Form **990**

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

Department of Internal Revenu	the Treasury	use a copy of this return			equirements.	This Form is Open to Public Inspection
A For the 1	999 calendar year, OR tax year period beginning	OCT 13, 1999	and en	ding JUN 3	0, 2000	
B Check if:	C. Name of organization					tification number
Change	use IRS					
address		TION			94-334	2838
X Initial return	type. Number and street (or P.O. hox if mail is no		<u> </u>	Room/suite	E Telephone nur	
Final	Specific C/O ROSSI, FINKELSTEIN					95-33 25
Amende			-	Section 1	F Check ▶ □	CONTRACTOR OF THE PROPERTY OF THE PARTY OF T
(required als	LONG BEACH, CA 90831				J	application is pending
mandina)	rganization - X Exempt under 501(c) (3)		secti	on 4947(a)(1) nonexen	npt charitable trus	
	ion 501(c)(3) exempt organizations and 4947(a)(
	a group return filed for affiliates?			her box in H is checked		
	enter the number of affiliates for which this			nption number (GEN)		
	s filed:			ounting method:	Cash X	Accrual
	separate return filed by an organization covered by a group ruling?			Other (specify)		
	if the organization's gross receipts are norma		he org		return with the IF	RS: but
	d a Form 990 Package in the mail, it should file a return v	그러는 사람들 살아 보다 그리는 사람들이 없는 그런데 되다.	17.20			
7 7 7 7 7 7	990-EZ may be used by organizations with gross re					nd of year.
000000000000000000000000000000000000000	Revenue, Expenses, and Changes in N					
1	Contributions, gifts, grants, and similar amounts receive				A-9-1-2	
а	Direct public support		1 a	54,7	09.	
b	Indirect public support		1b			
T.	Government contributions (grants)		10			
	Total (add lines 1a through 1c) (attach schedule of cont	ributors)				6.35
2	(cash \$ 50,403. noncash \$				1d	54,709
2	Program service revenue including government fees and	contracts (from Part VII, lin	e 93)		2	
3	Membership dues and assessments				3	
4	Interest on savings and temporary cash investments				4	
5	Dividends and interest from securities	5	105			
6 a	Gross rents					200
b	Less: rental expenses		6b			
	Net rental income or (loss) (subtract line 6b from line 6a)			6c	
Ž 7	Other investment income (describe) 7	
Revenue 8 a	Gross amount from sale of assets other	(A) Securities		(B) Other		
cc	than inventory	6,288.	8a			
b	Less: cost or other basis and sales expenses	2,216.	8b			
C	Gain or (loss) (attach schedule)	4,072.	8c			
	Net gain or (loss) (combine line 8c, columns (A) and (B))	STM	T 2	8d	4,072
9	Special events and activities (attach schedule)					
a	Gross revenue (not including \$	of contributions		1		
	reported on line 1a)					
1	Less: direct expenses other than fundraising expenses		9b			
C	Net income or (loss) from special events (subtract line 9	b from line 9a)			9c	parente se esperante de la companya
10 a	Gross sales of inventory, less returns and allowances					
b	Less: cost of goods sold		10b			
	Gross profit or (loss) from sales of inventory (attach sch	edule) (subtract line 10b fro				
11	Other revenue (from Part VII, line 103)				11	100
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c					58,886
13	Program services (from line 44, column (B))					9,180
14 15 16	Management and general (from line 44, column (C))					10,921
g 15	Fundraising (from line 44, column (D))					8,397
≝ 16	Payments to affiliates (attach schedule)					
17	Total expenses (add lines 16 and 44, column (A))					28,498
	Excess or (deficit) for the year (subtract line 17 from line	12)			18	30,388
5 19	Net assets or fund balances at beginning of year (from li	ne 73, column (A))			19	0.
20	Other changes in net assets or fund balances (attach exp	lanation) S	EE	STATEMENT		1,194
21	Net assets or fund balances at end of year (combine line					31,582
UA For D	Innovement Deduction Act Notice and name 4 of the con-	anto instructions			8.777	Farm 000 (400)

Form	n 990 (1999) AN IMAL		R FOUNDATION			342838 Page 2
P				(A). Columns (B), (C), and nonexempt charitable trus	(D) are required for section	1501(c)(3) and
	Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.	Organizatio	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule)					
	cash \$noncash\$	22				
23	Specific assistance to individuals (attach schedul	e) 23				
	Benefits paid to or for members (attach schedule					
	Compensation of officers, directors, etc.		0.	0.	0.	0.
26	Other salaries and wages					
	Pension plan contributions					
	Other employee benefits	Charles Transport Transport				
	Payroll taxes	COLUMN TO SERVICE STREET	4 147			4 147
	Professional fundraising fees		4,147.	1 701	0 100	4,147.
	Accounting fees	THE R. P. LEWIS CO., LANSING, MICH. 495	11,475.	1,721.	9,180.	574.
	Legal fees	The second second second	0 101	760	710	711
	Supplies		2,181.	760.	710.	711.
	Telephone		1,263.	1,162.	101.	
	Postage and shipping		80.	80.	0.20	
	Occupancy		930.		930.	
	Equipment rental and maintenance		2 100			2 100
	Printing and publications		2,190.	1 561		2,190.
	Travel		1,561.	1,561.		
	Conferences, conventions, and meetings					
	Interest					
	Depreciation, depletion, etc. (attach schedule)	42				
	Other expenses (itemize):		262	262		
	BANK CHARGES	43a	263.	263.		775.
-	MISCELLANEOUS	43b	1,906.	1,131.		115.
C	ADMINISTRATION	43c	2,502.	2,502.		
d		43d				
е		43e				
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	28,498.	9,180.	10,921.	8,397.
Rep	orting of Joint Costs Did you report in column		m services) any joint costs	from a combined education	onal campaign and	
fund	draising solicitation?				▶ [Yes X No
	'es," enter (i) the aggregate amount of these joint					;
	the amount allocated to Management and genera			v) the amount allocated to	Fundraising \$	
	art III Statement of Program Ser					
Wh	at is the organization's primary exempt purpose?	► SEE	STATEMENT 4			
						Program Service Expenses
	rganizations must describe their exempt purpose achievem evernents that are not measurable. (Section 501(c)(3) and (4					(Required for 501(c)(3) and (4) orgs., and 4947(a)(1)
	cations to others.)	y organization	s and 4047(a)(1) nonexempt on	arrable tracts must also sinter t	To arrivant or grants and	trusts; but optional for others.)
a	SEE STATEMENT 5					
			(Gr	rants and allocations \$)	9,180.
b						
			(Gr	rants and allocations \$)	
C						
			(Gr	rants and allocations \$)	
d						
			(Gr	rants and allocations \$)	
е	Other program services (attach schedule)		(Gr	rants and allocations \$)	
	Total of Program Service Expenses (should equ	al line 44, c	olumn (B), Program service	ces)	>	9,180.
9230	011					Form 990 (1999)

ANIMAL 94-3342838 Form 990 (1999) NCER FOUNDATION Page 3 Part IV Balance Sheets Note: Where required, attached schedules and amounts within the description column (A) (B) should be for end-of-year amounts only. Beginning of year End of year Cash - non-interest-bearing 19,805. 45 45 46 Savings and temporary cash investments 46 47 a Accounts receivable 47a b Less: allowance for doubtful accounts 47b 47¢ 48 a Pledges receivable 48a b Less: allowance for doubtful accounts 48b 48c Grants receivable 49 50 Receivables from officers, directors, trustees, and key employees 50 51 a Other notes and loans receivable 51a Less: allowance for doubtful accounts 51b 51c Inventories for sale or use 52 53 Prepaid expenses and deferred charges 53 54 Investments - securities 54 55 a Investments - land, buildings, and equipment: basis Less: accumulated depreciation _______55b 55c

	56	Investments - other SEE STATEMENT 6	•	56	11,450.
		Land, buildings, and equipment: basis			
	b	Less: accumulated depreciation 57b		57c	
	58	Other assets (describe		58	
	59	Total assets (add lines 45 through 58) (must equal line 74)	0.	59	31,582.
	60	Accounts payable and accrued expenses		60	
	61	Grants payable		61	
es	62	Deferred revenue		62	
-iabilities	63	Loans from officers, directors, trustees, and key employees		63	
iab	64 a	a Tax-exempt bond liabilities		64a	
_		b Mortgages and other notes payable		64b	
	65	Other liabilities (describe			
				1 [
	66	Total liabilities (add lines 60 through 65)	0.	66	0.
	Orga	nizations that follow SFAS 117, check here X and complete lines 67 through			
_		69 and lines 73 and 74.			
8	67	Unrestricted		67	31,582.
Net Assets or Fund Balances	68	Temporarily restricted		68	
Ba	69	Permanently restricted		69	
핕	Orgai	nizations that do not follow SFAS 117, check here			
Ę		70 through 74			
S	70	Capital stock, trust principal, or current funds		70	6090 De religious en l'ainsi National Internation de l'Allie
set	71	Paid-in or capital surplus, or land, building, and equipment fund		71	
As	72	Retained earnings, endowment, accumulated income, or other funds		72	
ě	73	Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72;			
_		column (A) must equal line 19 and column (B) must equal line 21)	0.	73	31,582.
	74	Total liabilities and net assets / fund balances (add lines 66 and 73)	0.		31,582.
Fo	rm 990	D is available for public inspection and, for some people, serves as the primary or sole source			
		organization in such cases may be determined by the information presented on its return. The			
		scribes, in Part III, the organization's programs and accomplishments			

Part IV-A	ANIMAL		FOUNDAT	TON			94-3	3428	338 Page 4
	Reconciliation of Revenu Financial Statements wit Return	ie per A th Reve	udited nue per	Par	Financ Return		enses With	per A Exper	ludited nses per
a Total revenu	ue, gains, and other support financial statements	a	60,080.	а	Total expenses and le audited financial state	osses per ements	•	а	28,498.
b Amounts in	cluded on line a but not on		·	b	Amounts included or line 17, Form 990:	line a but not on			
line 12, For (1) Net unrealiz				(1)	Donated services and use of facilities	s			
	ents \$ 1,194.			(2)	Prior year adjustmen				
(2) Donated se					reported on line 20, Form 990				
(3) Recoveries	facilities \$			(3)	Losses reported on				
year grants	\$,,,	line 20, Form 990	\$			
(4) Other (spec	ify):			(4)	Other (specify):				
		b	1,194.	1 -	Add amounts on line	s (1) through (4)	▶	b	
	•	C	58,886.	c	Line a minus line b			C	28,498.
				d	Amounts included or 990 but not on line a				
				(1)	Investment expenses	•			
					not included on				
				(2)	line 6b, Form 990 Other (specify):	\$			
	\$\$			(-,		\$			
	s on lines (1) and (2)	d			Add amounts on line		•	d	
(line c plus	ue per line 12, Form 990 line d)	e	58,886.		Total expenses per line (line c plus line d)	ne 17, Form 990			28,498.
Part V Li	st of Officers, Directors, 1			mpl	oyees (List each on	ie even if not compei	nsated.)		
	(A) Name and address			(B) Tr	tle and average hours r week devoted to	(C) Compensation (if not paid, enter -0-)	employe plans &	ibutions to e benefit deferred	(E) Expense account and other allowances
		1.04	*		position				
<u>SĒĒ STAĪ</u>	PEMENT 7			- T	postion	-u-) 0 .		0.	
SEE STAT	PEMENT 7				postion				
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SEE STAT	PEMENT 7				POSITION				
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Form	990 (1999) ANIMAL NCER FOUNDATION	94-3342	2838		Page 5
Pa	rt VI Other Information			Yes	-
76			76		X
77			77		X
			78a		X
		N/A	78b		
79			79		X
					17
			80a		X
81 a	Enter the amount of political expenditures, direct or indirect, as described in the	a 0			
	instructions for line 81 81		-		Х
	Did the organization file Form 1120-POL for this year?		81b		Λ
82 a		•	00-		Х
	fair rental value?		82a		Λ
D	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an				
09 -	expense in Part II. (See instructions for reporting in Part III.)		83a	Х	
	Did the organization comply with the public inspection requirements for returns and exemption applications? Did the organization comply with the disclosure requirements relating to quid pro quo contributions?		83b	X	<u> </u>
			84a	1	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		044		
D	·	/-	84b		.0000000000
85	tax deductible? 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	N/A	85a		
00 h	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	N/A	85b		
u	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization re	reived a waiver for provy tay	000		
	owed for the prior year.	ceived a waiver for proxy tax			
	Dues, assessments, and similar amounts from members	c N/A			
,	Section 162(e) lobbying and political expenditures				
ű	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85	-			
•	Taxable amount of lobbying and political expenditures (line 85d less 85e)		1		
	Does the organization elect to pay the section 6033(e) tax on the amount in 85f?	27/2	85g		
h			oog		
"	allocable to nondeductible lobbying and political expenditures for the following tax year?		85h		
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12		0011		
b	Gross receipts, included on line 12, for public use of club facilities				
87	501(c)(12) organizations. Enter:	V			
о.	Gross income from members or shareholders 87	a N/A			
Ď	Gross income from other sources. (Do not net amounts due or paid to other sources	•			
•	against amounts due or received from them.)	b N/A			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partin		1		
	or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.770	* -			
	If "Yes," complete Part IX	-	88		X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under:				
	section 4911 ► 0 • ; section 4912 ► 0 • ; section 4955 ►	0.			
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit				
	transaction during the year? If "Yes," attach a statement explaining each transaction		89b		X
C	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under	- 1 A	and the second		J45.80 *
	sections 4912, 4955, and 4958	b	tio e		0.
d	Enter: Amount of tax in 89c, above, reimbursed by the organization	2 b	44		0.
90 a	List the states with which a copy of this return is filed CALIFORNIA Number of employees employed in the pay period that includes March 12, 1999				
b	Number of employees employed in the pay period that includes March 12, 1999	***************************************	90b		0
91	The books are in care of ▶ ROSSI, FINKELSTEIN, & CO. LLP	Telephone no. ► <u>562-49</u>	95-3	325	:
		-			
	Located at ► ONE WORLD TRADE CENTER, SUITE 2100	ZIP +4 ▶	9083	1	
		THE CASE OF THE ANALYSIS STORES			
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041-Check here			. ▶[
	and enter the amount of tax-exempt interest received or accrued during the tax year	▶ 92	N/	A	
92304 01-31	1 -00		Forn	990	(1999)

ated. (A) (B) (C) (D) Related or exemp	m 990 (1999) ANIM					3342838 P
alted. (B) (B) (C) (C) (D) (D) (D) (D) (D) (D	art VII Analysis of Income-					
Program service revenue: (a) (b) (b) (c) (d) (d) (d) (d) (d) (d) (d	er gross amounts unless otherwise	Unre	lated business income		ded by section 512, 513, or 514	(E)
Program service revenue: (a) (b) (b) (c) (d) (d) (d) (d) (d) (d) (d	icated.	(A)	(B)	(C)	(D)	Related or exempt
(a) (b) (c) (d) (d) (d) (d) (d) (d) (e) (e) (e) (e) (f) (d) (e) (f) (g) (g) (g) (g) (g) (g) (g) (g) (g) (g	3 Program service revenue:		Amount	t sion	Amount	function income
(b) (c) (de) (e) (g) (•			1000		
(b) (c) (d) (e) (d) (e) (f) (d) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f						
(e) (ii) Medicare/Medical payments (iii) Medicare/M				+		
(g) Fees and contracts from government agencies Membership dues and assessments Interest on savings and temporary cash investments Not rental income or (foss) from real estate: (g) Added-financed property (g) not debt-financed property (g) not debt-financed property (h) not debt	45	50 x 50 50 50 50 50 50 50 50 50 50 50 50 50				
(g) Fees and contracts from government agencies (g) Fees and g) Fees and g) Fees agency from government agencies (g) Fees and g) Fees agency from g) (g) Fees and				-	3 - 2 - 3 - 3 - 4 - 4	
(a) Fiese and contracts from government agencies Membership dues and assessments Interest on avoings and temporary cash investments Not rental income or (loss) from real estate: (a) abet-financed property (b) not debt-financed property (b) not debt-financed property (c) not debt-financed property (b) not debt-financed property Not rental income or (loss) from sales of assets other than inventory Not rental income or (loss) from sales of assets other than inventory Not receive the sales of inventory Other revenue: a b c c c substitution (add columns (8), (D), and (E)) TOTAL (add line 104, columns (B), (D), and ((8)					
Membership dues and assessments interest on savings and temporary cash investments Dividends and interest from securities Dividends and interest from securities 14 105. Note rental income or (loss) from real estate: (a) debt-financed property (b) not debt-financed property (c) not debt-financed property Note rental income or (loss) from personal property Other investment income alian or (loss) from sales of assets other than inventory Not income or (loss) from sales of assets other than inventory Not income or (loss) from sales of inventory Other revenue: 2	(f) Medicare/Medicaid payments					·
Interest on savings and temporary cash investments Dividends and interest from securities Not rental income or (loss) from real estate: (a) adebt-financed property (b) not debt-financed property (c) not debt-financed property (b) not debt-financed property (b) not debt-financed property (c) not dest-financed property (c) not dest-finance	(g) Fees and contracts from government	agencies				
Interest on savings and temporary cash investments Dividends and interest from securities Not rental income or (loss) from real estate: (a) debt-financed property (b) not debt-financed property (Ch) not destination or (loss) from sales of assets (d) not (loss) from sales of assets (d) not (loss) from sales of savets (d) not (loss) from sales of savets (d) not (loss) from sales of savets (d) not (loss) from sales of inventory	Membership dues and assessments					
cash investments Dividends and interest from securities New rental income or (loss) from real estate: (a) debt-financed property (b) not debt-financed property (c) not debt-financed property (b) not debt-financed property (c) not debt-financed prop						
Dividends and interest from securities 14		F(5+ +1 - 2)			·	
Net rental income or (loss) from real estate: (a) debt-financed property (b) not measured property (b) not measured property (b) not measured property (b) not measured property (c) not m				14	105	
(a) debt-financed property (b) not debt-financed property (c) not such property (c) property (c) not		900000000000000000000000000000000000000				
(8) not debt-financed property Net rental income or (toss) from personal property Other investment income Gain or (toss) from sales of assets other than inventory Net income or (toss) from sales of inventory Other revenue: a b c Subtotal (add columns (8), (D), and (E)) TOTAL (add line 104, columns (8), (D), and (E)) TOTAL (- Annual Addition - Annual Add				
Not rental income or (loss) from pales of assets Other investment income Gain or (loss) from sales of assets Other than inventory Not income or (loss) from special events Gross profit or (loss) from special events Subtotal (add columns (B), (D), and (E)) O		***************************************				
Cher investment income Gain or (loss) from sales of assets the trian inventory Not income or (loss) from sales of inventory Other revenue: ** ** ** ** ** ** ** ** **	(b) not debt-financed property			4 22 1 24		
Cither investment income Gain or (loss) from sales of assets other than inventory Net income or (loss) from sales of inventory Other revenue: ** ** ** ** ** ** ** ** **	Net rental income or (loss) from persona	I property			Mala Palay	
Gain or (loss) from sales of assets other than inventory (loss) from special events (Gross profit or (loss) from special events (Gross profit or (loss) from sales of inventory (Dther revenue: a						
their than inventory Not income or (loss) from special events Gross profits or (loss) from special events Gross profits or (loss) from special events Concerns or (loss) from special events Concerns or (loss) from special events Consequence or (loss) from special events Consequence or (loss) from special events B. Consequence or (loss) from special events Con						
Net income or (loss) from special events Gross profit or (loss) from sales of inventory Other revenue: a b c d e Subtotal (add columns (B), (D), and (E)) TOTAL (add line 104, columns (B), (D), and (E)) TOTAL (add line 104, columns (B), (D), and (E)) E: Cline 105 plus line 104, Part I, should equal the amount on line 12, Part I. TVIII Relationship of Activities to the Accomplishment of Exempt Purposes Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes). Total income End-of-year assets N/A No. Under penalties of prijvy, idective must I have exemined this return, including accompanying schedules and statements, and to the best of my movineign and belief. It is true, orned, and complete. Declaration of propages (biter than often than often plane) is based on all information of which prepare has any knowledge, thought and the propages (Signature of officer Date Type or print name and title Preparer's Signature Firm's name (or yours ROSSI FINKELSTEIN & COMPANY LLP EIN 95-4091474				14	4.072.	
Gross profit or (loss) from sales of inventory Other revenue: B B C C C C C C C C C C C						
Other revenue: a b c d d e Subtotal (add columns (B), (D), and (E)) TOTAL (add line 104, columns (B), (D), and (E)) E (Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I. While Relationship of Activities to the Accomplishment of Exempt Purposes No. Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes). Total income End-of-year assets N/A W Under penalties of perjuy, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, cornect, and complete. Declaration of preparer (other than officer) Preparer's Signature Preparer's Signature Firm's name (or yours ROSSI FINKELSTEIN & COMPANY LLP EIN 95-4091474						
b c c d e subtotal (add columns (8), (D), and (E))		tory			6 7 4 4 5 5 5 6 5 6 6 6 6 6 6 6 6 6 6 6 6 6	
Subtotal (add columns (B), (D), and (E)) TOTAL (add line 104, columns (B), (D), and (E)) Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I. Relationship of Activities to the Accomplishment of Exempt Purposes Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes). Total income End-of-year assets N/A Mature of business activities Total income End-of-year assets N/A Mo Under penalties of perjury, idectare that have examined this return including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Bediensiden of prepare (other than efficiency is based on all information of which prepare has any knowledge (important: See General Instruction IJ) Signature of officer Preparer's Proparer's Signature of officer Preparer's Signature of officer Preparer's Si	•••••					
Subtotal (add columns (B), (D), and (E)) TOTAL (add line 104, columns (B), (D), and (E)) Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I. Relationship of Activities to the Accomplishment of Exempt Purposes No. Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes). Total income End-of-year assets N/A Mature of business activities Total income End-of-year assets N/A Mo Subsidiaries Nature of business activities Total income End-of-year assets Total income End-of-year assets Total income End-of-year assets N/A Mo Subsidiaries Date Type or print name and title Preparer's Signature of officer Preparer's					A CONTRACT OF THE CONTRACT OF	
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