

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



DLN: 93493259008953

Department of the Treasury

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Internal	revenue	COCIVICE	,	1 /	satisfy state re	· - ·	CITCS	Inspection
A Fo	r the 2	2012 cal	endar year, or tax year beginning 0	1-01-2012 , 2012, and end	ing 12-31-2012			
B Che	eck if ap	pplicable	C Name of organization THE AMERICAN SOCIETY FOR THE PREV	VENTION OF		D Employ	yer iden	tification number
☐ Add	ress ch	nange	CRUELTY TO ANIMALS			13-16	23829	
∏ Naı	me chai	inge	Doing Business As ASPCA					
┌ Init	ıal retui	ım	Number and street (or P O box if mail	is not delivered to street address)	Room/suite	E Telepho	ne numh	ner
┌ Ter	mınated	ed .	424 EAST 92ND STREET Suite			·		
┌ Am	ended i	return	City or town, state or country, and ZIP	+ 4		(212)	876-77	700
☐ Apr	olication	n pending	NEW YORK, NY 101286804			G Gross re	coints ¢	226,090,231
			F Name and address of princip	pal officer	H(a)		-	
			MATTHEW BERSHADKER CEO		''(a)	Is this a group affiliates?	returni	roi res roi No
			520 EIGHTH AVENUE NEW YORK,NY 10018					
			112W 15KK, KT 15515		H(b)			led? TYes TNo
Ta	x-exem	npt status	▼ 501(c)(3)	ert no)	27	Ir "No," attach	a list ((see instructions)
	obsito	- VA/VA	/W ASPCA ORG		H(c)	Group exemptı	on num	nber 🟲
			Corporation Trust Association	Other 🕨	L Ye	ear of formation 186	56 M 9	State of legal domicile NY
Pa	rt I	Sum	mary					
Activities & Governance	- - -	OUTREA	AM INITIATIVES, ANIMAL HEALT ACH nis box f the organization disco	<u>'</u>	· 			
2 6	١					ı		
les			of voting members of the governing	, , , , , ,			3	22
E	l		of independent voting members of t				5	22
হু	l		mber of individuals employed in cal mber of volunteers (estimate if nec		-		6	811 751
	l		related business revenue from Part				7a	8,599
			lated business taxable income fron				7a 7b	
	└						,,,,,	-4,695
				·		Prior Year	75 1	Current Year
	8	Contr	butions and grants (Part VIII, line					Current Year
nue	8 9		butions and grants (Part VIII, line im service revenue (Part VIII, line	1h)		Prior Year	.87	Current Year 137,616,740
enueve	_	Progra		1h)		Prior Year 122,738,1	87	Current Year 137,616,740 14,332,923
Revenue	9	Progra Inves Other	am service revenue (Part VIII, line tment income (Part VIII, column (A revenue (Part VIII, column (A), lin	1h)	1e)	Prior Year 122,738,1 14,900,4	.87 .07	Current Year 137,616,740 14,332,923 7,961,781
Ravenue	9 10	Progra Inves Other Total	im service revenue (Part VIII, line tment income (Part VIII, column (A revenue (Part VIII, column (A), lin revenue—add lines 8 through 11 (m	1h)	1e) (A), line	Prior Year 122,738,1 14,900,4 5,166,7 5,442,2	87	Current Year 137,616,740 14,332,923 7,961,781 3,704,014
Revenue	9 10 11 12	Progra Inves Other Total 12)	nm service revenue (Part VIII, line tment income (Part VIII, column (A revenue (Part VIII, column (A), lin revenue—add lines 8 through 11 (m	1h)	1e) (A), line	Prior Year 122,738,1 14,900,4 5,166,7 5,442,2 148,247,6	87 07 94 41	Current Year 137,616,740 14,332,923 7,961,781 3,704,014 163,615,458
Revenue	9 10 11 12	Progra Inves Other Total 12).	am service revenue (Part VIII, line tment income (Part VIII, column (A revenue (Part VIII, column (A), lin revenue—add lines 8 through 11 (m	1h)	1e) (A), line	Prior Year 122,738,1 14,900,4 5,166,7 5,442,2	87 07 94 41	Current Year 137,616,740 14,332,923 7,961,781 3,704,014 163,615,458 17,018,180
Revenue	9 10 11 12 13 14	Progra Inves Other Total 12) Grant: Benefi	am service revenue (Part VIII, line tment income (Part VIII, column (A), lin revenue (Part VIII, column (A), lin revenue—add lines 8 through 11 (m	1h)	1e) (A), line	Prior Year 122,738,1 14,900,4 5,166,7 5,442,2 148,247,6	87 07 94 41 529	Current Year 137,616,740 14,332,923 7,961,781 3,704,014 163,615,458 17,018,180
	9 10 11 12	Progra Inves Other Total 12) Grant: Benefi	am service revenue (Part VIII, line timent income (Part VIII, column (A), lin revenue (Part VIII, column (A), lin revenue—add lines 8 through 11 (m	1h)	1e) (A), line	Prior Year 122,738,1 14,900,4 5,166,7 5,442,2 148,247,6	87 -07 -94 -41 -29 	Current Year 137,616,740 14,332,923 7,961,781 3,704,014 163,615,458 17,018,180
	9 10 11 12 13 14	Progra Inves Other Total 12) Grants Benefi Salari 5-10	am service revenue (Part VIII, line timent income (Part VIII, column (A), lin revenue (Part VIII, column (A), lin revenue—add lines 8 through 11 (m	1h)	1e) (A), line), lines	Prior Year 122,738,1 14,900,4 5,166,7 5,442,2 148,247,6 15,050,6	87 -07 -94 -41 -29 -27 -0	Current Year 137,616,740 14,332,923 7,961,781 3,704,014 163,615,458 17,018,180 0 60,424,407
Expenses Revenue	9 10 11 12 13 14 15	Progra Inves Other Total 12) Grant: Benefi Salari 5-10 Profes	am service revenue (Part VIII, line timent income (Part VIII, column (A), line revenue (Part VIII, column (A), line revenue—add lines 8 through 11 (m	1h)	1e) (A), line), lines	Prior Year 122,738,1 14,900,4 5,166,7 5,442,2 148,247,6 15,050,6 51,231,2 2,260,4	87 -07 -94 -41 -29 -27 -0 -119 -50	Current Year 137,616,740 14,332,923 7,961,781 3,704,014 163,615,458 17,018,180 0 60,424,407 1,802,650
	9 10 11 12 13 14 15 16a b	Progra Inves Other Total 12) Grants Benefi Salari 5-10 Profes Total fu	am service revenue (Part VIII, line timent income (Part VIII, column (A), line revenue (Part VIII, column (A), line revenue—add lines 8 through 11 (m)	1h)	1e) . (A), line	Prior Year 122,738,1 14,900,4 5,166,7 5,442,2 148,247,6 15,050,6 51,231,2 2,260,4	87 994 41 29 227 0	Current Year 137,616,740 14,332,923 7,961,781 3,704,014 163,615,458 17,018,180 0 60,424,407 1,802,650 89,371,282
	9 10 11 12 13 14 15 16a b 17	Progra Inves Other Total 12) Grants Benefi Salari 5-10 Profes Total fu Other	am service revenue (Part VIII, line timent income (Part VIII, column (A), line revenue (Part VIII, column (A), line revenue—add lines 8 through 11 (m	1h)	1e) (A), line), lines	Prior Year 122,738,1 14,900,4 5,166,7 5,442,2 148,247,6 15,050,6 51,231,2 2,260,4 76,964,7 145,507,0	87 -07 -94 -41 -29 -527 -0 -220 -116	Current Year 137,616,740 14,332,923 7,961,781 3,704,014 163,615,458 17,018,180 0 60,424,407 1,802,650 89,371,282 168,616,519
Expenses	9 10 11 12 13 14 15 16a b	Progra Inves Other Total 12) Grants Benefi Salari 5-10 Profes Total fu Other	am service revenue (Part VIII, line timent income (Part VIII, column (A), line revenue (Part VIII, column (A), line revenue—add lines 8 through 11 (m)	1h)	1e) (A), line), lines ne 25)	Prior Year 122,738,1 14,900,4 5,166,7 5,442,2 148,247,6 15,050,6 51,231,2 2,260,4 76,964,7 145,507,0 2,740,6	87 94 41 29 27 0 119 50 220	Current Year 137,616,740 14,332,923 7,961,781 3,704,014 163,615,458 17,018,180 0 60,424,407 1,802,650 89,371,282 168,616,519
Expenses	9 10 11 12 13 14 15 16a b 17	Progra Inves Other Total 12) Grants Benefi Salari 5-10 Profes Total fu Other	am service revenue (Part VIII, line timent income (Part VIII, column (A), line revenue (Part VIII, column (A), line revenue—add lines 8 through 11 (m	1h)	1e) (A), line), lines ne 25)	Prior Year 122,738,1 14,900,4 5,166,7 5,442,2 148,247,6 15,050,6 51,231,2 2,260,4 76,964,7 145,507,0	87 94 41 29 27 0 119 50 220	Current Year 137,616,740 14,332,923 7,961,781 3,704,014 163,615,458 17,018,180 0 60,424,407 1,802,650 89,371,282 168,616,519
Expenses	9 10 11 12 13 14 15 16a b 17 18 19	Progra Inves Other Total 12) Grant: Benefi Salari 5-10 Profes Total fu Other Total Reven	am service revenue (Part VIII, line timent income (Part VIII, column (A), lin revenue—add lines 8 through 11 (m	1h)	1e)	Prior Year 122,738,1 14,900,4 5,166,7 5,442,2 148,247,6 15,050,6 51,231,2 2,260,4 76,964,7 145,507,0 2,740,6 ginning of Currer Year	87 -07 -794 -441 -29 -527 -0 -119 -50 -16 -13 -113	Current Year 137,616,740 14,332,923 7,961,781 3,704,014 163,615,458 17,018,180 0 60,424,407 1,802,650 89,371,282 168,616,519 -5,001,061 End of Year
Expenses	9 10 11 12 13 14 15 16a b 17	Progra Inves Other Total 12) Grant: Benefi Salari 5-10 Profes Total fu Other Total Reven	am service revenue (Part VIII, line timent income (Part VIII, column (A), line revenue (Part VIII, column (A), line revenue—add lines 8 through 11 (m	1h)	1e)	Prior Year 122,738,1 14,900,4 5,166,7 5,442,2 148,247,6 15,050,6 51,231,2 2,260,4 76,964,7 145,507,0 2,740,6 ginning of Currer	87 -07 -94 -41 -29 -27 -0 -119 -50 -16 -13 -112	Current Year 137,616,740 14,332,923 7,961,781 3,704,014 163,615,458 17,018,180 0 60,424,407 1,802,650 89,371,282 168,616,519 -5,001,061 End of Year 213,492,255
	9 10 11 12 13 14 15 16a b 17 18 19	Progra Inves Other Total 12) Grant: Benefi Salari 5-10 Profes Total fu Other Total Reven	am service revenue (Part VIII, line timent income (Part VIII, column (A), line revenue (Part VIII, column (A), line revenue—add lines 8 through 11 (m	1h)	1e) (A), line), lines me 25) Be	Prior Year 122,738,1 14,900,4 5,166,7 5,442,2 148,247,6 15,050,6 51,231,2 2,260,4 76,964,7 145,507,0 2,740,6 ginning of Currer Year 213,706,1	87 994 41 229 327 0 219 550 220 116 113 112	Current Year 137,616,740 14,332,923 7,961,781 3,704,014 163,615,458 17,018,180 0 60,424,407 1,802,650 89,371,282 168,616,519 -5,001,061 End of Year 213,492,255 28,041,118
Not Assets or Expenses Fund Balances	9 10 11 12 13 14 15 16a b 17 18 19	Progra Inves Other Total 12) . Grants Benefi Salari 5-10 Profes Total for Other Total Reven Total Net as	am service revenue (Part VIII, line timent income (Part VIII, column (A), line revenue (Part VIII, column (A), line revenue—add lines 8 through 11 (m	1h)	1e) (A), line), lines me 25) Be	Prior Year 122,738,1 14,900,4 5,166,7 5,442,2 148,247,6 15,050,6 51,231,2 2,260,4 76,964,7 145,507,0 2,740,6 ginning of Currer Year 213,706,1 30,794,5	87 94 41 229 327 0 219 550 220 116 113 112	Current Year 137,616,740 14,332,923 7,961,781 3,704,014 163,615,458 17,018,180 0 60,424,407 1,802,650 89,371,282 168,616,519 -5,001,061 End of Year 213,492,255 28,041,118
ab A Mot Assets of Expenses expenses and Balances	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 11 11 r pena	Progra Inves Other Total 12) . Grant: Benefi Salari 5-10 Profes Total fu Other Total Reven Total Reven Total Sign alties of dge and as any k	the service revenue (Part VIII, line the theorem (Part VIII, column (A), line the theorem (Part VIII, column (A), line revenue—add lines 8 through 11 (m)	1h)	1e) (A), line), lines ne 25) Be	Prior Year 122,738,1 14,900,4 5,166,7 5,442,2 148,247,6 15,050,6 51,231,2 2,260,4 76,964,7 145,507,0 2,740,6 ginning of Currer Year 213,706,1 30,794,5 182,911,5	87 94 41 29 27 0 19 50 20 16 13 12 33 79	Current Year 137,616,740 14,332,923 7,961,781 3,704,014 163,615,458 17,018,180 0 60,424,407 1,802,650 89,371,282 168,616,519 -5,001,061 End of Year 213,492,255 28,041,118 185,451,137 s, and to the best of
Mont Assets or Expenses Land Balances Expenses	9 10 11 12 13 14 15 16a b 17 18 19	Progra Inves Other Total 12). Grant: Benefi Salari 5-10 Profes Total fu Other Total Reven Total Net as Sign alties of dge and as any k	the service revenue (Part VIII, line the theorem (Part VIII, column (A), line the theorem (Part VIII, column (A), line revenue (Part VIII, column (A), line revenue—add lines 8 through 11 (m	1h)	1e) (A), line), lines ne 25) Be	Prior Year 122,738,1 14,900,4 5,166,7 5,442,2 148,247,6 15,050,6 51,231,2 2,260,4 76,964,7 145,507,0 2,740,6 ginning of Currer Year 213,706,1 30,794,5 182,911,5 chedules and statcer) is based on a	87 94 41 29 27 0 19 50 20 16 13 12 33 79	Current Year 137,616,740 14,332,923 7,961,781 3,704,014 163,615,458 17,018,180 0 60,424,407 1,802,650 89,371,282 168,616,519 -5,001,061 End of Year 213,492,255 28,041,118 185,451,137 s, and to the best of
Sign Paragraph Sign Paragraph Paragr	9 10 11 12 13 14 15 16a b 17 18 19	Progra Inves Other Total 12) . Grant: Benefi Salari 5-10 Profes Total fu Other Total Reven Total Reven Total Sign alties of dge and as any k **** Signa MAR Type	am service revenue (Part VIII, line trent income (Part VIII, column (A), line revenue (Part VIII, column (A), line revenue—add lines 8 through 11 (m). s and similar amounts paid (Part IX) ts paid to or for members (Part IX), es, other compensation, employee losional fundraising fees (Part IX, column (D), line expenses (Part IX, column (A), line expenses (Part IX, column (A), line expenses Add lines 13–17 (must be use less expenses Subtract line 18 assets (Part X, line 16)	1h)	1e) (A), line), lines me 25) Becompanying so (other than offi	Prior Year 122,738,1 14,900,4 5,166,7 5,442,2 148,247,6 15,050,6 51,231,2 2,260,4 76,964,7 145,507,0 2,740,6 ginning of Currer Year 213,706,1 30,794,5 182,911,5 chedules and statcer) is based on a	87 94 41 29 527 0 119 50 16 13 11 12 533 79	Current Year 137,616,740 14,332,923 7,961,781 3,704,014 163,615,458 17,018,180 0 60,424,407 1,802,650 89,371,282 168,616,519 -5,001,061 End of Year 213,492,255 28,041,118 185,451,137 s, and to the best of
She con the services of the se	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 TIII r penanowledorer ha	Progra Inves Other Total 12) . Grant: Benefi Salari 5-10 Profes Total fu Other Total Reven Total Reven Total Sign alties of dge and as any k **** Signa MAR Type	am service revenue (Part VIII, line trent income (Part VIII, column (A), line revenue (Part VIII, column (A), line revenue—add lines 8 through 11 (m). s and similar amounts paid (Part IX) ts paid to or for members (Part IX), es, other compensation, employee losional fundraising fees (Part IX, column (D), line expenses (Part IX, column (A), line expenses (Part IX, column (A), line expenses Add lines 13–17 (must be use less expenses Subtract line 18 assets (Part X, line 16)	1h)	1e) (A), line), lines ne 25) Be	Prior Year 122,738,1 14,900,4 5,166,7 5,442,2 148,247,6 15,050,6 51,231,2 2,260,4 76,964,7 145,507,0 2,740,6 ginning of Currer Year 213,706,1 30,794,5 182,911,5 chedules and state cer) is based on a	87 94 41 29 27 0 19 50 20 16 13 12 33 79	Current Year 137,616,740 14,332,923 7,961,781 3,704,014 163,615,458 17,018,180 0 60,424,407 1,802,650 89,371,282 168,616,519 -5,001,061 End of Year 213,492,255 28,041,118 185,451,137 s, and to the best of
Net Assets of Land Balances Expenses Land Balances Balances	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 TIII r penanowledorer ha	Progra Inves Other Total 12). Grant: Benefi Salari 5-10 Profes Total fu Other Total Reven Total Net as Sign alties of dge and as any k **** Signa MAR Type	am service revenue (Part VIII, line trent income (Part VIII, column (A), line revenue (Part VIII, column (A), line revenue—add lines 8 through 11 (m). s and similar amounts paid (Part IX) ts paid to or for members (Part IX), es, other compensation, employee losional fundraising fees (Part IX, column (D), line expenses (Part IX, column (A), line expenses (Part IX, column (A), line expenses Add lines 13–17 (must be use less expenses Subtract line 18 assets (Part X, line 16)	1h)	1e) (A), line), lines me 25) Becompanying so (other than offi	Prior Year 122,738,1 14,900,4 5,166,7 5,442,2 148,247,6 15,050,6 51,231,2 2,260,4 76,964,7 145,507,0 2,740,6 ginning of Currer Year 213,706,1 30,794,5 182,911,5 chedules and statcer) is based on a	87 94 41 29 527 0 119 50 16 13 11 12 533 79	137,616,740 14,332,923 7,961,781 3,704,014 163,615,458 17,018,180 0 60,424,407 1,802,650 89,371,282 168,616,519 -5,001,061 End of Year 213,492,255 28,041,118 185,451,137

New York, NY 101540102 May the IRS discuss this return with the preparer shown above? (see instructions) $\,$.

Firm's address 🕨 345 Park Avenue

Use Only

Phone no (212) 758-9700

Part IV	Checklist of	Required	Schedules

			Vac	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
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^{\bullet}	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
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	6		No
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	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
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 $\sqrt{2}$	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
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	11b	Yes	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
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	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170 (b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		No
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)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Νo
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	23	Yes	
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 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If</i> "Yes," complete Schedule L, Part I	25a		No
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	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
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	27		No
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			1
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		N o
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νo
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
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? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
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	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

Par				_
	Check if Schedule O contains a response to any question in this Part V	•	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 334		. 05	110
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1 c	Yes	
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		NO
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νo
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
_		8		
	Sponsoring organizations maintaining donor advised funds.	_		
	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
LO	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
L2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
L3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal R	even	ue Cod	e.)
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		Νo
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?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
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?	16a		No
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		
- 50	ction C. Disclosure			

- 17 List the States with which a copy of this Form 990 is required to be filed AL, AK, AZ, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY, LA, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, OH, OK, OR, PA, RI, SC, TN, UT, VA, WV, WI
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (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, physical address, and telephone number of the person who possesses the books and records of the organization ►MARK ABRAHAMS CFO 520 EIGHTH AVENUE NEW YORK, NY (212)876-7700

Form 990	(2012	•
----------	-------	---

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

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

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

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

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

	1	1									
(A) Name and Title	(B) A verage hours per week (list any hours for related	more t perso and	han o	one l both ector	box, an o	officer stee)		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the	
	organizations below dotted line)	organizations below	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations
See Additional Data Table											
	•	•	•							Form 990 (2012)	

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

	(A) Name and Title	(B) A verage hours per week (list any hours for related	more to perso and	than o	one both ecto	box, ≀an	heck unless officer stee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W 2/1099-MISC)	- ((F) Estima mount of compens from t	ted f other ation he
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)		relate organiza	ed
							_				_		
											+		
											_		
					-						+		
											+		
1b	Sub-Total							<u> </u>			+		
C	Total from continuation sheet	s to Part VII, S	ection	Α.	•	•		Þ			士		
<u>d</u>	Total (add lines 1b and 1c) . Total number of individuals (in							+	4,350,924		0		560,368
2	\$100,000 of reportable comp						u abov	e) w	no received more tr	id II			
												Yes	No
3	Did the organization list any f oon line 1a? <i>If</i> "Yes," complete 5					key •	emplo	yee.	, or highest compen	sated employee	3		No
4	For any individual listed on lin organization and related organ individual										4	Yes	
5	Did any person listed on line 1 services rendered to the organ									or individual for	5	-	No
S	ection B. Independent Co	ntractors											
1	Complete this table for your fi	ve highest comp											
	compensation from the organiz	zation Keport c	ompens	ation	ıror	tne (caiend	arye	ear enging with or wi	tnın tne organizatı	on's '	cax year	

(A)	(B)	(C)
Name and business address	Description of services	Compensation
STRUCTURE TONE INC , 770 BROADWAY NEW YORK NY 10003	GENERAL CONTRACTOR	9,444,667
WHITE STAR CONSULTING , 505 8TH AVENUE NEW YORK NY 10018	CONSTRUCTION SERVICE	1,879,744
PATTERSON BELKNAP WEBB TYLER LLP , 1133 AVENUE OF THE AMERICAS NEW YORK NY 10036	LEGAL SERVICES	1,623,917
PARADYSZ MATERA CO INC , 5 HANOVER SQUARE NEW YORK NY 10004	LIST BROKER & CONSUL	1,189,683
FINELINE , 290 GARRY STREETWINNIPEGMBCAR3C 1H3	CALL CENTER	877,048

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶89

Form 99								Page 9
Part V	***	Statement o	o f Revenue ule O contains a respor	nse to any question i	in this Part VIII			
		Check if Schedi	are o contains a respon		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
တ္က	1a	Federated cam	paigns 1a	3,307,576				
ant	ь	Membership du	es 1b					
ي ق	c	Fundraising eve	ents 1c	471,086				
ffs, FA	d	Related organiz	zations 1d					
nija G	e	Government grant		24,630				
ns,		_						
i ii ii	f	similar amounts no	ons, gifts, grants, and 1f ot included above	133,813,448				
를 돌	g	Noncash contribution	ons included in lines	1,987,624		İ		
Contributions, Giffs, Grants and Other Similar Amounts	h	Total. Add lines	s 1 a - 1 f		137,616,740			
<u>0</u>					, ,			
Ę	2a	ANIMAL POISON CO	ONTROL CENTER FEES	Business Code 900099	7,971,658	7,963,059	8,599	
ever	ь	BERGH ANIMAL HO		900099	5,062,711	5,062,711	0,399	
å≛ o	c		RY CLINIC REVENUE		, ,	, ,		
Program Serwoe Revenue	d	ADOPTION CENTER		900099	644,889 482,867	644,889 482,867		
33	e		NARY CLINIC REVENUE	900099	170,798	170,798		
Ē	f		am service revenue	900099	170,798	170,798		
္နို	•							
	g		s 2a-2f		14,332,923			
	3		ome (including dividendar amounts)		2,438,539			2,438,539
	4	Income from inves	stment of tax-exempt bond	proceeds 🕨	0			
	5	Royalties		🛌	2,509,961			2,509,961
	_		(ı) Real	(II) Personal				
	6a b	Gross rents Less rental	279,968 98,487					
	_	expenses	·	0				
	С	Rental income or (loss)	181,481	0				
	d	Net rental inco	me or (loss)		181,481			181,481
	7a	Gross amount	(ı) Securities	(II) O ther				
	, "	from sales of assets other than inventory	66,419,217					
	Ь	Less cost or other basis and sales expenses	60,895,975					
	С	Gain or (loss)	5,523,242					
	d	Net gain or (los	ss)		5,523,242			5,523,242
Other Revenue	8a	Gross income f events (not inc \$ 471						
}e∧e		of contributions See Part IV, lin	s reported on line 1c) ne 18					
<u>.</u>			а	2,118,713				
춪	b		penses b	1,480,311	630,403			620,402
0	C		(loss) from fundraising	events 🛌	638,402			638,402
	94		rom gaming activities ne 19					
			а					
	b		penses b		0			
	102		(loss) from gaming activ	vities	0			
	104	Gross sales of returns and allo						
	ь	Less cost of a	oods sold b					
			(loss) from sales of inve	entory 🛌	0		0	
		Miscellaneous		Business Code				
	11a	LIST RENTALS	5	900099	350,780			350,780
	ь	MISCELLANEC	DUSINCOME	900099	23,390			23,390
	С							
	d	All other reven	ı					
	е	Total. Add lines			374,170			
	12	Total revenue.	See Instructions .		163,615,458	14,324,324	8,599	11,665,795

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 to any question in this Part IX (D) (B) (C) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising 7b. 8b. 9b. and 10b of Part VIII. Total expenses expenses general expenses expenses Grants and other assistance to governments and organizations

Part X Balance Sheet

	't X	Check if Schedule O contains a response to any question in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	2,731,009	1	7,279,796
	2	Savings and temporary cash investments	21,992,343	2	4,594,038
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	14,177,180	4	13,004,551
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	O	5	0
ts	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	0	6	0
Assets	,	Notes and loans receivable, net	0	7	
A.	7 8	Inventories for sale or use	230.161	8	223,689
	9	Prepaid expenses and deferred charges	2,170,873	9	2.951.174
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 64,855,864			2,001,174
	ь	Less accumulated depreciation 10b 23,802,643	28,623,533	10c	41,053,221
	11	Investments—publicly traded securities	100,809,875	11	89,514,295
	12	Investments—other securities See Part IV, line 11	25,723,227	12	37,173,506
	13	Investments—program-related See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	17,247,911	15	17,697,985
	16	Total assets. Add lines 1 through 15 (must equal line 34)	213,706,112	16	213,492,255
	17	Accounts payable and accrued expenses	12,803,824	17	10,424,146
	18	Grants payable	5,534,457	18	4,752,567
	19	Deferred revenue	975,511	19	254,102
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
흕		persons Complete Part II of Schedule L	О	22	0
	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	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	44 400 744		40.040.000
		D	11,480,741	25	12,610,303
	26	Total liabilities. Add lines 17 through 25	30,794,533	26	28,041,118
ĕ	27	lines 27 through 29, and lines 33 and 34. Unrestricted net assets	126,356,278	27	127,755,165
<u>ଟ</u>			34,666,749	28	34,604,344
<u> </u>	28	Temporarily restricted net assets	21,888,552	29	23,091,628
Fund Balances	29	Permanently restricted net assets	21,868,332	29	25,091,028
Ξ		complete lines 30 through 34.			
2	30	Capital stock or trust principal, or current funds		30	
Assets or	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	l	T . I	100 011 E70	33	105 451 127
Net	33	Total net assets or fund balances	182,911,579		185,451,137

Par	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				৮
		\Box			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		163,6	515,458
2	Total expenses (must equal Part IX, column (A), line 25)	2		168,6	516,519
3	Revenue less expenses Subtract line 2 from line 1	3		-5,0	001,061
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		182,9	11,579
5	Net unrealized gains (losses) on investments	5		8,2	201,904
6	Donated services and use of facilities	6			
7	Investment expenses	,			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		- (561,285
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	.o		185,4	151,137
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewe a separate basis, consolidated basis, or both	d on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separa basis, consolidated basis, or both	te			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant?	fthe	2c	Yes	
	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?		3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the req	uired	3b		

Software ID: Software Version:

EIN: 13-1623829

Name: THE AMERICAN SOCIETY FOR THE PREVENTION OF

CRUELTY TO ANIMALS

Form 990, Part VII - Compensation of Compensated Employees, and Indepe	Officers, Dir	ectors	,Tru	uste	ees,	, Key	En	nployees, Highe	st	
(A) Name and Title	(B) Average hours per week (list	Positio more unless an	than	o not one on i er an trust	box s bo d a	,		(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
	any hours for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			related organizations
TIM F WRAY CHAIRPERSON	1 0	х		х				0	0	0
JAMES L NEDERLANDER FIRST VICE CHAIRPERSON	1 0	х		х				0	0	0
FREDERICK TANNE SECOND VICE CHAIRPERSON	1 0	х		х				0	0	0
FREDRIK G GRADIN TREASURER	1 0	х		х				0	0	0
SALLY SPOONER SECRETARY	1 0	х		х				0	0	0
CINDY ADAMS DIRECTOR	1 0	х						0	0	0
THOMAS M BELDEN DIRECTOR	1 0	х						0	0	0
ALEXANDRA G BISHOP DIRECTOR	1 0	х						0	0	0
ARRIANA BOARDMAN DIRECTOR	1 0	х						0	0	0
DODIE GUMAER DIRECTOR	1 0	х						0	0	0
LINDA LLOYD LAMBERT DIRECTOR	1 0	х						0	0	0
RANDY LEVINE DIRECTOR	1 0	х						0	0	0
FRANKLIN MAISANO DIRECTOR	1 0	х						0	0	0
TRACY V MAITLAND DIRECTOR	1 0	х						0	0	0
C ALLEN PARKER DIRECTOR FROM MAY 2012	1 0	х						0	0	0
JANE PARVER DIRECTOR FROM NOVEMBER 2012	1 0	х						0	0	0
JEFF PFEIFLE DIRECTOR	1 0	х						0	0	0
HELEN SC PILKINGTON DIRECTOR	1 0	х						0	0	0
MARTIN PURIS DIRECTOR	1 0	х						0	0	0
SCOTT THIEL DIRECTOR FROM SEPTEMBER 2012	1 0	х						0	0	0
CATHY WALLACH DIRECTOR	1 0	х						0	0	0
MARY JO WHITE DIRECTOR	1 0	х						0	0	0
J ELIZABETH BRADHAM DIRECTOR UNTIL MAY 3, 2012	1 0	х						0	0	0
JONATHAN D FARKAS DIRECTOR UNTIL MAY 3, 2012	1 0	х						0	0	0
EDWIN SAYRES PRES & CEO UNTIL MAY 31, 2013	40 0			×				591,723	0	49,798

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Form 990, Part VII - Compensation of Compensated Employees, and Indepen	Officers, Dir ndent Contra	ectors actors	;,Trı	ıste	es,	Key	, En	nployees, Highe	st	
(A) Name and Title	(B) Average hours per week (list	Positio more unless an o dire	(Con (do than pers office	o not n one son is er and trust	e box is bot nd a tee)	th	T	(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
	hours for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			organızatıons
JULIA NELSON CFO UNTIL JUNE 29, 2012	40 0			х				251,576	0	12,842
MARK ABRAHAMS SVP AND CFO FROM DEC 1, 2012	40 0			х				9,737	0	0
STEVEN HANSEN COO	40 0			х				448,337	0	36,441
MATTHEW BERSHADKER SVP-ANTI CRUELTY	40 0				х			218,093	0	32,471
JULIO CARBONELL SVP-CIO	40 0				х			222,501	0	40,019
ELIZABETH ESTROFF SVP COMMUNICATIONS	40 0				х			232,530	0	38,663
TODD HENDRICKS SVP DEVELOPMENT	40 0				х			255,841	0	34,918
JULIE MORRIS SVP-COMMUNITY OUTREACH	40 0				х			236,424	0	46,046
LEE MURRAY SVP CENTER FOR PEOPLE DEVEL	40 0				х			215,810	0	30,928
STEPHEN MUSSO EVP-CAP PROJ	40 0				х			247,668	0	50,091
MELISSA NORDEN SVP-CHIEF OF STAFF	40 0				х			227,783	0	28,687
NANCY PERRY SVP-GOVT RELATIONS	40 0				х			207,494	0	11,307
GAIL S BUCHWALD SVP OF ADOPTIONS	40 0					х		168,616	0	20,976
RANDALL LOCKWOOD SVP, FORENSIC SCI & ACP	40 0					х		199,584	0	28,571
LOUISE MURRAY DIRECTOR OF MEDICINE	40 0					х		252,874	0	39,832
STACY WOLF VP-HUMANE LAW ENFORCEMENT	40 0					х		189,560	0	31,698
STEPHEN ZAWISTOWSKI SCIENCE ADVISOR	40 0					х		174,773	0	27,080

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493259008953

Employer identification number

OMB No 1545-0047

SCHEDULE A

Name of the organization

THE AMERICAN SOCIETY FOR THE PREVENTION OF

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total

Public Charity Status and Public Support

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

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

2012

Open to Public Inspection

CRUEL	13-1623829										
	t Ι			blic Charity Sta						structions	•
The o	rgani	zation is	not a privat	te foundation becaus	eitis (Forl	ınes 1 throu	gh 11, check	only one be	ox)		
1	Г	A chur	ch, convent	on of churches, or a	ssociation of	churches d	escribed in s e	ection 170(l	o)(1)(A)(i).		
2	\sqcap	A scho	ol described	d in section 170(b)(1	L)(A)(ii). (At	tach Schedı	ıle E)				
3	\sqcap	A hosp	ital or a coo	perative hospital se	rvice organiz	atıon descrı	bed in sectio	n 170(b)(1)	(A)(iii).		
4	\sqcap	A medi	cal researc	h organization opera	ted ın conjun	ction with a	hospital desc	cribed in sec	tion 170(b)(1)(A)(iii). E	nter the
_	_			ty, and state							
5	ı	=	•	erated for the benefi	=	or universit	ty owned or o	perated by a	a government	al unit desc	ribed in
	_			(A)(iv). (Complete P	•						
6		A feder	al, state, or	local government o	r government	al unit desc	rıbed ın secti	on 170(b)(1	L)(A)(v).		
7	✓	_		at normally receives		•	support from	a governme	ental unit or fr	om the gene	eral public
	_			on 170(b)(1)(A)(vi). : described in sectio i			anlata Dart II	. 1			
8 9	<u>'</u>		-	at normally receives			-	-	utions mom	aarchin faac	and gross
9	'	_		rities related to its e					•	-	-
				oss investment inco	•	·=					
		•						•		cax) Iroini bu	511165565
10	acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4).										
11	<u>'</u>	_		•	•		•		. , . ,		.h
11	'	_		ganized and operated ly supported organiz					•	•	
			•	,				•		o becion b	os(u)(s)i eneek
the box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III - Functionally integrated d Type III - Non-functionally integrated							lly integrated				
e	Γ	By che	cking this b	ox, I certify that the	organization	ıs not contr	olled directly	or indirectl	y by one or m	nore disqual	ıfıed persons
				on managers and ot	her than one	or more pub	licly support	ed organızat	tions describe	ed in sectior	n 509(a)(1) or
f			1509(a)(2)	received a vertea d	a t a rm. i n a t i a n	from the ID	C +ba+ .+ .a a :	Tuna I Tun	a II am Tuna	III aunnauti	na orannization
Т			this box	received a written d	etermination	from the 1K	5 that it is a	Type I, Typ	e II, or Type	III Supporti	ng organization,
g				2006, has the organ	ızatıon accep	ted any gift	or contribution	on from any	of the		,
_		followir	ng persons?	,		, -		·			
		(i) A p	erson who d	irectly or indirectly o	controls, eith	er alone or t	ogether with	persons des	scribed in (ii)		Yes No
		and (III) below, the	governing body of th	ne supported	organization	۱۶			11g	
		(ii) A f	amıly memb	er of a person descr	ıbed ın (ı) abı	ove?				11g	
		(iii) A	35% contro	lled entity of a perso	n described	ın (ı) or (ıı) a	above?			11g((iii)
h		Provide	e the followi	ng information about	the supporte	ed organizati	ion(s)				
				T			1				
•) Nam		(ii) EIN	(iii) Type of	(iv) Is t		(v) Did you	,	(vi) Is t		(vii) A mount of
	uppor	rtea ation		organization (described on	organızatı col (i) lıst		the organiz		organizati col (i) orga		monetary support
OI.	yamz	ation		lines 1- 9 above	your gove		suppor	•	in the U		Support
				or IRC section	docume	_	Зарроп			J	
				(see							
				instructions))	Yes	No	Yes	No	Yes	No	1
							1		1		
						ļ			ļ		

Schedule A (Form 990 or 990-EZ) 2012 Page 2 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 (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do 111,795,303 101,011,832 111,344,562 122,738,187 137,616,740 584,506,624 not include any "unusual grants ") Tax revenues levied for the organization's benefit and either 0 paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit 0 to the organization without charge 111,795,303 101,011,832 111,344,562 122,738,187 137,616,740 584,506,624 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 0 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 584,506,624 from line 4 Section B. Total Support Calendar year (or fiscal year **(b)** 2009 (c) 2010 (a) 2008 (d) 2011 (e) 2012 (f) Total beginning in) 🟲 122,738,187 Amounts from line 4 111,795,303 101,011,832 111,344,562 137,616,740 584,506,624 Gross income from interest, dividends, payments received on securities loans, rents, 5,389,353 4,678,819 5,527,533 7,061,725 5,228,468 27,885,898 rovalties and income from sımılar sources 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 2,793,348 2,765,619 2,555,814 2,473,349 2,492,883 13,081,013 capital assets (Explain in Part IV) 11 Total support (Add lines 7 625,473,535 through 10) 12 Gross receipts from related activities, etc (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) 14 93 450 % Public support percentage for 2011 Schedule A, Part II, line 14 15 90 080 % 16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ►V and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2011. 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 - 2012. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2011. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

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

supported organization

instructions

Schedule A (Form 990 or 990-EZ) 2012 Page 3 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 (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
<i>7</i> a	and 3 received from disqualified						
	persons						
b	Amounts included on lines 2 and 3						
_	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6)						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	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						
11	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						
	IV)						
13	Total support. (Add lines 9, 10c,						
	11, and 12)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					
	ction C. Computation of Public			12		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,		
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

33 1/3% support tests—2011. 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 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493259008953

OMB No 1545-0047

Political Campaign and Lobbying Activities

Department of the Treasury Internal Revenue Service

SCHEDULE C (Form 990 or 990-EZ)

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Inspection

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

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

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

◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B • Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** THE AMERICAN SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS 13-1623829 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes 3 Was a correction made? ☐ Yes □ No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities 1 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 4 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV **(c)** EIN (e) A mount of political (a) Name (b) Address (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

section 4911 tax for this year?

┌ Yes ┌ No

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A Check ► If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B Check ► If the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)	96,750	
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)	565,949	
c	Total lobbying expenditures (add lines 1a and 1b	o)	662,699	
d	Other exempt purpose expenditures	167,953,820		
е	Total exempt purpose expenditures (add lines 1	168,616,519		
f	Lobbying nontaxable amount Enter the amount f	1,000,000		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
	Grassroots nontaxable amount (enter 25% of lin	e 1f)	250,000	
h	Subtract line 1g from line 1a If zero or less, ent	er-0-		
i	Subtract line 1f from line 1c If zero or less, ente	r-0-		
j	If there is an amount other than zero on either lir	ne 1h or line 1i, did the organization file Form 47	20 reporting	

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

Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) Total beginning in) 1,000,000 1,000,000 1,000,000 1,000,000 4,000,000 Lobbying nontaxable amount Lobbying ceiling amount 6,000,000 (150% of line 2a, column(e)) Total lobbying expenditures 429,422 907,553 379,491 662,699 2,379,165 Grassroots nontaxable amount 250,000 250,000 250,000 250,000 1,000,000 Grassroots ceiling amount 1,500,000 (150% of line 2d, column (e)) 96,750 215,324 103,663 38,556 454,293 Grassroots lobbying expenditures

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has Notice filed Form 5768 (election under section 501(h)).	ОТ			7 0	ge S
	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a	1)		(b)	
activ		Yes	No	1	Amoun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	O ther activities?					
j	Total Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 505(c)(6).	01(c))(5), (or s		
_			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		L	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 505(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
	Current year	2a				
b	Carryover from last year	2b				
C	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Identifier Return Reference Explanation

DLN: 93493259008953

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Open to Public Inspection

	e of the organization MERICAN SOCIETY FOR THE PREVENTION OF	Employer identification number					
	LTY TO ANIMALS		13-1623829				
Par	Organizations Maintaining Donor Adorganization answered "Yes" to Form 990	, Part IV, line 6.		•			
		(a) Donor advised funds	(b) Funds and o	theraccou	unts		
	Total number at end of year						
	Aggregate contributions to (during year)						
	Aggregate grants from (during year)						
	Aggregate value at end of year						
	Did the organization inform all donors and donor advis funds are the organization's property, subject to the o		or advised	┌ Yes	┌ No		
	Did the organization inform all grantees, donors, and d used only for charitable purposes and not for the bene conferring impermissible private benefit?			┌ Yes	┌ No		
	Conservation Easements. Complete if	the organization answered "Yes" to	Form 990, Part IV	, line 7.			
2	Purpose(s) of conservation easements held by the org Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a	or education) Preservation of an Preservation of a c	historically important ertified historic struct ne form of a conservati	ure			
	sasement on the last day of the tax year	Г	Held at the I	End of the	Year		
а	Total number of conservation easements		2a				
b	Total acreage restricted by conservation easements		2b				
	Number of conservation easements on a certified histo	oric structure included in (a)	2c				
d	Number of conservation easements included in (c) acc historic structure listed in the National Register	· · · · -	2d				
	Number of conservation easements modified, transfer	ــ red. released. extinguished. or terminated	d by the organization d	urina			
	the tax year 🛌		- 2, o. ga <u>-</u>				
	·						
	Number of states where property subject to conservat		_				
	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	the periodic monitoring, inspection, hand	ling of violations, and	┌ Yes	┌ No		
5	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation easem	ents during the year				
7	——————————————————————————————————————	a. and enforcing conservation easements	during the year				
,	▶ \$	3	,				
	Does each conservation easement reported on line 2(and section 170(h)(4)(B)(ii)?	d) above satisfy the requirements of sect	:ion 170(h)(4)(B)(ı)	┌ Yes	┌ No		
	In Part XIII, describe how the organization reports co balance sheet, and include, if applicable, the text of th						
	the organization's accounting for conservation easeme	-					
art	Organizations Maintaining Collection Complete if the organization answered "Y		or Other Similar A	ssets.			
	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide, in Part XIII, the text of the footnote t	ets held for public exhibition, education, o	r research in furtherar				
_	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide the following amounts relating to thes	ets held for public exhibition, education, o			lıc		
	(i) Revenues included in Form 990, Part VIII, line 1		► \$				
	(ii) Assets included in Form 990, Part X		► \$				
2	If the organization received or held works of art, histor		r financial gain, provid	e the			
	following amounts required to be reported under SFAS	116 (ASC 958) relating to these items					
а	Revenues included in Form 990, Part VIII, line 1		► \$				

b Assets included in Form 990, Part X

Par	TIII Organizations Maintaining Co	llections of Art,	Hist	ori:	<u>cal Tr</u>	easu	ires, or C	the	<u>r Similar</u>	<u>Asse</u>	ts (co	ntınued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	ds, che	ecka	any of t	he foll	owing that	are a	significant	use of	ıts	
а	Public exhibition		d	Γ	Loan	orexc	hange prog	rams				
b	Scholarly research		e	Γ	Other	-						
c	Preservation for future generations											
4	Provide a description of the organization's co	ollections and explai	n how	the	y furthe	er the o	organızatıor	ı's ex	cempt purpo	se in		
5	During the year, did the organization solicit								nılar	_	Yes	√ No
Par	assets to be sold to raise funds rather than to the sold to raise funds rather than to the sold at the	•							'es" to Forr			NO
	Part IV, line 9, or reported an an						ii answere	ч .		550	''	
1a	Is the organization an agent, trustee, custoc included on Form 990, Part X?	ian or other intermed	diary 1	for c	ontribu	tions	or other ass	ets	not	Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the f	follow	ıng t	able		Г		Γ			
							-			Amou	ınt	
c	Beginning balance						-	1c				
d	Additions during the year							1d				
e	Distributions during the year							1e				
f	Ending balance						L	1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?							ı	Yes	□ No
ь	If "Yes," explain the arrangement in Part XII											<u> </u>
Pa	rt V Endowment Funds. Complete										\	anna ha alı
1a	Beginning of year balance	(a)Current year 46,609,083	(b)P	rior y	ear 641,402	b (c)	wo years васк 35,555,64	+	Three years ba)Four y	ears back 870,794
ь	Contributions	174,701		10,	6,459		10,334,55	+	30,050,	_		4,548,070
C	Net investment earnings, gains, and losses	171,701			0, 133		10,331,33	+	30,030,	-		1,310,070
	Wet investment earnings, gains, and losses	5,023,490			359,571		2,751,20	4	338,	766		27,148
d	Grants or scholarships							_				
е	Other expenditures for facilities and programs	2,320,490		2,	398,349							27,148
f	Administrative expenses							+	252,	576		
g	End of year balance	49,486,784		46,	609,083		48,641,40	2	35,555,	541		5,418,864
2	Provide the estimated percentage of the cur	rent vear end balanc	e (lıne	• 1a.	colum	n (a))	held as			•		
а	·	84 650 %				(//						
b	Permanent endowment 13 690 %											
c		60 %										
_	The percentages in lines 2a, 2b, and 2c sho											
За	Are there endowment funds not in the posse		ition tl	hat a	are held	d and a	admınıstere	d for	the			
	organization by	J							_		Yes	No
	(i) unrelated organizations			•				•	-	3a(i)		No
	(ii) related organizations							•	[3a(ii)		l No
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the second or the seco	•						•		3b		<u></u>
	t VI Land, Buildings, and Equipme					<u> </u>						
	Description of property	Jira See Form 330	o, i ui	(a)	Cost or s (invest	other	(b)Cost or o basis (othe		(c) Accumula depreciation		(d) Bo	ok value
	Land						4,440	,000		$\overline{}$		4,440,000
	Buildings		.				14,761	•	6.908	3,738		7,853,139
	Leasehold improvements		.				15,229		4,48:	` 		0,747,584
	Equipment		.				13,855	-	,	5,585		4,820,344
	Other						16,568	•	3,376			3,192,154
	I. Add lines 1a through 1e (Column (d) must e			nn (l	B), line	10(c).		-		, ===		1,053,221
	5 , , , , , , , , , , , , , , , , , , ,			, -		. , , ,				le D (F		90) 2012

Part VIII Investments—Other Securities. Se	e Form 990, Part X, line 12	2.	
(a) Description of security or category (including name of security)	(b)Book value		od of valuation f-year market value
(1)Financial derivatives		Cost of end-o	i-year market value
(2)Closely-held equity interests			
(3)Other (A) EQUITY LONG	8,329,931		F
(B) DISTRESSED DEBT	7,464,103		F
(C) FUND OF FUNDS			
	5,135,725		
(D) PRIVATE EQUITY	5,132,619		F
(E) FUND OF FUNDS - PRIVATE EQUITY	2,267,507		F
(F) FUND OF FUNDS - CAPITAL APPREC	6,769,692		F
(G) EMERGING MARKETS	2,073,929		F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	▶ 37,173,506		
Part VIII Investments—Program Related. S (a) Description of investment type	Gee Form 990, Part X, line : (b) Book value		od of valuation
(a) Description of investment type	(b) Book value		f-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	F		
Part IX Other Assets. See Form 990, Part X,		-	I
(1) BENEFICIAL INTEREST	cription		(b) Book value 17,697,985
(I) BENEFICIAL INTEREST			17,037,503
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15)		17,697,985
Part X Other Liabilities. See Form 990, Part			17,037,303
1 (a) Description of liability	(b) Book value		
Federal income taxes	0		
GIFT ANNUITY OBLIGATIONS	4,015,457		
UNFUNDED PENSION OBLIGATIONS	6,081,555		
DEFERRED RENT	2,513,291		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) 2. Fin 48 (ASC 740) Footnote In Part XIII provide the	12,610,303		

Par	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue	er F	Return
1	Total revenue, gains, and other support per audited financial statements	1	171,728,400
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	8,860,633
3	Subtract line 2e from line 1	3	162,867,767
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 747,691		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4 c	747,691
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	163,615,458
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses	pei	r Return
1	Total expenses and losses per audited financial statements	1	169,188,841
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	1,320,013
3	Subtract line 2e from line 1	3	167,868,828
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 747,691		
b	Other (Describe in Part XIII)		
C	Add lines 4a and 4b	4c	747,691
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	168,616,519

Part XIII Supplemental Information

Complete this part to 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

Identifier	Return Reference	Explanation
PUBLIC EXHIBITIONS	PART III, LINE 4	THE ASPCA POSSESSES A COLLECTION OF ARTIFACTS LARGELY CONSISTING OF HISTORIC DOCUMENTS, MANY OF WHICH ARE ON DISPLAY AT THE ASPCA HEADQUARTERS IN NEW YORK CITY THE ORGANIZATION DOES NOT CAPITALIZE THIS COLLECTION TWENTY OF THESE ARTIFACTS, APPRAISED AT \$196,600 ARE ON LOAN TO THE INTERNATIONAL MUSEUM OF THE HORSE IN KENTUCKY, AN UNRELATED ORGANIZATION, FROM SEPTEMBER 21, 2010 TO OCTOBER 15, 2014 THESE ARTIFACTS ARE ON DISPLAY TO EDUCATE THE PUBLIC BY RAISING EQUINE AWARENESS
ENDOWMENT FUNDS	PART V, LINE 4	THE ASPCA MAINTAINS AN ENDOWMENT FOR THE PURPOSE OF GENERATING INCOME TO SUPPORT THE ORGANIZATION'S CHARITABLE MISSION THE ORGANIZATION'S ENDOWMENT CONSISTS OF A PORTOFLIO OF ACTIVELY MANAGED FUNDS ESTABLISHED TO PROVIDE BOTH A SOURCE OF OPERATING FUNDS AS WELL AS LONG TERM FINANCIAL STABILITY THE ENDOWMENT'S PRINICPAL IS INTENDED TO BE LEFT UNTOUCHED, WHILE THE INCOME GENERATED IS USED TO FUND ASPCA PROGRAMS SOME OF THE ENDOWMENT FUNDS MAY HAVE PURPOSE RESTRICTIONS ON THE USE OF INCOME
FIN 48	PART X LINE 2	THE ASPCA RECOGNIZES THE EFFECTS OF INCOME TAX POSITIONS ONLY IF THOSE POSITIONS ARE MORE LIKELY THAN NOT OF BEING SUSTAINED NO PROVISION FOR INCOME TAXES WAS REQUIRED FOR 2012
RECONCILIATION OF REVENUE	PART XII, LINE 2D	UNREALIZED GAIN ON BENEFICIAL INTEREST IN TRUST HELD BY OTHERS \$ 946,718 WRITE DOWN OF PERMANENTLY RESTRICTED REVENUE \$(415,875) =======TOTAL \$530,843
RECONCILIATION OF EXPENSES	PART XIII LINES 2D	PENSION-RELATED CHARGES OTHER THAN NET PERIODIC PENSION COST \$(1,192,127)

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493259008953

OMB No 1545-0047

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States

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

Open to Public Inspection

Name of the organization THE AMERICAN SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS

Employer identification number

13-1623829

Pa	rt I	General Information "Yes" to Form 990, Pai			he United States. C	omplete if the organiz	ation answered
1	For g	rantmakers. Does the d	organization m	naıntaın record	ls to substantiate the	amount of the grants of	or
		tance, the grantees' elig					ırd
	the g	rants or assistance?					✓ Yes
2		rantmakers. Describe in Inited States.	n Part V the or	ganızatıon's p	rocedures for monitor	ing the use of grant fu	nds outside
3	Activ	ites per Region (The follow	ing Part I, line :	3 table can be d	uplicated if additional sp	ace 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
	North	A merica		2		COMMUNITY OUTREACH SVC	1,009,007
	Centr Carıbl	al America and the bean			Investments		14,867,000

15,876,007

15,876,007

Part I	Grants Part IV,	and Other As line 15, for any	sistance to Organ y recipient who rece	izations or Entiti ived more than \$5,	es Outside the Ur 000. Part II can be	nited States. Comp duplicated if addition	olete if the organizational space is needed	tion answered "Yes' l.	' to Form 990,
	Name of anization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
_									
_									
_									
_									
_									
_									
_									
_									
_									
_									
_									
_									
2 Er ta	iter total nu x-exempt b	mber of recipie y the IRS, or fo	ent organizations list or which the grantee	ed above that are in or counsel has pro	recognized as charit ovided a section 501	ties by the foreign c 1(c)(3) equivalency	ountry, recognized letter	as 	
3 Er	nter total nu	mber of other	organizations or ent	cities					
								Schedule F	(Form 990) 2012

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
		+	1		,		1
		+ +		'	+		+
		+		'	+		+
		+	<u> </u>		 		+
	 		 		 	 	+
					<u> </u>		
					<u> </u>	<u> </u>	
							<u> </u>
			1				
		+ + +			,		1
		+ + +			+		
	 	+			+		+
			1		-		+
	 		 		 	 	
			 		<u> </u>	 	
						1	

Part IV Foreign Forms

1	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)	Γ	Yes	✓	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organizationmay 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)	Г	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)	I✓	Yes	Γ	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, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	굣	Yes	Γ	Νo
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)	١٧	Yes	Г	Νo
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).	Γ	Yes	V	Νo

Schedule F (Form 990) 2012

Part V	Supplementa	al Information
Part v	Supplementa	ai intormatio

Complete this part to 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).

Identifier	ReturnReference	Explanation

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493259008953

SCHEDULE G (Form 990 or 990-EZ) Supplemental Information Regarding Fundraising or Gaming Activities

Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.

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

OMB No 1545-0047

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization THE AMERICAN SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS Employer identification number

13-1623829

Part I	Fundraising Activitie	s. Complete if the	organization answered	"Yes" to	Form 990	. Part IV. line	17.
	I dildi disilig Activitic	.a. Compicie ii die	organization answered	163 10	101111 220	, raitiv, iiic	

- ${f 1}$ Indicate whether the organization raised funds through any of the following activities. Check all that apply
- a Mail solicitations e Solicitation of non-government grants
 - ✓ Internet and email solicitations

 f
 ✓ Solicitation of government grants
- c 🔽 Phone solicitations g 🔽 Special fundraising events
- **d** In-person solicitations
- Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

 ▼ Yes
 ▼
- **b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
		Yes	No			
DONOR SERVICES GROUP	TELE MARKETER		No	4,965,294	814,731	4,150,563
ECHO MARKETING SOLUTIONS INC	TELE MARKETER		No	754,752	177,406	577,346
TELEFUND	TELE MARKETER		No	4,692,412	810,425	3,881,987
-						
Total			.	10,412,458	1,802,562	8,609,896

³ List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, VI, UT, VT, VA, WA, WV, WI, WY

Sche	dule	G (Form 990 or 990-EZ) 2012				Page 2
Pa	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts of	aising event contribut			
		<u> </u>	(a) Event #1 Bergh Ball	(b) Event #2 Humane Awards	(c) Other events	(d) Total events (add col (a) through col (c))
			(event type)	(event type)	(total number)	
Ē	1	Gross receipts	1,221,72	329,486	1,038,588	2,589,799
Revenue	2	Less Contributions	370,32!	61,360	39,401	471,086
~	3	Gross income (line 1 minus line 2)	851,400	268,126	999,187	2,118,713
	4	Cash prizes	(0	0	0
ம	5	Noncash prizes	(5,265	0	5,265
Expenses	6	Rent/facility costs	(0	13,250	13,250
ă	7	Food and beverages .	95,147	60,319	14,047	169,513
Direct	8	Entertainment	8,31	0	4,050	12,363
ā	9	Other direct expenses .	124,444	70,455	1,085,021	1,279,920
	10	Direct expense summary Add lii	nes 4 through 9 ın columı	n (d)		(1,480,311)
	11	Net income summary Combine I				638,402
Par	t II			"Yes" to Form 990, Pa	art IV, line 19, or repo	
Revenue		\$15,000 on Form 990-EZ, li	ne 6a. (a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Rev	1	Gross revenue				(6)/
	2	Cash prizes				
sesued	3	Non-cash prizes				
ம		Rent/facility costs				
Direct		Other direct expenses				
		Volunteer labor	│ Yes	Г Yes	│ Yes	
	7	Direct expense summary Add line	es 2 through 5 in column	(d)		
	8	Net gaming income summary Con	nbine lines 1 and 7 in col	umn (d)		
9 a b	Ist	er the state(s) in which the organiz the organization licensed to operate No," explain	e gaming activities in eac	h of these states?		
10a b		re any of the organization's gaming Yes," explain	licenses revoked, suspe	nded or terminated during	the tax year?	

70ES	the organization operate gaming	activities with nonlinelinders		· · I Yes I No
.2		neficiary or trustee of a trust or a men		
	formed to administer charitable of	gaming?		· · · · Fyes F No
.3	Indicate the percentage of gamir	ng activity operated in		
а	The organization's facility			13a
b	An outside facility			13b
.4	Enter the name and address of th	ne person who prepares the organizati	on's gaming/special events books	and records
	Name ►			
	Address 🟲			
	revenue?	ntract with a third party from whom the		
	amount of gaming revenue retain	ed by the third party 🟲 \$		
C	If "Yes," enter name and address	s of the third party		
	Name 🟲			
	Address ►			
.6	Gaming manager information			
	Name 🟲			
	Gaming manager compensation I	\$ \$		
	Description of services provided	>		
	☐ Director/officer	Employee	Independent contractor	
.7	Mandatory distributions			
а	Is the organization required unde	er state law to make charitable distrib	utions from the gaming proceeds to	
	retain the state gaming license?			Г _{Yes} Г _{No}
b	Enter the amount of distributions	required under state law distributed t	to other exempt organizations or sp	ent
		activities during the tax year 🟲 💲		
Par	columns (III) and (v), a	mation. Complete this part to pr and Part III, lines 9, 9b, 10b, 15b ditional information (see instructi	, 15c, 16, and 17b, as applical	
	Identifier	Return Reference	Explana	tion

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

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

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

OMB No 1545-0047

DLN: 93493259008953

Open to Public

Department of the Treasury

Schedule I

(Form 990)

nternal Revenue Service			F Attach to Form 550				Inspection
Name of the organization THE AMERICAN SOCIETY FOR THE	= DDEVENTION OF					Employer identification	on number
CRUELTY TO ANIMALS	. PREVENTION OF					13-1623829	
Part I General Information	on on Grants and	d Assistance				•	
Does the organization maintain the selection criteria used to a	ward the grants or as	sıstance?					✓ Yes
2 Describe in Part IV the organiz	·	_	=		1		
Part II Grants and Other A Form 990, Part IV, lir							es" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							_
3 Entertated number of continue 5	01(a)(3) and now	mont organizations live	had in the line 4 table			<u> </u>	300
Enter total number of section 5Enter total number of other org.							389 12

П	Grants and Other Assistance to Individuals in the United States	. Complete if the organization answered	"Yes" to Form 990,	Part IV, line 22.
	Part III can be duplicated if additional space is needed.		·	·

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d) A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Supplemental Information.

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
GRANT MAKING		SEE SCHEDULE O

Schedule I (Form 990) 2012

organization or government

HUMANE SOCIETY OF

FRIENDS OF MADERA

ANIMAL SHELTERPO BOX

5452 NE 22ND STREET DES MOINES, IA 50313 BOBBI AND THE STRAYS

INCPO BOX 170129

1019 875 S VISTA ST INDEPENDENCE, MO

CROSSWINDS EQUINE

RESCUE INC8182 E 200

SIDELL, IL 618766015 GENTLE GIANTS DRAFT

HORSE RESCUE SOC LTD 17250 OLD FREDERICK

MOUNT AIRY, MD 21771

SOCIETY INCPO BOX 183

CENTERVILLE, TN 37033 KITTYKIND INCPO BOX

SHELTER INC50 S DUTCH

NEW YORK, NY 10156 LONGHOPES DONKEY

ARVADA,CO 80001

EMIGRANT TRAIL

PACO'S PANTRY34535

SHINGLETOWN, CA 96088

RAMAPO-BERGEN ANIMAL

REFUGE INC2 SHELTER

OAKLAND, NJ 07436 UNION COUNTY HUMANE

SOCIETYPO BOX 625

HUMANE SOCIETY OF

KINDNESS COURT SOUTH BURLINGTON, VT

ANIMAL WELFARE

BARNSBORO RD

AND NEUTER

LANE

BOX 901

AVE

SOCIETY OF CAMDEN COUNTY AKA CAMDEN125

BLACKWOOD, NJ 08012 CRAWFORD COUNTY SPAY

FOUNDATION INCORPO 321 MITCHELL AVENUE ROBINSON,IL 62454 KENTUCKY HUMANE

SOCIETY1000 LYNDON

LOUISVILLE, KY 40222 ANIMAL RESCUE FUND OF

THE HAMPTONS INCPO

WAINSCOTT, NY 11975 BANGOR HUMANE

SOCIETY693 MT HOPE

HUMANE SOCIETY INC

RESCUE AND EDUCATION

HILLSBORO, MO 63050 FRIENDS FOR THE

SANCTUARY359 NEVADA

DEARBORN ANIMAL SHELTER2661 GREENFIELD RD DEARBORN, MI 48120 FRIENDS FOREVER A CAT

AUBURN,CA 95603

2700 NINTH STREET BERKELEY, CA 94710 CALCASIEU PARISH

ANIMAL SVCS & ADOPTION CTR5500 A SWIFT PLANT ROAD LAKE CHARLES, LA 70615 COALITION FOR ANIMAL

PO BOX 2203

STREET

BANGOR, ME 04401 BERKELEY-EAST BAY

CHITTENDEN COUNTY142

ABC ANIMAL HOSPITAL

532 EAST 14TH STREET NEW YORK, NY 10009

MAYNARDVILLE, TN

VALLEY ROAD BENNETT, CO 80102 LUCKY PAWSPO BOX 752

HICKMAN HUMANE

CITY OF INDEPENDENCE

ANIMAL SERVICESPO BOX

OZONE, NY 11417

64052

ROAD

961

LANE

37807

NORTH ROAD

25TH AVE GULFPORT, MS 395014832

923

SOUTH MISSISSIPPI2615

(h) Purpose of grant

LIVE RELEASE,

ANTI-CRUELTY

ANTI-CRUELTY

INTAKE REDUCTION

SPAY/NEUTER, LIVE

DISASTER/EMERGENCY,

INTAKE REDUCTION,

SPAY/NEUTER, RELOCATION

RELEASE

LIVE RELEASE

LIVE RELEASE

EQUINE

EQUINE

SPAY/NEUTER,

SPAY/NEUTER,

SPAY/NEUTER

SPAY/NEUTER,

ANTI-CRUELTY, LIVE

INTAKE REDUCTION,

LIVE RELEASE, ANTI-

LIVE RELEASE

ANTI-CRUELTY

SPAY/NEUTER

SPAY/NEUTER

ANTI-CRUELTY

RELOCATION

LIVE RELEASE

LIVE RELEASE

LIVE RELEASE

SPAY/NEUTER

LIVE RELEASE

SPAY/NEUTER

INTAKE REDUCTION,

INTAKE REDUCTION,

EQUINE

EQUINE

RELEASE

CRUELTY

INTAKE REDUCTION

DISASTER/EMERGENCY

EQUINE

RELOCATION

Software Version:

Software ID:

EIN: 13-1623829 Name: THE AMERICAN SOCIETY FOR THE PREVENTION OF

CRUELTY TO ANIMALS

assistance

(book, FMV, appraisal, other)

5,013

5,220

5,500

5,500

5,500

5,500

5,500

5,500

5,500

5,500

5,500

5,500

5,500

5,528

5,685

5,764

5,850

5,990

6,000

6,000

6,000

6,000

6,000

6,000

6,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of	(b) EIN	(c) IRC Code section	(d) A mount of cash	(e) A mount of non-	(f) Method of	(g) Description of	(h) Purpose of		
organization		ıf applıcable	grant	cash	valuation	non-cash assistance	or assistance		

501(C)(3)

501(C)(3)

MADERA,CA 93639					
MADISON COUNTY SHERIFF'S OFFICE2364 US 90 WEST MADISON,FL 32340	59-6000724	MADISON COUNTY	5,250		L
DENKAI ANIMAL SANCTUARY36710 WCR 126 GROVER,CO 80729	73-1706969	501(C)(3)	5,350		
CENTRAL KENTUCKY REGIONAL HUMANE SOCIETYPO BOX 875 LANCASTER,KY 40444	27-1662164	501(C)(3)	5,383		
SMOKY MOUNTAIN ANIMAL CARE FOUNDATIONPO BOX 7218 MARYVILLE,TN 37802	20-8296396	501(C)(3)	5,400		
ANIMAL RESCUE LEAGUE OF IOWA INCORPORATED	42-0680427	501(C)(3)	5,450		

501(C)(3)

INDEPENDENCE

64-6034439

77-0553194

11-3444285

44-6000190

30-0167186

59-3822764

62-1639736

31-1717255

84-1538890

43-2073647

80-0518825

22-6094179

62-1640384

03-0193150

13-4014479

20-0549531

26-4593741

61-0463938

23-7400663

01-0215910

94-1347069

72-0000234

02-0727541

38-3171570

80-0290707

501(C)(3) 501(C)(3) 501(C)(3)

501(C)(3)

501(C)(3)

501(C)(3) 501(C)(3)

501(C)(3)

501(C)(3)

501(C)(3)

501(C)(3)

501(C)(3)

501(C)(3)

501(C)(3)

501(C)(3)

501(C)(3)

501(C)(3)

501(C)(3)

501(C)(3)

LAKE CHARLES

Form 990,Schedule I, Pair (a) Name and address of organization or government	r t II, Grants ar (b) EIN	nd Other Assistance (c) IRC Code section if applicable		(e) A mount of non- cash	ns in the United S (f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRIENDS OF PROVIDENCE ANIMAL CARE & CONTROL 200 TERMINAL RD PROVIDENCE,RI 02905	27-2629865	501(C)(3)	6,000				INTAKE REDUCTION
HUMANE SOCIETY OF CENTRAL WASHINGTON 2405 W BIRCHFIELD RD YAKIMA, WA 98901	91-0580938	501(C)(3)	6,000				LIVE RELEASE
HUMANE SOCIETY OF DECATUR & MACON COUNTY2890 N ML KING DR	37-6032672	501(C)(3)	6,000				SPAY/NEUTER
DECATUR, IL 62526 INFINITE HOPE SERVICES INCPO BOX 170504 BROOKLYN, NY 11217	20-2441730	501(C)(3)	6,000				DISASTER/EMERGENCY
MARIN HUMANE SOCIETY 171 BEL MARIN KEYS BLVD NOVATO,CA 94949	94-1156562	501(C)(3)	6,000				LIVE RELEASE
NJ SOC FOR PREVENTION OF CRUELTY TO ANIMALSP O BOX 721 CLIFTON,NJ 07015	22-6053452	501(C)(3)	6,000				ANTI-CRUELTY
PETS ARE WONDERFUL SUPPORT3170 23RD STREET SAN FRANCISCO,CA 94110	94-3049133	501(C)(3)	6,000				INTAKE REDUCTION
RING DOG RESCUE INCPO BOX 28632 HENRICO,VA 23228	61-1522182	501(C)(3)	6,000				SPAY/NEUTER
SOUTHAMPTON ANIMAL SHELTER FOUNDATION INCP O BOX 821 SOUTHAMPTON, NY 11969	27-1019073	501(C)(3)	6,000				ANTI-CRUELTY
PIKE PET PALS INC1576 PROSPERITY ROAD WAVERLY,OH 45690	11-3810950	501(C)(3)	6,063				LIVE RELEASE
TRI-COUNTY HUMANE SOCIETYPO BOX 701 ST CLOUD,MN 56302	23-7449686	501(C)(3)	6,063				LIVE RELEASE
HUMANE SOCIETY OF SCHUYLER COUNTY INCPO BOX 427 MONTOUR FALLS, NY 14865	16-1315207	501(C)(3)	6,125				SPAY/NEUTER
PAWS CHICAGO 1997 N CLYBOURN AVE CHICAGO,IL 60614	36-4219778	501(C)(3)	6,256				INTAKE REDUCTION
WASHINGTON STATE ANIMAL RESPONSE TEAM PO BOX 21 ENUMCLAW, WA 98022	26-0295234	501(C)(3)	6,258				ANTI-CRUELTY
GIVE ME A CHANCE EQUINE RESCUE68 TERRAPIN TRAIL ARKADELPHIA, AR 71923	20-0927684	501(C)(3)	6,300				EQUINE
NYS DEPARTMENT OF AGRICULTURE AND MARKETS10B AIRLINE DRIVE ALBANY,NY 12235	14-6013200	ALBANY	6,320				DISASTER/EMERGENCY
MISSISSIPPI BOARD OF ANIMAL HEALTHPO BOX 3889 JACKSON,MS 39207	64-6000793	JACKSON	6,332				DISASTER/EMERGENCY
ALLEN COUNTY SPCA4914 HANNA STREET FORT WAYNE,IN 46806	35-6042135	501(C)(3)	6,500				LIVE RELEASE
BURLINGTON COUNTY SPCA HUMANE POLICE400 SUNSET ROAD BURLINGTON,NJ 08016	26-1676671	501(C)(3)	6,500				ANTI-CRUELTY
HEAVEN CAN WAIT SANCTUARYPO BOX 30158 LAS VEGAS,NV 89173	88-0450947	501(C)(3)	6,500				SPAY/NEUTER
RUN FOR HOME HAVENPO BOX 1510 MOUNT SHASTA, CA 96067	27-4116043	501(C)(3)	6,500				EQUINE
S P C A INC5850 BRANNEN RD S LAKELAND,FL 33813	59-1939655	501(C)(3)	6,500				INTAKE REDUCTION
TAILS HUMANE SOCIETY 2250 BARBER GREENE RD DEKALB, IL 60115	36-4334785	501(C)(3)	6,600				LIVE RELEASE
AMEREQUINE BEAUTY INC 45800 TWIN LAKES NEWBERRY SPRINGS, CA 923650000	27-0642733	501(C)(3)	7,000				EQUINE
ANIMAL CARE & CONTROL DIV PUBLIC SAFETY DEP 7100 BELVEDERE RD WEST PALM BEACH,FL 33411	59-6000785	WEST PALM BEACH	7,000				EQUINE
CALIFORNIA VETERINARY MEDICAL FOUNDATION 1400 RIVER PARK DRIVE SACRAMENTO, CA 95815	68-0356619	501(C)(3)	7,000				DISASTER/EMERGENCY
CITY OF BLOOMINGTON ANIMAL CARE & CONTROL 3410 S WALNUT BLOOMINGTON, IN 47401	35-6000954	BLOOMINGTON	7,000				LIVE RELEASE
CITY OF HOUSTON BUREAU OF ANIMAL REGULATION AND CA2700 EVELLA ST HOUSTON,TX 77026	74-6001164	HOUSTON	7,000				LIVE RELEASE
DAUFUSKIE ISLAND	56-2539707	501(C)(3)	7,000				ANTI-CRUELTY

29915

CONSERVANCYPO BOX 45 DAUFUSKIE ISLAND, SC

EASY STREET HORSE &

BARNYARD RESCUE INC 109 LANGLEY ROAD AMSTERDAM,NY 12010 16-1771605

501(C)(3)

501(C)(3)

7,000

EQUINE

Form 990,Schedule I, Par (a) Name and address of organization or government	t II, Grants ar (b) EIN	nd Other Assistanc (c) IRC Code section if applicable		s and Organizatio (e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal,	States (g) Description of non-cash assistance	(h) Purpose of grant or assistance
ELK COUNTY HUMANE SOCIETY1029 E ESCHBACH RD ST MARYS,PA 15857	25-1891498	501(C)(3)	7,000		other)		LIVE RELEASE
HELPING EATON ANIMALS RESOURCE TEAM (HEART) 5775 N CHESTER RD CHARLOTTE, MI 48813	26-4764595	501(C)(3)	7,000				INTAKE REDUCTION
HIDDEN SPRINGS HORSE RESCUE INC4883 BEVAN LANE MARIANNA, FL 32448	74-3260098	501(C)(3)	7,000				EQUINE
KEY WEST CAT SOCIETY 1131 COLUMBINE RD VENICE,FL 34293	26-3193138	501(C)(3)	7,000				INTAKE REDUCTION, SPAY/NEUTER
LEON COUNTY ANIMAL CONTROL501-B APPLEYARD DRIVE TALLAHASSEE,FL 32304	59-6000708	LEON COUNTY	7,000				INTAKE REDUCTION
MEIGS COUNTY HUMANE SOCIETYPO BOX 682 POMEROY,OH 45769	23-7390605	501(C)(3)	7,000				INTAKE REDUCTION, EQUINE
PAWPALS INCPOBOX 568 QUINCY,IL 62306	37-1413157	501(C)(3)	7,000				INTAKE REDUCTION
PORTSMOUTH HUMANE SOCIETY INC4022 SEABOARD COURT PORTSMOUTH,VA 23701	54-0560059	501(C)(3)	7,000				LIVE RELEASE
SOCIETY FOR THE IMPROVEMENT OF CONDITIONS FOR STRA 2600 WILMINGTON PIKE KETTERING, OH 45419	23-7367199	501(C)(3)	7,000				LIVE RELEASE
STRAWBERRY MOUNTAIN MUSTANGSPO BOX 2133 ROSEBURG, OR 97470	81-0668011	501(C)(3)	7,000				DISASTER/EMERGENCY, EQUINE
YOUNG-WILLIAMS ANIMAL CENTER OF EAST TENNESSEE3201 DIVISION ST KNOXVILLE, TN 37919	45-5326778	501(C)(3)	7,000				LIVE RELEASE
VOICELESS-MIP O BOX 730 CHARLOTTE, MI 48813	27-0725920	501(C)(3)	7,063				SPAY/NEUTER, LIVE RELEASE
HAYWOOD ANIMAL WELFARE ASSOCIATION INCPO BOX 992 WAYNESVILLE,NC 28786	56-1574745	501(C)(3)	7,064				SPAY/NEUTER, INTAKE REDUCTION
LEECH LAKE TRIBAL POLICE DEPARTMENT 6242 US HWY2 CASS LAKE, MN 56633	41-1242052	CASS LAKE	7,100				RELOCATION
FORT WAYNE ANIMAL CARE & CONTROL3020 HILLEGAS ROAD FORT WAYNE, IN 46808	35-6001029	FORT WAYNE	7,350				RELOCATION
CITY OF TALLADEGA ANIMAL CONTROL809 W MCMILLAN ST TALLADEGA,AL 35160	63-6001372	TALLADEGA	7,450				INTAKE REDUCTION, RELOCATION
WINDHAM COUNTY HUMANE SOCIETYPO BOX 397	03-6016140	501(C)(3)	7,472				INTAKE REDUCTION, SPAY/NEUTER
BRATTLEBORO, VT 05302 ANIMAL SAMARITANS SPCAPO BOX 513 THOUSAND PALMS, CA 92276	95-3171867	501(C)(3)	7,500				INTAKE REDUCTION
BLUEBONNET EQUINE HUMANE SOCIETY INCPO BOX 632	84-1673775	501(C)(3)	7,500				EQUINE
COLLEGE STATION, TX 77841							
CENTRAL VIRGINIA HORSE RESCUE389 BOYDTON PLANK ROAD BRODNAX,VA 23920	27-2967793	501(C)(3)	7,500				EQUINE
DAVIESS COUNTY ANIMAL CONTROL2620 HWY 81 OWENSBORO,KY 42301	61-6000155	DAVIESS COUNTY	7,500				EQUINE
DELAWARE HUMANE ASSOCIATION701 A STREET WILMINGTON, DE 19801	51-0082499	501(C)(3)	7,500				ANTI-CRUELTY, LIVE RELEASE
EQUINE RESCUE CENTER & SANCTUARY FORMERLY EQUINE RPO BOX 444 WATSONVILLE, CA 95077	26-4715747	501(C)(3)	7,500				EQUINE
FAYETTE COUNTY HUMANE SOCIETY INCP O BOX 244	58-1592706	501(C)(3)	7,500				INTAKE REDUCTION
HUMANE SOCIETY OF MISSOURI1201 MACKLIND AVE	43-0652638	501(C)(3)	7,500				EQUINE
ST LOUIS, MO 631101431 SECOND CHANCE RANCH 12440 KOEPPEN ROAD SE RAINIER, WA 98576	91-1999946	501(C)(3)	7,500				EQUINE
SOUTHERN OREGON HUMANE SOCIETY2910 TABLE ROCK RD MEDFORD, OR 97501	93-0391640	501(C)(3)	7,500				SPAY/NEUTER, LIVE
SPIRIT OF THE HILLS WILDLIFE SANCTUARY500 N TINTON ROAD SPEARFISH,SD 57783	46-0461795	501(C)(3)	7,500				EQUINE

EQUINE

EQUINE

SPEARFISH, SD 57783
THE BRIGHTER DAYS
HORSE REFUGE INC682

PIPE CREEK,TX 78063

FOUNDATIONPO BOX 173 TEHACHAPI,CA 93581

UNITED PEGASUS

KRAUSE ROAD

501(C)(3)

501(C)(3)

74-2479203

95-4497611

7,500

7,500

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code section (d) Amount of cash (e) Amount of non-(f) Method of (g) Description of (h) Purpose of grant organization non-cash assistance ıf applicable valuation grant or assistance (book, FMV, appraisal, or government assistance other) 501(C)(3) EQUINE VILLA CHARDONNAY 27-0666624 7,500 HORSES WITH WINGS 42200 CALLE BARBONA TEMECULA,CA 92592 RELOCATION THE ANIMAL FOUNDATION 88-0144253 7,550 501(C)(3) 655 N MOJAVE ROAD LAS VEGAS, NV 89101 SPAY NEUTER CHARLOTTE 27-3665227 501(C)(3) 7,563 INTAKE REDUCTION 2017 N DAVIDSON STREET CHARLOTTE, NC 28205

7,600

7,642

7,663

8,000

8,000

8,000

8,000

8,000

8,000

8,000

8,000

8,000

8,000

8,000

8,200

8,500

8,500

8,500

8,500

8,500

8,500

8,563

8,750

8.980

9,000

9,000

9,000

INTAKE REDUCTION

ANTI-CRUELTY

LIVE RELEASE

SPAY/NEUTER

LIVE RELEASE

EQUINE

EQUINE

EQUINE

EQUINE

EQUINE

EQUINE

EQUINE

SPAY/NEUTER

LIVE RELEASE

LIVE RELEASE,

LIVE RELEASE,

EQUINE

RELEASE

EQUINE

INTAKE REDUCTION

INTAKE REDUCTION,

SPAY/NEUTER, LIVE

INTAKE REDUCTION,

SPAY/NEUTER, LIVE

DISASTER/EMERGENCY

LIVE RELEASE

SPAY/NEUTER

RELEASE

EQUINE

SPAY/NEUTER

DISASTER/EMERGENCY

RELOCATION, INTAKE REDUCTION

DISASTER/EMERGENCY

501(C)(3)

LACOMBE

501(C)(3)

501(C)(3)

501(C)(3)

501(C)(3)

501(C)(3)

SUMNER

IDAHO HUMANE SOCIETY

INC4775 DORMAN STREET

LEWIS & CLARK HUMANE

ALL ABOUT SPAY NEUTER

BASSET HOUND RESCUE

OF SOUTHERN CA INCP O

WHITTIER, CA 906080088

DENTON ANIMAL SHELTER

FOUNDATION INCPO BOX

DREAM CATCHER THERAPY

CENTER5814 HIGHWAY

OLATHE, CO 814259714
GREYSTONE EQUINE

REHABILITATION INC1755

RISING SUN, MD 21911 HORSES OF TIR NA NOG

6364 ARMS LAKE AVE SAN DIEGO, CA 92119

LAKOTA ANIMAL CARE

INC20 PARADISE LANE CHICHESTER, NH 03258

WELFARE SOCIETY INC PAWSBOX 10228 BO

ISABELA, PR 006620000 THE EXCELLER FUND INC

LEXINGTON, KY 40544

CALIFORNIA ANIMAL

CONTROL DIRECTORS ASSNPO BOX 134 1017 L

SACRAMENTO, CA 95814
ADAMS COUNTY SOCIETY

FOR THE PREVENTION OF CRUELTY11 GOLDENVILLE

GETTYSBURG, PA 17325

BROTHER WOLF ANIMAL

LIBERTY HUMANE SOCIETY

INC235 JERSEY CITY BLVD JERSEY CITY,NJ 07305

SANCTUARY ONE13195

UPPER APPLEGATE RD JACKSONVILLE, OR 97530 SANTA MARIA VALLEY

HUMANE SOCIETY751

SANTA MARIA, CA 93458 ST TAMMANY PARISH

DEPARTMENT OF ANIMAL SVCS31078 HWY 36 LACOMBE, LA 70445

LEWIS CLARK ANIMAL

SHELTER INC6 SHELTER RD

LEWISTON,ID 835017899 ANIMAL SERVICES AND

ASSISTANCE PROGRAMS INC19309 KISHWAUKEE

SHELTER-SERVICES800

SOUTHWEST DRIVE CHEYENNE, WY 82007 COMPANION ANIMAL

NETWORK INCPO BOX

FOREST HILLS, NY 11375

HEAVEN CAN WAIT INCPO

SAN MIGUEL, CA 93451
METRO ANIMAL SERVICES

1104 MAPLE ST STE 140 SUMNER, WA 98390

VALLEY ROAD
MARENGO,IL 60152
CHEYENNE ANIMAL

750214

BOX5

BLACK ROAD

RESCUEPO BOX 8195

ASHEVILLE, NC 28814

OKLAHOMA

BAJURAS

ST

PO BOX 4237

THOROUGHBRED
RETIREMENT PRGM LTD
25362 MACARTHUR AVE
BLANCHARD,OK 73010
PUERTO RICO ANIMAL

PROJECTPO BOX 763
CUSTER, SD 57730
LIVE AND LET LIVE FARM

DENTON,TX 76202

SOCIETYPO BOX 4455 HELENA, MT 59604

INCP O BOX 140098 HOWARD BEACH, NY

11414

BO X 88

486

348

RESCUE &

PRINCIPIO RD

BOISE,ID 83705 ARMORY DOG & CAT

HOSPITAL18 E KINGSBRIDGE RD BRONX,NY 10468 82-0212536

13-3468417

81-6014910

26-0095027

77-0503016

20-4712596

84-1488284

26-3627404

20-3681634

45-0551967

52-2381215

26-1078792

66-0588444

75-2937532

68-0097731

23-2044352

20-8787719

22-3585263

20-8982518

77-0002949

72-6001304

82-0207503

26-3527153

83-0217643

27-1643939

74-3071112

Form 990,Schedule I, Par	•			_			(I) D.:.
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SECOND CHANCE COMPANIONSPO BOX 2343	91-1639509	501(C)(3)	9,000				SPAY/NEUTER, INTAKE REDUCTION
BATTLE GROUND, WA 98606							
SPRING CREEK HORSE RESCUE39908 US HIGHWAY 160 BAYFIELD,CO 811228747	20-2509841	501(C)(3)	9,000				EQUINE
TRUE INNOCENTS EQUINE RESCUE7900 LIMONITE AVE	33-0814719	501(C)(3)	9,000				EQUINE
PAWS OF HERTFORD COUNTYPO BOX 153 MURFREESBORO, NC 27855	20-4940600	501(C)(3)	9,185				LIVE RELEASE
HUMANE SOCIETY OF KANDIYOHI COUNTYPO BOX 709 WILLMAR,MN 562010709	41-1508862	501(C)(3)	9,363				LIVE RELEASE, INTAKE REDUCTION
ILLINOIS EQUINE HUMANE CENTERPO BOX 337 BIG ROCK,IL 60155	26-3120493	501(C)(3)	9,500				EQUINE
LAST CHANCE RANCH9 BECK ROAD QUAKERTOWN,PA 18951	23-3054817	501(C)(3)	9,500				EQUINE, LIVE RELEASE
MONMOUTH COUNTY SOCIETY FOR THE PREVENTION OF CRUE260 WALL STREET EATONTOWN,NJ 07724	21-0679893	501(C)(3)	9,500				INTAKE REDUCTION, LIVE RELEASE, DISASTER/EMERGENCY
THE 11TH HOUR ANIMAL RESCUE INCPO BOX 218 ROCKAWAY,NJ 07866	30-0294525	501(C)(3)	9,500				DISASTER/EMERGENCY, LIVE RELEASE
WYOMING COUNTY SPCA 808 CREEK RD ATTICA,NY 14011	22-2365422	501(C)(3)	9,500				SPAY/NEUTER
CAPITAL AREA HUMANE SOCIETY7095 W GRAND RIVER AVE LANSING,MI 48906	38-1601542	501(C)(3)	9,600				SPAY/NEUTER
PET HELPERS INC1447 FOLLY RD CHARLESTON, SC 294129509	57-0802283	501(C)(3)	9,664				INTAKE REDUCTION, LIVE RELEASE
SUMTER COUNTY ANIMAL CONTROL SERVICES819 CR 529 LAKE PANASOFFKEE, FL 33538	59-6000865	SUMTER COUNTY	9,800				ANTI-CRUELTY
RANKIN COUNTY BOARD OF SUPERVISORS221 NORTH TIMBER STREET BRANDON, MS 39042	64-6001025	RANKIN COUNTY	9,920				SPAY/NEUTER, DISASTER/EMERGENCY, LIVE RELEASE
CATTERY INCPO BOX 8575 CORPUS CHRISTI,TX 78468	26-0178205	501(C)(3)	9,993				SPAY/NEUTER
ADA HOWE KENT MEMORIAL SHELTER INC DBA KENT A2259 RIVER RD CALVERTON,NY 11933	23-7007068	501(C)(3)	10,000				INTAKE REDUCTION
ANIMAL FRIENDS562 CAMP HORNE ROAD PITTSBURGH,PA 15237	25-0951565	501(C)(3)	10,000				INTAKE REDUCTION
ANIMAL HUMANE ASSOCIATION OF NEW MEXICO INC615 VIRGINIA ST SE ALBUQUERQUE,NM 87108	85-0207652	501(C)(3)	20,000				LIVE RELEASE
ANIMAL PEOPLE INCPO BOX 960 CLINTON, WA 98236	14-1752216	501(C)(3)	10,000				ANTI-CRUELTY
ANIMAL SHELTER ASSISTANCE PROGRAMPO BOX 357 GOLETA,CA 931160357	77-0283500	501(C)(3)	10,000				SPAY/NEUTER
BAKERSFIELD SOCIETY FOR THE PREVENTION CRUELTY TO 3000 GIBSON	95-2141790	501(C)(3)	10,000				ANTI-CRUELTY

CRUELTY TO 3000 GIBSON

26-1169679

20-3269224

74-6000246

22-6002013

74-6001983

56-1767327

54-6001253

51-0484049

20-4969731

501(C)(3)

501(C)(3)

BAYTOWN

JERSEY CITY

ROBSTOWN

DINWIDDIE

501(C)(3)

501(C)(3)

10,000

10,000

10,000

10,000

10,000

10,000

10,000

10,000

10,000

SPAY/NEUTER

SPAY/NEUTER

SPAY/NEUTER

EQUINE

EQUINE

EQUINE

ANTI-CRUELTY

SPAY/NEUTER

INTAKE REDUCTION

BAKERSFIELD, CA 93308 BIKERS AGAINST ANIMAL

CRUELTY INCPO BOX 68 NORTH HAVEN,CT 06473 CATS CRADLE OF THE

SHENANDOAH VALLEYPO

CITY OF BAYTOWNPO BOX

BAYTOWN,TX 775220424 CITY OF JERSEY CITY

DEPARTMENT OF HEALTH AND HUMA 280 GROVE

JERSEY CITY,NJ 07302 CITY OF ROBSTOWNPO

ROBSTOWN,TX 78380 COMMONWEALTH ANIMAL

DINWIDDIE, VA 23841 EQUINE OUTREACH INC

RESCUE & SPAYNEUTER
CLINIC2321 E MULBERRY 1
FORT COLLINS, CO 80524

63220 SILVIS ROAD BEND,OR 97701 FORT COLLINS CAT

HOSPITAL1909
COMMONWEALTH AVE
CHARLOTTE, NC 28205
DINWIDDIE COUNTYPO

HARRISONBURG, VA

ST

BOX 2128

424

STREET

BOX 872

BOX 120

Form 990,Schedule I, Par	t II, Grants ar	nd Other Assistance	e to Governments	and Organization	ns in the United	States	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FREEDOM SERVICE DOGS OF AMERICA 2000 WEST UNION AVENUE ENGLEWOOD, CO 80110	84-1068936	501(C)(3)	10,000				ANTI-CRUELTY
FRIENDS OF THE ANIMAL COMMUNITYPO BOX 4627 SONORA,CA 95370	91-2164651	501(C)(3)	10,000				LIVE RELEASE
GEORGIA ANIMAL PROJECT INCPO BOX 689 HOLLY SPRINGS,GA 30142	56-2623576	501(C)(3)	10,000				SPAY/NEUTER, INTAKE REDUCTION
GREAT PLAINS SPCA5428 ANTIOCH DRIVE MERRIAM,KS 66202	05-0552529	501(C)(3)	10,000				LIVE RELEASE, INTAKE REDUCTION,
HORSE CARE PROGRAMCOLORADO HORSECARE FOODBANK 5178 S ELK RIDGE RD EVERGREEN,CO 80439	26-4469232	501(C)(3)	10,000				EQUINE
HUDSON VALLEY ANIMAL RESCUE AND SANCTUARY 15 BARNES DRIVE POUGHKEEPSIE,NY 12603	45-2402415	501(C)(3)	10,000				SPAY/NEUTER
HUMANE SOCIETY OF INDIANAPOLIS7929 N MICHIGAN ROAD INDIANAPOLIS,IN 46268	35-0876385	501(C)(3)	10,000				INTAKE REDUCTION
HUMANE SOCIETY OF SAN BERNARDINO VALLEY374 W ORANGE SHOW RD SN BERNRDNO, CA 924082028	23-7078944	501(C)(3)	10,000				INTAKE REDUCTION
HUMANE SOCIETY OF THE SIERRA FOOTHILLS INC 2945 BELL ROAD 175 AUBURN,CA 95603	32-0282752	501(C)(3)	10,000				FARM ANIMALS
HUMANE SOCIETY OF WICHITA COUNTY TEXAS PO BOX 3648 WICHITA FALLS,TX 76307	75-1154363	501(C)(3)	10,000				SPAY/NEUTER
HUMANE SOCIETY OF YUMA4050 S AVENUE 4 1/2 E YUMA,AZ 85365	86-6053617	501(C)(3)	10,000				SPAY/NEUTER
KESHENA ANIMAL HELP AND RESCUE INC129 E DIVISION STREET SHAWANO, WI 54166	13-4316416	501(C)(3)	10,000				INTAKE REDUCTION
LAKE COUNTY ANIMAL CARE & CONTROL4949 HELBUSH DRIVE LAKEPORT, CA 95453	94-6000825	LAKE PORT	10,000				SPAY/NEUTER
LINCOLN COUNTY SHERIFFS OFFICE ANIMAL SVCSANIMAL225 W OLIVE ST STE 203 NEWPORT,OR 97365	93-6002304	LINCOLN	10,000				ANTI-CRUELTY
LOVING ALL ANIMALS INC 73-179 JOSHUA TREE PALM DESERT,CA 92260	26-3841119	501(C)(3)	10,000				LIVE RELEASE
MAZIES MISSIONPO BOX 2651 FRISCO,TX 75034	27-0571618	501(C)(3)	10,000				LIVE RELEASE
MISSISSIPPI SPAY AND NEUTER100 BUSINESS CENTER PARKWAY PEARL,MS 39208	20-2938077	501(C)(3)	10,000				SPAY/NEUTER
MORRIS ANIMAL	84-6032307	501(C)(3)	10,000				EQUINE, LIVE

HUMANE SOCIETY OF THE SIERRA FOOTHILLS INC 2945 BELL ROAD 175 AUBURN,CA 95603	32-0282752	501(C)(3)	10,000		FARM ANIMALS
HUMANE SOCIETY OF WICHITA COUNTY TEXAS PO BOX 3648 WICHITA FALLS,TX 76307	75-1154363	501(C)(3)	10,000		SPAY/NEUTER
HUMANE SOCIETY OF YUMA4050 S AVENUE 4 1/2 E YUMA,AZ 85365	86-6053617	501(C)(3)	10,000		SPAY/NEUTER
KESHENA ANIMAL HELP AND RESCUE INC129 E DIVISION STREET SHAWANO,WI 54166	13-4316416	501(C)(3)	10,000		INTAKE REDUCTION
LAKE COUNTY ANIMAL CARE & CONTROL4949 HELBUSH DRIVE LAKEPORT,CA 95453	94-6000825	LAKE PORT	10,000		SPAY/NEUTER
LINCOLN COUNTY SHERIFFS OFFICE ANIMAL SVCSANIMAL225 W OLIVE ST STE 203 NEWPORT,OR 97365	93-6002304	LINCOLN	10,000		ANTI-CRUELTY
LOVING ALL ANIMALS INC 73-179 JOSHUA TREE PALM DESERT,CA 92260	26-3841119	501(C)(3)	10,000		LIVE RELEASE
MAZIES MISSIONPO BOX 2651 FRISCO,TX 75034	27-0571618	501(C)(3)	10,000		LIVE RELEASE
MISSISSIPPI SPAY AND NEUTER100 BUSINESS CENTER PARKWAY PEARL,MS 39208	20-2938077	501(C)(3)	10,000		SPAY/NEUTER
MORRIS ANIMAL FOUNDATION10200 E GIRARD AVENUE DENVER, CO 80231	84-6032307	501(C)(3)	10,000		EQUINE, LIVE RELEASE
NEW ENGLAND SOCIETY FOR ABANDONED ANIMALS INCPO BOX 1041 OSTERVILLE, MA 02655	41-2248211	501(C)(3)	10,000		RELOCATION, SPAY/NEUTER
PAWMETTO LIFELINE1275 BOWER PARKWAY COLUMBIA,SC 29212	56-2146419	501(C)(3)	10,000		SPAY/NEUTER
PAWS (PROVIDING ANIMAL WELFARE SVCS) INC1 GEMINI CIRCLE ROCHESTER, NY 14606	45-4876715	501(C)(3)	10,000		SPAY/NEUTER
PEOPLE FOR ANIMALS INC 401 HILLSIDE AVENUE	22-2331492	501(C)(3)	10,000		DISASTER/EMERGENCY

SHERIFFS OFFICE ANIMAL SVCSANIMAL225 W OLIVE ST STE 203 NEWPORT,OR 97365			13,000		
LOVING ALL ANIMALS INC 73-179 JOSHUA TREE PALM DESERT,CA 92260	26-3841119	501(C)(3)	10,000		LIVE RELEASE
MAZIES MISSIONPO BOX 2651 FRISCO,TX 75034	27-0571618	501(C)(3)	10,000		LIVE RELEASE
MISSISSIPPI SPAY AND NEUTER100 BUSINESS CENTER PARKWAY PEARL,MS 39208	20-2938077	501(C)(3)	10,000		SPAY/NEUTER
MORRIS ANIMAL FOUNDATION10200 E GIRARD AVENUE DENVER,CO 80231	84-6032307	501(C)(3)	10,000		EQUINE, LIVE RELEASE
NEW ENGLAND SOCIETY FOR ABANDONED ANIMALS INCPO BOX 1041 OSTERVILLE, MA 02655	41-2248211	501(C)(3)	10,000		RELOCATION, SPAY/NEUTER
PAWMETTO LIFELINE1275 BOWER PARKWAY COLUMBIA,SC 29212	56-2146419	501(C)(3)	10,000		SPAY/NEUTER
PAWS (PROVIDING ANIMAL WELFARE SVCS) INC1 GEMINI CIRCLE ROCHESTER,NY 14606	45-4876715	501(C)(3)	10,000		SPAY/NEUTER
PEOPLE FOR ANIMALS INC 401 HILLSIDE AVENUE HILLSIDE,NJ 07205	22-2331492	501(C)(3)	10,000		DISASTER/EMERGENCY
PET PREVENT A LITTER PALS OF CENTRAL TEXAS PO BOX 401 SAN MARCOS,TX 78667	74-2586062	501(C)(3)	10,000		SPAY/NEUTER
RAWHIDE RESCUE INC16 MT BETHEL ROAD 360 WARREN,NJ 07059	22-3822370	501(C)(3)	10,000		RELOCATION
RESCUE RANCH INCPO BOX 527 55 BLANKENSHIP MCRAE,GA 31055	42-1598987	501(C)(3)	10,000		SPAY/NEUTER, INTAKE REDUCTION
RESCUED TO RIDEPO BOX 775974 STEAMBOAT SPRINGS,CO 80477	27-2494702	501(C)(3)	10,000		EQUINE
SANTA BARBARA COUNTY ANIMAL CARE FOUNDATION INCPO BOX 307 SANTA MARIA,CA 93456	68-0498950	501(C)(3)	10,000		SPAY/NEUTER
SILICON VALLEY ANIMAL CONTROL AUTHORITY3370 THOMAS ROAD SANTA CLARA,CA 95054	77-0574936	SANTA CLARA	10,000		SPAY/NEUTER
SOUTHERN CALIFORNIA THOROUGHBRED RESCUE PO BOX 5 NORCO,CA 92860	26-3166279	501(C)(3)	10,000		EQUINE
SPAY-NEUTER ASSISTANCE PROGRAM INCPO BOX 70286 HOUSTON,TX 77270	76-0608925	501(C)(3)	10,000		SPAY/NEUTER

Form 990,Schedule I, Par (a) Name and address of organization or government	t II, Grants an (b) EIN	d Other Assistance (c) IRC Code section if applicable	to Governments (d) Amount of cash grant	(e) A mount of non- cash	s in the United Sta (f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE ALABAMA COALITION AGAINST DOMESTIC VIOLENCE INPO BOX 4762 MONTGOMERY,AL 36103	63-0907890	501(C)(3)	10,000				ANTI-CRUELTY
TROTT USA 27086 LOST COLT DR LAGUNA HILLS, CA 92653	27-2043846	501(C)(3)	10,000				EQUINE
VETERINARY MEDICAL CENTER OF LONG ISLAND 75 SUNRISE HWY WEST ISLIP,NY 11795	20-1819486		10,000				ANTI-CRUELTY
NOAHS ARK ANIMAL WELFARE ASSOCIATIONPO BOX 478 TRINIDAD, CO 81082	84-1476613	501(C)(3)	10,290				RELOCATION
MICHIGAN HUMANE SOCIETY30300 TELEGRAPH RD BINGHAM FARMS, MI 480254509	38-1358206	501(C)(3)	10,500				EQUINE, LIVE RELEASE
TREE HOUSE HUMANE SOCIETY1212 W CARMEN AVE CHICAGO,IL 60640	23-7444825	501(C)(3)	10,500				INTAKE REDUCTION, LIVE RELEASE
VIRGINIA ANIMAL FIGHTING TASK FORCE450 TV DRIVE FREDERICKSBURG, VA 22408	26-0198079	501(C)(3)	10,500				ANTI-CRUELTY
PET ALLIES INC4050 S WHITE MOUNTAIN RD SHOW LOW, AZ 85901	86-0829565	501(C)(3)	11,000				SPAY/NEUTER, INTAKE REDUCTION
STONE COUNTY SOCIETY FOR THE PREVENTION OF CRUELTY1989 HWY 26 WIGGINS, MS 39577	27-1359759	501(C)(3)	11,000				INTAKE REDUCTION
AMERICAN WILD HORSE PRESERVATION CAMPAIGN (RETURNPO BOX 1048 HILLSBOROUGH,NC 27278	06-1484961	501(C)(3)	11,500				EQUINE
ANIMAL WELFARE ASSOCIATION INCORPORATED509 CENTENNIAL BOULEVARD VOORHEES,NJ 08043	22-1752792	501(C)(3)	11,500				INTAKE REDUCTION, LIVE RELEASE, SPAY/NEUTER
CITY OF FAYETTEVILLE COMMUNITY SERVICES DIVISION -1640 S ARMSTRONG FAYETTEVILLE, AR 72701	71-6018462	FAYETTEVILLE	11,500				ANTI-CRUELTY, RELOCATION, INTAKE REDUCTION
DREAMCHASER PMU RESCUE AND REHABILITATION48019 N 7TH AVE NEW RIVER, AZ 850878504	20-5168546	501(C)(3)	11,500				EQUINE
HUMANE SOCIETY OF BOULDER VALLEY2323 55TH STREET BOULDER,CO 80301	84-0152768	501(C)(3)	11,500				RELOCATION, LIVE RELEASE
LIFESAVERS INC23809 E AVENUE J LANCASTER,CA 935358984	95-4631906	501(C)(3)	11,500				EQUINE
LINN COUNTY ANIMAL RESCUEPO BOX 2669 LEBANON,OR 97355	26-2147632	501(C)(3)	11,500				EQUINE
PROGRESSIVE ANIMAL WELFARE SOCIETY ADOPTION CENTERPO BOX 684 MIDDLETOWN,OH 45042	31-1000756	501(C)(3)	11,500				LIVE RELEASE
TULSA SOCIETY FOR THE PREVENTION OF CRUELTY TO ANI2910 MOHAWK BOULEVARD TULSA,OK 74110	73-0608144	501(C)(3)	11,500				ANTI-CRUELTY
REDROVER1122 S STREET SACRAMENTO,CA 95814	68-0124097	501(C)(3)	11,521				ANTI-CRUELTY
NEW ROCHELLE HUMANE SOCIETY70 PORTMAN ROAD NEW ROCHELLE,NY 10801	13-1740009	501(C)(3)	11,750				SPAY/NEUTER
CALIFORNIA ANIMAL CARE CONFERENCE1400 RIVER PARK DR SACRAMENTO, CA 95815	84-1673791		12,000				LIVE RELEASE
GREY2K USA EDUCATION FUNDPOBOX 440142 SOMERVILLE, MA 02144	04-3553133	501(C)(3)	12,000				ANTI-CRUELTY
HUMANE SOCIETY OF VERO BEACH AND INDIAN RIVER COUNPO BOX 644 VERO BEACH,FL 32961	59-0863199	501(C)(3)	12,000				SPAY/NEUTER, INTAKE REDUCTION, EQUINE
MASSACHUSETTS ANIMAL COALITIONPO BOX 766 WESTBOROUGH,MA 01581	04-3540202	501(C)(3)	12,000				INTAKE REDUCTION, SPAY/NEUTER, LIVE RELEASE
WEATHERFORD PARKER COUNTY ANIMAL SHELTER 403 HICKORY LN WEATHERFORD,TX 76086	75-6000707	WEATHERFORD PAR	12,000				LIVE RELEASE
DELAWARE SOCIETY FOR THE PREVENTION OF CRUELTY TO455 STANTON CHRISTIANA RD NEWARK, DE 19713	51-0064307	501(C)(3)	12,063				SPAY/NEUTER, LIVE RELEASE
ANIMAL CARE & PROTECTIVE SERVICES	59-6000344	JA CKSO NVILLE	12,250				LIVE RELEASE

PROTECTIVE SERVICES 2020 FOREST STREET JACKSONVILLE,FL 32204

MEADOW HAVEN HORSE

RESCUE INCPO BOX 3080 GILBERT, AZ 852993080

RESCUE4204 COUNTY

26-3140054

06-1667945

86-0996647

501(C)(3)

501(C)(3)

501(C)(3)

12,350

12,500

12,500

SPAY/NEUTER

EQUINE, LIVE RELEASE

EQUINE

ANIMAL WELFARE

COALITION OF NORTHEASTERN NEW MEXICPO BOX 524 LAS VEGAS,NM 87701

ROAD 444 NIXON,TX 78141 WILDHORSE RANCH

Form 990,Schedule I, Par (a) Name and address of organization or government	r t II, Grants ar (b) EIN	nd Other Assistanc (c) IRC Code section If applicable		s and Organizatio (e) Amount of non- cash assistance	ns in the United St (f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST BERNARD PARISH ANIMAL CONTROL5455 E JUDGE PEREZ DR VIOLET,LA 70092	72-6001193	VIOLET	12,525		other)		SPAY/NEUTER
WISCONSIN HUMANE SOCIETY4500 W WISCONSIN AVE MILWAUKEE, WI 532083156	39-0810533	501(C)(3)	12,563				SPAY/NEUTER
WAYSIDE WAIFS INC 3901 MARTHA TRUMAN ROAD	44-0605374	501(C)(3)	13,235				ANTI-CRUELTY
CANSAS CITY, MO 64137 DALLAS ANIMAL ADVOCATESPO BOX 794073 DALLAS, TX 75379	27-0792552	501(C)(3)	13,263				INTAKE REDUCTION, RELOCATION, LIVE RELEASE
WIREGRASS SPAY NEUTER ALLIANCE570 S FOSTER STREET DOTHAN,AL 36301	27-1991142	501(C)(3)	13,600				SPAY/NEUTER, LIVE RELEASE
JACKSON COUNTY ANIMAL CARE AND CONTROL1005 E MAIN ST MEDFORD, OR 97504	93-6002298	JACKSON COUNTY	13,800				INTAKE REDUCTION, LIVE RELEASE, RELOCATION
KANSAS CITY PET PROJECT4400 RAYTOWN ROAD KANSAS CITY, MO 64129	45-3067615	501(C)(3)	13,950				RELOCATION, INTAKE REDUCTION
CHAMPAIGN COUNTY HUMANE SOCIETY INC 1911 W MAIN ST URBANA,IL 618020000	37-0714217	501(C)(3)	14,000				SPAY/NEUTER, LIVE RELEASE
TUFTS UNIVERSITY TUFTS SHELTER MEDICINE PROGRAM200 WESTBORO ROAD NORTH GRAFTON, MA 01536	04-2103634	501(C)(3)	14,300				SPAY/NEUTER
ENCORE PETS INCPO BOX 1352 MOREHEAD CITY, NC 28557	26-1577374	501(C)(3)	14,500				SPAY/NEUTER
HUMANE SOCIETY FOR THE PREVENTION OF CRUELTY TO AN121 HUMANE LANE COLUMBIA, SC 29209	57-0407367	501(C)(3)	14,500				SPAY/NEUTER, EQUINE, LIVE RELEASE
COUNTY OF LOS ANGELES DEPARTMENT OF ANIMAL CARE AN5898 CHERRY AVENUE	95-6000927	LOS ANGELES	14,550				RELOCATION
CHECOTAH ANIMAL SHELTERHAPPY PAWS FDN PO BOX 1083 CHECOTAH, OK 74426	30-0611784	501(C)(3)	14,900				RELOCATION
ANIMAL HAVEN251 CENTRE ST	11-6101487	501(C)(3)	15,000				DISASTER/EMERGENCY
NEW YORK, NY 10013 CURATORS OF THE UNIVERSITY OF MISSOURI 321 HEARNES CENTER COLUMBIA, MO 65211	26-6440629	501(C)(3)	15,000				ANTI-CRUELTY
EQUINE ENCORE FOUNDATION3225 N EL BURRITO AVE TUCSON, AZ 85705	20-2530224	501(C)(3)	15,000				EQUINE
FRIENDS OF WASHINGTON COUNTY ANIMALS DBAANIMAL LEPO BOX 4366 FAYETTEVILLE, AR 72702	27-3516716	501(C)(3)	15,000				LIVE RELEASE, INTAKE REDUCTION,
GREATER BIRMINGHAM HUMANE SOCIETY300 SNOW DR BIRMINGHAM,AL	63-0288810	501(C)(3)	15,000				INTAKE REDUCTION
352096301 HAMPTON CLASSIC HORSE SHOW INCPO BOX 3013 BRIDGEHAMPTON, NY 11932	11-2597077	501(C)(3)	15,000				EQUINE
HUMANE SOCIETY OF PUERTO RICO INCPO BOX 2387 GUAYNABO, PR	66-0329776	501(C)(3)	15,000				DISASTER/EMERGENCY
MT PLEASANT ANIMAL SHELTER INC194 ROUTE 10 W EAST HANOVER, NJ 079360000	23-7189562	501(C)(3)	15,000				LIVE RELEASE
NATIONAL HORSE SHOW ASSOCIATION OF AMERICA LTD5 MARY LN GREENVALE,NY 11548	13-2726232	501(C)(3)	15,000				EQUINE
PETS ALIVE INC363 DERBY ROAD MIDDLETOWN,NY 10940	11-2975276	501(C)(3)	15,000				LIVE RELEASE
SANTA BARBARA COUNTY ANIMAL SERVICES5473 OVERPASS ROAD SANTA BARBARA,CA	95-6002833	SANTA BARBARA	15,000				ANTI-CRUELTY
93111 SHELTER OUTREACH SERVICES OF OHIO691 E DUBLIN GRANVILLE RD COLUMBUS, OH 43229	71-1018725	501(C)(3)	15,000				INTAKE REDUCTION
SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS 0590 N STATE RD BRIARCLIFF MANOR, NY	13-1740069	501(C)(3)	15,000				LIVE RELEASE
WALKIN N CIRCLES RANCH INCPO BOX 626 EDGEWOOD, NM 870150626	04-3619624	501(C)(3)	15,000				EQUINE
PITT COUNTY ANIMAL SHELTER4550 COUNTY HOME ROAD	56-6000332	PITT	15,500				LIVE RELEASE, INTAKE REDUCTION
GREENVILLE, NC 27858 NEVADA HUMANE SOCIETY INC2825 B LONGLEY LANE RENO, NV 89502	88-0072720	501(C)(3)	15,563				SPAY/NEUTER, LIVE RELEASE
WOODSTOCK FARM ANIMAL SANCTUARYPO BOX 1329 WOODSTOCK,NY 12498	20-1552990	501(C)(3)	15,890				FARM ANIMALS

Form 990,Schedule I, Par	t II, Grants ar	nd Other Assistance	e to Governments	and Organization	ns in the United S	itates	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable		(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE ANIMAL SERVICE CENTER OF THE MESILLA VALLEY3551 BATAAN MEMORIAL W	26-4297265	LAS CRUCES	15,900		other)		RELOCATION
LAS CRUCES, NM 88012 BIG DOG RANCH RESCUE INC1090 JUPITER PARK DR	26-3184971	501(C)(3)	16,000				LIVE RELEASE
JUPITER, FL 33458 MEDINA COUNTY SOCIETY FOR THE PREVENTION OF CRUELT245 S MEDINA ST	34-1507786	501(C)(3)	16,000				LIVE RELEASE
MEDINA, OH 44256 THE CORTLAND COMMUNITY SOCIETY FOR PREVENTION OF C879 MCLEAN RD	11-0000634	501(C)(3)	16,000				SPAY/NEUTER
CORTLAND, NY 13045 ONE LOVE ANIMAL HOSPITAL317 ATLANTIC AVE	27-2480601		16,032				ANTI-CRUELTY
BROOKLYN,NY 11201 CITIZENS FOR HUMANE ACTION INC3765 CORPORATE DRIVE COLUMBUS,OH 43231	51-0166864	501(C)(3)	17,000				SPAY/NEUTER, DISASTER/EMERGENCY
MOLOKAI HUMANE SOCIETYPO BOX 1258	99-0209763	501(C)(3)	17,000				SPAY/NEUTER
PAWS THE PHILADELPHIA ANIMAL WELFARE SOCIETY100 N 2ND STREET	26-3862631	501(C)(3)	17,063				SPAY/NEUTER, LIVE RELEASE, INTAKE REDUCTION
PHILADELPHIA, PA 19106 MONROE COUNTY ANIMAL LEAGUE INCPO BOX 343 UNION, WV 24983	55-0697491	501(C)(3)	17,800				RELOCATION
PETS ALIVE PUERTO RICO PO BOX 1904 UTUADO,PR 00641	20-5057391	501(C)(3)	17,900				RELOCATION
ALTERED TAILS950 WEST HATCHER ROAD PHOENIX,AZ 85021	02-0710228	501(C)(3)	18,000				SPAY/NEUTER
ANIMAL OUTREACH OF THE MOTHER LODEPO BOX 480 DIAMOND SPRINGS, CA 95619	68-0272499	501(C)(3)	18,000				LIVE RELEASE
HUMANE SOCIETY OF TAMPA3607 N ARMENIA AVE	59-0799907	501(C)(3)	18,500				LIVE RELEASE, INTAKE REDUCTION, SPAY/NEUTER
TAMPA, FL 336071322 ANIMAL HUMANE SOCIETY 845 MEADOW LANE N GOLDEN VALLEY, MN 55422	41-0693842	501(C)(3)	18,560				INTAKE REDUCTION, ANTI-CRUELTY
SPAY ASAP INC163 CLAY HILL ROAD HARTLAND,VT 05048	54-2196266	501(C)(3)	18,600				SPAY/NEUTER
SPAYNEUTERNOWLTD47 DUCK COVE RD HAMMOND, NY 13646	57-1182938	501(C)(3)	18,914				SPAY/NEUTER
MARICOPA COUNTY ANIMAL CARE AND CONTROL2500 S 27TH AVE PHOENIX, AZ 85016	86-6000472	MARICOPA COUNTY	18,950				RELOCATION, LIVE RELEASE
ROCKAWAY ANIMAL HOSPITAL1833 CORNAGA AVENUE FAR ROCKAWAY, NY 11691	27-1101131		18,959				DISASTER/EMERGENCY
NAPERVILLE AREA HUMANE SOCIETY1620 W DIEHL ROAD NAPERVILLE, IL 60563	36-3040480	501(C)(3)	19,200				LIVE RELEASE
HALO HELPING ANIMALS LIVE ON2500 SOUTH 27TH AVENUE PHOENIX, AZ 85009	86-0832160	501(C)(3)	19,563				LIVE RELEASE
ALL ABOUT ANIMALS RESCUE23451 PINEWOOD ST WARREN,MI 48091	20-3006686	501(C)(3)	20,000				SPAY/NEUTER, INTAKE REDUCTION
ASSOCIATION OF SHELTER VETERINARIANS INC1701 K STREET WASHINGTON, DC 20006	73-1627937	501(C)(3)	20,000				LIVE RELEASE, SPAY/NEUTER
BEAUTY'S HAVEN FARM & EQUINE RESCUE INCPO BOX 53	20-4783950	501(C)(3)	20,000				EQUINE
MORRISTON, FL 32668 CARSON SPRINGS WILDLIFE CONSERVATION FDN8528 E COUNTY RD	56-2318963	501(C)(3)	20,000				ANTI-CRUELTY
225 GAINESVILLE,FL 32609 ESOLVED INC1445 ADAMS	84-1565389		20,000				ANTI-CRUELTY
ST NE ALBUQUERQUE,NM 87110	04-1303333		20,000				ANTI-CROLLI
HARRY A BISZANTZ MEMORIAL CENTER FOR	77-0569835	501(C)(3)	20,000				EQUINE

LIVE RELEASE

LIVE RELEASE

SPAY/NEUTER,

EQUINE

INTAKE REDUCTION

MEMORIAL CENTER FOR THOROUGHBREDPO BOX

TEHACHAPI,CA 93581 HUMAN INTERACTION

RESEARCH INSTITUTE 5435 BALBOA BLVD ENCINO,CA 91316

HUMANE NETWORK4555

ANIMALAWARENESS

PROJECTPO BOX 515 KAUFMAN,TX 75142

SANCTUARY INCPO BOX

MONTANA HORSE

SIMMS,MT 59477

SPRING DRIVE RENO, NV 89502 KAUFMAN COUNTY 95-2271414

27-0487147

20-0276988

20-1266410

501(C)(3)

501(C)(3)

501(C)(3)

501(C)(3)

20,000

20,000

20,000

20,000

210

10

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the Un (c) IRC Code section (d) Amount of cash (e) Amount of non-(a) Name and address of **(b)** EIN

20,000

20,000

20,000

20,000

20,000

20,500

20,600

20,763

21,000

21,750

22,000

22,100

22,142

22,373

23,000

23,000

23,000

23,350

24,000

24,000

25,000

25,000

25,000

25,000

25,000

25,000

25,120

25,936

organization or government	(-)	ıf applicable	grant	cash assistance	valuation (book, FMV, appraisal, other)	non-cash assistanc
NEW JERSEY SPCA1119 LIVINGSTON AVE NEW BRUNSWICK, NJ 08901	22-1494723	501(C)(3)	20,000			
OC ANIMAL CARE561 THE CITY DRIVE SOUTH	95-6000928	ORANGE	20,000			

501(C)(3)

CLEVELAND

501(C)(3)

501(C)(3)

501(C)(3)

501(C)(3)

501(C)(3)

501(C)(3)

501(C)(6)

501(C)(3)

501(C)(3)

501(C)(3)

TANEY COUNTY

ORANGE, CA 92868

PAWS INC383R LOWELL ST

WAKEFIELD, MA 01880 SAN DIEGO HORSE

COALITIONPO BOX 549 POWAY, CA 92074

SAVE-A-PET OF NIAGARA

COUNTY INCPO BOX 114 NEWFANE, NY 14108

DBA BLUE APPLE RANCH 17083 OLD COACH ROAD POWAY,CA 92064 BEARTOOTH HUMANE

ALLIANCEPO BOX 2333 RED LODGE, MT 59068 ANIMAL RESCUE LEAGUE

OF BOSTON10 CHANDLER

BOSTON, MA 021165221 **DUBUQUE HUMANE**

SOCIETY175 N CRESCENT

NORTH PINELLAS INC3040

ANIMAL CARE TRUST DBA

PETFIX NORTHEAST OHIO

INC7343 CHAGRIN ROAD

TANEY COUNTY ANIMAL

SOCIETY2455 REMOUNT

SPARTANBURG HUMANE

SPARTANBURG, SC 29303

DANE COUNTY HUMANE

SOCIETY5132 VOGES

MADISON, WI 53718 WAYNE COUNTY HUMANE

HOUSE ROAD LYONS, NY 14489

SOCIETY1475 COUNTY

WOODS HUMANE SOCIETY

INC875 OKLAHOMA AVE

SAN LUIS OBISPO, CA

CITY OF CLEVELAND

KENNEL2690 WEST 7TH

CLEVELAND, OH 44113

FRONT RANGE EQUINE RESCUEPO BOX 307 LARKSPUR, CO 80118 KENTUCKY EQUINE

HUMANE CENTER INCPO

FRESNO H O P E ANIMAL

ATLANTIC COUNTY1401

ATLANTIC CITY, NJ 08401 SAVEABUNNY INCPO BOX

MILL VALLEY, CA 94942

ADMINISTRATORS15508 W

RHINELANDER, WI 54501 NEBRASKA HUMANE

SOCIETY8929 FORT ST

ARIZONA ANIMAL

40TH STREET PHOENIX, AZ 85034

OMAHA, NE 681342842

WELFARE LEAGUE INC 25 N

SOCIETY OF ANIMAL

SURPRISE, AZ 85374 THE FIX IS IN INC5218

FOUNDATION5490 W SPRUCE AVENUE FRESNO,CA 93722 HORNELL AREA HUMANE

SOCIETY10 UPPER COLLEGE DRIVE ALFRED, NY 14802 HUMANE SOCIETY

ABSECON BLVD

2143

WELFARE

BELL RD

RIVER RD

SOCIETY150 DEXTER

MCKAMEY ANIMAL CTR

4500 N ACCESS ROAD

CHATTANOOGA, TN

CHAGRIN FALLS, OH

SHELTERPO BOX 369 FORSYTH, MO 65653 CHARLESTON ANIMAL

N CHARLESTON, SC

294060000

DUBUQUE, IA 52003 **HUMANE SOCIETY OF**

STATE Rd 590 CLEARWATER.FL 337592500

ST

RIDGE

37415

44023

RD

ROAD

ROAD

93405

STREET

BOX 910124 LEXINGTON, KY 405910124

THE FOUNDATION OF

ANIMAL CARE AND EDUCATION (FACE)10455 SORRENTO VALLEY RD SAN DIEGO, CA 92121 TOBY WELLS FOUNDATION 22-2512671

45-4436301

16-1097953

20-5333261

33-0946827

20-4513120

04-2103714

42-6039535

59-0781650

01-0824858

20-2205609

43-1746488

57-6021863

57-0481019

39-0806335

22-2541964

95-2058587

34-6000616

84-1418525

20-5883736

77-0508414

16-0819895

22-6085995

80-0243372

41-1618666

26-4628692

47-0378997

23-7149453

nited S	tates	
d of	(g) Description of	(h) Purpose of grant
on	non-cash assistance	or assistance

(g) Beschiption of	() . a.po.
non-cash assistance	or assısta

- ANTI-CRUELTY

- SPAY/NEUTER LIVE RELEASE

SPAY/NEUTER

EQUINE

EQUINE,

EQUINE

RELEASE

SPAY/NEUTER

SPAY/NEUTER,

SPAY/NEUTER, LIVE

INTAKE REDUCTION

INTAKE REDUCTION,

DISASTER/EMERGENCY

ANTI-CRUELTY,

LIVE RELEASE,

ANTI-CRUELTY

SPAY/NEUTER,

LIVE RELEASE,

ANTI-CRUELTY

INTAKE REDUCTION,

REDUCTION, ANTI-C

SPAY/NEUTER, LIVE

EQUINE, INTAKE

SPAY/NEUTER

LIVE RELEASE

RELEASE

EQUINE

EQUINE

SPAY/NEUTER

SPAY/NEUTER

LIVE RELEASE

LIVE RELEASE

SPAY/NEUTER

EQUINE, ANTI-

SPAY/NEUTER

LIVE RELEASE,

SPAY/NEUTER

CRUELTY,

DISASTER/EMERGENCY

RELOCATION

RELOCATION

- EQUINE

INTAKE REDUCTION

Form 990,Schedule I, Pa	rt II, Grants a	nd Other Assistanc	e to Governments	s and Organization	ns in the United S	States	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BEAUFORT COUNTY ANIMAL SHELTER & CONTROLPO DRAWER 1228	57-6000311	BEAUFORT	27,250		other)		RELOCATION, SPAY/NEUTER
BEAUFORT, SC 29901 VALENCIA COUNTY ANIMAL CONTROLPOB 1119	85-6000261	VALENCIA COUNTY	27,800				RELOCATION
LOS LUNAS, NM 87031 WANDERERS' REST HUMANE ASSOCIATION PO BOX 535	16-1191312	501(C)(3)	29,000				SPAY/NEUTER
CANASTOTA,NY 13032 HAPPY TAILS PET SANCTUARY6001 FOLSOM BLVD	68-0317260	501(C)(3)	29,864				LIVE RELEASE
SACRAMENTO, CA 95819 RICHMOND SPCA2519 HERMITAGE ROAD RICHMOND, VA 23220	54-0506328	501(C)(3)	30,000				SPAY/NEUTER, INTAKE REDUCTION
STRAY CAT ALLIANCEPO BOX 661277 LOS ANGELES,CA 90066	95-4787231	501(C)(3)	30,000				SPAY/NEUTER
SPOKANIMAL C A R E710 N NAPA ST SPOKANE, WA 992022867	91-1223929	501(C)(3)	30,692				LIVE RELEASE, RELOCATION
CITIZENS FOR ANIMAL PROTECTION INC17555 KATY FREEWAY HOUSTON,TX 77094	23-7296260	501(C)(3)	31,000				SPAY/NEUTER, LIVE RELEASE
KNOX-WHITLEY HUMANE ASSOCIATION INC3100 MEADOW CREEK ROAD ROCKHOLD, KY 40759	31-1648199	501(C)(3)	31,900				RELOCATION, LIVE RELEASE
ANIMAL RESCUE LEAGUE OF WESTERN PA6620 HAMILTON AVENUE PITTSBURGH, PA 15206	25-0325750	501(C)(3)	32,000				LIVE RELEASE
SECOND CHANCE ANIMAL SHELTER INCPO BOX 136 EAST BROOKFIELD, MA 01515	04-3490671	501(C)(3)	32,000				RELOCATION
KENTUCKY RIVER REGIONAL HUMANE SOCIETY INCPO BOX 435 HAZARD,KY 41701	61-1155329	501(C)(3)	32,100				RELOCATION
TONY LA RUSSA'S ANIMAL RESCUE FOUNDATION 2890 MITCHELL DR WALNUT CREEK, CA 94598	68-0240341	501(C)(3)	32,463				LIVE RELEASE, ANTI- CRUELTY
SOUL DOG RESCUE4844 S KALAMATH STREET ENGLEWOOD, CO 80110	45-4137227	501(C)(3)	32,500				RELOCATION, SPAY/ NEUTER
RERUN INCPO BOX 374 LAKEHURST, NJ 087339998	61-1336739	501(C)(3)	32,635				EQUINE
MIDATLANTIC HORSE RESCUE INCPO BOX 407 CHESAPEAKE CITY, MD 21915	27-3543490	501(C)(3)	33,000				EQUINE
HUMANE SOCIETY OF CHARLOTTE INC2700 TOOMEY AVE CHARLOTTE, NC 28203	58-1342479	501(C)(3)	33,500				LIVE RELEASE
PET SAVERSPO BOX 11555 SPOKANE,WA 99211	91-1741239	501(C)(3)	34,805				SPAY/NEUTER
RIVERSIDE COUNTY DEPARTMENT OF ANIMAL SVCS6851 VAN BUREN BLVD	95-6000930	RIVERSIDE	34,863				RELOCATION, SPAY/NEUTER, LIVE RELEASE
RIVERSIDE, CA 92509 NEW VOCATION	31-1681380	501(C)(3)	35,000				EQUINE
RACEHORSE ADOPTION PROGRAM3293 WRIGHT RD LAURA,OH 45337			,				·
TALLAHASSEE LEON COMMUNITY ANIMAL SVC CENTER1125 EASTERWOOD DRIVE TALLAHASSEE,FL 32311	59-6000435	TALLAHASSEE	36,505				LIVE RELEASE, INTAKE REDUCTION, RELOCATION
HUMANE SOCIETY OF SOUTHERN ARIZONA3450 N KELVIN BOULEVARD TUCSON,AZ 85716	86-0112798	501(C)(3)	37,000				LIVE RELEASE, SPAY/NEUTER, ANTI- CRUELTY
SPCA OF TEXAS2400 LONE STAR DR DALLAS, TX 75212	75-1216660	501(C)(3)	38,044				ANTI-CRUELTY, LIVE RELEASE, INTAKE REDUCTION, DISA

DALLAS,TX 75212 SEAN CASEY ANIMAL

RESCUE153 E 3RD ST

BROOKLYN,NY 11218 FINGER LAKES SPCA OF

CENTRAL NEW YORK41

ANIMAL HAVEN598 KENT

WOODHULL, NY 14898 TOLEDO AREA HUMANE

SOCIETY1920 INDIAN

MARDI GRAS BLVD

SHELTER OUTREACH

ITHACA,NY 14850

200 N WALKER AVE OKLAHOMA CITY, OK

MAUMEE, OH 435374001 LOUISIANA SPCA1700

NEW ORLEANS, LA 70114

SERVICES (SOS)78 DODGE

CITY OF OKLAHOMA CITY

YORK STREET
AUBURN, NY 13021
PARADISE GARDEN

HILL RD

WOODCIR

RD

73102

35-2244558

15-0532256

13-4244183

34-4429093

72-0471368

06-1697719

73-6005359

501(C)(3)

501(C)(3)

501(C)(3)

501(C)(3)

501(C)(3)

501(C)(3)

OKLAHOMA CITY

39,500

40,000

40,000

40,200

41,402

41,715

43,000

SPAY/NEUTER

SPAY/NEUTER

SPAY/NEUTER,

LIVE RELEASE

RELEASE

SPAY/NEUTER

LIVE RELEASE, SPAY/NEUTER

INTAKE REDUCTION

INTAKE REDUCTION,

RELOCATION, LIVE

DISASTER/EMERGENCY,

Form 990,Schedule I, Par (a) Name and address of organization or government	rt II, Grants ar (b) EIN	and Other Assistance (c) IRC Code section If applicable		-	(f) Method of valuation (book, FMV, appraisal,	States (g) Description of non-cash assistance	(h) Purpose of grant or assistance
HUMANE SOCIETY OF THE PIKES PEAK REGION610 ABBOTT LANE COLORADO SPRINGS,CO 809051800	84-0410111	501(C)(3)	43,685		other)		LIVE RELEASE, RELOCATION, LIVE RELEASE, EQUINE,
GREATER ANDROSCOGGIN HUMANE SOCIETY55 STRAWBERRY AVE LEWISTON, ME 042405962	01-6011843	501(C)(3)	44,500				RELOCATION, LIVE RELEASE
CITY OF SACRAMENTO 2127 FRONT STREET SACRAMENTO,CA 95818	94-6000410	SACRAMENTO	45,000				SPAY/NEUTER
SACRAMENTO COUNTY ANIMAL CARE3839 BRADSHAW ROAD SACRAMENTO,CA 95827	94-6000529	SACRAMENTO COUN	45,000				SPAY/NEUTER
FARM SANCTUARY INCPO BOX 150 WATKINS GLEN, NY 148910150	51-0292919	501(C)(3)	45,500				FARM ANIMALS
NYC VETERINARY EMERGENCY RESPONSE TEAM12 WOODLAND ROAD VALLEY STREAM,NY 11581	20-4749463	501(C)(3)	49,400				DISASTER/EMERGENCY
CENTRAL NEW YORK SPAY NEUTER ASSISTANCE PRGM178 CENTRAL AVENUE CORTLAND, NY 13045	20-3322730	501(C)(3)	50,000				SPAY/NEUTER
FIXNATION INC7680 CLYBOURN AVE LOS ANGELES, CA 91352	83-0452460	501(C)(3)	50,000				SPAY/NEUTER
HUMANE EDUCATION ADVOCATES REACHING TEACHERSPO BOX 738 MAMARONECK,NY 10543	41-2055310	501(C)(3)	50,000				ANTI-CRUELTY
LOS ANGELES COUNTY ANIMAL CARE FOUNDATION5898 CHERRY AVENUE LONG BEACH, CA 90805	95-3909782	501(C)(3)	50,000				LIVE RELEASE
THE SCIENCE AND CONSERVATION CENTER INC2100 SOUTH SHILOH ROAD BILLINGS,MT 59106	81-0539631	501(C)(3)	50,000				EQUINE
CITY OF LOS ANGELES - DEP OF ANIMAL SERVICE 201 N FIGUEROA ST LOS ANGELES, CA 90012	95-6000735	LOS ANGELES	50,500				SPAY/NEUTER, LIVE RELEASE
GLOBAL FEDERATION OF ANIMAL SANCTUARIESPO BOX 32294 WASHINGTON, DC 20007	26-1676217	501(C)(3)	54,650				EQUINE, ANTI- CRUELTY, LIVE RELEASE
BALTIMORE ANIMAL RESCUE AND CARE SHELTER301 STOCKHOLM STREET BALTIMORE,MD 21230	86-1130456	501(C)(3)	55,000				INTAKE REDUCTION, LIVE RELEASE, DISASTER/ EMERGENC
WILLIAMSON COUNTY HUMANE SOCIETY10930 E CRYSTAL FALLS PWAY LEANDER,TX 78641	74-2069592	501(C)(3)	55,000				ANTI-CRUELTY
BLUEPEARL VETERINARY PARTNERS - BROOKLYN32 4TH AVENUE BROOKLYN,NY 11217	84-1682742		57,831				ANTI-CRUELTY, DISASTER/EMERGENCY
CANYON COUNTY ANIMAL SHELTER5801 GRAYE LANE CALDWELL,ID 83607	20-8179233	501(C)(3)	60,000				LIVE RELEASE
FRIENDS OF GREEN CHIMNEYS400 DOANSBURG RD BREWSTER,NY 10509	13-3897106	501(C)(3)	61,000				ANTI-CRUELTY
LEON COUNTY HUMANE SOCIETY413 TIMBERLANE RD TALLHASSEE,FL 323121628	59-6138275	501(C)(3)	62,682				LIVE RELEASE, INTAKE REDUCTION
SCRAPS HOPE FOUNDATION2521 N FLORA RD SPOKANE VLY, WA 992161806	26-4118735	501(C)(3)	63,927				RELOCATION
MISSISSIPPI STATE UNIVERSITY FOUNDATION INCPO DRAWER 6149 MISSISSIPPI STATE, MS 39762	64-0410581	501(C)(3)	65,000				SPAY/NEUTER
PET PARTNERS875 124TH AVE BELLEVUE,WA 980052531	91-1158281	501(C)(3)	67,000				ANTI-CRUELTY
MOHAWK HUDSON HUMANE SOCIETY3 OAKLAND AVENUE MENANDS, NY 12204	14-1338459	501(C)(3)	68,000				SPAY/NEUTER, LIVE RELEASE
LOS ANGELES ANIMAL SERVICES201 N FIGUEROA ST LOS ANGELES,CA 90012	95-6000735	LOS ANGELES	70,050				RELOCATION
REGENTS OF THE UNIVERSITY OF CALIFORNIA1 SHIELDS AVE	94-6036494	501(C)(3)	71,000				LIVE RELEASE
DAVIS,CA 95616 THE CAT NETWORK INCPO BOX 347228	65-0597008	501(C)(3)	74,358				SPAY/NEUTER

75,040

75,830

76,148

77,923

501(C)(3)

501(C)(3)

501(C)(3)

501(C)(3)

LIVE RELEASE, ANTI-

RELOCATION, LIVE RELEASE

LIVE RELEASE, ANTI-

SPAY/NEUTER

CRUELTY, SPAY/NEUTER

CRUELTY

BOX 347228 MIAMI,FL 33234

DARBY EX CT

50 E RIVER ST

FIRST COAST NO MORE

HOMELESS PETS INC6817

NORWOOD AVENUE JACKSONVILLE,FL 32208

CAPITAL AREA HUMANE

SOCIETY3015 SCIOTO-

BEVERLY ANIMAL SHELTER

HILLIARD,OH 43026

WATERLOO, NY 13165 HUMANE SOC OF GREATER

MIAMI INCCITY OF N MIAMI BCH, FL 331604309 01-0709158

31-4379492

16-1472747

Form 990,Schedule I, Par	t II, Grants a	nd Other Assistance	e to Governments	and Organization	s in the United	States	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable		(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANIMALS & SOCIETY INSTITUTE2512 CARPENTER RD ANN ARBOR, MI 48108	22-2527462	501(C)(3)	80,000				ANTI-CRUELTY
CANTER COMMUNICATION ALLIANCETOWNSHIP OF COMMERCE,MI 48382	38-3483606	501(C)(3)	80,000				EQUINE
UNIVERSITY OF PENNSYLVANIANEW BOLTON CENTER KENNETT SQUARE,PA 19348	23-1352685	501(C)(3)	80,000				FARM ANIMALS
CAT DEPOT2542 17TH STREET SARASOTA,FL 34234	20-0217681	501(C)(3)	84,569				ANTI-CRUELTY, DISASTER/EMERGENCY
MIAMI-DADE ANIMAL SERVICES7401 NW 74TH STREET MIAMI,FL 33166	59-6000573	MIAMI	87,000				LIVE RELEASE
BE THE SOLUTION INC 1400 VILLAGE SQ BLVD TALLAHASSEE,FL 32312	20-8492640	501(C)(3)	89,420				SPAY/NEUTER, INTAKE REDUCTION
HUMANE SOCIETY OF ROCHESTER AND MONROE COUNTY PCA99 VICTOR RD FAIRPORT, NY 144509582	16-0743047	501(C)(3)	90,000				SPAY/NEUTER, ANTI- CRUELTY, LIVE RELEASE
OPERATION PETS THE SPAYNEUTER CLINIC3443 SOUTH PARK AVE BLASDELL, NY 14219	16-1543255	501(C)(3)	92,000				SPAY/NEUTER
ALLIANCE FOR CONTRACEPTION IN CATS AND DOGSCITY OF PORTLAND,OR 97231	41-2185841	501(C)(3)	100,000				SPAY/NEUTER
ALLIANCE FOR CONTRACEPTION IN CATS AND DOGSCITY OF PORTLAND,OR 97231	41-2185841	501(C)(3)	100,000				SPAY/NEUTER
MERCY FOR ANIMALS8033 SUNSET BLVD	54-2076145	501(C)(3)	100,000				FARM ANIMALS

100,450

102,840

105,466

107,695

108,554

113,500

114,435

115,000

120,260

121,068

125,000

148,243

151,000

151,100

151,689

184,495

200,000

260,000

277,600

SPAY/NEUTER

ANTI-CRUELTY,

CRUELTY

SPAY/NEUTER

LIVE RELEASE

RELEASE,

CRUELTY

CRUELTY

EQUINE,

CRUELTY

LIVE RELEASE,

FARM ANIMALS

CRUELTY, LIVE

ANTI-CRUELTY

LIVE RELEASE, S/N

EQUINE

RELEASE

SPAY/NEUTER

RELOCATION

LIVE RELEASE,

EQUINE, ANTI-

INTAKE REDUCTION,

RELOCATION, ANTI-

DISASTER/EMERGENCY

INTAKE REDUCTION,

LIVE RELEASE, ANTI-

RELOCATION, ANTI-

SPAY/NEUTER, ANTI-

SPAY/NEUTER, LIVE

CRUELTY, EQUINE

LIVE RELEASE, S/N

SPAY/NEUTER, LIVE

DISASTER/EMERGENCY

RELOCATION, ANTI-

STREET SARASOTA,FL 34234					
MIAMI-DADE ANIMAL SERVICES7401 NW 74TH STREET MIAMI,FL 33166	59-6000573	MIAMI	87,000		
BE THE SOLUTION INC 1400 VILLAGE SQ BLVD TALLAHASSEE,FL 32312	20-8492640	501(C)(3)	89,420		
HUMANE SOCIETY OF ROCHESTER AND MONROE COUNTY PCA99 VICTOR	16-0743047	501(C)(3)	90,000		

501(C)(3)

501(C)(3)

501(C)(3)

ROCHESTER

501(C)(3)

501(C)(4)

501(C)(4)

501(C)(3)

SAN ANTONIO

LOS ANGELES, CA 90046 TOMPKINS COUNTY SPCA

CONTROLASSOCIATION 101 N CHURCH STREET OLATHE,KS 66061 SUMTER DISASTER

ANIMAL RESPONSE TEAM

720 EAST SOUTHLAND

SERVICES184 VERONA

ROCHESTER, NY 14608 SHELBY HUMANE SOCIETY

ANTONIO TEXAS - ANIMAL CARE SERVI4710 STATE

SAN ANTONIO, TX 78227 CENTRAL OKLAHOMA

HUMANE SOCIETY9300 N

HUMANE SOCIETY OF THE

OKLAHOMA CITY, OK

UNITED STATES700

GAITHERSBURG, MD

WASHINGTON HUMANE

WASHINGTON, DC 20012 **DUTCHESS COUNTY SPCA**

INC636 VIOLET AVENUE HYDE PARK, NY 12538 DENVER DUMB FRIENDS

LEAGUE2080 S QUEBEC ST DENVER, CO 802313204 ASHEVILLE HUMANE

SOCIETY14 FOREVER

ASHEVILLE, NC 28806 ANIMAL PROTECTION OF

ALBUQUERQUE, NM

HALIFAX HUMANE

DAYTONA BEACH, FL

CLEVELAND ANIMAL

NORTH DAKOTANS TO

NEW YORK, NY 10006 **HUMANE NET INCPO BOX**

SUMMERVILLE, SC 29485

STOP ANIMAL CRUELTY 2100 L STREET NW WASHINGTON, DC 20037 NYCLASS39 BROADWAY

PROTECTIVE LEAGUE1729

FARM FORWARD INCPO

SOCIETY INC2364 LPGA

NEW MEXICO INCPO BOX

FRIEND LN

871920395

BOX 4120 PORTLAND, OR 972084120

BLVD

32124

714

WILLEY AVE CLEVELAND, OH 441134302

11395

SOCIETY-SPCA7319 GEORGIA AVE NW

PROFESS DRIVE

381 MCDOW ROAD COLUMBIANA, AL 35051

THE CITY OF SAN

HWAY 151

MAY AVE

73120

20879

BUSHNELL,FL 33513 ROCHESTER ANIMAL

AVE

STREET

1640 HANSHAW ROAD ITHACA,NY 14850 NATIONAL ANIMAL

15-0624378

74-2158707

20-4474480

16-6002551

63-0817987

74-6002070

20-8446621

53-0225390

53-0219724

14-1340058

84-0405254

56-1444098

85-0283292

26-1643614

59-0530990

34-0714644

45-4736777

26-3207326

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EMANCIPETPO BOX 6396 AUSTIN,TX 78762	74-2913624	501(C)(3)	294,000				SPAY/NEUTER
HUMANE SOCIETY OF BROWARD COUNTY2070 GRIFFIN RD FT LAUDERDALE, FL 333125913	59-6002321	501(C)(3)	324,000				SPAY/NEUTER, LIVE RELEASE, ANTI- CRUELTY
SACRAMENTO SPCA6201 FLORIN PERKINS RD SACRAMENTO,CA 95828	94-1312343	501(C)(3)	326,850				ANTI-CRUELTY, SPAY/NEUTER, LIVE RELEASE, RELOCATIO
ANIMALKIND INCPOBOX 902 HUDSON,NY 12534	14-1820248	501(C)(3)	334,250				SPAY/NEUTER, DISASTER/EMERGENCY
ANIMAL CARE & CONTROL OF NYC11 PARK PLACE NEW YORK, NY 100072839	13-3788986	501(C)(3)	352,213				LIVE RELEASE
ST HUBERTS ANIMAL WELFARE CENTERPO BOX 159 MADISON,NJ 07940	22-1627726	501(C)(3)	409,674				LIVE RELEASE, ANTI- CRUELTY
UNIVERSITY OF FLORIDA FOUNDATION2015 SW 16th Ave GAINESVILLE,FL 32610	59-0974739	501(C)(3)	423,252				ANTI-CRUELTY, LIVE RELEASE
ANIMAL REFUGE FOUNDATION OF WAYNE COUNTY4885 CONSTANCE ROAD JESUP,GA 31545	58-2386728	501(C)(3)	457,970				SPAY/NEUTER
HUMANE ALLIANCE25 HERITAGE DRIVE ASHEVILLE,NC 28806	56-1856805	501(C)(3)	488,500				SPAY/NEUTER, INTAKE REDUCTION, LIVE RELEASE
HUMANE FARM ANIMAL CAREPO BOX 727 HERNDON,VA 201720727	47-0910622	501(C)(3)	600,000				FARM ANIMALS
MAYOR'S ALLIANCE FOR NYC'S ANIMALS244 FIFTH AVE NEW YORK, NY 100017604	73-1653635	501(C)(3)	1,179,000				DISASTER/EMERGENCY, SPAY/NEUTER, LIVE RELEASE, INT

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493259008953

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990,

Compensation Information

Part IV, question 23. ► Attach to Form 990. ► See separate instructions. Open to Public Inspection

Name of the organization THE AMERICAN SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS

Employer identification number

F G	Questions Regarding Compensation				
				Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or 990, Part VII, Section A, line 1a Complete Part III to provide any relevant inform				
		residence for personal use			
	· · · · · · · · · · · · · · · · · · ·	s use of personal residence			
	▼ Tax idemnification and gross-up payments	lues or initiation fees			
	Discretionary spending account Personal services (e.g.	g , maıd, chauffeur, chef)			
Ь	If any of the boxes in line 1a are checked, did the organization follow a written polic reimbursement or provision of all of the expenses described above? If "No," complete		1b		Νo
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers,				
	directors, trustees, and the CEO/Executive Director, regarding the items checked	ın line 1a?	2	Yes	
3	Indicate which, if any, of the following the filing organization used to establish the corganization's CEO/Executive Director Check all that apply Do not check any box				
	used by a related organization to establish compensation of the CEO/Executive Di				
	Compensation committee Written employment co				
	☐ Independent compensation consultant ☐ Compensation survey	•			
	Form 990 of other organizations Approval by the board	or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with	h respect to the filing organization			
•	or a related organization	mrespect to the ming organization			
а	Receive a severance payment or change-of-control payment?		4a	Yes	
b	Participate in, or receive payment from, a supplemental nonqualified retirement pla	n?	4b		Νo
C			4 c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for	or each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.				
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pa	ay or accrue any			
	compensation contingent on the revenues of				
а	The organization?		5a		Νo
b	,		5b		No
	If "Yes," to line 5a or 5b, describe in Part III				
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pa compensation contingent on the net earnings of	ay or accrue any			
а	The organization?		6a		No
b	Any related organization?		6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III				
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pr payments not described in lines 5 and 6? If "Yes," describe in Part III	rovide any non-fixed	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a co	ontract that was			
	subject to the initial contract exception described in Regulations section 53 4958				
	ın Part III	<u>L</u>	8		Νo
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption proce section 53 4958-6(c)?	dure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-M (i) Base (ii) Bonus & Incentive compensation		SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of	(F) Compensation
	` `	incentive	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred in prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2012

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Identifier	Return Reference	Explanation
COMPENSATION		DR HANSEN'S COMPENSATION HAS INCLUDED A HOUSING ALLOWANCE SINCE HE WAS HIRED AS COO, THE HOUSING ALLOWANCE IS TREATED AS TAXABLE INCOME AND IS REPORTED IN DR HANSEN'S W-2 EACH YEAR THE CEO DETERMINED THE HOUSING ALLOWANCE PROVIDED TO STEVEN HANSEN
SEVERANCE PAYMENTS	, ,	JULIA A NELSON RECEIVED SEVERANCE PAYMENTS TOTALING \$101,686 DURING 2012 SHE WILL RECEIVE ADDITIONAL SEVERANCE PAYMENTS TOTALING \$63,554 DURING 2013

Schedule J (Form 990) 2012

Software ID: **Software Version:**

EIN: 13-1623829

Name: THE AMERICAN SOCIETY FOR THE PREVENTION OF

CRUELTY TO ANIMALS

Form 990 Schodule 1 Part II - Officers Directors Trustees Vey Employees and Highest Compensated Employees

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees									
(A) Name		(B) Breakdown of	W-2 and/or 1099-MIS	C compensation	(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior Form	
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) O ther compensation	compensation	belleties	(5)(1) (5)	990 or Form 990-EZ	
EDWIN SAYRES	(ı) (ıı)	463,159 0	125,000 0	3,564 0	31,654 0	18,144 0	641,521 0	0 0	
JULIA NELSON	(I) (II)		0 0	103,031	4,751 0	8,091 0	264,418 0	0	
STEVEN HANSEN	(ı) (ıı)	327,648 0	0 0	120,689 0	32,500 0	3,941 0	484,778 0	0	
MATTHEW BERSHADKER	(I) (II)		0	484 0	17,457 0	15,014 0	250,564 0	0	
JULIO CARBONELL	(ı) (ıı)	219,245 0	0	3,256 0	17,761 0	22,258 0	262,520 0	0	
ELIZABETH ESTROFF	(ı) (ıı)	231,926 0	0	604 0	18,167 0	20,496 0	271,193 0	0	
TODD HENDRICKS	(ı) (ıı)		0	441 0	19,874 0	15,044 0	290,759 0	0	
JULIE MORRIS	(I) (II)	235,423 0	0	1,001	37,820 0	8,226 0	282,470 0	0	
LEE MURRAY	(ı) (ıı)	209,894 0	0	5,916 0	27,482 0	3,446 0	246,738 0	0	
STEPHEN MUSSO	(ı) (ıı)	245,259 0	0	2,409 0	32,312 0	17,779 0	297,759 0	0	
MELISSA NORDEN	(ı) (ıı)	226,697 0	500 0	586 0	18,435 0	10,252	256,470 0	0	
NANCY PERRY	(I) (II)		0	780 0	9,155 0	2,152 0	218,801 0	0	
GAIL S BUCHWALD	(ı) (ıı)	163,415 0	5,000 0	201	13,500 0	7,476 0	189,592 0	0	
RANDALL LOCKWOOD	(ı) (ıı)	196,444 0	0	3,140 0	25,765 0	2,806 0	228,155 0	0	
LOUISE MURRAY	(ı) (ıı)		500 0	939	19,450 0	20,382	292,706 0	0	
STACY WOLF	(ı) (ıı)	189,130 0	0	430	23,888	7,810 0	221,258 0	0	
STEPHEN ZAWISTOWSKI	(I) (II)	173,064 0	0	1,709 0	27,080 0	0	201,853	0	

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493259008953

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

Noncash Contributions

Name of the organization THE AMERICAN SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS

Employer identification number

	LIT TO ANIMALS				13-1623829			
Pa	Types of Property			_				
	Ant. Marke of art	(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	() Method of () noncash contri			ts
	Art—Works of art							
	Art—Historical treasures .							
_	Art—Fractional interests							
	Books and publications							
5	Clothing and household goods							
6	goods							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .	X	61	1,313,499	FMV			
	Securities—Closely held stock .		01	1,313,133	1117			
	Securities—Partnership, LLC, or trust interests							
L 2	Securities—Miscellaneous							
L3	Q ualified conservation contribution—Historic							
.4	structures							
_	contribution—Other Real estate—Residential .							
	Real estate—Residential							
	Real estate—Other							
	Collectibles							
	Food inventory	X	5	674,125	EM\/			
	Drugs and medical supplies .			074,123	1 11 V			
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	O ther ► ()							
	Other ►()							
	Other ►()							
	Other ► ()							
	Number of Forms 8283 received	by the orga	nization during the tax vea	r for contributions				
	for which the organization comple		-		29			
				_			Yes	No
30a	During the year, did the organiza	atıon receiv	e by contribution any prope	erty reported in Part I, lines	1-28 that it			
	must hold for at least three year	rs from the o	date of the initial contributi	on, and which is not require	d to be used			
	for exempt purposes for the enti	re holding p	period?			30a		No
b	If "Yes," describe the arrangem	ent in Part 1	II					
31	Does the organization have a gif	ft acceptan	ce policy that requires the	review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us contributions?	e third part	les or related organizations	to solicit, process, or sell	noncash • • •	32a		No
b	If "Yes," describe in Part II							
33	If the organization did not report describe in Part II	t an amount	: in column (c) for a type of	property for which column (a) is checked,			

Page 2

Schedule M	(Form 990) (201:
Part II	Supplem

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) (2012)

OMB No 1545-0047

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB NO 1343-00-

2012

Open to Public Inspection

Name of the organization THE AMERICAN SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS Employer identification number

ldentifier	Return Reference	Explanation
FORM 990, PART III, LINE 4A		ANIMAL HEALTH SERVICES (REVENUE 14,332,923 EXPENSES 32,028,304) INCLUDES THE BERGH MEMORIAL ANIMAL HOSPITAL IN NEW YORK CITY, A PREMIER AMERICAN ANIMAL HOSPITAL ASSOCIATION [AAHA] - CERTIFIED SMALL ANIMAL MEDICAL, SURGICAL AND EMERGENCY FACILITY IN 2012, STAFFED BY 22 VETERINARIANS (INCLUDING BOARD-CERTIFIED SPECIALISTS IN INTERNAL MEDICINE AND SURGERY) AS WELL AS 34 LICENSED VETERINARY TECHNICIANS, THE ASPCA RESPONDED TO 5,326 MERGENCIES, AN INCREASE OF 8% COMPARED TO 2011, AND THROUGH THE TROOPER FUND, PROVIDED LIFE SAVING HEALTH CARE TO 1,835 NEEDLY PETS, WHICH IS AN INCREASE OF 18% COMPARED TO 2011 IN ADDITION, APPROXIMATELY 3,361 ASPCA ADOPTION CENTER ANIMALS RECEIVED THIS EXPERT CARE AT THE HOSPITAL DURING 2012, OUR DEDICATED EMPLOYEES WORKED AROUND THE CLOCK IN THE AFTERMATH OF HURRICANE SANDY PROVIDING EXPERT CARE TO THE PATIENTS THE ANIMAL POISON CONTROL CENTER (APC.) IS OUR 24 HOUR TELEPHONE HOTLINE LOCATED IN URBANA, ILLINOIS IT RESPONDS TO MORE THAN 13,000 PET EMERGENCIES EACH MONTH FOR EMERGENCY ANIMAL TOXICOLOGY TREATMENT, ANIMAL BEHAVIOR AND SHELTER VETERINARY SERVICES AND IS THE NATIONS LEADING ANIMAL POISON CONTROL FACILITY APCC IS STAFFED 24/7 WITH 27 DEDICATED VETERINARIANS, INCLUDING 11 TOXICOLOGYSTS CERTIFIED BY THE AMERICAN BOARD OF TOXICOLOGY [ABT] ANDOR THE AMERICAN BOARD OF VETERINARY TOXICOLOGY [ABVT] THEIR EXPERTISE IS BNHANCED BY THE ASPCA'S ANTOX TECHNOLOGY, WHICH IS AN ADVANCED SCIENTIFIC DATABASE THAT HELPS IDENTIFY AND CHARACTERIZE THE TOXIC EFFECTS OF SUBSTANCES IN ANIMALS DURING 2012, APCC RECEIVED 266,286 CALLS AND OPENED 180,320 CASES DURING 2012, APCC HIT A MILESTONE, HANDLING ITS TWO-MILLIONTH CASE, HELPING MORE THAN 180,000 ANIMALS IN ALL. THE ASPCA MOBILE SPAYINEUTER PROGRAM HAS SIX MOBILE VETERINARY VANS PROVIDING SPAY/NEUTER SURGERIES AND OPENATES IN THE FIVE BOROUGHS OF NEW YORK CITY THE PROGRAM CONTINUES TO OFFER FREE AND LOW-COST SPAY/NEUTER SERVICES TO THE UNDERSERVED SPAY/NEUTER SURGERIES NOT ONLY SERVE TO CONTROL ANIMAL OVERPOPULATION, BUT ARE OFFEN MEDICALLY BENE

Identifier Return Reference	Explanation
FORM 990, PART III, LINE 4B	PUBLIC EDUCATION & COMMUNICATIONS (EXPENSES 31,993,657) PROVIDES INFORMATION AND CONDUCTS ACTIVITIES TO CREATE PUBLIC AWARENESS OF ANIMAL RELATED ISSUES NATIONAL MEDIA EXPOSURE INCREASED 17% AND OUR VISIBILITY ON TELEVISION AND RADIO INCREASED BY 48% IN 2012 THIS TRANSLATED INTO MANY OPPORTUNITIES FOR MEMBERS OF THE PUBLIC, LEGISLATORS AND DONORS TO SEE OR HEAR THE ASPCA'S ANIMAL WELFARE MESSAGES NEWS REPORTS CITING THE ASPCA'S WORK DURING HURRICANES SANDY AND ISAAC, PLUS STORIES ABOUT THE FIRST ANNIVERSARY OF THE JOPLIN TORNADO ACCOUNTED FOR NEARLY HALF OF ALL MEDIA EXPOSURE DURING 2012 STORIES ABOUT THE ASPCA AND HURRICANE SANDY SPECIFICALLY RESULTED IN 1,977 MEDIA PLACEMENTS INCLUDING NATIONAL COVERAGE THAT POSITIONED THE ASPCA AS AN EXPERT IN DISASTER RELIEF, DISASTER PREPAREDNESS AND ANIMAL BEHAVIOR IN ITS THIRD YEAR, THE ASPCA'S \$100K CHALLENGE, RENAMED THE ASPCA RACHAEL RAY \$100K CHALLENGE, GENERATED 1,683 PLACEMENTS, REPRESENTING A 70% INCREASE IN MEDIA EXPOSURE OVER 2011 THIS IS A NATIONAL COMPETITION TO INSPIRE ANIMAL SHELTERS TO INCREASE PET ADOPTIONS, REUNITE MORE PETS WITH THEIR FAMILIES AND SAVE MORE ANIMALS THE TRES TO INCREASE PET ADOPTIONS, REUNITE MAPAIGN WORKED WITH OODLE [THE COMPANY THAT POWERS THE MARKETPLACE ON FACEBOOK] TO RESTRICT ONLINE CLASSIFIED ADS FOR PUPPY MILL DOGS THE ASPCA GAINED NATIONAL ATTENTION ON ABC NEWS AND MSNBC THE ASPCA'S SOCIAL MEDIA PRESENCE GREW SIGNIFICANTLY DURING 2012 AND PLAYED A PROMINENT ROLE IN SEVERAL INITIATIVES AND CAMPAIGNS, OUR 'HOVERCAT' ADOPT-A-SHELTER-CAT VIDEO EARNED 1 1 MILLION YOUTUBE VIEWS AND OUR "NO PET STORE PUPPIES" CAMPAIGN'S VIDEO 'PUPPIES ARE NOT TOYS' HAD NEARLY 150,000 YOU TUBE VIEWS IN WASHINGTON D C , THE ASPCA JOINED WITH THE CONGRESSIONAL ANIMAL PROTECTION CAUCUS TO HOST THE FIRST-EVER 'PAWS FOR CELEBRATION', AN ADOPTION EVENT HONORING SHELTER ANIMALS AND RESCUE ORGANIZATIONS

Identifier	Return Reference	Explanation
FORM 990, PART III, LINE 4C		ANTI-CRUELTY PROGRAMS (ANTI CRUELTY EXPENSE 27,025,309) IN 2012, THE ASPCA FIELD INVESTIGATIONS AND RESPONSE (FIR) TEAM CONDUCTED 36 INVESTIGATIONS AND 24 CONSULTATIONS, ASSISTING 3,640 ANIMALS WITH 13 RELATED CRIMINAL CHARGES FILED FIR UNDERTOOK 12 BLOOD SPORT INVESTIGATIONS RESULTING IN THE FILING OF 42 CRIMINAL CHARGES, HOUSED 1,207 ANIMALS, TRANSPORTED 1,020 AND PLACED 965 FIR PROVIDED URGENTLY NEEDED SUPPLIES TO 59,521 ANIMALS, TRANSPORTED 1,020 AND PLACED 965 FIR PROVIDED URGENTLY NEEDED SUPPLIES TO 59,521 ANIMALS THROUGH THE ASPCA'S NETWORK OF DISTRIBUTION CENTERS AND CONDUCTED 102 TRAININGS, REACHING 5,807 PEOPLE DURING 2012, FIR RESPONDED TO FIVE NATURAL DISASTERS IN 2012 THE ASPCA ANTI-CRUELTY BEHAVIOR TEAM (AC) RESCUED, EVALUATED AND REHABILITATED THOUSANDS OF ANIMALS OUR AC TEAM EVALUATED 1,076 ANIMAL VICTIMS OF CRUELTY AND ASSISTED FIVE OUTSIDE AGENCIES WITH BEHAVIOR EVALUATIONS OF 131 ANIMALS THAT WERE VICTIMS OF CRUELTY THE AC TEAM ALSO LAUNCHED THE BEHAVIOR LEAD PROGRAM DURING FIELD INVESTIGATIONS AND RESPONSES [FIR] TEMPORARY SHELTER OPERATIONS, DEPLOY ING 42 TIMES IN 2012 OUR NEW CRUELTY INTERVENTION ADVOCACY [CIA] PROGRAM, WHICH ADDRESSES ANIMAL HOARDING AND OTHER SITUATIONS WHERE PET OWNERS ARE UNABLE TO PROVIDE ADEQUATE CARE DUE TO FINANCIAL HARDSHIP, MENTAL HEALTH CHALLENGES OR DOMESTIC VIOLENCE, ASSISTED 1,686 ANIMALS THROUGH SPECIAL GRANTS, DIRECT INTERVENTION AND BY PROVIDING ONGOING SERVICES THE ASPCA'S LEGAL ADVOCACY DEPARTMENT ADDED TWO NEW ATTORNEYS IN 2012 AND HELPED ACHIEVE JUSTICE FOR ANIMALS IN BOTH THE RAUL SANCHEZ DOG FIGHTING CASE IN NEW Y ORK AND THE CABOODLE RANCH CRUELTY CASE IN FLORIDA THE ASPCA'S HUMANE LAW ENFORCEMENT (HLE) DEPARTMENT INVESTIGATED 4,121 CASES OF ANIMAL CRUELTY, MADE 42 ARRESTS AND REMOVED 152 AT-RISK ANIMALS FROM ABUSIVE OWNERS HLE RESPONDED TO NEARLY 25,000 CALLS, EMAILS AND LETTERS FROM THE PUBLIC IN ADDITION, HLE CONDUCTED 204 CARRIAGE-HORSE INSPECTIONS AND MADE 90 COURT APPEARANCES AND EXECUTED 11 SEARCH WARRANTS DURING 2012, THE HLE DEPARTMENT HELD

ldentifier	Return Reference	Explanation
FORM 990, PART III, LINE 4D		OTHER PROGRAM SERVICES (EXPENSES 38,611,599 GRANTS EXPENSE 17,018,180) INCLUDES A STATE-OF-THE ART ANIMAL ADDPTIONS CENTER IN NEW YORK CITY AND EXTENSIVE OUTREACH, EDUCATION, AND TRANING PROGRAMS IN COMMUNITIES THROUGHOUT THE UNITED STATES DURING 2012, THE ASPCA ADDPTION CENTER FOUND HOMES FOR 3,476 CATS AND DOGS THE ASPCA ADDPTION CENTER ALSO TOOK IN 1,483 ANIMALS FROM ANIMAL CARE & CONTROL OF NEW YORK CITY, MANY OF WHICH WERE AT RISK OF EUTHANASIA DURING 2012, THE ANIMAL RELOCATION INTIATIVE CONDUCTED 38 ANIMAL TRANSPORTS FROM 28 SHELTERS IN 14 STATES TO 32 DESTINATION SHELTERS IN 19 STATES THIS TRANSLATES TO 1,219 DOGS AND 220 CATS RELOCATED TO AREAS WHERE THEY HAD A GREATER OPPORTUNITY FOR ADDPTION THE CARROLL PETRIE FOUNDATION DOG RESCUE PROJECT, FOUNDED IN 2012, ENABLED SHELTERS FROM 34 STATES TO MOVE 7,308 ANIMALS FROM OVERCROWDED SHELTERS TO WHERE THEY COULD MORE EASILY FIND HOMES THE ASPCA PARTINERSHIP WORKED WITH NINE COMMUNITIES ACROSS THE COUNTRY WHERE THE HEANIMAL WELFARE COMMUNITY NEEDS OUR HELP TO IMPLEMENT INITIATIVES TO BOOST THE LIVE RELEASE RATE FOR COMPANION ANIMALS WE COLLABORATED WITH THESE PARTINERS TO DEVELOP SUSTAINABLE DATA-DRIVEN PLANS AND PROGRAMS THAT HELP REUNITE LOST ANIMALS WITH THEIR FAMILIES, INCREASE ADDPTION RATES, ESTABLISH TARGETED SPAY/NEUTER PROGRAMS AND HELP FERAL CATS THROUGH GRANTS, CAPACITY BUILDING, TRAINING STAFF EXPERTISE AND STRATEGIC PLANNING DURING 2012, THE ASPCA CREATED, ORGANIZED AND FUNDED MEGA MATCH-A-THON INITIATIVE OVER THAT SAVED THE THREE-DAY WEEKEND, 224 ORGANIZED AND THE DEVENTS THAT SAVED THE TURES OF 6,144 ANIMALS OUR VETERINARY OUTBEACH DEPARTMENT PROVIDED EDUCATION AND TRAINING TO 16,000 VETERINARY AND SHELTER PROFESSIONALS THROUGH THE COUNTRY, AN INCREASE OF 60% COMPARED TO 2011 THE EQUINE FUND PROVIDED SCRANTS TO NON-PROFIT EQUINE WELFARE ORGANIZATIONS IN 141 STATES AND THE DISTRICT OF COLUMBIA, THE COUNTRY, AN INCREASE OF 60% COMPARED TO 2011 THE GOUNE FUND PROVIDED SCRANTS TO NON-PROFIT EQUINE WELFARE ORGANIZATIONS IN THE DISTRICT OF COLUMBIA,

ldentifier	Return Reference	Explanation
FORM 990, PART IV, LINE 2		THE ASPCA IS NOT REQUIRED TO COMPLETE SCHEDULE B FOR THE YEAR ENDED 12/31/12, IN ACCORDANCE WITH THE FORM 990 AND 990 SCHEDULE B INSTRUCTIONS, BECAUSE NO ONE CONTRIBUTOR DONATED, IN THE AGGREGATE, AN AMOUNT GREATER THAN 2% OF THE TOTAL CONTRIBUTIONS RECEIVED BY THE ORGANIZATION DURING THE YEAR

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1A		THE ASPCA HAS TWO CATEGORIES OF MEMBERS, "GOVERNING MEMBERS" AND "MEMBERS", BUT ONLY GOVERNING MEMBERS HAVE VOTING RIGHTS THE ASPCA'S "GOVERNING MEMBERS" CONSIST OF THOSE PERSONS WHO ARE CURRENTLY SERVING AS MEMBERS OF THE BOARD OF DIRECTORS ONLY GOVERNING MEMBERS HAVE THE RIGHT TO ELECT THE MEMBERS OF THE BOARD OF DIRECTORS UNDER THE ASPCA'S BY-LAWS THE ASPCA'S "MEMBERS" CONSIST OF ONE OR MORE MEMBERSHIP CATEGORIES (E.G., CHAMPIONS, BENEFACTORS, SPONSORS, ASSOCIATES, FRIENDS, JUNIORS, ETC.) AS MAY BE ESTABLISHED FROM TIME TO TIME BY THE BOARD OF DIRECTORS WITH THE EXCEPTION OF THOSE MEMBERS WHO ARE ALSO GOVERNING MEMBERS, NO "MEMBER" HAS THE RIGHT TO VOTE ON THE ELECTION OF DIRECTORS TO THE BOARD OF DIRECTORS ANY CONTRIBUTOR OVER AGE 18 WHO MAKES A DONATION OF \$25 OR MORE TO THE ASPCA IS DEEMED A "MEMBER"

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B		THE FORM 990 WAS PREPARED BY A NATIONALLY RENOWNED ACCOUNTING FIRM IN CONJUNCTION WITH THE ORGANIZATION'S FINANCIAL DEPARTMENT. THE DRAFT OF THE FORM 990 IS REVIEWED BY SENIOR MANAGEMENT, AS WELL AS LEGAL COUNSEL, AND A COPY IS CIRCULATED TO THE FULL BOARD OF TRUSTEES PRIOR TO ITS FILING WITH THE INTERNAL REVENUE SERVICE.

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C		ALL DIRECTORS, OFFICERS AND KEY EMPLOYEES COMPLETE A WRITTEN CONFLICT OF INTEREST QUESTIONNAIRE AND DECLARATION ANNUALLY THAT IS REVIEWED BY THE CORPORATE COUNSEL AND, WHERE NECESSARY, THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS ANY POTENTIAL CONFLICTS ARE ADDED TO RECORDS MAINTAINED BY ASPCA'S LEGAL DEPARTMENT

Identifier Return Referen	· ·
FORM 990, PART VI, LINE 15	THE BOARD OF DIRECTORS OF THE ASPCA IS THE COMPENSATION-SETTING BODY THAT REVIEWS AND APPROVES THE COMPENSATION OF CERTAIN SENIOR MEMBERS OF THE ASPCA STAFF ("DISQUALIFIED PERSONS") IN 2012, THE "DISQUALIFIED PERSONS" OF THE ASPCA INCLUDED THE FOLLOWING PRESIDENT & CEO CHIEF OPERATING OFFICER SVP, CHIEF INFORMATION OFFICER SVP, COMMUNICATIONS SVP, DEVELOPMENT & CORPORATE MARKETING SVP, HUMAN RESOURCES SVP, COMMUNITY OUTREACH EVP, CAPITAL PROJECTS, FACILITIES PLANNING & MANAGEMENT SVP, HUMAN RESOURCES SVP, COMMUNITY OUTREACH EVP, CAPITAL PROJECTS, FACILITIES PLANNING & MANAGEMENT SVP, ANTI-CRUELTY GROUP SVP, GOVERNMENT RELATIONS SVP, OHEF OF STAFF & ACTING GENERAL COUNSEL. THE ASPCA CONDUCTS A COMPENSATION STUDY TO ASSESS THE REASONABLENESS OF EACH "DISQUALIFIED PERSONS" COMPENSATION IN ACCORDANCE WITH THE REBUTTABLE PRESUMPTION "SAFE HARBOR" PROVISIONS OF SECTION 4958 OF THE INTERNAL REVENUE CODE A STAFF COMMITTEE CONSISTING OF THE SVP, HUMAN RESOURCES, CHIEF FINANCIAL OFFICER AND MANAGER OF COMPENSATION AND BENEFITS ASSESSES THE REASONABLENESS OF EACH PERSONS COMPENSATION BASED ON APPROPRIATE COMPARABILITY DATA FOR THE POSTIONS UNDER REVIEW AND PROVIDES SUCH DATA TO THE BOARD FOR ITS REVIEW THE COMPARABILITY DATA ARE DRAWN FROM INDUSTRY SURVEYS AND DATA SOURCES FOR COMPARABLE POSTIONS IN ORGANIZATIONS OF SIMILAR SCOPE, OPERATING BUDGET, AND TYPE. WITH RESPECT TO "DISQUALIFIED PERSONS" OTHER THAN THE PRESIDENT & CEO'S ANALYSIS OF EACH INDIVIDUAL'S PERFORMANCE AND RECOMMENDATIONS FOR COMPENSATION, DELIBERATIONS, EXCEPT THAT SUCH PERSON MAY ANSWER QUESTIONS THAT WILL HELP THE COMPENSATION DELIBERATIONS, EXCEPT THAT SUCH PERSON MAY ANSWER QUESTIONS THAT WILL HELP THE COMPENSATION BY THE BASIS FOR ITS DETERMINATIONS CONCURRENTLY WITH THE APPROVED COMPENSATION BY THE BOARD FOR ITS DETERMINATION OF THE EPERSON MAY ANSWER QUESTIONS THAT WILL HELP THE COMPENSATION BY DELBERATIONS, DIVIDITY AND COMPENSATION THAT WILL HELP THE COMPENSATION BY DELBERATIONS OF THE MEETING AT WHICH THE PERSON THE BOARD FOR THE PERSON HORSE.

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19		AUDITED FINANCIAL STATEMENTS, CERTIFICATE OF INCORPORATION AND BY-LAWS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST AND THROUGH CHARITABLE REGISTRATION REQUIREMENTS IN OVER 40 STATES THE ASPCA MAKES ITS FORM 990 AVAILABLE TO THE PUBLIC BY RETAINING A COPY AT ITS PLACE OF BUSINESS AND PLACING A COPY ON ITS OWN WEBSITE. THE FORM 990 IS LIKEWISE PUBLISHED ON THE INTERNET AT WWW GUIDESTAR ORG

ldentifier	Return Reference	Explanation
FORM 990, PART XI, LINE 9		OTHER CHANGES IN NET ASSETS WRITE DOWN ON PERMANENTLY RESRICTED REVENUE (415,875) PENSION RELATED CHARGES OTHER THAN PERIODIC PENSION COST (1,192,127) UNREALIZED LOSS ON BENEFICIAL INTEREST IN PERPETUAL TRUST 946,718 (661,285)

ldentifier	Return Reference	Explanation
SCHEDULE G, PART II		THE ASPCA REPORTS ALL EXPENDITURES RELATED TO ITS SPECIAL EVENTS FUNCTIONS AS "OTHER DIRECT EXPENSES" ON SCHEDULE G, PART II, LINE 9 ALL COSTS OF RUNNING THESE SPECIAL EVENTS ARE USUALLY INVOICED AS ONE FEE BY THE VENDOR, SO THAT THE RENTAL, FOOD AND OTHER COSTS ARE INEXTRICABLY BUNDLED AND FURTHER CATEGORIZATION ON SCHEDULE G, PART II, IS IMPOSSIBLE

ldentifier	Return Reference	Explanation
SCHEDULE I, PART IV - SUPPLEMENTAL INFORMATION		ASPCA GRANTS PROVIDE SUPPORT TO A VARIETY OF U S BASED NON-PROFIT ANIMAL WELFARE ORGANIZATIONS THROUGH CASH GRANTS, SPONSORSHIPS, SCHOLARSHIPS AND TRAINING THE ASPCA DOES NOT ACCEPT UNSOLICITED GRANT PROPOSALS BY MAIL, ELECTRONICALLY, OR IN ANY OTHER FORMATS BESIDES SUBMITTING A LETTER OF INQUIRY THROUGH ITS WEBSITE. THE ASPCA CAREFULLY CONSIDERS A NUMBER OF FACTORS IN OUR GRANT REVIEW PROCESS. AMONG THOSE FACTORS IS AN ORGANIZATIONS ABILITY TO DEMONSTRATE ITS STABILITY AND PROFESSIONALISM ORGANIZATIONS THAT CAN DEMONSTRATE THE FOLLOWING QUALIFICATIONS IN THEIR APPLICATION ARE IN THE BEST POSITION TO RECEIVE FUNDING FROM THE ASPCA IN A TIMELY MANNERACCESS TO OTHER SOURCES OF FUNDING -ACTIVE FUNDRAISING EFFORTSCOLLABORATION WITH OTHER ANIMAL WELFARE ORGANIZATIONS -UP-TO-DATE AND ACCURATE WEBSITE THE ASPCA'S FUNDING PRIORITIES INCLUDE GRANTS FOR THE FOLLOWING PURPOSESANTI CRUELTY EFFORTSEMERGENCY AND DISASTER RESPONSE AND PREPAREDNESSEQUINE PROJECTSSHELTER AND SPAY/NEUTER PROGRAMSANIMAL RELOCATION INITIATIVESANIMAL WELFARE SPONSORSHIPS AND SCHOLARSHIPS. RESEARCH GENERAL FUNDING RESTRICTIONS THE ASPCA GENERALLY WILL NOT SUPPORTORGANIZATIONS WHOSE MISSION IS UNRELATED TO ANIMAL WELFAREMULTI-YEAR GRANT PLEDGESINDIVIDUALS, PRIVATE FOUNDATIONS, ENDOWMENTS, CHURCHES OR RELIGIOUS PROGRAMS, FRATERNAL, SOCIAL OR LABOR ORGANIZATIONSORGANIZATIONS WITH UNUSUALLY HIGH FUNDRAISING OR ADMINISTRATIVE EXPENSESPOLITICAL PARTIES, CANDIDATES, OR LOBBYING ACTIVITIESORGANIZATIONS THAT DISCRIMINATE BECAUSE OF RACE, COLOR, RELIGION, SEXUAL ORIENTATION, NATIONAL ORIGIN OR ANY AREAS COVERED BY ANY APPLICABLE FEDERAL, STATE OR LOCAL LAWSORGANIZATIONS BASED OUTSIDE THE UNITED STATES EXCEPT IN EXTRAORDINARY CIRCUMSTANCESPROJECTS FOR WILDLIFE OR MARINE LIFE -INDIVIDUAL ANIMALSSTART-UP ORGANIZATIONS THE ASPCA CONDUCTS REGULAR REVIEWS OF OUR APPLICANTS' NON-PROFIT STATUS GRANTEES ARE EXPECTED TO REPORT BACK TO THE ASPCA WITH RESPECT TO THE USE OF THE GRANT FUNDS FOR THE PURPOSES REQUESTED