SCANNED JAN 1 4 2022

Form '990-PF

Department of the Treasury

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

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

► Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No 1545-0047

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Fo	r calen	dar year 2019 or tax year beginning JULY	1 , 2019	9, and	ending	JUNE 30	, 20 20
Nan	ne of fou	ndation			A Employe	er identification numb	er
_HE	ALTHY	PAWS FOUNDATION				27-0871188	
Nun	nber and	street (or P O box number if mail is not delivered to street address)	Room	/surte	B Telephor	ne number (see instruct	ions)
P.C	BOX	50034				203-278-2013	}
City	or town,	state or province, country, and ZIP or foreign postal code			C If exemp	tion application is pend	ling, check here ▶ ☐
BE	LLEVU	E, WA 98015					_
			n of a former public	charity	D 1. Foreig	n organizations, check	here ▶□
		☐ Final return ☐ Amended	return		2 Foroic	n organizations meetin	a the 95% test
		☐ Address change ☐ Name char	nge			here and attach comp	
H	Check	type of organization: Section 501(c)(3) exempt p	rivate foundation	<u>ለአ</u>	E If private	foundation status was	terminated under
	Section	n 4947(a)(1) nonexempt charitable trust Other tax	kable private found	ation	section 5	i07(b)(1)(A), check here	▶□
ī		narket value of all assets at J Accounting method			E If the fou	ndation is in a 60-mon	h termination
	end of	f year (from Part II, col. (c), Other (specify)			under se	ction 507(b)(1)(B), chec	k here ▶ □
	line 16	5) ► \$ 77,268 (Part I, column (d), must be	e on cash basis)				
Р	art l	Analysis of Revenue and Expenses (The total of	(a) Revenue and				(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per		investment icome	(c) Adjusted net income	for charitable purposes
		the amounts in column (a) (see instructions).)	books				(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	389,673				
_	2	Check ► ☐ if the foundation is not required to attach Sch B					
-	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities .					
	5a	Gross rents					1
	b	Net rental income or (loss)					1
ē	6a	Net gain or (loss) from sale of assets not on line 10					
Ę	b	Gross sales price for all assets on line 6a	1				
Revenue	7	Capital gain net income (from Part IV, line 2)		_ F	RECEIV		
æ	8	Net short-term capital gain		f		(とり)	[
	9	Income modifications	77	I NI	ΩV. #	70	
	10a	Gross sales less returns and allowances	10	/ /	7 102	120 8	
	b	Less: Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)		- Oc	DEVI	القال:	1
	11	Other income (attach schedule)				77	<u> </u>
	12	Total. Add lines 1 through 11				7	[
S	13	Compensation of officers, directors, trustees, etc.					
Expenses	14	Other employee salaries and wages					
e	15	Pension plans, employee benefits					
×	16a	Legal fees (attach schedule)					
_	b	Accounting fees (attach schedule)	300	<u>-</u> .			
Operating and Administrative	С	Other professional fees (attach schedule)	_				
tra	17	Interest					
j.	18	Taxes (attach schedule) (see instructions)					ļ ₁
를	19	Depreciation (attach schedule) and depletion			· · · · · · · · · · · · · · · · · · ·	_	
₫	20	Occupancy					
ğ	21	Travel, conferences, and meetings					
a	22	Printing and publications	<u> </u>				
gu	23	Other expenses (attach schedule)	-				-
ati	24	Total operating and administrative expenses.					
ē		Add lines 13 through 23	300				*** ***
Ö	25	Contributions, gifts, grants paid	403,525				403,525
	26	Total expenses and disbursements. Add lines 24 and 25	403,825				403,525
	27	Subtract line 26 from line 12:					
	a	Excess of revenue over expenses and disbursements	-14,152				
	b	Net investment income (if negative, enter -0-)	-	,			
	l C	Adjusted net income (if negative, enter -0-)	L i	I		ĺ	I

1 Cash—non-interest-bearing 91,420 77,268 77,268 77,268 2 avings and temporary cash investments 3 Accounts receivable ► Less: allowance for doubtful accounts ► Carants receivable ► Less: allowance for doubtful accounts ► Carants receivable due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) 7 Other notes and loans receivable (attach schedule) Less. allowance for doubtful accounts ► Less. aclieve for use of use	Pa	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
2 Savings and temporary cash investments 3 Accounts receivable ▶ Less: allowance for doubtful accounts ▶ 4 Piedges receivable ▶ Less: allowance for doubtful accounts ▶ 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) 7 Other notes and lears receivable (attach schedule) ▶ Less: allowance for doubtful accounts ▶ 8 Inventories for sale or use 9 Preparal expenses and deferred charges 9 Preparal expenses and deferred charges 10a investments—U.S. and state government obligations (attach schedule) 1 Investments—Corporate bonds (attach schedule) 1 Less. accumulated depreciation (attach schedule) 1 Less. accumulated depreciation (attach schedule) 1 Less accumulated depreciation (attach schedule) 2 Consistents—Corporate bonds (attach schedule) 2 Corporate bonds (attach schedule) 2 Corporate bonds (attach schedule) 2 Corporate bonds (attach schedule) 3 Corporate bonds (att			should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
Accounts receivable ▶ Less: allowance for doubtful accounts ▶ Pledges receivable ▶ Less: allowance for doubtful accounts ▶ 6 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualfield persons (attach schedule) {see instructions} 7 Other notes and loans receivable attach schedule} ▶ Less. allowance for doubtful accounts ▶ 8 Inventiones for sale or use 9 Prepaid expenses and deferred charges 10a Investments—Corporate stock (attach schedule) 1 Investments—mortgage loans 1 Investments—cher (attach schedule) 1 Investments—mortgage loans 1 Investments—cher (attach schedule) 2 Investments—cher (attach schedule) 3 Investments—		1	Cash—non-interest-bearing	91,420	77,268	77,268
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12 Investments—mortgage loans			Less. accumulated depreciation (attach schedule) ▶			
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17 Accounts payable and accrued expenses		16	Total assets (to be completed by all filers—see the			
18 Grants payable				91,420	77,268	77,268
19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule)		17				
Total liabilities (add lines 17 through 22) Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30. Net assets without donor restrictions 91,420 77,268 Net assets with donor restrictions 91,420 77,268 Foundations that do not follow FASB ASC 958, check here productions that do not follow FASB ASC 958, check here productions that do not follow FASB ASC 958, check here productions that do not follow FASB ASC 958, check here productions that do not follow FASB ASC 958, check here production and complete lines 26 through 30. Capital stock, trust principal, or current funds Part-III Analysis or Capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see instructions) Total liabilities and net assets/fund balances (see instructions) Total liabilities and net assets/fund balances 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29	S					
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Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year — Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) 1 91,420 2 Enter amount from Part I, line 27a 2 -14,152 3 Other increases not included in line 2 (itemize) 3 4 Add lines 1, 2, and 3 4 77,268 5 Decreases not included in line 2 (itemize) 5 6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 6 77,268	Ĕ					
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3 Other increases not included in line 2 (itemize) ► 3 4 Add lines 1, 2, and 3						91,420
4 Add lines 1, 2, and 3	2				2	-14,152
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6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 . 6 77,268	4	Add	lines 1, 2, and 3		4	77,268
	5	Decr	reases not included in line 2 (itemize)		5	
	6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) — I	Part II, column (b), lir	ne 29 <u>. 6</u>	

Part I	V Capital Gains and	Losses for Tax on Investment	Income			
		nd(s) of property sold (for example, real estate, se, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 <u>a</u>						
<u>b</u>						
<u> </u>	.		<u> </u>			
<u>d</u>						
ее	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		n or (loss) (f) minus (g))
а						
b						
С						
d						
е						
	Complete only for assets sho	owing gain in column (h) and owned by the	e foundation	on 12/31/69.		(h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any		t less than -0-) or rom col (h))
a						
b						
C						
<u>d</u>						
<u>е</u> 2	Capital gain net income o	r (net capital loss) { If gain, also				
3	Net short-term capital gai	n or (loss) as defined in sections 122		,	2	
	If gain, also enter in Part	I, line 8, column (c). See instruction	ns. If (loss)	, enter -0- ın }	3	
Part		er Section 4940(e) for Reduced			Income	
lf secti	on 4940(d)(2) applies, leav				·	
		section 4942 tax on the distributable qualify under section 4940(e) Do not		• •	pase period?	☐ Yes ☑ No
1	Enter the appropriate amo	ount in each column for each year; se	ee the instru	uctions before ma	akıng any entries.	
Caler	(a) Base period years ndar year (or tax year beginning in	(b) Adjusted qualifying distributions	Net value o	(c) f noncharitable-use as	ssets Dis	(d) tribution ratio divided by col (c))
	2018	409,50	0	19	7,000	2.08
	2017	184,08	2	12	8,050	1.44
	2016	119,112	1		1,305	1.07
	2015	22,250			0,085	.37
	2014	35,000	0	2	9,550	1.18
2	Total of line 1, column (d)	·			. 2	6.14
3		for the 5-year base period—divide bundation has been in existence if le				1.23
4	Enter the net value of non	charitable-use assets for 2019 from	Part X, line	5	. 4	83,725
5	Multiply line 4 by line 3				. 5	102,982
6	Enter 1% of net investme	nt income (1% of Part I, line 27b)			. 6	0
7	Add lines 5 and 6 .				. 7	102,982
8		ons from Part XII, line 4 ater than line 7, check the box in Par			. 8 hat part using a 1	403,252 % tax rate. See the

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	instru	ctio	าร)			
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.)						
	Date of ruling or determination letter: (attach copy of letter if necessary – see instructions)						
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check						
	here ► 🗹 and enter 1% of Part I, line 27b						
С	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)						
3	Add lines 1 and 2						
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)						
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0						
6	Credits/Payments:			1			
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 6a						
b	Exempt foreign organizations—tax withheld at source						
С	Tax paid with application for extension of time to file (Form 8868) 6c			l			
d	Backup withholding erroneously withheld						
7	Total credits and payments Add lines 6a through 6d						
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8						
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9						
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10						
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ Refunded ▶ 11						
Part	VII-A Statements Regarding Activities		1				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	-	Yes	No			
	participate or intervene in any political campaign?	1a					
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		~			
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials						
	published or distributed by the foundation in connection with the activities.	_					
С	Did the foundation file Form 1120-POL for this year?	1c					
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.	1	i				
	(1) On the foundation. ▶ \$ (2) On foundation managers ▶ \$						
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed						
	on foundation managers. ▶ \$	<u> </u>					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	2					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles						
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .	3					
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a					
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b					
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by <i>General Instruction T</i> .	5					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						
	By language in the governing instrument, or						
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that	_					
_	conflict with the state law remain in the governing instrument?	6	~				
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	~				
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ► WASHINGTON						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General						
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	~				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	<u> </u>					
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes,"		ارا				
	complete Part XIV	9	~				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		· _			

_Par	VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		,
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12		,
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		~	
	Website address ► WWW.HEALTHYPAWSFOUNDATION.ORG			
14	The books are in care of ► TRACI MONTEFUSCO Telephone no. ►	03-278	-2013	
	Located at ► 11120 NE 33RD PL SUITE 200, BELLEVUE, WA ZIP+4 ►	9800	4	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here			▶ 🗆
	and enter the amount of tax-exempt interest received or accrued during the year ▶ 15			
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?.	16	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country ▶			
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?	,		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes Volume	ŀ		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in		i	
_	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance, check here	1.5		1
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2019?	1c		~
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
	6d and 6e) for tax year(s) beginning before 2019?			ii
	If "Yes," list the years ▶ 20, 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			لــــا
	all years listed, answer "No" and attach statement—see instructions.)	2b	ļ	ļ
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20, 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		;	
	at any time during the year?			h
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or			ĺ
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the		İ	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the			
	foundation had excess business holdings in 2019.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	ļ	٧.
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?			ابا
	onamable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b	1	· ·

Pa	ae	6

Pari	VII-B Statements Regarding Activitie	s for W	/hich Fo <u>rm</u>	4720 I	May Be R	equire	ed (contir	nued)			
5a	During the year, did the foundation pay or incur	any am	ount to:							Yes	No
	(1) Carry on propaganda, or otherwise attempt	to influe	nce legislatio	on (sect	on 4945(e))?	☐ Yes	✓ No			
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on,										
	directly or indirectly, any voter registration drive?										
	(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☑ No										
	(4) Provide a grant to an organization other than a charitable, etc., organization described in										
	section 4945(d)(4)(A)? See instructions										
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational										
	purposes, or for the prevention of cruelty to children or animals?										
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described										
	in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions							5b			
	Organizations relying on a current notice regard	ıng dısa	ster assistan	ce, che	ck here .			▶ □		Ì	
С	If the answer is "Yes" to question 5a(4), does										
	because it maintained expenditure responsibility	for the	grant?				Yes Yes	☐ No			
	If "Yes," attach the statement required by Regul	ations s	ection 53.49	45-5(d)							
6a	Did the foundation, during the year, receive any	funds,	directly or inc	directly,	to pay pre	emiums					
	on a personal benefit contract?						☐ Yes	✓ No			
b	Did the foundation, during the year, pay premiur	ns, dıre	ctly or indired	ctly, on	a personal	benefit	contract	?.	6b		~
	If "Yes" to 6b, file Form 8870.						_	_			1
_	At any time during the tax year, was the foundation										
b	If "Yes," did the foundation receive any proceed						ransaction	1?	7b		
8	Is the foundation subject to the section 4960 to							п.			-
Dor	remuneration or excess parachute payment(s) d VIII Information About Officers, Direct										i
r an	Information About Officers, Direct and Contractors	itors, i	rustees, F	Junua	LIOII WIAII	ayers,	migrily r	alu E	прісу	ees,	
1	List all officers, directors, trustees, and found	dation r	nanagers an	d their	compens	ation. S	See instru	ctions			
			e, and average	(c) Cor	npensation	(d) (Contributions	s to	(e) Expe	neo neo	·····
	(a) Name and address		rs per week ed to position		ot paid, ter -0-)		yee benefit i erred compe		other a	allowan	ces
ROBE	RT JACKSON		, , ,				·			_	
P.O. B	OX 50034 BELLEVUE, WA 98015	CEO			0			o			0
		<u> </u>				<u> </u>				-	
2	Compensation of five highest-paid employe "NONE."	es (oth	er than thos	se inclu	ided on li	ne 1—:	see instr	uctions	s). If no	one, e	enter
	NONE.			1			(a) (c)				
	(a) Name and address of each employee paid more than \$50,0	00	(b) Title, and a hours per v		(c) Comper	neation	(d) Contributemployee	benefit	(e) Expe		
					(c) Compe	13211011	plans and c		other a	allowan	ces
	a) Name and address of each employee paid more than \$50,0	00	devoted to po	osition			compens	ation i			
NONE	a) Name and address of each employee paid more than \$50,0			osition		_	compens	ation		•	
NONE	a) Name and address of each employee paid more than \$50,0			osition			compens	sation		•	
NONE	a) Name and address of each employee paid more than \$50,0			osition			compens	ation			
NONE	a) Name and address of each employee paid more than \$50,0			osition			compens	ation	_		
NONE	a) Name and address of each employee paid more than \$50,0			osition			compens	ation			
NONE	a) Name and address of each employee paid more than \$50,0			osition			compens	ation			
NONE	a) Name and address of each employee paid more than \$50,0			osition			compens	ation			
NONE	a) Name and address of each employee paid more than \$50,0			osition			compens	ation			
NONE	a) Name and address of each employee paid more than \$50,0			osition			compens	ation			
	number of other employees paid over \$50,000 .			Osition			compens	ation			

Part VIII	Information About Officers, Directors, Trustees, Foundat and Contractors (continued)	ion Managers, Highly Paid En	iployees,
3 Fiv	e highest-paid independent contractors for professional services. See	instructions. If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
		· · · · · · · · · · · · · · · · · · ·	
			
			
Total num	ber of others receiving over \$50,000 for professional services		
Part IX-			1
	oundation's four largest direct charitable activities during the tax year. Include relevant stations and other beneficiaries served, conferences convened, research papers produced, etc.	tistical information such as the number of	Expenses
1 ADO	PTION GROUP SUPPORT TO ANIMAL RESCUE AND ANIMAL ADOPTION AC	ENCIES	
			403,525
2			
	·		
3			
		•••••	
4 —	· · · · · · · · · · · · · · · · · · ·		
			
Part IX-	Summary of Program-Related Investments (see instruction	ons)	
Describe	the two largest program-related investments made by the foundation during the tax year on	lines 1 and 2	Amount
1			
	<u> </u>		
2			
All other i	program-related investments. See instructions		
3	-		
Total. Add	f lines 1 through 3		L
			Earn QQA-PF (2010)

Part	X Minimum Investment Return (All domestic foundations must complete this part. Fore	ign found	lations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	85,000
c	Fair market value of all other assets (see instructions)	1c	00,000
d	Total (add lines 1a, b, and c)	1d	85,000
e	Reduction claimed for blockage or other factors reported on lines 1a and	·-	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	85,000
4	Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see		55,555
	instructions)	4	1,275
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	83,725
6	Minimum investment return. Enter 5% of line 5	6	4,186
Part		oundatio	
	and certain foreign organizations, check here ▶ ☑ and do not complete this part.)		
\overline{A}	Minimum investment return from Part X, line 6	1	
2a	Tax en investment income for 2019 from Part VI, line 5 2a		
b	Income tax for 2019 (This does not include the tax from Part VI) 2b	1	
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	403,525
b	Program-related investments—total from Part IX-B	1b	,
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	-
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	403,525
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		,
	Enter 1% of Part I, line 27b. See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	403,525
=	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	a whether	
	qualifies for the section 4940(e) reduction of tax in those years.	9 1111011101	
		Fo	rm 990-PF (2019)

Form **990-PF** (2019)

Part	XIII Undistributed Income (see instruction	ons)			
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7	1			
2	Undistributed income, if any, as of the end of 2019				/
а	Enter amount for 2018 only				
b	Total for prior years: 20, 20, 20				
3	Excess distributions carryover, if any, to 2019.	ı			
а	From 2014				
b	From 2015				
C	From 2016	l ke ^{sir} illir	•		• ,
d e	From 2018				
f	Total of lines 3a through e			<u></u>	
4	Qualifying distributions for 2019 from Part XII,		/		
•	line 4: ▶ \$				
а	Applied to 2018, but not more than line 2a .				
b	Applied to undistributed income of prior years				
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election				
	required—see instructions)		/		
d e	Applied to 2019 distributable amount . Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2019		1		
J	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:		1		
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b	Prior years' undistributed income. Subtract line 4b from line 2b				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has/been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable amount—see instructions				
е	Undistributed income for 2018 Subtract line 4a from line 2a. Taxable amount—see instructions				
f	Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)/(Election may be required—see instructions)		•		
8	Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions).				
9	Excess distributions carryover to 2020. Subtract lines 7 and/8 from line 6a				
10	Analysis of line 9.				
а	Excess from 2015				
b	Excess from 20 1/6	'	,		ı
C	Excess from 2017	-		,	,
d e	Excess from 2018 Excess from 2019	H1.1	1 1	υ III μι	n i di
	LAUGGA HUHHEUTA I	I.	i		

	90-PF (2019)	 				Page 10
Part						
1a	If the foundation has received a ruling					
	foundation, and the ruling is effective fo				AUGUST	
b			operating foundation		ction 🗹 4942(j)(3) or 🔲 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
	each year listed	4,186	9,850	6,403	5,565	26,004
	85% of line 2a	3,558	8,373	5,443	4,730	22,104
С	Qualifying distributions from Part XII,					
	Inne 4, for each year listed	403,525	409,500	184,082	119,112	1,116,219
d	for active conduct of exempt activities .					
е	Qualifying distributions made directly					
C	for active conduct of exempt activities					
	Subtract line 2d from line 2c	403,525	409,500	184,082	119,112	1,116,219
3	Complete 3a, b, or c for the	400,025	400,000	104,002	110,112	1,110,210
	alternative test relied upon:					
а	"Assets" alternative test - enter:					
	(1) Value of all assets	77,268	91,420	98,831	107,724	375,243
	(2) Value of assets qualifying under			,		
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test-enter 2/3					
	of minimum investment return shown in					
	Part X, line 6, for each year listed	2,791	6,570	4,269	3,710	17,340
С	"Support" alternative test—enter					
	(1) Total support other than gross					
	investment income (interest, dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	· -					
Part	(4) Gross investment income XV Supplementary Information	n (Complete thi	s part only if th	e foundation ha	ad \$5 000 or mo	re in assets at
rait	any time during the year-			e louildation ne	aα ψο,οοο οι πις	ne in assets at
1	Information Regarding Foundation		J.,			•
-	List any managers of the foundation		ed more than 2%	of the total contr	butions received	ov the foundation
_	before the close of any tax year (but o					,
NONE	, ,					
b	List any managers of the foundation	who own 10% or	more of the stock	of a corporation	(or an equally lar	ge portion of the
	ownership of a partnership or other ea	ntity) of which the fo	oundation has a 1	0% or greater inte	rest.	
NONE						
2	Information Regarding Contribution	n, Grant, Gift, Loan	, Scholarship, et	c., Programs:	·	
	Check here ▶ ☑ If the foundation	only makes contrib	butions to presele	ected charitable c	organizations and	does not accept
	unsolicited requests for funds. If the f		ıfts, grants, etc., t	o individuals or or	ganızatıons under	other conditions,
	complete items 2a, b, c, and d. See in					
а	The name, address, and telephone nu	ımber or email addı	ress of the person	to whom applicat	ions should be ad	dressed.
		.				
b	The form in which applications should	be submitted and	information and n	naterials they shou	uld include.	
						
С	Any submission deadlines.					
الم	Any rootrotions or limitations as	varde auch ca hi	goographical	as charitable for	lde kinde of in-	itutions or other
d	Any restrictions or limitations on av factors:	varus, such as by	geographical are	as, charitable fie	ius, kiilus oi inst	itutions, or other
	idotors.					

					
Par 3	Supplementary Information (cont Grants and Contributions Paid During t	inued)	od for Eud	turo Paymont	
		If recipient is an individual,		rayment	
	Recipient	I show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	any foundation manager or substantial contributor	recipient	CONTIDUION	
а	Paid during the year				
					-
	Takal				
<u>_</u>	Total	· · · · · · · · · · · · · · · · · · ·		▶ 3a	
D	Approved for fature payment				
				•	
					1
	Tatal		<u> </u>	N 01:	1
	Total			<u> ▶</u> 3b	1

Pai	rt XVI	 Analysis of Income-Producing Ad 	tivities				
Ente	r gross	s amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by sect	ion 512, 513, or 514	(e) Related or exempt
			(a)	(b)	(c)	(d)	function income
1	Progr	am service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
	_ `						
	b						
	c _						
	d _						
	е _						
	f _						
	_	ees and contracts from government agencies					_
2		pership dues and assessments					
3		st on savings and temporary cash investments					
4	_	ends and interest from securities		<u> </u>			1
5		ental income or (loss) from real estate:					
		ebt-financed property					<u> </u>
_		ot debt-financed property		-			
6		ental income or (loss) from personal property					
7		investment income					
8		or (loss) from sales of assets other than inventory					
9 10		s profit or (loss) from special events	-				
		revenue: a					
••	b						
	- c						
	d –						
						_	
12	Subto	otal Add columns (b), (d), and (e)					
		A d d line 10 and income (b) (d) and (a)				13	
13	Total	. Add line 12, columns (b), (d), and (e)					
		. Add line 12, columns (b), (d), and (e)	s.)				
See		Belationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		
See Par Lin	works	sheet in line 13 instructions to verify calculation	s.) .ccomplishm	ent of Exemp	t Purposes		mportantly to the
See Par Lin	works rt XVI e No.	Belationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		mportantly to the otions)
See Par Lin	works rt XVI e No.	Belationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		mportantly to the trions)
See Par Lin	works rt XVI e No.	Belationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		mportantly to the tions)
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See Par Lin	works rt XVI e No.	Belationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		mportantly to the stions)

Part	XVII	Information Organization	n Regarding Tran ons	sfers to and Tran	sactions and I	Relationshi	ps With I	Nonchar	itable	Exe	empt
1	in se		directly or indirectly e ther than section							Yes	No
а	Trans	fers from the rep	porting foundation to	a noncharitable exe	empt organization	of:					
	(1) C	ash							1a(1)		~
	(2) 0	ther assets .							1a(2)		~
b	Other	transactions:									
	','						1b(1)		~		
	(2) P	urchases of asse	ets from a noncharita	ıble exempt organıza	ation				1b(2)		~
	(3) R	ental of facilities,	, equipment, or other	rassets					1b(3)		~
	(4) Reimbursement arrangements						1b(4)		~		
	` <i>`</i>						1b(5)		~		
			ervices or membersh						1b(6)		_
С		•	quipment, mailing lis						1c		
d			of the above is "Yes								
			ther assets, or service								
			on or sharing arrange								
(a) Line	e no (b) Amount involved	(c) Name of nonch	aritable exempt organizati	on (d) Desc	ription of transfe	ers, transaction	ons, and sha	ring arra	ingem	ents
	_										
				 							
	_								-		
	-+										
	-										
					<u> </u>						
											
	-		·				<u> </u>		.		
	desci	ribed in section 5	ectly or indirectly af 501(c) (other than sec s following schedule.	ction 501(c)(3)) or in:		nore tax-exer	mpt orgar		☐ Ye	s 🗹	No
		(a) Name of organ		(b) Type of org	ganization		(c) Descripti	on of relation	nship		
					<u> </u>						
			1								
							_				
									_		
		r penalties of perjury, J	declare that I have examine	d this return, including accor	mpanying schedules an	d statements, and	to the best of	f my knowled	ige and b	elief, it	is true,
Sign Here	e Mogal			an taxpayer) is based on all information of which preparer has an			wiedge	May the If with the pa	reparer st		elow?
	Sign	ature of officer or trus		Date	Title	Dota			DTIN		
Paid Prep	arer	Print/Type preparer	s name	Preparer's signature		Date		ck if employed	PTIN		
	e Only Firm's name Firm			Fım's ElN	>						
	Firm's address Phone no										

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

2019

Employer identification number Name of the organization **HEALTHY PAWS FOUNDATION** 27-0871188 Organization type (check one): Filers of: Section: Form 990 or 990-EZ ☐ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation ☐ 527 political organization Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ). Part II. line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions

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

Employer identification number Name of organization

HEALTHY PAWS FOUNDATION 27-0871188 Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. Part I (a) **Total contributions** Type of contribution Name, address, and ZIP + 4 No. ~ __1__ Person AON FOUNDATION **Payroll** 389,673 Noncash P.O. BOX 81200 (Complete Part II for noncash contributions) CHICAGO, IL 60681 (b) (c) (d) (a) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II for noncash contributions) (d) (b) (c) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person **Payroll** Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II for noncash contributions) (d) (a) (b) (c) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II for noncash contributions) (d) (a) (c) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

HEALTHY PAWS FOUNDATION

27-0871188

Part II	Noncash Property (see instructions). Use duplicate copies	of Part II if additional spa	ace is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2019) **Employer identification number** Name of organization **HEALTHY PAWS FOUNDATION** 27-0871188 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions) ▶ Use duplicate copies of Part III if additional space is needed. (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (c) Use of gift (b) Purpose of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (c) Use of gift (d) Description of how gift is held (b) Purpose of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

12 Months ended 6/30/20 **Healthy Paws Foundation**

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27-0871188

Part I Line 1

Contributions

PO Box 81200 Chicago, IL 60681 Aon Foundation

\$389,673

Column (D)

Column (A)

Part I Line 16

300

Accounting Fees

Hagen, Kurth, Perman & Co

Part I Line 23

Other Expenses

Column (D) Column (A)

Total

\$300