

Form **990**

Department of the Treasury
Internal Revenue Service

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

Do not enter social security numbers on this form as it may be made public.
Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014
Open to Public Inspection

A For the 2014 calendar year, or tax year beginning , and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization <p style="text-align: center;">ORANGUTAN FOUNDATION INTERNATIONAL</p> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <p style="text-align: center;">824 S WELLESLEY AVE</p> City or town, state or province, country, and ZIP or foreign postal code <p style="text-align: center;">LOS ANGELES CA 90049</p>	D Employer identification number <p style="text-align: center;">95-4112467</p> E Telephone number <p style="text-align: center;">310-820-4906</p> G Gross receipts \$ 1,817,534
F Name and address of principal officer: <p style="text-align: center;">BIRUTE GALDIKAS 824 S WELLESLEY AVE LOS ANGELES CA 90049</p>		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)

I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () t (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	J Website: WWW.ORANGUTAN.ORG	H(c) Group exemption number u
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other u	L Year of formation: 1986	M State of legal domicile: CA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <p style="text-align: center;">THE ORGANIZATION PROVIDES CARE AND RESEARCH OF ORANGUTANS IN THE WILD AND PROVIDES PUBLIC EDUCATION FROM SUCH RESEARCH.</p>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	20
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	17
	5 Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	6
	6 Total number of volunteers (estimate if necessary)	6	0
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, line 34	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	1,911,169	1,809,522
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	4,266	1,547
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,631	5,616
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,917,066	1,816,685
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	528,125	542,459
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25) u	53,391	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	904,686	950,346
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,432,811	1,492,805	
19 Revenue less expenses. Subtract line 18 from line 12	484,255	323,880	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	2,561,705	2,893,954
	22 Net assets or fund balances. Subtract line 21 from line 20	1,123	9,492
		2,560,582	2,884,462

Part II Signature Block

Under penalties of perjury, 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, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer <p style="text-align: center;">BIRUTE GALDIKAS</p> Type or print name and title	Date <p style="text-align: center;">PRESIDENT</p>
	Print/Type preparer's name <p>John M. Condie, CPA</p> Preparer's signature Date <p>11/11/15</p> Check <input type="checkbox"/> if self-employed PTIN <p>P00317190</p>	

Paid Preparer Use Only	Firm's name } Black & Condie, LLP Firm's address } 23505 Crenshaw Blvd Ste 155 Torrance, CA 90505	Firm's EIN } 20-1356029	Phone no. 310-530-9600
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May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

THE ORGANIZATION PROVIDES CARE AND RESEARCH OF ORANGUTANS IN THE WILD AND PROVIDES PUBLIC EDUCATION FROM SUCH RESEARCH.

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 No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ **1,259,979** including grants of \$) (Revenue \$)

CARE AND CONSERVATION: RESCUE, REPATRIATION AND REHABILITATION OF ORANGUTANS IN THE WILD AND IN CAPTIVITY AS WELL AS CONSERVATION OF ORANGUTAN HABITAT

4b (Code:) (Expenses \$ **35,018** including grants of \$) (Revenue \$)

RESEARCH: COLLECT, ANALYZE AND PUBLISH DATA ON ORANGUTANS

4c (Code:) (Expenses \$ **27,611** including grants of \$) (Revenue \$)

EDUCATION: CREATE AND DISSEMINATE MATERIALS CONCERNING ORANGUTANS FOR ACADEMIC AUDIENCES AND THE PUBLIC AT LARGE.

4d Other program services (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses **1,322,608**

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		X
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	X	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

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

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
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	X	
4b	If "Yes," enter the name of the foreign country: u Indonesia See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the sponsoring organization make any taxable distributions under section 4966?		
9b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
13c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
	20		
b	Enter the number of voting members included in line 1a, above, who are independent		
	17		
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	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
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? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
10b			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
12c		X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	X	
15b		X	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		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?		
16b			

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **u CA**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records: **u**

MICHAEL SHABTAIE
LOS ANGELES

824 S. WELLESLEY AVE

CA 90049

323-938-6046

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DR. BIRUTE GALDIKAS	40.00									
PRESIDENT	0.00	X		X			53,000	0	0	
(2) JOHN BEAL	2.00									
VICE PRES.	0.00	X		X			0	0	0	
(3) BOHAP BIN JALAN	10.00									
DIRECTOR	0.00	X					0	0	0	
(4) DR. NANCY BRIGGS	25.00									
EDUC. DIR.	0.00	X					0	0	0	
(5) LADY MARJORIE GILBERT	10.00									
TREASURER	0.00	X					0	0	0	
(6) STEVE KARBANK	2.00									
DIRECTOR	0.00	X					0	0	0	
(7) RUTA LEE LOWE	2.00									
DIRECTOR	0.00	X					0	0	0	
(8) NORMAN LEAR	2.00									
DIRECTOR	0.00	X					0	0	0	
(9) GERALD SUGARMAN	2.00									
DIRECTOR	0.00	X					0	0	0	
(10) PETER HAYES	2.00									
DIRECTOR	0.00	X					0	0	0	
(11) ANN LEVINE	2.00									
SECRETARY	0.00	X		X			0	0	0	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) BARBARA SPENCER	2.00									
DIRECTOR	0.00	X					0	0	0	
(13) VANNESSA GETTY	2.00									
DIRECTOR	0.00	X					0	0	0	
(14) CHRIS HOAR	2.00									
DIRECTOR	0.00	X					0	0	0	
(15) FRED GALDIKAS	2.00									
DIRECTOR	0.00	X					0	0	0	
(16) SANDRA POST	2.00									
DIRECTOR	0.00	X					0	0	0	
(17) PATRICIA SILVER	2.00									
DIRECTOR	0.00	X					0	0	0	
(18) NEAL WEISMAN	2.00									
DIRECTOR	0.00	X					0	0	0	
(19) ALBERTINO ABELA	2.00									
DIRECTOR	0.00	X					0	0	0	
1b Sub-total							53,000			
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							53,000			

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **u 0**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 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 such individual		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **u 0**

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) JUTTA MAUE KAY DIRECTOR	2.00 0.00	X						0	0	0
(13)										
(14)										
(15)										
(16)										
(17)										
(18)										
(19)										
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **u**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		
4 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 such individual		
5 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		

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **u**

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,809,522			
	g Noncash contributions included in lines 1a-1f: \$					
	h Total. Add lines 1a-1f	u		1,809,522		
Program Service Revenue	2a	Busn. Code				
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f	u				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)	u	1,547	1,547		
	4 Income from investment of tax-exempt bond proceeds	u				
	5 Royalties	u				
	6a Gross rents	(i) Real				
		(ii) Personal				
	b Less: rental exps.					
	c Rental inc. or (loss)					
	d Net rental income or (loss)	u				
	7a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
	b Less: cost or other basis & sales exps.					
	c Gain or (loss)					
	d Net gain or (loss)	u				
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a				
		b Less: direct expenses	b			
c Net income or (loss) from fundraising events	u					
9a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b				
c Net income or (loss) from gaming activities	u					
10a Gross sales of inventory, less returns and allowances	a	6,465				
	b Less: cost of goods sold	b	849			
c Net income or (loss) from sales of inventory	u	5,616	5,616			
Miscellaneous Revenue	11a	Busn. Code				
	b					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d	u				
12 Total revenue. See instructions.	u		1,816,685	7,163	0	0

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 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 foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	53,000	45,050	5,300	2,650
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	477,672	405,671	58,501	13,500
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	11,787	10,011	1,417	359
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion	8,766	7,451	877	438
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	45,068	42,764	1,536	768
17 Travel	132,208	132,208		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	8,043	6,837	804	402
23 Insurance	23,717	20,159	2,372	1,186
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a FOOD & MEDICAL CARE	301,315	301,315		
b REPAIRS & MAINTENANCE	216,802	216,802		
c OUTSIDE SERVICES	50,177	50,177		
d MISCELLANEOUS	42,652	16,879	25,773	
e All other expenses	121,598	67,284	20,226	34,088
25 Total functional expenses. Add lines 1 through 24e	1,492,805	1,322,608	116,806	53,391
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 <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest bearing	823,499	1	831,026
	2	Savings and temporary cash investments	64,115	2	64,175
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	21,672	8	21,407
	9	Prepaid expenses and deferred charges	3,452	9	3,598
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 2,034,252		
	b	Less: accumulated depreciation	10b 131,683	10c	1,902,569
	11	Investments—publicly traded securities	19,210	11	69,016
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	2,163	15	2,163
16	Total assets. Add lines 1 through 15 (must equal line 34)	2,561,705	16	2,893,954	
Liabilities	17	Accounts payable and accrued expenses	1,123	17	9,492
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	1,123	26	9,492
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	1,725,563	27	2,087,789
	28	Temporarily restricted net assets	835,019	28	796,673
	29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	2,560,582	33	2,884,462	
34	Total liabilities and net assets/fund balances	2,561,705	34	2,893,954	

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	1,816,685
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,492,805
3	Revenue less expenses. Subtract line 2 from line 1	3	323,880
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,560,582
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 in Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	2,884,462

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: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

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.
u Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

2014

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

u Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization

ORANGUTAN FOUNDATION INTERNATIONAL

Employer identification number

95-4112467

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 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)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - 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 II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) u	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	971,719	1,364,094	2,091,155	1,911,168	1,809,522	8,147,658
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	971,719	1,364,094	2,091,155	1,911,168	1,809,522	8,147,658
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)						
6 Public support. Subtract line 5 from line 4.						8,147,658

Section B. Total Support

Calendar year (or fiscal year beginning in) u	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4	971,719	1,364,094	2,091,155	1,911,168	1,809,522	8,147,658
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,519	864	777	4,266	1,547	8,973
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						8,156,631

12 Gross receipts from related activities, etc. (see instructions) 12 8,012

13 **First five 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

14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14	99.89 %
15 Public support percentage from 2013 Schedule A, Part II, line 14	15	99.85 %

16a 33 1/3% support test—2014. 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 ▶

b 33 1/3% support test—2013. 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 test—2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶

b 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) u	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(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						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) u	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five 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

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2013 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of 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.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).		
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).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

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 (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's 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 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

		Yes	No
1	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 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, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
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 the organization maintained a close and continuous working relationship with the supported organization(s).		
3	By reason of the relationship described in (2), 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):		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2	Activities Test. Answer (a) and (b) 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 (a) 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 (a) and (b) 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? 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.		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

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

Section 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	

Section 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	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
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 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	

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

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2014:			
a			
b			
c			
d			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2014 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 Excess distributions carryover to 2015. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c			
d Excess from 2013 . . .			
e Excess from 2014 . . .			

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

u Attach to Form 990, Form 990-EZ, or Form 990-PF.

u Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

Name of the organization

Employer identification number

ORANGUTAN FOUNDATION INTERNATIONAL

95-4112467

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(**3**) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃ % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year ► \$

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization ORANGUTAN FOUNDATION INTERNATIONAL	Employer identification number 95-4112467
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	\$ 65,921	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	\$ 100,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	\$ 65,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	\$ 100,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	\$ 100,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	\$ 54,600	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

u Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization

Employer identification number

ORANGUTAN FOUNDATION INTERNATIONAL

95-4112467

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 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... Yes No, 6 Did the organization inform all grantees... Yes No.

Part II Conservation Easements.

Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements, 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution, 3 Number of conservation easements modified, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy..., 6 Staff and volunteer hours..., 7 Amount of expenses..., 8 Does each conservation easement..., 9 In Part XIII, describe how the organization reports...

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Table with 2 columns: u \$. Rows include: 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report..., 1b If the organization elected, as permitted under SFAS 116 (ASC 958), to report..., 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain...

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a** Public exhibition
- b** Scholarly research
- c** Preservation for future generations
- d** Loan or exchange programs
- e** Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

- c** Beginning balance
- d** Additions during the year
- e** Distributions during the year
- f** Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment **u**
 - b** Permanent endowment **u**
 - c** Temporarily restricted endowment **u**
- The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i)** unrelated organizations
- (ii)** related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,796,995		1,796,995
b Buildings		20,718	8,287	12,431
c Leasehold improvements				
d Equipment		216,539	123,396	93,143
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) **u** **1,902,569**

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) u		

Part VIII Investments—Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) u		

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) u	

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) u	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e). Row 1: Total revenue, gains, and other support per audited financial statements, amount 1,816,685. Row 2: Amounts included on line 1 but not on Form 990, Part VIII, line 12. Row 3: Subtract line 2e from line 1, amount 1,816,685. Row 4: Amounts included on Form 990, Part VIII, line 12, but not on line 1. Row 5: Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) amount 1,816,685.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e). Row 1: Total expenses and losses per audited financial statements, amount 1,492,805. Row 2: Amounts included on line 1 but not on Form 990, Part IX, line 25. Row 3: Subtract line 2e from line 1, amount 1,492,805. Row 4: Amounts included on Form 990, Part IX, line 25, but not on line 1. Row 5: Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) amount 1,492,805.

Part XIII Supplemental Information.

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

Series of horizontal dotted lines for providing supplemental information.

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

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

2014

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

u Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

ORANGUTAN FOUNDATION INTERNATIONAL

Employer identification number

95-4112467

Part I General Information on Activities Outside the United States. Complete if the 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? Yes No

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
Indonesia					
(1)	1		Program	Operate care center	1,125,573
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total	1				1,125,573
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	1				1,125,573

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	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **u** _____

3 Enter total number of other organizations or entities **u** _____

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.
 Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part 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 No

- 2 Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990) Yes 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 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 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 No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990) Yes No

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, Line 3 - Activities per Region

Region	Expenditures	Investments
Indonesia	\$ 1,125,573	\$ 0

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

u Attach to Form 990 or 990-EZ.

u Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

**Open to Public
Inspection**

ORANGUTAN FOUNDATION INTERNATIONAL

Employer identification number

95-4112467

Form 990, Part V, Line 4b - Financial Accounts in Foreign Countries

Indonesia

Form 990, Part VI, Line 2 - Related Party Information Among Officers

Bohap bin Jalan

DIRECTOR

Spouse/ Pres. Birute Galdikas

Fred Galdikas

Director

Son of Pres. Birute Galdikas

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

**Tax filings are provided to President and other board members for review
prior to filing.**

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

Conflicts monitored by executive board members.

Form 990, Part VI, Line 15a - Compensation Process for Top Official

**The compensation committee comprised of board members evaluates performance
based on mission achievement, mission expansion, work ethics, funding
acquired, background, expanding outreach, presence or public image,
management, comparison to other animal nonprofits salaries and overall
success.**

Name of the organization

Employer identification number

ORANGUTAN FOUNDATION INTERNATIONAL

95-4112467

Form 990, Part VI, Line 15b - Compensation Process for Officers

The compensation committee comprised of board members evaluates performance based on mission achievement, mission expansion, work ethics, funding acquired, background, expanding outreach, presence or public image, management, comparison to other animal nonprofits salaries and overall success.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

Documents are available upon request. There are also documents available on the organization's website.

Federal Statements**Statement 1 - Form 4562, Line 26 - Property Used More Than 50% in a Qualified Business**

	Property Type	Date	Business %	Cost	Depr Basis	Period	Method	Deduction	Section 179
VEHICLE		11/30/12	100.00	\$ 1,110	\$ 555	5.0	200DBMQ	\$ 126	\$
BOAT		10/31/13	100.00	6,637	3,318	5.0	200DBMQ	1,261	
TRUCKS		12/31/14	100.00	59,002	47,542	5.0	200DBMQ		
Total				\$ <u>66,749</u>	\$ <u>51,415</u>			\$ <u>1,387</u>	\$ <u>0</u>

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property)

u Attach to your tax return.

u Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

OMB No. 1545-0172

2014

Attachment Sequence No. **179**

Name(s) shown on return

ORANGUTAN FOUNDATION INTERNATIONAL

Identifying number

95-4112467

Business or activity to which this form relates

Indirect Depreciation

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	500,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2013 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2015. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	1,546
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	531

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2014	17	1,299
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input checked="" type="checkbox"/> u <input type="checkbox"/>		

Section B—Assets Placed in Service During 2014 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property		1,097	5.0	MQ	200DB	55
c 7-year property		448	7.0	MQ	200DB	16
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	

Section C—Assets Placed in Service During 2014 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	12,847
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	16,294
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? 24b If "Yes," is the evidence written? 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) 26 Property used more than 50% in a qualified business use: See Statement 1 27 Property used 50% or less in a qualified business use: 28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 29 Add amounts in column (i), line 26. Enter here and on line 7, page 1

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

30 Total business/investment miles driven during the year (do not include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use?

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.)

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI Amortization

42 Amortization of costs that begins during your 2014 tax year (see instructions): 43 Amortization of costs that began before your 2014 tax year 44 Total. Add amounts in column (f). See the instructions for where to report

ORANGUTAN ORANGUTAN FOUNDATION INTERNATIONAL
 95-4112467
 FYE: 12/31/2014

11/11/2015 5:15 PM

Federal Asset Report
Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179B	Bonus	Basis for Depr	PerConv	Meth	Prior	Current
5-year GDS Property:											
63	COMPUTER	10/31/14	2,194			X	1,097	5	MQ200DB	0	1,152
			<u>2,194</u>				<u>1,097</u>			<u>0</u>	<u>1,152</u>
7-year GDS Property:											
64	FURNITURE	10/31/14	897			X	448	7	MQ200DB	0	465
			<u>897</u>				<u>448</u>			<u>0</u>	<u>465</u>
Prior MACRS:											
2	EQUIPMENT	12/31/97	21,204				21,204	5	HY 200DB	21,204	0
5	COLLECTION	12/31/97	13,500				13,500	5	HY 200DB	0	0
7	BLACKBAUD SOFTWARE	4/14/00	6,793				6,793	5	HY 200DB	6,793	0
8	COMPUTER	5/17/00	8,147				8,147	5	HY 200DB	8,147	0
44	LAPTOP COMPUTER	4/01/07	1,255				1,255	7	HY 200DB	1,199	56
48	LAPTOP COMPUTER	2/27/09	2,713			X	1,356	5	HY 200DB	2,635	78
49	CAMERA	12/02/09	534			X	267	5	HY 200DB	519	15
51	LAPTOP	2/28/10	534			X	267	5	HY 200DB	488	31
52	COMPUTER	6/06/11	3,378			X	0	5	HY 200DB	3,378	0
53	COMPUTER	7/30/11	1,760			X	0	5	HY 200DB	1,760	0
54	GENERATOR	11/30/11	1,226			X	0	7	HY 200DB	1,226	0
55	AIR CONDITIONER	11/30/11	699			X	0	7	HY 200DB	699	0
56	COMPUTER	11/30/11	647			X	0	5	HY 200DB	647	0
57	COMPUTER	11/30/12	2,355			X	1,177	5	MQ200DB	1,684	268
60	BOAT MOTOR	10/31/13	6,181			X	3,091	7	MQ200DB	3,201	851
			<u>70,926</u>				<u>57,057</u>			<u>53,580</u>	<u>1,299</u>
Other Depreciation:											
4	LAND	6/11/98	37,532				37,532	0	-- Land	0	0
9	X-RAY EQUIPMENT	5/09/01	570				570	7	MO S/L	570	0
10	AC UNIT	5/16/01	478				478	7	MO S/L	478	0
11	PROCESSOR PENTIUM III	5/16/01	915				915	5	MO S/L	915	0
12	AC UNIT	8/14/01	602				602	7	MO S/L	602	0
13	SONY INT 4/8 GB SCSI DAT	10/02/01	834				834	5	MO S/L	834	0
14	ADDTL LAND IN INDONESIA	12/31/01	17,408				17,408	0	-- Land	0	0
15	COMPUTER	5/12/02	2,098				2,098	5	MO S/L	2,098	0
16	LAPTOP COMPUTER	9/23/02	2,325				2,325	5	MO S/L	2,325	0
17	RADIO EQUIPMENT	12/30/02	3,210				3,210	5	MO S/L	3,210	0
18	ANAESTHESIA MACHINE	6/30/02	3,000				3,000	5	MO S/L	3,000	0
19	BOARD ROOM TABLE & CHAIRS	6/30/02	7,800				7,800	7	MO S/L	7,800	0
20	TWO DESKS	6/30/02	500				500	7	MO S/L	500	0
21	CREDENZA	6/30/02	1,500				1,500	5	MO S/L	1,500	0
22	PROJECTOR	11/14/02	2,711				2,711	5	MO S/L	2,711	0
23	COMPUTER	12/01/02	1,900				1,900	5	MO S/L	1,900	0
24	COPY MACHINE	10/02/02	650				650	5	MO S/L	650	0
25	SOFTWARE - RAISER'S EDGE	10/29/02	2,959				2,959	5	MO S/L	2,959	0
26	SOFTWARE LICENSE	3/22/02	900				900	5	MO S/L	900	0
27	SOFTWARE - MS OFFICE 2001	6/10/02	705				705	5	MO S/L	705	0
29	LAND	9/09/02	5,590				5,590	0	-- Land	0	0
31	RADIO EQUIPMENT	6/13/03	4,595				4,595	5	MO S/L	4,595	0
32	ARCVIEW 8.X	2/20/03	1,500				1,500	5	MO S/L	1,500	0
33	ARCVIEW 8.3	2/20/03	1,500				1,500	5	MO S/L	1,500	0
34	ARCGIS SPATIAL ANALYST	2/20/03	2,500				2,500	5	MO S/L	2,500	0
35	ARCGIS 3D ANALYST	2/20/03	2,500				2,500	5	MO S/L	2,500	0
36	ARC	2/20/03	1,195				1,195	5	MO S/L	1,195	0
37	AUTOMOBILE	8/19/03	14,068				14,068	5	MO S/L	14,068	0
39	DEFIBRILLATOR	11/15/04	1,200				1,200	5	MO S/L	1,200	0
40	QUARANTINE CENTER	6/26/04	20,718				20,718	39	MO S/L	4,250	531
41	LAPTOP	6/10/05	700				700	5	MO S/L	700	0
42	COMPUTER	9/12/05	993				993	5	MO S/L	993	0
43	COMPUTERS HQ	3/07/06	2,794				2,794	5	MO S/L	2,794	0
46	LAND	1/31/07	63,181				63,181	0	-- Land	0	0
47	LAND	12/31/08	164,617				164,617	0	-- Land	0	0
50	LAND	12/31/09	93,421				93,421	0	-- Land	0	0
59	LAND	12/31/12	293,534				293,534	0	-- Land	0	0

Federal Asset Report
Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
62	LAND	12/31/13	639,392			639,392	0 -- Land	0	0
66	LAND	12/31/14	220,926			220,926	0 -- Land	0	0
Total Other Depreciation			<u>1,623,521</u>			<u>1,623,521</u>		<u>71,452</u>	<u>531</u>
Total ACRS and Other Depreciation			<u>1,623,521</u>			<u>1,623,521</u>		<u>71,452</u>	<u>531</u>
Listed Property:									
58	VEHICLE	11/30/12	1,110		X	555	5 MQ200DB	794	126
65	TRUCKS	12/31/14	59,002		X	47,542	5 MQ200DB	0	11,460
61	BOAT	10/31/13	6,637		X	3,318	5 MQ200DB	3,485	1,261
			<u>66,749</u>			<u>51,415</u>		<u>4,279</u>	<u>12,847</u>
Grand Totals			1,764,287			1,733,538		129,311	16,294
Less: Dispositions and Transfers			0			0		0	0
Less: Start-up/Org Expense			0			0		0	0
Net Grand Totals			<u>1,764,287</u>			<u>1,733,538</u>		<u>129,311</u>	<u>16,294</u>

CA Asset Report
Form 990, Page 1

Asset	Description	Date In Service	Cost	Basis for Depr	CA Prior	CA Current	Federal Current	Difference Fed - CA
5-year GDS Property:								
63	COMPUTER	10/31/14	2,194	2,194	0	110	1,152	1,042
			<u>2,194</u>	<u>2,194</u>	<u>0</u>	<u>110</u>	<u>1,152</u>	<u>1,042</u>
7-year GDS Property:								
64	FURNITURE	10/31/14	897	897	0	32	465	433
			<u>897</u>	<u>897</u>	<u>0</u>	<u>32</u>	<u>465</u>	<u>433</u>
Prior MACRS:								
2	EQUIPMENT	12/31/97	21,204	21,204	21,204	0	0	0
5	COLLECTION	12/31/97	13,500	13,500	0	0	0	0
7	BLACKBAUD SOFTWARE	4/14/00	6,793	6,793	6,793	0	0	0
8	COMPUTER	5/17/00	8,147	8,147	8,147	0	0	0
44	LAPTOP COMPUTER	4/01/07	1,255	1,255	1,199	56	56	0
48	LAPTOP COMPUTER	2/27/09	2,713	2,713	2,557	156	78	-78
49	CAMERA	12/02/09	534	534	503	31	15	-16
51	LAPTOP	2/28/10	534	534	442	61	31	-30
52	COMPUTER	6/06/11	3,378	3,378	2,405	389	0	-389
53	COMPUTER	7/30/11	1,760	1,760	1,253	203	0	-203
54	GENERATOR	11/30/11	1,226	1,226	690	153	0	-153
55	AIR CONDITIONER	11/30/11	699	699	393	87	0	-87
56	COMPUTER	11/30/11	647	647	461	74	0	-74
57	COMPUTER	11/30/12	2,355	2,355	1,013	537	268	-269
60	BOAT MOTOR	10/31/13	6,181	6,181	221	1,703	851	-852
			<u>70,926</u>	<u>70,926</u>	<u>47,281</u>	<u>3,450</u>	<u>1,299</u>	<u>-2,151</u>
Other Depreciation:								
4	LAND	6/11/98	37,532	37,532	0	0	0	0
9	X-RAY EQUIPMENT	5/09/01	570	570	570	0	0	0
10	AC UNIT	5/16/01	478	478	478	0	0	0
11	PROCESSOR PENTIUM III	5/16/01	915	915	915	0	0	0
12	AC UNIT	8/14/01	602	602	602	0	0	0
13	SONY INT 4/8 GB SCSI DAT	10/02/01	834	834	834	0	0	0
14	ADDTL LAND IN INDONESIA	12/31/01	17,408	17,408	0	0	0	0
15	COMPUTER	5/12/02	2,098	2,098	2,098	0	0	0
16	LAPTOP COMPUTER	9/23/02	2,325	2,325	2,325	0	0	0
17	RADIO EQUIPMENT	12/30/02	3,210	3,210	3,210	0	0	0
18	ANAESTHESIA MACHINE	6/30/02	3,000	3,000	3,000	0	0	0
19	BOARD ROOM TABLE & CHAIRS	6/30/02	7,800	7,800	7,800	0	0	0
20	TWO DESKS	6/30/02	500	500	500	0	0	0
21	CREDENZA	6/30/02	1,500	1,500	1,500	0	0	0
22	PROJECTOR	11/14/02	2,711	2,711	2,711	0	0	0
23	COMPUTER	12/01/02	1,900	1,900	1,900	0	0	0
24	COPY MACHINE	10/02/02	650	650	650	0	0	0
25	SOFTWARE - RAISER'S EDGE	10/29/02	2,959	2,959	2,959	0	0	0
26	SOFTWARE LICENSE	3/22/02	900	900	900	0	0	0
27	SOFTWARE - MS OFFICE 2001	6/10/02	705	705	705	0	0	0
29	LAND	9/09/02	5,590	5,590	0	0	0	0
31	RADIO EQUIPMENT	6/13/03	4,595	4,595	4,595	0	0	0
32	ARCVIEW 8.X	2/20/03	1,500	1,500	1,500	0	0	0
33	ARCVIEW 8.3	2/20/03	1,500	1,500	1,500	0	0	0
34	ARCGIS SPATIAL ANALYST	2/20/03	2,500	2,500	2,500	0	0	0
35	ARCGIS 3D ANALYST	2/20/03	2,500	2,500	2,500	0	0	0
36	ARC	2/20/03	1,195	1,195	1,195	0	0	0
37	AUTOMOBILE	8/19/03	14,068	14,068	14,068	0	0	0
39	DEFIBRILLATOR	11/15/04	1,200	1,200	1,200	0	0	0
40	QUARANTINE CENTER	6/26/04	20,718	20,718	4,250	531	531	0
41	LAPTOP	6/10/05	700	700	700	0	0	0
42	COMPUTER	9/12/05	993	993	993	0	0	0
43	COMPUTERS HQ	3/07/06	2,794	2,794	2,794	0	0	0
46	LAND	1/31/07	63,181	63,181	0	0	0	0
47	LAND	12/31/08	164,617	164,617	0	0	0	0
50	LAND	12/31/09	93,421	93,421	0	0	0	0
59	LAND	12/31/12	293,534	293,534	0	0	0	0

95-4112467

CA Asset Report

FYE: 12/31/2014

Form 990, Page 1

Asset	Description	Date In Service	Cost	Basis for Depr	CA Prior	CA Current	Federal Current	Difference Fed - CA
62	LAND	12/31/13	639,392	639,392	0	0	0	0
66	LAND	12/31/14	220,926	220,926	0	0	0	0
Total Other Depreciation			<u>1,623,521</u>	<u>1,623,521</u>	<u>71,452</u>	<u>531</u>	<u>531</u>	<u>0</u>
Total ACRS and Other Depreciation			<u>1,623,521</u>	<u>1,623,521</u>	<u>71,452</u>	<u>531</u>	<u>531</u>	<u>0</u>
Listed Property:								
58	VEHICLE	11/30/12	1,110	1,110	477	253	126	-127
65	TRUCKS	12/31/14	59,002	59,002	0	2,950	11,460	8,510
61	BOAT	10/31/13	6,637	6,637	332	2,522	1,261	-1,261
			<u>66,749</u>	<u>66,749</u>	<u>809</u>	<u>5,725</u>	<u>12,847</u>	<u>7,122</u>
Grand Totals			1,764,287	1,764,287	119,542	9,848	16,294	6,446
Less: Dispositions			0	0	0	0	0	0
Less: Start-up/Org Expense			0	0	0	0	0	0
Net Grand Totals			<u>1,764,287</u>	<u>1,764,287</u>	<u>119,542</u>	<u>9,848</u>	<u>16,294</u>	<u>6,446</u>

ORANGUTAN ORANGUTAN FOUNDATION INTERNATIONAL
 95-4112467
 FYE: 12/31/2014

11/11/2015 5:15 PM

AMT Asset Report
Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179B	Bonus	Basis for Depr	Per Conv	Meth	Prior	Current
5-year GDS Property:											
63	COMPUTER	10/31/14	2,194			X	1,097	5	MQ200DB	0	1,152
			<u>2,194</u>				<u>1,097</u>			<u>0</u>	<u>1,152</u>
7-year GDS Property:											
64	FURNITURE	10/31/14	897			X	448	7	MQ200DB	0	465
			<u>897</u>				<u>448</u>			<u>0</u>	<u>465</u>
Prior MACRS:											
2	EQUIPMENT	12/31/97	21,204				21,204	10	HY 150DB	21,204	0
5	COLLECTION	12/31/97	13,500				13,500	10	HY 150DB	13,500	0
7	BLACKBAUD SOFTWARE	4/14/00	6,793				6,793	5	HY 150DB	6,793	0
8	COMPUTER	5/17/00	8,147				8,147	5	HY 150DB	8,147	0
44	LAPTOP COMPUTER	4/01/07	1,255				1,255	7	HY 150DB	1,178	77
48	LAPTOP COMPUTER	2/27/09	2,713			X	1,356	5	HY 200DB	2,635	78
49	CAMERA	12/02/09	534			X	267	5	HY 200DB	519	15
51	LAPTOP	2/28/10	534			X	267	5	HY 200DB	488	31
52	COMPUTER	6/06/11	3,378			X	0	5	HY 200DB	3,378	0
53	COMPUTER	7/30/11	1,760			X	0	5	HY 200DB	1,760	0
54	GENERATOR	11/30/11	1,226			X	0	7	HY 200DB	1,226	0
55	AIR CONDITIONER	11/30/11	699			X	0	7	HY 200DB	699	0
56	COMPUTER	11/30/11	647			X	0	5	HY 200DB	647	0
57	COMPUTER	11/30/12	2,355			X	1,177	5	MQ200DB	1,684	268
60	BOAT MOTOR	10/31/13	6,181			X	3,091	7	MQ200DB	3,201	851
			<u>70,926</u>				<u>57,057</u>			<u>67,059</u>	<u>1,320</u>
Other Depreciation:											
4	LAND	6/11/98	0				0	0	HY	0	0
9	X-RAY EQUIPMENT	5/09/01	0				0	0	HY	0	0
10	AC UNIT	5/16/01	0				0	0	HY	0	0
11	PROCESSOR PENTIUM III	5/16/01	0				0	0	HY	0	0
12	AC UNIT	8/14/01	0				0	0	HY	0	0
13	SONY INT 4/8 GB SCSI DAT	10/02/01	0				0	0	HY	0	0
14	ADDTL LAND IN INDONESIA	12/31/01	0				0	0	HY	0	0
15	COMPUTER	5/12/02	0				0	0	HY	0	0
16	LAPTOP COMPUTER	9/23/02	0				0	0	HY	0	0
17	RADIO EQUIPMENT	12/30/02	0				0	0	HY	0	0
18	ANAESTHESIA MACHINE	6/30/02	0				0	0	HY	0	0
19	BOARD ROOM TABLE & CHAIRS	6/30/02	0				0	0	HY	0	0
20	TWO DESKS	6/30/02	0				0	0	HY	0	0
21	CREDENZA	6/30/02	0				0	0	HY	0	0
22	PROJECTOR	11/14/02	0				0	0	HY	0	0
23	COMPUTER	12/01/02	0				0	0	HY	0	0
24	COPY MACHINE	10/02/02	0				0	0	HY	0	0
25	SOFTWARE - RAISER'S EDGE	10/29/02	0				0	0	HY	0	0
26	SOFTWARE LICENSE	3/22/02	0				0	0	HY	0	0
27	SOFTWARE - MS OFFICE 2001	6/10/02	0				0	0	HY	0	0
29	LAND	9/09/02	0				0	0	HY	0	0
31	RADIO EQUIPMENT	6/13/03	0				0	0	HY	0	0
32	ARCVIEW 8.X	2/20/03	0				0	0	HY	0	0
33	ARCVIEW 8.3	2/20/03	0				0	0	HY	0	0
34	ARCGIS SPATIAL ANALYST	2/20/03	0				0	0	HY	0	0
35	ARCGIS 3D ANALYST	2/20/03	0				0	0	HY	0	0
36	ARC	2/20/03	0				0	0	HY	0	0
37	AUTOMOBILE	8/19/03	0				0	0	HY	0	0
39	DEFIBRILLATOR	11/15/04	0				0	0	HY	0	0
40	QUARANTINE CENTER	6/26/04	0				0	0	HY	0	0
41	LAPTOP	6/10/05	0				0	0	HY	0	0
42	COMPUTER	9/12/05	0				0	0	HY	0	0
43	COMPUTERS HQ	3/07/06	0				0	0	HY	0	0
46	LAND	1/31/07	0				0	0	HY	0	0
47	LAND	12/31/08	0				0	0	HY	0	0
50	LAND	12/31/09	0				0	0	HY	0	0
59	LAND	12/31/12	0				0	0	HY	0	0

95-4112467

AMT Asset Report

FYE: 12/31/2014

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
62	LAND	12/31/13	0			0	0 HY	0	0
66	LAND	12/31/14	0			0	0 HY	0	0
Total Other Depreciation			<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>
Total ACRS and Other Depreciation			<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>
Listed Property:									
58	VEHICLE	11/30/12	1,110		X	555	5 MQ200DB	794	126
65	TRUCKS	12/31/14	59,002		X	47,542	5 MQ200DB	0	11,460
61	BOAT	10/31/13	6,637		X	3,318	5 MQ200DB	3,485	1,261
			<u>66,749</u>			<u>51,415</u>		<u>4,279</u>	<u>12,847</u>
Grand Totals			140,766			110,017		71,338	15,784
Less: Dispositions and Transfers			<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>
Net Grand Totals			<u>140,766</u>			<u>110,017</u>		<u>71,338</u>	<u>15,784</u>

95-4112467

Bonus Depreciation Report

FYE: 12/31/2014

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
Activity: Form 990, Page 1								
48	LAPTOP COMPUTER	2/27/09	2,713		0	0	1,357	1,356
49	CAMERA	12/02/09	534		0	0	267	267
51	LAPTOP	2/28/10	534		0	0	267	267
52	COMPUTER	6/06/11	3,378		0	0	3,378	0
53	COMPUTER	7/30/11	1,760		0	0	1,760	0
54	GENERATOR	11/30/11	1,226		0	0	1,226	0
55	AIR CONDITIONER	11/30/11	699		0	0	699	0
56	COMPUTER	11/30/11	647		0	0	647	0
57	COMPUTER	11/30/12	2,355		0	0	1,178	1,177
58	VEHICLE	11/30/12	1,110	100	0	0	555	555
60	BOAT MOTOR	10/31/13	6,181		0	0	3,090	3,091
61	BOAT	10/31/13	6,637	100	0	0	3,319	3,318
63	COMPUTER	10/31/14	2,194		0	1,097	0	1,097
64	FURNITURE	10/31/14	897		0	449	0	448
65	TRUCKS	12/31/14	59,002	100	0	11,460	0	47,542
Form 990, Page 1			<u>89,867</u>		<u>0</u>	<u>13,006</u>	<u>17,743</u>	<u>59,118</u>
Grand Total			<u>89,867</u>		<u>0</u>	<u>13,006</u>	<u>17,743</u>	<u>59,118</u>

95-4112467

Depreciation Adjustment Report

FYE: 12/31/2014

All Business Activities

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	<u>Description</u>	<u>Tax</u>	<u>AMT</u>	<u>AMT Adjustments/ Preferences</u>
MACRS Adjustments:						
Page 1	1	2	EQUIPMENT	0	0	0
Page 1	1	5	COLLECTION	0	0	0
Page 1	1	7	BLACKBAUD SOFTWARE	0	0	0
Page 1	1	8	COMPUTER	0	0	0
Page 1	1	44	LAPTOP COMPUTER	56	77	-21
Page 1	1	48	LAPTOP COMPUTER	78	78	0
Page 1	1	49	CAMERA	15	15	0
Page 1	1	51	LAPTOP	31	31	0
Page 1	1	52	COMPUTER	0	0	0
Page 1	1	53	COMPUTER	0	0	0
Page 1	1	54	GENERATOR	0	0	0
Page 1	1	55	AIR CONDITIONER	0	0	0
Page 1	1	56	COMPUTER	0	0	0
Page 1	1	57	COMPUTER	268	268	0
Page 1	1	58	VEHICLE	126	126	0
Page 1	1	60	BOAT MOTOR	851	851	0
Page 1	1	61	BOAT	1,261	1,261	0
Page 1	1	63	COMPUTER	1,152	1,152	0
Page 1	1	64	FURNITURE	465	465	0
Page 1	1	65	TRUCKS	11,460	11,460	0
				<u>15,763</u>	<u>15,784</u>	<u>-21</u>

95-4112467

Future Depreciation Report**FYE: 12/31/15**

FYE: 12/31/2014

Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
Prior MACRS:					
2	EQUIPMENT	12/31/97	21,204	0	0
5	COLLECTION	12/31/97	13,500	0	0
7	BLACKBAUD SOFTWARE	4/14/00	6,793	0	0
8	COMPUTER	5/17/00	8,147	0	0
44	LAPTOP COMPUTER	4/01/07	1,255	0	0
48	LAPTOP COMPUTER	2/27/09	2,713	0	0
49	CAMERA	12/02/09	534	0	0
51	LAPTOP	2/28/10	534	15	15
52	COMPUTER	6/06/11	3,378	0	0
53	COMPUTER	7/30/11	1,760	0	0
54	GENERATOR	11/30/11	1,226	0	0
55	AIR CONDITIONER	11/30/11	699	0	0
56	COMPUTER	11/30/11	647	0	0
57	COMPUTER	11/30/12	2,355	161	161
60	BOAT MOTOR	10/31/13	6,181	608	608
63	COMPUTER	10/31/14	2,194	417	417
64	FURNITURE	10/31/14	897	123	123
			<u>74,017</u>	<u>1,324</u>	<u>1,324</u>
Other Depreciation:					
4	LAND	6/11/98	37,532	0	0
9	X-RAY EQUIPMENT	5/09/01	570	0	0
10	AC UNIT	5/16/01	478	0	0
11	PROCESSOR PENTIUM III	5/16/01	915	0	0
12	AC UNIT	8/14/01	602	0	0
13	SONY INT 4/8 GB SCSI DAT	10/02/01	834	0	0
14	ADDTL LAND IN INDONESIA	12/31/01	17,408	0	0
15	COMPUTER	5/12/02	2,098	0	0
16	LAPTOP COMPUTER	9/23/02	2,325	0	0
17	RADIO EQUIPMENT	12/30/02	3,210	0	0
18	ANAESTHESIA MACHINE	6/30/02	3,000	0	0
19	BOARD ROOM TABLE & CHAIRS	6/30/02	7,800	0	0
20	TWO DESKS	6/30/02	500	0	0
21	CREDENZA	6/30/02	1,500	0	0
22	PROJECTOR	11/14/02	2,711	0	0
23	COMPUTER	12/01/02	1,900	0	0
24	COPY MACHINE	10/02/02	650	0	0
25	SOFTWARE - RAISER'S EDGE	10/29/02	2,959	0	0
26	SOFTWARE LICENSE	3/22/02	900	0	0
27	SOFTWARE - MS OFFICE 2001	6/10/02	705	0	0
29	LAND	9/09/02	5,590	0	0
31	RADIO EQUIPMENT	6/13/03	4,595	0	0
32	ARCVIEW 8.X	2/20/03	1,500	0	0
33	ARCVIEW 8.3	2/20/03	1,500	0	0
34	ARCGIS SPATIAL ANALYST	2/20/03	2,500	0	0
35	ARCGIS 3D ANALYST	2/20/03	2,500	0	0
36	ARC	2/20/03	1,195	0	0
37	AUTOMOBILE	8/19/03	14,068	0	0
39	DEFIBRILLATOR	11/15/04	1,200	0	0
40	QUARANTINE CENTER	6/26/04	20,718	531	0
41	LAPTOP	6/10/05	700	0	0
42	COMPUTER	9/12/05	993	0	0
43	COMPUTERS HQ	3/07/06	2,794	0	0
46	LAND	1/31/07	63,181	0	0
47	LAND	12/31/08	164,617	0	0
50	LAND	12/31/09	93,421	0	0
59	LAND	12/31/12	293,534	0	0
62	LAND	12/31/13	639,392	0	0
66	LAND	12/31/14	220,926	0	0
	Total Other Depreciation		<u>1,623,521</u>	<u>531</u>	<u>0</u>

95-4112467

Future Depreciation Report**FYE: 12/31/15**

FYE: 12/31/2014

Form 990, Page 1

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
Total ACRS and Other Depreciation			<u>1,623,521</u>	<u>531</u>	<u>0</u>
Listed Property:					
58	VEHICLE	11/30/12	1,110	76	76
65	TRUCKS	12/31/14	59,002	5,500	5,500
61	BOAT	10/31/13	6,637	756	756
			<u>66,749</u>	<u>6,332</u>	<u>6,332</u>
Grand Totals			<u>1,764,287</u>	<u>8,187</u>	<u>7,656</u>

95-4112467

CA Future Depreciation Report**FYE: 12/31/15**

FYE: 12/31/2014

Form 990, Page 1

Asset	Description	Date In Service	Cost	CA
Prior MACRS:				
2	EQUIPMENT	12/31/97	21,204	0
5	COLLECTION	12/31/97	13,500	0
7	BLACKBAUD SOFTWARE	4/14/00	6,793	0
8	COMPUTER	5/17/00	8,147	0
44	LAPTOP COMPUTER	4/01/07	1,255	0
48	LAPTOP COMPUTER	2/27/09	2,713	0
49	CAMERA	12/02/09	534	0
51	LAPTOP	2/28/10	534	31
52	COMPUTER	6/06/11	3,378	389
53	COMPUTER	7/30/11	1,760	203
54	GENERATOR	11/30/11	1,226	109
55	AIR CONDITIONER	11/30/11	699	63
56	COMPUTER	11/30/11	647	75
57	COMPUTER	11/30/12	2,355	322
60	BOAT MOTOR	10/31/13	6,181	1,216
63	COMPUTER	10/31/14	2,194	833
64	FURNITURE	10/31/14	897	247
			<u>74,017</u>	<u>3,488</u>

Other Depreciation:

4	LAND	6/11/98	37,532	0
9	X-RAY EQUIPMENT	5/09/01	570	0
10	AC UNIT	5/16/01	478	0
11	PROCESSOR PENTIUM III	5/16/01	915	0
12	AC UNIT	8/14/01	602	0
13	SONY INT 4/8 GB SCSI DAT	10/02/01	834	0
14	ADDTL LAND IN INDONESIA	12/31/01	17,408	0
15	COMPUTER	5/12/02	2,098	0
16	LAPTOP COMPUTER	9/23/02	2,325	0
17	RADIO EQUIPMENT	12/30/02	3,210	0
18	ANAESTHESIA MACHINE	6/30/02	3,000	0
19	BOARD ROOM TABLE & CHAIRS	6/30/02	7,800	0
20	TWO DESKS	6/30/02	500	0
21	CREDENZA	6/30/02	1,500	0
22	PROJECTOR	11/14/02	2,711	0
23	COMPUTER	12/01/02	1,900	0
24	COPY MACHINE	10/02/02	650	0
25	SOFTWARE - RAISER'S EDGE	10/29/02	2,959	0
26	SOFTWARE LICENSE	3/22/02	900	0
27	SOFTWARE - MS OFFICE 2001	6/10/02	705	0
29	LAND	9/09/02	5,590	0
31	RADIO EQUIPMENT	6/13/03	4,595	0
32	ARCVIEW 8.X	2/20/03	1,500	0
33	ARCVIEW 8.3	2/20/03	1,500	0
34	ARCGIS SPATIAL ANALYST	2/20/03	2,500	0
35	ARCGIS 3D ANALYST	2/20/03	2,500	0
36	ARC	2/20/03	1,195	0
37	AUTOMOBILE	8/19/03	14,068	0
39	DEFIBRILLATOR	11/15/04	1,200	0
40	QUARANTINE CENTER	6/26/04	20,718	531
41	LAPTOP	6/10/05	700	0
42	COMPUTER	9/12/05	993	0
43	COMPUTERS HQ	3/07/06	2,794	0
46	LAND	1/31/07	63,181	0
47	LAND	12/31/08	164,617	0
50	LAND	12/31/09	93,421	0
59	LAND	12/31/12	293,534	0
62	LAND	12/31/13	639,392	0
66	LAND	12/31/14	220,926	0
	Total Other Depreciation		<u>1,623,521</u>	<u>531</u>

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>CA</u>
Total ACRS and Other Depreciation			<u>1,623,521</u>	<u>531</u>
Listed Property:				
58	VEHICLE	11/30/12	1,110	152
65	TRUCKS	12/31/14	59,002	5,500
61	BOAT	10/31/13	<u>6,637</u>	<u>1,513</u>
			<u>66,749</u>	<u>7,165</u>
Grand Totals			<u>1,764,287</u>	<u>11,184</u>

Form 990	Two Year Comparison Report	2013 & 2014
For calendar year 2014, or tax year beginning _____, ending _____		

Name **ORANGUTAN FOUNDATION INTERNATIONAL** Taxpayer Identification Number **95-4112467**

		2013	2014	Differences
R e v e n u e	1. Contributions, gifts, grants	1,911,169	1,809,522	-101,647
	2. Membership dues and assessments			
	3. Government contributions and grants			
	4. Program service revenue			
	5. Investment income	4,266	1,547	-2,719
	6. Proceeds from tax exempt bonds			
	7. Net gain or (loss) from sale of assets other than inventory			
	8. Net income or (loss) from fundraising events			
	9. Net income or (loss) from gaming			
	10. Net gain or (loss) on sales of inventory	1,631	5,616	3,985
	11. Other revenue			
	12. Total revenue. Add lines 1 through 11	1,917,066	1,816,685	-100,381
E x p e n s e s	13. Grants and similar amounts paid			
	14. Benefits paid to or for members			
	15. Compensation of officers, directors, trustees, etc.	48,000	53,000	5,000
	16. Salaries, other compensation, and employee benefits	480,125	489,459	9,334
	17. Professional fundraising fees			
	18. Other professional fees			
	19. Occupancy, rent, utilities, and maintenance	54,752	45,068	-9,684
	20. Depreciation and Depletion	5,482	8,043	2,561
	21. Other expenses	844,452	897,235	52,783
	22. Total expenses. Add lines 13 through 21	1,432,811	1,492,805	59,994
	23. Excess or (Deficit). Subtract line 22 from line 12	484,255	323,880	-160,375
O t h e r I n f o r m a t i o n	24. Total exempt revenue	1,917,066	1,816,685	-100,381
	25. Total unrelated revenue			
	26. Total excludable revenue	5,897	7,163	1,266
	27. Total assets	2,561,705	2,893,954	332,249
	28. Total liabilities	1,123	9,492	8,369
	29. Retained earnings	2,560,582	2,884,462	323,880
	30. Number of voting members of governing body	18	20	
31. Number of independent voting members of governing body	15	17		
32. Number of employees	5	6		
33. Number of volunteers				

Form **990T**

Two Year Comparison Report

2013 & 2014

For calendar year 2014, or tax year beginning _____, ending _____

Name

Taxpayer Identification Number

ORANGUTAN FOUNDATION INTERNATIONAL

95-4112467

		2013	2014	Differences
Revenue	1. Gross profit/loss on business activities	1.		
	2. Capital gains/losses	2.		
	3. Income/loss from partnerships and S corporations	3.		
	4. Rental income (net of expense)	4.		
	5. Unrelated debt-financed income (net of expense)	5.		
	6. Interest, and other income from controlled organizations (net of expense)	6.		
	7. Investment income of specific organizations (net of expense)	7.		
	8. Exploited exempt activity income (net of expense)	8.		
	9. Advertising income (net of expense)	9.		
	10. Other income	10.		
	11. Total trade or business income. Combine lines 1 through 10	11.		
Expenses	12. Compensation of officers, directors, and trustees	12.		
	13. Other salaries and wages	13.		
	14. Repairs and maintenance	14.		
	15. Bad debts	15.		
	16. Interest	16.		
	17. Taxes and licenses	17.		
	18. Charitable contributions	18.		
	19. Depreciation and Depletion	19.		
	20. Contributions to deferred compensation plans	20.		
	21. Employee benefit programs	21.		
	22. Other deductions	22.		
	23. Total deductions. Add lines 12 through 22	23.		
	24. Taxable income before NOL. Subtract line 23 from 11	24.		
	25. Net operating loss deduction	25.		
	26. Specific deduction	26.	1,000	-1,000
	27. Unrelated business taxable income.	27.	-1,000	1,000
	Tax & Credits	28. Income tax (corporate or trust)	28.	
29. Proxy tax		29.		
30. Alternative minimum tax		30.		
31. Total taxes		31.		
32. Other credits		32.		
33. General business credit		33.		
34. Credit for prior year minimum tax		34.		
35. Total credits		35.		
36. Net tax after credits		36.		
37. Recapture taxes		37.		
38. Total Taxes	38.			
Due/Refund	39. Prior year overpayment and estimated tax payments	39.		
	40. Payment made with extension	40.		
	41. Backup withholding and foreign withholding	41.		
	42. Other payments	42.		
	43. Total payments	43.		
	44. Balance due/(Overpayment)	44.		
	45. Overpayment applied to next year	45.		
	46. Penalties	46.		
47. Total due/(Refund)	47.			

Form **990****Tax Return History****2014**

Name

ORANGUTAN FOUNDATION INTERNATIONAL

Employer Identification Number

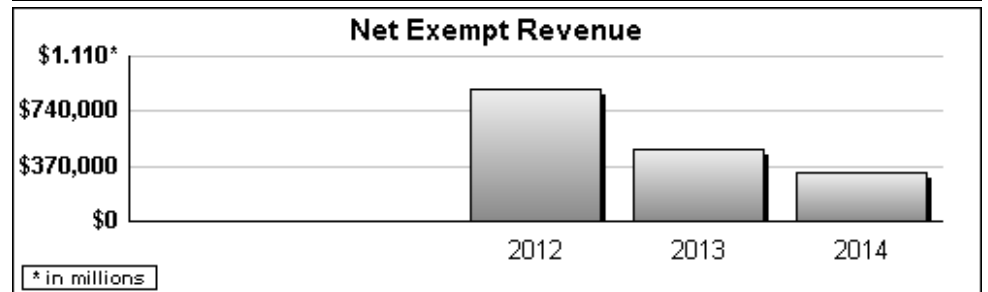
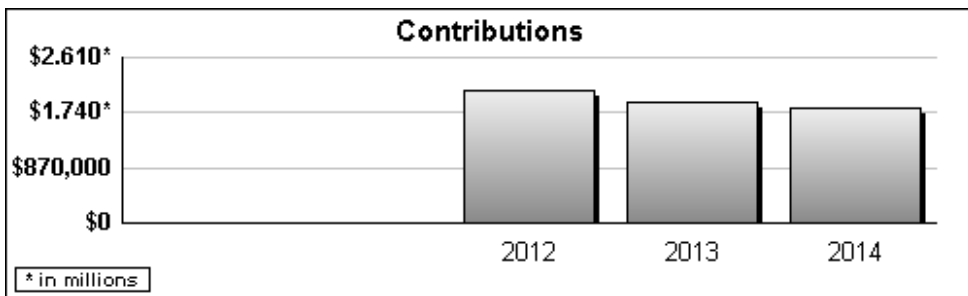
95-4112467

	2010	2011	2012	2013	2014	2015
Contributions, gifts, grants			2,090,409	1,911,169	1,809,522	
Membership dues						
Program service revenue						
Capital gain or loss						
Investment income			777	4,266	1,547	
Fundraising revenue (income/loss)						
Gaming revenue (income/loss)						
Other revenue			4,808	1,631	5,616	
Total revenue			2,095,994	1,917,066	1,816,685	
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc.			48,000	48,000	53,000	
Other compensation			483,179	480,125	489,459	
Professional fees						
Occupancy costs			40,753	54,752	45,068	
Depreciation and depletion			4,283	5,482	8,043	
Other expenses			627,508	844,452	897,235	
Total expenses			1,203,723	1,432,811	1,492,805	
Excess or (Deficit)			892,271	484,255	323,880	
Total exempt revenue			2,095,994	1,917,066	1,816,685	
Total unrelated revenue						
Total excludable revenue			2,095,994	5,897	7,163	
Total Assets			2,101,828	2,561,705	2,893,954	
Total Liabilities			25,501	1,123	9,492	
Net Fund Balances			2,076,327	2,560,582	2,884,462	

Form 990T	Tax Return History	2014
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Name ORANGUTAN FOUNDATION INTERNATIONAL	Employer Identification Number 95-4112467
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	2010	2011	2012	2013	2014	2015
Business activity profit/loss						
Capital gains/losses						
Partner and S Corp gain/loss						
Rental income*						
Debt-financed income*						
Controlled organizations income/interest*						
Investment income, specific organizations*						
Exploited exempt activity income*						
Other income						
Total trade or business income.						
Compensation of officers, ect.						
Other salaries and wages						
Repairs and maintenance						
Bad debts						
Interest						
Taxes and licenses						
Charitable contributions						
Depreciation and Depletion						
Deferred compensation plans						
Employee benefit programs						

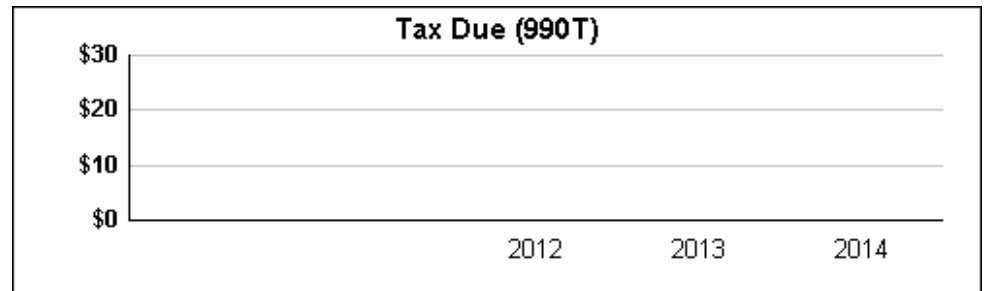
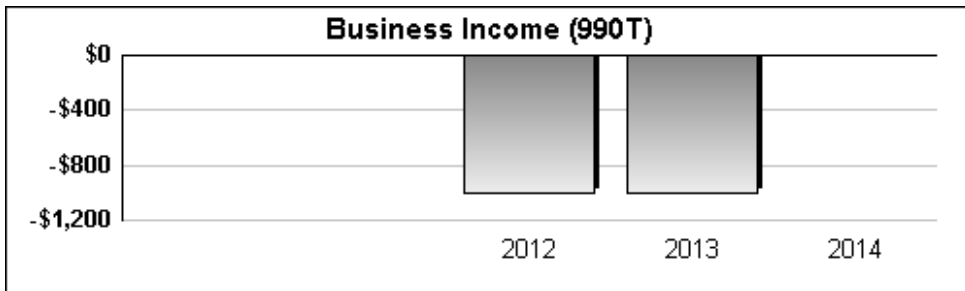
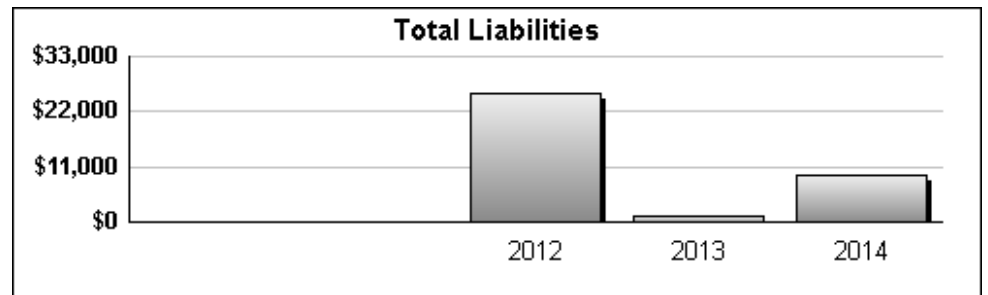
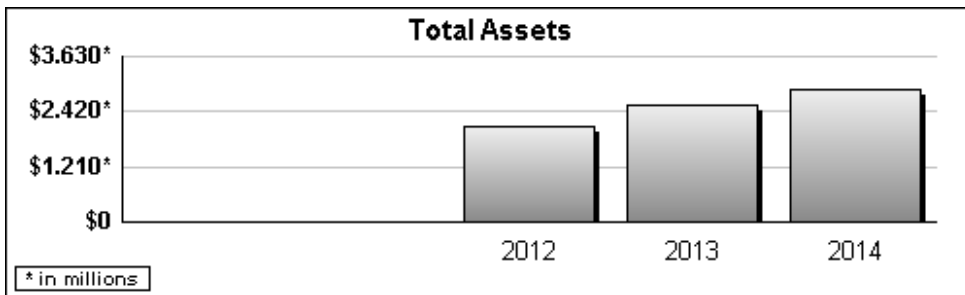


Form 990T	Tax Return History	2014
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Name ORANGUTAN FOUNDATION INTERNATIONAL	Employer Identification Number 95-4112467
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	2010	2011	2012	2013	2014	2015
Other deductions						
Net operating loss deduction						
Specific deduction			1,000	1,000		
Income after expense and deductions			-1,000	-1,000		
Income tax (corporate or trust)						
Other taxes						
Total taxes						
General business credit						
Other credits						
Net tax after credits						
Estimated tax payments						
Other payments						
Balance due/Overpayment						

* Income shown net of expenses



95-4112467

Federal Statements

FYE: 12/31/2014

Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
SUPPLIES	\$ 29,100	\$ 28,633	\$ 311	\$ 156
FUNDRAISING	23,016			23,016
EQUIPMENT RENTAL	17,231	17,231		
TELEPHONE	17,180	14,920	1,506	754
BANK CHARGES	16,741		16,741	
PRINTING	13,326	1,999	1,333	9,994
POSTAGE	3,354	2,851	335	168
MEALS	1,650	1,650		
Total	\$ <u>121,598</u>	\$ <u>67,284</u>	\$ <u>20,226</u>	\$ <u>34,088</u>

Federal Statements**Schedule A, Part II, Line 12**

<u>Description</u>	<u>Amount</u>
Taxable Interest on Savings and Temporary Cash Investments	\$ 474
Taxable Dividends and Interest from Securities	331
UNREALIZED GAIN ON STOCKS	742
MERCHANDISE SALE	6,465
Total	\$ <u>8,012</u>