990

Return of Organization Exempt From Income Tax

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

OMB No. 1545-

Open to Public

foundation Do not enter social security numbers on this form as it may be made public. ▶ Go to <u>www.irs.gov/Form990</u> for instructions and the latest information.

| | | the Treasury ue Service | | - | | | | | Inspection |
|--|---|--|---|---|---------------|-----------------------|--|--|--------------------------|
| | | | alendar year, or tax year begin | ning 01-01-2022 , and ending | 12-31-2022 | <u> </u> | | | |
| B Che | ck if a Idress | applicable: change hange | C Name of organization THE AMERICAN SOCIETY FOR TH OF CRUELTY TO ANIMALS | | | | | oyer ident 623829 | ification number |
| Initial return | | | Doing business as | | | | _ | | |
| Fin | | ninated | | | | | E Teleph | one numbe | r |
| | | ed return | 424 EACT OOND CTREET | if mail is not delivered to street addre | ss) Room/suit | е | | | |
| Ap | plicat | ion pending | | country, and ZIP or foreign postal code | | | (212) | 876-77 | 00 |
| | | | NEW YORK, NY 101286804 | ountry, and ZIP or foreign postal code | | | G Gross | receipts \$ 4 | 56,086,234 |
| | | | F Name and address of prin | ncipal officer: | | H(a) Is thi | | return fo | |
| | | | MATTHEW BERSHADKER 424 EAST 92ND ST | | | subo | rdinates? all subordi | nates | Yes No |
| | | | NEW YORK, NY 10128680 | | | inclu | ded? | | Yes No |
| | | | | (insert no.) 4947(a)(1) or | 527 | If "N H(c) Grou | • | | ee instructions. er 🕨 |
| | | | WW.ASPCA.ORG | | | | | | |
| K For | n of o | organization | n: Corporation Trust Asso | ciation Other | | L Year of form | nation: 1866 | M State | of legal domicile: NY |
| Pa | art I | Sun | nmary | | | | | I . | |
| | | | | sion or most significant activiti R THE PREVENTION OF CRUE | | TMALC IN . | THEHE | | |
| Ce | | TO PROV | VIDE EFFECTIVE MEANS FO | K THE PREVENTION OF CRUE | ELIT TO AN | IMALS IN | THE 0.5. | | |
| Governance | | | | | | | | | |
| Ven | | Chack t | his how T if the organization | n discontinued its operations o | r disposad a | f mara than | 2E0/ of it | s not ass | oto |
| ŝ | _ | | | erning body (Part VI, line 1a) | | | | 3 | 1: |
| | | | | rs of the governing body (Part \ | | | | 4 | 13 |
| ties | | | | in calendar year 2022 (Part V, | | | | 5 | 1,37 |
| Activities & | 6 | Total nu | imber of volunteers (estimate | if necessary) | | | | 6 | 1,59 |
| A | 7a | Total un | related business revenue fron | Part VIII, column (C), line 12 | | | | 7a | 1,617,493 |
| | b | Net unr | elated business taxable incom | e from Form 990-T, Part I, line | 11 | | | 7b | 644,722 |
| | | | | | | Pri | ior Year | | Current Year |
| 9 | | | • • • • | e 1h) | | | 351,249, | 754 | 338,555,59 |
| Revenue | | • | • | e 2g) · · · · · · · | | | 18,851, | + | 21,919,41 |
| æ | | | • | (A), lines 3, 4, and 7d) • • | | | 15,667, | + | 10,287,71 |
| | | | | lines 5, 6d, 8c, 9c, 10c, and 11 (must equal Part VIII, column (| | | 4,166, 389,934, | | 5,653,59 376,416,31 |
| | 12 | | | IX, column (A), lines 1-3). | | | 10,377, | + | 11,859,27 |
| | 14 | | | X, column (A), line 4) | | | 10/3/// | 0 | 11/033/27 |
| 40 | 15 | | | ee benefits (Part IX, column (A | |)) | 114,652, | 191 | 132,897,37 |
| Exp enses | 16a | Profess | ional fundraising fees (Part IX, | column (A), line 11e) | | | 7,045, | 347 | 9,319,04 |
| th ea | b | Total fund | draising expenses (Part IX, column (| D), line 25) 66,023,601 | | | | | |
| Δ | 17 | Other e | xpenses (Part IX, column (A), | lines 11a-11d, 11f-24e) • • | | | 170,370, | 557 | 186,231,57 |
| | 18 | Total ex | openses. Add lines 13-17 (mu | st equal Part IX, column (A), lir | ne 25) | | 302,445, | 596 | 340,307,26 |
| | 19 | Revenue | e less expenses. Subtract line | 18 from line 12 | | | 87,489, | | 36,109,04 |
| Net Assets or Fund Balances | | | | | | Beginni | ng of Curre Year | ent | End of Year |
| set | 20 | Total as | ssets (Part X, line 16) | | | | 575,080, | 492 | 575,741,21 |
| t As | | | | | | | 66,832, | + | 87,744,07 |
| Net P | | | ibilities (Part X, line 26) | | | | | 111 | 487,997,13 |
| Section 1 | | Net asse | | line 21 from line 20 | | | 508,248, | | |
| | | | | | | | 508,248, | | |
| Pa Unde | 22 rt II r per | Signalties of | ets or fund balances. Subtract nature Block perjury, I declare that I have | | | | es and sta | tements, | |
| Pa Unde my k | 22 rt II r per nowle | Signalties of edge and | ets or fund balances. Subtract nature Block perjury, I declare that I have | line 21 from line 20 examined this return, including | | in officer) is | es and sta based on | tements, | |
| Unde my ki prepa | 22 rt II r per nowle arer h | Signalties of edge and has any k | ets or fund balances. Subtract nature Block perjury, I declare that I have belief, it is true, correct, and | line 21 from line 20 examined this return, including | | in officer) is | es and sta based on 23-11-06 | tements, | |
| Unde my ki prepa | r per nowle arer h | Signalties of edge and has any k | ets or fund balances. Subtract nature Block perjury, I declare that I have belief, it is true, correct, and moveledge. ture of officer DON LAVALETTE CFO | line 21 from line 20 examined this return, including | | n officer) is | es and sta based on 23-11-06 | tements, | |
| Unde my ki prepa | r per nowle arer h | Signalties of edge and has any k | nature Block perjury, I declare that I have belief, it is true, correct, and knowledge. ture of officer | line 21 from line 20 examined this return, including | | n officer) is | es and sta based on 23-11-06 | tements, | |
| Unde my ki prepa | r per nowle arer h | Signalties of edge and has any k | ets or fund balances. Subtract nature Block perjury, I declare that I have belief, it is true, correct, and moveledge. ture of officer DON LAVALETTE CFO | line 21 from line 20 examined this return, including | | n officer) is | es and sta based on 23-11-06 te | tements, all inforn | nation of which |
| Unde my ki prepa | r per nowle arer h | Sign malties of edge and has any k Signa GORD Type | pets or fund balances. Subtract nature Block perjury, I declare that I have belief, it is true, correct, and showledge. ture of officer OON LAVALETTE CFO or print name and title Print/Type preparer's name | examined this return, including complete. Declaration of prepare | er (other tha | te Chrisel | es and sta based on 23-11-06 te | tements, all inforn PTIN P0067598 | nation of which |
| Unde my ki prepa Sigr Here | r pernowle arer h | Signal Signal Signal Signal GORD Type | ets or fund balances. Subtract nature Block perjury, I declare that I have belief, it is true, correct, and moveledge. ture of officer ON LAVALETTE CFO or print name and title | examined this return, including complete. Declaration of prepare | er (other tha | te Chrisel | es and sta based on 23-11-06 te | tements, all inforn PTIN P0067598 | nation of which |

May the IRS discuss this return with the preparer shown above? See Instructions. \cdot \cdot

✓ Yes ☐ No

| orm | 990 (| (2022) Page 2 |
|-------|---|--|
| Pa | rt III | Statement of Program Service Accomplishments |
| | | Check if Schedule O contains a response or note to any line in this Part III |
| 1 | Briefl | y describe the organization's mission: |
| _ | | DULE O |
|) L L | JCIILI | |
| 2 | Did th | he organization undertake any significant program services during the year which were not listed on |
| | | rior Form 990 or 990-EZ? |
| | If "Ye | es," describe these new services on Schedule O. |
| 3 | | he organization cease conducting, or make significant changes in how it conducts, any program |
| | | ces? |
| | | es," describe these changes on Schedule O. |
| | | |
| 4 | exper | ribe the organization's program service accomplishments for each of its three largest program services, as measured by nses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, otal expenses, and revenue, if any, for each program service reported. |
| 4a | (Cod | de:) (Expenses \$ 117,248,059 including grants of \$ 6,296,409) (Revenue \$ 21,919,410) |
| | SPAY CON' PROOF ANG ALSC CARI SUPF ANG ACCI FOR VETE YORI VETE HOSS IN TI AND CON FINA CHAI CLIN OF A BASI CARI UND MOR DAD | LITER AND VETERINARY SERVICES (SVS) - SEE SCHEDULE O FOR DETAILED DESCRIPTIONSVS INCLUDES THE ASPCA ANIMAL HOSPITAL (NYC), ASPCA VINEUTER ALLIANCE (N. C.), NORTHERN TIER SHELTER INITIATIVE (AK, WA, ID, MO, ND, MN, WI), ASPCA ADOPTION CENTER (NYC), ASPCA ANIMAL POISON ITROL CENTER (I.L.), ANIMAL RELOCATION PROGRAM, AND COMMUNITY MEDICINE PROGRAMS INCLUDING SPAY/NEUTER CLINICS IN NEW YORK CITY AND LOS SELES; AND COMMUNITY VETERINARY CLINICS (CVCS) IN LIBERTY CITY, MIAMI, AND THE NEW YORK CITY BOROUGHS OF THE BRONX AND BROOKLYN. SVS OI INCLUDES THE ASPCA EQUINE WELFARE PROGRAM, IN 2022, ASPCA SVS PROGRAMS HELPED HUNDREDS OF THOUSANDS OF ANIMALS THROUGH MEDICAL E, BEHAVIORAL TREATMENT, RELOCATION, EMEGENCY AND STANDARD SHELTERING, POISON EXPOSURE CONSULTATIONS, FOSTERING, AND ADOPTION AND PORTED COUNTLESS OTHER ORGANIZATIONS ACROSS THE COUNTRY THROUGH TRAINING AND CONSULTATION. 2022 SVS HIGHLIGHTSPROVIDING AFFORDABLE ERINARY SERVICES TO OWNERS AND ANIMALS IN NUBER-RESOURCED COMMUNITIESTHE ASPCA'S COMMUNITY MEDICINE (CM) PROGRAMS IN NEW YORK, LOTELES, AND MIAMI PROVIDE VETERINARY CARE TO ANIMALS AND PET OWNERS IN UNDER SING LONG COMMUNITY MEDICINE (CM) PROGRAMS IN NEW YORK, LOTELES, AND MIAMI PROVIDE VETERINARY CARE TO ANIMALS AND PET OWNERS IN UNDER SING THAN 60,000 ANIMALS, INCLUDING PROVIDING BASIC ERINARY CARE AND SPRY/NEUTER SURGERIES FOR DOGS AND CATS. DELIVERING URGENT MEDICAL SERVICES TO WILLDING PROVIDING BASIC ERINARY CARE AND SPAY/NEUTER SURGERIES FOR DOGS AND CATS. DELIVERING URGENT MEDICAL CARE AND SPAY/NEUTER SURGERIES FOR DOGS AND CATS. DELIVERING URGENT MEDICAL CARE AND SERVICES TO WILLDING PROVIDING BASIC ERINARY CARE FOR ANIMAL HOSPITAL (AAH) PROVIDES URGENT CARE TO SOME OF NEW YORK CITY'S MOST VULNERABLE ANIMALS BY OFFERINGS USBISIDIZED ERINARY CARE FOR ANIMAL HOSPITAL (AAH) PROVIDES URGENT CARE TO SOME OF NEW YORK CITY'S MOST VULNERABLE ANIMALS BY OFFERINGS USBISIDIZED FOR THE ASPCA ANIMAL HOSPITAL ROYOURDED CRITICAL VETERINARY CARE FOR MORE THAN AS ADOUTTED CARE FOR THE ASPCA ANIMAL PROVIDES ENV |

TO VETERINARY CAREIN ITS INAUGURAL YEAR, THE ACCESS TO VETERINARY CARE CONFERENCE IN MINNESOTA - WHICH THE ASPCA CO-HOSTED WITH THE UNIVERSITY OF MINNESOTA COLLEGE OF VETERINARY MEDICINE - BROUGHT TOGETHER ANIMAL WELFARE LEADERS, VETERINARY PROFESSIONALS, VETERINARY COLLEGES, AND OTHER STAKEHOLDERS TO ADDRESS THE LACK OF ACCESS TO AFFORDABLE AND ESSENTIAL VET CARE THAT THREATENS THE HEALTH OF MILLIONS OF PETS. FEATURING 122 SPEAKERS AND WELCOMING 325 ATTENDEES OVERALL, THE EVENT DEMONSTRATED DEEP INTEREST IN AND BROAD COMMITMENT TO THIS PHILOSOPHY AND EFFORT.PREPARING VULNERABLE AND HARD-TO-ADOPT ANIMALS FOR ADOPTION INTO SAFE AND LOVING HOMESASPCA PLACEMENT OF PETS. FEATURING 122 SPEAKERS AND WELCOMING 325 ATTENDEES OVERALL, THE EVENT DEMONSTRATED DEEP INTEREST IN AND BROAD COMMITMENT TO THIS PHILOSOPHY AND EFFORT PREPARING VULNERABLE AND HARD-TO-ADOPT ANIMALS FOR ADOPTION INTO SAFE AND LOVING HOMESASPCA PLACEMENT PROGRAMS PROVIDE PATHWAYS TO PROTECTION AND CARE FOR PETS IN NEED, INCLUDING HARD-TO-ADOPT ANIMALS, ANIMALS REQUIRING ADVANCED CARE BEFORE ADOPTION, AND ANIMALS IN LIEF-THREATENING SITUATIONS. THESE PROGRAMS ALSO HELP SHELTERS CONSERVE VALUABLE SPACE AND RESOURCES FOR OTHER ANIMALS IN NEED. HELPING HARD-TO-ADOPT ANIMALS IN NEW YORK CITYTO ADDRESS SOME OF THE BIGGEST CHALLENGES TO ANIMAL ADOPTION, THE ASPCA ADOPTION CENTER IN NEW YORK CITY FOCUSES ON "UNDERDOGS" - DOGS AND CATS WHOSE ADOPTIONS REQUIRE EXTRA EFFORT AND EXPERTISE DUE TO THE ANIMALS' BEHAVIOR AND MEDICAL CONDITIONS. THROUGHOUT 2022, THE ADOPTION CENTER HELPED MORE THAN 1,350 OF THESE DOGS AND CATS FIND SAFE AND LOVING HOMES WITH SUPPORT FROM NEARLY 700 NEW YORK CITY FOSTER CAREGIVERS. MANY OF THESE ANIMALS WERE RESCUED THROUGH THE ASPCA-NYPD PARTNERSHIP OR TRANSFERRED FROM ANIMAL CARE CENTERS OF NYC (ACC). SUPPORTING VERY YOUNG NEW YORK CITY KITTENSTHE ASPCA KITTEN NURSERY, NEW YORK CITY'S FIRST AND LAGGEST KITTEN NURSERY DEDICATED TO THE CARE AND TREATMENT OF NEONATAL KITTENS THAS PROVIDED LIFESAVING SUPPORT FOR MORE THAN 10,000 NEW YORK CITY KITTENS SINCE 2014. KEEPING THESE ANIMALS AT THE ASPCA KITTEN NURSERY AND WITH THE ASPCA FORTER NETWORK CONSERVES SHELTER SPACE AND RESOURCES AT ACC, WHICH HELPS THEM TEND TO OTHER ANIMALS IN THEIR CARE. AS A RESULT, EUTHANASIA RATES OF NEONATAL KITTENS AT ACC HAVE DROPPED DRAMATICALLY SINCE THE START OF THIS PROGRAM-EXPANDING KITTEN FOSTER OPPORTUNITIES IN LOS ANGELES COUNTY SHELTERS. ONCE THESE FOSTER KITTENS, OR THE KITTENS ARE TRANSPORTED TO ADOPTION PARTNERS IN THE PACIFIC NORTHWEST - WHERE ADOPTION DEMAND IS HIGHER - BY THE ASPCA ANIMAL RULOCATION AND PLACEMENT TEAM. SIN NYC, DIVERTING THESE KITTENS SURGEDERED TO LOS ANGELES AND ACCESS FIRM AND A ALLIANCE (ASNA) IN NORTH CAROLINA IS THE NATION'S LEADING HIGH QUALITY/HIGH VOLUME SPAY/NEUTER TRAINER, CONDUCTING NATIONWIDE SPAY/NEUTER TRAININGS THAT EXPAND ACCESS TO LOW-COST STERILIZATION SURGERIES ACROSS THE COUNTRY. IN 2022, ASNA TRAINED MORE THAN 240 VETERINARY MEDICAL PROFESSIONALS AND STUDENT EXTERNS. THESE TRAININGS HELP VETERINARY PROFESSIONALS PREVENT ANIMAL SUFFERING AND NEGLECT BY PREVENTING UNWANTED LITTERS IN COMMUNITIES AROUND THE COUNTRY. THROUGH ASNA, THE ASPCA ALSO PROVIDES HIGH-QUALITY, HIGH-VOLUME

4b (Code:) (Expenses \$ 89,977,687 including grants of \$) (Revenue \$)

SPAY/NEUTER SERVICES TO SHELTER, RESCUE, AND OWNED COMPANION ANIMALS IN THE WESTERN NORTH CAROLINA REGION.

PUBLIC EDUCATION AND COMMUNICATIONS - SEE SCHEDULE O FOR DETAILED DESCRIPTIONESSENTIAL TO THE ASPCA'S MISSION IS BRINGING AWARENESS TO ITS PROGRAMS AND EDUCATING THE PUBLIC, ILLUSTRATING HOW PEOPLE AND ORGANIZATIONS CAN ENGAGE AND GET INVOLVED IN HELPING TO PROTECT ANIMALS FROM CRUELTY AND ENSURE ALL ANIMALS LIVE GOOD LIVES. THE ASPCA HAD MORE THAN 41 MILLION VISITS TO ASPCA.ORG IN 2022, BRINGING AWARENESS TO MILLIONS OF SUPPORTERS AND THE PUBLIC ON EFFECTIVE ACTION THEY CAN TAKE ON BEHALF OF ANIMALS. SOCIAL MEDIA POSTINGS ARE A KEY PART OF THE ASPCA'S EDUCATION PROCESS, AND THEY KEEP THE PUBLIC UPDATED ON POLICY WINS AND DETAILS OF THE ASPCA'S ANTI-CRUELTY EFFORTS. THE ASPCA'S PROMOTIONS GENERATED MORE THAN 176 MILLION SOCIAL MEDIA IMPRESSIONS IN 2022. THE PUBLIC WAS UPDATED ON ACTIONS THEY COULD TAKE, INCLUDING LETTER WRITING, PHONE CALLS, SOCIAL MEDIA OUTREACH, AND PETITIONS TO LEGISLATORS TO ENSURE ANIMALS ARE GIVEN THE GREATEST POSSIBLE PROTECTION UNDER THE LAW. IN 2022, THE ASPCA SENT ADVOCACY EMAILS TO MORE THAN 1.7 MILLION ASPCA SUPPORTERS, URGING THEM TO TAKE ACTION ON A VARIETY OF ANIMAL WELFARE ISSUES. WITH THE HELP OF ADVOCATES, THE ASPCA SECURED NEW ANIMAL-PROTECTION LAWS AND REGULATORY WINS FOR ANIMALS IN THE NATION'S CAPITAL AND ACROSS THE COUNTRY IN STATE AND LOCAL LEGISLATURES. THE ASPCA DISTRIBUTED PRINT AND DIGITAL COPIES OF ASPCA ACTION, THE ASPCA'S MEMBER MAGAZINE, TO MORE THAN 834,000 HOUSEHOLDS. ASPCA ACTION INCLUDES INFORMATION ON ASPCA EVENTS, PROGRAMS, PET CARE INSIGHT, AND ADVICE. LEGISLATIVE AND ANIMAL ADVOCACY NEWS KEEPS ASPCA MEMBERS UP TO DATE ON CURRENT AND FUTURE INITIATIVES AND HOW THEY CAN HELP ENSURE THAT ANIMALS RECEIVE NECESSARY PROTECTION. THIS MAGAZINE IS AVAILABLE ON THE ASPCA WEBSITE, ALONGSIDE MANY ADDITIONAL EDUCATIONAL RESOURCES FOR THE PUBLIC. IN 2022, THE ASPCA APPEARED IN 22,287 MEDIA STORIES SHARING IMPORTANT INFORMATION ABOUT ANIMAL PROTECTION AND CARE, INCLUDING 1,881 PLACEMENTS IN HIGH-EXPOSURE OUTLETS SUCH AS ABC NEWS, THE ASSOCIATED PRESS, CBS NEWS, CNN, FOX

WASHINGTON POST. THE ASPCA ALSO COLLABORATED WITH NUMEROUS CELEBRITIES AND SOCIAL MEDIA INFLUENCERS, WHO VOLUNTEERED THEIR VOICES AND INFLUENCE TO ADVANCE LIFESAVING ASPCA CAMPAIGNS. IN 2022, THESE CELEBRITIES AND INFLUENCERS INCLUDED EDIE FALCO, BELLAMY YOUNG, KATE MARA, RICKY GERVAIS, ANDY COHEN, THE DODO, IZZY THE FRENCHIE, AND DOGS OF INSTAGRAM. EACH OF THESE GENEROUSLY HELPED DRIVE AWARENESS AND ACTION IN SUPPORT OF THE ASPCA'S PROGRAMS FOR DOGS, CATS, HORSES, AND FARM ANIMALS IN NEED. THESE COMMUNICATIONS AND PUBLIC EDUCATION EFFORTS HELP THE PUBLIC SEE ANIMALS - ESPECIALLY THOSE IN NEED - AS DESERVING OF CARE, KINDNESS, AND PROTECTION AND PROVIDE PEOPLE WITH INFORMATION AND RESOURCES TO GET INVOLVED IN HELPING ANIMALS ACROSS THE COUNTRY.

4c (Code:) (Expenses \$ 50,663,528 including grants of \$ 5,562,870) (Revenue \$)

POLICY, RESPONSE, AND ENGAGEMENT PROGRAMS (PRE) - SEE SCHEDULE O FOR DETAILED DESCRIPTIONPRE INCLUDES THE BEHAVIORAL REHABILITATION CENTER (NC), THE CRUELTY RECOVERY CENTER (OH), THE ASPCA LEARNING LAB (NC), NATIONAL FIELD RESPONSE, LEGAL ADVOCACY & INVESTIGATION; HUMANE LAW ENFORCEMENT (WHICH INCLUDES THE ASPCA-NEW YORK CITY POLICE DEPARTMENT PARTNERSHIP, COMMUNITY ENGAGEMENT WORK IN NYC, AND THE FORENSIC SCIENCES TEAM), FARM ANIMAL WELFARE, THE ASPCA PUPPY MILL INITIATIVE, BEHAVIORAL SCIENCE TEAM, ASPCA GRANTS (WHICH SERVE BOTH SVS AND PRE PROJECTS), AND GOVERNMENT RELATIONS (COVERING FEDERAL, STATE, AND LOCAL LEVELS). 2022 PRE HIGHLIGHTSRESPONDING TO AND RESCUING ANIMALS IN CRISISTHE ASPCA PROVIDES EXTENSIVE SUPPORT IN RESPONSE TO EMERGENCIES THAT THREATEN THE LIVES AND WELFARE OF ANIMALS ACROSS THE COUNTRY, ANSWERING REQUESTS FOR ASSISTANCE FROM LAW ENFORCEMENT, EMERGENCY MANAGEMENT AUTHORITIES, AND ANIMAL WELFARE AGENCIES. THESE EMERGENCIES INCLUDE LARGE-SCALE ANIMAL CRUELTY CASES AND NATURAL DISASTERS SUCH AS HURRICANES AND WILDFIRES. THE ASPCA PROVIDES CRUELTY INVESTIGATION SUBJECT MATTER EXPERTISE AS WELL AS HANDS-ON OPERATIONAL PLANNING AND RESCUE THAT FACILITATES POSITIVE OUTCOMES FOR MANY ANIMALS. CRUELTY RESPONSEIN 2022, THE ASPCA PROVIDED CRITICAL ASSISTANCE IN HUNDREDS OF CASES OF CRUELTY, IMPACTING THOUSANDS OF ANIMALS ACROSS THE COUNTRY. THE ASPCA IS THE LEADING AMERICAN ANIMAL WELFARE ORGANIZATION OFFERING COMPREHENSIVE ANTI-CRUELTY EXPERTISE AND RESOURCES TO LOCAL LAW ENFORCEMENT AGENCIES AND PROSECUTORS AROUND THE COUNTRY, SUPPORTING THEIR ANIMAL CRUELTY INVESTIGATIONS AND PROSECUTIONS, HELPING THEM TO COMBAT CRUELTY IN THEIR COMMUNITIES. BECAUSE THE PURSUIT OF CRIMINAL CASES CAN OFTEN REQUIRE SUBSTANTIAL EXPERTISE AND RESOURCES. THIS NATIONAL SUPPORT-WHICH ALWAYS COMES AT THE REQUEST AND INVITATION OF LAW ENFORCEMENT AGENCIES-FACILITATES THE ABILITY OF LOCAL AGENCIES TO TAKE ON AND PURSUE ANIMAL CRUELTY INVESTIGATIONS. IN ADDITION TO DIRECT ANIMAL SUPPORT, INCLUDING OPERATIONAL PLANNING, ON-THE-GROUND RESCUE WORK, EMERGENCY AND OFF-SITE ANIMAL SHELTERING, EXPERT MEDICAL AND BEHAVIORAL CARE, AND ANIMAL RELOCATION AND PLACEMENT, ASPCA SPECIALISTS CONSULT AT ALL STAGES OF CRIMINAL INVESTIGATION AND PROSECUTION, INCLUDING FORENSIC EVIDENCE COLLECTION AND ANALYSIS THAT HELPS PROVE THE COMMISSION OF ANIMAL CRUELTY CRIMES AT TRIAL, CONTRIBUTING EXPERT FORENSIC EVIDENCE COLLECTION AND ANALYSIS THAT HELPS PROVE THE COMMISSION OF ANIMAL CRUELTY CRIMES AT TRIAL, CONTRIBUTING EXPERT TESTIMONY, AND PROVIDING SECOND-CHAIR COUNSEL THAT SUPPORTS LEAD ATTORNEYS. IN ADDITION, THE ASPCA REGULARLY PROVIDES TRAINING AND LEGAL SUPPORT TO ANIMAL CONTROL AGENCIES, LAW ENFORCEMENT, PROSECUTORS, VETERINARIANS, AND OTHER ANIMAL WELFARE PROFESSIONALS ACROSS THE COUNTRY TO INCREASE AWARENESS, UNDERSTANDING, AND BEST PRACTICES IN PREVENTING, INVESTIGATING, AND EFFECTIVELY RESPONDING TO ANIMAL CRUELTY IN COMMUNITIES ACROSS THE COUNTRY.ASPCA ANTI-CRUELTY WORK INCLUDES SUPPORT FOR POLICE DEPARTMENTS AND DISTRICT ATTORNEY'S OFFICES ACROSS THE COUNTRY INCLUDING THE NEW YORK CITY POLICE DEPARTMENT.DISASTER RESPONSE THE ASPCA HAS A THREE-PRONGED APPROACH TO HELPING COMMUNITIES RESPOND TO DISASTERS. FIRST, THE DISASTER RESPONSE TEAM DEPLOYS NATIONWIDE TO ASSIST IN THE RELOCATION, SEARCH-AND-RESCUE, SHELTERING, AND PLACEMENT OF ANIMALS DURING DISASTERS, INCLUDING WILD FIRES, TORNADOES, HURRICANES, AND FLOODS. THE ASPCA ALSO WORKS WITH LAWANGES TO ENHANCE DISASTER IN ADDITIONAL AND PERSONNEE RESPONSE FERD TO REPRESENT OF REPRESENCE OF ADDITIONAL SINTOR EMERGENCY BLANS TO REPRESENT. WORKS WITH LAWMAKERS TO ENHANCE DISASTER PLANNING AND RESPONSE EFFORTS BY INCORPORATING ANIMALS INTO EMERGENCY PLANS TO PREVENT AVOIDABLE TRAGEDY. IN 2022, THE ASPCA SUPPORTED THE ENACTMENT OF A COLORADO LAW TO ESTABLISH A WILDFIRE RISK REDUCTION GROUP TO EXPAND OUTREACH EFFORTS AND DEVISE EFFECTIVE WAYS TO DISTRIBUTE INFORMATION ABOUT WILDFIRE RISK.FINALLY, THE ASPCA ENHANCES THE CAPACITY OF LOCAL AGENCIES TO RESPOND TO DISASTERS IN THEIR OWN COMMUNITIES BY PROVIDING THEM WITH GRANT FUNDING, TRAINING, AND OTHER CRITICAL RESOURCES. IN 2022, ASPCA DISASTER RESPONSE TEAMS HELPED MANY THOUSANDS OF ANIMALS THROUGH SEARCH AND RESCUE, PET FOOD AND SUPPLY DISTRIBUTION, EMERGENCY EVACUATION, EMERGENCY SHELTERING, AND REUNITING DISPLACED PETS WITH THEIR OWNERS.OVER THE LAST THREE YEARS, THE ASPCA HAS AWARDED MORE THAN \$2 MILLION IN GRANT FUNDING TO AUTHORIZED DISASTER RESPONSE AGENCIES, PROVIDING SUPPORT TO COMPANION ANIMALS, EQUINES, AND THEIR OWNERS IN COMMUNITIES IMPACTED BY OR AT HIGH RISK OF NATURAL DISASTERS. ADVANCING LAWS AND POLICIES THAT PROTECT COMPANION ANIMALS, HORSES, AND FARM ANIMALSTHE ASPCA WORKS CLOSELY WITH POLICYMAKERS AT THE LOCAL, STATE, AND FEDERAL LEVELS TO ENACT MEANINGFUL PROTECTIONS FOR ANIMALS WHILE ALSO PROVIDING ADVOCACY TRAINING AND RESOURCES FOR CITIZENS ENGAGING IN GRASSROOTS LOBBYING ON BEHALF OF ANIMALS IN NEED. THE ASPCA'S SUCCESSFUL LEGISLATIVE AND REGULATORY WORK ASSISTS ANIMALS ON A LARGE AND LASTING SCALE AND INFLUENCES THE DEVELOPMENT OF SIMILAR LEGISLATION AND SUPPORT FOR IT AROUND THE COUNTRY TO ADVANCE SYSTEMIC NATIONAL ANIMAL WELFARE IMPROVEMENT. IN 2022, ASPCA-LED POLICY WORK INCLUDED EFFORTS TO REFORM AND IMPROVE USDA POLICIES, MAKE ANIMAL WELFARE CONDITIONS MORE TRANSPARENT IN FOOD LABELS, PROTECT AT-RISK HORSES, SHUT DOWN PUPPY MILLS, EXPAND ACCESS TO VETERINARY CARE, SUPPORT HUMANE FARMING METHODS, ENHANCE DISASTER PREPAREDNESS TRAINING, AND IMPROVE PET-RELATED HOUSING AND CO-HABITATION POLICIES.LEGISLATIVE SUCCESS HIGHLIGHTSPRESIDENT BIDEN SIGNED THE ASPCA-SUPPORTED PLANNING FOR ANIMAL WELLNESS (PAW) ACT, DIRECTING THE FEDERAL EMERGENCY
MANAGEMENT AGENCY TO ESTABLISH A WORKING GROUP OF EXPERTS TO REVIEW CURRENT BEST PRACTICES FOR ANIMALS IN EMERGENCIES AND NATURAL DISASTERS AND ISSUE NEW GUIDANCE IF NECESSARY.THE ASPCA SECURED SEVERAL CRITICAL ANIMAL WELFARE PROVISIONS FOR THE FY2023 FEDERAL DISASTERS AND ISSUE NEW GUIDANCE IF NECESSARY. THE ASPCA SECURED SEVERAL CRITICAL ANIMAL WELFARE PROVISIONS FOR THE FYZUZ FEDERAL SPENDING PACKAGE, INCLUDING REQUIRING USDA INSPECTORS TO RECORD ALL ANIMAL WELFARE ACT VIOLATIONS THEY OBSERVE AT COMMERCIAL ANIMAL FACILITIES ON INSPECTION REPORTS, DIRECTING THE USDA TO REFORM ITS RULES FOR LABELS PUT ON MEAT AND DAIRY PACKAGING, CONTINUING THE PROHIBITION ON THE SLAUGHTER OF HORSES IN THE U.S., ALLOCATING AN ADDITIONAL \$10 MILLION TO SUPPORT THE HUMANE, NON-LETHAL MANAGEMENT OF WILL DAY OF AND BURROS, AND PROVIDING \$3 MILLION FOR PAWS ACT GRANTS THAT SUPPORT SHELTER AND TRANSITIONAL HOUSING SERVICES FOR SURVIVORS OF DOMESTIC VIOLENCE AND THEIR PETS.AFTER YEARS OF THE ASPCA LEADING THE CHARGE TO STOP THE FLOW OF PUPPY MILL DOGS INTO NEW YORK STATE, NEW YORK GOVERNOR KATHY HOCHUL SIGNED THE PUPPY MILL PIPELINE BILL INTO LAW, WHICH WILL END THE SALE OF DOGS, CATS, AND RABBITS IN PET STORES STATEWIDE STARTING DECEMBER 2024. GOV. HOCHUL ALSO SIGNED THE COMPANION ANIMAL CARE STANDARDS ACT INTO LAW, ESTABLISHING STATE STANDARDS TO ENSURE HOMELESS DOGS, CATS, AND OTHER ANIMALS ARE KEPT IN CLEAN AND SAFE CONDITIONS WHILE LIVING AT SHELTERS OR RESCUE ORGANIZATIONS. COLLABORATING WITH THE NYPD TO COMBAT ANIMAL CRUELTY AND NEGLECT IN NEW YORK CITYIN A GROUNDBREAKING PARTNERSHIP, THE ASPCA WORKS CLOSELY WITH THE NEW YORK CITY POLICE DEPARTMENT (NYPD) TO PREVENT AND ADDRESS ANIMAL CRUELTY ACROSS THE CITY'S FIVE BOROUGHS WITH SERVICES INCLUDING MEDICAL TREATMENT, BEHAVIOR ASSESSMENTS, FORENSIC EVALUATIONS, SHELTERING, AND ADOPTION. SINCE THE INCEPTION OF THE ASPCA-NYPD PARTNERSHIP CITY-WIDE IN 2014, NEARLY 5,000 ANIMALS HAVE BEEN RESCUED FROM SITUATIONS OF ALLEGED ABUSE, AND MORE THAN 23,000 NYPD OFFICERS HAVE BEEN TRAINED BY THE ASPCA TO EFFECTIVELY RECOGNIZE AND RESPOND TO SUSPECTED ANIMAL CRUELTY.PROTECTING ANIMALS TRAPPED IN CRUEL FARMING SYSTEMS AND PUSHING FOR A MORE HUMANE FOOD SYSTEMTHE ASPCA WORKS WITH FARMERS, GOVERNMENT LEADERS, ADVOCATES, AND FOOD COMPANIES TOWARD POLICY AND CORPORATE REFORMS TO END THE CRUELEST FACTORY FARMING PRACTICES, INCREASE TRANSPARENCY AND ACCOUNTABILITY IN INDUSTRIAL ANIMAL AGRICULTURE, AND ADEQUATELY FUND A MORE HUMANE FOOD SYSTEM. THE ASPCA ALSO INFORMS AND STEERS FOOD CONSUMERS TOWARD HIGHER WELFARE OPTIONS THROUGH THE ASPCA SHOP WITH YOUR HEART PROGRAM, WHICH WORKS TO SHIFT THE FOOD MARKETPLACE TOWARD MORE HUMANELY-PRODUCED CHOICES, ULTIMATELY IMPROVING INDUSTRY PRACTICES. IN 2022, THE ASPCA ADDED HUNDREDS OF NEW WELFARE-CERTIFIED AND PLANT-BASED PRODUCTS TO THE SHOP WITH YOUR HEART GROCERY LIST AND WORKED WITH SEVERAL PET FOOD BRANDS - INCLUDING EVERMORE, CAMPFIRE TREATS, OPEN FARM, EARTH ANIMAL, AND THE HONEST KITCHEN - TO IMPROVE THEIR ANIMAL WELFARE POLICIES AND SOURCING STANDARDS.

| le | Total program service expenses | 257,889,274 | , | · · · · · · · · · · · · · · · · · · · | |
|----|-------------------------------------|------------------------|---------------|---------------------------------------|--|
| | (Expenses \$ | including grants of \$ |) (Revenue \$ |) | |
| ld | Other program services (Describe in | Schedule O.) | | | |

Form **990** (2022)

| Form | 990 (2022) | | | Page : |
|------|---|-----|-----|--------|
| Par | t 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 | Yes | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? See instructions | 2 | | Νo |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> | 3 | | No |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II | 4 | Yes | |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III | 5 | | No |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D,</i> Part I | 6 | | No |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | Νo |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III | 8 | | Νo |
| 9 | Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV | 9 | | No |
| 10 | Did the organization, directly of through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? <i>If "Yes," complete Schedule D, Part V</i> | 10 | Yes | |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable. | | | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. S | 11a | Yes | |
| b | Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | Yes | |

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 🐿 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 🥦 Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X

Did the organization's separate or consolidated financial statements for the tax year include a footnote that

12a ប៊ីប៉េក្តាម ទល្បានមេដា និក្សានាម្ខាត់ និក្សានាមិន និក្សានាមិន និក្សានាមិន និក្សានេះ និក្សានិះ និក្សានេះ និក្សានេះ និក្សានិះ និក្សានិះ និក្សានិះ និក្សានេះ និក្សានិះ និក្សាន

. If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🗐

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

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other

Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions. 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 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on

Did the organization report on Part IX column (A), line 3, more than \$5,000 of grants or other assistance to or for

b Was the organization included in consolidated, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

any foreign organization? If "Yes," complete Schedule F, Parts II and IV 🖠

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . .

assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

15

16

17

addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)?

Νo

Nο

Nο

Nο

Nο

Nο

11c

11d

11e

11f

12a

12b

13

14a

14b

15

16

17

18

19

20a

20b

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Form 990 (2022)

"Yes," complete Schedule L, Part I

If "Yes," completeSchedule L,Part III

conservation contributions?

sections 301.7701-2 and 301.7701-3?

30

Part V

entity or family member of any of these persons?

| n 990 | (2022) | | Page |
|-------|--|-----|------|
| rt IV | Checklist of Required Schedules (continued) | | |
| | | Yes | No |
| Did t | he organization report more than \$5,000 of grants or other assistance to or for domestic individuals on | | |

| Checklist of Required Schedules (continued) | | | |
|---|----|-----|--|
| | | Yes | |
| Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on | 22 | | |

23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

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

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

Did the organization report any amount on Part X; line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled

哲道學研究 公公司用包括证例所的的形式的 智利并引力 or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member,

Was the organization a party to a business transaction with one of the following parties (see the Schedule L,

c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes,"

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . .

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

ชี้เข้Yสระ" ชีญชิคโซโซเอิร์ทิติปูนโตโลใะ, terminate, or dissolve and cease operations? If "Yes," complete schedule N. Part I

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete

พื่แร้งหลื เชาสูมิศาร์ลเรียกใช้เลี้ยง ใช้เร็กง tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV,

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🖠 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . 🥦 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable

Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V .

a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes,"

or to a 35% controlled entity (including an employee thereof) or family member of any of these persons?

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?

Part IV instructions for applicable filing thresholds, conditions, and exceptions):

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable

b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable

gaming (gambling) winnings to prize winners?

b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV .

current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d

Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III . . .

| , | No |
|---|----|

| orm 990 | (2022) | Page 4 |
|---------|---|---------------|
| Part IV | Checklist of Required Schedules (continued) | |
| | | |

| 990 (| 2022) | Page 4 |
|-------|---|---------------|
| t IV | Checklist of Required Schedules (continued) | |
| | | |

- Nο

Yes

23

24a

24b

24c

24d

25a

25b

26

27

28a

28b

28c

29

30

31

32

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34

352

35b

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198

Λ

1a

1b

Yes

Yes

Yes

Yes

Yes

Form 990 (2022)

Νo

Νo

Νo

Nο

Nο

Νo

Νo

Nο

Νo

Nο

Nο

Νo

Nο

Nο

No

| Pai | Statements Regarding Other IRS Filings and Tax Compliance (continued) | | | |
|-----|---|------------|-----|-----|
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b | Yes | |
| 3a | Did the organization have unrelated business gross income of $$1,000$ or more during the year? | За | Yes | |
| 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 | Yes | |
| 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 | 4a | | No |
| | Bfc୯୭୫९)t)enter the name of the foreign country: ▶ | | | |
| 5a | Washer organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | No |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | N o |
| | If "Yes," to line 5a or 5b, did the organization file Form 8886-T? | 5c 6a | | No |
| b | organization solicit any contributions that were not tax deductible as charitable contributions? 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). | | | |
| а | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | 7a | Yes | |
| | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | Yes | |
| С | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | 7 c | | No |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | | | |
| е | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | No |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | No |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 7h | | |
| 8 | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. | 8 | | |
| а | Did the sponsoring organization make any taxable distributions under section 4966? | 9a | | |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | | |
| 10 | Section 501(c)(7) organizations. Enter: | | | |
| а | Initiation fees and capital contributions included on Part VIII, line 12 10a | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club | | | |
| 11 | Section 501(c)(12) organizations. Enter: | | | |
| а | Gross income from members or shareholders | | | |
| b | Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 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. | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | |
| а | Is the organization licensed to issue qualified health plans in more than one state? | 13a | | |
| | Note. See the instructions for additional information the organization must report on Schedule O. | | | |
| b | Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans | | | |
| C | Enter the amount of reserves on hand | | | |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | No |
| | 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? | 15 | | No |
| 16 | IS "thesolrsæeizationsæruetiooætæmælfilæsEiturtio47配的j&chedutlæeNsection 4968 excise tax on net investment income? | 16 | | No |
| 17 | If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069. | 17 | | |

| orm | 990 (2022) | | | Page 6 |
|-----|---|-----------------|-------------|---------------|
| Par | Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No | " respo | nse to line | ?S |
| | 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 | | | . 🔽 |
| Se | ction A. Governing Body and Management | | | T |
| | | | Yes | No |
| 1a | Enter the number of voting members of the governing body at the end of the tax | 1 3 | | |
| | Year-fire 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 | 1 2 | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? | 2 | | No |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . | 3 | | No |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was | 4 | | Νo |
| 5 | 6 ladthe organization become aware during the year of a significant diversion of the organization's assets? . | 5 | | Νo |
| 6 | Did the organization have members or stockholders? | 6 | | Νo |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one of more members of the governing body? | r 7 a | | No |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholder or persons other than the governing body? | rs, 7 b |) | No |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | |
| а | The governing body? | 8a | Yes | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | Yes | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O | 9 | | No |
| Se | ction B. Policies (This Section B requests information about policies not required by the Interna | l Reve | nue Coa | le.) |

| 2 | other officer, director, trustee, or key employee have a family relationship or a business relationship with any | 2 | | No |
|-------------|--|-------|--------|-----|
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . | 3 | | No |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was | 4 | | Νo |
| 5 | 60° organization become aware during the year of a significant diversion of the organization's assets? . | 5 | | Νo |
| 6 | Did the organization have members or stockholders? | 6 | | Νo |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? | 7a | | No |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? | 7b | | No |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | |
| а | The governing body? | 8a | Yes | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | Yes | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O | 9 | | No |
| Se | ection B. Policies (This Section B requests information about policies not required by the Internal R | evenu | ıe Cod | e.) |
| | | | Yes | No |
| 10 a | Did the organization have local chapters, branches, or affiliates? | 10a | | Νo |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? | 10b | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | Yes | |
| b | Describe on Schedule O the process, if any, used by the organization to review this Form 990. | | | |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | Yes | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | Yes | |
| С | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done | 12c | Yes | |

| 6 | Did the organization have members or stockholders? | 6 | | Νo |
|-----|--|-------|--------|-----|
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? | 7a | | No |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? | 7b | | No |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | |
| а | The governing body? | 8a | Yes | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | Yes | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O | 9 | | No |
| Se | ction B. Policies (This Section B requests information about policies not required by the Internal R | evenu | ле Cod | e.) |
| | | | Yes | No |
| 10a | Did the organization have local chapters, branches, or affiliates? | 10a | | Νo |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? | 10b | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | Yes | |
| b | Describe on Schedule O the process, if any, used by the organization to review this Form 990. | | | |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | Yes | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | Yes | |
| С | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done | 12c | Yes | |
| 13 | Did the organization have a written whistleblower policy? | 13 | Yes | |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | Yes | |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | |
| а | The organization's CEO, Executive Director, or top management official | 15a | Yes | |
| b | Other officers or key employees of the organization | 15b | Yes | |
| | If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? | 16a | | No |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the | | | |
| | organization's exempt status with respect to such arrangements? | 16b | | |

| Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code Yes 10a Did the organization have local chapters, branches, or affiliates? 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? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? b Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Dfd the organization have a written conflict of interest policy? If "No," go to line 13 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done n Schedule O how this was done 12b Yes 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 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 b Other orfficers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. b If "Yes," did the organization injent venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt satus with respect to such arrangements? | | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O | 9 | | No |
|---|-----|--|-------|-----|----|
| b If "Yes," did the organization have local chapters, branches, or affiliates? 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? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12b Yes 12c Ves 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done 12b Yes 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 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? 15a Yes 15b Other officers or key employees of the organization 15a Yes 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 15b Yes 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 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 | Se | ection B. Policies (This Section B requests information about policies not required by the Internal R | eveni | | |
| 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? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 12b Did the organization have a written conflict of interest policy? If "No," go to line 13 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 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? 15a Yes 15b Other officers or key employees of the organization 15a Yes 15b Teys" to line 15a or 15b, describe the process on Schedule O. See instructions. 15b Yes 15c Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 15a Did the organization in joint venture arrangements under applicable federal tax law, and take steps to safeguard the | | | | Yes | No |
| affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 12b Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Yes 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Yes 12c Yes 13 Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 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? 15a Yes 15b Other officers or key employees of the organization 15a Yes 15b Yes 15b Yes 15b Yes 15c Yes 15c Yes 15c Yes 15d Yes | 10a | Did the organization have local chapters, branches, or affiliates? | 10a | | Νo |
| the form? | b | | 10b | | |
| Did the organization have a written conflict of interest policy? If "No," go to line 13 | 11a | | 11a | Yes | |
| b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | b | Describe on Schedule O the process, if any, used by the organization to review this Form 990. | | | |
| rise to conflicts? | 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | Yes | |
| on Schedule O how this was done | b | | 12b | Yes | |
| Did the organization have a written document retention and destruction policy? | С | | 12c | Yes | |
| 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? The organization's CEO, Executive Director, or top management official | 13 | Did the organization have a written whistleblower policy? | 13 | Yes | |
| independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official | 14 | Did the organization have a written document retention and destruction policy? | 14 | Yes | |
| b Other officers or key employees of the organization | 15 | | | | |
| If "Yes" to line 15a or 15b, describe the process on 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? | а | The organization's CEO, Executive Director, or top management official | 15a | Yes | |
| Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? | b | Other officers or key employees of the organization | 15b | Yes | |
| taxable entity during the year? | | If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. | | | |
| participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the | 16a | | 16a | | Νo |
| organization's exempt status with respect to such arrangements: | b | participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the | | | |
| Section C. Disclosure | | | 16b | | |

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

AL,AR,CA,CO,CT,FL,GA,HI,IL,KS,KY,LA,MD, MA,MI,MN,MS,NH,NJ,NM,NY,OK,OR,PA,RI, SC,TN,UT,VA,WV,WI Section 6104 requires an organization to make its Form 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 Upon request Other (explain in Schedule O)

▶GORDON LAVALETTE CFO 520 EIGHTH AVENUE 7TH FLOOR NEW YORK,NY10018(212) 876-7700

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. State the name, address, and telephone number of the person who possesses the organization's books and records: 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

| Check this box if neither the organization r | (B) | <u> </u> | (C) | , | | | | (D) | (E) | (F) | |
|--|------------------------------------|--------------------------|---|---------|---|------------------------------|--------|----------------------------------|--|---------------------------------|--|
| Name and title | Average hours per week (list | | tion (do not check more nless person is both an director/truste | offic | | | | Reportable compensation from the | Reportable compensation from related | Estimated amount of other | |
| | any hours for | 악교 | Institutional Trustee; | | ᄌ | ΦI | Ţ | organization | organizations | compensation | |
| | related organizations | Individual or directo | | Officer | ву е | ghe | Former | (W-2/1099- MISC/1099- | (W-2/1099- MISC/1099- | from the organization | |
| | below dotted | dividual t | | 7 | mpl | st c | er. | NEC) | NEC) | and related | |
| | line) | T Ta | | | Key employee | Highest compensa employee | | | | organizations | |
| | | trustee | | | Φ | ens | | | | | |
| | | 1701 | | | | sated | | | | | |
| (1) MATT BERSHADKER | 65.00 | | | | | | | | | | |
| PRESIDENT & CHIEF EXECUTIVE OFFICER | | Х | | Х | | | | 1,004,150 | 0 | 113,021 | |
| - | 2.00 3.00 | | | | | | | | | | |
| (2) SALLY SPOONER | | Х | | Х | | | | 0 | 0 | 0 | |
| CHAIRPERSON | 0.00 | | | | | | | | | | |
| (3) SCOTT THIEL | 1.00 | Х | | Х | | | | 0 | 0 | 0 | |
| VICE CHAIRPERSON | 0.00 | | | | | | | | | | |
| (4) JANE W PARVER | 1.00 | Х | | Х | | | | 0 | 0 | 0 | |
| TREASURER | 0.00 | | | • | | | | | · | | |
| (5) LINDA LLOYD LAMBERT | 1.00 | Х | | Х | | | | 0 | 0 | 0 | |
| SECRETARY | 0.00 | | | | $oxed{\begin{tabular}{c} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$ | | | <u> </u> | <u> </u> | | |
| (6) ARRIANA BOARDMAN | 1.00 | V | | | | | | 0 | | 0 | |
| DIRECTOR | 0.00 | Х | | | | | | U | 0 | 0 | |
| (7) MICHAEL D'ALTO | 1.00 | | | | | | | | | | |
| DIRECTOR | 0.00 | Х | | | | | | U | 0 | 0 | |
| (8) SIVAN HONG | 1.00 | | | | | | | | | | |
| DIRECTOR | 0.00 | Х | | | | | | 0 | 0 | 0 | |
| (9) JEFFREY A PFEIFLE | 1.00 | | | | | | | | | | |
| DIRECTOR | | Х | | | | | | 0 | 0 | 0 | |
| (10) MARTIN PURIS | 1.00 | | | | | | | | | | |
| DIRECTOR | | Х | | | | | | 0 | 0 | 0 | |
| (11) FREDERICK TANNE | 0.00 1.00 | | | | | | | | | | |
| | | Х | | | | | | 0 | 0 | 0 | |
| DIRECTOR | 0.00 1.00 | | | | | | | | | | |
| (12) MARY JO WHITE | | Х | | | | | | 0 | 0 | 0 | |
| DIRECTOR | 0.00 | | | | | | | | | | |
| (13) TIM F WRAY | 1.00 | Х | | | | | | 0 | 0 | 0 | |
| DIRECTOR UNTIL 6/2022 | 0.00 | | | | | | | | | | |
| (14) GORDON LAVALETTE | 50.00 | | | Х | | | | 404,375 | 0 | 21,619 | |
| SVP & CHIEF FINANCIAL OFFICER | 5.00 | | | | | | | • | | • | |
| (15) TODD HENDRICKS | 50.00 | | | | Х | | | 484,947 | 0 | 40,337 | |
| SVP, DEVELOPMENT | 0.00 | | | | ^ | | | 10 ija ii | | 10/00 | |
| (16) ELIZABETH ESTROFF | 50.00 | | | | , | | | 452 478 | | 61.050 | |
| SVP, COMMUNICATIONS | 0.00 | | | | Х | | | 453,478 | 0 | 61,950 | |
| (17) BERT TROUGHTON | 50.00 | | | | | | | ::5 017 | | 50.401 | |
| SVP, SHELTER & VETERINARY SERVICES | 2.00 | | | | Х | | | 445,017 | 0 | 50,401 | |
| | 2.00 | | | | | | | | Form 990 (2 | | |

SAN FRANCISCO, CA 94139

\$100,000 of compensation from the organization \blacktriangleright 144

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

| , , , , , , , , , , , , , , , , , , , | , | • | . , , | | | • | | | , | |
|--|--|-----------------------------------|--|----------|--------------|---------------------------------|-----------|--|---|--|
| (A) Name and title | (B) Average hours per week (list | | (C) tion (do not check more nless person is both an director/truste | offi | cer | and a | | (D) Reportable compensation from the | (E) Reportable compensation from related | (F) Estimated amount of other |
| | any hours for related organizations below dotted line) | Individual trustee or director | Institutional Trustee; | Officer | Key employee | Highest compensated employee | Former | organization (W-2/1099- MISC/1099- NEC) | organizations (W-2/1099- MISC/1099- NEC) | compensation from the organization and related organizations |
| (18) STACY WOLF | 50.00 | | | | x | | | 424 F06 | 0 | 20.144 |
| SVP, POLICY, RESPONSE & ENGAGEMENT | 0.00 | | | | ^ | | | 424,586 | 0 | 38,144 |
| (19) BEVERLY JONES | 50.00 | ļ | | | Х | | | 417,665 | 0 | 59,114 |
| SVP, CHIEF LEGAL OFFICER (20) CHERYL BUCCI | 0.00 50.00 | | | | | | | | | |
| | | | | | Х | | | 407,941 | 0 | 67,485 |
| SVP, OPERATIONS AND PEOPLE (21) J'MAI GAYLE | 0.00 50.00 | | | | - | | | | | |
| DIRECTOR, SURGERY | 0.00 | | | | | Х | | 335,130 | 0 | 68,189 |
| (22) CAMILLE DECLEMENTI | 50.00 | | | | | | | | | |
| VP, ASPCA ANIMAL HOSPITAL | 0.00 | | | | | Х | | 303,630 | 0 | 38,521 |
| (23) JENNIFER CHIN | 50.00 | | | | | Х | | 294,174 | 0 | 40,635 |
| VP, LEGAL ADVOCACY & INVESTIGATIONS | 0.00 | | | | | ^ | | 254,174 | | 40,033 |
| (24) LUKE FRANKLIN | 50.00 | | | | | х | | 285,638 | 0 | 58,134 |
| VP, MEMBERSHIP (25) AMY BERKOWITZ | 0.00 50.00 | | | | | | | | | |
| VP, INFORMATION TECHNOLOGY | | | | | | х | | 284,512 | 0 | 38,904 |
| | | | | | | | | | | |
| 1h Cub Tabel | | | | | | | | | | |
| to Total from continuation sheets to Part VI d Total (add lines 1b and 1c) | • | · · | | | | 5,545,2 | 243 | | 0 69 | 96,454 |
| 2 Total number of individuals (including b \$100,000 of reportable compensation f | | | , | eive | ed m | nore t | han | | | |
| 3 Did the organization list any former off on line 1a? <i>If "Yes," complete Schedule</i> . | | | | ghe • | st c | ompe | nsat • | ed employee | Yes N | 0 |
| For any individual listed on line 1a, is torganization and related organizations individual | | | | | | | | | 4 Yes | |
| 5 Did any person listed on line 1a receive services rendered to the organization? | | | | _ | | | or • | individual for | 5 N | 0 |
| Section B. Independent Contractor Complete this table for your five higher | | ind- | andont contraction (1) | + | : | , o d | | than #100 000 | of | |
| 1 Complete this table for your five highe compensation from the organization. Re | • | | | | | | | | | |
| Name and h | (A) ousiness address | | | | | De | occrir | (B) otion of services | (C) | |
| EAGLE-COM INC | dusiness address | | | | DC | | | ISITION | Compensation 30,221 | |
| 2300 YONGE ST STE 1700 TORONTO, ONTARIO M4P 1E4 CA | | | | | | | | | | |
| LAUGHLIN CONSTABLE INC | | | | | DO | NOR A | CQU: | ISITION | 15,806 | ,349 |
| 207 E MICHIGAN ST MILWAUKEE, WI 53202 | | | | | | | | | | |
| ASCENTA GROUP INC 138 SOUTH FIRST ST SUITE 110 | | | | | טט | INOR E | NGA | GEMENT | 15,746 | ,848 |
| LINDENHURST, NY 11757 EDGE DIRECT LLC | | | | | DO | NOR E | NGA | GEMENT | 11,476 | ,354 |
| 3030 WATERVIEW AVENUE BALTIMORE, MD 21230 | | | | | _ | | | | | |
| GOOGLE INC DEPT 33654 | | | | | DC | NOR A | CQU: | ISITION | 7,989 | ,930 |

2 Total number of independent contractors (including but not limited to those listed above) who received more than

| | 990 (2022) | | | | | | | | | Page 9 |
|-------------------------|---------------------|--|---------------|------------|--|------------------------------|------------------|--------------------------------------|--------------------|---|
| Part | | nt of Revenue chedule O contains a res | sponse or not | te to a | anv line in this Par | t VIII | | | | г |
| | | | | | (A) Total revenue | (B) Relate exem functi rever | d or pt on | (C) Unrelate busines revenu | ss exc ie tax u | (D) Revenue luded from nder sections 12 - 514 |
| Contr | butions, Gifts, Gra | nts, and OtherAmt Simi | lar Amounts | b M | l ederated campaign lembership dues . undraising events | ns | 1a 1b | 423 | ,672 | 12 314 |
| | | | | | elated organizatio | | 1d | | / | |
| | | | | e G | overnment grants (con | tributions) | 1e | 312 | ,150 | |
| | | | | aı | ll other contributions, g nd similar amounts not bove oncash contributions in | included | 1f | 337,819 | ,770 | |
| | | | | lir | nes 1a - 1f:\$ | ioraaca iir | 1 g | 4,330 | ,472 | |
| | ı | | 1 | | otal. Add lines 1a- | 1f | | > | 338,55 | 5,592 |
| | a- ANIMAL POISON C | CONTROL CENTER FEES | Business C | | 20,200,293 | 2 | 0,200,293 | 3 | | |
| enne | b ASPCA SPAY NEUT | | _ | 00000 | 695,060 | | 695,060 |) | | |
| Program Service Revenue | c MOBILE CLINIC VE | | _ | 00000 | 523,457 | | 523,457 | 7 | | |
| Servic | d ANIMAL HOSPITAL | FEES | _ | 00000 | 412,021 | | 412,021 | | | |
| gram (| e ADOPTION CENTER | R FEES | | 00000 | 88,579 | | 88,579 |) | | |
| Pro | £ All athan ana | | _ | | | | | | | |
| | | am service revenue. | 21.01 | 9,410 | | | | | | |
| | • Total. Add line | 3 Investment income | | _ | ds, interest, and | 1 | | | | |
| | | other 49imUATeIPOMPINVestr | | | | | 38,147 | | | 6,638,147 |
| | | | | | | | 68,140 | | | 3,668,140 |
| | | | (i) Re | eal | (ii) Personal | | | | | |
| | | 6a Gross rents | 5a | | | | | | | |
| | | b Less: rental expenses | 6b | | | | | | | |
| | | c Rental | _ | | | | | | | |
| | | income or d (Nets) ental income | or (loss) | | | | | | | |
| | | a wet rental income | (i) Secu | | | | | | | |
| | | 7a Gross amount from sales of assets other than inventory | | 3,085,9 | | | | | | |
| anue | | h Less: cost or | 7b 79 | 9,436,3 | 84 | | | | | |
| Other Revenue | | c Gain or (loss) | 7 c 3 | 3,649,5 | 71 | | | | | |
| ē | | d Net gain or (loss) | | | | 3,6 | 49,571 | | | 3,649,571 |
| O | | 8a Gross income from function (not including \$ contributions reported contributions) | 423,672 of | : | | | | | | |
| | | See Part IV, line 18 | | 88 | | | | | | |
| | | b Less: direct expen c Net income or (loss | | 8l | | | 24,534 | | | -124,534 |
| | | • Net means or (1032 | y mom rumur | u131119 |) events 1 1 | | , | | | ,,,,, |
| | | 9a Gross income from | aamina | | | | | | | |
| | | activities. | _ | 98 | а | | | | | |
| | | See Part IV, line 19 b Less: direct expen | | 91 | - L | | | | | |
| | | c Net income or (loss | s) rrom gami | ng aci | tivities | | | | | |
| | | 10a Gross sales of invereturns and allowar | | 10 | a | | | | | |
| | | b Less: cost of goods | s sold | 10 | b | | | | | |
| | | c Net income or (loss | s) from sales | of inv | ventory | | | | | |
| | | | | | Business Code | | | | | |
| | | 11a GAIN FROM K-1 | ACTIVITY | | 9000 | 99 1,6 | 17,493 | | 1,617,493 | |
| | | b LIST SALES | | | 9000 | 99 4 | 92,497 | | | 492,497 |
| Othe | rRevenueMiscAmt | с | | | _ | | | | | |
| | | | | | | | | | | |
| | | d All other revenue | | | | | | | | |
| | | e Total. Add lines 11 | | | | | 09,990 | | | |
| | | 12 Total revenue. See | instructions | • | | 376,4 | 16,316 | 21,919,410 | 1,617,493 | 14,323,821 |

| Form 990 (2022) | | | | Page 10 |
|--|---|------------------------------|---|-----------------------------------|
| Part IX Statement of Functional Expenses | | | | |
| Section 501(c)(3) and 501(c)(4) organizations mus | t complete all colum | nns. All other organ | izations must comp | ete column (A). |
| Check if Schedule O contains a response or note to | any line in this Part | IX | <u> </u> | · · _ · · □ |
| 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 |
| Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 | 11,769,279 | 11,769,279 | | |
| 2 Grants and other assistance to domestic individuals. See Part IV, line 22 | | | | |
| 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16. | 90,000 | 90,000 | | |
| 4 Benefits paid to or for members | | | | |
| 5 Compensation of current officers, directors, trustees, and key employees | 4,494,228 | 2,091,832 | 1,695,850 | 706,546 |
| 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 | 97,183,797 | 82,902,433 | 5,814,853 | 8,466,511 |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | 5,501,061 | 4,705,561 | 301,469 | 494,031 |
| • • • • • • • • • • • • • • • • • • • | 18,482,284 | 15,508,280 | 1,275,356 | 1,698,648 |
| 9 Other employee benefits | 7,236,005 | 6,055,165 | 513,565 | 667,275 |
| 10 Payroll taxes | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 0,000,00 | 520,500 | 00.,= |
| 11 Fees for services (non-employees): | 633,518 | 228,333 | 318,450 | 86,735 |
| a Management | 1,100,754 | 588,166 | 383,503 | 129,085 |
| b Legal | 487,330 | 300,100 | 487,330 | 123,000 |
| c Accounting | 487,330 | 435,664 | 407,355 | |
| d Lobbying | 9,319,040 | .100,00 | | 9,319,040 |
| e Professional fundraising services. See Part IV, line 17 | 780,937 | | 780,937 | 5,515,0.0 |
| f Investment management fees | 26,393,337 | 24,679,149 | 456,959 | 1,257,229 |
| g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0) | 20,000,00 | 21,073,2 | .55,51 | ±1=0+,=== |
| 12 Advertising and promotion | 56,432,835 | 37,113,703 | 127,527 | 19,191,605 |
| 13 Office expenses | 37,283,669 | 23,724,708 | 209,130 | 13,349,831 |
| 14 Information technology | 20,763,974 | 10,671,016 | 776,153 | 9,316,805 |
| 15 Royalties | | | | |
| 16 Occupancy | 7,478,029 | 4,865,084 | 1,799,145 | 813,800 |
| 17 Travel | 6,731,834 | 6,571,154 | 84,168 | 76,512 |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials . | 510 510 | | 22.000 | 12.570 |
| 19 Conferences, conventions, and meetings | 610,518 | 575,882 | 22,066 | 12,570 |
| 20 Interest | 404,053 | | 404,053 | |
| 21 Payments to affiliates | | | | |
| 22 Depreciation, depletion, and amortization | 6,882,085 | 6,551,840 | 234,030 | 96,215 |
| 23 Insurance | 2,092,450 | 1,776,649 | 229,359 | 86,442 |
| 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 VETERINARY & MEDICAL SE | 9,694,999 | 9,589,673 | 1,930 | 103,396 |
| b OPERATING SUPPLIES | 3,529,288 | 3,433,315 | 49,474 | 46,499 |
| c MISCELLANEOUS EXPENSES | 2,968,513 | 2,583,345 | 325,029 | 60,139 |
| d REPAIRS AND MAINTENANCE | 1,527,786 | 1,379,043 | 104,056 | 44,687 |

Check here ▶ ✓ if following SOP 98-2 (ASC 958-720).

| Forr | n 990 | (2022) | | | | | Page 11 |
|----------|--------|---|--|------------------------------|---------------------------------|-------------|--------------------|
| Р | art X | Balance Sheet | | | | | |
| | | Check if Schedule O contains a response or | note to | o any line in this Part IX . | | | 🗆 |
| | | | | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash-non-interest-bearing | | | 11,948,498 | 1 | 14,719,776 |
| | 2 | Savings and temporary cash investments | | | 30,897,690 | 2 | 69,232,049 |
| | 3 | Pledges and grants receivable, net | | | 24,284,914 | 3 | 23,094,158 |
| | 4 | Accounts receivable, net | | | 5,189,016 | 4 | 5,370,085 |
| Assets | 5 6 | Loans and other receivables from any current trustee, key employee, creator or founder, su controlled entity or family member of any of t Loans and other receivables from other disquunder section 4958(f)(1)), and persons described. | cial contributor, or 35% persons persons (as defined | | 5 | | |
| | 7 | Notes and loans receivable, net | | | | 7 | |
| | 8 | Inventories for sale or use | | | | 8 | |
| | 9 | Prepaid expenses and deferred charges . | | | 7,037,598 | 9 | 4,996,962 |
| | 10a | Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 10a | 138,729,036 | | | |
| | b | Less: accumulated depreciation | 10b | 61,564,157 | 64,459,281 | 10 c | 77,164,879 |
| | 11 | Investments—publicly traded securities . | | | 310,850,772 | 11 | 263,165,358 |
| | 12 | Investments—other securities. See Part IV, li | ne 11 | | 63,868,453 | 12 | 66,664,894 |
| | 13 | Investments—program-related. See Part IV, I | ine 11 | | | 13 | |
| | 14 | Intangible assets | | | | 14 | |
| | 15 | Other assets. See Part IV, line 11 | | | 56,544,270 | 15 | 51,333,049 |
| | 16 | Total assets: Add lines 1 through 15 (must e | qual li | ne 33) | 575,080,492 | 16 | 575,741,210 |
| | 17 | Accounts payable and accrued expenses . | | | 21,011,449 | 17 | 18,864,852 |
| | 18 | Grants payable | | | 2,586,246 | 18 | 1,073,787 |
| | 19 | Deferred revenue | | | 19 | | |
| | 20 | Tax-exempt bond liabilities | | | 20 | | |
| S | 21 | Escrow or custodial account liability. Comple | te Par | t IV of Schedule D | | 21 | |
| oilities | 22 | Loans and other payables to any current or fo key employee, creator or founder, substantial | | | | | |



33

43,234,686 43.241.501 25 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 26 Total liabilities. Add lines 17 through 25 . . 66.832.381 26 87.744.073 Net Assets or Fund Balances Organizations that follow FASB ASC 958, check here 🕨 🔽 and complete lines 27, 28, 32, and 33. Net assets without donor restrictions 424.064.683 27 407.751.614 84,183,428 80.245.523 28 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here complete lines 29 through 33. Capital stock or trust principal, or current funds 29 Paid-in or capital surplus, or land, building or equipment fund . . . 30 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 508,248,111 32 487,997,137

22

23

24

575.080.492

33

24,563,933

575.741.210 Form **990** (2022)

controlled entity or family member of any of these persons

Total liabilities and net assets/fund balances

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Donated services and use of facilities

Consolidated basis

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

a separate basis, consolidated basis, or both:

Uniform Guidance, 2 C.F.R. Part 200, Subpart F?

basis, consolidated basis, or both:

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate

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

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

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.

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

If the organization changed either its oversight process or selection process during the tax year, explain in

5

Separate basis

Separate basis

Schedule O.

1 2 3 4 Net unrealized gains (losses) on investments 5 6 7

☐ Both consolidated and separate basis

Both consolidated and separate basis

| ð | Prior period adjustments | 8 | | | | |
|----|---|----|-------------|------|--------|---|
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | | -5,2 | 211,62 | 5 |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column | 10 | 487,997,137 | | | 7 |
| Pa | 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 on Schedule O. | | | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | 2a | | Νo | |

2b

2c

За

3b

Yes

Yes

Νo

Form 990 (2022)

Page **12**

376,416,316

340,307,267

508,248,111

-51,148,397

36,109,049

| Form 990 (2022) | | |
|---|-------------------------------|----------------|
| Additional Data | | Return to Form |
| | Coffee ID. | |
| | Software ID: | |
| | Software Version: | |
| Form 990, Special Condition Description | on: | |
| | Special Condition Description | |

(Form 990) Department of the Treasury

Internal Revenue Service

SCHEDULE A

Name of the organization

THE AMERICAN SOCIETY FOR THE PREVENTION

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.

Inspection **Employer identification number**

| OF C | RUELTY | TO ANIMALS 13-1623829 |
|------|--------|---|
| Pa | rt I | Reason for Public Charity Status (All organizations must complete this part.) See instructions. |
| Γhe | organi | zation is not a private foundation because it is: (For lines 1 through 12, check only one box.) |
| 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).) |
| 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). Enhospital's name, city, and state: |
| 5 | | An organization operated for the benefit of a college or university owned or operated by a governmental unit descr 170(b)(1)(A)(iv). (Complete Part II.) |

ii). Enter the described in section A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).

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

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

An agricultural research organization described in 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:

An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support

from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)

An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting

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

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

not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.

integrated, or Type III non-functionally integrated supporting organization.

Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally Enter the number of supported organizations

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

| (i) Name of supported organization | (iii) EIN (iii) Type of organization (described on lines | | (iv) Is the d listed in you docun | 5 | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) |
|------------------------------------|--|---------------------------------|---|----|---|---|
| | | 1- 10 above (see instructions)) | Yes | No | | |
| | | | | | | |
| | | | | | | |
| Total . | | | | | | |
| or Paperwork Reduction Act Noti | ce, see the Ins | structions for | Cat. No. 11285 | F | Schedule | e A (Form 990) 202 |

Public support. Subtract line 5

Section B. Total Support

capital assets (Explain in Part

Total support. Add lines 7

.

.

(or fiscal year beginning in)

7 Amounts from line 4. . Gross income from interest, dividends, payments received on (a) 2018

243.128.195

Public support percentage for 2020 Schedule A, Part II, line 14

Public support percentage for 2022 (line 6, column (f) divided by line 11, column (f))

Section C. Computation of Public Support Percentage

from line 4.

Calendar year

VI.). .

through 10

1,474,286,464

1,474,286,464

42,687,261

1,522,475,225

83,944,583

96.830 %

96.960 %

Schedule A (Form 990) 2022

(f) Total

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

Section A. Public Support Calendar year (a) 2018 **(b)** 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total (or fiscal year beginning in) 1 Gifts, grants, contributions, and 243,128,195 254,185,353 287,167,570 351,249,754 338,555,592 1,474,286,464 membership fees received. (Do not

include any "unusual grant.") . . 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf

The value of services or facilities furnished by a governmental unit to the organization without charge.

243,128,195 254,185,353 287,167,570 351,249,754 338,555,592 Total. Add lines 1 through 3 The portion of total contributions

1,474,286,464 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

Part III. If the organization failed to qualify under the tests listed below, please complete Part III.)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under

10 Other income. Do not include gain or loss from the sale of 1,325,513 973,879 248,805 375,448 601,497 3,525,142

(c) 2020

287,167,570

7,694,169

(d) 2021

351,249,754

10,032,853

(e) 2022

12

14

15

338,555,592

10,321,851

131,748 227,117 1,617,493 1,976,358 not the business is regularly carried on. .

13 First 5 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,

16a 33 1/3% support test-2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box b 33 1/3% support test-2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this 17a 10%-facts-and-circumstances test-2022. 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—2021. 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

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

Net income from unrelated business activities, whether or

8,276,288 securities loans, rents, royalties 6,362,100 and income from similar sources

254.185.353

(b) 2019

| che | edule A (Form 990) 2022 | | | | | | Page 3 |
|-----------|---|------------------|-----------------------|------------------|-----------------|-----------------|---------------------------------------|
| P | art IIII Support Schedule f | | | | | | |
| | (Complete only if you | | | | | | |
| S | II. If the organization ection A. Public Support | Talls to quality | <i>i</i> under the te | sts listed below | v, piease compi | ete Part I | 1.) |
| | endar year | | | | | | |
| | fiscal year beginning in) | (a) 2018 | (b) 2019 | (c) 2020 | (d) 2021 | (e) 2022 | (f) Total |
| - | 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 | | | | | | |
| | 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. | | | | | | |
| С | Add lines 7a and 7b | | | | | | |
| 8 | Public support. (Subtract line 7c | | | | | | |
| _ | from line 6.) | | | | | | |
| | ection B. Total Support | T | | 1 | 1 | 1 | |
| | endar year fiscal year beginning in) | (a) 2018 | (b) 2019 | (c) 2020 | (d) 2021 | (e) 2022 | (f) Total |
| - | Amounts from line 6 | | | | | | |
| .0a | 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. | | | | | | |
| с 11 | Add lines 10a and 10b. Net income from unrelated | | | | | | |
| | business activities not included on | | | | | | |
| | line 10b, whether or not the | | | | | | |
| | business is regularly carried on. | | | | | 1 | |
| 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.) | | . 6: . 1 | h: 1 C 11 . C | | F04 | (-)(2) |
| 14 | First 5 years. If the Form 990 is for the check this have and stop here | - | | | • | | |
| | check this box and stop here | | | | | | · · · · · · · · · · · · · · · · · · · |
| | Public support percentage for 2022 (| | | 13 column (f) | | 4- | |
| 15 | Public support percentage for 2022 (| | | | | | |
| 16 S | | | | | | 16 | |
| | ection D. Computation of Inventor Investment income percentage for 2 | | | | mn (f)) | | |
| 17 | Investment income percentage for 2 | | | | | 17 18 | |
| 18 10- | | | | | | | 6. and line 17 is not |
| 19a | more than 33 1/3%, check this box a | | | | | | |
| L | 33 1/3% support tests—2021. If the | | | | | | |
| U | is not more than 33 1/3%, check this | - | | | • | | _ |

Page 4

No

Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I. If you checked box 12a, of Part I, complete Sections A and B. If you

box 12b, of Part I, complete Sections A and C. If you checked box 12c, of Part I, complete Sections A, D, and E. If you checked

was described in section 509(a)(1) or (2).

amendment to the organizing document).

organization's organizing document?

"Yes," complete Part I of Schedule L (Form 990).

(1) or (2))? If "Yes," provide detail in Part VI.

organizations)? If "Yes," answer line 10b below.

whether the organization had excess business holdings).

| checked box | | 12d, of | Part I, | CC |
|-------------|--------|---------|---------|----|
| Cooking A | All C. | | | _ |

3b and 3c below.

made the determination.

| checked box | 12d, of Part I, complete Sections A a |
|------------------|---------------------------------------|
| Section A. All S | Supporting Organizations |
| • | |

| checked box | 12d, of Part I, complete Sections A and D, and complete Pa |
|----------------|--|
| Section A. All | Supporting Organizations |
| | |
| 4 | |

describe the designation. If historic and continuing relationship, explain.

you checked box 12a or 12b in Part I, answer lines 4b and 4c below.

or supervised by or in connection with its supported organizations.

If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,

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

b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and

purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.

all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.

Substitutions only. Was the substitution the result of an event beyond the organization's control?

the filing organization's supported organizations? If "Yes," provide detail in Part VI.

regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).

supporting organization had an interest? If "Yes," provide detail in Part VI.

Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines

satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization

Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if

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

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

Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c 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

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

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

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with

Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If

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)

b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the

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

assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from,

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine

Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)

| CHECKEU DOX | 120, 01 F | art I, comple |
|-------------|----------------|---------------|
| Section A. | All Supporting | Organizat |
| | | |
| | | |

| KCG DOX | 12a, or rate 1, complete sections it and B, and complete rate v.) | | | |
|---------------------------------------|--|--|--|--|
| ction A. All Supporting Organizations | | | | |
| | | | | |
| Are all of | the organization's supported organizations listed by name in the organization's governing documents? | | | |

| 1 | |
|---|--|
| | |

Yes

2

За

3b

3с

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Part IV Supporting Organizations (continued)

Page 5

| | | | Yes | No |
|----|--|--------|-------|----|
| 11 | Has the organization accepted a gift or contribution from any of the following persons? | | | |
| а | A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization? | 11a | | |
| b | A family member of a person described on 11a above? | 11b | | |
| c | | 11c | | - |
| _ | Part VI | | | |
| | ection B. Type I Supporting Organizations | | Vaa | N. |
| 1 | Did the officers, 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 | Yes | No |
| 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 | | |
| S | ection 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 | 1 | | |
| S | ectfon ^z b ^{:/o} Afi [/] Type III Supporting Organizations | | | L |
| | | | 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 line 2 above, 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 | 3 | | |
| | assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations ection E. Type III Functionally-Integrated Supporting Organizations | | | L |
| 1 | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see inst | rustio | na\: | |
| | The organization satisfied the Activities Test. Complete line 2 below. | uctio | 115). | |
| | b The organization is the parent of each of its supported organizations. Complete line 3 below. | | | |
| | The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions) | (see | | |
| 2 | Activities Test. Answer lines 2a and 2b below. | | Yes | No |
| | 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. b Did the activities described on line 2a, above 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. | 2a | | |
| 3 | Parent of Supported Organizations. Answer lines 3a and 3b below. | 2b | | |

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

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.

each of the supported organizations? If "Yes" or "No", provide details in Part VI.

За

temporary reduction (see instructions)

instructions)

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

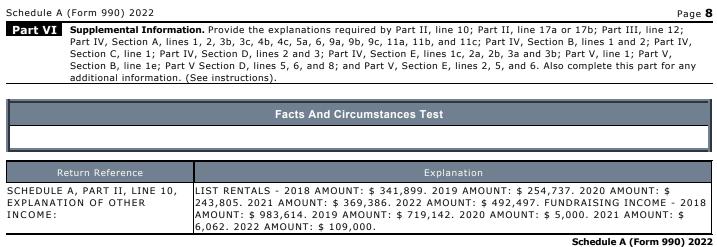
Page **6**

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

(continued)

Page **7**

| Section D ^O r bastiabtifibh s | | Current Year | | |
|--|---------------------------------------|--------------------|----|-------------------------------|
| Amounts paid to supported organizations to accompli | sh exempt purposes | | 1 | |
| 2 Amounts paid to perform activity that directly further | s evemnt nurnoses of sunno | rted | | |
| organizations, in | s exempt purposes or suppo | 1100 | 2 | |
| excess of income from activity | | | | |
| 3 Administrative expenses paid to accomplish exempt p | ourposes of supported organ | nizations | 3 | |
| 4 Amounts paid to acquire exempt-use assets | | | 4 | |
| 5 Qualified set-aside amounts (prior IRS approval requir | ed - provide details in Part V | 'I) | 5 | |
| 6 Other distributions (describe in Part VI). See instruc | tions | | 6 | |
| 7 Total annual distributions. Add lines 1 through 6. | | | 7 | |
| 8 Distributions to attentive supported organizations to | which the organization is re- | snonsive | | |
| (provide | Willest the organization is re- | 50113176 | 8 | |
| details in Part VI). See instructions | | | | |
| 9 Distributable amount for 2022 from Section C, line 6 | | | 9 | |
| 10 Line 8 amount divided by Line 9 amount | | | 10 | |
| Section E - Distribution Allocations | (i) | (i Underdist | • | (iii) Distributable |
| (see instructions) | Excess Distributions | Onderdist Pre-2 | | Distributable Amount for 2022 |
| 1 Distributable amount for 2022 from Section C, line 6 | | | | |
| 2 Underdistributions, if any, for years prior to 2022 | | | | |
| (reasonable cause required explain in Part VI | | | | |
|). See instructions. | | | | |
| 3 Excess distributions carryover, if any, to 2022: | | | | |
| a From 2017 | | | | |
| b From 2018 | | | | |
| c From 2019 | | | | |
| d From 2020 | | | | |
| e From 2021 | | | | |
| f Total of lines 3a through e | | | | |
| g Applied to underdistributions of prior years | | | | |
| h Applied to 2022 distributable amount | | | | |
| Carryover from 2017 not applied (see instructions) | | | | |
| j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. | | | | |
| 4 Distributions for 2022 from Section D, line 7: | | | | |
| \$ | | | | |
| a Applied to underdistributions of prior years | | | | |
| b Applied to 2022 distributable amount | | | | |
| c Remainder. Subtract lines 4a and 4b from line 4. | | | | |
| 5 Remaining underdistributions for years prior to | | | | |
| 2022, if any. Subtract lines 3g and 4a from line 2. | | | | |
| If the amount is greater than zero, explain in Part VI | | | | |
| See instructions. | | | | |
| 6 Remaining underdistributions for 2022. Subtract | | | | |
| lines 3h and 4b from line 1. If the amount is greater | | | | |
| than zero, explain in Part VI . See instructions. | | | | |
| 7 Excess distributions carryover to 2023. Add lines 3j and 4c. | | | | |
| 8 Breakdown of line 7: | | | | |
| a Excess from 2018 | | | | |
| b Excess from 2019 | | | | |
| c Excess from 2020 | | | | |
| d Excess from 2021 | | | | |
| E (2022 | | | | |



SCHEDULE C (Form 990)

Department of the Treasury

Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Political Campaign and Lobbying Activities

Employer identification number

Open to Public Inspection

OMB No. 1545-0047

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

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

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

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V,

- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

line 35c (Proxy Tax) (see separate instructions), then Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of the organization

THE AMERICAN SOCIETY FOR THE PREVENTION

OF CRUELTY TO ANIMALS

13-1623829 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A

Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for definition of "political campaign activities."

2 Political campaign activity expenditures. See instructions

Volunteer hours for political campaign activities. See instructions

Part I-B Complete if the organization is exempt under section 501(c)(3).

Enter the amount of any excise tax incurred by the organization under section 4955

Enter the amount of any excise tax incurred by organization managers under section 4955

2 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ┌ Yes

3 Was a correction made?

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities

1 Enter the amount of the filing organization's funds contributed to other organizations for section 527

exempt function activities Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b..........

Did the filing organization file Form 1120-POL for this year? ┌ Yes □ No Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing

5 organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a

separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (b) Address (a) Name (c) EIN (d) Amount paid from (e) Amount of

filing organization's political contributions funds. If none, enter received and -0-.

promptly and directly delivered to a separate political organization. If none, enter -0-.

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

5

Cat. No. 50084S

Schedule C (Form 990) 2021

| Sche | dule C (Form 990) 2021 | | | | Pa | ge 3 |
|-------|---|----------------|---------|----|------|-------------|
| Pa | rt II-B Complete if the organization is exempt under section 501(c)(3) and has filed Form 5768 (election under section 501(h)). | NOT | | | | |
| For e | each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying | (ä | a) | | (b) | |
| | activity. | | No | Aı | moun | t |
| 1 | During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: | | | | | |
| а | Volunteers? | Yes | | | | |
| b | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | Yes | | | | |
| С | Media advertisements? | Yes | | | 35 | 56,645 |
| d | Mailings to members, legislators, or the public? | Yes | | | (| 57,598 |
| е | Publications, or published or broadcast statements? | Yes | | | 1 | 16,445 |
| f | Grants to other organizations for lobbying purposes? | Yes | | | į | 58,690 |
| g | Direct contact with legislators, their staffs, government officials, or a legislative body? | Yes | | | 81 | 11,130 |
| h | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | Yes | | | 4 | 19,152 |
| i | Other activities? | Yes | | | 45 | 59,531 |
| j | Total. Add lines 1c through 1i | | | | 1,81 | 19,191 |
| 2a | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | Νo | | | |
| b | If "Yes," enter the amount of any tax incurred under section 4912 | | | | | |
| С | If "Yes," enter the amount of any tax incurred by organization managers under section 4912 | | · | | | |
| d | If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | | | | | |
| Par | t III-A Complete if the organization is exempt under section $501(c)(4)$, section section $501(c)(6)$. | 501(c) |)(5), d | r | | |
| | | | | | Yes | No |
| 1 | Were substantially all (90% or more) dues received nondeductible by members? | | | 1 | | |
| 2 | Did the organization make only in-house lobbying expenditures of \$2,000 or less? | | | 2 | | |

| 1 | Were substantially all (90% or more) dues received nondeductible by members? | 1 | | |
|-----|---|------|-------|---|
| 2 | Did the organization make only in-house lobbying expenditures of \$2,000 or less? | 2 | | |
| 3 | Did the organization agree to carry over lobbying and political expenditures from the prior year? | 3 | | |
| Par | t III-B Complete if the organization is exempt under section $501(c)(4)$, section $501(c)(5)$, | or s | ectio | n |

501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members 1

| 2 | Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). | | |
|---|---|----|--|
| а | Current year | 2a | |
| | Carryover from last year | 2b | |
| С | Total | 2c | |
| 3 | Aggregate amount reported in section $6033(e)(1)(A)$ notices of nondeductible section $162(e)$ dues . | 3 | |
| 4 | If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and | | |
| | political expenditure next year? | 4 | |
| 5 | Taxable amount of lobbying and political expenditures. See Instructions | 5 | |

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

| Return Reference | Explanation |
|--------------------|--|
| PART II-B, LINE 1: | GENERAL - THE ASPCA'S MISSION TO PROVIDE EFFECTIVE MEANS FOR THE PREVENTION OF |
| | CRUELTY TO ANIMALS IN THE UNITED STATES IS ADVANCED THROUGH A COMBINATION OF: |
| | SIGNIFICANT DIRECT CARE PROGRAMS; POLICY AND LEGISLATIVE REFORM; AND LEARNING, |
| | RESEARCH AND TRAINING PROGRAMS THAT IMPACT MILLIONS OF ANIMALS AND |
| | ORGANIZATIONS AROUND THE COUNTRY EACH YEAR. ASPCA'S LIFESAVING PROGRAMS |
| | INCLUDE NATIONAL RELOCATION TO SAVE LIVES OF AT-RISK HOMELESS ANIMALS; |
| | PARTNERSHIPS WITH COMMUNITIES TO INCENTIVIZE MORE LIVE RELEASE AND RESCUE FOR |
| | HOMELESS ANIMALS; PROFESSIONAL DEVELOPMENT FOR SHELTERS AND RESCUE |
| | ORGANIZATIONS; A BEHAVIORAL REHABILITATION CENTER AND LEARNING LAB TO |
| | REHABILITATE UNDER SOCIALIZED, FEARFUL DOGS FROM PUPPY MILLS, HOARDING AND |
| | OTHER CRIEFLTY CASES: A COLLABORATION WITH THE NEW YORK CITY POLICE |

DEPARTMENT; THE ASPCA'S COMMUNITY ENGAGEMENT PROGRAM TO ADDRESS THE ROOT CAUSES OF SUFFERING IN HOARDING CASES; THE ASPCA ANIMAL HOSPITAL; AND SPAY/NEUTER OPERATIONS AND ADOPTION CENTER IN NEW YORK CITY. ALL OF THESE PROGRAMS SERVE AS PROVING GROUNDS TO UNDERSTAND THE MYRIAD OF PROBLEMS ANIMALS FACE AND INFORM THE ASPCA'S WORK TO ADVANCE POLICIES THAT WILL PREVENT CRUELTY IN THE FUTURE. THE LESSONS THE ASPCA TAKES FROM THESE PROGRAMS ENABLE THEM TO BRING EXPERT VOICES AND INFORMED OPINIONS TO THEIR WORK TO DISSEMINATE THESE LEARNINGS TO OTHER ANIMAL WELFARE ORGANIZATIONS AROUND THE COUNTRY AS WELL AS TO ADVOCATE FOR LAWS TO DETER CRUEL TREATMENT OF ANIMALS IN COMMUNITIES ALL ACROSS THE COUNTRY. 1A. VOLUNTEERS: THE ASPCA WORKS WITH VOLUNTEERS BY HOLDING CITIZEN TRAINING WORKSHOPS IN LOCAL COMMUNITIES, PROVIDING OPPORTUNITIES FOR THEM TO JOIN ASPCA STAFF AT THE STATE AND FEDERAL CAPITOLS TO PROMOTE OR OPPOSE LEGISLATION THROUGH MEETINGS WITH LEGISLATORS AND THEIR AIDES. THE ASPCA EMPLOYS TRAINING TOOLS SUCH AS WEBINARS AND CONFERENCES. 1B. PAID STAFF OR MANAGEMENT: ASPCA MANAGEMENT AND STAFF STRATEGIZE AND COORDINATE THEIR PUBLIC POLICY EFFORTS AIMED AT ENHANCING THE ASPCA'S ABILITY TO PERFORM DIRECT CARE WORK AND TO HELP PREVENT CRUELTY. THEY CULTIVATE AND EXPAND CONTACTS WITHIN GOVERNMENT BODIES, INCLUDING LEGISLATURES AND REGULATORY AGENCIES, AND WORK WITH OTHER NATIONAL AND LOCAL ORGANIZATIONS TO PROMOTE HUMANE POLICIES. 1C. MEDIA ADVERTISEMENTS: PERIODICALLY, THE ASPCA BUYS ADVERTISEMENT SPACE IN PUBLIC POLICY-FOCUSED NEWSPAPERS (E.G., ROLL CALL, THE HILL) THAT LEGISLATORS AND THEIR STAFF REGULARLY READ. THE ADVERTISEMENTS ARE STRATEGICALLY SCHEDULED (OFTEN AHEAD OF A CRUCIAL COMMITTEE VOTE OR FLOOR VOTE) TO MAXIMIZE EXPOSURE AND TIMELINESS TO CRITICAL ISSUES. THE ASPCA ALSO BUYS STRATEGICALLY TARGETED ADVERTISING SPACE

ON SOCIAL MEDIA (E.G., FACEBOOK) FOR THE SAME PURPOSE. 1D. MAILINGS TO MEMBERS, LEGISLATORS, OR THE PUBLIC: THE ASPCA COMMUNICATES WITH ITS MEMBERS, UNPAID VOLUNTEERS, LEGISLATORS AND THE PUBLIC THROUGH MAILINGS, EMAIL, AND ELECTRONIC ALERTS TO UPDATE AND INFORM AS WELL AS TO ENCOURAGE THEIR PARTICIPATION IN POSITIVE OUTCOMES FOR ANIMALS. THE ASPCA EMPLOYS TRADITIONAL AND SOCIAL MEDIA TOOLS TO INFORM THE PUBLIC OF LEGISLATION, REGULATIONS, AND OTHER POLICIES THAT PROMOTE ANIMAL WELFARE OR THAT ARE HOSTILE TO IT AND TO PROVIDE THEM WITH SUPPORT AND TOOLS FOR POLICY CHANGE. 1E. PUBLICATIONS, OR PUBLISHED OR BROADCAST STATEMENTS: ASPCA STAFF CONDUCTS INTERVIEWS WITH AND PROVIDES BACKGROUND TO MEDIA ORGANIZATIONS TO INFORM THE PUBLIC OF ITS LIFESAVING PROGRAMS AND POLICY DECISIONS CONCERNING ANIMAL WELFARE. 1F. GRANTS TO OTHER ORGANIZATIONS FOR LOBBYING PORPOSES: THE ASPCA PROVIDES GRANTS TO ORGANIZATIONS TO PROMOTE ANIMAL WELFARE INCLUDING THOSE WORKING TO FURTHER ANIMAL PROTECTION EFFORTS IN LOCAL AND STATE LEGISLATURES AND CONGRESS AS WELL AS IN REGULATIONS AT ALL LEVELS. 1G. DIRECT CONTACT WITH LEGISLATORS, THEIR STAFF, GOVERNMENT OFFICIALS, OR A LEGISLATIVE BODY: THE ASPCA PROMOTES ANTI-CRUELTY LEGISLATION THROUGH DIRECT CONTACTS WITH FEDERAL AND STATE LEGISLATORS, THEIR STAFF, GOVERNMENT OFFICIALS AT ALL LEVELS, AND LOCAL LEGISLATURES. THE ASPCA'S STAFF, UNPAID VOLUNTEERS, AND CONSULTANTS WORK TO INFLUENCE LEGISLATION TO HELP ANIMALS THROUGH SUCH CONTACTS. 1H. RALLIES, DEMONSTRATIONS, SEMINARS, CONVENTIONS, SPEECHES, LECTURES, OR ANY OTHER MEANS: THE ASPCA HOLDS LOBBY DAYS, LEADERSHIP TRAINING SUMMITS, CITIZEN LOBBYING WORKSHOPS, INCLUDING SPEECHES AND SEMINARS, AND GIVES PRESENTATIONS AND SPEECHES TO ENCOURAGE PUBLIC AWARENESS OF HUMANE LEGISLATION AND TO PROMOTE ACTION INFLUENCING POSITIVE OUTCOMES FOR ANIMAL WELFARE POLICY. 11. OTHER ACTIVITIES: THE ASPCA WORKS CLOSELY WITH OTHER NATIONAL, STATE, AND LOCAL SHELTERS AND ANIMAL WELFARE ORGANIZATIONS AS WELL AS OTHER INDUSTRY OR NON-PROFIT ORGANIZATIONS WITH COMMON INTERESTS TO ALIGN PUBLIC POLICIES WITH BEST PRACTICES FOR ANIMAL WELFARE AND TO ENSURE THAT LAW ENFORCEMENT, FIELD WORK, DISASTER RELIEF, ANTI-CRUELTY EFFORTS, AND SHELTERING OPERATIONS ARE ABLE TO BEST PROTECT ANIMALS. THE ASPCA EMPLOYS PROFESSIONAL CONSULTANTS TO SUPPORT AND INFORM ITS LOBBYING EFFORTS AND TO CONDUCT COALITION WORK, INTERNAL COORDINATION AND GRASSROOTS NETWORKING AND CULTIVATION FOR HUMANE PUBLIC POLICY ADVANCEMENT. SEE SCHEDULE O FOR MORE INFORMATION.

Schedule C (Form 990) 2021

SCHEDULE D (Form 990)

Department of the Treasury

Name of the organization

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 <u>www.irs.gov/Form990</u> for instructions and the latest information. OMB No. 1545-0047

Open to Public Inspection

Employer identification number

| | E AMERICAN SOCIETY FOR THE PREVENTION CRUELTY TO ANIMALS | | | | | 13-: | 1623829 | | |
|-----|--|---|-------------|----------------------------------|-------------------------|----------|---------------------------------|---|--|
| Pā | art I Organizations Maintaining Donor A | | | | ilar Fur | | | | |
| | Complete if the organization answered | | | Part IV, lin | e 6. | | (b) Funds and other accounts | | |
| 1 | Total number at end of year | (4) 50110 | ı uu | visca ranas | | <u> </u> | (b) runus una otner accounts | | |
| 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 add the organization's property, subject to the organizat | - | | | | | | | |
| 6 | Did the organization inform all grantees, donors, and charitable purposes and not for the benefit of the doi impermissible private benefit? | nor or donor adviso | or, o | or for any other | er purpose | e con | ferring | | |
| Pa | Conservation Easements. Complete if the organization answered | | | | | | | | |
| 1 | Purpose(s) of conservation easements held by the o | | | | | | | | |
| | Preservation of land for public use (e.g., recreati | ion or education) | | Preservation | on of an h | istori | ically important land area | | |
| | Protection of natural habitat | | | Preservation | on of a ce | rtifie | d historic structure | | |
| | Preservation of open space | | | | | | | | |
| 2 | Complete lines 2a through 2d if the organization hel | ld a qualified conse | erva | tion contribu | tion in the | forn | n of a conservation | | |
| | easement on the last day of the tax year. | | | | | | Held at the End of the Year | | |
| а | Total number of conservation easements | | | | <u> </u> | 2a | | | |
| b | Total acreage restricted by conservation easements | 5 | | | _ : | 2b | | | |
| С | Number of conservation easements on a certified his | storic structure inc | lude | ed in (a) | | 2c | | | |
| d | Number of conservation easements included in (c) a historic structure listed in the National Register | cquired after 7/25 | | | | 2d | | | |
| 3 | Number of conservation easements modified, transfetax year | erred, released, ex | ting | uished, or te | rminated l | by th | ne organization during the | | |
| 4 | Number of states where property subject to conserv | vation easement is | loca | ated 🕨 | | | | | |
| 5 | Does the organization have a written policy regardin violations, and enforcement of the conservation eas | ng the periodic mor | nitor | ing, inspection | | ng of | · Yes No | | |
| | · | | | | | a con | | _ | |
| 6 | Staff and volunteer hours devoted to monitoring, ins year | specing, nanding | OI V | iolations, and | ı emorcini | y con | iservation easements during the | = | |
| 7 | Amount of expenses incurred in monitoring, inspecti | ing, handling of vio | olati | ons, and enfo | orcing con | serva | ation easements during the yea | r | |
| 8 | Does each conservation easement reported on line (B)(i) and section 170(h)(4)(B)(ii)? | | | | | on 17 | 70(h)(4) Yes No | | |
| 9 | In Part XIII, describe how the organization reports balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease | f the footnote to th | | | | | • | | |
| Pai | TIII Organizations Maintaining Collectic | ons of Art, His | to r | ical Treas Part IV, lin | ures, or | Ot | her Similar Assets. | | |
| 1a | If the organization elected, as permitted under FASI of art, historical treasures, or other similar assets his service, provide, in Part XIII, the text of the footnot | B ASC 958, not to eld for public exhib | repo | ort in its reve n, education, | enue state or resear | ch in | n furtherance of public | | |
| b | | | | | | | | | |
| | (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, his following amounts required to be reported under FA | · | | | | finan | cial gain, provide the | | |
| а | Revenue included on Form 990, Part VIII, line 1 | | | | | | . • \$ | _ | |
| b | Assets included in Form 990, Part X | | | | | | . ▶\$ | _ | |
| | Panerwork Reduction Act Notice see the Instructions | | | | | | | | |

Part XIII.

1a Land

b Buildings

c Leasehold improvements

d Equipment

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

Part IV

Public exhibition

Scholarly research

Part X, line 21.

collection items (check all that apply):

Preservation for future generations

Escrow and Custodial Arrangements.

No

Page 2

| 1a | Is the organization an agent, trustee, custod included on Form 990, Part X? | | | | | | s [| No | |
|----|---|--------------|--------------------|------------------------|---------------------------------------|---------------------------|--------|----------|--------------|
| b | If "Yes," explain the arrangement in Part XI | II and comp | lete th | e following table: | | Amount | : | | _ |
| c | Beginning balance | 1c | | | | | | | |
| d | Additions during the year | | | | 1d | | | | _ |
| е | Distributions during the year | | | | 1e | | | | |
| f | Ending balance | | | | . 1f | | | | |
| 2a | Did the organization include an amount on F | Form 990, P | art X, I | ine 21, for escrow | or custodial acco | ount liability? Ye | s [| No | |
| b | If "Yes," explain the arrangement in Part XI | II. Check he | ere if th | ne explanation has | s been provided i | n Part XIII | П | | |
| | rt V Endowment Funds. | | | · | · · · · · · · · · · · · · · · · · · · | | | | |
| | Complete if the organization ans | | | | | | | | |
| | | (a) Curren | | (b) Prior year | | (d) Three years bac | | | |
| | Beginning of year balance | • | 186,835 | 12,629,150 | 11,246,52 | | | 65,9 | 998,068 |
| | Contributions | | 388,026 926,566 | 557,685 | 1,103,22 | | | 2 . | 15,663 |
| С | Net investment earnings, gains, and losses | -5 | 926,566 | 557,685 | 1,103,22 | 1,008,406 | | -3,. | 129,099 |
| d | Grants or scholarships | | | | | | | | |
| е | Other expenditures for facilities and programs | | | | | | | 52,0 | 546,514 |
| f | Administrative expenses | | | | | | | | |
| g | End of year balance | 12,6 | 548,295 | 13,186,835 | 12,629,15 | 11,246,524 | | 10, | 238,118 |
| 2 | Provide the estimated percentage of the cur | rent year er | nd balaı | nce (line 1g, colun | nn (a)) held as: | | | | |
| а | Board designated or quasi-endowment | 0 % | | | | | | | |
| b | Permanent endowment ► 64.000 % | | | | | | | | |
| С | Term endowment ► 36.000 % | | | | | | | | |
| | The percentages on lines 2a, 2b, and 2c sh | ould equal : | 100%. | | | | | | |
| За | Are there endowment funds not in the posse organization by: | ssion of the | organi | zation that are he | d and administer | ed for the | | Yes | No |
| | (i) Unrelated organizations | | | | | 3 | Ba(i) | | No |
| | (ii) Related organizations | | | | | 3 | Ba(ii) | | Νo |
| b | If "Yes" on 3a(ii), are the related organizati | ons listed a | s requi | red on Schedule R | ? | | 3b | | |
| 4 | Describe in Part XIII the intended uses of the | ne organizat | ion's A | ndowment funds | | | | | |
| Da | rt VI Land, Buildings, and Equipme | | | naowinent failus. | | | | | |
| гē | Complete if the organization ans | | s" on | Form 990. Part | IV, line 11a. Se | ee Form 990. Par | t X. I | ine 10 |). |
| | Description of property (a) Cost or othe (investment) | er basis | | or other basis (other) | | | | ook valu | |

10,932,205

70,249,359

22,421,878

16,696,257

18,429,337

33,025,829

7,311,461

14,648,600

6,578,267

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990,

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?. . .

Loan or exchange programs

Other

10,932,205

37,223,530

15,110,417

2,047,657

11,851,070

| | (Form 990) 2021 Investments - Other Securities. | | | | Page 3 |
|----------------------|--|----------------------|-----------------------|-------------------------------|---|
| Pait VII | Complete if the organization answered "Yes" or | | | | |
| | (a) Description of security or category (including name of security) | (b) Book value | | (c) Method of vor end-of-year | valuation: r market value |
| | I derivatives | | | | |
| (3) Other | • • | 22,080,3 | 85 | F | |
| | F FUNDS - PRIVATE EQUITY | | | F | |
| | | 518,9 | | | |
| | E EQUITY IN LIQUIDATION | 4,216,0 | | F | |
| (D) PRIVAT | | 11,522,8 | | F | |
| (E) EMERGI | NG MARKETS | 12,035,5 | 36 | F | |
| (F) EQUITY | LONG | 16,291,0 | 86 | F | |
| (G) | | | | | |
| (H) | | | | | |
| | n (b) must equal Form 990, Part X, col. (B) line 12.) | 66,664,8 | 94 | | |
| Part VIII | Investments - Program Related. Complete if the organization answered 'Yes' or | n Form 990, Part | : IV, line 11c. Se | e Form 990, | Part X, line 13. |
| | (a) Description of investment | | (b) Book value | • • | thod of valuation: -of-year market value |
| (1) | | | | | · |
| (2) | | | | | |
| (3) | | | | | |
| (4) | | | | | |
| (5) | | | | | |
| (6) | | | | | |
| (7) | | | | | |
| (8) | | | | | |
| (9) | | | | | |
| | (1) | | | | |
| | Other Assets. | | | | |
| | Complete if the organization answered 'Yes' on (a) Description | Form 990, Part | IV, line 11d. See | Form 990, Pa | rt X, line 15. (b) Book value |
| | DM ASPCA VETERINARY SERVICES OF NC, PC DF-USE ASSETS | | | | 206,362 30,046,023 |
| (3)PERPETU | JAL TRUSTS | | | | 20,367,939 |
| (4)CHARITA (4) | ABLE REMAINDER TRUSTS | | | | 712,725 |
| (5) | | | | | |
| (6) | | | | | |
| (7) | | | | | |
| | | | | | |
| (8) | | | | | |
| (9) | | | | | |
| | onn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. | | | . • | 51,333,049 |
| | Complete if the organization answered 'Yes' on See Form 990, Part X, line 25. | Form 990, Part | IV, line 11e or 1 | .1f. | |
| 1. | (a) Description of li | ability | | | (b) Book value |
| (1) Federal (4) | income taxes | | | | |
| (5) | | | | | |
| (6) | | | | | |
| (7) | | | | | |
| (8) | | | | | |
| | | | | | |
| (9) | 4) | | | | |
| | n (b) must equal Form 990, Part X, col.(B) line 25.) or uncertain tax positions. In Part XIII, provide the tex | ct of the footnote t | o the organization | 's financial stat | 43,241,501 tements that reports the |
| organization XIII | 's liability for uncertain tax positions under FIN 48 (AS | SC 740). Check he | re if the text of the | e footnote has | been provided in Part |

Donated services and use of facilities . . .

Subtract line 2e from line 1

Add lines 2a through 2d

Subtract line 2e from line 1

Other losses Other (Describe in Part XIII.)

.

Other (Describe in Part XIII.)

. Add lines 4a and 4b .

Supplemental Information

Return Reference

Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b .

Add lines **4a** and **4b**

Amounts included on line 1 but not on Form 990, Part IX, line 25:

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) .

Total expenses and losses per audited financial statements

Recoveries of prior year grants . . .

Other (Describe in Part XIII.)

3

1

2

3

Part XIII

PART V, LINE 4:

PART X, LINE 2:

ADJUSTMENTS:

PART XI, LINE 2D - OTHER

SCHEDULE D, PART VI, LINE

BUILDINGS, AND EQUIPMENT

1E: "OTHER" IN LAND,

. Add lines 2a through 2d

-56,199,095

376,416,316

376,416,316

340,514,287

987,957

780,937

340,307,267

Schedule D (Form 990) 2021

339,526,330

987,957

2e

3

4c

5

1

2e

3

40

-6,038,655

987,957

780,937

| 550) 2021 | |
|--|--|
| econciliation of Revenue per Audited Financial Statements With Revenue per | |
| eturn. | |

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

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

MAY HAVE PURPOSE RESTRICTIONS ON THE USE OF INCOME.

PERPETUAL TRUSTS HELD BY OTHERS -5,257,718.

2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

2c

2d

4a 4b

2a

2c

2d

4a

4b

THE ASPCA MAINTAINS AN ENDOWMENT FOR THE PURPOSE OF GENERATING INCOME TO SUPPORT THE ORGANIZATION'S CHARITABLE MISSION. THE ORGANIZATION'S ENDOWMENT CONSISTS OF A PORTFOLIO OF ACTIVELY MANAGED FUNDS ESTABLISHED TO PROVIDE BOTH A SOURCE OF OPERATING FUNDS AS WELL AS LONG-TERM FINANCIAL STABILITY. THE ENDOWMENT'S PRINCIPAL IS INTENDED TO BE LEFT UNTOUCHED, WHILE THE INCOME GENERATED IS INTENDED TO FUND ASPCA PROGRAMS. SOME OF THE ENDOWMENT FUNDS

THE ASPCA OUALIFIES AS A TAX-EXEMPT ORGANIZATION UNDER SECTION 501(C)(3) OF THE IRC AND CORRESPONDING PROVISIONS OF NEW YORK STATE LAW AND IS NOT SUBJECT TO

QUALIFICATION OF TAX-EXEMPT STATUS IS CONTINGENT UPON COMPLIANCE WITH THE REQUIREMENTS OF THE IRC. THE ASPCA RECOGNIZES THE EFFECTS OF INCOME TAX POSITIONS ONLY IF THOSE POSITIONS ARE MORE LIKELY THAN NOT OF BEING SUSTAINED.

EQUIPMENT: OTHER HAS A TOTAL OF \$18,429,337. THIS TOTAL CONSISTS OF \$8,617,456

FOR TRANSPORTATION EQUIPMENT AND \$9,811,881 OF CONSTRUCTION IN PROGRESS.

INVESTMENT EXPENSES -780,937. UNREALIZED LOSS ON BENEFICIAL INTERESTS IN

FEDERAL OR STATE INCOME TAXES. ACCORDINGLY, DONORS ARE ENTITLED TO A CHARITABLE CONTRIBUTION DEDUCTION AS DEFINED IN THE IRC. CONTINUED

NO PROVISION FOR INCOME TAXES WAS REQUIRED FOR 2022 OR 2021.

| 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 . .
- Amounts included on line 1 but not on Form 990, Part VIII, line 12:

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)

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

- 320,217,221
- Net unrealized gains (losses) on investments 2a -51,148,397

| SCHEDULE F | Sta | tement of | ates | OMB No. 1545-0047 | | | |
|--|------------------|-------------------------------------|--|---|----------------|---|--------------------------------------|
| (Form 990) | ► Compl | ete if the organiz | 15, or 16. | 2022 | | | |
| Department of the Treasury Internal Revenue Service | • | Go to www.irs.g | on. | Open to Public Inspection | | | |
| Name of the organization THE AMERICAN SOCIOF CRUELTY TO ANIM | ETY FOR TH | E PREVENTION | Employer ident | dentification number | | | |
| Part I General | Informatio | on on Activit art IV, line 14 | i es Outside b. | the United States. (| Complete | | ration answered |
| et Her assistance | e, the grante | ees' eligibility | for the grants | ds to substantiate the or assistance, and the | | _ | ✓ Yes 🗌 No |
| 2 For grantmake assistance outs | | | organization's | procedures for monito | ring the | use of its gran | ts and other |
| 3 Activites per Regi | on. (The follo | wing Part I, line | 3 table can be | duplicated if additional s | pace is ne | eded.) | |
| (a) Region | | (b) Number of offices in the region | (c) Number of employees, agents, and independent contractors in the region | (d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region) | program spe | rity listed in (d) is a service, describe ecific type of (s) in the region | for and investments in the region |
| (1) CENTRAL AMERI CARIBBEAN | CA AND THE | 0 | 0 | INVESTMENT | | | 10,254,816 |
| (2) EUROPE | | 0 | | INVESTMENT | | | 11,60 |
| (3) NORTH AMERICA | | 0 | | | | ERVICES | 3,70 |
| (4) EUROPE (INCLUI ICELAND & GREE ALBANIA, ANDOF AUSTRIA, BELGI | NLAND) - RRA, | 0 | 0 | PROGRAM SERVICES | LEGAL S | ERVICES | 7,750 |
| (5) | | | | | | | |
| (6) | | | | | | | |
| (7) | | | | | | | |
| (9) | | | | | | | |
| () | | | | | | | |
| 10) | | | | | | | |
| 11) | | | | | | | |
| 12) | | | | | | | |
| 13) | | | | | | | |
| 14) | | | | | | | |
| 15) | | | | | | | |
| 16) | | | | | | | |
| 17) | | | | | | | |
| 3a Sub-total | ation chast- | 0 | 0 | | | | 10,277,868 |

10,277,868

Schedule F (Form 990) 2022

Cat. No. 50082W

to Part I . .

c Totals (add lines 3a and 3b)

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

3 Enter total number of other organizations or entities . . .

| (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of noncash assistance | (h) Description of noncash assistance | (i) Method of valuation (book, FMV, appraisal, other |
|--------------------------|---|---|----------------------|-----------------------------|---------------------------------------|----------------------------------|---------------------------------------|--|
| 1) | | EUROPE (INCLUDING ICELAND & GREENLAND) | PART V | 30,000 | | 0 | | |
| 2) | | EUROPE (INCLUDING ICELAND & GREENLAND) | PART V | 30,000 | | 0 | | |
| 3) | | EUROPE (INCLUDING ICELAND & GREENLAND) | PART V | 30,000 | | 0 | | |
| 4) | | | | | | | | |
| 5) | | | | | | | | |
| 6) | | | | | | | | |
| 7) | | | | | | | | |
| 8) | | | | | | | | |
| 9) | | | | | | | | |
| (0) | | | | | | | | |
| (1) | | | | | | | | |
| (2) | | | | | | | | |
| (3) | | | | | | | | |
| (4) | | | | | | | | |
| (5) | | | | | | | | |
| (6) | | | | | | | | |

(2) (3) (4) (5) (6) (7) (8)

(10) (11) (12)

(13) (14)

(15) (16) (17)

18)

Schedule F (Form 990) 2022

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance (b) Region (c) Number of assistance (d) Amount of disbursement (e) Manner of cash disbursement (f) Amount of progrash (f)

| (a) Type of grant or assistance | (b) Region | recipients | (d) Amount of cash grant | disbursement | noncash assistance | of noncash assistance | (h) Method of valuation (book, FMV, appraisal, other) |
|---------------------------------|------------|------------|----------------------------------|--------------|--------------------|-----------------------|---|
| (1) | | | | | | | |

Schedule F (Form 990) 2022

| Schedule F (Form 990) 2022 | Page 5 |
|--|---|
| method; amounts of invo (accounting method); ar | required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting estments vs. expenditures per region); Part II, line 1 (accounting method); Part III and Part III, column (c) (estimated number of recipients), as applicable. Also complete additional information. See instructions. |
| ReturnReference | Explanation |
| PART I, LINE 2: | GRANTEES THAT RECEIVE FUNDING ARE REQUIRED TO SUBMIT FINAL REPORTS WHICH ARE REVIEWED TO ENSURE THAT THE FUNDS WERE USED APPROPRIATELY AND TO ASSESS THE PROJECT OUTCOMES, IF APPLICABLE. |
| PART III ACCOUNTING METHOD: | |
| | |
| | |
| | |
| | |
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| | |
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| | |
| | |
| | Schedule F (Form 990) 2022 |

Additional Data Software ID: Software Version:

SCHEDULE G (Form 990)

Supplemental Information Regarding Fundraising or Gaming Activities

202

2022

OMB No. 1545-0047

pen to Public

(vi) Amount paid to

(or retained by)

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

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

13-1623829

(v) Amount paid to

(or retained by)

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

- Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a 🔽 Mail solicitations e 🔽 Solicitation of non-government grants
- Internet and email solicitations f Solicitation of government grants
- c Phone solicitations g V Special fundraising events

(ii) Activity

d In-person solicitations

(i) Name and address of

individual

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

(iii) Did

fundraiser have

b Services? If Yes, list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(iv) Gross receipts

from activity

| or entity (fundraiser) | | custody or control of contributions? | | Hom activity | fundraiser listed in col. (i) | organization | |
|--|---------------------|--------------------------------------|----------|--------------|-------------------------------|--------------|--|
| | | | | | | | |
| ASCENTA GROUP (APPCO) 138 SOUTH FIRST STREET SUITE 110 LINDENHURST, NY 11757 | DIRECT MARKETING | Yes | No No | 13,675,125 | 15,746,848 | -2,071,723 | |
| SD&A TELESERVICES INC 5757 WEST CENTURY BOULEVARD SUITE LOS ANGELES, C A 90045 | TELEMARKETING | | No | 12,087,677 | 1,440,439 | 10,647,238 | |
| 3 KNEWSALES GROUP INC 550 QUEEN STREET EAST SUITE 145 TORONTO, ONTARIO C A M5A 1V2 | DIRECT MARKETING | | No | 3,012,740 | 3,584,485 | -571,745 | |
| 4 NEW CANVASSING EXPERIENCE INC 78 SAN MARCOS STREET AUSTIN, TX 78702 | DIRECT MARKETING | | No | 2,925,706 | 2,933,128 | -7,422 | |
| 5 3SIXTY 134 N 4TH STREET BROOKLYN, NY 11249 | DIRECT MARKETING | | No | 1,357,058 | 1,736,825 | -379,767 | |
| 6 | | | | | | | |
| 7 | | | | | | | |
| 8 | | | | | | | |
| 9 | | | | | | | |
| 10 | | | | | | | |
| Total | | | ▶ | 33,058,306 | 25,441,725 | 7,616,581 | |

- **3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.
- A L, A K, A Z, A R, C A, C O, C T, D C, D E, FL, G A, H I, I D, I L, I N, I A, K S, K Y, L A, M E, M D, M A, M I, M N, M S, M O, M T, N E, N V, N H, N J, N M, N Y, N C, N D, O H, O K, O R, P A, R I, S C, S D, T N, T X, U T, V T, V A, W A, W V, W I, W Y

| | more than \$15,000 of fundra events with gross receipts gr | reater than \$5,000. | | | |
|-------------------------|---|---|---|--|---|
| | creme with gross receipes g | (a)Event #1 | (b) Event #2 | (c)Other events | (d) Total events (add col. (a) through |
| | | HUMANE AWARD | TEAM ASPCA | 1 | col. (c)) |
| | | (event type) | (event type) | (total number) | |
| Revenue | | | | | |
| | 1 Gross receipts | 418,135 | 89,982 | 24,555 | 532,672 |
| | 2 Less: Contributions | 309,135 | 89,982 | 24,555 | 423,672 |
| | 3 Gross income (line 1 minus line 2) | 109,000 | , | , | 109,000 |
| | 4 Cash prizes | | | | |
| | 5 Noncash prizes | | | | |
| nse | 6 Rent/facility costs | | | | |
| ed x | 7 Food and beverages | 57,300 | | | 57,300 |
| + | 8 Entertainment | | | | |
| 8 | | | | | |
| Direct Expenses | 9 Other direct expenses | 152,940 | 23,232 | 6 1 | 176,233 |
| | 9 Other direct expenses | | · | 61 | 176,233 233,533 |
| | 10 Direct expense summary. Add lines 4 11 Net income summary. Subtract line 1 | through 9 in column (d 0 from line 3, column (d |) | . | 233,533 -124,533 |
| | 10 Direct expense summary. Add lines 4 | through 9 in column (d 0 from line 3, column (d ganization answered |) | . | 233,533 -124,533 |
| Part | 10 Direct expense summary. Add lines 4 11 Net income summary. Subtract line 1 III Gaming. Complete if the ord | through 9 in column (d 0 from line 3, column (d ganization answered |) | . | 233,533 -124,533 |
| Revenue | 10 Direct expense summary. Add lines 4 11 Net income summary. Subtract line 1 III Gaming. Complete if the ord | through 9 in column (d 0 from line 3, column (d ganization answered ne 6a. |) | | 233,533 -124,533 ported more than (d) Total gaming (add |
| S Revenue | 10 Direct expense summary. Add lines 4 11 Net income summary. Subtract line 1 III Gaming. Complete if the or \$15,000 on Form 990-EZ, line | through 9 in column (d 0 from line 3, column (d ganization answered ne 6a. |) | | 233,533 -124,533 ported more than (d) Total gaming (add |
| S Revenue | 10 Direct expense summary. Add lines 4 11 Net income summary. Subtract line 1 11 Gaming. Complete if the or \$15,000 on Form 990-EZ, line 1 1 Gross revenue | through 9 in column (d 0 from line 3, column (d ganization answered ne 6a. |) | | 233,533 -124,533 ported more than (d) Total gaming (add |
| S Revenue | 10 Direct expense summary. Add lines 4 11 Net income summary. Subtract line 1 11 Gaming. Complete if the or \$15,000 on Form 990-EZ, line 1 Gross revenue | through 9 in column (d 0 from line 3, column (d ganization answered ne 6a. |) | | 233,533 -124,533 ported more than (d) Total gaming (add |
| Oirect Expenses Revenue | 10 Direct expense summary. Add lines 4 11 Net income summary. Subtract line 1 11 Gaming. Complete if the or \$15,000 on Form 990-EZ, line 1 Gross revenue | through 9 in column (d 0 from line 3, column (d ganization answered ne 6a. |) | | 233,533 -124,533 ported more than (d) Total gaming (add |
| Oirect Expenses Revenue | 10 Direct expense summary. Add lines 4 11 Net income summary. Subtract line 1 11 Gaming. Complete if the or \$15,000 on Form 990-EZ, line 1 Gross revenue | through 9 in column (d 0 from line 3, column (d ganization answered ne 6a. (a) Bingo |) | | 233,533 -124,533 ported more than (d) Total gaming (add |
| Direct Expenses Revenue | 10 Direct expense summary. Add lines 4 11 Net income summary. Subtract line 1 11 Gaming. Complete if the or \$15,000 on Form 990-EZ, line 1 Gross revenue | through 9 in column (d 0 from line 3, column (d ganization answered ne 6a. |) | | 233,533 -124,533 ported more than (d) Total gaming (add |
| Direct Expenses Revenue | 10 Direct expense summary. Add lines 4 11 Net income summary. Subtract line 1 11 Gaming. Complete if the or \$15,000 on Form 990-EZ, line 1 Gross revenue | through 9 in column (d 0 from line 3, column (d ganization answered ne 6a. (a) Bingo | (b) Pull tabs/Instant bingo/progressive bingo | art IV, line 19, or rep | 233,533 -124,533 ported more than (d) Total gaming (add |
| Direct Expenses Revenue | 10 Direct expense summary. Add lines 4 11 Net income summary. Subtract line 1 IIII Gaming. Complete if the or \$15,000 on Form 990-EZ, lin 1 Gross revenue | through 9 in column (d 0 from line 3, column (d ganization answered ne 6a. (a) Bingo Yes% No through 5 in column (d | (b) Pull tabs/Instant bingo/progressive bingo Yes% No | c) Other gaming Yes% No | 233,533 -124,533 ported more than (d) Total gaming (add |
| Direct Expenses Revenue | 10 Direct expense summary. Add lines 4 11 Net income summary. Subtract line 1 IIII Gaming. Complete if the or \$15,000 on Form 990-EZ, line 1 Gross revenue | through 9 in column (d 0 from line 3, column (d ganization answered ne 6a. (a) Bingo Yes% No through 5 in column (d ct line 7 from line 1, column | (b) Pull tabs/Instant bingo/progressive hingo Yes% No No | c) Other gaming Yes% No | 233,533 -124,533 ported more than (d) Total gaming (add |
| Direct Expenses Revenue | 10 Direct expense summary. Add lines 4 11 Net income summary. Subtract line 1 Gaming. Complete if the or \$15,000 on Form 990-EZ, line 1 1 Gross revenue | through 9 in column (d 0 from line 3, column (d ganization answered he 6a. (a) Bingo Yes% No through 5 in column (d ct line 7 from line 1, column ation conducts gaming a | Yes% No Tyes% No ctivities:ch of these states? | art IV, line 19, or report IV, line 19, or re | 233,533 -124,533 ported more than (d) Total gaming (add |
| Direct Expenses Revenue | 10 Direct expense summary. Add lines 4 11 Net income summary. Subtract line 1 IIII Gaming. Complete if the organization licensed to conduct If "No," explain: | Yes% Through 9 in column (do not provide a column (do not provide | Yes | | 233,533 -124,533 corted more than (d) Total gaming (add col.(a) through col.(c)) |

| | edule G (Form 990) 2022 | | | | Page 3 |
|-----|--|---|--|------------------|---------|
| 11 | Does the organization co | nduct gaming activities with nonmemb | bers? | · · Yes | No |
| 12 | | | r a member of a partnership or other entity | | No |
| 13 | Indicate the percentage | of gaming activity conducted in: | | | |
| а | The organization's facilit | у | | 13a | % |
| b | An outside facility . | | | 13b | % |
| 14 | Enter the name and addr | ess of the person who prepares the or | ganization's gaming/special events books a | and records: | |
| | Name | | | | |
| | Address • | | | | |
| 15a | | | whom the organization receives gaming | · Tyes | ☐ No |
| b | If "Yes," enter the amour | nt of gaming revenue received by the oue retained by the third party • \$ | organization 🕨 \$and | d the | |
| c | If "Yes," enter name and | address of the third party: | | | |
| | Name | | | | |
| | Address ► | | | | |
| | | | | | |
| | | | | | |
| 16 | Gaming manager informa | | | | |
| | Name - | | | | |
| | Gaming manager compe | nsation 🕨 \$ | ·· | | |
| | Description of services p | provided | | | |
| | • | | | | |
| | Director/officer | Employee | ☐ Independent contractor | | |
| | | | | | |
| 17 | Mandatory distributions: | | | | |
| а | | | e distributions from the gaming proceeds to | | Пис |
| b | | | ributed to other exempt organizations or spe | | I NO |
| - | | exempt activities during the tax year | | Cite | |
| Pai | rt IV Supplemental Part III, lines 9, | Information. Provide the expla | nations required by Part I, line 2b, co as applicable. Also provide any additi | | |
| | instructions. Return Reference | | Explanation | | |
| | | | Schedu | ule G (Form 990) | 2022 |
| Ac | ditional Data | | | Returr | to Form |
| | | Software | . TD: | | |
| | | SOUTWATE | | | |

Software Version:

| Note: To capture the full of Schedule I (Form 990) Department of the Treasury Internal Revenue Service Name of the organization THE AMERICAN SOCIETY FOR OF CRUELTY TO ANIMALS | | Grants and (Governments Complete if the organiz | Other Assistance and Individuals ation answered "Yes," o Attach to Form w.irs.gov/Form990 for | ce to Organiza in the United on Form 990, Part IV, 990. | ations, I States line 21 or 22. | | 2022 Open to Public Inspection |
|--|--|--|--|--|---------------------------------------|----------------------------|--|
| that received more the control of th | ntain records to so to award the grad anization's proced sistance to Dome | ubstantiate the amount nts or assistance? dures for monitoring th estic Organizations and | t of the grants or assista · · · · · · · · · · · · · · · · · · · | ne United States. Complete if the organed. | | on Form 990, Part IV, line | Yes No. 21, for any recipient (h) Purpose of grant or assistance |
| TERREBONNE, OR 97760 (2) ADOPTION FIRST ANIMAL RESCUE 100 FALL CREEK DR STE D JACKSONVILLE, NC 28540 (3) AFTER THE RACES 3168 TELEGRAPH ROAD ELKTON, MD 21921 (4) ALLIANCE FOR CONTRACEPTION IN CATS AND DOGS 2815 NE 66TH AVE PORTLAND, OR 97213 | 46-3689436 30-0729968 41-2185841 | 501(C)3 501(C)3 501(C)3 | 40,000 30,000 | 0 | | | SEE PART IV SEE PART IV |
| (5) AMERICAN HORSE COUNCIL FOUNDATION 1775 TYSONS BLVD MCLEAN, VA 22102 (6) ANCHORAGE ANIMAL CARE AND CONTROL 4711 ELMORE ROAD ANCHORAGE, AK 99507 (7) ANIMAL CARE CENTERS OF NYC 11 PARK PLACE SUITE 805 NEW YORK, NY 10007 (8) ANIMAL HAVEN 200 CENTRE ST | 92-0059987 13-3788986 11-6101487 | GOVERNMENTAL (MUNICI 501(C)3 | 40,000 800,000 | 0 0 | | | SEE PART IV SEE PART IV SEE PART IV |
| NEW YORK, NY 10013 (9) ANIMAL PROTECTION NEW MEXICO INC PO BOX 11395 ALBUQUERQUE, NM 871920395 (10) ANIMAL PROTECTIVE FOUNDATION OF SCHENECTADY INC 53 MAPLE AVENUE GLENVILLE, NY 12302 (11) ANIMAL RESCUE LEAGUE OF IOWA INCORPORATED | 85-0283292 14-0472728 42-0680427 | 501(C)3 501(C)3 | 18,000 126,144 48,632 | 0 | | | SEE PART IV SEE PART IV |
| 5452 NE 22ND STREET DES MOINES, I A 50313 (12) ANIMALKIND POBOX 902 HUDSON, NY 12534 (13) ARIZONA DEPARTMENT OF AGRICULTURE 1110 W WASHINGTON ST PHOENIX, A Z 85007 (14) ARKANSAS DEPARTMENT OF AGRICULTURE - LIVESTOCK AND POULTRY | 14-1820248 86-6004791 71-0847443 | GOVERNMENTAL (MUNICI GOVERNMENTAL (OTHER) | 7,000 42,000 | 0 | | | SEE PART IV SEE PART IV |
| DIVISION 1 NATURAL RESOURCES DRIVE LITTLE ROCK, AR 72205 (15) ASHEVILLE HUMANE SOCIETY 14 FOREVER FRIEND LN ASHEVILLE, NC 28806 (16) ASSOCIATION OF SHELTER VETERINARIANS INC 3225 ALPHAWOOD DRIVE APEX, NC 27539 (17) AUBURN UNIVERSITY | 56-1444098 73-1627937 63-6000724 | 501(C)3 501(C)3 GOVERNMENTAL | | 0 | | | SEE PART IV SEE PART IV |
| OFFICE OF SPONSORED PROGRAMS RESEARCH AND INNOVATION CENTER AUBURN, AL 36832 (18) AUGUSTA REGIONAL SPCA INC 33 ARCHERY LANE STAUNTON, V A 24401 (19) BEAUFORT COUNTY ANIMAL SERVICES POST OFFICE DRAWER 1228 BEAUFORT, SC 29901 | 23-7089566 57-6000311 | GOVERNMENTAL (MUNICI | 30,000 | 0 | | | SEE PART IV |
| (20) BECK'S PLACE PO BOX 562 MONROE,WA 98272 (21) BLEND 3302 ELIZABETH SPRINGS COURT KATY,TX 77494 (22) BLUE EARTH NICOLLET COUNTY HUMANE SOCIETY INC 1250 N RIVER DRIVE MANKATO,MN 56001 (23) BRANDYWINE VALLEY SPCA | 47-5174829 87-3560845 41-1236942 23-1381030 | 501(C)3 FOR-PROFIT (OTHER) 501(C)3 | 15,000 6,000 | 0 0 | | | SEE PART IV SEE PART IV SEE PART IV |
| 1212 PHOENIXVILLE PIKE WEST CHESTER, PA 19380 (24) BROTHER WOLF ANIMAL RESCUE PO BOX 8195 ASHEVILLE, NC 28814 (25) CALIFORNIA STATE DEPARTMENT OF FOOD & AGRICULTURE 1220 N STREET SACRAMENTO, CA 95814 (26) CARIBBEAN THOROUGHBRED AFTERCARE INC | 20-8787719 68-0325104 66-0869307 | GOVERNMENTAL (OTHER) | 24,000 60,000 15,000 | 0 | | | SEE PART IV SEE PART IV |
| PO BOX 43001 PMB 372 RIO GRANDE, PR 00745 (27) CATNIP FOUNDATION AT BIG SKY RANCH 82060 HIGHWAY 25 FOLSOM, LA 70437 (28) CATSKILL ANIMAL SANCTUARY INC 316 OLD STAGE ROAD SAUGERTIES, NY 12477 (29) CENTRAL NEW YORK CAT COALITION INCORPORATED PO BOX 6182 | 47-4528787 14-1827972 06-1688749 | 501(C)3 501(C)3 501(C)3 | 35,000 30,000 20,000 | 0 | | | SEE PART IV SEE PART IV SEE PART IV |
| SYRACUSE, NY 13217 (30) CHAPPY & FRIENDS 848 PROUD CLARION CT NAPERVILLE, IL 60540 (31) CHATTANEUTER 5950 BRAINERD RD CHATTANOOGA, TN 37421 (32) CHEMUNG COUNTY HUMANE SOCIETY AND SPCA INC 2435 STATE ROUTE 352 ELMIRA, NY 14903 (33) CITY OF EVERETT ANIMAL SHELTER | 82-1515583 81-1072918 16-0743999 91-6001248 | 501(C)3 501(C)3 501(C)3 GOVERNMENTAL (MUNICI | | 0 0 | | | SEE PART IV SEE PART IV SEE PART IV |
| 333 SMITH ISLAND RD EVERETT, WA 98201 (34) CITY OF RANCHO CUCAMONGA ANIMAL CENTER 11780 ARROW ROUTE RANCHO CUCAMONGA, CA 91730 (35) CLEAN WATER FOR NORTH CAROLINA 1070 TUNNEL ROAD ASHEVILLE, NC 28805 (36) COLORADO HORSE RESCUE 10386 N 65TH STREET | 95-3213002 58-1592902 84-1095741 | GOVERNMENTAL (MUNICI 501(C)3 | | 0 | | | SEE PART IV SEE PART IV |
| LONGMONT, CO 80503 (37) COLORADO STATE UNIVERSITY FOUNDATION 1680 CAMPUS MAIL FORT COLLINS, CO 80523 (38) COLUMBIA-GREENE HUMANE SOCIETY INC 111 HUMANE SOCIETY ROAD HUDSON, NY 12534 (39) COLUMBUS HUMANE 3015 SCIOTO-DARBY EXECUTIVE COURT HILLIARD, O H 43026 | 23-7098397 14-1487056 | 501(C)3 501(C)3 501(C)3 | 70,000 | 0 | | | SEE PART IV SEE PART IV |
| (40) COMMUNICATION ALLIANCE TO NETWORK THOROUGHBRED EX- RACEHORSES IN MICHIGAN 8619 EDGEWOOD PARK DRIVE COMMERCE TOWNSHIP, MI 48382 (41) COMPANION ANIMAL CLINIC FOUNDATION PO BOX 148 SOUTHERN PINES, N C 28388 (42) DANE COUNTY | 90-0626283 20-2886984 39-0806335 | 501(C)3 501(C)3 501(C)3 | 15,000 | 0 | | | SEE PART IV SEE PART IV |
| HUMANE SOCIETY 5132 VOGES ROAD MADISON, WI 53718 (43) DARBSTER FOUNDATION INC 1226 OMAR ROAD WEST PALM BCH, FL 33405 (44) DOGS PLAYING FOR LIFE 728 ROCKY MOUNTAIN PLACE LONGMONT, CO 80504 (45) DRIFTLESS HUMANE SOCIETY | 27-0879529 46-5559418 39-1952297 | 501(C)3 501(C)3 | 250,000 | 0 | | | SEE PART IV SEE PART IV |
| 1150 NELSON PARKWAY VIROQUA, WI 54665 (46) EQUINE RESCUE AND ADOPTION FOUNDATION INC P O BOX 1199 PALM CITY, FL 34991 (47) ESCAMBIA COUNTY DEPARTMENT OF ANIMAL WELFARE 200 W FAIRFIELD DRIVE PENSACOLA, FL 32501 (48) FARM SANCTUARY INC | 59-6000598 51-0292919 | GOVERNMENTAL (MUNICI | 50,000 | 0 | | | SEE PART IV SEE PART IV |
| PO BOX 150 WATKINS GLEN, NY 148910150 (49) FARM SHARE INC 14125 SW 320TH ST HOMESTEAD, FL 33033 (50) FIXNATION INC 7680 CLYBOURN AVENUE LOS ANGELES, CA 91352 (51) FLORIDA URGENT RESCUE INC 7643 GATE PARKWAY SUITE 104-27 JACKSONVILLE, FL 32256 (52) FOOD ANIMAL | 65-0342192 83-0452460 47-5526491 36-3172605 | 501(C)3 501(C)3 501(C)3 | 390,000 150,000 10,000 | 0 0 | | | SEE PART IV SEE PART IV SEE PART IV |
| (52) FOOD ANIMAL CONCERNS TRUST (FACT) 3525 W PETERSON AVE CHICAGO,IL 60659 (53) FOOD BANK FOR NEW YORK CITY 39 BROADWAY 10TH FLOOR NEW YORK,NY 10006 (54) FOUR PAWS INTERNATIONAL INC 36 BROMFIELD ST BOSTON,MA 02108 (55) FOX VALLEY HUMANE ASSOCIATION LTD | 36-3172605 13-3179546 27-4352918 39-0992559 | 501(C)3 501(C)3 501(C)3 | 250,000 30,000 | 0 0 | | | SEE PART IV SEE PART IV SEE PART IV |
| ASSOCIATION LTD N115 TWO MILE ROAD APPLETON, WI 54914 (56) FRIENDS OF THE EARTH 1101 15TH STREET NW 11TH FLOOR WASHINGTON, DC 20005 (57) FRIENDS OF THE SHELTER INC 870 KOOTENAI CUT-OFF ROAD PONDERAY, ID 83852 (58) FRIENDS OF UPLAND ANIMAL SHELTER INC | 23-7420660 94-3071245 46-2546783 | 501(C)3 501(C)3 501(C)3 | 35,000 33,000 | 0 | | | SEE PART IV SEE PART IV SEE PART IV |
| ANIMAL SHELTER INC 1275 SAN BERNARDINO ROAD UPLAND, CA 91786 (59) GLOBAL FEDERATION OF ANIMAL SANCTUARIES PO BOX 73308 PHOENIX, AZ 85050 (60) GRACE MARKETPLACE 3055 NE 28TH DR GAINESVILLE, FL 32609 (61) GREENHILL HUMANE SOCIETY 88530 GREEN HILL RD EUGENE, OR 97402 | 26-1676217 43-1960048 93-0467412 | 501(C)3 501(C)3 | 30,000 10,000 90,000 | 0 | | | SEE PART IV SEE PART IV |
| EUGENE, OR 97402 (62) HAINES ANIMAL RESCUE KENNEL INC 857 SMALL TRACTS RD HAINES, AK 99827 (63) HEART OF THE VALLEY INC 1549 E CAMERON BRIDGE RD BOZEMAN, MT 59718 (64) HOMEWARD PET ADOPTION CENTER PO BOX 2293 WOODINVILLE, WA 98072 (65) HOPE FOR HORSES INC | 31-1748166 23-7375919 91-1526803 45-4538139 | 501(C)3 501(C)3 501(C)3 | 15,500 52,000 | 0 0 | | | SEE PART IV SEE PART IV SEE PART IV |
| INC PO BOX 306 GALT,CA 95632 (66) HORSE AND HOUND RESCUE FOUNDATION 2350 SOUTH MIDWEST BOULEVARD GUTHRIE,OK 73044 (67) HORSES' HAVEN PO BOX 166 HOWELL,MI 48844 (68) HORSES WITHOUT HUMANS RESCUE ORGANIZATION 6191 NORTH US HIGHWAY | 45-4538139 81-1465411 38-3259872 82-2321776 | 501(C)3 501(C)3 501(C)3 | 13,700 53,133 | 0 0 | | | SEE PART IV SEE PART IV SEE PART IV |
| 6191 NORTH US HIGHWAY 129 BELL,FL 32619 (69) HOUSING EQUITY & ADVOCACY RESOURCE TEAM 3612 11TH AVENUE LOS ANGELES,CA 90018 (70) HUMANE ANIMAL RESCUE OF PITTSBURGH 6926 HAMILTON AVE PITTSBURGH,PA 15208 (71) HUMANE RESCUE ALLIANCE 71 OGLETHORPE ST NW | 82-5280771 25-0325750 53-0219724 | 501(C)3 501(C)3 | | 0 | | | SEE PART IV SEE PART IV |
| 71 OGLETHORPE ST NW WASHINGTON, DC 20011 (72) HUMANE SOCIETY NAPLES 370 AIRPORT PULLING ROAD N NAPLES, FL 34104 (73) HUMANE SOCIETY OF BOULDER VALLEY 2323 55TH ST BOULDER, CO 80301 (74) HUMANE SOCIETY OF CHITTENDEN COUNTY 142 KINDNESS COURT SOUTH BURLINGTON, VT | 59-1033966 84-0152768 03-0193150 | 501(C)3 501(C)3 501(C)3 | 25,000 29,000 6,000 | 0 | | | SEE PART IV SEE PART IV |
| | 58-1465345 16-1344384 75-1245911 | 501(C)3 501(C)3 | | 0 | | | SEE PART IV SEE PART IV |
| (78) HUMANE SOCIETY OF SARASOTA COUNTY INC 2331 15TH STREET SARASOTA,FL 34237 (79) HUMANE SOCIETY OF SOUTHERN WISCONSIN 222 S ARCH STREET JANESVILLE,WI 53548 (80) HUMANE SOCIETY OF THE PIKES PEAK REGION 610 ABBOT LANE COLORADO SPRINGS,C O 80905 | 59-6014943 39-0973879 84-0410111 | 501(C)3 501(C)3 501(C)3 | 27,500 30,000 | 0 | | | SEE PART IV SEE PART IV |
| (81) HUMANE SOCIETY OF UNION COUNTY 4015 WAXHAW HWY MONROE, NC 28112 (82) HUMANE SOCIETY OF UVALDE BOX 1650 UVALDE,TX 78802 (83) HUMANE SOCIETY OF WESTERN MONTANA 5930 HIGHWAY 93 SOUTH MISSOULA, MT 59804 (84) INSTITUTE FOR AGRICULTURE AND TRADE POLICY | 58-1586626 42-1668484 81-0290933 36-3501938 | 501(C)3 501(C)3 501(C)3 | | 0 0 | | | SEE PART IV SEE PART IV SEE PART IV |
| 1700 SECOND ST NE MINNEAPOLIS, MN 55413 (85) INTERNATIONAL FUND FOR ANIMAL WELFARE INC 290 SUMMER STREET YARMOUTH PORT, MA 02675 (86) JB FARMS 5415 SAM KIRBY PLACE GRANITE FALLS, N C 28630 (87) JOIN-UP INTERNATIONAL INC PO BOX 246 | 31-1594197 000000000 77-0459889 | FOR-PROFIT (OTHER) | 30,000 15,000 16,175 | 0 | | | SEE PART IV SEE PART IV |
| SOLVANG, CA 93464 (88) JUNEAU ANIMAL RESCUE 7705 GLACIER HWY JUNEAU, AK 99801 (89) KENTUCKY EQUINE HUMANE CENTER INC PO BOX 910124 LEXINGTON, KY 405910124 (90) KENTUCKY HUMANE SOCIETY 1000 LYNDON LANE SUITE B LOUISVILLE, KY 40222 | 92-0057621 20-5883736 61-0463938 | 501(C)3 501(C)3 501(C)3 | | 0 | | | SEE PART IV SEE PART IV |
| LOUISVILLE, KY 40222 (91) KITSAP COUNTY 614 DIVISION STREET PORT ORCHARD, WA 98366 (92) KITSAP HUMANE SOCIETY 9167 DICKEY ROAD NW SILVERDALE, WA 98383 (93) LEWIS & CLARK HUMANE SOCIETY PO BOX 4455 HELENA, MT 59604 (94) LOS ANGELES ANIMAL SERVICES | 000000000 91-0728353 81-6014910 | GOVERNMENTAL (MUNICI 501(C)3 501(C)3 GOVERNMENTAL (MUNICI | 10,000 31,000 9,350 200,000 | 0 0 | | | SEE PART IV SEE PART IV SEE PART IV |
| ` ' | 95-3909782 95-3135649 72-6000722 | | 429,000 | 0 | | | SEE PART IV SEE PART IV |
| | 72-1507753 54-0570901 | 501(C)3 | | 0 | | | SEE PART IV |
| SOCIETY INC 1211 OLD GRAVES MILL ROAD LYNCHBURG, VA 24502 (100) MARIN HUMANE 171 BEL MARIN KEYS BLVD NOVATO, CA 94949 (101) MARSHFIELD AREA PET SHELTER INC 3500 DOWNWIND DR MARSHFIELD, WI 54449 (102) MARY S ROBERTS PET ADOPTION CENTER 6165 INDUSTRIAL AVE RIVERSIDE, CA 92504 | 94-1156562 45-3854527 95-1458062 | 501(C)3 501(C)3 501(C)3 | 29,000 13,000 9,000 | 0 | | | SEE PART IV SEE PART IV SEE PART IV |
| (103) MASSACHUSETTS SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS 350 S HUNTINGTON AVENUE BOSTON, MA 02130 (104) MCPAWS INC PO BOX 1375 MCCALL, ID 83638 (105) MERCY FOR ANIMALS INC 8033 SUNSET BLVD LOS ANGELES, CA 90046 (106) MICHIGAN STATE | 04-2103597 82-0503942 54-2076145 38-6005984 | 501(C)3 501(C)3 501(C)3 GOVERNMENTAL | 195,000 83,000 771,500 29,900 | 0 0 | | | SEE PART IV SEE PART IV SEE PART IV |
| UNIVERSITY COLLEGE OF VETERINARY MEDICINE 426 AUDITORIUM RD ROOM 2 EAST LANSING, MI 48824 (107) MINNESOTA SPAY NEUTER ASSISTANCE PROGRAM PROFESSIONAL CORPORATION 2822 WASHINGTON AVE N MINNEAPOLIS, MN 55411 (108) MINN-KOTA PAAWS PEOPLE ADVOCATING ANIMAL WELFARE SERVICES | 38-6005984 90-0397515 30-0245020 | GOVERNMENTAL (OTHER) 501(C)3 | 40,000 | 0 | | | SEE PART IV SEE PART IV |
| 1517 32ND AVE S FARGO, ND 58103 (109) MISSION ANIMAL HOSPITAL 10100 VIKING DRIVE EDEN PRAIRIE, MN 55344 (110) MOHAWK AND HUDSON RIVER HUMANE SOCIETY 3 OAKLAND AVE MENANDS, NY 12204 (111) MONTGOMERY COUNTY SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS | 47-2606680 14-1338459 14-1383470 | 501(C)3 501(C)3 501(C)3 | 133,282 | 0 | | | SEE PART IV SEE PART IV |
| PO BOX 484 AMSTERDAM,NY 12010 (112) MOUNTAIN HUMANE PO BOX 1496 HAILEY,ID 83333 (113) MT PLEASANT ANIMAL SHELTER INC 194 ROUTE 10 WEST EAST HANOVER,NJ 07936 (114) MY PIT BULL IS FAMILY PO BOX 26262 MINNEAPOLIS,MN 55426 (115) NAPA COMMUNITY ANIMAL RESPONSE TEAM | 82-0351171 23-7189562 47-2264053 82-3738768 | 501(C)3 501(C)3 501(C)3 | 15,000 | 0 0 | | | SEE PART IV SEE PART IV SEE PART IV |
| ANIMAL RESPONSE TEAM PO BOX 67 NAPA,CA 94558 (116) NATIONAL ANIMAL CARE & CONTROL ASSOCIATION 40960 CALIFORNIA OAKS RD 242 MURRIETA,CA 92562 (117) NEW MEXICO HORSE RESCUE AT WALKIN N CIRCLES RANCH INC PO BOX 626 EDGEWOOD,NM 87015 (118) NEW VOCATIONS RACEHORSE ADOPTION | 74-2158707 04-3619624 31-1681380 | 501(C)3 501(C)3 | 17,500 25,575 | 0 | | | SEE PART IV SEE PART IV |
| RACÉHORSE ADOPTION PROGRAM 719 DOLAN LANE LEXINGTON, KY 40511 (119) NEW YORK CITY POLICE DEPARTMENT GRANTS UNIT ONE POLICE PLAZA ROOM 800 NEW YORK, NY 10038 (120) NEXUS EQUINE INC PO BOX 54572 OKLAHOMA CITY, OK 73154 (121) NORTH SHORE | 31-1681380 13-6400434 81-1990122 11-1666852 | GOVERNMENTAL (MUNICI 501(C)3 | 200,000 | 0 0 | | | SEE PART IV SEE PART IV SEE PART IV |
| (121) NORTH SHORE ANIMAL LEAGUE AMERICA INC 750 PORT WASHINGTON BLVD PORT WASHINGTON,NY 110503720 (122) NORTH VALLEY ANIMAL DISASTER GROUP PO BOX 441 CHICO,CA 95927 (123) OHIO STATE UNIVERSITY 1960 KENNY ROAD COLUMBUS,OH 43210 | 06-1672191 31-6025986 | 501(C)3 GOVERNMENTAL (OTHER) | 20,000 47,978 | 0 | | | SEE PART IV |
| COLUMBUS, OH 43210 (124) OKTIBBEHA COUNTY HUMANE SOCIETY INC PO BOX 297 STARKVILLE, MS 39760 (125) OREGON HUMANE SOCIETY 1067 NE COLUMBIA BLVD PORTLAND, OR 97211 (126) OREGON STATE UNIVERSITY ADMINISTRATION A312 KERR ADMINISTRATION BUILDING CORVALLIS, OR 97331 | 64-0618170 93-0386880 61-1730890 | 501(C)3 501(C)3 GOVERNMENTAL (OTHER) | | 0 | | | SEE PART IV SEE PART IV |
| CORVALLIS, OR 97331 (127) PETS LOW COST SPAY AND NEUTER CLINIC PO BOX 4669 WICHITA FALLS, TX 76308 (128) PASADO'S SAFE HAVEN PO BOX 171 SULTAN, WA 98294 (129) PEACEFUL KINGDOM PO BOX 9394 KNOXVILLE, TN 37940 (130) PEOPLE PROMOTING ANIMAL WELFARE PO BOX 68 | 68-0648159 91-1843707 62-1818180 62-1471626 | 501(C)3 501(C)3 501(C)3 | 30,000 | 0 0 | | | SEE PART IV SEE PART IV SEE PART IV |
| PO BOX 68 GREENBACK, TN 37742 (131) PET HELPERS INC 1447 FOLLY ROAD CHARLESTON, SC 29412 (132) PET SAVERS 7525 E TRENT AVE SPOKANE VALLEY, WA 99212 (133) PETS ARE WONDERFUL SUPPORT INC 134 W 29TH STREET NEW YORK, NY 10001 (134) PLANT BASED FOODS INSTITUTE | 57-0802283 91-1741239 80-0233785 82-1382938 | 501(C)3 501(C)3 501(C)3 | 40,000 25,000 | 0 0 | | | SEE PART IV SEE PART IV SEE PART IV |
| | 27-3790447 94-6036494 61-1336739 | 501(C)3 501(C)3 501(C)3 | | 0 | | | SEE PART IV SEE PART IV |
| | 13-1988190 27-1622725 20-1541257 | 501(C)3 501(C)3 501(C)3 | 15,524 37,000 7,500 | 0 | | | SEE PART IV SEE PART IV |
| ASSOCIATION (RIVMA) | 47-3389928 56-1916620 27-3428502 | FOR-PROFIT (ANIMAL C 501(C)3 | 25,000 100,000 10,000 | 0 | | | SEE PART IV SEE PART IV |
| 1400 MAIN STREET SAYREVILLE, NJ 08872 (144) SAN DIEGO HUMANE SOCIETY AND SPCA 5500 GAINES STREET SAN DIEGO, CA 92110 (145) SAVING GRACE PET ADOPTION CENTER PO BOX 803 WINCHESTER, OR 97495 (146) SEATTLE AREA FELINE RESCUE 14717 AURORA AVE N SHORELINE, WA 98133 (147) SEATTLE | 27-3428502 95-1661688 93-1318052 91-2041961 83-2653099 | 501(C)3 501(C)3 501(C)3 501(C)3 | 40,000 10,000 8,000 | 0 0 | | | SEE PART IV SEE PART IV SEE PART IV SEE PART IV |
| (147) SEATTLE VETERINARY OUTREACH PO BOX 1094 WOODINVILLE, WA 98041 (148) SECOND CHANCE ANIMAL SERVICES INC 111 YOUNG ROAD EAST BROOKFIELD, M A 01515 (149) SECOND STRIDE INC 7204 HIGHWAY 329 CRESTWOOD, KY 40014 (150) SEWARD ANIMAL SHELTER PO BOX 167 SEWARD, AK 99664 | 83-2653099 04-3490671 20-2947614 92-6000086 | 501(C)3 501(C)3 501(C)3 GOVERNMENTAL (MUNICI | | 0 | | | SEE PART IV SEE PART IV SEE PART IV |
| SEWARD, AK 99664 (151) SHELTER ANIMALS COUNT 931 MONROE DR NE ATLANTA, GA 30308 (152) SHELTER TRANSPORT ANIMAL RESCUE TEAM (START) PO BOX 4792 VALLEY VILLAGE, CA 91617 (153) SOCIALLY RESPONSIBLE AGRICULTURE PROJECT INC | 46-2215168 45-4258426 20-8688122 | 501(C)3 501(C)3 | 75,000 20,000 50,000 | 0 | | | SEE PART IV SEE PART IV |
| | 59-0715928 45-0345317 84-4734799 | 501(C)3 501(C)3 | 20,850 | 0 | | | SEE PART IV SEE PART IV |
| INITIATIVE PROGRAM 382 ASSET PARKWAY SANFORD, NC 27332 (157) SPAY TODAY INC 4550-B COUNTY HOME ROAD GREENVILLE, NC 27858 (158) SPCA OF TEXAS 2400 LONE STAR DR DALLAS, TX 75212 (159) SPCA SERVING ERIE COUNTY 300 HARLEM ROAD WEST SENECA, NY 14224 | 33-1173160 75-1216660 16-0425315 | 501(C)3 501(C)3 501(C)3 | 10,000 29,000 11,050 | 0 | | | SEE PART IV SEE PART IV SEE PART IV |
| (160) SPOKANE COUNTY 1121 W GARDNER AVE SPOKANE, WA 99201 (161) SPOKANIMAL 710 N NAPA ST SPOKANE, WA 99202 (162) ST CHARLES PARISH ANIMAL SHELTER 921 DEPUTY JEFF G WATSON DR LULING, LA 70070 (163) STAFFORD ANIMAL SHELTER 3 BUSINESS PARK ROAD | 91-6001370 91-1223929 72-6001208 | GOVERNMENTAL (MUNICI 501(C)3 GOVERNMENTAL (MUNICI 501(C)3 | 25,000 11,000 20,000 40,000 | 0 0 | | | SEE PART IV SEE PART IV SEE PART IV |
| 3 BUSINESS PARK ROAD LIVINGSTON,MT 59047 (164) STEVENS COUNTY EMERGENCY MANAGEMENT 260 S OAK COLVILLE,WA 99114 (165) STRAY PAWS ANIMAL HAVEN 1823 MORGAN LN REDONDO BEACH,CA 90278 (166) SUNCOAST HUMANE SOCIETY INC 6781 SAN CASA DRIVE ENGLEWOOD,FL 34224 | 000000000 83-1526587 23-7174193 | GOVERNMENTAL (MUNICI 501(C)3 | 25,000 40,000 15,000 | 0 | | | SEE PART IV SEE PART IV |
| ENGLEWOOD,FL 34224 (167) TAYLOR COUNTY WISCONSIN HUMANE SOCIETY INC PO BOX 1 MEDFORD,WI 54451 (168) TEN LIVES CLUB INC P O BOX 253 NORTH BOSTON,NY 14110 (169) TERREBONNE PARISH ANIMAL SHELTER 100 GOVERNMENT ST GRAY,LA 70359 (170) THE ASSOCIATION | 20-8461028 16-1611221 72-6001390 41-1618666 | 501(C)3 501(C)3 GOVERNMENTAL (MUNICI 501(C)6 | 67,330 50,000 | 0 0 | | | SEE PART IV SEE PART IV SEE PART IV |
| FOR ANIMAL WELFARE ADVANCEMENT 15508 W BELL ROADSUITE 101 - 613 SURPRISE, AZ 85374 (171) THE BOARD OF REGENTS OF THE UNIVERSITY OF WISCONSIN SYSTEM 21 N PARK STREET SUITE 6401 MADISON, WI 537151218 (172) THE HUMANE SOCIETY FOR TACOMA & PIERCE COUNTY | 41-1618666 39-6006492 91-0577128 | GOVERNMENTAL (OTHER) | 30,000 9,000 | 0 | | | SEE PART IV SEE PART IV |
| PIERCE COUNTY 2608 CENTER ST TACOMA, WA 98409 (173) THOMAS JEFFERSON UNIVERSITY 125 SOUTH 9TH STREET PHILADELPHIA, PA 19107 (174) TOBACCO VALLEY ANIMAL SHELTER POBOX 1815 EUREKA, MT 59917 (175) TOMPKINS COUNTY SPCA 1640 HANSHAW ROAD ITHACA, NY 14850 | 23-1352294 81-0496968 15-0624378 | 501(C)3 501(C)3 501(C)3 | 52,590 | 0 | | | SEE PART IV SEE PART IV |
| (176) TRUE AND FAITHFUL PET RESCUE MISSION INC 266 N JACKSON ROAD VENICE, FL 34292 (177) TUFTS UNIVERSITY 169 HOLLAND STREET SOMERVILLE, M A 02144 (178) UNDERDOG PET RESCUE OF WISCONSIN INC PO BOX 6181 MONONA, WI 53716 (179) UNIVERSITY OF DENVER | 47-1681488 04-2103634 45-4808363 84-0404231 | 501(C)3 501(C)3 501(C)3 | 27,750 9,000 | 0 0 | | | SEE PART IV SEE PART IV SEE PART IV |
| DENVER 2601 E COLORADO AVE DENVER, CO 80208 (180) UNIVERSITY OF NEBRASKA AT OMAHA 6001 DODGE ST OMAHA, NE 68182 (181) UNIVERSITY OF TENNESSEE OFFICE OF THE TREASURER KNOXVILLE, TN 37996 (182) VALUE VET INC 2074 CROSS BRONX EXPY BRONX, NY 10472 (183) VANCOUVER | 47-0049123 62-6001636 81-1367963 91-0759124 | 501(C)3 GOVERNMENTAL (OTHER) FOR-PROFIT (ANIMAL C) 501(C)3 | 49,424 25,000 | 0 | | | SEE PART IV SEE PART IV SEE PART IV |
| (183) VANCOUVER HUMANE SOCIETY & S P C A 1100 NE 192ND AVE VANCOUVER, WA 98684 (184) VERMONT LAW SCHOOL INC 164 CHELSEA ST PO BOX 96 SOUTH ROYALTON, VT 05068 (185) VIRGINIA POLYTECHNIC INSTITUTE AND STATE UNIVERSITY 300 TURNER ST NW | 91-0759124 23-7251952 54-6001805 | 501(C)3 501(C)3 GOVERNMENTAL (OTHER) | | 0 | | | SEE PART IV SEE PART IV |
| | 45-3749303 23-7009054 | 501(C)3 501(C)3 | | 0 | | | SEE PART IV |
| | 58-1661479 | 501(C)3 | 13,000 | | | | SEE PART IV |
| SOCIETY INC 3650 STATE ROAD 60 SLINGER, WI 53086 (188) WASHINGTON COUNTY-JOHNSON CITY ANIMAL CONTROL CENTER INC | 58-1661479 91-0838299 47-2241488 82-3129285 47-5259575 | 501(C)3 501(C)3 501(C)3 501(C)3 | 10,500 25,500 | 0 0 | | | SEE PART IV SEE PART IV SEE PART IV SEE PART IV |

| Part III Grants and Other A | | | | ete if the orgai | nization | answered "Yes" | on Form | 990, Part IV, line 22. | | . • |
|-----------------------------|--|-------------------------|--------------------------|------------------|----------------------------------|------------------|--|------------------------|---------------------------------------|-------------------------|
| (a) Type of grant or assis | a) Type of grant or assistance (b) Number of recipients | | (c) Amount of cash grant | | (d) Amount of noncash assistance | | (e) Method of valuation (book, FMV, appraisal, other) | | (f) Description of noncash assistance | |
| 1) | | | | | | | | | | |
| 2) | | | | | | | | | | |
| 3) | | | | | | | | | | |
| 4) | | | | | | | | | | |
| 5) | | | | | | | | | | |
| 6) | | | | | | | | | | |
| 7) | | | | | | | | | | |
| Part IV Supplement | al Informa | tion. Provide th | e inform | ation require | d in Pa | rt I, line 2; Pa | art III, c | column (b); and an | y other | additional information. |
| Return Reference | Explanation | on | | | | | | | | |
| ART I, LINE 2: | THE ASPCA PROVIDES GRANTS TO A VARIETY OF ORGANIZATIONS TO ADVANCE ITS MISSION OF STOPPING AND PREVENTING ANIMAL | | | | | | | | | |

| Return Reference | Explanation |
|------------------|-------------|
| | |

Ρ

CRUELTY AND ASSISTING ANIMALS IN NEED. ELIGIBLE GRANT-SEEKERS GO THROUGH A ROBUST DUE DILIGENCE PROCESS TO ASSESS THEIR COMPLIANCE WITH REGULATORY REOUIREMENTS, IMPLEMENTATION OF GOVERNANCE BEST PRACTICES, BUSINESS CONTINUITY, AND CAPACITY TO CARRY OUT THE PROPOSED PROJECT. GRANT PROPOSALS ARE ALSO REVIEWED BY SUBJECT MATTER EXPERTS TO ASSESS THEIR FEASIBILITY, ALIGNMENT WITH ASPCA POLICY, POSITION, AND STANDARD PRACTICES, AND ABILITY TO EFFECTIVELY FURTHER THE ASPCA'S MISSION AND PROGRAMMATIC GOALS. TIERED REVIEW AND APPROVAL IS REOUIRED BASED ON THE SIZE OF THE GRANT. GRANTEES THAT RECEIVE FUNDING ARE REOUIRED TO SUBMIT FINAL REPORTS WHICH ARE REVIEWED TO ENSURE THAT THE FUNDS WERE USED APPROPRIATELY AND TO ASSESS THE PROJECT OUTCOMES. IF APPLICABLE. INTERIM REPORTS MAY ALSO BE REOUIRED TO PROVIDE ADDITIONAL ACCOUNTABILITY ON LONGER-TERM GRANTS. WHILE THE ASPCA IS A WORKING CHARITY, NOT SIMPLY A GRANTMAKING ENTITY, THE ASPCA IS ONE OF THE NATION'S LARGEST ANIMAL WELFARE GRANTMAKERS. THE ASPCA OFFERS ANIMAL WELFARE AND OTHER ORGANIZATIONS A RANGE OF FINANCIAL SUPPORT THAT MAKES A SUBSTANTIAL IMPACT ON THEIR ABILITY TO STOP AND PREVENT ANIMAL SUFFERING AND CRUELTY. AND TO ASSIST ANIMALS IN NEED. GRANTS ARE A SUPPORTIVE TACTIC TO SUPPLEMENT MORE SUSTAINABLE AND LONG-TERM STRATEGIES THE ASPCA USES TO PREVENT CRUELTY AND SUFFERING. SINCE 2001, THE ASPCA HAS GIVEN MORE THAN \$200 MILLION IN GRANTS TO THOUSANDS OF ANIMAL SHELTERS, MUNICIPAL AND GOVERNMENTAL AGENCIES, RESCUE GROUPS, SANCTUARIES, AND OTHER ANIMAL WELFARE ORGANIZATIONS. ORGANIZATIONS IN ALL 50 STATES AND U.S. TERRITORIES HAVE RECEIVED FUNDING AND ARE ELIGIBLE TO APPLY. GRANTS ARE MADE TO SUPPORT A WIDE VARIETY OF ACTIVITIES THAT ADVANCE THE ASPCA'S ANTI-CRUELTY MISSION, INCLUDING ANIMAL SHELTER & RESCUE ORGANIZATION GRANTS, EOUINE WELFARE GRANTS, AND EMERGENCY & DISASTER RESPONSE GRANTS. ALL OF THE ASPCA'S GRANTS ARE AIMED AT PREVENTING AND COMBATTING ANIMAL CRUELTY. OUR GRANTS HELP BUILD AND SUSTAIN LOCAL AND REGIONAL CAPACITY ACROSS THE COUNTRY TO ADVANCE ANIMAL WELFARE: SUPPORT DIRECT RESPONSE TO DISASTERS, CRUELTY AND OTHER EMERGENCIES; PROVIDE FUNDING FOR RESEARCHING NEW APPROACHES, DEVELOPING AND TESTING PILOT PROGRAMS, AND THE IMPLEMENTATION AND DISSEMINATION OF BEST PRACTICES TO IMPROVE IMPACT; AND SUPPORT CHANGING LAWS, POLICIES, PRACTICES, AND PERCEPTIONS TO INCREASE PROTECTIONS FOR ANIMALS AND IMPROVE THEIR WELFARE. IN 2022, THE ASPCA AWARDED GRANT FUNDING TOTALING NEARLY \$12 MILLION TO 404 ORGANIZATIONS IN 49 STATES, PUERTO RICO, THE DISTRICT OF COLUMBIA, UKRAINE, AND ROMANIA. OUR GRANTS SUPPORTED DISASTER AND EMERGENCY ANIMAL RESCUE PROGRAMS, LIFESAVING ANIMAL SHELTER LIVE-RELEASE IMPROVEMENT PROGRAMS: SPAY/NEUTER EFFORTS TO COMBAT ANIMAL HOMELESSNESS: SURRENDER-PREVENTION PROGRAMS THAT HELP CHALLENGED PET OWNERS KEEP AND CARE FOR THEIR PETS; AND AT-RISK EQUINE PROTECTION PROGRAMS. THE ASPCA GRANTED APPROXIMATELY \$700K IN ADDITIONAL GRANTS UNDER THE \$5K THRESHOLD REPORTED ON THIS SCHEDULE. Schedule I (Form 990) 2022

Compensation Information OMB No. 1545-0047 Schedule J (Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990. Department of the Treasury Open to Public ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service Inspection Name of the organization **Employer identification number** THE AMERICAN SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS 13-1623829 Questions Regarding Compensation Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Health or social club dues or initiation fees Tax idemnification and gross-up payments Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all 2 directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?

No

Yes

Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Approval by the board or compensation committee Form 990 of other organizations

During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Yes Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Νo Νo Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: 5a Νo Any related organization? If "Yes," on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: The organization?

Νo Νo Any related organization? Νo If "Yes," on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Yes Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe

8 8 Νo If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50053T Schedule J (Form 990) 2022 Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

| instructions, on row (ii). Do not list any individuals that are not listed $\bf Note$. The sum of columns (B)(i)-(iii) for each listed individual must express the sum of columns (B)(i)-(iii) for each listed individual must express the sum of columns (B)(i)-(iii) for each listed individual must express the sum of columns (B)(i)-(iii) for each listed individual must express the sum of columns (B)(i)-(iii) for each listed individual must express the sum of columns (B)(i)-(iii) for each listed individual must express the sum of columns (B)(i)-(iii) for each listed individual must express the sum of columns (B)(i)-(iii) for each listed individual must express the sum of columns (B)(i)-(iii) for each listed individual must express the sum of columns (B)(i)-(iii) for each listed individual must express the sum of columns (B)(i)-(iii) for each listed individual must express the sum of columns (B)(i)-(iii) for each listed individual must express the sum of columns (B)(i)-(iii) for each listed individual must express the sum of columns (B)(i)-(iii) for each listed individual must express the sum of columns (B)(i)-(iii) for each listed individual must express the sum of columns (B)(i)-(iii) for each listed individual must express the sum of columns (B)(i)-(iii) for each listed individual must express the sum of columns (B)(i)-(iii) for each listed individual must express the sum of columns (B)(i)-(iii) for each listed individual must express the sum of columns (B)(i)-(iii) for each listed individual must express the sum of columns (B)(i)-(iii) for each listed individual must express the sum of columns (B)(i)-(iii) for each listed individual must express (B)(i | on Fo | rm 990, Part VII. | Form 990 Part V | /II Section A line | 1a annlicable co | lumn (D) and (F | -) amounts for | that individual |
|--|---------|-------------------|--------------------------------|----------------------------|-----------------------|------------------------|-----------------------|--|
| (A) Name and Title | quar ci | | of W-2, 1099-MIS | | (C) Retirement | (D) | (E) Total of | (F) |
| | | (i) Base | and/or 1099-NEC (ii) | (iii) Other | and other deferred | Nontaxable benefits | columns (B)(i)-(D) | Compensation in column (B) |
| | | compensation | Bonus & incentive compensation | reportable compensation | compensation | | (-)(-) | reported as deferred on prior Form 990 |
| 1MATT BERSHADKER PRESIDENT & CHIEF EXECUTIVE OFFICER | (i) | 827,968 | 154,440 | 21,742 | 74,400 | 38,621 | 1,117,171 | 0 |
| | (ii) | 0 | | | | 0 | 0 | 0 |
| 2TODD HENDRICKS SVP, DEVELOPMENT | (i) | 404,908 | 57,217 | 22,822 | 24,400 | 15,937 | 525,284 | 0 |
| SVI, DEVELOTMENT | (ii) | | | | | | | |
| 3ELIZABETH ESTROFF | (i) | 0 376,608 | 0 55,128 | 0 21,742 | 0 24,400 | 0 37,550 | 0 515,428 | 0 |
| SVP, COMMUNICATIONS | | | | | | | | |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 4 BERT TROUGHTON SVP, SHELTER & VETERINARY SERVICES | (i) | 367,315 | 42,425 | 35,277 | 24,400 | 26,001 | 495,418 | 0 |
| | (ii) | 0 | | | | 0 | 0 | 0 |
| 5BEVERLY JONES SVP, CHIEF LEGAL OFFICER | (i) | 354,987 | 41,368 | 21,310 | 24,400 | 34,714 | 476,779 | 0 |
| | (ii) | | | | | | 0 | 0 |
| 6CHERYL BUCCI SVP, OPERATIONS AND PEOPLE | (i) | 344,903 | 41,728 | 21,310 | 24,400 | 43,085 | 475,426 | 0 |
| | (ii) | | | | | | | |
| 7STACY WOLF | (i) | 361,271 | 0 41,231 | 0 22,084 | 0 24,400 | 0 13,744 | 0 462,730 | 0 |
| SVP, POLICY, RESPONSE & ENGAGEMENT | (ii) | | | | | | | |
| 8GORDON LAVALETTE | | 0 350,343 | 0 32,500 | 0 21,532 | 0 19,939 | 0 1,680 | 0 425,994 | 0 |
| SVP & CHIEF FINANCIAL OFFICER | (i) | | | | | | | |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 9 J'MAI GAYLE DIRECTOR, SURGERY | (i) | 326,388 | 7,500 | 1,242 | 24,400 | 43,789 | 403,319 | 0 |
| | (ii) | 0 | | | | 0 | 0 | - - - |
| 10LUKE FRANKLIN VP, MEMBERSHIP | (i) | 258,627 | 26,471 | 540 | 21,972 | 36,162 | 343,772 | 0 |
| .,, | (ii) | | | | | | | |
| 11CAMILLE DECLEMENTI | (i) | 291,023 | 0 12,055 | 0 552 | 0 24,240 | 0 14,281 | 0 342,151 | 0 |
| VP, ASPCA ANIMAL HOSPITAL | (ii) | | | | | | | |
| 12JENNIFER CHIN | | 0 275,840 | 0 | 0 | 0 | 0 | 0 | 0 |
| VP, LEGAL ADVOCACY & INVESTIGATIONS | (i) | | 17,092 | 1,242 | 23,522 | 17,113 | 334,809 | |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 13AMY BERKOWITZ VP, INFORMATION TECHNOLOGY | (i) | 264,570 | 16,378 | 3,564 | 22,554 | 16,350 | 323,416 | 0 |
| | (ii) | 0 | 0 | | 0 | 0 | 0 | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | <u> </u> | |
| | | | | | | | | |
| | 1 | l . | I | <u>I</u> | I . | <u>I</u> | Schodulo 1 (| Form 990\ 2022 |

Part Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information. Return Reference Explanation

Schedule J (Form 990) 2022

PART I, LINE 4B LINE 4B: THE ASPCA HAS A 457(F) DEFERRED COMPENSATION PLAN (THE F PLAN) FOR THE PRESIDENT AND CHIEF EXECUTIVE OFFICER. THE F PLAN ACCRUES AN ANNUAL EMPLOYER FUNDED AMOUNT OF \$50,000 THAT REMAINS UNVESTED UNTIL THE END OF A FIVE-YEAR EMPLOYMENT TERM. AT WHICH POINT THE F PLAN RENEWS IN FIVE YEAR INCREMENTS CONTINGENT ON CONTINUOUS EMPLOYMENT. THIS

AMOUNT IS NOT INCREASED FOR INVESTMENT EARNINGS. PART I, LINE 7 THE FOLLOWING EMPLOYEES RECEIVED DISCRETIONARY, NON-FIXED PAYMENTS THAT ARE REPORTED IN SCHEDULE J, PART II, COLUMN B(II). THE DISCRETIONARY NON-FIXED PAYMENTS ARE DETERMINED BASED ON THE PERFORMANCE EVALUATION PROCESS: MATTHEW

Page 3

Schedule J (Form 990) 2022

BERSHADKER \$154,440 TODD HENDRICKS \$57,217 ELIZABETH ESTROFF \$55,128 BERT TROUGHTON \$42,425 STACY WOLF \$41,231 BEVERLY

JONES \$41.368 CHERYL BUCCI \$41.728 GORDON LAVALETTE \$32.500 J'MAI GAYLE \$7.500 LUKE FRANKLIN \$26.471 CAMILLE DECLEMENTI

\$12,055 JENNIFER CHIN \$17,092 AMY BERKOWITZ \$16,378



SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service Name of the organization

Noncash Contributions

OMB No. 1545-0047

2022

Open to Public

► 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 the latest information.

Inspection Employer identification number

| THE . | AMERICAN SOCIETY FOR THE PREVENTION | | | | Employ | yer identificati | ion nu | mber | |
|-------|---|-------------------------------|---|---|---------|--|--------|------|-----|
| | RUELTY TO ANIMALS | | | | 13-16 | 23829 | | | |
| Pā | art 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 | | (d Method of d oncash contrib | eterm | _ | nts |
| 1 | Art—Works of art | | | | | | | | |
| 2 | Art—Historical treasures . | | | | | | | | |
| 3 | Art—Fractional interests | | | | | | | | |
| 4 | Books and publications | | | | | | | | |
| 5 | Clothing and household | | | | | | | | |
| - | goods | Х | 722 | 605 22 | COMI | PARABLE SA | LEC | | |
| | Cars and other vehicles | ^ | 722 | 003,23 | COMI | ARABLE SA | LES | | |
| 8 | Intellectual property | | | | | | | | |
| 9 | Securities—Publicly traded . | Х | 9 8 | 2,927,32 | NVCE | = | | | |
| | Securities—Fublicity traded . Securities—Closely held stock | | 90 | 2,927,32. | JIVIJL | <u>- </u> | | | |
| | · | | | | | | | | |
| 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 | | | | | | | | |
| | Other (PET | X | 4 | 717,919 | cos | Γ | | | |
| 25 | ► <u>SUPPLIES</u>) | | | | | | | | |
| 26 | Other ► () | | | | + | | | | |
| 27 | Other ▶ () | | | | - | | | | |
| 28 | | | | | 1 | | | | |
| 29 | Number of Forms 8283 received by for which the organization complet | | | | 29 | | | 1 | 9 |
| | Domina the comment of the comment | | haankathkta | to an analysis of the second | 4 40 | | | Yes | No |
| 3U2 | During the year, did the organizat | | | | | | | | |
| | exempt purposes for the entire ho | | | .o, and minor ion crequit | -u .u D | - 4504 101 | | | |
| | | | | | | | 30a | | No |
| t | If "Yes," describe the arrangemen | nt in Part II. | | | | | | | |
| 31 | Does the organization have a gift | acceptance | policy that requires the re | eview of any nonstandard | contrib | utions? | 31 | Yes | |
| | | | | | | | 1 | I | |

b If "Yes," describe in Part II.

describe in Part II.

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,

32a

Yes

| Schedule M (Form 990) (2022) | Page 2 | | | | | |
|--|---|--|--|--|--|--|
| Part III 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. | | | | | | |
| Return Reference | Explanation | | | | | |
| PART I, COLUMN (B): | THE NUMBER ON PART I, COLUMN B REPRESENTS NUMBER OF DONORS. | | | | | |
| PART I, LINE 32B: | CHARITABLE ADULT RIDES & SERVICES, INC. ("CARS") IS A CONTRACTED SERVICE PROVIDER WHICH ACCEPTS VEHICLE DONATIONS FROM DONORS ON BEHALF OF THE ASPCA AS THE DONEE. CARS UTILIZES THIRD PARTIES TO SELL THE DONATED VEHICLES IN THE RESALE MARKET. IN RETURN, CARS KEEPS 20% OF THE NET AMOUNT OF DONATED PROCEEDS AS PAYMENT FOR THESE SERVICES, WITH THE REMAINDER GOING TO THE ASPCA. | | | | | |
| | Schedule M (Form 990) (2022) | | | | | |

SCHEDULE 0

(Form 990)

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

omplete 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 <u>www.irs.gov/Form990</u> for the latest information.

OMB No. 1545-0047

Inspection

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

Employer identification number

13-1623829

| | 13-1623829 |
|---|---|
| Return Reference | Explanation |
| PART III, LINE 1: DESCRIPTION OF ORGANIZATION MISSION | THE ASPCA'S MISSION, AS STATED BY FOUNDER HENRY BERGH IN 1866, IS "TO PROVIDE EFFECTIVE MEANS FOR THE PREVENTION OF CRUELTY TO ANIMALS THROUGHOUT THE UNITED STATES." THE ASPCA WAS FOUNDED ON THE BELIEF THAT ANIMALS ARE ENTITLED TO KIND AND RESPECTFUL TREATMENT AT THE HANDS OF HUMANS AND MUST BE PROTECTED UNDER THE LAW. THE ASPCA'S PROGRAMS TACKLE ISSUES FACING ANIMAL WELFARE ON A NATIONAL SCALE, WITH OPERATIONS THROUGHOUT THE COUNTRY GUIDED BY A VISION THAT ANIMALS ARE VALUED BY SOCIETY, PROTECTED BY ITS LAWS, AND FREE FROM CRUELTY, PAIN, AND SUFFERING. ALL OF THE ASPCA'S SERVICES AND RESOURCES ARE FOCUSED ON PREVENTING AND COMBATING ANIMAL CRUELTY AND SUPPORTING THE ANIMALS AND COMMUNITIES THAT NEED THE ASPCA'S HELP. THESE SERVICES ARE GROUPED IN THREE PROGRAM CATEGORIES: SHELTER & VETERINARY SERVICES (SVS); POLICY, RESPONSE & ENCAGEMENT (PRE); AND PUBLIC EDUCATION AND COMMUNICATIONS. ASPCA OBJECTIVES CONTAINED IN THOSE CATEGORIES REPRESENT FOUR MAJOR THEMES: *SAVING AND PROTECTING ANIMAL VICTIMS OF CRUELTY, NEGLECT, AND SUFFERING THROUGH RESCUE EFFORTS AND POLICY INITIATIVES * GIVING VULNERABLE AND VICTIMIZED ANIMALS SECOND CHANCES BY APPLYING AND ADVANCING BEHAVIORAL SCIENCE AND VETERINARY CARE * HELPING ANIMALS SECOND CHANCES BY APPLYING AND ADVANCING OPPORTUNITIES FOR HOMELESS ANIMALS THE ASPCA WORKS ALONGSIDE HUNDREDS OF PARTNERS, INCLUDING LOCAL ANIMAL WELFARE ORGANIZATIONS, RESCUE GROUPS, ANIMAL CONTROL AGENCIES, GOVERNMENT LEADERS, POLICY MAKERS, SOCIAL SERVICE AGENCIES, LAW ENFORCEMENT AGENCIES, FARMERS, AND MANY OTHERS, ALL UNITED IN THE ASPCA'S ANTI-CRUELTY MISSION. THROUGH TRAININGS AND OTHER RESOURCES, THE ASPCA SHARES LEARNINGS AND EFFECTIVE TACTICS DISCOVERED FROM ITS DIRECT INTERVENTIONS AND OTHER WORK TO HELP ORGANIZATIONS, PROFESSIONALS, AND OTHERS SUPPORT, ADVOCATE FOR, AND ADVANCE POLICY TO HELP ANIMALS IN NEED. THE ASPCA MAINTAINS A PHYSICAL PRESENCE IN LOCATIONS ACROSS THE COUNTRY INCLUDING IN NYC; MIAMI, FL; GAINESVILLE, FL; CHAMPAIGN, IL; LOS ANGELES, CA; WEAVERVILLE, NC; ASHEVILLE, NC; |
| FORM 990, PART III, LINE 4A | ON OCTOBER 11, ASNA NEUTERED ITS 500,000TH PATIENT. ASNA HAS ALTERED HALF A MILLION CATS AND DOGS THROUGH UT WESTERN NORTH CAROLINA SINCE IT WAS FOUNDED IN 1994, SUPPORTING NORTH-WEST SHELTERS INTERPROVED THE ASPCA NORTH-WEST SHELTER INITIATIVE (NTS) PROVIDED DOZENS OF IN-PERSON AND REMOTE CONSULTATIONS, WEBINARS, AND OTHER TRAINING OPPORTUNITIES ACROSS SEVEN NORTHERN TIER STATES: ALASKA, WASHINGTON, IDAHO, MONTANA, NORTH DAKOTA, MININESOTA, AND WISCONSIN. RETURN-TO-OWNER RATES (ANIMALS BROUGHT IN AS LOST AND RETURNED TO OWNERS) IN THESE STATES ARE SIGNIFICANTLY HIGHER THAN THE NATIONAL AVERAGE. THESE NTSI CONSULTATIONS INCLUDED A VISIT TO FOUR ALASKAN ORGANIZATIONS, WHERE NTSI STAFF SAW FIRSTHAND THE UNIQUE CHALLENGES THESE SHELTERS, PETS, AND OWNERS FACE RELATED TO GEOGRAPHY, WEATHER AND LOCAL REGULATIONS, THE NTSI ALSO DISTRIBUTED \$1,000,000 IN GRANT FUNDING TO ANIMAL WELFARE ORGANIZATIONS AND INDIGENOUS COMMUNITIES ACROSS THESE STATES, MATCHING NEEDS INCLUDING SALARY SUPPORT FOR A COORDINATOR POSITION TO INCREASE THE NUMBER OF VOLUNTEERS, IMPROVEMENTS TO DOG AND CAT HOUSING AND OUTDOOR AREAS TO DECREASE ANIMAL STRESS, AND SUPPLIES TO DEVELOP FOSTER PROGRAMS FOR ANIMALS NOT THRIVING IN A SHELTER ADDRESSING THE NATIONAL CRISIS OF VETERINARY SHORTAGE BY EXPANDING VETERINARY TRAINING OPPORTUNITIES AND EMPHASIZING COMMUNITY ANIMAL WELFARE THE NATIONAL VETERINARY SHORTAGE IS CREATING A CRISIS FOR PETS AND ANIMAL SHELTERS ACROSS THE COUNTRY. THE ASPCA IS ADDRESSING THIS CRISIS SY PROVIDING AN ARRAY OF VETERINARY EDUCATION AND TRAINING PROGRAMS IN AN EFFORT TO INCREASE THE FUTURE PIPELINE OF VETERINARIAMS. THE ASPCAS FORMAL TRAINING EXPERIENCES INCLUDING: A SPORE PROBLEMS BY PROVIDING AN ARRAY OF VETERINARY FEDERACES THEM TO SERVE THE VARIOUS ANIMAL WELFARE NEEDS OF THEIR COMMUNITIES ASPCA PROFESSIONAL VETERINARY TRAINING EXPERIENCES INCLUDING THIS CRISIS SY PROVIDING AN ARRAY OF VETERINARY FEDERACES THEM TO SERVE THE VARIOUS ANIMAL WELFARE NEEDS OF THEIR COMMUNITIES MEDICINE RESIDENCY PROGRAMS - ATTRACT, RETAIN, A |

| Return Reference | Explanation |
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| | EQUINES TRANSITION TO NEW HOMES AND CAREERS THE ASPCA EQUINE WELFARE TEAM IMPROVES WELFARE FOR EQUINES BY INCREASING EQUINE ADOPTIONS THROUGH STRATEGIC PARTNERSHIPS WITH EQUINE INDUSTRY AND RESCUE NETWORKS, SUPPORTING HORSES WITH SAFETY NET SERVICES, INCLUDING AFFORDABLE VETERINARY CARE AND REHOMING PROGRAMS, AND ADVANCING LEGAL PROTECTIONS FOR EQUINES. THE ASPCA RIGHT HORSE PROGRAM IN 2022, THE ASPCA RIGHT HORSE PROGRAM, WHICH WORKS TO INCREASE HORSE ADOPTION ACROSS THE COUNTRY, GENERATED MORE THAN 4,300 ADOPTION INQUIRIES THROUGH MYRIGHTHORSE.ORG, THE ASPCA'S ONLINE ADOPTION PLATFORM FOR EQUINES, AND ASPCA RIGHT HORSE PARTNERS PLACED MORE THAN 3,200 HORSES IN ADOPTIVE HOMES. THE PROGRAM ALSO HOSTED ADOPTION FAIRS AT MAJOR PUBLIC EQUINE EVENTS THROUGHOUT THE COUNTRY TO BRING EQUINE ADOPTION TO NEW AUDIENCES AND HELP HORSES FIND HOMES. IN SEPTEMBER, THE ASPCA RIGHT HORSE PROGRAM HOSTED A THREE-DAY, ADOPTION-FOCUSED LEADERSHIP SUMMIT AND CONFERENCE IN DENVER, COLORADO, THAT FACILITATED COLLABORATIONS AND EDUCATIONAL OPPORTUNITIES FOR EQUINE INDUSTRY AND WELFARE PROFESSIONALS. IN ADDITION TO FACILITATING CONNECTIONS THAT HELP MORE HORSES GET ADOPTED, THESE PROGRAMS ALSO CHANGE HOW PEOPLE THINK ABOUT ADOPTING HORSES AND PROVIDE SUPPORT THAT BOOSTS THEIR CONSIDERATION OF LIFESAVING HORSE ADOPTIONS. THE ASPCA EQUINE TRANSITION AND ADOPTION CENTER (ETAC) IN OKLAHOMA CITY IS AN OPEN-ADMISSION PROGRAM THAT PROVIDES A SAFE PLACE FOR HORSE OWNERS TO RELINQUISH HORSES FOR ADOPTION INTO NEW HOMES. IN COLLABORATION WITH A LOCAL VETERINARIAN, ETAC ALSO PROVIDES BASIC VETERINARY SERVICES, TRAINING, REHOMING, AND HUMANE EUTHANASIA FOR SUFFERING HORSES, MULES, AND DONKEYS THROUGHOUT OKLAHOMA. THROUGH THIS PROGRAM, THE ASPCA IS PIONEERING PROACTIVE SAFETY-NET CARE, WHICH SUPPORTS THE WELFARE OF INDIVIDUAL ANIMALS WHILE ALSO PROVIDING INSIGHT AND DATA THAT HELPS DIRECT MORE SERVICES AND PROGRAMS TO OWNERS AND HORSES WHO MOST NEED THEM. ETAC STAFF IS ALSO WORKING TO TRAIN HORSES WITH BEHAVIORAL CHALLENGES, DEVELOPING MARKETING MET |
| FORM 990, PART III, LINE 4C | SUPPORTING ANIMAL CRUELTY PROSECUTIONS AND ELEVATING LAW ENFORCEMENT RESPONSE TO ANIMAL CRUELTY THROUGH UNIQUE VETERINARY FORENSIC SCIENCE PROGRAMS THE ASPCA OPERATES THE COUNTRY'S LEADING VETERINARY FORENSIC ASPCAM, WHICH PLAYS AN ESSENTIAL ROLE IN THE ORGANIZATIONS MISSION TO STOP AND PREVENT ANIMAL CRUELTY. AT THE ASPCA'S FORENSIC LABORATORIES IN NEW YORK CITY AND GAINESVILLE, FLORIDA, ASPCA FORENSIC SCIENCE EXPERTS WORK LCOSELY WITH LOCAL LAW ENFORCEMENT, PROSECUTIORS, AND ANIMAL. SHELTERS TO PROVIDE A WIDE RANGE OF SUPPORT FOR ANIMAL RELATED CRIMINAL INVESTIGATIONS, WHICH OFTEN RELY ON FORENSIC EVIDENCE BY APPLYING UNIQUE AND DEDICATED FORENSIC EXPERTISE TO DISCOVERING WHAT, WHEN, WHERE, AND HOW ANIMAL INJURIES HAPPEN, ASPCA FORENSIC SCIENCE CONSULTATIONS DIRECTLY AND EFFECTIVELY SUPPORT ANIMAL CRUELTY FROSECUTIONS AND ELEVATE THE WAY LAW ENFORCEMENT AND VETERINARIAN ACROSS THE COUNTRY RESPOND TO ANIMAL CRUELTY. THE NEW YORK CITY FORENSIC SCIENCE CONSULTATIONS DIRECTLY AND EFFECTIVELY SUPPORT ANIMAL CRUELTY RESPOND TO ANIMAL CRUELTY. THE NEW YORK CITY FORENSIC SCIENCE CONSULTATIONS DIRECTLY AND EFFECTIVELY PROPEDIES. SCIENCE CONSULTATIONS DIRECTLY AND VETERINARIAN ACROSS THE COUNTRY IN SEPOND TO ANIMAL CRUELTY. THE NEW YORK CITY FORENSIC SCIENCE CONTROL OF A PARTICLES OF A SECONDARY OF |

| Return Reference | Explanation |
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| | COMPELLING EVIDENCE THAT THE DISEASE IS A USEFUL MARKER OF POTENTIAL DOGFIGHTING INVOLVEMENT. THIS PEER-REVIEWED SCIENTIFIC RESEARCH CAN BE USED IN COURTROOMS AND FURTHER STRENGTHEN THE CASE AGAINST ORGANIZED DOGFIGHTERS, ULTIMATELY SERVING JUSTICE ON BEHALF OF THOSE WHO CANNOT SPEAK FOR THEMSELVES. OTHER PUBLISHED AND PRESENTED ASPCA RESEARCH WORK IN 2022: *AN ARTICLE IN THE JOURNAL OF VETERINARY EMERGENCY AND CRITICAL CARE EXAMINES CANINES' ACUTE KIDNEY INJURIES FOLLOWING THE INGESTION OF CREAM OF TARTAR AND TAMARINDS. AFTER CONNECTING THESE INJURY REPORTS WITH FINDINGS IN GRAPES AND RAISIN TOXICOSIS, THE ARTICLE SUGGESTS THAT TARTARIC ACID IS THE LIKELY TOXIC COMPONENT IN GRAPES AND TAMARINDS. *AN ARTICLE IN THE SCIENCEDIRECT JOURNAL REPORTS ON THE HIGH EFFICACY OF A BEHAVIORAL REHABILITATION TREATMENT PROTOCOL FOR UNDERSOCIALIZED DOGS WHO EXHIBIT FEARFULNESS. * REFERENCING LESSONS LEARNED FROM ASPCA WORK IN LOS ANGELES COUNTY, THIS STUDY IN FRONTIERS IN VETERINARY SCIENCE HIGHLIGHTS STRATEGIES ANIMAL WELFARE PROFESSIONALS CAN TAKE TO INCREASE FOSTER ENGAGEMENT IN AREAS WITH HIGH KITTEN SHELTER INTAKES. * ASPCA STAFF PRESENTED THE LONG-TERM INADEQUATE NUTRITION STUDY AT THE INAUGURAL AMERICAN COLLEGE OF VETERINARY INTERNAL MEDICINE RESEARCH COLLOQUIUM. THE STUDY HELPS VETERINARY SPECIALISTS BETTER UNDERSTAND THE SYSTEMIC ABNORMALITIES OF DOGS EMACIATED DUE TO CRUELTY OR NEGLECT, ENABLING THEM TO CRITICALLY SPOT, REPORT, AND PLAY INFLUENTIAL ROLLES IN STOPPING ANIMAL CRUELTY. * STAFF FROM THE ASPCA STRATEGY & RESEARCH AND ASNA TEAMS COLLABORATED ON A STUDY IN THE JUNE ISSUE OF THE JOURNAL OF THE AMERICAN VETERINARY MEDICAL ASSOCIATION (JAWMA), EXPLORING COMPLICATIONS ASSOCIATED WITH THE OVARIAN PEDICLE TIE PROCEDURE IN OVER 15,000 CATS UNDERGOING SPAY SURGERY AT ASNA CLINICS FROM 2017 TO 2018. * THE STRATEGY & RESEARCH FOR MIN WORKED CLOSELY WITH THE ASPCA ANIMAL HOSPITAL TO RESEARCH PYOMETRA SURGERY OUTCOMES FOR CATS AND DOGS UNDERGOING THE SURGERY AT ANH BETWEED 2017 AND 2019. THIS WORK RESULTED IN THREE SE |
| FORM 990, PART III, LINE 4C | PROVIDING ANIMAL SURVIVORS OF CRUELTY AND DISASTERS EXPERT CARE AND TREATMENT AT THE ASPCA CRUELTY RECOVERY CENTER (CRC) IN COLUMBUS, OHIO, AND THROUGH CRC WORK IN TEMPORARY SHELTERS NATION/DIDE, THE ASPCA PROVIDES CRITICAL SHELTERINS, MEDICAL, AND BEHAVIORAL CARE FOR HOMELESS ANIMALS RESCUED FROM LARGE-SCALE CRUELTY CASES AND BISASTERS ACROSS THE COUNTRY TO HELP THEM RECOVER AND PREPARE THEM FOR ADDITION. THE CRC'S WORK, WHICH TAKES PLACE AT THE TEAMS FACILITY IN COLUMBUS AND IN TEMPORARY FIELD SHELTERS NATION/MDE. PROVIDES WTAL SUPPORT FOR LOCAL LAW ENFORCEMENT AND ANIMAL WELFARE ASSENCIES THAT OFTEN ENABLES THEM TO TAKE ACTION IN CRIMINAL CASES. CRC STAFF ALSO SHARES LEARNINGS AND INSIGHTS THAT HELP COMMUNITIES RESPOND MORE INDEPENDENTLY AND EFFECTIVELY TO LOCAL, CRUELTY CASES AND ANIMAL CRISES. IN 2022, THE CRC TEAM DEPLOYED TO ASSIST LAW ENFORCEMENT AND ANIMAL WELFARE ASSISTED ANIMAL CRUELTY ASSISTED AND ANIMAL CRUELTY AS PART OF THE ASPCA-NYPD PARTINERSHIP. THE ASPCA ANIMAL ROUND CRUELTY IN CELECT, AND NATURAL DISASTERS PROVIDING SPECIALIZED CARE FOR NEW YORK CITY HELP SURVIVORS OF CRUELTY AND NEGLECT RECOVER AND REHABILITATE. THESE PROCARMS ALSO TRAIN PETERINARIANS ON EFFECTIVE WAYS TO TREAT ANIMAL CRUELTY HIS PROVIDES AND TRAINING ATEMS. AND TRAINING CRUE TO THE ASPCA-NYPD PARTINERSHIP. THE ASPCA ANIMAL RECOVERY OF A WAYS TO TREAT ANIMAL CRUELTY HOURS AND TRAINING A TEMPORAL THE ABC TEAM ALSO WELCOMED ITS FIRST VETERINARIAN ON EFFECTIVE WAYS TO TREAT ANIMAL CRUELTY HOURS AND TRAINING A TEMPORAL THAN THE ARROND THE ARROND THAN THE ARROND THE ARROND THAN A TEMPORAL THAN THE ARROND THAN THAN THE ARROND THAN THE ARROND THAN THAN THE ARROND THAN THAN THAN THE ARROND THAN THAN THAN THE ARROND THAN THAN THAN THAN THAN THAN THAN THAN |

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| FORM 990, | AND OTHER MISSION-ALIGNED ORGANIZATIONS AND PROGRAMS NATIONWIDE. THE ASPCA SHALL HAVE TWO CLASSES OF MEMBERS: GOVERNING MEMBERS, WHO SHALL HAVE FULL VOTING RIGHTS |
| PART VI, SECTION A, LINE 1A | RESERVED TO "MEMBERS" UNDER THE NEW YORK NOT-FOR-PROFIT CORPORATION LAW, AND AFFINITY MEMBERS, WHO SHALL NOT HAVE VOTING RIGHTS. GOVERNING MEMBERS SHALL CONSIST AT ANY TIME OF THOSE PERSONS WHO ARE SERVING AT THAT TIME AS MEMBERS OF THE BOARD OF DIRECTORS. ONLY GOVERNING MEMBERS SHALL HAVE THE RIGHT TO ELECT THE MEMBERS OF THE BOARD OF DIRECTORS AND TO VOTE ON ANY OTHER TRANSACTION OR MATTER THAT SHALL PROPERLY COME BEFORE THE MEMBERS OF THE CORPORATION IN ACCORDANCE WITH THE ASPCA'S CERTIFICATE OF INCORPORATION, ITS BY-LAWS, OR APPLICABLE LAW. AFFINITY MEMBERS SHALL CONSIST OF ONE OR MORE CATEGORIES OF INDIVIDUALS AS MAY BE ESTABLISHED FROM TIME TO TIME BY THE BOARD OF DIRECTORS. AFFINITY MEMBERS SHALL MAKE SUCH ANNUAL CONTRIBUTIONS OR PAY SUCH ANNUAL DUES AS MAY BE ESTABLISHED FROM TIME TO TIME BY THE BOARD OF DIRECTORS. THE ASPCA MAY OFFER AFFINITY MEMBERS CERTAIN BENEFITS OF MEMBERSHIP, BUT AFFINITY MEMBERS SHALL NOT BE CONSIDERED "MEMBERS" AS THAT TERM IS USED IN THE NEW YORK NOT-FOR-PROFIT CORPORATION LAW OR IN ANY OTHER APPLICABLE LAW, RULE, OR REGULATION. ACCORDINGLY, WITH THE EXCEPTION OF THOSE AFFINITY MEMBERS WHO ARE ALSO GOVERNING MEMBERS, NO AFFINITY MEMBER SHALL HAVE THE RIGHT TO VOTE ON THE ELECTION OF PERSONS TO THE BOARD OF DIRECTORS OR ON ANY OTHER TRANSACTION OR MATTER THAT SHALL PROPERLY COME BEFORE THE MEMBERS OF THE CORPORATION IN ACCORDANCE WITH THE ASPCA'S CERTIFICATE OF INCORPORATION, THESE BY-LAWS, OR APPLICABLE LAW. |
| FORM 990, PART VI, SECTION B, LINE 11B | THE FORM 990 WAS PREPARED BY A NATIONALLY RENOWNED ACCOUNTING FIRM IN CONJUNCTION WITH THE ORGANIZATION'S FINANCE DEPARTMENT. THE DRAFT OF THE FORM 990 IS REVIEWED BY SENIOR MANAGEMENT, LEGAL COUNSEL, AS WELL AS THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS. A COPY IS CIRCULATED TO THE FULL BOARD OF DIRECTORS PRIOR TO THE RETURN'S FILING WITH THE INTERNAL REVENUE SERVICE. |
| FORM 990, PART VI, SECTION B, LINE 12C | ALL DIRECTORS, OFFICERS AND KEY EMPLOYEES COMPLETE A WRITTEN CONFLICT OF INTEREST QUESTIONNAIRE AND DECLARATION ANNUALLY. THE SECRETARY OF THE ASPCA PROVIDES COPIES OF ALL COMPLETED DISCLOSURE STATEMENTS TO THE CHAIR OF THE AUDIT COMMITTEE AND TO THE CHIEF LEGAL OFFICER. ANY POTENTIAL CONFLICTS ARE ADDED TO RECORDS MAINTAINED BY THE ASPCA'S LEGAL DEPARTMENT. |
| FORM 990, PART VI, SECTION B, LINE 15 | THE AUDIT COMMITTEE OF THE ASPCA BOARD IS THE AUTHORIZED COMPENSATION SETTING BODY THAT REVIEWS AND APPROVES THE COMPENSATION OF THE "DISQUALIFIED PERSONS" OF THE ASPCA. THE ASPCA ENGAGES AN INDEPENDENT COMPENSATION EXPERT TO CONDUCT A COMPENSATION STUDY TO ASSESS THE REASONABLENESS OF EACH "DISQUALIFIED PERSONS" TOTAL COMPENSATION IN ACCORDANCE WITH THE REBUTTABLE PRESUMPTION "SAFE HARBOR" PROVISIONS OF SECTION 4958 OF THE INTERNAL REVENUE CODE. THE COMPENSATION EXPERT ASSESSES THE REASONABLENESS OF EACH PERSONS" TOTAL COMPENSATION BASED ON COMPARABILITY DATA FOR THE POSITIONS UNDER REVIEW AND PROVIDES SUCH DATA AND ANALYSIS TO THE AUDIT COMMITTEE FOR ITS REVIEW. THE COMPARABILITY DATA IS DRAWN FROM INDUSTRY SURVEYS AND DATA SOURCES FOR COMPARABILE POSITIONS IN ORGANIZATIONS OF SIMILAR SCOPE, OPERATING BUDGET, AND TYPE. WITH RESPECT TO "DISQUALIFIED PERSONS" OTHER THAN THE PRESIDENT & CEO, THE AUDIT COMMITTEE REVIEWS THE COMPENSATION EXPERTS STUDY AND COMPARABILITY DATA AND THE PRESIDENT & CEO'S ANALYSIS OF EACH INDIVIDUAL'S PERFORMANCE, DELIBERATES, AND VOTES ON WHETHER TO APPROVE THE TOTAL COMPENSATION RECOMMENDATION PROPOSED BY THE PRESIDENT & CCO. THE PERSON WHOSE COMPENSATION IS UNDER REVIEW IS NOT PRESENT AND DOES NOT PARTICIPATE IN THE DELIBERATIONS, EXCEPT THAT SUCH PERSON MAY ANSWER QUESTIONS THAT WILL HELP THE COMMITTEE IN ITS DELIBERATIONS, WITH RESPECT TO THE PRESIDENT & CEO'S PERFORMANCE, DELIBERATION WHICH PRESIDENT AND THE PRESIDENT & CEO'S PERFORMANCE, DELIBERATES, AND VOTES ON A RECOMMENDATION ON THE PRESIDENT & CEO'S TOTAL COMPENSATION (INCLUDING PERFORMANCE BONUS), WHICH RECOMMENDATION ON THE PRESIDENT & CEO'S THE THAT HE MAD TO AMBOUTTE WHETHER TO APPROVE THE TOTAL COMPENSATION BY DATITIN |
| FORM 990, PART VI, SECTION C, LINE 19 | AUDITED FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY, CERTIFICATE OF INCORPORATION AND BY-LAWS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST AND THROUGH CHARITABLE REGISTRATION REQUIREMENTS IN OVER 40 STATES. THE ASPCA MAKES ITS FORM 990 AVAILABLE TO THE PUBLIC BY RETAINING A COPY AT ITS PLACE OF BUSINESS AND PLACING A COPY ON ITS WEBSITE. THE FORM 990 IS ALSO PUBLISHED ON THE INTERNET AT WWW.GUIDESTAR.ORG. |
| FORM 990, PART XI, LINE 9: | |
| For Panerwork Reducti | ion Act Notice, see the Instructions for Form 990 or 990-EZ. Cat. No. 51056K Schedule O (Form 990) 202 |

SCHEDULE R (Form 990)

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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

THE AMERICAN SOCIETY FOR THE PREVENTION

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

Open to Public Inspection **Employer identification number**

| OF CRUELTY TO ANIMALS | | | | | | 13-1623829 | | | |
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| Part I Identification of Disregarded Entities. Comple | te if the organization | n answere | ed "Yes" on I | Form 99 | 0, Part IV, | line 33. | | | |
| (a) Name, address, and EIN (if applicable) of disregarded entity | (b) Primary a | (b) Primary activity | | (c) Legal domicile (state or foreign country) | | (e) e End-of-year asset | (f) Direct control entity | olling | |
| | | | | | | | | | |
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| | | | | | | | | | |
| Part II Identification of Related Tax-Exempt Organiza | tions. Complete if | the organ | ization answ | vered "Y | es" on Forr | n 990, Part IV, lin | e 34 because it had | d one | |
| or more related tax-exempt organizations during the (a) Name, address, and EIN of related organization | c tax year. (b) Primary activity | | (c) Legal domicile (state or foreign country) | | (d) Code section | (e) Public charity status (if section 501(c)(3)) | (f) Direct controlling entity | Section 512(b) (13) controlled entity? | |
| (1)ASPCA VETERINARY SERVICES OF NORTH CAROLINA PC 25 HERITAGE DR ASHVILLE, NC 28806 47-3987701 | VETERINARY SERVICES T THE ASPCA IN NC | 0 | NC | 501(C)(3 | 3) | LINE 10 | ASPCA | Yes | |
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| For Paperwork Reduction Act Notice, see the Instructions for Form 990. | | C | at. No. 50135 | 5 Y | | | Schedule R (Form 9 | 90) 2021 | |

| 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. |

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|---|-----------------------------------|---|--|--|------------------------------------|--|--------------|----------|------------------------------|--------|------------------------------|----------|--|------|--------------------------|---------------------------------------|
| (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 | allocations? | | Disproprtionate allocations? | | Disproprtionate allocations? | | (i) Code V-UBI amount in box 20 of Schedule K- 1 (Form 1065) | part | ral or aging tner? | (k) Percentage ownership |
| | | | | | | | Yes | No | | Yes | No | | | | | |
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| Part IV Identification of Related Organizations 34 because it had one or more related organizations | | | | | | | | answered | l "Yes" on | Form 9 | 90, Part | IV, line | | | | |

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile | (d) Direct controlling entity | (e) Type of entity (C corp, S | (f) Share of total income | (g) Share of end- of-year | (h) Percentage ownership | (i Section 5: controlled | i) 12(b)(13) d entity? | | |
|--|--------------------------------|---------------------------------|-------------------------------|-------------------------------------|---------------------------------|---------------------------------|---------------------------------------|--------------------------------|------------------------------|--|--|
| | | (state or foreign country) | | corp, or trust) | | assets | | Yes | No | | |
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| Schedule R (Form 990) 2021 | | | | | | | | | | | |

| chedule R (Form 990) 2021 | | | | | Pag | je 3 | | | | | |
|---|----------------------------------|-------------------------------|----------------------------------|---------|--------|-------------|--|--|--|--|--|
| Part V Transactions With Related Organizations. Complete if the organization answere | d "Yes" on Form 9 | 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 | | | | | |
| f 1 During the tax year, did the orgranization engage in any of the following transactions with one or more rel | ated organizations li | sted in Parts II-IV? | | | | | | | | | |
| a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity · · · · · | | | | 1a | | No | | | | | |
| $f b$ Gift, grant, or capital contribution to related organization(s) \cdot | | | | 1b No | | | | | | | |
| ${f c}$ Gift, grant, or capital contribution from related organization(s) | | | | 1c | | No | | | | | |
| $f d$ Loans or loan guarantees to or for related organization(s) $\ \cdot \ $ | | | | | | | | | | | |
| e Loans or loan guarantees by related organization(s) | | | | 1e | | No | | | | | |
| f Dividends from related organization(s) | | | | 1f | | No | | | | | |
| g Sale of assets to related organization(s) | | | | 1g | | No | | | | | |
| h Purchase of assets from related organization(s) · · · · · · · · · · · · · · · · · · · | | | | | | | | | | | |
| i Exchange of assets with related organization(s) | | | | 1i | | No | | | | | |
| j Lease of facilities, equipment, or other assets to related organization(s) | | | | | | | | | | | |
| k Lease of facilities, equipment, or other assets from related organization(s) | | | | 1k | | No | | | | | |
| l Performance of services or membership or fundraising solicitations for related organization(s) | | | | 11 | Yes | | | | | | |
| m Performance of services or membership or fundraising solicitations by related organization(s) | | | | 1m | | No | | | | | |
| ${f n}$ Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) | | | | 1n | Yes | | | | | | |
| o Sharing of paid employees with related organization(s) \cdots | | | | 10 | Yes | | | | | | |
| p Reimbursement paid to related organization(s) for expenses · · · · · · · · · · · · · · · · · · | | | | 1p | | No | | | | | |
| ${f q}$ Reimbursement paid by related organization(s) for expenses | | | | 1q | | No | | | | | |
| r Other transfer of cash or property to related organization(s) | | | | 1r | | No | | | | | |
| ${f s}$ Other transfer of cash or property from related organization(s) | | | | 1s | | No | | | | | |
| 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete the | his line, including co | vered relationships | and transaction thresholds. | | • | | | | | | |
| (a) Name of related organization | (b) Transaction type (a-s) | (c) Amount involved | (d) Method of determining amo | ount in | volved | | | | | | |
| ASPCA VETERINARY SERVICES OF NORTH CAROLINA PC | L | 80,190 | BOOK VALUE | | | | | | | | |
| 2)ASPCA VETERINARY SERVICES OF NORTH CAROLINA PC | 0 | 276,813 | BOOK VALUE | | | | | | | | |
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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.

| 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 | organizations? | | Are all partners section 501(c)(3) organizations? | | (f) Share of total income | total end-of-year | (h) Disproprtionate r allocations? | | (i) Code V-UBI amount in box 20 of Schedule K-1 | | | (k) Percentage ownership |
| | | | tax under sections 512- 514) | Yes | No | | | Yes | No | (Form 1065) | Yes | No | | | |
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