

### 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



For	n 9	90	1	Re	turn of (	Organi	zation Ev	emnt E	rom Inco	~~ T	<b>6</b> 1/			OMB No 1845-0047
			Hada										1	2013
D		- <b>4</b>	Unde	r section :	501(c), 527, (	or 4947(a)	(1) of the Intern	al Reven	ue Code (excep	t privat	e found:	ation	8)	
		of the Treasury Snue Service	i	h In	iot enter 200	alai Securi	ity numbers on	this form	as it may be m	ade pu	blic.			Open to Public
		ne 2013 calenda	ar Vear, or	tay year l	ormanon an	out Form	990 and Its ins	tructions	is at www.irs.ge	ov/form	990.			Inspection
		f applicable;					UMANE SOCIET		, 2013, and e	nding				, 20
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$\Box$	Initial re			CK AVE	F.O. DOX II MEN I	s not delivare	d to atreet address)			Room/s	ehu		E Teloj	phone number
	Tormina	ited			Atriaga agretar		főign postal code			<u>.                                    </u>			(908)	754-0300
	obnem/	d fölurn		field, N		570 41P OF 10	roign postal code						ľ	312,321
	Applicati	ion pending			principal officer:						_		G Gros	s receipts \$
					bruncibas discer.					H(5)	is this a g subordina	roup n	ntum for	
1, 1	ex-exe	mpt status. 🗶	501(c)(3)	501(c) (	) <b>√</b> (ine	Art an 1	4947(a)(1) or	T 50-		-				Yns       No
J (	Vobsite		<del></del>		7 100.		- 4947(8)(1) G	527		- H(p)	No " at	bardini tech e	ates Includ list. (see ir	ed? Yes No
K_F	arm of	organization, X (	Corporation	Trust	Association	Other ▶	·	1, ,		H(c)				
Pai	rt i	Summary				VIIICI P		L Y	ear of formation. 19	790	M State	of leg	al domicile	NJ
	1	Briefly describe	the organ	ization's m	ission or mos	significan	t activities	DIATM	7770 1771 177					
41	1	TO PREVENT				t organical)	t acaviaes.	PLAINE	IELD ARRA HU	MANE S	OCTELL	WAS	ORGA	MIZED
926									·				<del></del>	
Ē				***		·			······································				<del></del>	
Activities & Governance	2	Check this box	▶ ☐ if ti	ne organiza	etton discontin	ued its one	erations or dispos	sed of mor	re than 25% of its	not see	ete.			
Ď	3	Number of votin	ng membe	rs of the go	verning body	(Part VI. li	ne 1a)	00 01 11101	C their 20 /g Of No	necass	cia.	3	1	7
ŝ	4	Number of inde	ependent v	oting mem	bers of the go	vernina bo	dy (Part VI, line	16)		• • • •	• • • •	4		7
Ě	5	Total number o	f individual	is employe	d in calendar	vear 2013	(Part V. line 2a)	,				5	+	12
2	6	Total number o					• • • • • • • •					6	+	
**	7a	Total unrelated					De 12					7a	<del>-</del>	0
		Net unrelated b							-			7b		0
						-	70 2		8	Pı	lor Yaar			Current Year
	8	Contributions a	nd grants (	Part VIII, II	ne 1h)		Ç₹	🗃	∃ <b>E</b>	••••		4,40		173,797
ž	9	Program servic	o tovenue	(Part VIII, I	ine 2g)	9	\$ · 9	ə 🗓	<b>2</b>		120	5,35	0	138,408
Revenue	10	Investment inco	me (Part \	/III, column	(A), lines 3, 4	4, and 7d)	82 7	Ŋ	₹			11	0	116
œ	11	Other revenue (	ner revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c and 12										0	
	12	Total revenue -	add lines 8	3 through 1	1 (must eque	Part VIII,	olumnes), lines	12)	2	****	450	,86	6	312,321
	13	Grants and simi					<i>'</i> ^	<u> </u>	: 集 L		<del> </del>			0
	14	Benefits paid to							်တ္တိ∙ ∙ ∙ ∟				<del> </del>	0
Ø.	15	Salaries, other of						-10)	<u> </u>	<b></b>	260	,09	4	264,193
Expenses	16a	Professional fur	ndralsing fe	es (Part IX	(, column (A),	line 11e) 🖁	<b>₽</b> .5	· · · 8	<b>3</b>				<u> </u>	0
8		Total fundraising							<b>8</b> 0 18	Majikar Z	ende da 2	14.1	rantialky.	L प्राप्तिक है । विशेषातिक प्रकृतिक
ű		Other expenses						<b>&amp;</b>	. · · · ·		365	, 62	5	95,249
		Total expenses.					(A), line 25)		' - · · -   <u></u>	<u> </u>		,71		359,442
	19	Revenue less e	xpenses	Subtract lin	e 18 from line	12	· · · · · · · ·	<u></u>	<u> </u>		(174	, 85:	3)	(47,121)
Net Assets or Find Balances									В	aginning	of Current			End of Your
Bak		Total assets (Pa		-			• • • • • • •				_	,21	_	101,389
13.E		Total liabilities (F		•			• • • • • • •				_	, 84		6,141
		Net assets or fu		s. Subtrac	at line 21 from	line 20		• • • • •			142	, 36	9	95,248
Part		Signature		unandand thin			a aabadulaa aasi ala	hamaal. au	d to the best of any bo			1.7-		
true, cor	reci, an	d comploto, Dociara	tion of prepar	rer (other than	roturn, including 1 officer) is based	accompanyin on all Inform	g acnequies and als lation of which prepa	rer has any	d to the best of my kn knowledge.	owinage	ano ocuoi, i	115		
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Prep	arer	Firm's name	<u> </u>	ROBERT	PATRICK 8	CO		μ1.	18-2015		II-emplaye	a		
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/lay the	e IRS	discuss this retu	m with the				ictions)							Yes X No

Form 990 (2013) 12/21/2015 2:46PM (GMT-05:00)

1	rt-III Statem	ent of Program Service A	ccomplishments	22-1554536
4	Check if S	chedule O contains a response or n	The second secon	<u> </u>
ı	Briefly describe the o	organization's mission		· · · · · · · · · · · · · · · · · · ·
	PLAINFIELD ARE	A HUMANE SOCIETY WAS ORGE	MIZED TO PREVENT CRUELTY TO ANIMALS	
			, antenna	
	Did the organization	undertake any significant program s	ervices during the year which were not listed on the	
	pnor r-orm 990 or 99	0-EZ?		T You IV No
	If "Yes," describe the	se now services on Schedule O.		
	Did the organization of	cease conducting, or make significe	nt changes in how it conducts, any program	
	services?		••••••	Пу П.,
	If "Yes," describe the	se changes on Schedulo O		Tes ox No
			nents for each of its three largest program services, as m	and an investigation of the control
	expenses, Section 50	11(c)(3) and 501(c)(4) organizations	are required to report the amount of grants and allocation	icasured by
	the total expenses as	nd revenue, if any, for each program	are required to report the amount of grants and allocation	ns to others,
	or	re revenue, il arry, for each program	service reponed,	
_	(Code:	) (Expenses S	in the state of th	40
			including grants of \$)	(Revenue \$
	FIRITIFICIO ALGE	numane society is organ:	ized to prevent cruelty to animals	
	·			<u> </u>
	<u> </u>			
			741	
	(Code:	) (Expenses \$	including grants of \$) (	(Revenue \$
	(888).	/ (Expenses #		(Kevenue \$
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(	Code:	) (Expenses \$	Including grants of \$) (	Revenue \$
	Code:	) (Expenses \$	Including grants of \$) (	Revenue \$
		s. (Describe in Schedule O.)	Including grants of \$) (	Revenue \$
-				Revenue \$

1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A		Yas	No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see Instructions)?	. 1	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	·   _2	X	<del> </del>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(b)	- 3	-	X
5	election in effect during the tax year? If "Yes." complete Schedule C, Part II  Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	4		X
6	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
G	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			
7	"Yes," complete Schedule D, Part I  Did the organization receive or hold a conservation easement, including casements to preserve open space,	6		X
	the environment, historic land areas, or historic structures? If "Yes." complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III			
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	8		X
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	Ť		
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes." then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
٤	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	x	
t	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more	110	- 21	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	ايما		v
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX  Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d 11e		X
f		118		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedulc D, Parts XI and XII	12a		х
ь	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and If			٠,
	the organization answered "No" to line 12a, then completing Schedule D. Parts XI and XII is optional	12b		X
13	is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundralsing, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), fine 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other		T	
	assistance to or for foreign individuals? If "Yos," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schodule G, Part I (see Instructions)	17		х
18	Did the organization report more than \$15,000 total of fundralsing event gross income and contributions on			<u>^</u>
	Part VIII, lines 1c and 8a? If "Yes" complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
20-	If "Yes," complete Schedule G, Part III	19		X
20a b	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
EA	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	000 /0	040
		LOLM	<b>990</b> (2	V13)

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 17 If		rm 990 (2013)  PLAINFIELD AREA HUMANE SOCIETY  art.IV Checklist of Required Schedules (continued)	54536		Pa	ıge
Sovement on Part IX, column (A), line 17 IP I**Complete School of I Parts I and II  21 Did the organization report more than \$5,000 of grants or cither essistance to individuals in the United States on Part IX, column (A), line 27 IP I**Complete School of I Parts I and II  22 Did the organization report more than \$5,000 of grants or cither essistance to individuals in the United States on Part IX, column (A), line 27 IP I**Complete School and III and III II  23 Did the organization review "Yes" to Part IXI. Section A. Iii as 3, 4, or 5 shout compensation of the organization review "Yes" to Part IXI. Section A. Iii as 3, 4, or 5 shout compensation of the organization review "Yes" to Part IXI. Section A. Iii as 3, 4, or 5 shout compensation of the organization review "Yes" to Part IXI. Section A. Iii as 3, 4, or 5 shout compensation of the organization review "Yes" to Part IXI. Section A. Iii as 3, 4, or 5 shout compensation of the organization review in the year of the year. That was issued after December 31, 20027 If "Yes," annever fines 24b through 24-d and comprises School Kell K. III "Xes" go to line 25a  10 Did the organization ewer in any processed of tax-exempt bonds beyond a temporary period exception?  24d Did the cognization ever man and an exercive account other than a refunding excrow at any time during the year?  24d Did the cognization ever man that the competition of saver for bonds outstanding all any time during the year?  24d Section 501(c)(3) and 501(c)(4) organization. Did the organization example the recompetition of the organization exercity is an excress benefit transaction with a discussified person in a prior year, and that the transaction that no total benefit exercity in Yes, complete Schoolub L. Part I  25d West the organization exercity in the cognization of the organization exercity in the competition schoolub competition exercity in the competition of the organization exercity in the competition of the organization exercity in the competition of the organization exercity in the com	-	continued)				_
Did the organization report and the state of	21	Did the organization report more than \$5,000 of grants or other conjutance to any decimal and the second se	_		Үев	N
12 Dut the degenization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, common (a), the 25 dir Yes, "complete Schedule, I Part I and III 22 Did the organization answer "Yes" to Part IXI. Section A, Ilina 3, 4, or 5 about compensation of the organizations current and former officers, director, instruction, rustness, key employees, and highest commonstead employees? If "Yes," complete Schedulus J 23 X X 200,000 as of the fast day of the year, that was issued after December 31, 200,27 if "Yes," answer fines 24b through 24 and complete Schedulus J 24b 10 the organization invest any proceeds of the executable beyond a temporary period exception? 24b 10 through 24 and complete Schedulus K, Iris and the security branch beyond a temporary period exception? 24b 10 through 24b and complete Schedulus K, Iris and the security branch beyond a temporary period exception? 24c 10 through 24b and complete Schedulus K, Iris and the security to defease any isa-exempt bonds of the executable beyond a temporary period exception? 24c 10 through 24b and complete Schedulus K, Iris and the security to defease any isa-exempt bonds? 24c 10 through 24b and complete Schedulus K, Iris and the security to the security t		government on Part IX, column (A) line 12 if "Yes " complete Schoudle I. Date I and III	- 1			
22	22	Did the organization report more than \$5,000 of grants or other accidence to be distinct.	· · ·  _	21		X
25 Did the organization answer "Yes" to Part VII. Section A, Intel 3,4, or 5 about compensation or the organization's current and former officers, discovery, instress, key employees, and highest compensated employees? If Yes, complete Schedule J 26 Did the organization have at answerment board susue 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 comptote Schedule K. If "No," go to line 25a		on Part IX, column (A), line 27 if "Yes," complete Schedulo I. Porto Land III.				
diginization's current and former officers, directors, instances, key employees, and highest commonated employees? If "ess," complete Schedule J. If "No." op to line 25s of the 1st stay of the year, that was current or force than \$100,000 as of the 1st stay of the year, that was current or force than \$100,000 as of the 1st stay of the year, that was current or force than \$100,000 as of the 1st stay of the year, that was current or force than \$100,000 as of the 1st stay of the year, that was current bonds beyond a temporary period exception?  24s Did the organization maintain an escrew account other than a retinding screw stay if the during the year?  24d Did the organization maintain an escrew account other than a retinding screw stay if the during the year?  34d Did the organization exists an "on behalf of issuer for bonds outstanding at any time during the year?  34d Did the organization exists an "on behalf of issuer for bonds outstanding at any time during the year?  34d Did the organization exists an "on behalf of issuer for bonds outstanding at any time during the year?  34d Did the organization exists an "on behalf of issuer for bonds outstanding at any time during the year?  34d Did the organization exists an interest of the organization exists should be objected to any of the organization that of the organization exists and the organization exists and the irregarded in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been represented on any of the organization from seed or 900 627?  34d Did the organization review and man or been represented on any of the organization for organization review and man or bear assistance to an officion, director, trustee, key employees, or dissualization provides a grant or other assistance to an officion, director, trustee, key employees.  34d Did the organization provides a grant or other assistance to an officion, director, trustee, key employees.  35d Did the organization seed, exception of the assistance to an	23	Did the organization answer "Yes" to Pert VII. Section A. line 3.4 or 5 about sempenselles and	· · · Ĺ	22		X
employears // Yes/ complete Schedule J 23		organization's current and former officers, directors, trustees, key employees, and blath-the-standard former officers.	- }		- 1	
24 I bit the organization have a lax-awampt bond issue with an outstanding principal amount of more than \$100.00 as of the test and yof the year, that was issued after December 3, 2002? If "Yes," anniver lines 24b through 24d and compiste Schedule K, if "No," go to line 25a		PITIDIO//RDC/ It "VAC " commists Catacidate L	- 1			
STUDUDU 3 of the hast day of the year, that was issued after December 31, 2002? If "Yes," answer thes 24b through 24d and compites Schedule K. If "No," qo to line 25d to 10 bit the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  24b	24a		· · ·  '	23		<u>X</u>
through 240 and compites Schedule K. If "No," go to line 25a  Did the organization invest any processed of tex-exempt boards beyond a temporary period exception?  24b  Did the organization maintain an estow account other than a retunding escrow at any time during the year  to defease are ty tax-exempt boards?  did bit the organization act as an *On behalf of issuer for boards outstanding at any time during the year?  24d  Did the organization act as an *On behalf of issuer for boards outstanding at any time during the year?  24d  Section 501(c)(3) and 501(c)(4) organizations to tit the organization engage in an excess benefit transaction with a disqualified person or during the year?  25b  Is this organization exert that it engaged in an excess benefit transaction with a disqualified person in a prior  year, and that the retinascount has not been reported on any of the organizations professor of the organization report in any amount on Part X, line 5, 6, or 22 for receivables from or psyables to any  current or former officiers, directions, trustees, key employees, highest compensated employees, or  dissuallified persons? If so, complete Schedule, I., Part I  Did the organization provide a grant or other essistance to an efficier, director, trustee, key employee,  substantial contributor or employee thereof, a grant stoletic normities member, or to a 35% controlled  entity or family member of any of these apersons? If "Yes," complete Schedule, I., Part III  27		\$100,000 as of the last day of the year that was issued after December 31, 20033 if the last day of the year that was issued after December 31, 20033 if the last day of the year that was issued after December 31, 20033 if the last day of the year that was issued after December 31, 20033 if the last day of the year that was issued after December 31, 20033 if the last day of the year that was issued after December 31, 20033 if the year that was issued after December 31, 20033 if the year that was issued after December 31, 20033 if the year that was issued after December 31, 20033 if the year that was issued after December 31, 20033 if the year that was issued after December 31, 20033 if the year that was issued after December 31, 20033 if the year that was issued after December 31, 20033 if the year that was issued after December 31, 20033 if the year that was issued after December 31, 20033 if the year that was issued after December 31, 20033 if the year that was issued after December 31, 20033 if the year that was issued after December 31, 20033 if the year that was issued after the year that was included	ĺ		- 1	
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization name than a network account other than a refunding estorw at any time during the year  to defease any tax-exempt bonds?  246  Did the organization act as an iron bohalf of issuer for bonds outstanding at any time during the year?  246  Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person of turning the year? If "Yes," complete Schadule L. Part I  Is the organization acts 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 process programs are transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization process or complete Schadule L. Part I  Did the organization report any amount on Part X, line S, 6, or 22 for recalvables from or payables to any current or former officers, directors, rustices, key employees, or disqualified person? If is occumpled Schadule L. Part II  Did the organization provide a grant or other assistance to an officior, director, frustee, key employee.  26		through 24d and complete Schedule K. If "No." go to line 25a	- 1			
c Did the organization mentals an escrow account other than a refunding storow at any time during the year to defeese any lax-awarpt bonds?  d Did the organization eat as an "on behalf of issuer for bonds outstanding at any time during the year?  24d    325   Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during fits year? If "Yes," complete Schedule I., Part I.  b Is the organization wavare that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been expected on any of the organization sport or page of the organization report any amount on Part X, line 5, 6, or 22 for recarkables from or payables to any current or former officions, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule I., Part II  25d Did the organization report any amount on Part X, line 5, 6, or 22 for recarkables from or payables to any current or former officions, directors, trustees, key employees, substantial contributor or employee thereof, a grant solection committee member, or to a 35% controlled entity or finity member of any of these persons? If "Yes," complete Schedule I., Part III  27	b	Did the organization invest any proceeds of tax-exempt hands beyond a temporary ported execution?	<u> </u>	-	-   -	<u>X</u>
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Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  Did the organization liquidate, torminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes." complete Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  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  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  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  Soction 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2  36	-		36	,_	1,	,
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conservation contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I  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  Jud the organization have a controlled entity within the meaning of section 512(b)(13)?  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  Soction 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  To did the organization? If "Yes," complete Schedule R, Part V, line 2  To did the organization? If "Yes," complete Schedule R, Part V, line 2  To 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, lines and that Is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI, lines and that Is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI, lines and that Is treated organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.			· ·	<del>"</del>	<del>-   ´</del>	<u>.                                    </u>
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Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  JI (If the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I (III)  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  JA (X)  Did the organization have a controlled entity within the meaning of section 512(b)(13)?  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  Soction 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  JI (If "Yes," complete Sch	31	· •	٠٠   ع	<del>'  </del>		
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Part VI	J.		- 1			
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19? Note. All Form 990 filers are required to complete Schedule O	38		· ·   37	<del>'   -</del>	-   X	
	J <b>.</b>	400 8)-4- 49 5 000 5	.ء ا	,   ,	.	
	EEA					121

P	Statements Regarding Other IRS Filings and Tax Compliance	54536			Pac
	Check if Schedule O contains a response or note to any line in this Part V				Г
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- If not applicable			Yes	
b	Enter the number of Forms W 2C included to be a few and a second of the	0		, , , j6	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and	0			
	reportable gaming (gambling) winnings to prize winners?	3	ri di		144
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		1c	Х	_
	Statements, filed for the colondor was and an order to the colondor was a colon		認门	11/1/17	
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		14.5		
	Note. If the sum of lines 1a and 2a is groater than 250, you may be required to e-file (see instructions)		2b	<u> </u>	↓
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		J	1011	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	· ·	3a		X
48	At any time during the calendar year did the emergentian have an explanation in Schedule O	· ·  _	3b		<u> </u>
-	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	1	ľ		
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	- 1			
ь	If "Yes," enter the name of the foreign country:	<u> </u>	4a		X
~		P44	, 15 d	# to 1	1
5a	See Instructions for filling requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	1.42	14	1	1., 1
b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>. ا</u> ۰۰۰	5a		X
c	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	· · <u>  .</u>	5b		Х
6a	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	_ !	5c		_
Va	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				
b	organization solicit any contributions that were not tax deductible as charitable contributions?	· · <u>  [</u>	6a		X
Ų	If "Yes," did the organization include with every solicitation an express statement that such contributions or	İ			
7	glifts were not tax deductible?	6	8b		
	Organizations that may receive deductible contributions under section 170(c).	£.,		rijerija Kalpi i	1
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	Ť.Ç		1,000 1000	121
<b>L</b>	and services provided to the payor?	• •   _7	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	· ·   _7	7b		ļ
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		- [		
	required to file Form 8282?		7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year		3 T	والموالية المراكبة	, j
C	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	2	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7	rf		X
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	· ·   _7	<u>'9</u>		
	If the organization received a contribution of cars, boats, airplanes or other volitices, did the organization file a Form 1098-C?		/h		
1	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	944 , 4 <b>0</b> 1	W	凝	(1) 
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	ې هې د کې	institution in	( ) ( ) ( ) ( )	,
	organization, have excess business holdings at any time during the year?		8		X
	Sponsoring organizations maintaining donor advised funds.	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		المدينة	8,24
	Did the organization make any taxable distributions under section 4966?	📗 9	a		X
	Did the organization make a distribution to a donor, donor advisor, or related person?	9	ь		
	Section 501(c)(7) organizations. Enter:	100			\$114 a.
	Initiation fees and capital contributions included on Part VIII, line 12				(,)
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			د در از اورون	ا الله
	Section 501(c)(12) organizations. Enter:	(, ),		, .X	- 1
8	Gross income from members or shareholders	·*:		7.7	
	Gross income from other sources (Do not net amounts due or paid to other sources				ij.
	against amounts due or received from them.)	16.7 A		475	聯
a :	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041?	. 12	2a	·	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	2.4.4	33 3	Z	34.55.
	Section 501(c)(29) qualified noπprofit health insurance issuers.			(3.5)	χι., ·
a i	a the organization licensed to issue qualified hoalth plans in more than one state?	13		. 179/14	ستنه
	Note. See the instructions for additional information the organization must report on Schedule O	-32	: T	12.74	13.55
b (	Enter the amount of reserves the organization is required to maintain by the states in which				Su/z
t	he organization is licensed to issue qualified hoalth plans	17, 41			
c E	Enter the amount of reservos on hand				1
a [	Did the organization receive any payments for indoor tanning services during the tax year?	. 14		11.2	<u>ж</u>
<u> i</u>	"Yes," has it filed a Form 720 to roport these payments? If "No," provide an explanation in Schedule O	_		-	~,
۸.	The state of the supplemental controller of the state of	. 14	N.		

	rm 990 (2013) PLAINFIELD AREA HUMANE SOCIETY		_	
P	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "response to line 8e, 8b, or 10b below, and the properties to line 8e, 8b, or 10b below, and the line 8e, 8e, 8e, 8e, 8e, 8e, 8e, 8e, 8e, 8e	536	P:	age i
	response to line 8a, 8b, or 10b below, describe the dircumstances, processes, or changes in Schedule O. See Instructions.	'No"		
	the constitution of the constitution of the contract of			
<u>Se</u>	ection A. Governing Body and Management	<u></u>		X
1a		E 14 m	Yes	No
	If there are material differences in voting rights among members of the governing body, or	二膜數		1.1
	if the governing body delegated broad authority to an executive committee or similar	7. \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	1794	
	committee, explain in Schedule O.	14.7%		4151 c
b	Enfer the number of voting members included in line 1s, shows who are independent	بالزار		5 - 4 h
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	· · · · · · · · · · · · · · · · · · ·	\$ . P &	100
	any other officer, director, trustee, or key employee?			
3	Did the organization delegate control over management duties customarily performed by or under the direct	·   _2_	-	X
	Supervision of officers, directors, or trusteed or key ample to be a supervision of officers, directors, or trusteed or key ample to be a supervision of officers.	1		
4	supervision of officers, directors, or trustees, or key employees to a management company or other person?  Did the organization make any elemiforation to be present the property of the prop	· <u>  3</u>		X_
5	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	. 4	<u>.                                    </u>	X
6	Did the organization become aware during the year of a significant diversion of the organization's assets?  Did the organization have members or stockholders?	. 5		X
7a		. 6		X
7 (4	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	1		
_	one or more members of the governing body?	. <u>7a</u>		<u>X</u>
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members,	1	1 1	
	stockholders, or persons other than the governing body?	7b		<u>X</u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	1-51	<b>。高温性</b>	, ,
_	the year by the following:	). <del>'</del>	1 - 5 - 6	10-
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
~	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X.
<u>Sec</u>	ction B. Policies (This Section B requests Information about policies not required by the Internal Revenue Codo.)			
		لــــــ		No
10a	Did the organization have local chapters, branches, or affillates?	10a		<u>X</u>
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	1 1		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	Х	
þ	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	- 號	3 25 23	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	123		<u>X</u>
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	1 1	ĺ	
	describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		<u>x</u> _
14	Did the organization have a written document retention and destruction policy?	14		Χ
15	Did the process for determining compensation of the following persons include a review and approval by	馬影		r. Y
	independent persons, comparability data, and confemporaneous substantiation of the deliberation and decision?	144		
а	The organization's CEO, Executive Director, or top management official	15a		<u>X_</u>
b	Other officers or key employees of the organization	15b		<u>X</u> _
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	31.7		5.50
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	5 - 54	·	7,1
	with a taxable entity during the year?	16a	2	X_
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	7.7%	1 2 2	
	participation in joint venture errangements under applicable federal tax law, and take steps to safeguard the			3
	organization's exempt status with respect to such arrangements?	16b	. 1	
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)			_
	available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website			
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:			
	THE ORGANIZATION (908) 285-1424, 75 ROCK AVE, Plainfield, NJ 07050			

Form 990 (201		22-1554536	Page
Ear AIIS	Compensation of Officers, Directors, Trustees, Key Employees, Highest Com Independent Contractors	pensated Employe	es, and
	Check if Schedulo O contains a response or note to any line in this Part VII		
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		<u> </u>
1a Complete organization's t	this table for all persons required to be listed. Report company for the pales to the	within the	
<ul> <li>List all o compensation.</li> </ul>	f the organization's current officers, directors, trustees (whether Individuals or organizations), regardless Enter -0- in columns (D), (E), and (F) if no compensation was paid.	of amount of	
	A sit and a sit a si		

- List all of the organization's current key employees, if any See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100.000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A)	(B)			{0	;)			(O)	(E)	(F)	
Namo and Title	Averago			Post	tion			Ropodablo	Reportable	Estimated	
	hanse bet	box, unless portion is both an officer and a director/trustee)						compensation	compensation from	amount of	
	week (list any hours for							from the	related organizations	other compensation	
	related							organization	(W-2/1099-MISC)	from the	
	organizationa below dotted						יק	(W-2/1099-MIBC)		organization and related	
	linn)	Indiradual Irusiee or director	រាទាវិបារែមាន ដោនចេក	Officer	Key employee	Highest companiales employee	Former			organizations	
(1) Steven Cecchettini President	5.00	x							0	-	
(2) Susan Williams	5.00			$\dashv$			$\Box$	<u>`</u>			
Vice President		х				i		Ó	0		
(3) Martin Alpert	5.00									<del></del>	
Treasurer		Х	l			į		0	0		
(4) Lynn Herro Secretary	5.00	Х						oi	0	_	
(5) Marjorie Green	5.00			$\neg$				•		-	
Board Member		Х	ĺ			ľ	ļ	o	o		
(6) Jean Porry Board Member	5.00_	х						0	0		
(7) Diana Bilenvenue	5.00							· · · · · · · · · · · · · · · · · · ·			
Board Member		x	- 1	i				o	0		
8) Nancy Ianiero Board Momber	5.00	х						0	0		
9) Susan MacWhinney-Ciufo	35.00			-	<u>_</u>	i i	-+				
Executive Director	•   - <del></del>	x	j		х			46,594	o		
10) Laura Stovens Board Memeber		х		1	7			0	0		
11) Elayne Alpert			-+	$\dashv$	十				<del></del>		
Board Member	• • • <del> </del> • • •	$\mathbf{x}$				- 1			0		
12)					1					<del></del>	
13)				+	+		+				
14)			$\dashv$	+	$\dashv$		+				

Par	T'VII' Section A. Officers, Directors, Trustees	. Key Emple		20/	4 111	abor				22-15545:	36 Page
	(A)	(B)	yees.	, em		C)	St COM	per	(D)	s (continued)	(F)
	Name and tille	Average hours per week (list any hours for	box. office	unies er ans	eck n s per dime	son la tor/tre	han one both en ustee)		Reportable compensation from the	Reportable compensation from related organizations	Estimated amount of other compensation
		related organizations below dotted line)	Individual trustee or director	hstrucenel trustee	Officer	Key employee	Highicst compensated employee	Former	arganization (W-2/1089-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(15)_						$\Box$					
(16)					-			1			
(17)_						1		1			
(18)_							_				
(19)_				$\dashv$		1		+			
(20)_						1					
(21)_						1	_	_	· · · · · · · · · · · · · · · · · · ·	-	
<u>{22)</u>				j				1			
(23)_								1			
(24)_											-
(25)											
1b c d	Sub-total  Total from continuation sheets to Part VII, Section  Total (add lines 1b and 1c)	1A							46 504	o	
2	Total (add lines 1b and 1c)  Total number of individuals (including but not limited to reportable compensation from the organization						more t	han	\$100,000 of	0	0
3	Did the organization list any former officer, director,	or trustee, k	ev em	plov	ce.	or hi	ahest c	om	pensated	· · · · · ·	Yes No
4	employee on line 1a? If "Yes," complete Schedule J for For any Individual listed on line 1a, is the sum of reporte organization and related organizations greater than \$15	such individu able compens	ation a	and o	 other	con	 npensat	 tion	from the		3 X
5	individual	oensation fron	n any i	unre	atec			 n o			4 X 分块 录数 4 5
Socti	for services rendered to the organization? If "Yes," com	plete Schedu	le J for	SUC	h pe	rson			<u> </u>	<u> </u>	5 X
1	on B. Independent Contractors  Complete this table for your five highest compensated in compensation from the organization. Report compensation									's tax	
	year (A)								(B)	<u> </u>	(C)
	Namo and business address			_			<del></del>		Description of so	prvloes	Compensation
								_			
2	Total number of independent contractors (including but received more than \$100,000 of componention from the		those f	isted	ds t	ove)	who			1	Me March

Form !			NE SOCIETY			22-15545	36 Page
			m-4-4 N 1- m				
		Check if Schedule O contains a response or	note to any line in this	S Part VIII (A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D)  Revenue excluded from tax under sections
र्धि	1.	a Federated campaigns	la	17.3 99,0	revenue	1 322 - 13 15 - 17 20	512-614
Grants mounts		h Manakanki di	lb				
Gifts, Gra	İ	en Europeatate en en en	C 68,718				
Sign			d				
S.E	'		e 105,079	Tarket State			
er S	1 1	f All other contributions, gifts, grants,				A. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	
<sup></sup>		and similar amounts not included above	f		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		<b>一类的温度</b>
Contributions, and Other Sim		Moncash contributions included in lines 1a-1f: \$			· 一定、上海(10)		
<u>0</u> 0	┯	h Total. Add lines 1a-1f	<u></u> ▶	173,797	The second secon		Sympletic of the second
9	١.,		Businesa Codo	- 19 to 19 to 19 to 19	The state of the s	1. 1935年12日 (元)	1
Y BC	28	CONTRACT FEE8	812900	138,40	8 138,40	В	
8	,		-				
Program Service Revenue	`	·	-	-			
Ē	,		•				
26 D		All other program service revenue	•	<del>                                     </del>	<del> </del>	<del> </del>	
ā	ء ا	Total. Add lines 2a-2f		770.40	8 30 75 67 60	THE SALE THE SERVE	_ nide 11 ris 12 7r /
	3	Investment Income (including dividends, interest,		138,40	B source to be a source	1 4 A Cap	
	•	and other similar amounts)		11	6 11	6	
	4	Income from investment of tax-exempt bond process			1		
	5	Royaltles					
	ĺ	(I) Real	(II) Personal	13. TT. T.		The state of the s	All the same
	6a						
	b						
		(1444)				- manifestation of the first of	
	ì		<u> ▶</u>		<b></b>		
	7a	Gross amount from sales of (i) Securities	(ii) Othar	The state of the s			
		assets other than inventory	<del> </del>		未犯 张沙娜		<b>阿拉斯斯</b> 斯斯斯斯
	0	Less: cost or other basis and sales expenses					
	c	Gain or (loss)					
		Net gain or (loss)		7 7		_ 164 - 1761	Action 1911
ne	8a	Gross Income from fundraising		<u> </u>	S. 12 1 3 1 3 1 3 1 3 1	18.5 - 18	
Ver		events (not including \$ 68,718			1.投入法,置达5		
Other Revol		of contributions reported on line 1c).				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
the l		See Part IV, line 18 a					The second secon
0		Less: direct expenses , b		The children of		· [18] [18] [18] [18] [18] [18]	Salar Carrier
		Net income or (loss) from fundraising events	· <u> </u>		The state of the s	10 700 \$ 10 700	
	9a	Gross income from garning activities				State of the state	AND COMPANY OF THE PARTY
	<b>.</b>	See Part IV, line 19					
		Less. direct expenses		Land Charles 1-17	The state of the s	13/4 (18/ 1/18/2) 2º [	族。自治病例的民生和
}			· <u></u>	18 18 18 18 18 18 18 18 18 18 18 18 18 1	िर्दर्भ का उरल्हें हैन हो। 	Land And Continue	igo ko Alondo
	BUT	Gross sales of inventory, less roturns and ellowances	· ]	<b>建筑水平</b> (2015年)			The street of the street of
	ь	Less: cost of goods sold b			[2] 经数据等		72 - 3 5 2 4 2 3 2 3
		Net income or (loss) from sales of inventory		1	Mark Series Cons. 6.	1 - 4 1 0 G FARD \$57 10	লেজ, েন্দ্রেল ু । জুন -
ľ		Miscollaneous Revenue	Business Code		والمراقع والمنافعة والمنافعة المعالمة	1 7 7 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	C. 18 18 18 18 18 18 18 18 18 18 18 18 18
ſ	11a				in the second se	M. A. V. A. M. S. L. S. L. S. C. S. C. S. S. S. S. L.	La Service Land Service
j	b						. ,
	C	40.00					
		All other revenue					
		Total. Add lines 11a-11d	· · · · · · · . • • • • • • • • • • • •		2 The same (1) 1	The same	and the second
<u></u> L	12	Total revenue. See instructions		312,321	130,524	0	0

Form 990 (2013) PLAINFIELD AREA HUMANE SOCIETY 22-1554536 Page 10 Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check If Schedule O contains a response or note to any line in this Part IX Do not include amounts reported on lines 6b, 7b, (8) (C) Management and Program service 8b, 9b, and 10b of Part VIII. Fundraking esenegxo general expenses expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in the United States, See Part IV, line 22 3 Grants and other assistance to governments, organizations, and individuals outside the United States, See Part IV, lines 15 and 16 Benefits paid to or for members . . . . . . 5 Compensation of current officers, directors. trustees, and key employees . . . . . . . 46,595 41,036 5,559 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 178,541 160,687 17,854 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) я 14,253 12,828 1,425 10 24,804 22,324 2,480 11 Fees for services (non-employees). c d Θ Professional fundraising services. See Part IV, line 17 f Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) 12 Advertising and promotion 6,488 648 5,840 13 Office expenses 376 3,757 3,381 Information technology 14 15 Royalties . . . . . . . . . . . . 16 Occupancy . . . . . . . 16,824 15,142 1,682 17 3,790 3,411 379 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 1,215 1,215 20 Payments to affiliates . . . . . 21 22 Depreciation, depletion, and amortization 23 15,907 14.316 Other expenses. Itemize expenses not covered abovo (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) ANIMAL WELFARE AND VET SVCS 30,547 30,547 b BANK CHARGES 1,688 1,688 C REPAIRS AND MAINTENANCE 9,017 8,115 902 d All other expenses 6,016 5,414 602 Total functional expenses. Add lines 1 through 24e 359,442 324,256 35,186 n Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and

fundralsing solicitation. Check here following SOP 98-2 (ASC 958-720)

**Balance Sheet** 

Part X

Check If Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year Cash - non-interest-bearing 124,469 1 69,159 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 4 Accounts receivable, net . . . 4 20.675 16,157 Loans and other receivables from current and former officers, directors. trustees, key employees, and highest compensated employees. Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see Instructions). Complete Part II of Schedule L 6 7 Notes and loans receivable, net 7 Assets 8 Inventories for sale or use 8 Prepaid exponses and deferred charges 9 Land, buildings, and equipment cost or 10a other basis. Complete Part VI of Schedule D b Less: accumulated deproclation . . . . . 16,073 10c 16,073 11 Investments - publicly traded securities 11 Investments - other securities. See Part IV, line 11 12 12 13 Investments - program-related. See Part IV, line 11 13 14 14 15 Other assets. See Part IV, line 11 ....... 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 161,217 16 101,389 17 Accounts payable and accrued expenses 17 17,848 18 18 19 Deferred revenue 19 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, Liabilities  $t_{j} \cdot \underline{c}(t)$ trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X. 1,000 Total liabilities. Add lines 17 through 25 . . . . . . . 18,848 26 6,141 Organizations that follow SFAS 117 (ASC 958), check here Vet Assets of Fund Balances complete lines 27 through 29, and lines 33 and 34. 1.23 4 380 **美国统** 27 27 142,369 28 Temporarily restricted not assets 28 Permanently restricted net assets . . . . . . . . . . . . 29 ا جائي المائية Organizations that do not follow SFAS 117 (ASC 958), check here 📗 🔲 and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 33 Total net assets or fund balances 142,369 33 95,248 Total liabilities and net assets/fund balances 161,217 34 101,389

EEV

Form 990 (2013)

	m 990 (2013) PLAINFIELD AREA HUMANE SOCIETY	22-1554536	;	Page 12
P	Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			🗅
1	Total revenue (must equal Part VIII, column (A), line 12)	. 1	3	12,321
2	Total expenses (must equal Part IX, column (A), line 25)			59,442
3	Revenue less expenses. Subtract line 2 from line 1	. 3	_	47,121)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))			42,369
5	Nat unrealized gains (losses) on investments	5		
6	Donated services and use of facilities			···
7	Investment expenses			
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	33, column (B))	10		95,248
Pa	rt XIIs Financial Statements and Reporting	<u> </u>		33,510
	Check if Schedulo O contains a response or note to any line in this Part XII			П
				AB No
1	Accounting method used to prepare the Form 990; 🔲 Cash 💢 Accrual 🔲 Other		18 as 24	. (V. 1944)
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O.			أبار مزأ استيا
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a 3	Ž
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			-
	reviewed on a separate basis, consolidated basis, or both:	ļ		Far 173
	Separate basis			では、こ
b	Were the organization's financial statements audited by an independent accountant?		2b	x
	If "Yes," chack a box below to indicate whether the financial statements for the year were audited on a		12/15/ 15	25 B
	separate basis, consolidated basis, or both:		4. Kugh	34 3
	Separato basis Consolidated basis Both consolidated and separate basis			
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight			
	of the audit, review, or compiletion of its financial statements and selection of an independent accountant?		2c	k <sub>a</sub> ↓ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	If the organization changed either its oversight process or selection process during the tax year, explain in		2 350	y / 1/3/2
	Schedule O.			
38	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	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	}	70	-+
~	required audit or audits, explain why in Schedulo O and describe any steps taken to undergo such audits		зь	
EΛ	required datal or addied, explain with in scriedald or and describe any steps taken to undergo such addis	<del></del>		90 (2013)
			CHILLES	/U (ZU 13)

12/21/2015 2:46PM (GMT-05:00)

#### SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

## **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.

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

OMB No 1545-0047

2013

Open to Public

		o organization							Employ	er identificati	on number		
Pa	rt i	Reason for	Public Charity	· Ctatus (All arman)			1		22-	1554536			
			te foundation honor	Status (All organi	zations r	nust con	plete thi	s part.)	See inst	ructions.	·		
1	֓֜֞֞֞֜֞֓֓֓֟֟֓֟	A church conventi	on of churches as	se It Is (For lines 1 through	gn 11, othec	k only one I	box.)						
2	Ħ	A school described	t in another 470/6)	association of churches	described	in section	i 170(b)(1)(	(A)(i).					
3	й	A hospital as a see	manatica lassattal	(1)(A)(II). (Attach Sched	dule E.)								
4	Ħ	A modical recent	perative nospital s	ervice organization desc	inbed in se	ction 170(	(b)(1)(A)(III	).					
~		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the											
-	$\Box$	hospital's name, city											
5	ليا	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in											
_		section 170(b)(1)(A)(iv). (Complete Part II.)											
6	닖	A federal, state, or	local government of	or governmental unit des	scribed in s	ection 170	D(b)(1)(A)(\	v).					
7	X	An organization that	normally receives a	substantial part of its sup	oport from a	governme	ntal unit or t	from the g	eneral publ	lc			
		described in section	on 170(b)(1)(A)(vi).	. (Complete Part II.)									
8		A community trust	described in sectio	on 170(b)(1)(A)(vi). (Coi	mplete Par	t ( <b>I.)</b>							
9	Ш	An organization that	normally receives:	(1) more than 33 1/3% of	its support	from contrib	outions, mer	mbership f	ees, and g	ross			
		receipts from activition	es related to its exer	mpt functions - subject to	certain exc	eptions, and	d (2) no mor	e than 33	1/3% of its	;			
				and unrelated business ta									
		acquired by the org	anızatlon after Jun	e 30, 1975. See <b>sectio</b> s	n 509(a)(2)	. (Complet	e Part III)						
10		An organization org	anized and operat	ed exclusively to test for	public saf	ety. Soo se	ection 509	(a)(4).					
11		An organization orga	anized and operated	exclusively for the benef	it of, to perf	orm the fun	ctions of, or	to сапу о	ut the				
		purposes of one or	more publicly supp	orted organizations des	cribed in s	ection 509	(a)(1) or se	ction 509	(a)(2) See	section			
				es the type of supporting									
		a 🔲 Typel	ь 🗌 тур		H-Function			a [	-	-Non-funtio	nally integrated		
e			, I certify that the ord	ganization is not controlle				ore disqua			,		
				or than one or more publi									
		or section 509(a)(2)	3		,,					3( - )			
f		, ,, ,	ceived a written dete	ermination from the IRS ti	hat it is a Tv	nel Type	II or Type i	ll supporti	na				
		organization, check t				рс I, Туро	n, or Type (	suppos	9		П		
g		-		ition accepted any gift or	contribution	from any o	of the						
_		following persons?	,	and the second state of the second			,, u, e						
			lirectly or indirectly o	controls, either alone or to	nether with	nersons de	escribod in (	II) and			Yes No		
				e supported organization?		persons de	Sacribad III (	,11) 6110			11g(i)		
		(ii) A family member			•		• • • •	- • · · ·			11g(II)		
				described in (i) or (ii) abo				· · · · ·			<del></del>		
h				ne supported organization				• • • • •			11g(III)		
		no of supported	(II) EIN	(III) Type of organization	(iv) is the o	an an in action	And Died and		(40.1	n tha			
		rganization	(11) 2,14	(described on lines 1-9	In pal. (I) iis	•	(v) Did you the organi		(vi) i. erganizati		(vII) Amount of monetary support		
				above or IRC section	governing o		cal, (l) o		(I) organiz				
			ľ	(aee instructions))	\		supp			.S.7			
A)	-				Yes	No	Yes	No	Yes	No			
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B)	····	·			+		<del></del>			-			
ω,													
C)			<del></del>		<del> </del>	<del>                                     </del>							
٠,													
D)					<del> </del>					<del> </del>			
<b>~</b> ,					[								
E)						<b> </b>	<del>  </del>						
/									l				
··			no constant	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	. ~	1. 2. 2. 2	3 (3)			(L) 2 (2) 2 (1)			
otal			Francis of Title All Statements with the Company	A CONTRACTOR OF THE STATE OF TH	13 44 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			T c State	10 (10 7) 1 ;				

22-1554536 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	ction A. Public Support					- ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( (			
Cal	endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total		
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	255,50	9 182,80						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf				352,100	213,237	1,150,63		
3	The value of services or faulities furnished by a governmental unit to the organization without charge								
4	Total. Add lines 1 through 3	255,509	182,808	222,675	324,406	173,297	1,158,69		
5	The portion of total contributions by	Control of the second	1.5 - T	77	1.46 1955 yell 4	74.748 - 15°98 - 11	3,250,05		
	each person (other than a	45, 34							
	governmental unit or publicly			为 <del>集</del> 型 (1877)	[3-3] · · · · · · · · · · · · · · · · · · ·				
	supported organization) included on	一种,一种,是"是"。 第二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Take of Sandara				
	line 1 that exceeds 2% of the amount			Barrier Const.					
_	shown on line 11, column (f)	3 San		Appl II		Section 1			
6	Public support. Subtract line 5 from line 4	14.1 15 15 15 15 15 15 15 15 15 15 15 15 15	STANDARD TO THE THE	white to him to have not	よる 大田 大田 大田 大田 大田 大田 大田 大田 大田 大田 大田 大田 大田	<b>经验证据的证</b>	1,158,69		
	ction B. Total Support	<del></del>	····						
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total		
7 8	Amounts from line 4	255,509	182,808	222,675	324,406	173,297	1,150,69		
٠	payments received on securities loans,								
	rents, royalties and income from similar sources	]							
		200				116	31		
9	Net Income from unrelated business	]							
	activities, whether or not the business is regularly carried on					]			
							· · · · · · · · · · · · · · · · · · ·		
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)								
11	Total support. Add lines 7 through 10 .	Contract to	ું છુટ પ્રાથમ જ મા	Sec. 14- 32 - 1	4 y - 1	यम् ज्यातः भूत्यः	1,159,01		
2	Gross receipts from related activities, etc. (see					12	1,133,04.		
3	First five years. If the Form 990 is for the organization, check this box and stop here	organization's first.	second, third, four	h, or fifth tax vear	as a section 501(c	)(3)	<b></b>		
sec	tion C. Computation of Public Su	pport Percenta	age		* * * * * * * * * * * * * * * * * * * *		<u> </u>		
4	Public support percentage for 2013 (line 6, co					14	99.97 %		
15	Public support percentage from 2012 Schedu					15	%		
6a	33 1/3% support test - 2013. If the organiz								
	box and stop here. The organization qualif	ies as a publicly su	pported organization	on			<b>&gt;</b> 🛛		
b	33 1/3% support test - 2012. If the organiz								
	check this box and stop here. The organiza	ation qualifies as e j	publicly supported	organization .		·	▶ □		
7a	10%-facts-and-circumstances test - 2013	. If the organization	did not check a b	ox on line 13, 16a,	or 16b, and line 14	4 is			
	10% or more, and If the organization meets	the "fects-and-circu	ımstances" tesi, cl	heck this box and :	stop here. Explain	in			
	Part IV how the organization meets the "facts-	and-circumstances*	test. The organizati	on qualifies as a pu	blicly supported				
	organization ,						▶ 🔲		
þ	10%-facts-and-circumstances test - 2012	l. If the organization	dld not check a be	ox on line 13, 16a,	16b. or 17a, and II	ne			
	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-circum	nstances" test. The	organization qualifi	es as a publicly				
	supported organization						▶ 🔲		
	Private foundation. If the organization did								
	instructions		<i></i>	<u></u>	<u> </u>				
A						Schedula A (Form 9	90 or 890-EZ) 2013		

Schedule A (Form 390 or 990-EZ) 2013
Part III Support Sch

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.

Cai	lendar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(4) 2012	(-) 2010	/A T
		1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	14, 2010	(6) 2011	(d) 2012	(a) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants ")						ļ
2	Gross recolpts from admissions, merchandise sold or services porformed, 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 bus. under sec 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total Add lines 1 through 5				<del></del>		
7a	Amounts included on lines 1, 2, and 3 roceived from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)			A TO SEE THE SECOND	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
-	tion B. Total Support						
Cele 9	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(o) 2013	(f) Total
	Amounts from line 6  Gross income from Interest, dividends, paymonts received on securities loans, rents, royalties and income from similar sources						
	Unrelated business taxable income (tess section 511 taxes) from businesses acquired after June 30, 1975						· =
1	Add lines 10a and 10b						
2	Other Income, Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
4 (	First five years if the Form 990 is for the orgonganization, check this box and stop here	anization's first, s	second, third, fourt	ı, or fifth tax year s	as a section 501(c	)(3)	<b>&gt;</b> [7]
ect	ion C. Computation of Public Sup	port Percenta	age				· · · · · · · · · · · · · · · · · · ·
	Public support percentage for 2013 (line 8, column		ne 13, column (f))			15	
	Public support percentage from 2012 Schodule A			<u> </u>	<u> </u>	16	
ect	ion D. Computation of Investment	Income Perc	entage			<del></del>	
' 	nvestment income percentage for 2013 (line 1 nvestment income percentage from 2012 Sch	iuc, column (f) di	vided by line 13, co	olumn (f))		17	
a 3	is not more than 33 1/3%, check this box ar	ion did not check	the how on line 14	and line 15 ic me	nn than 22 1/3%	18 and line	
b 3	3 1/3% support tests - 2012. If the organizatine 18 is not more than 33 1/3%, check this both	ion did not check	a boy on line 14 o	riine 10e and line	16 in more than i	22 1/20/	
	rivete foundation. If the organization did not	check a box on I	ine 14, 19a, or 19b	, check this box a	nd see instructions	anizauUN	
٨		. <del></del>	<del></del>	12/21/		6PM (GMT-0	5:00)

### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

# Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2013

Open to Public of

PLAINFIELD AREA HUMANE SOCIETY	Employer Identification number
01. Form 990 governing body review (Part VI, line 11)	22-1554536
Before the 990 is filed, it is reviewed by the Treasurer and other Board Members before	ore it
is filed.	
02. Form 990 availability to public (Part VI, line 18)	
The Federal Form 990 is made available by request to anyone who wents to view or revi	ėw
it.	
03 Governdant d	
03. Governing documents, etc, available to public (Part V	I, line 19)
Governing documents and any related documents are made available by request to the pub	lic