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Change of Accounting Period

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.lrs.gov/form990.

Open to Public Inspection

| | A F | or th | e 2014 calendar year, or tax year beginning | <u>JAN 1, 2015</u> and | ending S | <u>SEP 30, 2015</u> | |
|----------|-------------------------|--------------------|---|--|------------------|------------------------------|-------------------------------|
| | Вс | heck if | C Name of organization | | | D Employer identifi | cation number |
| | ap | plicab | Atlanta Humane Society | / & Society for | the | | |
| | | Addre | Prevention of Cruelty | | | | |
| | \vdash | Name | D b | co minary, inc | • | 58-0 | 685900 |
| | - | Jchanç]inıtıal | | -lucino di tra attiva di di anno l | Da a ma /a unita | | |
| | <u> </u> | _ireturn | Number and street (or P.O. box if mail is not de | • | Room/suite | | |
| | L | Final | 981 Howell Mill Road, | | <u> </u> | 404- | 875-2600 |
| | | termir ated | | d ZIP or foreign postal code | | G Gross receipts \$ | 10,018,088. |
| | | Amen | ded Atlanta, GA 30318 | | | H(a) Is this a group re | |
| | | Application | F Name and address of principal officer:Ca | l Morgan | | for subordinates | o? ☐Yes X No |
| | | pend | same as C above | - | | H(b) Are all subordinates in | ncluded? Yes No |
| | 1 7 | ax-ex | empt status. X 501(c)(3) 501(c) (|) ◀ (insert no.) ☐ 4947(a)(1) | or 527 | 7 · · | list. (see instructions) |
| | | | te: www.atlantahumane.org | / 1 (| | H(c) Group exemptio | - |
| | | | | ssociation Other | 1 Voor | | A State of legal domicile: GA |
| | | rt I | Summary | one p | | oriormation. 10/5[N | I State of legal domicie. GPS |
| | - 4 | | · | | | | - i |
| | မွ | 1 | Briefly describe the organization's mission or mos | | | | |
| | aŭ | | southeastern United State | | | | |
| | er. | 2 | Check this box if the organization disco | ontinued its operations or dispo | sed of more | e than 25% of its net as | |
| | ŏ | 3 | Number of voting members of the governing body | y (Part VI, line 1a) | | 3 | 19 |
| | 9 | 4 | Number of independent voting members of the go | overning body (Part VI, line 1b) | | 4 | 19 |
| | Activities & Governance | 5 | Total number of individuals employed in calendar | year 2014 (Part V, line 2a) | | . 5 | 0 |
| | :ĕ | 6 | Total number of volunteers (estimate if necessary |) | | 6 | 560 |
| | ; 등 | | Total unrelated business revenue from Part VIII, c | | | 7a | 0. |
| | ۹ | | Net unrelated business taxable income from Form | , | · ; | 7b | 0. |
| | \neg | | THE UNIVERSE DUBLICOS TUNDOS MICOMO MOTO TOTAL | 1 000 1, 1/1/19 04 | - :: " | Prior Year | Current Year |
| | | ٥ | Contributions and grants (Part VIII, line 1h) | 9 | | 3,594,937. | 3,301,124. |
| | e e | | _ ' | PR 20 2018 | | 1,762,724. | 1,491,628. |
| | Revenue | | Program service revenue (Part VIII, line 2g) | , , | - (<u>)</u> | 1,045,927. | |
| | B | | Investment income (Part VIII, column (A), lines 3, 4 | | · | | 892,938. |
| | | | Other revenue (Part VIII, column (A), lines 5, 6d, 8 | The state of the s | | 83,960. | 74,829. |
| | \rightarrow | | Total revenue - add lines 8 through 11 (must equa | • | <u> </u> | 6,487,548. | 5,760,519. |
| | | | Grants and similar amounts paid (Part IX, column | | | 0. | 0. |
| | | 14 | Benefits paid to or for members (Part IX, column (| A), line 4) | | 0. | 0. |
| SCANNED | Expenses | 15 | Salaries, other compensation, employee benefits | (Part IX, column (A), lines 5-10) | | 4,135,470. | 3,637,406. |
| \gg | ا <u>ي</u> ا | 16a | Professional fundraising fees (Part IX, column (A), | | | 416,418. | 235,678. |
| Z | ğ. | b | Total fundraising expenses (Part IX, column (D), lir | ne 25) > 919,2 | <u>80.</u> | | |
| ก็า | Ŵ | 17 | Other expenses (Part IX, column (A), lines 11a-11c | d, 11f-24e) | L | 3,697,047. | 3,095,488. |
| Ö | | 18 | Total expenses Add lines 13-17 (must equal Part | IX, column (A), line 25) | | 8,248,935. | 6,968,572. |
| |] | | Revenue less expenses Subtract line 18 from line | | | -1,761,387. | -1,208,053. |
| \equiv | P 8 9 | | | - | B. | ginning of Current Year | End of Year |
| Z | Assets or Balances | 20 | Total assets (Part X, line 16) | | 00 | 42,937,846. | 40,145,716. |
| 0 | Bal | | • | | | | |
| (C) | Fund / | | Total liabilities (Part X, line 26) | - h 00 | <u> </u> | 5,161,658. | 5,495,219. |
| 20 | | | Net assets or fund balances Subtract line 21 from Signature Block | n line 20 | | 37,776,188. | 34,650,497. |
| 응 | | rt II | -1. · · · · · · · · · · · · · · · · · · · | | | | |
| | | | Ities of perjury, I declare that I have examined the return | | | - | y knowledge and belief, it is |
| | true, | correc | t, and complete. Declaration of preparer (other than offe | ier) is based on all information of wi | hich preparei | | |
| | | | | | | | 512016 |
| | Sign | l | Signa are of officer | | | Date | |
| | Here | • | Chris Slee, Chief Fina | ncial Officer | | | |
| | | | Type or print name and title | | | | |
| | | | Print/Type preparer's name | Preparer's signature | | Date Check | PTIN |
| | Paid | | Ann M. Thompson | auch . Houpson | <u>ん</u> ' | 4/06/2016 self-employe | P00719770 |
| | Prep | arer | Firm's name Jones and Kolb | | | Firm's EIN | 58-1763570 |
| | Use (| Only | Firm's address 3475 Piedmont Ro | ad, Suite 1500 | | | |
| | | - | Atlanta 30305 | • • • • • • • • • | | Phone no. (4 | 04)262-7920 |
| | May | the II | RS discuss this return with the preparer shown ab | ove? (see instructions) | | 1 | X Yes No |
| | | 1 11-0 | | | ons. | | Form 990 (2014) |
| | | | | | | | |

| | · | | Yes | No |
|-----|--|------------|-----|-----------------|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? | | | - |
| | If "Yes," complete Schedule A . | 1 | X | ļ |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? | 2 | 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 | 3 | | X |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect | | | |
| | during the tax year? If "Yes," complete Schedule C, Part II | 4 | | X |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or | _ | | v |
| _ | similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III | 5 | | X |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to | 6 | | x |
| 7 | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, | - 6 | | |
| • | 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 | | | _ _ |
| Ū | Schedule D, Part III | 8 | | x |
| 9 | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for | | | |
| | amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? | | | |
| | If "Yes," complete Schedule D, Part IV | 9 | | X |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent | | | |
| | endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | X | |
| 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 | | : | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, | | | l |
| | Part VI | 11a | Х | |
| þ | 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 | | X |
| С | Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total | | | v |
| | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | | <u> </u> |
| 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 | 444 | х | l |
| е | 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 | | 116 | | |
| • | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | x | l |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete | | | |
| | Schedule D, Parts XI and XII | 12a | х | ŀ |
| 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 | | 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>X</u> |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, | | | l |
| | investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 | | | i |
| | or more? If "Yes," complete Schedule F, Parts I and IV | 14b | | <u> X</u> |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any | | | 77 |
| 40 | foreign organization? If "Yes," complete Schedule F, Parts II and IV | 15 | | <u> </u> |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | 16 | | Х |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, | 10 | | |
| " | column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I | 17 | х | |
| 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 | х | ļ |
| 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 | | Х |
| 20a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | X |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | |
| _ | | | 000 | 2014) |

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58-0685900 Page 4 Prevention of Cruelty to Animals, Inc. Form 990 (2014) Part IV Checklist of Required Schedules (continued) No Yes 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or Х 21 domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Х 22 Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 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 X 23 Schedule J 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 X 24a Schedule K If "No", go to line 25a 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24<u>c</u> any tax-exempt bonds? 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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit X transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a 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 X 25b Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or 26 former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," X complete Schedule L, Part II 26 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 X of any of these persons? If "Yes," complete Schedule L, Part III 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 28 instructions for applicable filing thresholds, conditions, and exceptions). X a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M X 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation X contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? X If "Yes," complete Schedule N, Part I 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Х Schedule N. Part II 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations X sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and X Part V, line 1 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 X Did the organization conduct more than 5% of its activities through an entity that is not a related organization

Form 990 (2014)

37

X

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

Note. All Form 990 filers are required to complete Schedule O

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

58-0685900

Page **5**

| Form | 990 (2014) Prevention of Cruelty to Animals, Inc. 58-0685 | <u>900</u> | P | age 5 |
|----------|---|----------------|----------|----------|
| Pa | rt V Statements Regarding Other IRS Filings and Tax Compliance | | | |
| | Check if Schedule O contains a response or note to any line in this Part V | | | |
| | | | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable | 1 | | |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 | | | |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming | 1 | ļ | |
| | (gambling) winnings to prize winners? | 1c | X | |
| 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? | 2b | | |
| | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | 1 | | |
| За | g , | 3a_ | | X |
| b | If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O | 3b | <u> </u> | <u> </u> |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a | | | ,, |
| | financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a_ | | X |
| b | If "Yes," enter the name of the foreign country: | | | |
| | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). | _ | | ,, |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | X |
| b | | _5b | | X |
| - | If "Yes," to line 5a or 5b, did the organization file Form 8886-T? | 5c | | |
| ва | 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_ | | Х |
| D | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts | | | |
| 7 | 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? | 7. | х | |
| a b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7a 7b | X | |
| C | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required | 75 | Λ | - |
| · | to file Form 8282? | 7c | | х |
| d | | -/- | | 21 |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | х |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7 1 | | X |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | |
| _ | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 7h | X | |
| 8 | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the | | | |
| | sponsoring organization have excess business holdings at any time during the year? | 8 | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | |
| а | Did the sponsoring organization make any taxable distributions under section 4966? | 9a | | |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | | |
| 10 | Section 501(c)(7) organizations. Enter. | | | |
| а | Initiation fees and capital contributions included on Part VIII, line 12 | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | | | |
| 11 | 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) | İ | | |
| | 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 | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | |
| а | Is the organization licensed to issue qualified health plans in more than one state? | 13a | | |
| | Note. See the instructions for additional information the organization must report on Schedule O | | | |
| þ | 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 5 deaths are a set of control of the set | | | |
| C | Enter the amount of reserves on hand | | | ~- |
| | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | X |
| <u> </u> | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O | 14b | | |

Prevention of Cruelty to Animals, Inc.

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

| | Check if Schedule O contains a response or note to any line in this Part VI | | | X |
|------------|---|----------|---------------|-------------|
| Sec | tion A. Governing Body and Management | | | |
| | | | Yes | No |
| 1a | Enter the number of voting members of the governing body at the end of the tax year 1a 19 | | | |
| | If there are material differences in voting rights among members of the governing body, or if the governing | | | |
| | body delegated broad authority to an executive committee or similar committee, explain in Schedule O. | | | |
| h | Enter the number of voting members included in line 1a, above, who are independent 1b 19 | | | |
| 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 | | х |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision | | | |
| 3 | of officers, directors, or trustees, or key employees to a management company or other person? | 3 | | х |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | Х | |
| _ | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | X |
| 5 6 | Did the organization become aware during the year of a significant diversion of the organization s assets? | 6 | | X |
| _ | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or | - | | |
| <i>i</i> a | | 7a | | х |
| _ | more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or | / a | - | |
| b | persons other than the governing body? | 76 | | Х |
| ۰ | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | 7b | | |
| 8 | The governing body? | | Х | |
| a | Each committee with authority to act on behalf of the governing body? | 8a 8b | X | |
| 9 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the | ou | ^ | |
| 9 | organization's mailing address? If "Yes," provide the names and addresses in Schedule O | 9 | | Х |
| 202 | tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) | 9 1 | | Α_ |
| | tion D. I offoloo (mis dection b requests information about policies not required by the internal nevertue code.) | | Yes | No |
| 10a | Did the organization have local chapters, branches, or affiliates? | 10a | 163 | X |
| | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, | IVa | | |
| | 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 | Х | |
| | Describe in Schedule O the process, if any, used by the organization to review this Form 990. | 1 Ia | | · · · · · · |
| | Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | Х | |
| u | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | X | |
| | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe | 120 | | |
| Ī | in Schedule O how this was done | 12c | X | |
| 13 | Did the organization have a written whistleblower policy? | 13 | X | |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | X | |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent | | | |
| | persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | ĺ | | |
| а | The organization's CEO, Executive Director, or top management official | 15a | х | |
| h | Other officers or key employees of the organization | 15b | X | |
| - | 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 | | X |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation | 100 | | |
| - | 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 | | |
| Sec | tion C. Disclosure | | . | |
| 17 | List the states with which a copy of this Form 990 is required to be filed ▶GA | | | |
| 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) a | vailabl | е | |
| | for public inspection. Indicate how you made these available. Check all that apply | | | |
| | X Own website Another's website X 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 | financ | al | |
| | statements available to the public during the tax year. | | | |
| 20 | State the name, address, and telephone number of the person who possesses the organization's books and records | | | |
| | The Organization - (404)875-5331 | | | |
| | 1565 Mansell Road, Alpharetta, GA 30009 | | | |
| | | _ | ~~~ | |

Form 990 (2014) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated

Employees, and Independent Contractors

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

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter ·0· in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

| (A) | (B) | | | (C Pos | C) ition | 1 | | (D) Reportable | (E) Reportable | (F) Estimated |
|-------------------------------|------------------------|--------------------------------|-----------------------|-----------------|-------------|------------------------------|--------|----------------------------|--------------------------|-----------------------|
| Name and Title | Average hours per | | not c | heck | more | than | | compensation | compensation | amount of |
| | week | | cerar | | | | | from | from related | other |
| | (list any | 횷 | | | } | | | the | organizations | compensation |
| | hours for | - H | ę. | | ŀ | äe | | organization | (W-2/1099-MISC) | from the |
| | related | stee | fruste | | بوا | Bells | | (W-2/1099-MISC) | | organization |
| | organizations below | ral tr | lonal | | P S | S S | | | | and related |
| | line) | Individual trustee or director | Institutional trustee | Officer | Кеу етрюуее | Highest compensated employee | Former | | | organizations |
| (1) Horace Nalle | 1.00 | | _ | _ | Ť | | - | | | |
| Chair | | \mathbf{x} | | Х | | | | 0. | 0. | 0. |
| (2) Terrence Davis | 1.00 | | | | | | | | | |
| Vice Chair | | X | | X | | | | 0. | 0. | 0 |
| (3) Cindy Voyles | 1.00 | 1 | | | | | | | | |
| Secretary | | X | | X | | _ | | 0. | 0. | 0 |
| (4) Jeffrey Cunningham | 1.00 | | | | | | | | _ | |
| Treasurer | 1 22 | X | | X | | _ | | 0. | 0. | 0 |
| (5) Gray Bethea | 1.00 | ∤ | 1 | | | | | | | |
| Director | 1 00 | X | | | | <u> </u> | | 0. | 0. | 0 |
| (6) Kristin Doherty | 1.00 | | | | | | | | | |
| Director | 1 00 | X | - | | | - | | 0. | 0. | 0. |
| (7) Steve Feldman | 1.00 | ٠, | | | | | | | | |
| Director | 1 00 | X | - | | | | | 0. | 0. | 0. |
| (8) Susan Gordy | 1.00 | X | | | | | | 0. | 0. | 0 |
| Director | 1.00 | ^ | | | | | | 0. | <u> </u> | U . |
| (9) Marsha Holcomb | 1.00 | X | | | | | | 0. | 0. | 0 |
| Director (10) Robert Lindner | 1.00 | 1 | _ | | | - | | 0. | | 0 |
| Director | | x | | | | | | 0. | o . | 0 |
| (11) Angie Maddox | 1.00 | T | | | | | | | | |
| Director | | X | | | | | | 0. | 0. | 0 |
| (12) Virginia Philip | 1.00 | | | | | | | | | |
| Director | | Х | | | | | | 0. | 0. | 0 |
| (13) Debby Pirrung | 1.00 | | | | | | | | | |
| Director | | X | <u> </u> | | | | | 0. | 0. | 0 |
| (14) Wes Protheroe | 1.00 | | | | | | | _ ; | _ | |
| Director | | X | | | | | | 0, | 0. | 0. |
| (15) Kay Quigley | 1.00 | | | | | | | | _ | _ |
| Director | 1 00 | X | - | | | \vdash | | 0. | 0. | 0. |
| (16) Brian Schmitt | 1.00 | v | | | | | | _ | <u> </u> | _ |
| Director (17) Wishes 1 County | 1 00 | X | | $\vdash \vdash$ | | \vdash | | 0. | 0. | 0 . |
| (17) Michael Smith | 1.00 | X | | | | | | 0. | 0. | 0. |
| director 432007 11-07-14 | | ΙΔ. | | | | <u> </u> | | ıU • J | 0.1 | Form 990 (2014 |

| Form 990 (2014) | Prevention | on of Ci | rue | =1t | .y | to |) Z | \n | imals, Inc. | 58-068 | <u> 359</u> | 900 | Page 8 |
|---|---------------------------------------|--|--------------------------------|-----------------------|----------------------|-----------------------------|------------------------------|-------------|--|--|--------------|---|----------------------|
| Part VII Section A. Office | | | | | | | | | Compensated Employe | es (continued) | | | |
| (A) Name and | | (B) Average hours per week | (do box offic | not c | Pos heck ss pe | C) ition more rson | | one h an | (D) Reportable | (E) Reportable compensation from related | | (F) Estima amoui othe | ated nt of |
| | | (list any hours for related organizations below line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | the organization (W-2/1099-MISC) | organizations (W-2/1099-MISC |) | compen from organiz and re organiza | the ation ated |
| (18) Marti Wilson Director | | 1.00 | X | | | | | | 0. | | 0. | | 0. |
| (19) Rev. Janice Brac | ken Wright | 1.00 | X | | | | | | 0. | | 0. | | 0. |
| Director | | 40.00 | _ | | | | | | | · · · · · · · · · · · · · · · · · · · | " | | |
| (20) Cal Morgan President | | | | | X | | | | 0. | ، ا | 0. | | 0. |
| (21) Chris Slee | | 40.00 | | | | | | | | | | | |
| Chief Financial Offic | er | 10100 | | | х | | | | 0. | (| 0. | | 0. |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | : | | | | | | | | | | | | |
| | | | | | | | | | | | | | • |
| 1b Sub-total | _ | | | | | | | > | 0. | |). | | 0. |
| c Total from continuati | | I, Section A | | | | | | | 0. | | 2 • | | 0. |
| d Total (add lines 1b and 2 Total number of individual control of the control of | | ot limited to th | ose | liste | d ab | ove | e) wh | o re | 0. eceived more than \$100 | | 0. | | 0. |
| compensation from the | e organization | | | | | | | | - · | | | , | 0 |
| | | | stee | , ke | y en | nplo | yee, | or l | highest compensated e | mployee on | Γ | Yes | No |
| line 1a? If "Yes," comp | | | | | | | | | | | - | 3 | <u> </u> |
| | | | | | | | | | her compensation from | the organization | ł | | |
| and related organizationDid any person listed organization | • | - | | • | | | | | <i>or such individual</i> ed organization or indivi | dual for services | - | 4 | X |
| rendered to the organi | | olete Schedule | J fo | or su | ich p | oers | on | | | | | 5 | <u> </u> |
| Section B. Independent Co | · · · · · · · · · · · · · · · · · · · | | | | | | | | | | | | |
| | | | | | | | | | hat received more than | | nsat | tion from | |
| une organization, nepo | | ne calendar ye | ar e | nair | ıg w | iun c | or wi | tnir | the organization's tax y | /ear | | (0) | |
| | (A) Name and business | address | NC | NE | : | | | | (B) Description of s | ervices | Со | (C) mpensat | on |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | ***** |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | · | | | | | | + | | | | | |
| 2 Total number of indepe | endent contractors (in | cluding but no | ot lin | nited | to t | thos | se lis | ted | above) who received m | ore than | | | |

\$100,000 of compensation from the organization

| A Income from investment of tax-exempt bond proceeds Foyatties | Pa | rt VII | | | | | | | |
|---|--------------------------|----------|---------------------------------------|------------------|--------------------|------------|----------------------------|---------------------------------------|--|
| 1 a Federated campaigns 1 a Federated campaigns 1 b | | • | Check if Schedule O cont | tains a response | or note to any lin | (A) | Related or exempt function | Unrelated business | Revenuè excluded from tax under |
| 2 a | Grants Jounts | | , • | | | | revenue | revenue | 512 - 514 |
| 2 a | s, Gifts, (nilar Arr | d | Related organizations | 1d | 122,647. | | | | |
| 2 a | ributions Other Sir | f | All other contributions, gifts, gran | nts, and | 3,178,477. | | | | |
| 2 a | ont nd (| _ | | s 1a-1f \$ | 353,563. | | | | |
| 2 a | O B | <u> </u> | Total. Add lines 1a-1f | | Business Code | 3,301,124. | · | | |
| | | _ | | | | 1 005 105 | 1 005 105 | | |
| Total, Add lines 2a 2f | ervice ue | | | <u> </u> | | | | | |
| Total, Add lines 2a 2f | m S | _ | | | | | | · · · · · · · · · · · · · · · · · · · | |
| Total, Add lines 2a 2f | Re | | | | | | | | |
| 3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax exempt bond proceeds 5 Royalities (i) Real (ii) Personal 6 a Gross rents b Less rental expenses c Rental income or (ioss) 7 a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gan or (ioss) 4 Net gam or (ioss) 5 47,152, d Net gam or (ioss) 8 a Gross income from fundraising events (not including \$\frac{122,647,0}{22,647,0} of contributions reported on line 1c) See Part IV, line 18 b Less' direct expenses c Net income or (ioss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a less cost of goods sold b Less: cost of goods sold b Less: cost of goods sold c Net income or (ioss) from gaming activities b Less cost of goods sold c Net income or (ioss) from sales of inventory Miscellaneous Revenue 8 usiness Code 11 a Loss on disposal of equipment | Pro | f | | enue | | | | | |
| Other similar amounts | | g | , , | | > | 1,491,628. | | | |
| 4 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Personal (ii) Personal (ii) Personal (ii) Personal (iii) Personal (iii | | 3 | | dıvıdends, ınter | est, and | 345.786. | | | 345,786. |
| (i) Real (ii) Personal (ii) Personal (iii) Personal Personal (iii) Personal Personal (iii) Personal Persona | | 4 | Income from investment of ta | x-exempt bond | oroceeds 🕨 | | | | |
| 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) 8 a Gross income from fundraising events (not including \$ 122,647, of contributions reported on line 1c) See Part IV, line 18 b Less: direct expenses c Net income or (loss) from gaming activities 9 a Gross sales of inventory, less returns and allowances a Less: cost of goods sold b Less: cost of goods sold b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a Loss on diaposal of equipment b C Adl other revenue e Total. Add lines 11a-11d b -1,549, 1568,006, 0, 891,389, 1420000 | | 5 | Royalties | | . | | | | |
| D Less rental expenses C Rental income or (loss) D C C C C C C C C C | | | | (ı) Real | (ıı) Personal | | | | |
| C Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) 547,152, d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ 122,647, of contributions reported on line 1c) See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a 199,033, b Less: cost of goods sold b 122,655, c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a Loss on disposal of equipment 900099 -1,549, | | 6 a | Gross rents | | | | | | |
| The state of th | | | • | | | | | | |
| 7 a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) 547,152. d Net gain or (loss) 547,152. d Net gain or (loss) 122,647, of contributions reported on line 1c) See Part IV, line 18 a 165,535, b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 a b Less of inventory, less returns and allowances a 199,033, b Less: cost of goods sold b 122,655, c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a Loss on disposal of equipment b C did nother revenue e Total. Add lines 11a-11d P -1,549, 12 Total revenue See instructions. | | | ' ' | L | | | | | |
| assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) 547,152, d Net gain or (loss) 547,152, d Net gain or (loss) 547,152, d Net income or (loss) 122,647, of contributions reported on line 1c) See Part IV, line 18 a 165,535, c Net income from gaming activities See Part IV, line 19 a b Less direct expenses b c Net income or (loss) from gaming activities See Part IV, line 19 a b Less circle expenses b c Net income or (loss) from gaming activities See Part IV, line 19 a b Less circle expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a 199,033, b Less: cost of goods sold b 122,655, c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a Losa on disposal of equipment 900099 -1,549, -1, | | | • • | () 0 | 1 | | | | |
| b Less cost or other basis and sales expenses 3,969,379, c Gain or (loss) 547,152, d Net gain or (loss) 6 Net gain or (loss) 6 Net including \$ 122,647, of contributions reported on line 1c) See Part IV, line 18 a 165,535, c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a 199,033, b 122,655, c Net income or (loss) from sales of inventory | | 7 a | | <u> </u> | 1 | • | | | |
| and sales expenses | | h | • | 4,516,531 | | | | | |
| C Gain or (loss) 8 a Gross income from fundraising events (not including \$ 122,647, of contributions reported on line 1c) See Part IV, line 18 b Less: direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a Loss on disposal of equipment b C d All other revenue e Total. Add lines 11a-11d Total revenue See instructions. 547, 152, 54 | | Ŭ | | 3 969 379 | | | | | |
| d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ 122,647, of contributions reported on line 1c) See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a Loss on disposal of equipment b c d All other revenue e Total. Add lines 11a-11d 12 Total revenue See instructions. 547,152, 54 | | С | • | | | | | | |
| Including \$ 122,647, of contributions reported on line 1c) See Part IV, line 18 b Less' direct expenses b 165,535, c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 a b Less' direct expenses b c Net income or (loss) from gaming activities b c Net income or (loss) from gaming activities b c Net income or (loss) from gaming activities b c Net income or (loss) from sales of inventory b 122,655, c Net income or (loss) from sales of inventory b 122,655, c Net income or (loss) from sales of inventory b 122,655, c Net income or (loss) from sales of inventory b 122,655, c Net income or (loss) from sales of inventory b 122,655, c Net income or (loss) from sales of inventory b 122,655, c Net income or (loss) from sales of inventory c 122,655, c Ne | | | | | _ 1 | 547,152, | | | 547,152, |
| c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a 199,033, b Less: cost of goods sold b 122,655, c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a Loss on disposal of equipment b c d All other revenue e Total. Add lines 11a-11d Total revenue See instructions. 5 760,519, 1,568,006, 0,891,389, 432009 | anu | 8 a | | | | | | | |
| c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a 199,033, b Less: cost of goods sold b 122,655, c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a Loss on disposal of equipment b c d All other revenue e Total. Add lines 11a-11d Total revenue See instructions. 5 760,519, 1,568,006, 0,891,389, 432009 | eve | | - | - | | | | | |
| c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a 199,033, b Less: cost of goods sold b 122,655, c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a Loss on disposal of equipment b c d All other revenue e Total. Add lines 11a-11d Total revenue See instructions. 5 760,519, 1,568,006, 0,891,389, 432009 | Ě | | · · · · · · · · · · · · · · · · · · · | - | 165,535. | | | | |
| c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a 199,033, b Less: cost of goods sold b 122,655, c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a Loss on disposal of equipment b c d All other revenue e Total. Add lines 11a-11d Total revenue See instructions. 5 760,519, 1,568,006, 0,891,389, 432009 | # | þ | Less: direct expenses | b | | | | | |
| Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a Loss on disposal of equipment b c d All other revenue e Total. Add lines 11a-11d Total revenue See instructions. a 199,033, b 122,655, c Net income or (loss) from sales of inventory 76,378, 76,378, -1,549, | ١ | | | _ | • | 0. | | | |
| b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a 199,033, b Less: cost of goods sold b 122,655, c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a Loss on disposal of equipment b c d All other revenue e Total. Add lines 11a-11d 12 Total revenue See instructions. b 10 a Gross sales of inventory, less returns and allowances a 199,033, b Less: cost of goods sold b 122,655, c Net income or (loss) from sales of inventory 76,378, 76,378, 76,37 | | 9 a | • • | | | | | | |
| c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a 199_033, b Less: cost of goods sold b 122_655, c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a Loss on disposal of equipment b c d All other revenue e Total. Add lines 11a-11d 12 Total revenue See instructions. 139_033, 122_655, 76_378, | | | | | | | | | |
| 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code | | | • | | | | | | |
| and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a Loss on disposal of equipment b c d All other revenue e Total. Add lines 11a·11d 12 Total revenue See instructions. 432009 1 1 2 Total revenue See instructions. 1 1 2 1 568 006 1 1 2 1 568 006 1 1 568 006 1 1 568 006 1 1 568 006 1 1 568 006 | | | | - | | | | | |
| b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a Loss on disposal of equipment b c d All other revenue e Total. Add lines 11a-11d Total revenue See instructions. 12 Total revenue See instructions. 13 Total revenue See instructions. 14 Total revenue See instructions. | | 10 a | • • | | 199 033 | | | | |
| c Net income or (loss) from sales of inventory 76,378, 76,378, Miscellaneous Revenue Business Code 11 a Loss on disposal of equipment 900099 -1,549, b -1,549, c -1,549, d All other revenue -1,549, e Total. Add lines 11a·11d -1,549, 12 Total revenue See instructions. 5,760,519, 1,568,006, 0, 891,389, | | ь | | | | | | | |
| Miscellaneous Revenue Business Code | | | | | D | 76 378 | 76 378. | | |
| 11 a Loss on disposal of equipment 900099 -1,549, -1,549, b c d All other revenue e Total. Add lines 11a·11d | | | | | Business Code | | | | |
| c d All other revenue e Total. Add lines 11a·11d ▶ -1.549. 12 Total revenue See instructions. ▶ 5.760.519. 1.568.006. 0.891.389. | | 11 a | Loss on disposal of eq | uipment | 900099 | -1,549, | | | -1,549, |
| d All other revenue e Total. Add lines 11a·11d ▶ -1.549. 12 Total revenue See instructions. ▶ 5.760.519. 1.568.006. 0. 891.389. 432009 | | b | | | | | | | |
| e Total. Add lines 11a·11d 12 Total revenue See instructions. 5 760 519 1 568 006 0 891 389. | | С | | | | | | | |
| 12 Total revenue See instructions. 5 760 519 1 568 006 0 891 389 | | | | | | | | · · · · · · · · · · · · · · · · · · · | |
| 432009 | | _ | | | | | | . | |
| | | 9 | iotal revenue See instructions. | • . | | 5,760,519. | 1 568 006 | 0. | |

| Da . | Check if Schedule O contains a response to include amounts reported on lines 6b, | (A) | his Part IX (B) Program service | (C) | (D) Fundraising |
|--------|--|----------------|---------------------------------|---------------------------------|--|
| | 8b, 9b, and 10b of Part VIII. | Total expenses | Program service expenses | Management and general expenses | expenses |
| 1 | Grants and other assistance to domestic organizations | | | | |
| | and domestic governments. See Part IV, line 21 | | | | |
| 2 | Grants and other assistance to domestic | | | | |
| | individuals See Part IV, line 22 | | | | |
| 3 | Grants and other assistance to foreign | | | | |
| | organizations, foreign governments, and foreign | | | | |
| | individuals. See Part IV, lines 15 and 16 | | | | · |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, | 220 244 | 140 511 | 161 121 | 20 702 |
| | trustees, and key employees | 339,344. | 148,511. | 161,131. | 29,702 |
| 6 | Compensation not included above, to disqualified | | | | |
| | persons (as defined under section 4958(f)(1)) and | - | | | |
| _ | persons described in section 4958(c)(3)(B) | 2,681,950. | 2,053,497. | 299,892. | 328,561 |
| 7 | Other salaries and wages | 2,001,950. | 2,053,491. | 233,032. | 320,301 |
| 8 | Pension plan accruals and contributions (include | 50,518. | 43,475. | 4,847. | 2,196 |
| _ | section 401(k) and 403(b) employer contributions) | 336,583. | 282,525. | 25,904. | 28,154 |
| 9 | Other employee benefits Payroll taxes | 229,011. | 168,313. | 33,018. | 27,680 |
| 0 | Fees for services (non-employees) | 229,011. | 100,313. | 33,010. | 27,000 |
| 1 | Management | 58,160. | | 58,160. | |
| a b | Legal | 30,100. | | 30,100. | |
| C | Accounting | 39,865. | | 39,865. | |
| d | Lobbying | 05,0001 | | 05/0001 | |
| e | Professional fundraising services. See Part IV, line 17 | 235,678. | | | 235,678 |
| f | Investment management fees | 100,794. | | 100,794. | |
| g | Other (If line 11g amount exceeds 10% of line 25, | | | | |
| • | column (A) amount, list line 11g expenses on Sch O.) | 100,599. | 34,694. | 2,881. | 63,024 |
| 2 | Advertising and promotion | 15,092. | 1,712. | | 13,380 |
| 3 | Office expenses | 178,181. | 86,046. | 32,898. | 59,237 |
| 4 | Information technology | 173,286. | 75,643. | 9,786. | 87,857 |
| 15 | Royalties | | | | |
| 16 | Occupancy | 504,443. | 471,288. | 17,288. | 15,867 |
| 7 | Travel | 45,833. | 9,249. | 34,378. | 2,206 |
| 8 | Payments of travel or entertainment expenses | | | | |
| | for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | | | | |
| :0 | Interest | 41,594. | | 41,594. | |
| 1 | Payments to affiliates | | | | |
| 2 | Depreciation, depletion, and amortization | 583,716. | 547,794. | 21,819. | 14,103 |
| 3 | Insurance | 46,923. | 42,251. | 2,384. | 2,288 |
| 4 | Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) | | | | |
| а | Medication | 602,139. | 602,139. | | · · ·· · · · · · · · · · · · · · · · · · |
| b | Supplies | 473,212. | 473,212. | | |
| c | Strategic Marketing | 38,589. | 11,634. | 19,874. | 7,081 |
| d | Outside Lab | 31,410. | 31,410. | | |
| - | All other expenses | 61,652. | 46,114. | 13,272. | 2,266 |
| 5 | Total functional expenses. Add lines 1 through 24e | 6,968,572. | 5,129,507. | 919,785. | 919,280 |
| :6 | Joint costs. Complete this line only if the organization | | | | |
| | reported in column (B) joint costs from a combined | | | | |
| | educational campaign and fundraising solicitation. | | | | |
| | Check here If following SOP 98-2 (ASC 958-720) | | | | |

Form 990 (2014)

| | 990 (i | Balance Sheet | is, inc. | <u> </u> | OOOJJOO Fage II |
|-----------------------------|---------------|--|---------------------------------------|----------|------------------------|
| | $\overline{}$ | Check if Schedule O contains a response or note to any line in this Part X | | | |
| | | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash - non-interest-bearing | | 1 | |
| | 2 | Savings and temporary cash investments . | 3,656,551. | 2 | 1,846,502. |
| | 3 | Pledges and grants receivable, net | 413,800. | 3_ | 1,117,777. |
| | 4 | Accounts receivable, net | <u>2,618.</u> | 4 | 6,369. |
| | 5 | Loans and other receivables from current and former officers, directors, | | | |
| | | trustees, key employees, and highest compensated employees. Complete | | | |
| | | Part II of Schedule L | | 5 | |
| | 6 | Loans and other receivables from other disqualified persons (as defined under | | | |
| | | section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing | | | |
| | | employers and sponsoring organizations of section 501(c)(9) voluntary | | | |
| တ္ | | employees' beneficiary organizations (see instr). Complete Part II of Sch L | | 6_ | |
| Assets | 7 | Notes and loans receivable, net | | 7_ | |
| ĕ | 8 | Inventories for sale or use | 114,551. | 8 | 99,928. |
| | 9 | Prepaid expenses and deferred charges | 183,306. | 9 | 157,825. |
| | _ | Land, buildings, and equipment: cost or other | | | |
| | | basis. Complete Part VI of Schedule D 10a 19,819,657. | | | |
| | b | Less accumulated depreciation 10b 6,636,074. | 13,429,283. | 10c | 13,183,583. |
| | 11 | Investments - publicly traded securities | 21,243,218. | 11 | 20,071,065. |
| | 12 | Investments - other securities See Part IV, line 11 | | 12 | |
| | 13 | Investments - program-related See Part IV, line 11 | | 13 | |
| | 14 | Intangible assets | | 14 | = . = |
| | 15 | Other assets See Part IV, line 11 | 3,894,519. | 15 | 3,662,667. |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 34) | 42,937,846. | 16 | 40,145,716. |
| | 17 | Accounts payable and accrued expenses | 517,038. | 17 | 850,599. |
| | 18 | Grants payable | 317,0301 | 18 | 0007000 |
| | 19 | Deferred revenue | | 19 | |
| | 20 | Tax-exempt bond liabilities | | 20 | |
| | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D | · · · · · · · · · · · · · · · · · · · | 21 | |
| | 22 | Loans and other payables to current and former officers, directors, trustees, | • | | |
| Ě | 22 | key employees, highest compensated employees, and disqualified persons | | | |
| Liabilities | | Complete Part II of Schedule L | | 22 | |
| 7 2 | 00 | | 4,644,620. | 23 | 4,644,620. |
| | 23 | Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties | 4,044,020. | 24 | 4,044,020. |
| | 24 | Other liabilities (including federal income tax, payables to related third | | 24 | |
| | 25 | parties, and other liabilities not included on lines 17-24). Complete Part X of | | | |
| | | | | 25 | |
| | 00 | Schedule D | 5,161,658. | 26 | 5,495,219. |
| _ | 26 | Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ► X and | J,101,030. | 26 | J, 49J, 219. |
| | | , , , , | | | |
| ဗ္ဗ | | complete lines 27 through 29, and lines 33 and 34. | 22 620 076 | 07 | 30 056 524 |
| <u>a</u> | 27 | Unrestricted net assets | 32,638,876. | 27 | 30,056,524. |
| D D | 28 | Temporarily restricted net assets | 724,080. 4,413,232. | 28 | 412,593. 4,181,380. |
| 2 | 29 | Permanently restricted net assets | 4,413,434. | 29 | 4,101,300. |
| 2 | | Organizations that do not follow SFAS 117 (ASC 958), check here | | | |
| Ö | | and complete lines 30 through 34. | | | |
| ser: | 30 | Capital stock or trust principal, or current funds | | 30 | |
| Ä | 31 | Paid-in or capital surplus, or land, building, or equipment fund | | 31 | |
| Net Assets or Fund Balances | 32 | Retained earnings, endowment, accumulated income, or other funds | 20 000 400 | 32 | 24 652 425 |
| ~ | 33 | Total net assets or fund balances | 37,776,188. | 33 | 34,650,497. |
| | 34 | Total liabilities and net assets/fund balances | 42,937,846. | 34 | 40,145,716. |

Form **990** (2014)

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,

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

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

review, or compilation of its financial statements and selection of an independent accountant?

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

X

X

2c

За

Act and OMB Circular A-133?

SCHEDULE A

Department of the Treasury

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

➤ Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Inspection

Name of the organization

Internal Revenue Service Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. **Employer identification number** Atlanta Humane Society & Society for the 58-0685900 Prevention of Cruelty to Animals Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state 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)

A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) Is the organization (v) Amount of monetary (i) Name of supported (ii) EIN (III) Type of organization (vi) Amount of listed in your (described on lines 19 organization support (see other support (see governing document? above or IRC section Instructions) Instructions) Nο (see instructions)) Total

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2014

Atlanta Humane Society & Society for the

Schedule A (Form 990 or 990 EZ) 2014 Prevention of Cruelty to Animals, Inc. 58-0685900 Page 2

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)

| Se | ction A. Public Support | | - | | | | |
|------|---|-----------------------|----------------------|---------------------------|---------------------|---------------------|----------------|
| Cale | ndar year (or fiscal year beginning in) | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
| 1 | Gifts, grants, contributions, and | | | · | | | |
| | membership fees received (Do not | | | | | | j |
| | include any "unusual grants ") | 8362164. | 5549105. | 5814898. | 3594937. | 2766858. | 26087962. |
| 2 | Tax revenues levied for the organ- | | | | | | |
| | ization's benefit and either paid to | | | | | | |
| | or expended on its behalf | | | | | | |
| 3 | The value of services or facilities | | | | | | |
| | furnished by a governmental unit to | | | | | | |
| | the organization without charge | | | | | | |
| 4 | Total. Add lines 1 through 3 | 8362164. | 5549105. | 5814898. | 3594937. | 2766858. | 26087962. |
| 5 | The portion of total contributions | | | | | | |
| | by each person (other than a | | | | | | |
| | governmental unit or publicly | | | | | | |
| | supported organization) included | | | | | | |
| | on line 1 that exceeds 2% of the | | | | | | |
| | amount shown on line 11, | | | | | | |
| | column (f) | | | | | | 9066262. |
| 6 | Public support. Subtract line 5 from line 4 | | , | | | | 17021700. |
| Sec | tion B. Total Support | | | | | | |
| Cale | ndar year (or fiscal year beginning in) 📂 | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
| 7 | Amounts from line 4 | 8362164. | 5549105. | 5814898. | 3594937. | 2766858. | 26087962. |
| 8 | Gross income from interest, | | | | | | |
| | dividends, payments received on | | | | | | |
| | securities loans, rents, royalties | | | | | | |
| | and income from similar sources | 602,836. | 616,861. | 599,201. | 650,585. | 880,052. | 3349535. |
| 9 | Net income from unrelated business | | | | | | |
| | activities, whether or not the | · | | | | | |
| | business is regularly carried on | | | | | | |
| 10 | Other income Do not include gain | | | | | | |
| | or loss from the sale of capital | | | | | | |
| | assets (Explain in Part VI) | | | | | | |
| 11 | Total support. Add lines 7 through 10 | | | | | | 29437497. |
| 12 | Gross receipts from related activities, | etc. (see instruction | ons) | | . [| 12 8 | ,714,492. |
| 13 | First five years. If the Form 990 is for | the organization's | first, second, third | d, fourth, or fifth ta | x year as a section | n 501(c)(3) | |
| | organization, check this box and stop | here | | | | | |
| Sec | tion C. Computation of Publi | c Support Per | centage | | | | |
| 14 | Public support percentage for 2014 (I | ine 6, column (f) di | vided by line 11, c | olumn (f)) | | 14 | <u>57.82 %</u> |
| 15 | Public support percentage from 2013 | Schedule A, Part | II, line 14 | | Į | 15 | <u>60.97 %</u> |
| 16a | 33 1/3% support test - 2014. If the o | - | | line 13, and line 1 | 14 is 33 1/3% or m | ore, check this bo | |
| | stop here. The organization qualifies | | • | | | | ▶ X |
| b | 33 1/3% support test - 2013. If the o | | | | line 15 is 33 1/3% | or more, check th | nis box |
| | and stop here. The organization quali | • | • • | | | | ▶∟ |
| 17a | 10% -facts-and-circumstances test | | | | | | |
| | and if the organization meets the "fac | | | • | • | t VI how the organ | ization |
| | meets the "facts-and-circumstances" | ~ | • | | • | | ▶∟_ |
| b | 10% -facts-and-circumstances test | = | | | | | |
| | more, and if the organization meets th | | | | • | | |
| | organization meets the "facts and circ | | - | • | • | | P |
| 18 | Private foundation. If the organization | n did not check a t | pox on line 13, 16a | <u>, 16b, 17a, or 17b</u> | , check this box a | nd see instructions | s • |

Schedule A (Form 990 or 990-EZ) 2014

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

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

| Se | ction A. Public Support | | | | | | , |
|------|--|-------------------|-----------------------|------------------------|--------------------|----------------------|-------------------|
| Cal | endar year (or fiscal year beginning in) | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
| 1 | Gifts, grants, contributions, and | | | | | | |
| | membership fees received (Do not | | | | | | |
| | include any "unusual grants ") | | | <u> </u> | | | |
| 2 | Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 | Gross receipts from activities that | | | | | | |
| | are not an unrelated trade or bus- | | | | | | |
| | iness under section 513 | | | | | | |
| 4 | Tax revenues levied for the organ- | | | | | | |
| | ization'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 | | - | | | | |
| _ | a Amounts included on lines 1, 2, and | | | | | | |
| | 3 received from disqualified persons | | | | | | |
| t | 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 | | | | | | |
| | Add lines 7a and 7b | | | | | | |
| 8 | Public support (Subtract line 7c from line 6) | | | | i i | | |
| | ction B. Total Support | | | • | | | |
| Cale | endar year (or fiscal year beginning in) | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
| | Amounts from line 6 | | 1 | | | | |
| 10a | a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | | | |
| Ŀ | Unrelated business taxable income | | | | | | |
| | (less section 511 taxes) from businesses | | | | | | |
| | acquired after June 30, 1975 | | 1 | | | | |
| , | Add lines 10a and 10b | | | | | | |
| | Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| 12 | Other income. Do not include gain or loss from the sale of capital | | | | | | |
| 13 | assets (Explain in Part VI.) Total support (Add lines 9, 10c, 11, and 12) | | | | | | |
| | First five years. If the Form 990 is for | the organization' | s first, second. this | d, fourth, or fifth to | ax year as a secti | on 501(c)(3) organiz | ation, |
| | check this box and stop here | | | | <i>,</i> | (-)(-) - 9 - 1 | ▶ □ |
| Sec | ction C. Computation of Publ | ic Support Pe | rcentage | | | ··- | |
| | Public support percentage for 2014 (I | | | column (f)) | | 15 | % |
| 16 | Public support percentage from 2013 | Schedule A, Part | III, line 15 | `" | | 16 | % |
| | ction D. Computation of Inves | | | | | 1 .5 1 | |
| 17 | | | | ne 13. column (f)) | | 17 | % |
| 18 | Investment income percentage from | | | | | 18 | <u>%</u> |
| | 33 1/3% support tests - 2014. If the | | | on line 14, and line | e 15 is more than | | |
| | more than 33 1/3%, check this box a | | | | | | ▶ |
| F | 33 1/3% support tests - 2013. If the | • | - | • | ., | | and |
| • | line 18 is not more than 33 1/3%, che | | | | | = | ▶ □ |
| 20 | Private foundation. If the organization | | - | | | - | |
| | 23 09-17-14 | | | , ; ; ; | | hedule A (Form 99 | 0 or 990-FZ) 2014 |

Atlanta Humane Society & Society for the

Schedule A (Form 990 or 990-EZ) 2014 Prevention of Cruelty to Animals, Inc. 58-0685900 Page 4

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V)

| | Section | A. All | Supporting | organ | izations |
|--|---------|--------|------------|-------|----------|
|--|---------|--------|------------|-------|----------|

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
 (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI**.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

| | _ | Yes | No |
|-------------------|-----------|-------|------|
| 1 | | | |
| | | | |
| 2 | - | | |
| 3a | + | | |
| 3b | | | |
| | - | | |
| 4a | 1 | | |
| 4b | | | |
| | | , | |
| 4c | | | |
| 5a | | | |
| 5b | | | |
| 5c | 4 | | |
| 6 | | | |
| 7 | | | |
| – | \dagger | | |
| 8 | + | | |
| 9a | - | | |
| 9b | 1 | | |
| 9c | + | | |
| 10a | | | |
| 10b n 990 or 9 | | . E7\ | 2014 |

Atlanta Humane Society & Society for the Schedule A (Form 990 or 990-EZ) 2014 Prevention of Cruelty to Animals, Inc. 58-0685900 Page 5 Supporting Organizations (continued) Yes No 11 Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization? 11a **b** A family member of a person described in (a) above? 11b c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. 11c Section B. Type I Supporting Organizations Yes No 1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization Section C. Type II Supporting Organizations Yes No Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s) Section D. Type III Supporting Organizations Yes No Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. Section E. Type III Functionally-Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions): The organization satisfied the Activities Test. Complete line 2 below. h The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions) C Activities Test Answer (a) and (b) below. Yes No 2 a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI Identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities 2a b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. 2b 3 Parent of Supported Organizations. Answer (a) and (b) below.

Schedule A (Form 990 or 990-EZ) 2014

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a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

trustees of each of the supported organizations? Provide details in Part VI.

Atlanta Humane Society & Society for the

| | dule A (Form 990 or 990-EZ) 2014 Prevention of Cruelty t | | | 08-0665900 Page |
|------|---|--------------|-----------------------------|--------------------------------|
| Pa | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | |
| 1 | Check here if the organization satisfied the Integral Part Test as a qualifying | | | uctions. All |
| | other Type III non-functionally integrated supporting organizations must co | omplete Se | ections A through E | , |
| Sect | on A - Adjusted Net Income | | (A) Prior Year | (B) Current Year (optional) |
| 1 | Net short-term capital gain | _ 1 | | |
| 2 | Recoveries of prior-year distributions | 2 | | |
| 3 | Other gross income (see instructions) | 3 | | |
| 4 | Add lines 1 through 3 | 4 | | |
| 5 | Depreciation and depletion | 5 | | |
| 6 | Portion of operating expenses paid or incurred for production or | | | |
| | collection of gross income or for management, conservation, or | l i | | |
| | maintenance of property held for production of income (see instructions) | 6 | | |
| 7 | Other expenses (see instructions) | 7 | | |
| 8 | Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) | 8 | | |
| | on B - Minimum Asset Amount | | (A) Prior Year | (B) Current Year (optional) |
| 1 | Aggregate fair market value of all non-exempt-use assets (see | | | |
| | instructions for short tax year or assets held for part of year) | | | |
| а | Average monthly value of securities | 1a | | |
| | Average monthly cash balances | 1b | | |
| | Fair market value of other non-exempt-use assets | 1c | | |
| | Total (add lines 1a, 1b, and 1c) | 1d | | |
| | Discount claimed for blockage or other | | | |
| | factors (explain in detail in Part VI). | | | |
| 2 | Acquisition indebtedness applicable to non-exempt-use assets | 2 | | |
| 3 | Subtract line 2 from line 1d | 3 | | |
| 4 | Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, | | | |
| | see instructions). | 4 | | |
| 5 | Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | | |
| 6 | Multiply line 5 by 035 | 6 | | |
| 7 | Recoveries of prior-year distributions | 7 | | |
| 8 | Minimum Asset Amount (add line 7 to line 6) | 8 | | |
| ecti | on C - Distributable Amount | | | Current Year |
| 1 | Adjusted net income for prior year (from Section A, line 8, Column A) | 1 | | |
| 2 | Enter 85% of line 1 | 2 | | |
| 3_ | Minimum asset amount for prior year (from Section B, line 8, Column A) | 3 | | |
| 4 | Enter greater of line 2 or line 3 | 4 | | |
| 5 | Income tax imposed in prior year | 5 | | |
| 6 | Distributable Amount. Subtract line 5 from line 4, unless subject to | | | |
| | emergency temporary reduction (see instructions) | 6 | | |
| 7 | Check here if the current year is the organization's first as a non-functional | lv-integrate | ed Type III supporting orga | anization (see |

Schedule A (Form 990 or 990-EZ) 2014

instructions).

Atlanta Humane Society & Society for the

Schedule A (Form 990 or 990-EZ) 2014 Prevention of Cruelty to Animals, Inc. 58-0685900 Page 7 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) **Current Year** Section D - Distributions 1 Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations 3 4 Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI). See instructions. 6 Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. Distributable amount for 2014 from Section C, line 6 Line 8 amount divided by Line 9 amount (ii) (iii) (i) **Excess Distributions** Underdistributions Distributable Section E - Distribution Allocations (see instructions) Pre-2014 Amount for 2014 Distributable amount for 2014 from Section C, line 6 1 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions) Excess distributions carryover, if any, to 2014. ь C e From 2013 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2014 distributable amount Carryover from 2009 not applied (see instructions) Remainder. Subtract lines 3g, 3h, and 3i from 3f 4 Distributions for 2014 from Section D, a Applied to underdistributions of prior years **b** Applied to 2014 distributable amount c Remainder Subtract lines 4a and 4b from 4. Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions) 6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions) Excess distributions carryover to 2015. Add lines 3_j and 4c Breakdown of line 7 8 b d Excess from 2013 e Excess from 2014

Schedule A (Form 990 or 990-EZ) 2014

| Atlanta Humane Society & Society for the |
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| Schedule A (Form 990 or 990-EZ) 2014 Prevention of Cruelty to Animals, Inc. 58-0685900 Page 8 Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b; and Part III, line 12 |
| Also complete this part for any additional information. (See instructions) |
| |
| Part II, Short Year Explanation: |
| The current tax year is for the nine-month period ended September 30, |
| 2015. Effective September 17, 2015, the Society changed its fiscal year |
| end from December 31 to September 30. The five years presented in |
| Schedule A, Part II represent tax years ended December 31, 2011, 2012, |
| 2013, 2014, as well as the current tax year for the nine-month period |
| ended September 30, 2015. |
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SCHEDULE D

Department of the Treasury

Internal Revenue Service

(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.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Atlanta Humane Society & Society for the Prevention of Cruelty to Animals

Employer identification number 58-0685900

| organization answered "Yes" to Form 990, Part IV, line 6 1 Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of contributions to (during year) 4 Aggregate value of and of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization in grantees, donors, and donor advisors in writing that the assets held in donor advised funds are the organization in grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring imperimentable protes benefits. Complete if the organization and the propose conferring imperimentable proteste benefits. Complete if the organization (check all that apply) Proservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Protection of natural habitat Preservation of conservation easements Preservation of a certified historic structure Preservation of conservation easements 2a Preservation of conservation easements 2a Preservation Preservat | Pa | rt I Organizations Maintaining Donor Advise | d Funds or Other Similar Funds or | Accounts. Complete if the |
|--|----|---|---|---|
| Total number at end of year | | | | |
| 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) 4 Aggregate value at end of year 5 Did the organization informal didnors and donor advisors in writing that the assets held in donor advised funds are the organization informal grantees, donors, and donor advisors in writing that the assets held in donor advised funds are the organization informal grantees, donors, and donor advisors in writing that the assets held in donor advised funds are the organization informal grantees, donors, and donor advisors in writing that grant funds can be used only for charatable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring information in the formal provided in the provide | | | | (b) Funds and other accounts |
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| 3 Aggregate value of grants from (dung year) 4 Aggregate value at end of year 5 Did the organization inform all dinors and donor advisors in writing that the assets held in donor advised funds are the organization in property, subject to the organization's exclusive legal control? © Did the organization inform all grantees, donors, and donor advisors in writing that prant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissable purposes benefit? Part III Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. 1 Purpose(s) of conservation essements held by the organization (cleck all that all preservation of an internal habitat Proservation of land for public use (g., recreation or education) Preservation of a certified historic structure Preservation of organization assements 2 Complete lines 2 at through 2d if the organization held a qualified conservation contribution in the form of a conservation essement in the last day of the tax year a Total number of conservation easements 2 b Total acreage restricted by conservation easements 3 b Total acreage restricted by conservation easements in contribution in the form of a conservation easement in contribution in the form of a conservation easement in contribution in the form of a conservation easement in contribution in the form of a conservation easement in contribution (a) 8 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 4 Number of states where property subject to conservation easements is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ 5 Staff and volunteer hours devoted to monitoring, inspecting, and enf | | - | | |
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| b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements in holds? Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, inspection, handling of violations the summary to expense in the peak of the following of the peak of the following amount of expenses incurred in monitoring, inspection, handling of violations of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the tox of the following amounts that describes these etems If t | a | Total number of conservation easements | | |
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| Ilisted in the National Register 2d | d | | ` ' | 20 |
| Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ 4 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements in holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(f)) 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items 10) Revenue included in Form 990, Part VIII, line 1 11 | u | | and of 17700, and not on a motorio structure | 24 |
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| Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ Boes each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included in Form 990, Part X III, line 1 (ii) Assets included in Form 990, Part X III, line 1 (iii) Assets included in Form 990, Part X III, line 1 (iv) Assets included in Form 990, Part X III, line 1 | 4 | | sement is located | |
| violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. Ia If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included in Form 990, Part X \$\$\$\$ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included in Form 990, Part XIII, line 1 | | | | |
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| B Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included in Form 990, Part X | _ | | | |
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| b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue 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, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included in Form 990, Part VIII, line 1 | | historical treasures, or other similar assets held for public exh | nibition, education, or research in furtherance | of public service, provide, in Part XIII, |
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| (i) Revenue 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, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included in Form 990, Part VIII, line 1 | | treasures, or other similar assets held for public exhibition, ed | ducation, or research in furtherance of public | service, provide the following amounts |
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| the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included in Form 990, Part VIII, line 1 | 2 | • • | asures, or other similar assets for financial gai | |
| | | | _ | |
| | а | · | - | > \$ |
| | b | Assets included in Form 990, Part X | | > \$ |

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

Schedule D (Form 990) 2014

33.09 Temporarily restricted endowment

The percentages in lines 2a, 2b, and 2c should equal 100%.

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

bv (i) unrelated organizations (ii) related organizations

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIII the intended uses of the organization's endowment funds

| | Yes | No |
|--------|-----|----|
| 3a(ı) | | X |
| 3a(ii) | | X |
| 3b | | |

Part VI Land, Buildings, and Equipment.

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

| Description of property | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|--|--------------------------------------|---------------------------------|------------------------------|----------------|
| 1a Land | | 2,074,979. | | 2,074,979 |
| b Buildings | | 15,310,232. | 4,979,565. | 10,330,667 |
| c Leasehold improvements | | | | |
| d Equipment | | 1,781,338. | 1,080,736. | 700,602 |
| e Other | | 653,108. | 575,773. | 77,335 |
| Total. Add lines 1a through 1e (Column (d) mus | st equal Form 990, Part X, colu | mn (B), line 10c) | • | 13,183,583. |

Schedule D (Form 990) 2014

| Part VII Investments - Other Securities. | or Cruercy | CO MILMALS, | <u> </u> | - 0003300 Tages |
|--|----------------------|---------------------------|-----------------------|------------------------|
| Complete if the organization answered "Yes" to | o Form 990. Part IV. | line 11b See Form 990. | Part X, line 12 | |
| (a) Description of security or category (including name of security) | (b) Book value | | | l-of-year market value |
| (1) Financial derivatives | | | | |
| (2) Closely-held equity interests | | | | |
| (3) Other | | | | |
| (A) | | | | |
| (B) | | | | |
| (C) | | | | |
| (D) | | | | |
| (E) | | | | |
| (F) | | | | |
| (G) | | | | |
| (H) | | | | |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) | | | | |
| Part VIII Investments - Program Related. | | | | |
| Complete if the organization answered "Yes" to | Form 990, Part IV, | | | <u> </u> |
| (a) Description of investment | (b) Book value | (c) Method of v | aluation. Cost or end | l-of-year market value |
| (1) | | | | <u>.</u> |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| (5) | | | | |
| (6) | | | | |
| (7) | | | | |
| (8) | | | | |
| (9) | | | | |
| Total (Col. (b) must equal Form 990, Part X, col. (B) line 13.) | · | | | |
| Part IX Other Assets. | 5 000 5 1 11 | | B . W 45 | |
| Complete if the organization answered "Yes" to | escription | line 11d See Form 990, | Part X, line 15. | (h) Pook value |
| | | | , | (b) Book value |
| (1) Beneficial Interests in Pe | rpecual Ti | rusts, at FMV | | 3,662,667. |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| (5) (6) | | | | |
| (7) | | | | |
| (8) | | <u> </u> | | |
| (9) | | | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line | 15) | | | 3,662,667. |
| Part X Other Liabilities. | 10./ | | | 3,002,007 |
| Complete if the organization answered "Yes" to | Form 990. Part IV. | line 11e or 11f. See Form | 990. Part X. line 25. | |
| 1. (a) Description of liability | | (b) Book value | | |
| (1) Federal income taxes | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| (5) | | | | |
| (6) | | | | |
| (7) | | | | |
| (8) | | | | |
| (9) | | | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 2 | 25.) | | | |
| 6 Landala Anno and an Anno | | | | |

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

Schedule D (Form 990) 2014

Atlanta Humane Society & Society for the 58-0685900 Page 4 Prevention of Cruelty to Animals, Inc. Schedule D (Form 990) 2014 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a 4,030,277. Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: -1.685.7862a Net unrealized gains (losses) on investments Donated services and use of facilities 2b 2c Recoveries of prior year grants 56,338 2d d Other (Describe in Part XIII) -1,629,448. 2e Add lines 2a through 2d 5,659,725. 3 Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1: 100,794 a Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII) 100,794. Add lines 4a and 4b 760.519. Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XII | Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. 7,155,968. Total expenses and losses per audited financial statements 1 Amounts included on line 1 but not on Form 990, Part IX, line 25. Donated services and use of facilities 2a **b** Prior year adjustments 2b c Other losses 2c 288,190 Other (Describe in Part XIII) 2d 288,190. Add lines 2a through 2d 2e 6,867,778. Subtract line 2e from line 1 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: 100,794 a Investment expenses not included on Form 990, Part VIII, line 7b 4a b Other (Describe in Part XIII) 4h 100,794. c Add lines 4a and 4b 4c Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18, 6,968,572. Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b; Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information Part V, line 4: The Society believes a strong, well-managed endowment can provide a financial cornerstone for the Society's service for future generations. The Society has adopted investment and spending policies that attempt to preserve endowment assets by using funding only when operating cash is insufficient. Under this policy, the core of the endowment funds remain protected over time and the earnings are used to support the Society's

Part X, Line 2:

annual operations, when necessary.

The Society is exempt from income taxes under Section 501(a) as an

organization described in Section 501(c)(3) of the Internal Revenue Code
432054
10-01-14
Schedule D (Form 990) 2014

| Atlanta Humane Society & Society for the Schedule D (Form 990) 2014 Prevention of Cruelty to Animals, Inc. 58-0685900 Page 5 Part XIII Supplemental Information (continued) |
|---|
| of 1986. The Society is subject to examinations of its tax returns by the |
| U.S. Federal, state and local authorities for three years after the |
| returns are filed. Currently, the 2012 through 2015 tax years are subject |
| to examination. However, the Society is not currently under audit nor has |
| it been contacted by the IRS. |
| |
| Part XI, Line 2d - Other Adjustments: |
| Unrealized Loss on Beneficial Interests in Perpetual Trusts -231,852. |
| Cost of Goods Sold - Sales of Inventory 122,655. |
| Costs of Direct Benefit to Donors 165,535. |
| Total to Schedule D, Part XI, Line 2d 56,338. |
| |
| Part XII, Line 2d - Other Adjustments: |
| Cost of Goods Sold - Sales of Inventory 122,655. |
| Costs of Direct Benefit to Donors 165,535. |
| Total to Schedule D, Part XII, Line 2d 288,190. |
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SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

➤ Attach to Form 990 or Form 990-EZ.

2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

► Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.lrs.gov/form 990.

Atlanta Humane Society & Society for the Emplo

Employer identification number

Prevention of Cruelty to Animals, Inc. 58-0685900

Fundraising Activities. Complete if the organization answered "Yes" to Form 990. Part IV, line 17. Form 990-EZ filers are not

| required to complete this pa | irt. | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 00 .0 | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | |
|---|---|---|--|---|---|---|
| 1 Indicate whether the organization ra | ised funds through any of the follow | ing acti | vities | Check all that apply | | |
| a X Mail solicitations | | | | overnment grants | | |
| b X Internet and email solicitation | s f X Solicit | ation of | gover | nment grants | | |
| c X Phone solicitations | g 🗶 Specia | al fundra | using (| events | | |
| d X In-person solicitations | | | | | | |
| 2 a Did the organization have a written | or oral agreement with any individua | al (includ | ding of | fficers, directors, tru | stees or | |
| | Part VII) or entity in connection with | | | | | s 🔲 No |
| b If "Yes," list the ten highest paid inc | dividuals or entities (fundraisers) pur | suant to | agre | ements under which | the fundraiser is to | be |
| compensated at least \$5,000 by th | e organization | | | | | |
| (i) Name and address of individual or entity (fundraiser) | (ii) Actıvıty | or con | Did raiser sustody atrol of utions? | (iv) Gross receipts from activity | (v) Amount paid to (or retained by) fundraiser listed in col (i) | (vi) Amount paid to (or retained by) organization |
| Biondolillo Associates, Inc. | | Yes | No | | | |
| - P.O. Box 812120 Wellesley | Pledge-based fundraising | | х | 0, | 48,000. | 0. |
| Alpha Dog Marketing - 9060 | Marketing communications | | | | | |
| Andermatt Dr. Lincoln, NE | fundraising | | х | 0. | 46,378. | 0, |
| Grizzard - 229 Peachtree St. | Marketing communications | | | | | |
| NE, Suite 1400, Atlanta, GA | fundraising | | х | 0. | 141,300. | 0. |
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| | | | | | | |
| Total | | | | <u> </u> | 235,678, | |
| 3 List all states in which the organizati | on is registered or licensed to solicit | contrib | utions | s or has been notified | t is exempt from re | gistration • |
| or licensing | · · · · · · · · · · · · · · · · · · · | | | | | |
| GA | | | | | | |
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

See Part IV for continuations

Schedule G (Form 990 or 990-EZ) 2014

432081 08-28-14 Atlanta Humane Society & Society for the Schedule G (Form 990 or 990 EZ) 2014 Prevention of Cruelty to Animals, Inc. 58-0685900 Page 2

| Pa | irt | Fundraising Events. Complete if th | | | | |
|-----------------|---|--|----------------------------|--|---------------------------------------|--|
| | <u>, </u> | of fundraising event contributions and gre | | | | its greater than \$5,000 |
| | ĺ | | (a) Event #1 | (b) Event #2 | (c) Other events | (d) Total events |
| | | | | Haute Hounds | 4 | (add col (a) through |
| | | | Bone Appetit (event type) | (event type) | (total number) | col (c)) |
| æ | | | (event type) | (event type) | (total nombor) | |
| Revenue | 1 | Gross receipts | 92,750. | 35,121. | 160,311. | 288,182. |
| | 2 | Less. Contributions | 66,359. | 20,409. | 35,879. | 122,647. |
| | 3 | Gross income (line 1 minus line 2) | 26,391. | 14,712. | 124,432. | 165,535. |
| | 4 | Cash prizes | | | | |
| ñ | 5 | Noncash prizes | | | | |
| xpense | 6 | Rent/facility costs | | | | |
| Direct Expenses | 7 | Food and beverages | | | | |
| ۵ | 8 | Entertainment | | | | |
| | 9 | Other direct expenses | 26,391. | 14,712. | 124,432. | 165,535. |
| | 10 | | | | | 165,535. |
| | | Net income summary. Subtract line 10 from li | ne 3, column (d) | | > | 0. |
| P | art I | Gaming. Complete if the organization a | answered "Yes" to Form | 990, Part IV, line 19, or re | eported more than | |
| _ | | \$15,000 on Form 990-EZ, line 6a. | <u> </u> | | | |
| Revenue | | | (a) Bingo | (b) Pull tabs/instant bingo/progressive bingo | (c) Other gaming | (d) Total gaming (add col (a) through col (c)) |
| æ | | Gross revenue | | | | : |
| _ | Ė | arous revenue | | | | |
| ses | 2 | Cash prizes | | | · · · · · · · · · · · · · · · · · · · | |
| Direct Expenses | 3 | Noncash prizes | | | | |
| Direct | 4 | Rent/facility costs | | | | |
| | 5 | Other direct expenses | | | | |
| | 6 | Volunteer labor | Yes% No | Yes % No | Yes % No | |
| | 7 | Direct expense summary Add lines 2 through | n 5 ın column (d) | | • | |
| _ | 8 | Net gaming income summary Subtract line 7 | from line 1, column (d) | ** | > | |
| а | ls t | ter the state(s) in which the organization conduite organization licensed to conduct gaming action." explain | ctivities in each of these | | | Yes No |
| | | ere any of the organization's gaming licenses re | | | | Yes No |
| 4220 | | 3.28.14 | | | Schedule G /For | m 990 or 990-F7) 2014 |

| 0-6 | Atlanta Humane Society & Society for the sedule G (Form 990 or 990 EZ) 2014 Prevention of Cruelty to Animals, Inc. 58- | 0685900 | Page 3 |
|------------|--|---------------------------------------|--------------|
| | Does the organization conduct gaming activities with nonmembers? | Yes | No No |
| | Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed | | |
| - | to administer charitable gaming? | Yes | ☐ No |
| 13 | Indicate the percentage of gaming activity conducted in: | | |
| a | The organization's facility | 13a | % |
| | An outside facility | 13b | <u>%</u> |
| 14 | Enter the name and address of the person who prepares the organization's gaming/special events books and records: | | |
| | Name | | _ |
| | Address | | |
| 15a | a Does the organization have a contract with a third party from whom the organization receives gaming revenue? | Yes | ☐ No |
| b | o If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount | | |
| | of gaming revenue retained by the third party > \$ | | |
| c | : If "Yes," enter name and address of the third party: | | |
| | Name > | | |
| | Address > | | |
| 16 | Gaming manager information: | | |
| | Name | | |
| | Gaming manager compensation > \$ | | |
| | Description of conjuges projuded | | |
| | Description of services provided | | |
| | | | |
| | Director/officer Employee Independent contractor | | |
| 17 | Mandatory distributions: | | |
| а | Is the organization required under state law to make charitable distributions from the gaming proceeds to | | |
| | retain the state gaming license? | L Yes | ∐ No |
| b | Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the | | |
| Pa | organization's own exempt activities during the tax year \$ Int IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, | lines 9, 9b, 10 | b, 15b, |
| | 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions) | | |
| <u>Sc</u> | hedule G, Part I, Line 2b, List of Ten Highest Paid Fundraise | rs: | |
| <u>(i</u> |) Name of Fundraiser: Biondolillo Associates, Inc. | | |
| , . | | | |
| <u>(i</u> |) Address of Fundraiser: P.O. Box 812120, Wellesley, MA 0248 | 2 | |
| |) Name of Fundraiser: Alpha Dog Marketing | · · · · · · · · · · · · · · · · · · · | |
| , • | \ 344man of Bundanians 0000 3miles 50 74miles 50 5050 | c | |
| <u>(i</u> |) Address of Fundraiser: 9060 Andermatt Dr. Lincoln, NE 6852 | <u>)</u> | |
| <u>(i</u> |) Name of Fundraiser: Grizzard | | |
| 4320 | 83 08-28-14 Schedule G (For | m 990 or 990. | .F7) 2014 |

| Atlanta Humane Society & Society for the |
|--|
| Schedule G (Form 990 or 990 EZ) Prevention of Cruelty to Animals, Inc. 58-0685900 Page 4 Part IV Supplemental Information (continued) |
| · Living Cappionian in the management of the community |
| (i) Address of Fundraiser: |
| 229 Peachtree St. NE, Suite 1400, Atlanta, GA 30303 |
| |
| |
| Part I, Line 2b, Column (v): |
| Alpha Dog Marketing and Grizzard were used to organize integrated |
| |
| marketing campaigns. Biondillo Associates, Inc. was used to help grow |
| pledge-based fundraising. |
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SCHEDULE M (Form 990)

Noncash Contributions

OMB No 1545-0047

Open To Public

Department of the Treasury Internal Revenue Service

Name of the organization

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

Attach to Form 990.

▶ Information about Schedule M (Form 990) and its instructions is at www.lrs.gov/form990. Employer identification number Atlanta Humane Society & Society for the

Inspection

| | <u> </u> | <u>f Crue</u> | lty to A | <u>nimals,</u> | <u>In</u> | C. | | <u>58-(</u> | 0685 | 900 | |
|-----|---|-------------------------------|--|----------------|------------|--------------|-------------|-----------------------------------|-------------|------------|-------------|
| Pai | t I Types of Property | | | | | | · | | | | |
| • | | (a) Check if applicable | (b) Number of contributions of items contribut | | s repor | ted on | | (d Method of d cash contrib | etermı | • | ts |
| 1 | Art Works of art | | | | | | | | | | |
| 2 | Art · Historical treasures | | | | | | ļ | | | | |
| 3 | Art - Fractional interests | | | | | | | | | | |
| 4 | Books and publications | | | | | | | | | | |
| 5 | Clothing and household goods | | | | | | | | | | |
| 6 | Cars and other vehicles . | | | | | | | | | | |
| 7 | Boats and planes | | | | | | | | | | |
| 8 | Intellectual property | | | | | | | | | | |
| 9 | Securities - Publicly traded | X | | 1 | <u>2,</u> | <u> 111.</u> | <u>Fair</u> | Market | <u>. Va</u> | lue | |
| 10 | Securities - Closely held stock | | | _ | | | | | | | |
| 11 | Securities - Partnership, LLC, or trust interests | | | | | | | | | | |
| 12 | Securities - Miscellaneous | | | | | | | | | | |
| 13 | Qualified conservation contribution - Historic structures | | | | | | | | | | |
| 14 | Qualified conservation contribution - Other | | | | | | | | | | |
| 15 | Real estate - Residential | | | | | | | | | | |
| 16 | Real estate - Commercial | | | | | | | | | | |
| 17 | Real estate - Other | | | | | | | | | | |
| 18 | Collectibles | | | | | | | | | | |
| 19 | Food inventory | X | 10,69 | 6 2 | 201, | | | Purcha | | | |
| 20 | Drugs and medical supplies | X | 24 | 6 1 | .14, | 839. | Est. | Purcha | ase | Pri | се |
| 21 | Taxidermy | | | | | | | | | | |
| 22 | Historical artifacts | | | | | | | | | | |
| 23 | Scientific specimens | | | | | | | | | | |
| 24 | Archeological artifacts | | | | | | | | | | |
| 25 | Other ► (<u>Leadership Pr</u>) | X | | 1 | | | | Market | : Va | <u>lue</u> | |
| 26 | Other ► (<u>Gift Card</u>) | X | | 1 | | | | Value | | | |
| 27 | Other ► (<u>Wood Gazebos</u>) | X | | 1 | 1, | 720. | <u>Fair</u> | Market | : Va | lue | |
| 28 | Other () | | | | | | | | | | |
| 29 | Number of Forms 8283 received by the organiz | | | | s | | | | | | |
| | for which the organization completed Form 828 | 33, Part IV, I | Donee Acknowle | dgement | Į | 29 | | | | | |
| | | | | | | | | | | Yes | No |
| 30a | During the year, did the organization receive by | y contributio | n any property | eported in Pa | rt 1, line | s 1 throu | gh 28, th | at it | | | |
| | must hold for at least three years from the date | of the initia | al contribution, a | nd which is no | ot requi | ired to be | used for | | | | |
| | exempt purposes for the entire holding period? | > | | | | | | | 30a | | <u> X</u> |
| b | If "Yes," describe the arrangement in Part II. | | | | | | | | | | |
| 31 | | | | | | | | | | X | |
| 32a | a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? | | | | | | | | | x | |
| b | If "Yes," describe in Part II. | | | | | | | | 32a | | |
| 33 | If the organization did not report an amount in | column (c) f | or a type of prop | erty for which | colum | nn (a) is ch | ecked, | | | | |
| | describe in Part II | | | • | | | | | | | <u></u> |
| LHA | For Paperwork Reduction Act Notice, see | the Instruc | tions for Form | 990. | | | | Schedule M | (Form | 990) (| 2014) |

Schedule M (Form 990) (2014)

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.

Open to Public

OMB No 1545-0047

Inspection

▶ 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.

Atlanta Humane Society & Society for the Prevention of Cruelty to Animals,

Employer identification number 58-0685900

Form 990, Part VI, Section A, line 4: During the year, the bylaws of the Society were revised to reflect best practices in non-profit governance. These changes included implementation of term limits for directors, reduction in board size and strengthening of board protocols. The Society believes these changes will improve governance and effectiveness of the organization. Form 990, Part VI, Section B, line 11: After a draft version of the Form 990 has been prepared, management sends a letter to all Directors, giving them the opportunity to review and comment on the draft. After management addresses all Director comments, the preparer is notified and authorized to prepare the final version of the Form 990. The final Form 990 is signed by an Officer and filed with the IRS. Form 990, Part VI, Section B, Line 12c: Upon hiring a key employee or election of a person to the Board of Directors, the Society's conflict of interest policy must be signed. Annually, key employees and directors reaffirm that no conflicts of interest exist by signing an update form. The Society does not actively investigate conflicts of interest, but does act appropriately when a conflict is identified by any member of the Society. Form 990, Part VI, Section B, Line 15:

The Executive Committee meets annually to evaluate the performance of the

President and determine compensation. Both a performance matrix and

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

432211 08-27-14

Schedule O (Form 990 or 990-EZ) (2014)