans,						
	rents, royalties, and income from similar sources						
b	Unrelated business taxable						
	income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						
с 11	Add lines 10a and 10b						
	activities not included in line 10b,						
	whether or not the business is regularly carried on.						
12	Other income. Do not include						
	gain or loss from the sale of capital assets (Explain in						
10	Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is						
Sec	organization, check this box and tion C. Computation of Pu						······································
	Public support percentage for 20			ne 13, column (f))	15	%
	Public support percentage from						8
	tion D. Computation of Inv						
17	Investment income percentage f	or 2020 (line 10c,	column (f), divid	ed by line 13, col	umn (f))	17	010
18	Investment income percentage f	rom 2019 Schedu	le A, Part III, line	17		18	O/O
19a	33-1/3% support tests -2020. If						
h	is not more than 33-1/3%, check 33-1/3% support tests—2019. If			•		-	
	line 18 is not more than 33-1/3%	6, check this box a	and stop here. Th	e organization qu	alifies as a public	ly supported org	anization 🏲 🔄
20	Private foundation. If the organi	zation did not che	ck a box on line	14, 19a, or 19b, c	heck this box and	l see instructions	s ►

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Page 3

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on 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		
3a	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		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use.	3c		
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		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
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? <i>If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ</i>).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9 a	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 in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI.	9b		
c	: Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI .	9с		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer 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		

Part IV Supporting Organizations (continued)			
		Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?			
a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?	11a		
b A family member of a person described in line 11a above?	11b		
C A 35% controlled entity of a person described in line 11a or 11b above? If 'Yes' to line 11a, 11b, or 11c, provide detail in Part VI.	11c		

Section B. Type I Supporting Organizations

- Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one 1 or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If 'No,' describe in **Part VI** how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

Section C. Type II Supporting Organizations

Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in **Part VI** how control or management of the 1 1 supporting organization was vested in the same persons that controlled or managed the supported organization(s).

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month 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?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how			
	organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played			
	in this regard.			

Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
 - The organization satisfied the Activities Test. Complete line 2 below. а
 - The organization is the parent of each of its supported organizations. Complete line 3 below. b
 - The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions). С

2 Activities Test. Answer lines 2a and 2b below.

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported 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 responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- **b** Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If 'Yes' or 'No,' provide details in Part VI.
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in **Part VI** the role played by the organization in this regard.

	Yes	No
2-		
2a		
2b		
3a		
3b		
55		

Yes

Yes

No

1

2

No

Schedule A (Form 990 or 990-EZ) 2020 SOI DOG FOUNDATION USA Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

27-1600444

Page 6

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E. 1

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		
Ł	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
c	I Total (add lines 1a, 1b, and 1c)	1d		
e	e 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 inte	arated	Type III supporting or	aprization

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions). 7

BAA

Part V

Schedule A (Form 990 or 990-EZ) 2020

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27-3

Pai		upporting Organiza	tions (continue	ed)	
Sec	tion D – Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exempt pu	rposes		1	
2	Amounts paid to perform activity that directly furthers exempt purposes in excess of income from activity	S,	2		
3	Administrative expenses paid to accomplish exempt purposes of su	upported organizations		3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - provide	e 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 organizati in Part VI). See instructions.	on is responsive (provide	details	8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sec	tion E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributi Pre-2020	ons	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reasonable cause required – <i>explain in Part VI</i>). See instructions.				
3	Excess distributions carryover, if any, to 2020				
a	From 2015				
	• From 2016				
	From 2017				
C	From 2018				
	Prom 2019				
	f Total of lines 3a through 3e				
	Applied to underdistributions of prior years				
ł	Applied to 2020 distributable amount				
	i Carryover from 2015 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D, line 7: \$				
	Applied to underdistributions of prior years				
	Applied to 2020 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
6	Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j and 4c.				
8	Breakdown of line 7:				
ā	Excess from 2016				
	Excess from 2017				
C	Excess from 2018				
c	Excess from 2019				
	Excess from 2020				

BAA

Schedule A (Form 990 or 990-EZ) 2020

MATURE AND SOURCE		2020		2019		2010		2017		2010
MISCELLANEOUS	\$	31.	<u>\$</u>	3,542.	<u></u>	0	<u> </u>		<u></u>	0
TOTA	<u>א ג</u>	31.	Ş	3,542.	Ş	<u> </u>	Ş	<u> </u>	ş	<u> </u>

SCHEDULE D (Form 990)

Supplemental Financial Statements ► Complete if the organization answered 'Yes' on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 2020

Open to Public Inspection

Employer identification number

SOI	DOG FOUNDATION USA	2-	7-1600444	
Par				
	Complete if the organization answered 'Yes' on Form 990, Part IV, line 6.			
	(a) Donor advised funds	(b) Func	ls and other acc	ounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor a are the organization's property, subject to the organization's exclusive legal control?	advised fun	ds Yes	No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds ca for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purp impermissible private benefit?	n be used o bose confer	only ring	 ∏ No
Par				
1 41	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).			
		f a historica	Illy important lar	nd area
			historic structur	
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a	a conservati	on easement on t	he
	last day of the tax year.			
			l at the End of t	he Tax Year
	a Total number of conservation easements	2 a		
	o Total acreage restricted by conservation easements	2 b		
	Number of conservation easements on a certified historic structure included in (a)	2 c		
(d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2 d		
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the org tax year ►	ganization d	uring 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, handling and enforcement of the conservation easements it holds?			No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conserv	ation easem	ents during the y	rear
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation ►\$	n easements	during the year	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section and section 170(h)(4)(B)(ii)?	170(h)(4)(l	³⁾⁽ⁱ⁾ Yes	No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and exp include, if applicable, the text of the footnote to the organization's financial statements that descri conservation easements.	ense stater ibes the org	ment and balance anization's acco	ce sheet, and ounting for
Par	t III Organizations Maintaining Collections of Art, Historical Treasures, or Oth Complete if the organization answered 'Yes' on Form 990, Part IV, line 8.	ner Simila	r Assets.	
1;	a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statem historical treasures, or other similar assets held for public exhibition, education, or research in fur Part XIII the text of the footnote to its financial statements that describes these items.	ent and ba therance of	lance sheet worl public service,	ks of art, provide in
I	If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement historical treasures, or other similar assets held for public exhibition, education, or research in furtherance following amounts relating to these items:	e of public s	ervice, provide th	f art, e
	(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 for financial g amounts required to be reported under FASB ASC 958 relating to these items:			
	a Revenue included on Form 990, Part VIII, line 1			
	o Assets included in Form 990, Part X			
BAA	For Paperwork Reduction Act Notice, see the Instructions for Form 990. TEEA3301L 08/18	3/20	Schedule D (Fo	orm 990) 2020

Schedule D (Form 990) 2020 SOI I Part III Organizations Mainta			Historica	Treasures. or	27-1600 Other Similar Asse		Page 2 (ed)		
3 Using the organization's acquisition						•			
itemš (check all that apply): a		d 🗌	Loan or ex	change program					
b Scholarly research			Other						
c Preservation for future gener	c Preservation for future generations								
4 Provide a description of the organiz Part XIII.									
5 During the year, did the organiza to be sold to raise funds rather the solution of the solut	ition solicit or	receive donations	of art, his	torical treasures, or	other similar assets	Yes	No		
Part IV Escrow and Custodia line 9, or reported an	I Arrangem	ents. Complet	e if the c	rganization ans					
1 a Is the organization an agent, trus	stee, custodiar	n or other interme	ediary for co	ontributions or other	assets not included	Yes			
on Form 990, Part X? b If 'Yes,' explain the arrangement					· · · · · · · · · · · · · · · · · · ·	Tes	No		
······································			y		,	Amount			
c Beginning balance					. 1c				
d Additions during the year									
e Distributions during the year									
f Ending balance						V			
2 a Did the organization include an a b If 'Yes,' explain the arrangement							No		
			explanation	r has been provided		· · · · · · · · · · · L			
Part V Endowment Funds. C	omplete if t	he organizatio	n answe	red 'Yes' on For	m 990, Part IV, line	e 10.			
+ +	(a) Current		rior year	(c) Two years back	(d) Three years back	(e) Four year	s back		
1 a 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 percentag		nt year end balan	ce (line 1g,	, column (a)) held a	S:				
a Board designated or quasi-endowm		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~							
b Permanent endowment ► c Term endowment ►									
The percentages on lines 2a, 2b, a		ual 100%							
3 a Are there endowment funds not in t organization by:	ne possession	of the organization	i that are he	Id and administered 1	or the	Yes	No		
(i) Unrelated organizations						3a(i)			
(ii) Related organizations						3a(ii)			
b If 'Yes' on line 3a(ii), are the rela	-					3b			
4 Describe in Part XIII the intended			lowment fu	nds.					
Part VI Land, Buildings, and							10		
Complete if the organi									
Description of property		(a) Cost or other t (investment)	basis (b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book va	alue		
1 a Land									
b Buildings	H								
c Leasehold improvements	H								
e Other	H								
Total. Add lines 1a through 1e. (Colum		ual Form 990. Pa	nt X. colum	nn (B), line 10c.)	• • • • • • • • • • • • • • • • • • •		0.		
BAA	(-)		,			le D (Form 990			

Part VII		 Other Securities. 		N/A	
			(b) Book value	, Part IV, line 11b. See Form 9 (c) Method of valuation: Cost or end-o	
	<u> </u>	egory (including name of security)	(b) Dook value	(C) Method of Valuation: Cost of end-o	Ji-year market value
• •		sts			
(2) Closely (3) Other		515			
(A)					
(~) (B)			-		
(C) (C)			-		
(0) (D)			-		
<u>(E)</u>			-		
<u>(F)</u>			-		
<u> </u>			-		
`́́́́́́́ − − −			-		
(1)			-		
		990, Part X, column (B) line 12.) 🕨			
	Investments -	- Program Related.		N/A	
				, Part IV, line 11c. See Form 9	
(1)	(a) Description o	rinvestment	(b) Book value	(c) Method of valuation: Cost or end	I-of-year market value
(1)					
(2)					
(3)					
(4) (5)					
(6)					
(7)					
(8)					
(9)					
(10)					
		990, Part X, column (B) line 13.) 🕨	•		
Part IX	Other Assets.			, Part IV, line 11d. See Form 9	00 Davit V line 1E
			escription	, Fait IV, inte Tru. See Forms	(b) Book value
(1)		(4) 2 3			
(2)					
(3)					
(4)					
(5)					
(6)					
(7) (8)					
(9)					
(10)					
Total. (Co.	lumn (b) must equ	al Form 990, Part X, column (́В) line 15.)		•
Part X	Other Liabiliti	es.			•
	Complete if the or			e or 11f. See Form 990, Part X, line 25	
1. (1) Eede	ral income taxes	(a) Desc	ription of liability		(b) Book value
(1) 1 ede					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9) (10)					
(10)					
	n (b) must equal Form	990, Part X, column (B) line 25.)		•	•
· - •••• (• ••••					

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII.

Schedule D (Form 990) 2020 SOI DOG FOUNDATION USA	27-1600444	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per I	Return.	
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	9,844,787.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments 2a		
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	9,844,787.
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.)		
c Add lines 4a and 4b	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		9,844,787.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per		,
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements		9,502,494.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		5,502,454.
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		
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		9,502,494.
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b .	4c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).		9,502,494.
Part XIII Supplemental Information.	· _ · _ ·	, <u> </u>

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.

SCHEDULE	F
(Form 990)	

Statement of Activities Outside the United States

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

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

OMB No.	1545-004
20	20

Open to Public

No

Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

SOI DOG FOUNDATION USA

Employer identification	numbe
27-1600444	

G FOUNDATION USA		
General Information on Activities Outside the United States. Complete if t	ne	organization answered 'Yes'
on Form 990, Part IV, line 14b.		-

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?... X Yes

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

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is 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	7,727,000.
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Subtotal					7,727,000.
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	0	0			7,727,000.

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

Schedule F (Form 990) 2020

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Page 2

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.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant PART V	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
				GRANT					
				MAKING		WIRE			
2 E	nter total number of recipient organiz rganization by the IRS, or for which t	zations listed above t the grantee or counse	nat are recognized I has provided a se	as charities by t	he foreign country, equivalency letter.	, recognized as a t	ax exempt 501(c)(⊥ 3) ►	0
	Inter total number of other organization								1
BAA									(Form 990) 2020

Schedule F (Form 990) 2020 SOI DOG FOUNDATION USA

27-1600444

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.

(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book FMV, appraisal other)
				Or recipients Cash grain Cash grain Image:	or recipients cash grain disbursement noncash assistance iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	Orrecupients Cash grait disbursement noncash dasistance Improvement Improvement Improvement Improvement Improvement Improvement Improvement Improvement

Page 3

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

TEEA3505L 09/16/20

Schedule F (Form 990) 2020

27-1600444

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 DETAILED GRANT REPORTS FROM SOI DOG FOUNDATION FOLLOWING DISBURSEMENT OF FUNDS.

27-1600444

SCHEDULE O (Form 990 or 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 SUPPORTS EFFORTS AIMED AT PUBLIC EDUCATION AND SUPPORT OF ANIMAL PROTECTION AND WELFARE ISSUES. OUR MISSION IS TO PROVIDE INFORMATION TO THE AMERICAN PUBLIC ON THE PLIGHT OF ANIMALS AND TO SOLICIT FINANCIAL SUPPORT TO HELP PREVENT AND ELIMINATE ANIMAL CRUELTY. SPECIFIC SUPPORT AREAS INCLUDE: PROVIDING MEDICAL CARE (EMERGENCY TREATMENT, HOSPITAL CONSTRUCTION, ETC.); CONTROLLING OVERPOPULATION OF STRAY ANIMALS THROUGH STERILIZATION PROGRAMS; ENDING THE DOG MEAT TRADE AND PROVIDING GRANTS FOR ANIMAL SHELTERS AND ANIMAL CARE AT THOSE SHELTERS.

FORM 990, PART III, LINE 1 - ORGANIZATION MISSION

SOI DOG FOUNDATION USA SUPPORTS EFFORTS AIMED AT PUBLIC EDUCATION AND SUPPORT OF ANIMAL PROTECTION AND WELFARE ISSUES. OUR MISSION IS TO PROVIDE INFORMATION TO THE AMERICAN PUBLIC ON THE PLIGHT OF ANIMALS AND TO SOLICIT FINANCIAL SUPPORT TO HELP PREVENT AND ELIMINATE ANIMAL CRUELTY. SPECIFIC SUPPORT AREAS INCLUDE: PROVIDING MEDICAL CARE (EMERGENCY TREATMENT, HOSPITAL CONSTRUCTION, ETC.); CONTROLLING OVERPOPULATION OF STRAY ANIMALS THROUGH STERILIZATION PROGRAMS; ENDING THE DOG MEAT TRADE AND PROVIDING GRANTS FOR ANIMAL SHELTERS AND ANIMAL CARE AT THOSE SHELTERS.

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

FOR A SIXTH YEAR, SOI DOG FOUNDATION USA CONTINUED TO SUPPORT SOI DOG FOUNDATION'S EFFORTS TO COMBAT AND ELIMINATE THE HORRIFIC DOG MEAT TRADE IN THAILAND. DUE TO THE PERSISTENT EFFORTS OF SOI DOG, THE DOG MEAT TRADE HAS BEEN DRAMATICALLY CURTAILED IN THAILAND WITH AN ESTIMATED 675,000 DOGS SAVED FROM THE TRADE. AND WHILE DRAMATIC PROGRESS HAS BEEN MADE, THE EFFORT CONTINUES TO ENSURE THAT THE TRADE IS PERMANENTLY ENDED. SPECIFIC EFFORTS THAT WE SUPPORTED INCLUDED AN AWARENESS CAMPAIGN IN NORTHERN

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

THEIR REGIONAL EFFORTS IN SE ASIA TO MAKE IT ILLEGAL TO TRANSPORT LIVE DOGS ACROSS BORDERS FOR THE PURPOSE OF CONSUMING THEM; PROVIDING SUPPORT TO CONTINUE WORLDWIDE AWARENESS OF THE ILLEGAL AND INHUMANE TRADE; AND TO PROVIDE ASSISTANCE IN SHELTERING AND CARING FOR THE THOUSANDS OF DOGS THAT HAVE BEEN RESCUED FROM THE DOG MEAT TRADE.

FORM 990, PART VI, LINE 8 - EXPLANATION OF NO CONTEMPORANEOUSLY DOCUMENTATION OF MEETINGS

GIVEN OUR SIZE AND THE FACT THAT SOI DOG FOUNDATION USA IS RUN AND GOVERNED BY JUST SIX INDIVIDUALS AND THERE IS AN AUDIT COMMITTEE WITH ONE MEMBER.

FORM 990, PART VI, LINE 9 - OFFICER, DIRECTOR, TRUSTEE, KEY EMPLOYEE MAILING ADDRESS CONTACT INFORMATION:

JANIS ROSENTHAL - 1240 SW HIGHLAND RD., PORTLAND, OR 97221;

JOHN HIGGS - 167/9 MOO 4, SOI MAI KHAO 10, TAMBON MAI KHAO, AMPHUR TALANG, PHUKET 83110, THAILAND;

ANNIE KEENEY - 166 W. 75TH STREET. APT. 1410, NEW YORK CITY NY 10023;

ALEX HESTERBERG - 48 EDGEWOOD ROAD, WAYLAND, MA 01778;

ELAINE SLOAN - 10 MITCHELL PLACE, NYC, NY 10017;

ELIZABETH NEUBRAND - 4807 MARLBOROUGH DRIVE, SAN DIEGO, CA 92116

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

THE COMPLETED 990 FORM WAS REVIEWED AND APPROVED BY THE PRESIDENT AND AUDIT COMMITTEE MEMBER PRIOR TO SUBMISSION.

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

THE FOUNDATION ENFORCES ITS CONFLICT OF INTEREST POLICY, WHICH IS MONITORED AND DISCUSSED AT BOARD MEETINGS. ANY CONFLICTS ARE IMMEDIATELY EVALUATED.

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

ALL GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICIES AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC BY REQUEST VIA MAIL, PHONE OR ELECTRONIC CORRESPONDENCE.

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

WHEN REQUESTED, WE WILL PROVIDE A PHOTOCOPY TO BE MAILED OR IF REQUESTED, WE WILL PROVIDE ELECTRONIC DOCUMENTATION VIA PDF.