Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

A For the 2018 calendar year, or tax year beginning and ending

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/ terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
BANFIELD FOUNDATION

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
18101 S.E. 6TH WAY

City or town, state or province, country, and ZIP or foreign postal code
VANCOUVER, WA 98683

F Name and address of principal officer: ALISON BENNINGER
SAME AS C ABOVE

D Employer identification number
47-4183567

E Telephone number
(360) 784-7866

G Gross receipts $ 3,336,870.

H(a) Is this a group return for subordinates? ☐ Yes ☒ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ BANFIELDFOUNDATION.ORG

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 2015 M State of legal domicile: OR

Part I Summary

1 Briefly describe the organization's mission or most significant activities: TO IMPROVING THE WELL-BEING OF PETS AND COMMUNITIES.

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	8
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	8
5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5	5
6	Total number of volunteers (estimate if necessary)	6	10
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 38	7b	0.

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		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	0.	3,318,292.
9	Program service revenue (Part VIII, line 2g)	0.	0.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	7,904.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	10,674.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	0.	3,336,870.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	2,229,068.
14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	459,989.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 410,485.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	0.	408,950.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	0.	3,098,007.
19	Revenue less expenses. Subtract line 18 from line 12	0.	238,863.

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	3,619,038.	3,810,430.
21	Total liabilities (Part X, line 26)	303,056.	255,585.
22	Net assets or fund balances. Subtract line 21 from line 20	3,315,982.	3,554,845.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

▶ Signature of officer — Date 9/5/19

▶ Type or print name and title: Kim VanSyoc, Executive Director

Paid Preparer Use Only

Print/Type preparer's name: YEE LEE MCGEE	Preparer's signature	Date: 8/16/19	Check ☐ if self-employed	PTIN: P01294356
Firm's name ▶ GARY MCGEE & CO. LLP			Firm's EIN ▶	
Firm's address ▶ 808 S.W. THIRD AVENUE, SUITE 700 PORTLAND, OR 97204			Phone no. (503) 222-2515	

May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☐ No

951 23

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission

BANFIELD FOUNDATION IS COMMITTED TO IMPROVING THE WELL-BEING OF PETS & COMMUNITIES BY ELEVATING THE POWER OF THE PET-HUMAN BOND; STRENGTHENING THE PET WELFARE COMMUNITY; PROVIDING DISASTER RELIEF FOR PETS AND ADVANCING THE SCIENCE OF VETERINARY MEDICINE THROUGH

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No

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

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

If "Yes," describe these changes on Schedule O

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

4a (Code _____) (Expenses $ 2,498,172. including grants of $ 2,229,068.) (Revenue $ _____)

PET ADVOCACY GRANTS - SUPPORTING NONPROFIT ORGANIZATIONAL PROGRAMS THAT ARE DESIGNED TO KEEP PETS HEALTHY AND IN LOVING HOMES.

VETERINARY ASSISTANCE GRANTS - PROVIDING FINANCIAL SUPPORT TO NONPROFIT ORGANIZATIONS TO FUND VETERINARY CARE PROGRAMS FOR PET OWNERS WHO MEET ESTABLISHED QUALIFICATIONS. DURING 2018, BANFIELD FOUNDATION FUNDED 55 GRANTS HELPING 8,398 PETS RECEIVE ACCESS TO VETERINARY CARE THEY WOULD NOT HAVE BEEN ABLE TO AFFORD OTHERWISE.

WELLNESS PLAN ASSISTANCE - PROVIDING ANNUAL PREVENTIVE CARE PLANS FOR QUALIFYING PET OWNERS IN FINANCIAL NEED.

CONTINUED ON SCHEDULE O.

4b (Code _____) (Expenses $ _____ including grants of $ _____) (Revenue $ _____)

4c (Code _____) (Expenses $ _____ including grants of $ _____) (Revenue $ _____)

4d Other program services (Describe in Schedule O)

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

4e Total program service expenses ▶ 2,498,172.

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Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
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 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 provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	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, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		X
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	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		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		X
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
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		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	X	

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	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		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 if not applicable	1a	5		
b	Enter the number of Forms W-2G included in line 1a Enter -0 if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c			

Part V Statements Regarding Other IRS Filings and Tax Compliance *(continued)*

				Yes	No
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	2a	5		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?		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		
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	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b		
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?		7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g	N/A	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098 C?		7h	N/A	
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? N/A		8		
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the sponsoring organization make any taxable distributions under section 4966? N/A		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A		9b		
10	**Section 501(c)(7) organizations.** Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12 N/A	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter				
a	Gross income from members or shareholders N/A	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
12a	**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 N/A	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state? N/A		13a		
	Note. See the instructions for additional information the organization must report on Schedule O				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N		15		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O		16		X

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]

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a: 8			
	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			
b	Enter the number of voting members included in line 1a, above, who are independent 1b: 8			
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		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9		X

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	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?			
a	The organization's CEO, Executive Director, or top management official	15a		X
b	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 in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ OR

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply

[ ] Own website [ ] Another's website [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 financial statements available to the public during the tax year

20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶

ALISON BENNINGER - (360) 784-5879
18101 S.E. 6TH WAY, VANCOUVER, WA 98683

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) BRIAN GARISH BOARD MEMBER	1.00	X						0.	0.	0.
(2) BRENT MAYABB BOARD MEMBER	1.00	X						0.	0.	0.
(3) HANNAH PETERS BOARD MEMBER	1.00	X						0.	0.	0.
(4) KIMBERLY-ANN THERRIEN, D.V.M. BOARD MEMBER	1.00	X						0.	0.	0.
(5) CHARLOTTE WRIGHT BOARD MEMBER	1.00	X						0.	0.	0.
(6) MARTA MONETTI PRESIDENT & CHAIR	1.00	X		X				0.	0.	0.
(7) JEANNINE TAAFFE SECRETARY	1.00	X		X				0.	0.	0.
(8) ERIN MOLONEY TREASURER	1.00	X		X				0.	0.	0.
(9) KIM VAN SYOC EXECUTIVE DIRECTOR	20.00			X				88,356.	0.	4,243.
(10) ALISON BENNINGER DIRECTOR OF FINANCE	40.00			X				101,995.	0.	16,999.
(11) PAULA LITTLE DIRECTOR OF DEVELOPMENT	40.00					X		127,077.	0.	14,663.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Sub-total ▶								317,428.	0.	35,905.
c Total from continuation sheets to Part VII, Section A ▶								0.	0.	0.
d Total (add lines 1b and 1c) ▶								317,428.	0.	35,905.

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

		Yes	No
3	Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*		X
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

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

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a	4,209.				
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d	93,744.				
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	3,220,339.				
	g Noncash contributions included in lines 1a-1f $ 90,250.						
	h Total. Add lines 1a-1f		▶	3,318,292.			
Program Service Revenue		Business Code					
	2 a						
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f		▶				
	3 Investment income (including dividends, interest, and other similar amounts)		▶	7,904.			7,904.
	4 Income from investment of tax-exempt bond proceeds		▶				
	5 Royalties		▶				
		(i) Real	(ii) Personal				
	6 a Gross rents						
	b Less rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)		▶				
		(i) Securities	(ii) Other				
	7 a Gross amount from sales of assets other than inventory						
	b Less cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss)		▶				
Other Revenue	8 a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c) See Part IV, line 18	a					
	b Less direct expenses	b					
	c Net income or (loss) from fundraising events		▶				
	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					
	b Less cost of goods sold	b					
	c Net income or (loss) from sales of inventory		▶				
	Miscellaneous Revenue	Business Code					
	11 a REFUND OF GRANT	900099		10,674.	10,674.		
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d		▶	10,674.			
	12 Total revenue See instructions		▶	3,336,870.	10,674.	0.	7,904.

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	2,214,027.	2,214,027.		
2 Grants and other assistance to domestic individuals See Part IV, line 22	15,041.	15,041.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	211,592.	97,420.	88,643.	25,529.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	191,900.	57,448.		134,452.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	5,109.	850.		4,259.
9 Other employee benefits	19,432.	1,329.	5,855.	12,248.
10 Payroll taxes	31,956.	12,029.	7,352.	12,575.
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	13,547.		13,547.	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O)	83,124.	60,480.	398.	22,246.
12 Advertising and promotion	26,180.	23,266.		2,914.
13 Office expenses	123,433.	12,323.	1,653.	109,457.
14 Information technology	64,403.		64,403.	
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	5,993.		5,993.	
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a DONOR RECOGNITION	54,122.			54,122.
b TAXES & LICENSES & FEES	38,148.	3,959.	1,506.	32,683.
c				
d				
e All other expenses				
25 **Total functional expenses** Add lines 1 through 24e	3,098,007.	2,498,172.	189,350.	410,485.
26 **Joint costs** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

			(A) Beginning of year		(B) End of year
Assets	1	Cash non-interest bearing	61,120.	1	131,469.
	2	Savings and temporary cash investments	2,927,355.	2	3,344,510.
	3	Pledges and grants receivable, net	497,500.	3	256,631.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	114,942.	8	61,424.
	9	Prepaid expenses and deferred charges	18,121.	9	16,396.
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a			
	b	Less accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities		11	
	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		15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	3,619,038.	16	3,810,430.
Liabilities	17	Accounts payable and accrued expenses	196,140.	17	180,585.
	18	Grants payable	106,916.	18	75,000.
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	
	26	**Total liabilities.** Add lines 17 through 25	303,056.	26	255,585.
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☒ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	3,083,617.	27	3,451,218.
	28	Temporarily restricted net assets	232,365.	28	103,627.
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	3,315,982.	33	3,554,845.
	34	Total liabilities and net assets/fund balances	3,619,038.	34	3,810,430.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,336,870.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,098,007.
3	Revenue less expenses Subtract line 2 from line 1	3	238,863.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,315,982.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	3,554,845.

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization	Employer identification number
BANFIELD FOUNDATION	47-4183567

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

The organization is not a private foundation because it is (For lines 1 through 12, check only one box)

07

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ))

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II)

9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions) Enter the name, city, and state of the college or university _____

10 ☐ 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)

11 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

12 ☐ 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 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f Enter the number of supported organizations ☐

g Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1 10 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	(iv) No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")		2,075,449.	3,135,849.	2,949,221.	3,318,292.	11,478,811.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3		2,075,449.	3,135,849.	2,949,221.	3,318,292.	11,478,811.
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)						2,228,882.
6 **Public support.** Subtract line 5 from line 4						9,249,929.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4		2,075,449.	3,135,849.	2,949,221.	3,318,292.	11,478,811.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources		654.	3,015.	4,015.	7,904.	15,588.
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)				97,395.	10,674.	108,069.
11 **Total support.** Add lines 7 through 10						11,602,468.

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

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ [X]

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2017 Schedule A, Part II, line 14	15	%

16a **33 1/3% support test - 2018.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ [ ]

b **33 1/3% support test - 2017.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ [ ]

17a **10% -facts-and-circumstances test - 2018.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ [ ]

b **10% -facts-and-circumstances test - 2017.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ [ ]

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

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13 **Total support** (Add lines 9 10c, 11, and 12)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2018** (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from **2017** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2018.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests - 2017.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

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

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in* **Part VI** *how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain*	1		
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)*	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*	3a		
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*	3b		
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*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below*	4a		
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*	4b		
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*	4c		
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)*	5a		
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?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) 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.**	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)*	7		
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 or 990-EZ)*	8		
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.**	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* **Part VI.**	9b		
c	Did a disqualified person (as defined in line 9a) 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.**	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer 10b below*	10a		
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)*	10b		

Part IV Supporting Organizations *(continued)*

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	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*	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in* **Part VI** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization*	2		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in* **Part VI** *how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)*	1		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
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*	3		

Section E. Type III Functionally Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea***(see instructions).**

a ☐ The organization satisfied the Activities Test *Complete* **line 2** *below*

b ☐ The organization is the parent of each of its supported organizations *Complete* **line 3** *below*

c ☐ The organization supported a governmental entity *Describe in* **Part VI** *how you supported a government entity (see instructions)*

			Yes	No
2	Activities Test **Answer (a) and (b) below.**			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in* **Part VI identify those supported organizations and explain** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities*	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.**			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in* **Part VI.**	3a		
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*	3b		

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 **Adjusted Net Income** (subtract lines 5, 6, and 7 from line 4)	8		

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d **Total** (add lines 1a, 1b, and 1c)	1d		
e **Discount** claimed for blockage or other factors (explain in detail in **Part VI**)			
2 Acquisition indebtedness applicable to non-exempt use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 035	6		
7 Recoveries of prior-year distributions	7		
8 **Minimum Asset Amount** (add line 7 to line 6)	8		

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

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

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in **Part VI**) See instructions	
7 **Total annual distributions.** Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in **Part VI**) See instructions	
9 Distributable amount for 2018 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - **Distribution Allocations** (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required- explain in **Part VI**) See instructions			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014			
c From 2015			
d From 2016			
e From 2017			
f **Total** of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2018 from Section D, line 7 $			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 For result greater than zero, explain in **Part VI.** See instructions			
6 Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1 For result greater than zero, explain in **Part VI** See instructions			
7 **Excess distributions carryover to 2019.** Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

REFUND OF PRIOR YEAR GRANTS AWARDED

2017 AMOUNT: $ 97,395.

2018 AMOUNT: $ 10,674.

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization: BANFIELD FOUNDATION

Employer identification number: 47-4183567

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all 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 impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation 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
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

		Held at the End of the Tax Year
a Total number of conservation easements	2a	
b Total acreage restricted by conservation easements	2b	
c Number of conservation easements on a certified historic structure included in (a)	2c	
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d	

3 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 it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, 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)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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" on 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 on 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 on Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

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

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

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

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

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

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

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

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

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

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

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

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10

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

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

a Board designated or quasi-endowment ▶ _____%
b Permanent endowment ▶ _____%
c Temporarily restricted endowment ▶ _____%

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

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

	Yes	No
3a(i) (i) unrelated organizations		
3a(ii) (ii) related organizations		
3b b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?		

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on 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				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* ▶				0.

Schedule D (Form 990) 2018

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

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

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

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

* Complete if the organization answered "Yes" on Form 990, Part IV, line 12a

1	Total revenue, gains, and other support per audited financial statements			1	4,045,010.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b	708,140.		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines 2a through 2d			2e	708,140.
3	Subtract line 2e from line 1			3	3,336,870.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines 4a and 4b			4c	0.
5	Total revenue Add lines 3 and 4c. *(This must equal Form 990, Part I, line 12)*			5	3,336,870.

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

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

1	Total expenses and losses per audited financial statements			1	3,806,147.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a	708,140.		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines 2a through 2d			2e	708,140.
3	Subtract line 2e from line 1			3	3,098,007.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines 4a and 4b			4c	0.
5	Total expenses Add lines 3 and 4c. *(This must equal Form 990, Part I, line 18)*			5	3,098,007.

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

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization

BANFIELD FOUNDATION

Employer identification number

47-4183567

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes [ ] No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000 Part II can be duplicated if additional space is needed

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ACADIANA ANIMAL AID 142 LE MEDICIN ROAD CARENCRO, LA 70520	23-7414331	501(C)(3)	17,693.	0.			VETERINARY EQUIPMENT GRANT & DISASTER RELIEF
ALASKA NATIVE RURAL VETERINARY INC 3875 GEIST ROAD BOX 301 FAIRBANKS, AK 99709	45-5167681	501(C)(3)	15,000.	0.			VETERINARY ASSISTANCE GRANT
AMERICAN HUMANE 1400 16TH STREET, N.W., SUITE 360 WASHINGTON, DC 20036	84-0432950	501(C)(3)	50,000.	0.			DISASTER RELIEF
ANGELS OF ASSISI 415 CAMPBELL AVENUE S.W. ROANOKE, VA 24016	54-2021941	501(C)(3)	25,100.	0.			VETERINARY EQUIPMENT GRANT & DISASTER RELIEF & SPECIAL GRANT
ANIMAL CARE CENTERS OF NYC 11 PARK PLACE, SUITE 805 NEW YORK, NY 10007	13-3788986	501(C)(3)	10,000.	0.			PET ADVOCACY GRANT
ANIMAL DEFENSE LEAGUE OF TEXAS 11300 NACOGDOCHES ROAD SAN ANTONIO, TX 78217	74-6002033	501(C)(3)	12,895.	0.			VETERINARY EQUIPMENT GRANT & SPECIAL GRANT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 146.

3 Enter total number of other organizations listed in the line 1 table ▶

LHA **For Paperwork Reduction Act Notice, see the Instructions for Form 990.** **Schedule I (Form 990) (2018)**

832101 11-02-18

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANIMAL FRIENDS, INC. 562 CAMP HORNE ROAD PITTSBURGH, PA 15237	25-0951565	501(C)(3)	5,643.	0.			VETERINARY EQUIPMENT GRANT & SPECIAL GRANT
ANIMAL HUMANE NEW MEXICO 615 VIRGINIA STREET S.E. ALBUQUERQUE, NM 87108	85-0207652	501(C)(3)	11,227.	0.			VETERINARY EQUIPMENT GRANT
ANIMAL REFUGE LEAGUE OF GREATER PORTLAND - P.O. BOX 336 - WESTBROOK, ME 04098	01-0212541	501(C)(3)	10,000.	0.			PET ADVOCACY GRANT
ANIMAL RESCUE FOUNDATION MOBILE (ARF) - 6140 RANGELINE ROAD - THEODORE, AL 36582	63-1160447	501(C)(3)	5,665.	0.			PREVENTIVE CARE CLINIC
ANIMAL RESCUE LEAGUE OF IOWA 5452 NE 22ND STREET DES MOINES, IA 50313	42-0680427	501(C)(3)	7,592.	0.			DISASTER RELIEF & FLEA AND TICK
ANIMAL RESCUE NEW ORLEANS 1219 COLISEUM STREET NEW ORLEANS, LA 70130	51-0569173	501(C)(3)	9,693.	0.			VETERINARY ASSISTANCE GRANT & DISASTER RELIEF
ANIMAL WELFARE LEAGUE OF ARLINGTON 2650 S. ARLINGTON MILL DRIVE ARLINGTON, VA 22206	54-0603502	501(C)(3)	9,665.	0.			VETERINARY EQUIPMENT GRANT
ARIZONA ANIMAL WELFARE LEAGUE 25 NORTH 40TH STREET PHOENIX, AZ 85034	23-7149453	501(C)(3)	15,000.	0.			VETERINARY EQUIPMENT GRANT
AUSTIN PETS ALIVE' (APA') 1156 W. CESAR CHAVEZ STREET AUSTIN, TX 78703	74-2893360	501(C)(3)	10,000.	0.			VETERINARY EQUIPMENT GRANT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BALTIMORE ANIMAL RESCUE AND CARE SHELTER - 301 STOCKHOLM STREET - BALTIMORE, MD 21230	86-1130456	501(C)(3)	5,578.	0.			PREVENTIVE CARE CLINIC
BEAVER COUNTY HUMANE SOCIETY 3394 BRODHEAD ROAD ALIQUIPPA, PA 15001	25-1064313	501(C)(3)	5,496.	0.			VETERINARY EQUIPMENT GRANT & SPECIAL GRANT
BEND SPAY AND NEUTER PROJECT 910 S.E. WILSON, A-1 BEND, OR 97702	71-0977598	501(C)(3)	12,773.	0.			VETERINARY EQUIPMENT GRANT & SPECIAL GRANT
BIG DOG RANCH RESCUE 11390 JOG ROAD, SUITE 101 PALM BEACH GARDENS, FL 33418	26-3184971	501(C)(3)	10,000.	0.			DISASTER RELIEF
BRANDYWINE VALLEY SPCA 1212 PHOENIXVILLE PIKE WEST CHESTER, PA 19380	23-1381030	501(C)(3)	10,000.	0.			DISASTER RELIEF
BROTHER WOLF ANIMAL RESCUE P.O. BOX 8195 ASHEVILLE, NC 28814	20-8787719	501(C)(3)	21,106.	0.			DISASTER RELIEF
BUTTE COUNTY HUMANE SOCIETY 2580 FAIR STREET CHICO, CA 95928	94-1580621	501(C)(3)	10,000.	0.			DISASTER RELIEF
C.A.R.E. 4PAWS P.O. BOX 60524 SANTA BARBARA, CA 93160	27-0207473	501(C)(3)	10,000.	0.			VETERINARY ASSISTANCE GRANT
CALIFORNIA VETERINARY MEDICAL FOUNDATION - 1400 RIVER PARK DRIVE - SACRAMENTO, CA 95815	68-0356619	501(C)(3)	10,000.	0.			DISASTER RELIEF

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CAMILLUS HOUSE, INC. 1603 N.W. 7TH AVENUE MIAMI, FL 33136	65-0032862	501(C)(3)	10,000.	0.			PET ADVOCACY GRANT
CAT DEPOT 2542 17TH STREET SARASOTA, FL 34234	20-0217681	501(C)(3)	15,000.	0.			VETERINARY EQUIPMENT GRANT
CAT'S CRADLE OF THE SHENANDOAH VALLEY, INC. - P.O. BOX 2128 - HARRISONBURG, VA 22801	20-3269224	501(C)(3)	10,000.	0.			VETERINARY ASSISTANCE GRANT
CDM CAREGIVING 2409 BROADWAY STREET VANCOUVER, WA 98663	91-1057994	501(C)(3)	10,000.	0.			PET ADVOCACY GRANT
CENTRAL PA HUMANE SOCIETY 1837 E. PLEASANT VALLEY BOULEVARD ALTOONA, PA 16602	25-6071449	501(C)(3)	7,500.	0.			VETERINARY EQUIPMENT GRANT
CHARLESTON ANIMAL SOCIETY 2455 REMOUNT ROAD NORTH CHARLESTON, SC 29406	57-6021863	501(C)(3)	10,200.	0.			VETERINARY EQUIPMENT GRANT & SPECIAL GRANT
CHATHAM COUNTY GOVERNMENT, GA P.O. BOX 8161 SAVANNAH, GA 31412	58-6001113	GOVERNMENT	8,036.	0.			VETERINARY EQUIPMENT GRANT
CHILDREN'S MUSEUM OF HOUSTON 1500 BINZ STREET HOUSTON, TX 77004	74-2178563	501(C)(3)	5,732.	0.			DISASTER RELIEF
CIRCLE THE CITY 300 W. CLARENDON AVENUE, SUITE 200 PHOENIX, AZ 85013	26-2420730	501(C)(3)	8,000.	0.			PET ADVOCACY GRANT

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COMMUNITY VETERINARY CENTER 470 HIGHWAY 99N. EUGENE, OR 97402	93-1149173	501(C)(3)	7,500.	0.			VETERINARY ASSISTANCE GRANT
COMPANION ANIMAL RESCUE OF ASCENSION - 9894 AIRLINE HIGHWAY - SORRENTO, LA 70778	90-0877497	501(C)(3)	14,835.	0.			VETERINARY EQUIPMENT GRANT
COMPASSION WITHOUT BORDERS 1130 BUTLER AVENUE SANTA ROSA, CA 95407	20-4698227	501(C)(3)	6,000.	0.			VETERINARY ASSISTANCE GRANT
COUNTY OF SANTA CLARA ANIMAL CARE AND CONTROL - 12370 MURPHY AVENUE - SAN MARTIN, CA 95046	94-6000533	GOVERNMENT	7,205.	0.			VETERINARY EQUIPMENT GRANT
CUMBERLAND COUNTY ANIMAL CONTROL 4704 CORPORATION DRIVE FAYETTEVILLE, NC 28306	56-6000291	GOVERNMENT	14,000.	0.			VETERINARY EQUIPMENT GRANT
DELAWARE HUMANE ASSOCIATION 701 A STREET WILMINGTON, DE 19801	51-0082499	501(C)(3)	5,500.	0.			VETERINARY ASSISTANCE GRANT
DEPARTMENT OF FAMILY AND PROTECTIVE SERVICES - 701 W. 51ST STREET - AUSTIN, TX 78751	75-2639167	GOVERNMENT	15,000.	0.			PET ADVOCACY GRANT
DOVELEWIS EMERGENCY ANIMAL HOSPITAL - 1945 N.W. PETTYGROVE STREET - PORTLAND, OR 97209	93-0621534	501(C)(3)	14,000.	0.			VETERINARY EQUIPMENT GRANT
DOWNTOWN DOG RESCUE P.O. BOX 90035 PASADENA, CA 91109	46-1958507	501(C)(3)	5,247.	0.			PREVENTIVE CARE CLINIC

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DYLAN'S HEARTS 3508-A GASTON ROAD GREENSBORO, NC 27407	46-2136215	501(C)(3)	10,000.	0.			VETERINARY ASSISTANCE GRANT
EASEL ANIMAL RESCUE LEAGUE P.O. BOX 5903 LAWRENCEVILLE, NJ 08648	80-0155306	501(C)(3)	10,519.	0.			VETERINARY ASSISTANCE GRANT & PREVENTIVE CARE CLINIC
FAYETTEVILLE ANIMAL PROTECTION SOCIETY - P.O. BOX 58195 - FAYETTEVILLE, NC 28305	58-1483982	501(C)(3)	17,500.	0.			DISASTER RELIEF & PET ADVOCACY GRANT
FENCES FOR FIDO 7236 S.W. 27TH AVENUE PORTLAND, OR 97219	30-0554675	501(C)(3)	10,000.	0.			PET ADVOCACY GRANT
FERAL CAT COALITION OF OREGON P.O. BOX 82734 PORTLAND, OR 97282	93-1168181	501(C)(3)	8,750.	0.			VETERINARY ASSISTANCE GRANT
FIRST COAST NO MORE HOMELESS PETS 6817 NORWOOD AVENUE JACKSONVILLE, FL 32208	01-0709158	501(C)(3)	10,000.	0.			DISASTER RELIEF
FIX OUR FERALS 12226 SAN PABLO AVENUE RICHMOND, CA 94805	94-3297241	501(C)(3)	14,925.	0.			VETERINARY EQUIPMENT GRANT
FREDERICK COUNTY HUMANE SOCIETY 550 HIGHLAND STREET, SUITE 200 FREDERICK, MD 21701	52-6013207	501(C)(3)	7,000.	0.			VETERINARY ASSISTANCE GRANT
FREDERICKSBURG REGIONAL SPCA 10819 COURTHOUSE ROAD FREDERICKSBURG, VA 22408	54-0648185	501(C)(3)	6,000.	0.			VETERINARY ASSISTANCE GRANT

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FRIENDS OF ANIMALS IN NEED 105 NARRAGANSETT STREET NORTH KINGSTOWN, RI 02852	56-2393798	501(C)(3)	10,000.	0.			VETERINARY ASSISTANCE GRANT
FRIENDS OF MADISON COUNTY ANIMALS P.O. BOX 191 MARSHALL, NC 28753	56-1865702	501(C)(3)	7,500.	0.			VETERINARY ASSISTANCE GRANT
GATEWAY PET GUARDIANS 5321 MANCHESTER AVENUE ST. LOUIS, IL 63110	26-0096240	501(C)(3)	10,000.	0.			VETERINARY ASSISTANCE GRANT
GOLDEN RETRIEVER RESCUE OF THE ROCKIES - 15350 W. 72ND AVENUE - ARVADA, CO 80007	84-1430940	501(C)(3)	6,400.	0.			VETERINARY EQUIPMENT GRANT
GREATER BIRMINGHAM HUMANE SOCIETY 300 SNOW DRIVE BIRMINGHAM, AL 35209	63-0288810	501(C)(3)	14,878.	0.			VETERINARY EQUIPMENT GRANT & SPECIAL GRANT
GULF COAST HUMANE SOCIETY 3118 CABANISS PARKWAY CORPUS CHRISTI, TX 78415	74-1266245	501(C)(3)	10,244.	0.			VETERINARY EQUIPMENT GRANT
HAPPY HILLS ANIMAL FOUNDATION, INC. - 3143 HAPPY HILLS DRIVE - STALEY, NC 27355	56-1713289	501(C)(3)	7,592.	0.			DISASTER RELIEF & FLEA AND TICK
HARBOR HUMANE SOCIETY 14345 BAGLEY STREET WEST OLIVE, MI 49460	38-1623660	501(C)(3)	15,000.	0.			VETERINARY EQUIPMENT GRANT
HARLEY'S HOPE FOUNDATION P.O. BOX 88146 COLORADO SPRINGS, CO 80908	27-3127204	501(C)(3)	10,000.	0.			VETERINARY ASSISTANCE GRANT

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HARRIS COUNTY VETERINARY PUBLIC HEALTH - 2223 WEST LOOP SOUTH - HOUSTON, TX 77076	76-0454514	GOVERNMENT	25,166.	0.			PREVENTIVE CARE CLINIC & DISASTER RELIEF
HART FOR ANIMALS, INC. P.O. BOX 623 MC HENRY, MD 21541	82-0584608	501(C)(3)	7,000.	0.			VETERINARY ASSISTANCE GRANT
HAVEN HUMANE SOCIETY P.O. BOX 992202 REDDING, CA 96099	94-1634752	501(C)(3)	22,778.	0.			VETERINARY EQUIPMENT GRANT & DISASTER RELIEF
HEAVEN ON EARTH SOCIETY FOR ANIMALS - 7342 FULTON AVENUE - NORTH HOLLYWOOD, CA 91605	77-0538189	501(C)(3)	12,000.	0.			VETERINARY EQUIPMENT GRANT
HELP EVERY LITTLE PAW INC 730 MILITARY DRIVE COEUR D'ALENE, ID 83814	27-1882293	501(C)(3)	10,000.	0.			VETERINARY ASSISTANCE GRANT
HINSDALE HUMANE SOCIETY 21 SALT CREEK LANE HINSDALE, IL 60521	36-2441177	501(C)(3)	15,000.	0.			VETERINARY EQUIPMENT GRANT
HORIZON OUTREACH 256 NORTH SAM HOUSTON PARKWAY EAST HOUSTON, TX 77060	01-0946633	501(C)(3)	5,732.	0.			DISASTER RELIEF
HUMANE RESCUE ALLIANCE 71 OGLETHORPE STREET, N.W. WASHINGTON, DC 20011	53-0219724	501(C)(3)	10,000.	0.			PET ADVOCACY GRANT
HUMANE SOCIETY OF JOHNSON COUNTY 3827 N. GRAHAM ROAD FRANKLIN, IN 46131	31-0970405	501(C)(3)	5,561.	0.			PREVENTIVE CARE CLINIC

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HUMANE SOCIETY OF MANATEE COUNTY 2515 14TH STREET WEST BRADENTON, FL 34205	59-1819652	501(C)(3)	12,000.	0.			VETERINARY EQUIPMENT GRANT
HUMANE SOCIETY OF MORGAN COUNTY 1170 FAIRGROUND ROAD MADISON, GA 30650	58-2110079	501(C)(3)	6,000.	0.			VETERINARY ASSISTANCE GRANT
HUMANE SOCIETY OF NORTH CENTRAL ARKANSAS - 2656 HIGHWAY 201 NORTH - MOUNTAIN HOME, AR 72653	71-0523058	501(C)(3)	6,000.	0.			VETERINARY ASSISTANCE GRANT
HUMANE SOCIETY OF NORTH CENTRAL FLORIDA - 4205 N.W. 6TH STREET - GAINESVILLE, FL 32609	59-1908492	501(C)(3)	10,000.	0.			DISASTER RELIEF
HUMANE SOCIETY OF SAN BERNARDINO VALLEY - 374 W. ORANGE SHOW ROAD - SAN BERNARDINO, CA 92408	23-7078944	501(C)(3)	7,500.	0.			VETERINARY ASSISTANCE GRANT
HUMANE SOCIETY OF SOUTHWEST MISSOURI - 3161 WEST NORTON ROAD - SPRINGFIELD, MO 65803	44-0665046	501(C)(3)	12,000.	0.			VETERINARY EQUIPMENT GRANT
HUMANE SOCIETY OF UTAH 4242 SOUTH 300 WEST MURRAY, UT 84157	87-0256350	501(C)(3)	10,000.	0.			PET ADVOCACY GRANT
HUMANE SOCIETY OF WESTERN MONTANA 5930 U.S. HIGHWAY 93 S. MISSOULA, MT 59804	81-0290933	501(C)(3)	10,000.	0.			PET ADVOCACY GRANT
INGHAM COUNTY ANIMAL CONTROL 600 CURTIS STREET MASON, MI 48854	38-6005629	GOVERNMENT	12,286.	0.			VETERINARY EQUIPMENT GRANT

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ISU FOUNDATION 2505 UNIVERSITY BOULEVARD, P.O. BOX AMES, IA 50010	42-1143702	501(C)(3)	5,500.	0.			VETERINARY EQUIPMENT GRANT
K9 PARTNERS FOR PATRIOTS 15322 AVIATION LOOP DRIVE BROOKSVILLE, FL 34604	47-1871810	501(C)(3)	7,500.	0.			VETERINARY ASSISTANCE GRANT
KOKOMO HUMANE SOCIETY 729 E. HOFFER STREET KOKOMO, IN 46902	35-0989705	501(C)(3)	15,000.	0.			VETERINARY EQUIPMENT GRANT
LAST HOPE, INC P.O. BOX 7025 WANTAGH, NY 11793	11-2618189	501(C)(3)	10,000.	0.			VETERINARY ASSISTANCE GRANT
LATINO ALLIANCE FOR ANIMAL CARE FOUNDATION - P.O. BOX 44342 - PANORAMA CITY, CA 91412	45-4722654	501(C)(3)	14,150.	0.			VETERINARY EQUIPMENT GRANT & SPECIAL GRANT
LEE COUNTY DOMESTIC ANIMAL SERVICES - 5600 BANNER DRIVE - FORT MYERS, FL 33912	59-6000702	GOVERNMENT	5,534.	0.			VETERINARY EQUIPMENT GRANT
LIBERTY HUMANE SOCIETY 235 JERSEY CITY BOULEVARD JERSEY CITY, NJ 07305	22-3585263	501(C)(3)	30,000.	0.			VETERINARY EQUIPMENT GRANT
LITTLE ANGELS PROJECT 29348 ROADSIDE DRIVE AGOURA HILLS, CA 91301	81-1635505	501(C)(3)	10,000.	0.			DISASTER RELIEF
LITTLE SHELTER ANIMAL ADOPTION CENTER - 33 WARNER ROAD - HUNTINGTON, NY 11743	11-6000821	501(C)(3)	12,000.	0.			VETERINARY EQUIPMENT GRANT

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LOUISIANA DEPARTMENT OF AGRICULTURE AND FORESTRY - 5825 FLORIDA BOULEVARD - BATON ROUGE, LA 70806	72-6000722	GOVERNMENT	9,250.	0.			DISASTER RELIEF
LYNCHBURG HUMANE SOCIETY 1211 OLD GRAVES MILL ROAD LYNCHBURG, VA 24502	54-0570901	501(C)(3)	14,825.	0.			VETERINARY EQUIPMENT GRANT
MARY S. ROBERTS PET ADOPTION CENTER - 6165 INDUSTRIAL AVENUE - RIVERSIDE, CA 92504	95-1458062	501(C)(3)	8,000.	0.			VETERINARY ASSISTANCE GRANT
MCKAMEY ANIMAL CENTER 4500 NORTH ACCESS ROAD CHATTANOOGA, TN 37415	01-0824858	501(C)(3)	6,000.	0.			VETERINARY ASSISTANCE GRANT
MERCY CRUSADE SPAY, NEUTER & WELLNESS CLINIC - 2252 CRAIG DRIVE - OXNARD, CA 93036	95-2095029	501(C)(3)	11,198.	0.			VETERINARY EQUIPMENT GRANT
MID-SHORE COUNCIL ON FAMILY VIOLENCE - 8626 BROOKS DRIVE, #102 - EASTON, MD 21601	52-1179234	501(C)(3)	5,500.	0.			PET ADVOCACY GRANT
MONROE COUNTY HUMANE ASSOCIATION P.O. BOX 1334 BLOOMINGTON, IN 47402	35-6064277	501(C)(3)	7,000.	0.			VETERINARY ASSISTANCE GRANT
NORTHWEST ALABAMA SPAY AND NEUTER ASSISTANCE - 2701 MALL DRIVE - FLORENCE, AL 35630	47-2758132	501(C)(3)	7,500.	0.			VETERINARY ASSISTANCE GRANT
OPEN HOUSE MINISTRIES 900 W. 12TH STREET VANCOUVER, WA 98660	94-3028685	501(C)(3)	5,437.	0.			PREVENTIVE CARE CLINIC

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OUR BIG FAT CARIBBEAN RESCUE INC P.O. BOX 1377 VIEQUES, PR 00765	66-0871157	501(C)(3)	17,890.	0.			VETERINARY ASSISTANCE GRANT & FLEA AND TICK
PARIS ANIMAL WELFARE SOCIETY, INC. 6 LEGION ROAD PARIS, KY 40361	61-1224933	501(C)(3)	15,000.	0.			VETERINARY EQUIPMENT GRANT
PASSION FOR PAWS, INC. 7512 WEST LAKE DRIVE WEST PALM BEACH, FL 33406	27-0230849	501(C)(3)	10,000.	0.			VETERINARY ASSISTANCE GRANT
PAWS OF BAINBRIDGE ISLAND AND NORTH KITSAP - P.O. BOX 10811 - BAINBRIDGE ISLAND, WA 98110	91-0952064	501(C)(3)	6,000.	0.			VETERINARY ASSISTANCE GRANT
PETS ARE WONDERFUL SUPPORT (PAWS NY) - 134 W. 29TH STREET, SUITE 802 - NEW YORK, NY 10001	80-0233785	501(C)(3)	7,500.	0.			VETERINARY ASSISTANCE GRANT
PETS IN NEED OF GREATER CINCINNATI, INC. - 520 W. WYOMING AVENUE - CINCINNATI, OH 45215	45-5512473	501(C)(3)	10,000.	0.			VETERINARY ASSISTANCE GRANT
PHILADELPHIA ANIMAL WELFARE SOCIETY - 100 N. 2ND STREET - PHILADELPHIA, PA 19106	26-3862631	501(C)(3)	18,869.	0.			VETERINARY EQUIPMENT GRANT & PREVENTIVE CARE CLINIC
PLACER VETERANS STAND DOWN P.O. BOX 582 ROSEVILLE, CA 95661	47-4822169	501(C)(3)	5,558.	0.			PREVENTIVE CARE CLINIC
PORTLAND ANIMAL WELFARE (PAW) TEAM 1718 N.E. 82ND AVENUE PORTLAND, OR 97220	73-1684628	501(C)(3)	12,646.	0.			VETERINARY ASSISTANCE GRANT & FLEA AND TICK & DISASTER RELIEF

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PORTSMOUTH HUMANE SOCIETY 4022 SEABOARD COURT PORTSMOUTH, VA 23701	54-0560059	501(C)(3)	5,092.	0.			FLEA AND TICK & DISASTER RELIEF
POTTER LEAGUE FOR ANIMALS, INC. 87 OLIPHANT LANE MIDDLETOWN, RI 02842	05-0301553	501(C)(3)	11,185.	0.			VETERINARY EQUIPMENT GRANT
PURRFECT PALS CAT SANCTUARY & ADOPTION CENTERS - 230 MCRAE ROAD N.E. - ARLINGTON, WA 98223	94-3127448	501(C)(3)	15,000.	0.			VETERINARY EQUIPMENT GRANT
ROANOKE VALLEY SPCA 57 BALDWIN AVENUE N.E. ROANOKE, VA 24012	54-0679796	501(C)(3)	10,000.	0.			VETERINARY ASSISTANCE GRANT
ROGUE VALLEY HUMANE SOCIETY 429 N.W. SCENIC DRIVE GRANTS PASS, OR 97527	93-0558872	501(C)(3)	11,005.	0.			VETERINARY EQUIPMENT GRANT & SPECIAL GRANT
SAFE HAVEN OF IOWA COUNTY P.O. BOX 444 WILLIAMSBURG, IA 52361	41-2186380	501(C)(3)	15,000.	0.			VETERINARY EQUIPMENT GRANT
SAM'S HOPE 901A E. WILLOW GROVE AVENUE WYNDMOOR, PA 19038	45-4442014	501(C)(3)	10,000.	0.			VETERINARY ASSISTANCE GRANT
SECOND CHANCE ANIMAL SERVICES 111 YOUNG ROAD EAST BROOKFIELD, MA 01515	04-3490671	501(C)(3)	10,000.	0.			VETERINARY ASSISTANCE GRANT
SECOND CHANCE SHERIDAN CAT RESCUE (SCSCR) - 945 WERCO AVENUE - SHERIDAN, WY 82801	27-1336749	501(C)(3)	10,000.	0.			VETERINARY EQUIPMENT GRANT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SENIORS' PET ASSISTANCE NETWORK P.O. BOX 821173 DALLAS, TX 75382	20-5464573	501(C)(3)	7,000.	0.			VETERINARY ASSISTANCE GRANT
SPAY NEUTER NETWORK 102 E. TRUNK STREET CRANDALL, TX 75114	20-0276988	501(C)(3)	14,386.	0.			PET ADVOCACY GRANT & PREVENTIVE CARE CLINIC
SPAY WAY 7129 S. WESTERN AVENUE OKLAHOMA CITY, OK 73139	47-4903035	501(C)(3)	15,000.	0.			VETERINARY EQUIPMENT GRANT
SPAY/NEUTER ACTION PROJECT P.O. BOX 4450 HUNTSVILLE, AL 35801	63-1121259	501(C)(3)	7,600.	0.			VETERINARY ASSISTANCE GRANT
SPCA OF ANNE ARUNDEL COUNTY 1815 BAY RIDGE AVENUE ANNAPOLIS, MD 21403	52-0609154	501(C)(3)	12,387.	0.			VETERINARY EQUIPMENT GRANT & FLEA AND TICK
ST. FRANCIS PET CARE, INC. P.O. BOX 358462 GAINESVILLE, FL 32635	27-1590456	501(C)(3)	15,000.	0.			VETERINARY EQUIPMENT GRANT
ST. HUBERT'S ANIMAL WELFARE CENTER 575 WOODLAND AVENUE MADISON, NJ 07940	22-1627726	501(C)(3)	10,000.	0.			VETERINARY ASSISTANCE GRANT
STREET PETZ 710 S. MYRTLE AVENUE, #710 MONROVIA, CO 91016	27-1411595	501(C)(3)	9,418.	0.			PREVENTIVE CARE CLINIC
TELLER COUNTY REGIONAL ANIMAL SHELTER - P.O. BOX 904 - DIVIDE, CO 80814	84-1584194	501(C)(3)	11,000.	0.			PET ADVOCACY GRANT & DISASTER RELIEF

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEXAS VETERINARY MEDICAL FOUNDATION - 8104 EXCHANGE DRIVE - AUSTIN, TX 78754	74-1983485	501(C)(3)	7,500.	0.			VETERINARY ASSISTANCE GRANT
THE ANTI-CRUELTY SOCIETY 157 WEST GRAND AVENUE CHICAGO, IL 60654	36-2179814	501(C)(3)	15,000.	0.			VETERINARY EQUIPMENT GRANT
THE BEACON HOMELESS SERVICES 1212 PRAIRIE STREET HOUSTON, TX 77002	71-0933434	501(C)(3)	11,464.	0.			DISASTER RELIEF
THE DUMB FRIENDS LEAGUE 2080 SOUTH QUEBEC STREET DENVER, CO 80231-3298	84-0405254	501(C)(3)	100,000.	0.			SPECIAL GRANTS
THE HUMANE SOCIETY OF THE UNITED STATES - 700 PROFESSIONAL DRIVE - GAITHERSBURG, MD 20879	53-0225390	501(C)(3)	103,702.	0.			PREVENTIVE CARE CLINIC & SPECIAL GRANTS
THE INNER PUP OF NEW ORLEANS 465 LOWERLINE STREET NEW ORLEANS, LA 70118	47-1728816	501(C)(3)	16,801.	0.			VETERINARY ASSISTANCE GRANT & PREVENTIVE CARE CLINIC & DISASTER RELIEF & FLEA AND TICK
THE MONTGOMERY HUMANE SOCIETY 1150 JOHN OVERTON DRIVE MONTGOMERY, AL 36110	63-0351564	501(C)(3)	9,592.	0.			VETERINARY ASSISTANCE GRANT & FLEA AND TICK
THE PIXIE PROJECT 510 N.E. MLK BOULEVARD PORTLAND, OR 97232	20-8430297	501(C)(3)	10,000.	0.			VETERINARY ASSISTANCE GRANT
THE STREET DOG COALITION 220 JACKSON AVENUE FORT COLLINS, CO 80521	81-0793989	501(C)(3)	17,592.	0.			VETERINARY EQUIPMENT GRANT & FLEA AND TICK

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRANSITION PROJECTS 665 N.W. HOYT STREET PORTLAND, OR 97209	93-0591582	501(C)(3)	5,467.	0.			PREVENTIVE CARE CLINIC
TRUSTEES OF TUFTS COLLEGE 169 HOLLAND STREET SOMERVILLE, MA 02144	04-2103634	501(C)(3)	10,000.	0.			VETERINARY ASSISTANCE GRANT
TX PANHANDLE PUPS UNCHAINED 4875 TIERRA DRIVE AMARILLO, TX 79108	81-4907066	501(C)(3)	6,500.	0.			PET ADVOCACY GRANT
UNCHAIN CUMBERLAND COUNTY 7132 SIM CANADY ROAD HOPE MILLS, NC 28348	26-3784960	501(C)(3)	6,679.	0.			PREVENTIVE CARE CLINIC
UNIVERSITY OF FLORIDA COLLEGE OF VETERINARY MEDICINE - P.O. BOX 100125 - GAINESVILLE, FL 32610	59-0974739	501(C)(3)	77,500.	0.			DISASTER RELIEF
UNIVERSITY OF MINNESOTA FOUNDATION 200 OAK STREET S.E., SUITE 500 MINNEAPOLIS, MN 55455	41-6042488	501(C)(3)	15,000.	0.			VETERINARY EQUIPMENT GRANT
VALLEY CATS, INC. 23705 VANOWEN STREET, #130 WEST HILLS, CA 91307	95-4772889	501(C)(3)	10,000.	0.			VETERINARY ASSISTANCE GRANT
VICTOR VALLEY COMMUNITY SERVICES COUNCIL - P.O. BOX 1992 - VICTORVILLE, CA 92393	95-2041473	501(C)(3)	7,500.	0.			VETERINARY ASSISTANCE GRANT
WASHINGTON STATE UNIVERSITY FOUNDATION - 110 GRIMES WAY, BUSTAD HALL - PULLMAN, WA 99164	91-1075542	501(C)(3)	40,000.	0.			SPECIAL GRANTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WEST VALLEY HUMANE SOCIETY 5801 GRAYE LANE CALDWELL, ID 83607	20-8179233	501(C)(3)	15,000.	0.			VETERINARY EQUIPMENT GRANT
WHISKERS ANIMAL WELFARE AND EDUCATION, INC. - P.O. BOX 285 - CARROLL, OH 43112	45-0572084	501(C)(3)	7,500.	0.			VETERINARY ASSISTANCE GRANT
WISCONSIN HUMANE SOCIETY (WHS) 4500 W. WISCONSIN AVENUE MILWAUKEE, WI 53208	39-0810533	501(C)(3)	7,500.	0.			PET ADVOCACY GRANT
YAVAPAI HUMANE SOCIETY 1625 SUNDOG RANCH ROAD PRESCOTT, AZ 86301	86-0327745	501(C)(3)	18,092.	0.			VETERINARY EQUIPMENT GRANT & FLEA AND TICK & SPECIAL GRANTS
YOUCANMAKEADIFFERENCE,INC. P.O. BOX 1050 GRETNA, FL 32332	45-3909484	501(C)(3)	17,500.	0.			VETERINARY ASSISTANCE GRANT & DISASTER RELIEF

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22
Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
WELLNESS PLAN ASSISTANCE	685	15,041.	0.		

Part IV **Supplemental Information.** Provide the information required in Part I, line 2, Part III, column (b), and any other additional information

PART I, LINE 2:

THROUGH THE FOUNDATION'S WELLNESS PLAN PROGRAM, QUALIFYING INDIVIDUALS AND FAMILIES IN FINANCIAL NEED CAN APPLY TO THE FOUNDATION FOR PREVENTIVE CARE FOR THEIR PETS. THE PLANS COVER THE COSTS OF CARE AT BANFIELD PET HOSPITAL LOCATIONS THROUGHOUT THE U.S. THE ASSISTANCE IS GENERALLY FOR A MAXIMUM DOLLAR AMOUNT AND FOR CARE TO BE PROVIDED OVER NO MORE THAN A ONE-YEAR PERIOD OF TIME. THE ASSISTANCE IS FURTHER CONDITIONED UPON THE INDIVIDUAL OR FAMILY ACTUALLY USING THE SERVICES AND SUPPLIES PROVIDED BY THE AGREEMENTS.

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization

BANFIELD FOUNDATION

Employer identification number

47-4183567

Part I Types of Property

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
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				
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				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ (SOFTWARE)	X	1	55,104.	FMV
26	Other ▶ (SUPPLIES)	X	7	35,146.	FMV
27	Other ▶ ( )				
28	Other ▶ ( )				

			Yes	No
29	Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	29		
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?	30a		X
b	If "Yes," describe the arrangement in Part II			
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	31		X
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		X
b	If "Yes," describe in Part II			
33	If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II			

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

SCHEDULE M, PART I, COLUMN (B):

THE NUMBER REPORTED IN COLUMN (B) REPRESENTS THE TOTAL NUMBER OF CONTRIBUTIONS.

SCHEDULE O (Form 990 or 990-EZ)
Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047
2018
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Name of the organization
BANFIELD FOUNDATION

Employer identification number
47-4183567

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

FOSTERING INNOVATION AND EDUCATION.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

DISASTER RELIEF GRANTS - PROVIDING FINANCIAL SUPPORT TO NONPROFIT ANIMAL ORGANIZATIONS AND/OR LOCAL OR STATE GOVERNMENTS OF WHICH THEIR COMMUNITIES HAVE SUFFERED THE IMPACT OF NATURAL OR OTHER DISASTERS. DURING 2018, BANFIELD FOUNDATION FUNDED 34 GRANTS HELPING 79,846 PETS. PRODUCED AND DISTRIBUTED A PSA ON THE IMPORTANCE OF HAVING A DISASTER PREPAREDNESS PLAN AND KIT FOR YOUR PETS.

VETERINARY MEDICAL EQUIPMENT GRANTS - PROVIDING FINANCIAL SUPPORT TO NONPROFIT ORGANIZATIONS TO PURCHASE VETERINARY MEDICAL EQUIPMENT FOR ON-SITE ANIMAL SHELTER VETERINARY CLINICS, LOW-COST VETERINARY PRACTICES, MOBILE VETERINARY UNITS, AND DISASTER RELIEF VEHICLES. DURING 2018, BANFIELD FOUNDATION FUNDED 57 GRANTS TO HELP IMPROVE THE VETERINARY CARE TO 1,413,630 PETS.

FLEA/TICK GRANTS - PROVIDING FIRST SHIELD TRIO, A MONTHLY TOPICAL SPOT-ON PRODUCT, TO DOGS WEIGHING OVER 2.5 POUNDS AND CATS OF ALL SIZES. GRANTEES ARE ABLE TO USE THIS PRODUCT FOR DOGS AND CATS IN THEIR CARE THAT HAVE YET TO BE ADOPTED AND/OR FOR OWNED DOGS AND CATS IN THEIR COMMUNITY.

FORM 990, PART VI, SECTION A, LINE 6:

THE BANFIELD FOUNDATION HAS ONE CLASS OF MEMBERS.

Name of the organization: BANFIELD FOUNDATION

Employer identification number: 47-4183567

FORM 990, PART VI, SECTION A, LINE 7A:

THE SOLE MEMBER OF THE BANFIELD FOUNDATION ELECTS THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS PREPARED BY AN INDEPENDENT CPA FIRM. DIRECTORS ARE GIVEN TIME TO REVIEW THE 990 AND ASK QUESTIONS. ALL FEEDBACK IS REQUESTED WITHIN A WEEK AND IF THERE ARE NO CHANGES, THE FORM 990 WILL BE FINISHED AND SIGNED.

FORM 990, PART VI, SECTION C, LINE 19:

THE FOUNDATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization

BANFIELD FOUNDATION

Employer identification number

47-4183567

Part I **Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II **Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

Part III **Identification of Related Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end of year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity? Yes	(i) No
MEDICAL MANAGEMENT INC DBA BANFIELD PET HOSPITAL - 93-1132244, 18101 S.E. 6TH WAY, VANCOUVER, WA 98683	VETERINARY HOSPITALS	DE	N/A	C CORP					X

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		X
b Gift, grant, or capital contribution to related organization(s)	1b		X
c Gift, grant, or capital contribution from related organization(s)	1c	X	
d Loans or loan guarantees to or for related organization(s)	1d		X
e Loans or loan guarantees by related organization(s)	1e		X
f Dividends from related organization(s)	1f		X
g Sale of assets to related organization(s)	1g		X
h Purchase of assets from related organization(s)	1h		X
i Exchange of assets with related organization(s)	1i		X
j Lease of facilities, equipment, or other assets to related organization(s)	1j		X
k Lease of facilities, equipment, or other assets from related organization(s)	1k		X
l Performance of services or membership or fundraising solicitations for related organization(s)	1l		X
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X	
o Sharing of paid employees with related organization(s)	1o		X
p Reimbursement paid to related organization(s) for expenses	1p	X	
q Reimbursement paid by related organization(s) for expenses	1q		X
r Other transfer of cash or property to related organization(s)	1r		X
s Other transfer of cash or property from related organization(s)	1s		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners sec 501(c)(3) orgs ? Yes	(e) No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership