

PUBLIC DISCLOSURE COPY

Form **990**

**Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

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

**2020**

Department of the Treasury  
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

**Open to Public Inspection**

**A** For the 2020 calendar year, or tax year beginning **2020**, and ending **2020**

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

**C** Name of organization **THE HUMANE SOCIETY OF THE UNITED STATES**  
 Doing business as  
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
**1255 23RD STREET, NW SUITE 450**  
 City or town, state or province, country, and ZIP or foreign postal code  
**WASHINGTON, DC 20037**

**D** Employer identification number  
**53-0225390**

**E** Telephone number  
**(202) 452-1100**

**F** Name and address of principal officer: **CRISTOBEL BLOCK**  
**SAME AS C ABOVE**

**H(a)** Is this a group return for subordinates?  Yes  No  
**H(b)** Are all subordinates included?  Yes  No  
 If "No," attach a list. See instructions  
**H(c)** Group exemption number ▶

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

**J** Website: ▶ **WWW.HUMANESOCIETY.ORG**

**K** Form of organization:  Corporation  Trust  Association  Other ▶

**L** Year of formation: **1954**

**M** State of legal domicile: **DE**

**G** Gross receipts \$ **170,740,678**

**Part I Summary**

Activities & Governance	<b>1</b>	Briefly describe the organization's mission or most significant activities: <u>THE HUMANE SOCIETY OF THE UNITED STATES (THE HSUS) TAKES ON THE BIG FIGHTS TO END SUFFERING FOR ALL ANIMALS. THE HSUS WORKS TO (CONTINUED ON SCHEDULE O)</u>		
	<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b>	Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>18</b>
	<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>18</b>
	<b>5</b>	Total number of individuals employed in calendar year 2020 (Part V, line 2a)	<b>5</b>	<b>640</b>
	<b>6</b>	Total number of volunteers (estimate if necessary)	<b>6</b>	<b>1,108</b>
	<b>7a</b>	Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>225,170</b>
	<b>b</b>	Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	
Revenue	<b>8</b>	Contributions and grants (Part VIII, line 1h)	Prior Year <b>124,782,166</b>	Current Year <b>119,093,171</b>
	<b>9</b>	Program service revenue (Part VIII, line 2g)	<b>1,665,476</b>	<b>3,302,736</b>
	<b>10</b>	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>32,192,026</b>	<b>1,553,204</b>
	<b>11</b>	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>551,864</b>	<b>735,695</b>
	<b>12</b>	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>159,191,532</b>	<b>124,684,806</b>
Expenses	<b>13</b>	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	<b>15,060,588</b>	<b>21,930,997</b>
	<b>14</b>	Benefits paid to or for members (Part IX, column (A), line 4)		<b>0</b>
	<b>15</b>	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	<b>48,038,951</b>	<b>52,939,757</b>
	<b>16a</b>	Professional fundraising fees (Part IX, column (A), line 11e)	<b>10,426,575</b>	<b>10,220,361</b>
	<b>b</b>	Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>35,277,647</b>		
	<b>17</b>	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	<b>65,156,840</b>	<b>50,551,357</b>
	<b>18</b>	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	<b>138,682,954</b>	<b>135,642,472</b>
	<b>19</b>	Revenue less expenses. Subtract line 18 from line 12	<b>20,508,578</b>	<b>(10,957,666)</b>
Net Assets or Fund Balances	<b>20</b>	Total assets (Part X, line 16)	Beginning of Current Year <b>298,469,906</b>	End of Year <b>321,064,965</b>
	<b>21</b>	Total liabilities (Part X, line 26)	<b>32,154,701</b>	<b>36,756,275</b>
	<b>22</b>	Net assets or fund balances. Subtract line 21 from line 20	<b>266,315,205</b>	<b>284,308,690</b>

**Part II Signature Block**

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

**Sign Here**

Signature of officer: WILLIAM H. HALL, TREASURER Date: \_\_\_\_\_  
 Type or print name and title

**Paid Preparer Use Only**

Print/Type preparer's name: MARC R. BERGER, CPA Preparer's signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Check  if self-employed PTIN: P01871563  
 Firm's name ▶ BDO USA, LLP Firm's EIN ▶ 13-5381590  
 Firm's address ▶ 8401 GREENSBORO DRIVE - SUITE 800, MCLEAN, VA 22102 Phone no. (703) 893-0600

May the IRS discuss this return with the preparer shown above? See instructions  Yes  No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: THE HSUS'S PROGRAMS FOCUS ON COMPANION ANIMALS, WILDLIFE (INCLUDING MARINE MAMMALS), ANIMALS IN RESEARCH AND TESTING, FARM ANIMALS AND EQUINES.

(CONTINUED ON SCHEDULE O)

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No If "Yes," describe these changes on Schedule O.

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

4a (Code: ) (Expenses \$ 35,356,255 including grants of \$ 2,798,677 ) (Revenue \$ 1,205,787 ) EDUCATION AND ENGAGEMENT

THE HSUS CONDUCTS ITS WORK OF EDUCATION AND ENGAGEMENT, WITH THE RELATED ACTIVITY OF PUBLIC OUTREACH AND COMMUNICATION, THROUGH MANY SECTIONS AND PROGRAMS.

THE HSUS ENGAGES WITH SUPPORTERS AND MULTIPLE AUDIENCES THROUGH A VARIETY OF MEDIA INCLUDING ITS PRIMARY WEBSITE, HUMANESOCIETY.ORG; FACEBOOK; TWITTER; AND THE BLOG OF THE PRESIDENT/CEO. THE HSUS USES ONLINE MEDIA, EMAIL COMMUNICATIONS AND TEXT MESSAGING TO REACH SUPPORTERS. THE HSUS PRODUCES VIDEOS TIED TO MAJOR CAMPAIGNS AND ACTIVITIES, POSTING THEM ON YOUTUBE, FACEBOOK, HUMANESOCIETY.ORG, AND OTHER PLATFORMS.

(CONTINUED ON SCHEDULE O)

4b (Code: ) (Expenses \$ 28,687,411 including grants of \$ 16,242,290 ) (Revenue \$ 978,352 ) DIRECT CARE AND SERVICE

THE HSUS'S DIRECT CARE AND SERVICE INITIATIVES TAKE PLACE ACROSS A WIDE RANGE OF ISSUE AND PROGRAM AREAS. THESE INITIATIVES INVOLVE DIRECT CARE WORK CARRIED OUT BY THE HSUS AND ITS AFFILIATES, AND EXTERNAL GRANTS TO OTHER ORGANIZATIONS. DIRECT CARE AND SERVICE COMPRISES THE WORK OF SUCH PROGRAMS AS THE ANIMAL RESCUE TEAM, COMPANION ANIMALS, PETS FOR LIFE, STATE AFFAIRS, AND WILDLIFE.

(CONTINUED ON SCHEDULE O)

4c (Code: ) (Expenses \$ 23,776,239 including grants of \$ 2,719,955 ) (Revenue \$ 810,862 ) PUBLIC POLICY AND ENFORCEMENT

THE HSUS'S WORK IN PUBLIC POLICY AND ENFORCEMENT FOCUSES ON SHORT-, NEAR-, AND LONG-TERM INITIATIVES TO ENSURE THE WELL-BEING OF ANIMALS.

EQUINE ISSUES: IN 2020, THE HSUS'S EFFORTS TO ADDRESS THE DOPING OF RACEHORSES AND RACETRACK SAFETY HELPED PASS THE HORSERACING INTEGRITY AND SAFETY ACT, REQUIRING NATIONAL, UNIFORM SAFETY STANDARDS THAT INCLUDE ANTI-DOPING AND MEDICATION CONTROL AND RACETRACK SAFETY PROGRAMS, AND AN INDEPENDENT, SELF-REGULATORY AUTHORITY TO IMPLEMENT AND MANAGE NEW SAFETY STANDARDS AND PROGRAMS.

(CONTINUED ON SCHEDULE O)

4d Other program services (Describe on Schedule O.) (Expenses \$ 2,640,382 including grants of \$ 170,075 ) (Revenue \$ 95,302 )

4e Total program service expenses 90,460,287

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A . . . . .</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> See instructions? . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>3</b> 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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>4</b> <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II . . . . .</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>6</b> 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, Part I . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>9</b> 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? <i>If "Yes," complete Schedule D, Part IV . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>10</b> Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V . . . . .</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>11</b> 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.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI . . . . .</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>b</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? <i>If "Yes," complete Schedule D, Part VII . . . . .</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>c</b> 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? <i>If "Yes," complete Schedule D, Part VIII . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>d</b> 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? <i>If "Yes," complete Schedule D, Part IX . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X . . . . .</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>f</b> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X . . . . .</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional . . . . .</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV. . . . .</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV . . . . .</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV. . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I See instructions . . . . .</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II . . . . .</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H . . . . .</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II . . . . .</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**Part IV Checklist of Required Schedules** *(continued)*

	Yes	No
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .		✓
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> . . . . .	✓	
<b>24a</b> 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> . . . . .		✓
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .		
<b>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .		✓
<b>b</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? <i>If "Yes," complete Schedule L, Part I</i> . . . . .		✓
<b>26</b> 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 entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> . . . . .		✓
<b>27</b> Did the organization provide a grant 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, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> . . . . .		✓
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .		✓
<b>b</b> A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	✓	
<b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .		✓
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .	✓	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .		✓
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .		✓
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .		✓
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> . . . . .		✓
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> . . . . .	✓	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? . . . . .	✓	
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	✓	
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	✓	
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> . . . . .		✓
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O. . . . .	✓	

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

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

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

		Yes	No		
<b>2a</b>	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>2a</b>	640		
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	<b>2b</b>		✓	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>		✓	
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	<b>3b</b>			✓
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<b>4a</b>		✓	
<b>b</b>	If "Yes," enter the name of the foreign country <b>▶ BE, CA, CS, IN, KS, LI, MX, SF, UK</b> See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>			✓
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>			✓
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>			
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	<b>6a</b>			✓
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>			
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>				
<b>a</b>	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?	<b>7a</b>		✓	
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7b</b>		✓	
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7c</b>		✓	
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year	<b>7d</b>			11
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7e</b>			✓
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7f</b>			✓
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7g</b>			
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>7h</b>		✓	
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	<b>8</b>			
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>				
<b>a</b>	Did the sponsoring organization make any taxable distributions under section 4966?	<b>9a</b>			
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	<b>9b</b>			
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:				
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	<b>10a</b>			
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>			
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:				
<b>a</b>	Gross income from members or shareholders	<b>11a</b>			
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>11b</b>			
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>			
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>			
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>				
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	<b>13a</b>			
<b>b</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	<b>13b</b>			
<b>c</b>	Enter the amount of reserves on hand	<b>13c</b>			
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>			✓
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	<b>14b</b>			
<b>15</b>	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	<b>15</b>			✓
<b>16</b>	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	<b>16</b>			✓

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year . . . . .		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
<b>1b</b>	Enter the number of voting members included on line 1a, above, who are independent . . . . .		
<b>2</b>	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? . . . . .	<input checked="" type="checkbox"/>	
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? . . . . .		<input checked="" type="checkbox"/>
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . .		<input checked="" type="checkbox"/>
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . .		<input checked="" type="checkbox"/>
<b>6</b>	Did the organization have members or stockholders? . . . . .		<input checked="" type="checkbox"/>
<b>7a</b>	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? . . . . .		<input checked="" type="checkbox"/>
<b>7b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . . .		<input checked="" type="checkbox"/>
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>8a</b>	The governing body? . . . . .	<input checked="" type="checkbox"/>	
<b>8b</b>	Each committee with authority to act on behalf of the governing body? . . . . .	<input checked="" type="checkbox"/>	
<b>9</b>	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 on Schedule O . . . . .		<input checked="" type="checkbox"/>

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

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates? . . . . .		<input checked="" type="checkbox"/>
<b>10b</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? . . . . .		
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . . . .	<input checked="" type="checkbox"/>	
<b>11b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990. . . . .		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .	<input checked="" type="checkbox"/>	
<b>12b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .	<input checked="" type="checkbox"/>	
<b>12c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done . . . . .	<input checked="" type="checkbox"/>	
<b>13</b>	Did the organization have a written whistleblower policy? . . . . .	<input checked="" type="checkbox"/>	
<b>14</b>	Did the organization have a written document retention and destruction policy? . . . . .	<input checked="" type="checkbox"/>	
<b>15</b>	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?		
<b>15a</b>	The organization's CEO, Executive Director, or top management official . . . . .	<input checked="" type="checkbox"/>	
<b>15b</b>	Other officers or key employees of the organization . . . . .	<input checked="" type="checkbox"/>	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .	<input checked="" type="checkbox"/>	
<b>16b</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? . . . . .	<input checked="" type="checkbox"/>	

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed ► [AL, AR, CA, FL, \(CONTINUED ON SCHEDULE O\)](#)
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website     Another's website     Upon request     Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records ►  
[WILLIAM H. HALL, 700 PROFESSIONAL DR, GAITHERSBURG, MD 20879, \(202\) 452-1100](#)

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

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

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

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

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

See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
<b>(1)</b> CRISTOBEL BLOCK PRESIDENT & CHIEF EXECUTIVE OFFICER	38.0 2.0			✓			396,153	0	44,374	
<b>(2)</b> JOHN VRANAS CHIEF DEVELOPMENT & MARKETING OFFICER	40.0 0.0			✓			322,936	0	20,766	
<b>(3)</b> ERIN FRACKLETON CHIEF OPERATING OFFICER	40.0 0.0			✓			283,664	0	18,895	
<b>(4)</b> KATHERINE KARL GENERAL COUNSEL & CHIEF LEGAL OFFICER	39.0 1.0			✓			274,262	0	21,456	
<b>(5)</b> ERIC SAKACH SENIOR LAW ENFORCEMENT SPECIALIST	40.0 0.0					✓	231,386	0	23,353	
<b>(6)</b> WILLIAM H. HALL CHIEF FINANCIAL OFFICER & TREASURER	38.0 2.0			✓			227,693	0	25,846	
<b>(7)</b> SARAH COMIS VP., BUSINESS DEVELOPMENT & CORPORATE RELATIONS	40.0 0.0					✓	240,183	0	6,547	
<b>(8)</b> REBECCA BRANZELL DEPUTY GENERAL COUNSEL	40.0 0.0					✓	202,751	0	37,791	
<b>(9)</b> NICOLE PAQUETTE CHIEF PROGRAMS & POLICY OFFICER	36.5 3.5			✓			214,506	0	25,403	
<b>(10)</b> JONATHAN LOVVORN SVP. & CHIEF COUNSEL, APL	40.0 0.0					✓	203,516	0	20,083	
<b>(11)</b> MICHAEL BARSNESS SENIOR VP., FINANCE & ACCOUNTING	25.5 14.5					✓	191,802	0	26,005	
<b>(12)</b> JAMIE NATELSON SVP. MARKETING OPERATIONS	40.0 0.0					✓	179,332	0	20,172	
<b>(13)</b> KIMBERLEE DINN SENIOR VP., PHILANTHROPY	39.5 0.5					✓	165,094	0	34,334	
<b>(14)</b> AMY NICHOLS FORMER KEY EMPLOYEE	40.0 0.0					✓	155,178	0	35,970	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) G. THOMAS WAITE, III TREASURER & CFO	33.5 6.5			✓				172,381	0	11,999
(16) THERESA REESE FORMER SECOND DEPUTY TREASURER	34.0 6.0						✓	157,608	0	16,611
(17) ALEXA HERNDON CHIEF PEOPLE OFFICER	40.0 0.0			✓				106,014	0	9,309
(18) JOHANIE V. PARRA SECRETARY	34.0 6.0			✓				76,124	0	20,339
(19) ADITYA KUMAR DIRECTOR	0.2 0.0	✓						0	0	0
(20) BRAD JAKEMAN DIRECTOR	0.8 0.0	✓						0	0	0
(21) C. THOMAS MCMILLEN DIRECTOR	0.8 0.1	✓						0	0	0
(22) CAREN M. FLEIT DIRECTOR	1.2 0.0	✓						0	0	0
(23) CATHY KANGAS DIRECTOR	0.7 0.0	✓						0	0	0
(24) CHARLES A. LAUE DIRECTOR	1.2 0.1	✓						0	0	0
(25) (SEE STATEMENT)										
<b>1b Subtotal</b>								3,800,583	0	419,254
<b>c Total from continuation sheets to Part VII, Section A</b>								0	0	0
<b>d Total (add lines 1b and 1c)</b>								3,800,583	0	419,254

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶** 93

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
GIVEBRIDGE, INC., 525 W. MONROE ST, STE 2350, CHICAGO, IL 60661	FUNDRAISING CONSULTANT	4,444,273
NAVISTAR DIRECT MARKETING LLC, 4612 NAVISTAR DR, FREDERICK, MD 21703	PRINT, DESIGN & COPY SERVICES	4,125,388
FACEBOOK, INC., 1601 WILLOW RD, MENLO PARK, CA 94025	ADVERTISING	3,797,820
GOOGLE, LLC, 1600 AMPHITHEATRE PKWY, MOUNTAIN VIEW, CA 94043	ADVERTISING	2,840,181
GREEN PLANET SALES COMPANY, INC., 301 COMMERCE DR, MOORESTOWN, NJ 08057	FUNDRAISING CONSULTANT	2,361,134

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **▶** 53



**Part VIII Statement of Revenue**

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b>	Federated campaigns . . . . .	<b>1a</b> 49,645				
	<b>b</b>	Membership dues . . . . .	<b>1b</b> 0				
	<b>c</b>	Fundraising events . . . . .	<b>1c</b> 825,076				
	<b>d</b>	Related organizations . . . . .	<b>1d</b> 805,706				
	<b>e</b>	Government grants (contributions)	<b>1e</b> 16,857				
	<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b> 117,395,887				
	<b>g</b>	Noncash contributions included in lines 1a-1f . . . . .	<b>1g</b> \$ 5,748,067				
	<b>h</b>	<b>Total.</b> Add lines 1a-1f . . . . .		119,093,171			
	<b>Program Service Revenue</b>			Business Code			
<b>2a</b>		SUPPORT SERVICES REVENUE	561000	2,553,969	2,553,969		
<b>b</b>		PROGRAM EVENT INCOME	813312	280,920	280,920		
<b>c</b>		ADVERTISING	541800	225,170		225,170	
<b>d</b>		OFFICE RENTAL	531120	212,433		212,433	
<b>e</b>		SUBSCRIPTIONS	511110	22,321	22,321		
<b>f</b>		All other program service revenue . . .	541900	7,923	7,923	0	
<b>g</b>		<b>Total.</b> Add lines 2a-2f . . . . .		3,302,736			
<b>Other Revenue</b>	<b>3</b>	Investment income (including dividends, interest, and other similar amounts) . . . . .		2,298,962		2,298,962	
	<b>4</b>	Income from investment of tax-exempt bond proceeds					
	<b>5</b>	Royalties . . . . .		188,133		188,133	
	<b>6a</b>	Gross rents . . . . .	(i) Real				
			(ii) Personal				
			<b>6a</b>				
			<b>6b</b>				
	<b>b</b>	Less: rental expenses	<b>6b</b>				
	<b>c</b>	Rental income or (loss)	<b>6c</b>	0	0		
	<b>d</b>	Net rental income or (loss) . . . . .					
	<b>7a</b>	Gross amount from sales of assets other than inventory	(i) Securities				
			(ii) Other				
			<b>7a</b>	44,592,900	150,000		
			<b>7b</b>	45,486,221	2,437		
	<b>b</b>	Less: cost or other basis and sales expenses . . . . .	<b>7b</b>				
<b>c</b>	Gain or (loss) . . . . .	<b>7c</b>	(893,321)	147,563			
<b>d</b>	Net gain or (loss) . . . . .		(745,758)		(745,758)		
<b>8a</b>	Gross income from fundraising events (not including \$ 825,076 of contributions reported on line 1c). See Part IV, line 18 . . . . .	<b>8a</b>	172,750				
		<b>8b</b>	567,214				
		<b>c</b>	Net income or (loss) from fundraising events . . .		(394,464)		(394,464)
<b>9a</b>	Gross income from gaming activities. See Part IV, line 19 . . . . .	<b>9a</b>					
		<b>9b</b>					
		<b>c</b>	Net income or (loss) from gaming activities . . .				
<b>10a</b>	Gross sales of inventory, less returns and allowances . . . . .	<b>10a</b>					
		<b>10b</b>					
		<b>c</b>	Net income or (loss) from sales of inventory . . .				
<b>Miscellaneous Revenue</b>			Business Code				
	<b>11a</b>	OTHER INCOME	900099	483,248		483,248	
	<b>b</b>	OTHER FEES	541900	242,597		242,597	
	<b>c</b>	LIST RENTAL	900099	216,181		216,181	
	<b>d</b>	All other revenue . . . . .		0	0	0	
<b>e</b>	<b>Total.</b> Add lines 11a-11d . . . . .		942,026				
<b>12</b>	<b>Total revenue.</b> See instructions . . . . .		124,684,806	2,865,133	225,170	2,501,332	

**Part IX Statement of Functional Expenses**

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

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

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . . . .	21,635,603	21,635,603		
2	Grants and other assistance to domestic individuals. See Part IV, line 22 . . . . .	0	0		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 . . . . .	295,394	295,394		
4	Benefits paid to or for members . . . . .	0	0		
5	Compensation of current officers, directors, trustees, and key employees . . . . .	2,671,051	2,098,645	271,913	300,493
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .	0	0		
7	Other salaries and wages . . . . .	41,327,135	32,471,161	4,211,348	4,644,626
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . . . . .	1,972,297	1,548,466	200,714	223,117
9	Other employee benefits . . . . .	4,257,333	3,341,981	433,516	481,836
10	Payroll taxes . . . . .	2,711,941	2,128,930	276,144	306,867
11	Fees for services (nonemployees):				
a	Management . . . . .				
b	Legal . . . . .	2,009,385	1,778,591	230,794	0
c	Accounting . . . . .	337,993	299,210	38,783	0
d	Lobbying . . . . .	944,705	461,038	59,759	423,908
e	Professional fundraising services. See Part IV, line 17 . . . . .	10,220,361			10,220,361
f	Investment management fees . . . . .	559,321	0	559,321	0
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . . . .	6,605,076	2,642,005	1,094,545	2,868,526
12	Advertising and promotion . . . . .	8,443,611	6,836,304	57,678	1,549,629
13	Office expenses . . . . .	7,201,309	4,219,896	1,170,770	1,810,643
14	Information technology . . . . .	3,772,610	2,938,406	380,871	453,333
15	Royalties . . . . .				
16	Occupancy . . . . .	2,950,328	2,596,696	336,579	17,053
17	Travel . . . . .	1,476,875	1,232,080	160,232	84,563
18	Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
19	Conferences, conventions, and meetings . . . . .	126,239	105,240	13,745	7,254
20	Interest . . . . .				
21	Payments to affiliates . . . . .				
22	Depreciation, depletion, and amortization . . . . .	588,505	493,155	95,350	0
23	Insurance . . . . .	1,512,416	1,336,565	173,650	2,201
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) . . . . .				
a	<u>EDUCATION AND MARKETING MATERIAL</u> . . . . .	13,636,781	1,705,521	100,536	11,830,724
b	<u>EQUIPMENT</u> . . . . .	222,269	173,120	22,440	26,709
c	<u>RE &amp; PROPERTY TAXES</u> . . . . .	163,934	122,280	15,850	25,804
d	-----				
e	All other expenses . . . . .	0	0	0	0
25	<b>Total functional expenses.</b> Add lines 1 through 24e . . . . .	135,642,472	90,460,287	9,904,538	35,277,647
26	<b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720) . . . . .	56,003,695	26,691,184	0	29,312,511

**Part X Balance Sheet**

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

		(A)		(B)
		Beginning of year		End of year
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	6,850	<b>1</b>	7,129
	<b>2</b> Savings and temporary cash investments . . . . .	49,354,551	<b>2</b>	36,020,002
	<b>3</b> Pledges and grants receivable, net . . . . .	8,012,700	<b>3</b>	3,641,587
	<b>4</b> Accounts receivable, net . . . . .	9,499,951	<b>4</b>	5,106,468
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . . . . .	0	<b>5</b>	0
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) . . . . .	0	<b>6</b>	0
	<b>7</b> Notes and loans receivable, net . . . . .	1,075,705	<b>7</b>	
	<b>8</b> Inventories for sale or use . . . . .		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges . . . . .	1,368,268	<b>9</b>	1,012,331
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D . . . . .	<b>10a</b> 17,543,016		
	<b>b</b> Less: accumulated depreciation . . . . .	<b>10b</b> 9,388,760	8,585,506	<b>10c</b> 8,154,256
	<b>11</b> Investments—publicly traded securities . . . . .	69,136,421	<b>11</b>	76,179,564
	<b>12</b> Investments—other securities. See Part IV, line 11 . . . . .	146,782,461	<b>12</b>	189,291,383
	<b>13</b> Investments—program-related. See Part IV, line 11 . . . . .	930,000	<b>13</b>	930,000
	<b>14</b> Intangible assets . . . . .		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 . . . . .	3,717,493	<b>15</b>	722,245
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) . . . . .	298,469,906	<b>16</b>	321,064,965	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	12,808,747	<b>17</b>	19,751,481
	<b>18</b> Grants payable . . . . .	138,155	<b>18</b>	97,918
	<b>19</b> Deferred revenue . . . . .	3,188,705	<b>19</b>	191,944
	<b>20</b> Tax-exempt bond liabilities . . . . .		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .		<b>21</b>	
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . . . . .	0	<b>22</b>	0
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .	0	<b>24</b>	
	<b>25</b> 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 . . . . .	16,019,094	<b>25</b>	16,714,932
	<b>26 Total liabilities.</b> Add lines 17 through 25 . . . . .	32,154,701	<b>26</b>	36,756,275
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions . . . . .	206,833,082	<b>27</b>	220,841,422
	<b>28</b> Net assets with donor restrictions . . . . .	59,482,123	<b>28</b>	63,467,268
	<b>Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds . . . . .		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund . . . . .		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>31</b>	
<b>32</b> Total net assets or fund balances . . . . .	266,315,205	<b>32</b>	284,308,690	
<b>33</b> Total liabilities and net assets/fund balances . . . . .	298,469,906	<b>33</b>	321,064,965	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	124,684,806
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	135,642,472
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	(10,957,666)
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	266,315,205
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	28,973,508
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain on Schedule O)	<b>9</b>	(22,357)
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	284,308,690

**Part XII Financial Statements and Reporting**

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

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		✓
<b>b</b>	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	✓	
<b>c</b>	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	✓	
<b>3a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		✓
<b>b</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 on Schedule O and describe any steps taken to undergo such audits.		

**Part VII**

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (Check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(25) DAVID NIEKIRK ----- DIRECTOR	1.0 ----- 0.0	✓						0	0	0
(26) ELIZABETH BRADHAM ----- DIRECTOR	1.0 ----- 1.0	✓						0	0	0
(27) GEORGINA BLOOMBERG ----- DIRECTOR	0.5 ----- 0.0	✓						0	0	0
(28) JEFFREY J. ARCINIACO ----- DIRECTOR	0.5 ----- 0.0	✓						0	0	0
(29) JERRY CESA ----- DIRECTOR	0.6 ----- 0.0	✓						0	0	0
(30) KATHLEEN M. LINEHAN, ESQ. ----- DIRECTOR	1.3 ----- 0.1	✓						0	0	0
(31) MARSHA PERELMAN ----- DIRECTOR	1.1 ----- 1.0	✓						0	0	0
(32) NEIL B. FANG, ESQ., CPA ----- DIRECTOR	1.0 ----- 0.1	✓						0	0	0
(33) PAULA A. KISLAK, D.V.M. ----- DIRECTOR	0.6 ----- 0.8	✓						0	0	0
(34) ROBERT GREENSPON ----- DIRECTOR	0.9 ----- 0.0	✓						0	0	0
(35) SHARON LEE PATRICK ----- DIRECTOR	0.9 ----- 0.0	✓						0	0	0
(36) STEVEN G. WHITE ----- DIRECTOR	0.4 ----- 1.0	✓						0	0	0
(37) SUSAN ATHERTON ----- DIRECTOR	1.4 ----- 5.1	✓						0	0	0
(38) SYLVIA KASER ----- DIRECTOR	1.0 ----- 0.0	✓						0	0	0
(39) THOMAS J. SABATINO, JR. ----- DIRECTOR	1.1 ----- 0.1	✓						0	0	0

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020**

**Open to Public Inspection**

Name of the organization <b>THE HUMANE SOCIETY OF THE UNITED STATES</b>	Employer identification number <b>53-0225390</b>
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**Part I Reason for Public Charity Status.** (All organizations must complete this part.) See instructions.

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

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9  An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- 10  An organization that normally receives (1) more than 33<sup>1</sup>/<sub>3</sub>% 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<sup>1</sup>/<sub>3</sub>% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations
  - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
<b>Total</b>						

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .	112,881,052	137,701,084	111,677,456	124,782,166	119,093,171	606,134,929
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						0
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						0
<b>4 Total.</b> Add lines 1 through 3 . . . . .	112,881,052	137,701,084	111,677,456	124,782,166	119,093,171	606,134,929
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . . .						0
<b>6 Public support.</b> Subtract line 5 from line 4						606,134,929

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>7</b> Amounts from line 4 . . . . .	112,881,052	137,701,084	111,677,456	124,782,166	119,093,171	606,134,929
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . . .	2,193,391	3,467,949	3,685,050	4,378,638	2,699,528	16,424,556
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .						0
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . .	504,823	572,820	2,109,181	1,116,812	942,026	5,245,662
<b>11 Total support.</b> Add lines 7 through 10						627,805,147
<b>12</b> Gross receipts from related activities, etc. (see instructions) . . . . .					12	11,591,433
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . . ▶ <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f)) . . . . .	<b>14</b>	96.55 %
<b>15</b> Public support percentage from 2019 Schedule A, Part II, line 14 . . . . .	<b>15</b>	95.41 %
<b>16a 33 1/3% support test—2020.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . ▶ <input checked="" type="checkbox"/>		
<b>b 33 1/3% support test—2019.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>		
<b>17a 10%-facts-and-circumstances test—2020.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>		
<b>b 10%-facts-and-circumstances test—2019.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>		
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . ▶ <input type="checkbox"/>		

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> 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 . . . .						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
<b>6 Total.</b> Add lines 1 through 5 . . . . .						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . . .						
<b>b</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 . . . . .						
<b>c</b> Add lines 7a and 7b . . . . .						
<b>8 Public support.</b> (Subtract line 7c from line 6.) . . . . .						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>9</b> Amounts from line 6 . . . . .						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . . .						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . . .						
<b>c</b> Add lines 10a and 10b . . . . .						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on . . . . .						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . .						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . . .						
<b>14 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . . <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f)) . . . . .	<b>15</b>	%
<b>16</b> Public support percentage from 2019 Schedule A, Part III, line 15 . . . . .	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2020</b> (line 10c, column (f), divided by line 13, column (f)) . . . . .	<b>17</b>	%
<b>18</b> Investment income percentage from <b>2019</b> Schedule A, Part III, line 17 . . . . .	<b>18</b>	%
<b>19a 33 1/3% support tests—2020.</b> If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . . . . . <input type="checkbox"/>		
<b>b 33 1/3% support tests—2019.</b> If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . . . . . <input type="checkbox"/>		
<b>20 Private foundation.</b> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . . . <input type="checkbox"/>		



**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
3b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
3c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
4b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
4c	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)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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 amendment to the organizing document).</i>		
5b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
5c	<b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
9b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
9c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
10b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?		
<b>11a</b>		
<b>b</b> A family member of a person described in line 11a above?		
<b>11b</b>		
<b>c</b> A 35% controlled entity of a person described in line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>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 officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
<b>1</b>		
<b>2</b> 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? <i>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.</i>		
<b>2</b>		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> 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)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
<b>1</b>		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?		
<b>1</b>		
<b>2</b> 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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
<b>2</b>		
<b>3</b> 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 assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
<b>2</b> Activities Test. Answer lines 2a and 2b below.		
<b>a</b> 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? <i>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.</i>		
<b>2a</b>		
<b>b</b> Did the activities described in 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? <i>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.</i>		
<b>2b</b>		
<b>3</b> Parent of Supported Organizations. Answer lines 3a and 3b below.		
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i>		
<b>3a</b>		
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
<b>3b</b>		

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

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

<b>Section A—Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b>	Net short-term capital gain	<b>1</b>	
<b>2</b>	Recoveries of prior-year distributions	<b>2</b>	
<b>3</b>	Other gross income (see instructions)	<b>3</b>	
<b>4</b>	Add lines 1 through 3.	<b>4</b>	
<b>5</b>	Depreciation and depletion	<b>5</b>	
<b>6</b>	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	<b>6</b>	
<b>7</b>	Other expenses (see instructions)	<b>7</b>	
<b>8</b>	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	<b>8</b>	
<b>Section B—Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b>	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
<b>a</b>	Average monthly value of securities	<b>1a</b>	
<b>b</b>	Average monthly cash balances	<b>1b</b>	
<b>c</b>	Fair market value of other non-exempt-use assets	<b>1c</b>	
<b>d</b>	<b>Total</b> (add lines 1a, 1b, and 1c)	<b>1d</b>	
<b>e</b>	<b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):		
<b>2</b>	Acquisition indebtedness applicable to non-exempt-use assets	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	
<b>4</b>	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	<b>4</b>	
<b>5</b>	Net value of non-exempt-use assets (subtract line 4 from line 3)	<b>5</b>	
<b>6</b>	Multiply line 5 by 0.035.	<b>6</b>	
<b>7</b>	Recoveries of prior-year distributions	<b>7</b>	
<b>8</b>	<b>Minimum Asset Amount</b> (add line 7 to line 6)	<b>8</b>	
<b>Section C—Distributable Amount</b>			Current Year
<b>1</b>	Adjusted net income for prior year (from Section A, line 8, column A)	<b>1</b>	
<b>2</b>	Enter 0.85 of line 1.	<b>2</b>	
<b>3</b>	Minimum asset amount for prior year (from Section B, line 8, column A)	<b>3</b>	
<b>4</b>	Enter greater of line 2 or line 3.	<b>4</b>	
<b>5</b>	Income tax imposed in prior year	<b>5</b>	
<b>6</b>	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	<b>6</b>	
<b>7</b>	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990 or 990-EZ) 2020

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

<b>Section D—Distributions</b>		<b>Current Year</b>
<b>1</b>	Amounts paid to supported organizations to accomplish exempt purposes	<b>1</b>
<b>2</b>	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	<b>2</b>
<b>3</b>	Administrative expenses paid to accomplish exempt purposes of supported organizations	<b>3</b>
<b>4</b>	Amounts paid to acquire exempt-use assets	<b>4</b>
<b>5</b>	Qualified set-aside amounts (prior IRS approval required—provide details in <b>Part VI</b> )	<b>5</b>
<b>6</b>	Other distributions (describe in <b>Part VI</b> ). See instructions.	<b>6</b>
<b>7</b>	<b>Total annual distributions.</b> Add lines 1 through 6.	<b>7</b>
<b>8</b>	Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.	<b>8</b>
<b>9</b>	Distributable amount for 2020 from Section C, line 6	<b>9</b>
<b>10</b>	Line 8 amount divided by line 9 amount	<b>10</b>

<b>Section E—Distribution Allocations</b> (see instructions)	<b>(i) Excess Distributions</b>	<b>(ii) Underdistributions Pre-2020</b>	<b>(iii) Distributable Amount for 2020</b>
<b>1</b> Distributable amount for 2020 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2020 (reasonable cause required—explain in <b>Part VI</b> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2020			
<b>a</b> From 2015 . . . . .			
<b>b</b> From 2016 . . . . .			
<b>c</b> From 2017 . . . . .			
<b>d</b> From 2018 . . . . .			
<b>e</b> From 2019 . . . . .			
<b>f</b> <b>Total</b> of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2020 distributable amount			
<b>i</b> Carryover from 2015 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
<b>4</b> Distributions for 2020 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2020 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from line 4.			
<b>5</b> Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
<b>6</b> Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
<b>7</b> <b>Excess distributions carryover to 2021.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2016 . . . . .			
<b>b</b> Excess from 2017 . . . . .			
<b>c</b> Excess from 2018 . . . . .			
<b>d</b> Excess from 2019 . . . . .			
<b>e</b> Excess from 2020 . . . . .			

**Part VI**

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

Return Reference - Identifier	Explanation						
SCHEDULE A, PART II, LINE 10 - OTHER INCOME	Description	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	OTHER INCOME	168,667	94,865	326,804	533,136	483,248	1,606,720
	LIST RENTALS	207,656	288,955	293,377	286,640	216,181	1,292,809
	OTHER FEES	128,500	189,000	193,000	297,036	242,597	1,050,133
	PENSION REFUND	0	0	1,296,000	0	0	1,296,000
	Total	504,823	572,820	2,109,181	1,116,812	942,026	5,245,662

**Schedule of Contributors**

**2020**

▶ **Attach to Form 990, Form 990-EZ, or Form 990-PF.**  
 ▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**

Name of the organization <b>THE HUMANE SOCIETY OF THE UNITED STATES</b>	Employer identification number <b>53-0225390</b>
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**Organization type** (check one):

**Filers of:**

**Section:**

- Form 990 or 990-EZ
  - 501(c)( 3 ) (enter number) organization
  - 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
  - 527 political organization
- Form 990-PF
  - 501(c)(3) exempt private foundation
  - 4947(a)(1) nonexempt charitable trust treated as a private foundation
  - 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year . . . . . ▶ \$ \_\_\_\_\_

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

Name of organization <b>THE HUMANE SOCIETY OF THE UNITED STATES</b>	Employer identification number <b>53-0225390</b>
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**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	----- ----- -----	\$ 4,691,314	<b>Person</b> <input checked="" type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$ -----	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <b>THE HUMANE SOCIETY OF THE UNITED STATES</b>	Employer identification number <b>53-0225390</b>
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**Part II** **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----



Name of organization <b>THE HUMANE SOCIETY OF THE UNITED STATES</b>	Employer identification number <b>53-0225390</b>
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**Part III** *Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor.* Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ \_\_\_\_\_  
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

**SCHEDULE C**  
**(Form 990 or 990-EZ)**

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2020**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**  
▶ **Go to [www.irs.gov/Form990](http://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.
- 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.

**If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then**

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization <b>THE HUMANE SOCIETY OF THE UNITED STATES</b>	Employer identification number <b>53-0225390</b>
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**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 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) . . . . . ▶ \$
- 3 Volunteer hours for political campaign activities (See instructions) . . . . .

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

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 . . . . . ▶ \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 . . . . . ▶ \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? . . . . .  Yes  No
- 4a Was a correction made? . . . . .  Yes  No
- b If "Yes," describe in Part IV.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities . . . . . ▶ \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities . . . . . ▶ \$
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b . . . . . ▶ \$
- 4 Did the filing organization file **Form 1120-POL** for this year? . . . . .  Yes  No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing 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.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

- A** Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check  if the filing organization checked box A and "limited control" provisions apply.

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b>	Total lobbying expenditures to influence public opinion (grassroots lobbying) . . . . .														
<b>b</b>	Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . .														
<b>c</b>	Total lobbying expenditures (add lines 1a and 1b) . . . . .														
<b>d</b>	Other exempt purpose expenditures . . . . .														
<b>e</b>	Total exempt purpose expenditures (add lines 1c and 1d) . . . . .														
<b>f</b>	Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
<b>g</b>	Grassroots nontaxable amount (enter 25% of line 1f) . . . . .														
<b>h</b>	Subtract line 1g from line 1a. If zero or less, enter -0- . . . . .														
<b>i</b>	Subtract line 1f from line 1c. If zero or less, enter -0- . . . . .														
<b>j</b>	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? . . . . .		<input type="checkbox"/> Yes <input type="checkbox"/> No												

**4-Year Averaging Period Under Section 501(h)**  
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

**Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
<b>1</b> 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:			
<b>a</b> Volunteers?	✓		
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	✓		
<b>c</b> Media advertisements?	✓		51,816
<b>d</b> Mailings to members, legislators, or the public?	✓		524,482
<b>e</b> Publications, or published or broadcast statements?	✓		237,454
<b>f</b> Grants to other organizations for lobbying purposes?	✓		1,067,837
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body?	✓		616,055
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	✓		18,185
<b>i</b> Other activities?	✓		495,027
<b>j</b> Total. Add lines 1c through 1i			3,010,856
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		✓	
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members?	1	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
<b>3</b> Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3	

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 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."**

<b>1</b> Dues, assessments and similar amounts from members	<b>1</b>	
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b> Current year	<b>2a</b>	
<b>b</b> Carryover from last year	<b>2b</b>	
<b>c</b> Total	<b>2c</b>	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	<b>3</b>	
<b>4</b> 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?	<b>4</b>	
<b>5</b> Taxable amount of lobbying and political expenditures (See instructions)	<b>5</b>	

**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.

SEE NEXT PAGE

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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 - Identifier	Explanation
SCHEDULE C, PART II-B, LINE 1A - VOLUNTEERS	THE HSUS UTILIZED UNPAID VOLUNTEERS TO CONTACT LEGISLATORS AND THEIR STAFF, AND PARTICIPATE IN RALLIES, DEMONSTRATIONS, SEMINARS, AND CONVENTIONS.
SCHEDULE C, PART II-B, LINE 1B - PAID STAFF OR MANAGEMENT	MANAGEMENT AND STAFF OF THE HSUS PLANNED, COORDINATED, AND IMPLEMENTED A PUBLIC POLICY PROGRAM. THIS PROGRAM INCLUDED MAINTAINING AND EXPANDING CONTACTS WITH MEMBERS OF CONGRESS, STATE LEGISLATORS, EXECUTIVE AND REGULATORY AGENCIES, ANIMAL WELFARE COALITIONS, AND OTHER NATIONAL AND LOCAL ORGANIZATIONS.
SCHEDULE C, PART II-B, LINE 1C - MEDIA ADVERTISEMENTS	THE HSUS PUBLISHED ADVERTISEMENTS THROUGH THE MEDIA IN AN EFFORT TO INFLUENCE LEGISLATION.
SCHEDULE C, PART II-B, LINE 1D - MAILINGS TO MEMBERS, LEGISLATORS, OR THE PUBLIC	THE HSUS SENT ELECTRONIC UPDATES ON ANIMAL WELFARE LEGISLATION AND BALLOT INITIATIVES TO MEMBERS AND OTHER INTERESTED PARTIES. IN ADDITION, THE HSUS ASSISTED INTERESTED PARTIES IN SENDING EMAILS TO LAWMAKERS THROUGH THE HSUS WEBSITE.
SCHEDULE C, PART II-B, LINE 1E - PUBLICATIONS, OR PUBLISHED OR BROADCAST STATEMENTS	IN FURTHERANCE OF ITS EFFORTS TO IMPROVE THE WELFARE OF ANIMALS, THE HSUS MADE STATEMENTS IN ITS ELECTRONIC AND PRINT PUBLICATIONS, AS WELL AS IN PUBLISHED OR BROADCAST STATEMENTS INTENDED TO INFLUENCE LEGISLATION.
SCHEDULE C, PART II-B, LINE 1F - GRANTS TO OTHER ORGANIZATIONS	THE HSUS MADE A GRANT TO A 501(C)(4) ORGANIZATION TO FURTHER ANIMAL WELFARE LEGISLATION.
SCHEDULE C, PART II-B, LINE 1G - DIRECT CONTACT WITH LEGISLATORS, THEIR STAFF, ETC.	IN FURTHERANCE OF ITS EFFORTS TO INFLUENCE LEGISLATION AND TO INFLUENCE PUBLIC OPINION ON LEGISLATIVE MATTERS, THE HSUS STAFF, UNPAID VOLUNTEERS, AND PAID CONSULTANTS HAD DIRECT CONTACT WITH LEGISLATORS AND THEIR STAFF, GOVERNMENT OFFICIALS, AND LEGISLATIVE BODIES.
SCHEDULE C, PART II-B, LINE 1H - RALLIES, DEMONSTRATIONS, SEMINARS, CONVENTIONS, ETC.	THE HSUS HELD LOBBY DAYS IN VARIOUS STATE CAPITALS FOR CITIZENS WHO ARE CONCERNED ABOUT ANIMAL WELFARE ISSUES, AND WHO WISH TO PARTICIPATE IN THE LEGISLATIVE PROCESS AND INFLUENCE PUBLIC POLICY.
SCHEDULE C, PART II-B, LINE 1I - OTHER ACTIVITIES	THE HSUS STAFF CONDUCTED RESEARCH AND HAD INTERNAL MEETINGS AND COMMUNICATIONS AS WELL AS EXTERNAL MEETINGS AND COMMUNICATIONS WITH OTHER ORGANIZATIONS TO DISCUSS PROPOSED LEGISLATION AND STRATEGY FOR INFLUENCING SUCH LEGISLATION.

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

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

2020

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization: THE HUMANE SOCIETY OF THE UNITED STATES; Employer identification number: 53-0225390

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4 for values, 5-6 for Yes/No questions.

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

Form with multiple rows for questions 1-9 regarding conservation easements, including a table for 'Held at the End of the Tax Year'.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Form with rows 1a-2 for questions regarding art and historical treasures collections.

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

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

- a**  Public exhibition
- b**  Scholarly research
- c**  Preservation for future generations
- d**  Loan or exchange program
- e**  Other \_\_\_\_\_

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

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

**Part IV Escrow and Custodial Arrangements.**

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

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

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

	Amount
<b>1c</b> Beginning balance	
<b>1d</b> Additions during the year	
<b>1e</b> Distributions during the year	
<b>1f</b> Ending balance	

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

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

**Part V Endowment Funds.**

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance	26,846,489	21,905,601	24,818,863	21,988,041	21,081,447
<b>b</b> Contributions	4,691,314	317,282	5,227	68,193	20,089
<b>c</b> Net investment earnings, gains, and losses	5,089,060	5,268,196	(1,829,260)	4,048,041	2,230,085
<b>d</b> Grants or scholarships					
<b>e</b> Other expenditures for facilities and programs	651,556	644,590	1,089,229	1,285,412	1,343,580
<b>f</b> Administrative expenses					
<b>g</b> End of year balance	35,975,307	26,846,489	21,905,601	24,818,863	21,988,041

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

- a** Board designated or quasi-endowment  1.00 %
- b** Permanent endowment  75.00 %
- c** Term endowment  24.00 %

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

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

	Yes	No
<b>(i)</b> Unrelated organizations	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>(ii)</b> Related organizations	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>b</b> If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	<input type="checkbox"/>	<input type="checkbox"/>

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

**Part VI Land, Buildings, and Equipment.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land		4,879,035		4,879,035
<b>b</b> Buildings		7,263,088	6,172,745	1,090,343
<b>c</b> Leasehold improvements		2,257,921	697,406	1,560,515
<b>d</b> Equipment		1,636,271	1,385,655	250,616
<b>e</b> Other		1,506,701	1,132,954	373,747
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				8,154,256

**Part VII Investments—Other Securities.**

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives . . . . .		
(2) Closely held equity interests . . . . .	189,291,383	END OF YEAR MARKET VALUE
(3) Other _____		
(A) _____		
(B) _____		
(C) _____		
(D) _____		
(E) _____		
(F) _____		
(G) _____		
(H) _____		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.) . ▶	189,291,383	

**Part VIII Investments—Program Related.**

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

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

**Part IX Other Assets.**

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

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

**Part X Other Liabilities.**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ACCRUED SEVERANCE OBLIGATION	539,871
(3) DEFERRED COMPENSATION LIABILITY	298,075
(4) ANNUITIES AND UNITRUSTS LIABILITY	11,735,894
(5) DUE TO AFFILIATES	740,342
(6) DEFERRED RENT	1,842,627
(7) LEASEHOLD ALLOWANCE	1,558,123
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) . . . . . ▶	16,714,932

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



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

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .		<b>1</b>	142,244,320
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>		
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>	17,631,052	
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.) . . . . .	<b>2d</b>	29,106	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .		<b>2e</b>	17,660,158
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .		<b>3</b>	124,584,162
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b>	100,644	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .		<b>4c</b>	100,644
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.) . . . . .		<b>5</b>	124,684,806

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

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

<b>1</b>	Total expenses and losses per audited financial statements . . . . .		<b>1</b>	153,330,525
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>	17,631,052	
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>		
<b>c</b>	Other losses . . . . .	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.) . . . . .	<b>2d</b>	618,677	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .		<b>2e</b>	18,249,729
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .		<b>3</b>	135,080,796
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	559,321	
<b>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b>	2,355	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .		<b>4c</b>	561,676
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.) . . . . .		<b>5</b>	135,642,472

**Part XIII Supplemental Information.**

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SEE STATEMENT

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**Part XIII**

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference - Identifier	Explanation	
SCHEDULE D, PART XI, LINE 2(D) - OTHER REVENUES IN AUDITED FINANCIAL STATEMENTS NOT IN FORM 990	<b>(a) Description</b>	<b>(b) Amount</b>
	ELIMINATION OF INTERPROGRAM GRANT	29,106
SCHEDULE D, PART XI, LINE 4(B) - OTHER REVENUE	<b>(a) Description</b>	<b>(b) Amount</b>
	EXPENSES FROM FUNDRAISING EVENTS	- 567,214
	REALIZED LOSS ON INVESTMENTS	- 893,321
	INTEREST AND DIVIDEND REVENUE	2,298,962
ANNUITY LIABILITY CHANGE IN VALUATION	- 737,783	
SCHEDULE D, PART XII, LINE 2(D) - OTHER EXPENSES IN AUDITED FINANCIAL STATEMENTS NOT IN FORM 990	<b>(a) Description</b>	<b>(b) Amount</b>
	EXPENSES FROM FUNDRAISING EVENTS	567,214
	ELIMINATION OF INTERPROGRAM GRANT	29,106
DONATED SERVICES EXPENSES ALLOCATION	22,357	
SCHEDULE D, PART XII, LINE 4(B) - OTHER EXPENSES	<b>(a) Description</b>	<b>(b) Amount</b>
	FOREIGN CURRENCY LOSS	2,355

Part XIII

**Supplemental Information.** Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference - Identifier	Explanation
SCHEDULE D, PART V, LINE 4 - INTENDED USES OF ENDOWMENT FUNDS	DEFRAY BUILDING OPERATING EXPENSES, AWARD SCHOLARSHIPS TO CONNECTICUT SECONDARY SCHOOL STUDENTS, AND SUPPORT FOR THE BEST INTERESTS OF THE ORGANIZATION AND OTHER HUMANE ORGANIZATIONS, INCLUDING THE NORMA TERRIS HUMANE EDUCATION AND NATURE CENTER. ADDITIONALLY, FUNDS SUPPORT THE STATE OF NEW HAMPSHIRE WILDLIFE; THE BETTERMENT OF SONG BIRDS; AND PUBLICIZING MISTREATMENT OF EXOTIC ANIMALS.
SCHEDULE D, PART X, LINE 2 - FIN 48 (ASC 740) FOOTNOTE	<p>THE FOLLOWING FOOTNOTE IS FROM THE AUDITED CONSOLIDATED FINANCIAL STATEMENTS OF THE HUMANE SOCIETY OF THE UNITED STATES AND AFFILIATES (THE SOCIETY):</p> <p>THE HSUS (THE HUMANE SOCIETY OF THE UNITED STATES), FFA (FUND FOR ANIMALS), HSI (HUMANE SOCIETY INTERNATIONAL), HSVMA (HUMANE SOCIETY VETERINARY MEDICAL ASSOCIATION), SFWC (SOUTH FLORIDA WILDLIFE CENTER), HSWLT (HUMANE SOCIETY WILDLIFE LAND TRUST), AND PC (PROJECT CHIMPS) QUALIFY UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (IRC) AND ARE CLASSIFIED AS ORGANIZATIONS THAT ARE NOT PRIVATE FOUNDATIONS. DDAL (DORIS DAY ANIMAL LEAGUE) QUALIFIES UNDER SECTION 501(C)(4) OF THE IRC. THEREFORE, THE SOCIETY IS GENERALLY NOT SUBJECT TO TAX UNDER PRESENT INCOME TAX LAWS; HOWEVER, ANY UNRELATED BUSINESS INCOME MAY BE SUBJECT TO FEDERAL AND STATE INCOME TAXES.</p> <p>TOTAL UNRELATED BUSINESS INCOME TAX FOR THE YEAR ENDED DECEMBER 31, 2020 WAS NOT SIGNIFICANT TO THE FINANCIAL STATEMENTS.</p> <p>IN ACCORDANCE WITH FASB ASC 740 INCOME TAXES, THE SOCIETY RECOGNIZES TAX LIABILITIES FOR UNCERTAIN TAX POSITIONS WHEN IT IS MORE LIKELY THAN NOT THAT A TAX POSITION WILL NOT BE SUSTAINED UPON EXAMINATION AND SETTLEMENT WITH VARIOUS TAXING AUTHORITIES. LIABILITIES FOR UNCERTAIN TAX POSITIONS ARE MEASURED BASED UPON THE LARGEST AMOUNT OF BENEFIT THAT IS GREATER THAN 50% LIKELY OF BEING REALIZED UPON SETTLEMENT. THE GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ALSO ADDRESSES DE-RECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES ON INCOME TAXES, AND ACCOUNTING IN INTERIM PERIODS. WITH A FEW EXCEPTIONS, THE SOCIETY IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY THE U.S. FEDERAL, STATE OR LOCAL TAX AUTHORITIES FOR YEARS ENDED DECEMBER 31, 2017 AND PRIOR. MANAGEMENT HAS EVALUATED THE SOCIETY'S TAX POSITIONS AND HAS CONCLUDED THAT THE SOCIETY HAS TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE CONSOLIDATED FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF THIS GUIDANCE.</p>

**SCHEDULE F  
(Form 990)**

**Statement of Activities Outside the United States**

OMB No. 1545-0047

**2020**

**Open to Public Inspection**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.**  
▶ **Attach to Form 990.**

▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

Department of the Treasury  
Internal Revenue Service

Name of the organization

THE HUMANE SOCIETY OF THE UNITED STATES

Employer identification number

53-0225390

**Part I General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

**1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  **Yes**  **No**

**2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

**3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) CENTRAL AMERICA AND THE CARIBBEAN	0	0	GRANTMAKING	N/A	8,879
(2) EAST ASIA AND THE PACIFIC	0	0	GRANTMAKING	N/A	23,691
(3) EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	GRANTMAKING	N/A	1,698
(4) MIDDLE EAST AND NORTH AFRICA	0	0	GRANTMAKING	N/A	1,936
(5) NORTH AMERICA (CANADA & MEXICO ONLY)	0	0	GRANTMAKING	N/A	206,255
(6) SOUTH AMERICA	0	0	GRANTMAKING	N/A	9,521
(7) SOUTH ASIA	0	0	GRANTMAKING	N/A	15,076
(8) SUB-SAHARAN AFRICA	0	0	GRANTMAKING	N/A	28,338
(9) CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS	N/A	61,764,649
(10) EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	INVESTMENTS	N/A	7,157,457
(11) CENTRAL AMERICA AND THE CARIBBEAN	0	1	PROGRAM SERVICES	CAMPAIGNS FOR COMPANION ANIMALS, WILD ANIMALS, AND RESOLUTION OF HUMAN-ANIMAL CONFLICT.	44,006
(12) EAST ASIA AND THE PACIFIC	0	2	PROGRAM SERVICES	CAMPAIGNS FOR COMPANION ANIMALS, WILD ANIMALS, AND RESOLUTION OF HUMAN-ANIMAL CONFLICT.	24,452
(13) EUROPE (INCLUDING ICELAND AND GREENLAND)	0	3	PROGRAM SERVICES	CAMPAIGNS FOR COMPANION ANIMALS, WILD ANIMALS, AND RESOLUTION OF HUMAN-ANIMAL CONFLICT.	124,217
(14) NORTH AMERICA (CANADA & MEXICO ONLY)	0	3	PROGRAM SERVICES	CAMPAIGNS FOR COMPANION ANIMALS, WILD ANIMALS, AND RESOLUTION OF HUMAN-ANIMAL CONFLICT.	11,334
(15) SOUTH AMERICA	0	0	PROGRAM SERVICES	CAMPAIGNS FOR COMPANION ANIMALS, WILD ANIMALS, AND RESOLUTION OF HUMAN-ANIMAL CONFLICT.	3,986
(16) SOUTH ASIA	0	0	PROGRAM SERVICES	CAMPAIGNS FOR COMPANION ANIMALS, WILD ANIMALS, AND RESOLUTION OF HUMAN-ANIMAL CONFLICT.	9,087
(17) SUB-SAHARAN AFRICA	0	1	PROGRAM SERVICES	CAMPAIGNS FOR COMPANION ANIMALS, WILD ANIMALS, AND RESOLUTION OF HUMAN-ANIMAL CONFLICT.	13,383
<b>3a Subtotal</b>	0	10			69,447,965
<b>b Total from continuation sheets to Part I</b>	0	0			0
<b>c Totals (add lines 3a and 3b)</b>	0	10			69,447,965

**Part II Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(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)			SOUTH ASIA	GENERAL SUPPORT	10,000	WIRE			
(2)			NORTH AMERICA (CANADA & MEXICO ONLY)	GENERAL SUPPORT	203,124	WIRE			
(3)			EAST ASIA AND THE PACIFIC	GENERAL SUPPORT	15,750	WIRE			
(4)			SOUTH ASIA	SUPPORT CARE AND RESOURCE CENTER FOR ANIMAL WELFARE	5,076	WIRE			
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . ▶ 4

3 Enter total number of other organizations or entities . . . ▶ 0

**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 recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

**Part IV Foreign Forms**

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* . . . . .  **Yes**  **No**
  
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* . . . . .  **Yes**  **No**
  
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* . . . . .  **Yes**  **No**
  
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* . . . . .  **Yes**  **No**
  
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* . . . . .  **Yes**  **No**
  
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* . . . . .  **Yes**  **No**

Part V

**Supplemental Information.** Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Return Reference - Identifier	Explanation
SCHEDULE F, PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANT FUNDS	THE HUMANE SOCIETY OF THE UNITED STATES ISSUES GRANTS TO ORGANIZATIONS THAT MEET ITS MISSION CRITERIA.  GRANT OVERSIGHT IS ACCOMPLISHED THROUGH A VARIETY OF METHODS SUCH AS GRANT REPORTS, MEETINGS WITH GRANTEES, AND SITE VISITS.
SCHEDULE F, PART I, LINE 3 - INVESTMENTS IN CENTRAL AMERICA AND THE CARIBBEAN	HSUS'S INVESTMENTS IN THE CARIBBEAN ARE LISTED AT THEIR BOOK VALUE AND INCLUDE THE AGGREGATE VALUE OF INVESTMENT TRANSACTIONS OF CURRENT AND PRIOR YEARS.
SCHEDULE F, PART I, LINE 3 - INVESTMENTS IN EUROPE	HSUS'S INVESTMENTS IN IRELAND/EUROPE ARE LISTED AT THEIR BOOK VALUE AND INCLUDE THE AGGREGATE VALUE OF INVESTMENT TRANSACTIONS OF CURRENT AND PRIOR YEARS.
SCHEDULE F, PART I, LINE 3 - METHOD USED TO ACCOUNT FOR EXPENDITURES ON ORG'S FINANCIAL STATEMENTS	CENTRAL AMERICA AND THE CARIBBEAN: ACCRUAL EAST ASIA AND THE PACIFIC: ACCRUAL EUROPE (INCLUDING ICELAND AND GREENLAND): ACCRUAL MIDDLE EAST AND NORTH AFRICA: ACCRUAL NORTH AMERICA (CANADA & MEXICO ONLY): ACCRUAL SOUTH AMERICA: ACCRUAL SOUTH ASIA: ACCRUAL SUB-SAHARAN AFRICA: ACCRUAL
SCHEDULE F, PART II, LINE 1 - METHOD USED TO ACCOUNT FOR EXPENDITURES ON ORG'S FINANCIAL STATEMENTS	EAST ASIA AND THE PACIFIC: ACCRUAL NORTH AMERICA (CANADA & MEXICO ONLY): ACCRUAL SOUTH ASIA: ACCRUAL



**SCHEDULE G  
(Form 990 or 990-EZ)**

**Supplemental Information Regarding Fundraising or Gaming Activities**

OMB No. 1545-0047

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

**2020**

Department of the Treasury  
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

**Open to Public Inspection**

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization

Employer identification number

THE HUMANE SOCIETY OF THE UNITED STATES

53-0225390

**Part I 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.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a**  Mail solicitations
  - b**  Internet and email solicitations
  - c**  Phone solicitations
  - d**  In-person solicitations
  - e**  Solicitation of non-government grants
  - f**  Solicitation of government grants
  - g**  Special fundraising events
- 2a** 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?  **Yes**  **No**
- b** 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.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
<b>1</b> CHAPMAN CUBINE AND HUSSEY, INC., 2000 15TH STREET NORTH, SUITE 550, ARLINGTON, VA 22201	FUNDRAISING CONSULTANTS		<input checked="" type="checkbox"/>	24,932,058	1,572,973	23,359,085
<b>2</b> CHARITABLE ADULT RIDES & SERVICES, 4669 MURPHY CANYON ROAD, SUITE 200, SAN DIEGO, CA 92123	AUTO RECOVERY SERVICES	<input checked="" type="checkbox"/>		2,152,239	673,451	1,478,788
<b>3</b> TARGET MARKET, INC., 1200 ABERNATHY ROAD, SUITE 1600, ATLANTA, GA 30328	FUNDRAISING CONSULTANTS		<input checked="" type="checkbox"/>	1,943,445	122,613	1,820,832
<b>4</b> GIVEBRIDGE, 525 WEST MONROE STREET, CHICAGO, IL 60661	FACE TO FACE APPEALS		<input checked="" type="checkbox"/>	5,934,380	4,444,273	1,490,107
<b>5</b> AUTOMOTIVE RECOVERY SERVICES, INC., 13085 HAMILTON CROSSING, SUITE 500, CARMEL, IN 46032	AUTO RECOVERY SERVICES	<input checked="" type="checkbox"/>		390,025	67,502	322,523
<b>6</b> TELEFUND INC., 186 LINCOLN STREET, SUITE 100, BOSTON, MA 02111	(SEE STATEMENT)		<input checked="" type="checkbox"/>	239,274	345,503	(106,229)
<b>7</b> GREEN PLANET SALES COMPANY, INC., 301 COMMERCE DRIVE, MOORESTOWN, NJ 08057	FACE TO FACE APPEALS		<input checked="" type="checkbox"/>	2,719,460	2,361,134	358,326
<b>8</b> SD&A TELESERVICES, INC., 5757 WEST CENTURY BLVD, SUITE 300, LOS ANGELES, CA 90045	(SEE STATEMENT)		<input checked="" type="checkbox"/>	125,362	205,096	(79,734)
<b>9</b> GRASSROOTS TEAM LLC, 318 WEST ADAMS STREET, SUITE 1909, CHICAGO, IL 60606	FACE TO FACE APPEALS		<input checked="" type="checkbox"/>	96,580	252,125	(155,545)
<b>10</b> PUBLIC INTEREST COMMUNICATIONS, INC., 7700 LEESBURG PIKE, FALLS CHURCH, VA 22043	(SEE STATEMENT)		<input checked="" type="checkbox"/>	40,933	175,691	(134,758)
<b>Total</b>				<b>38,573,756</b>	<b>10,220,361</b>	<b>28,353,395</b>

- 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.

AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

**Part II Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1 <u>TO THE RESCUE GALA</u> (event type)	(b) Event #2 <u>ROCK THE HOUSE</u> (event type)	(c) Other events <u>3</u> (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	<b>1</b> Gross receipts . . . . .	601,639	210,687	185,500	997,826
	<b>2</b> Less: Contributions . . . . .	465,389	210,687	149,000	825,076
	<b>3</b> Gross income (line 1 minus line 2) . . . . .	136,250	0	36,500	172,750
Direct Expenses	<b>4</b> Cash prizes . . . . .				0
	<b>5</b> Noncash prizes . . . . .	59,803	0	81	59,884
	<b>6</b> Rent/facility costs . . . . .	9,800	18,400	0	28,200
	<b>7</b> Food and beverages . . . . .				0
	<b>8</b> Entertainment . . . . .				0
	<b>9</b> Other direct expenses . . . . .	344,182	115,421	19,527	479,130
	<b>10</b> Direct expense summary. Add lines 4 through 9 in column (d) . . . . . ▶				567,214
<b>11</b> Net income summary. Subtract line 10 from line 3, column (d) . . . . . ▶				(394,464)	

**Part III Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	<b>1</b> Gross revenue . . . . .				
Direct Expenses	<b>2</b> Cash prizes . . . . .				
	<b>3</b> Noncash prizes . . . . .				
	<b>4</b> Rent/facility costs . . . . .				
	<b>5</b> Other direct expenses . . . . .				
	<b>6</b> Volunteer labor . . . . .	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	<b>7</b> Direct expense summary. Add lines 2 through 5 in column (d) . . . . . ▶				
	<b>8</b> Net gaming income summary. Subtract line 7 from line 1, column (d) . . . . . ▶				

**9** Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_

**a** Is the organization licensed to conduct gaming activities in each of these states? . . . . .  Yes  No

**b** If "No," explain: \_\_\_\_\_

\_\_\_\_\_

**10a** Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? . . . . .  Yes  No

**b** If "Yes," explain: \_\_\_\_\_

\_\_\_\_\_

**11** Does the organization conduct gaming activities with nonmembers?  Yes  No

**12** Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No

**13** Indicate the percentage of gaming activity conducted in:

<b>a</b> The organization's facility	<b>13a</b>	%
<b>b</b> An outside facility	<b>13b</b>	%

**14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ .....

Address ▶ .....

**15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No

**b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ ..... and the amount of gaming revenue retained by the third party ▶ \$ .....

**c** If "Yes," enter name and address of the third party:

Name ▶ .....

Address ▶ .....

**16** Gaming manager information:

Name ▶ .....

Gaming manager compensation ▶ \$ .....

Description of services provided ▶ .....

Director/officer       Employee       Independent contractor

**17** Mandatory distributions:

**a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No

**b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ .....

**Part IV** **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

[SEE NEXT PAGE](#)

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Part IV

**Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

Return Reference - Identifier	Explanation
<p>SCHEDULE G, PART I - GENERAL EXPLANATION:</p>	<p>THE HUMANE SOCIETY OF THE UNITED STATES (HSUS) AND ITS AFFILIATED ENTITIES RELY ON A SUBSTANTIAL AND LONGSTANDING PROGRAM OF DIRECT MAIL FUNDRAISING TO SUPPORT THE FULL RANGE OF ACTIVITIES THEY UNDERTAKE ON BEHALF OF ANIMALS, WHETHER IT INVOLVES HANDS-ON CARE, POLICY WORK, SCIENTIFIC OR TECHNICAL ANALYSIS, HUMANE EDUCATION, LITIGATION, PUBLICATION, OR COMMUNICATION. DIRECT MAIL HAS PLAYED A FUNDAMENTAL ROLE IN THE DEVELOPMENT OF THE HSUS AND ITS AFFILIATES, AND IT REMAINS CRUCIAL TO THE ORGANIZATIONS' SUCCESS IN HELPING ANIMALS. AS AN EDUCATIONAL TOOL THAT DESCRIBES THE ORGANIZATIONS' NUMEROUS PROGRAMS AND CAMPAIGNS TO HELP ANIMALS, DIRECT MAIL FUNDRAISING HELPS TO CREATE GREATER AWARENESS OF THE ORGANIZATIONS' CAMPAIGNS AND CONCERNS, AND HAS ALLOWED US TO BUILD A CONSTITUENCY OF SUPPORTERS UNMATCHED IN THE HUMANE FIELD, WITH TREMENDOUS SOCIAL, POLITICAL, AND PRACTICAL BENEFITS TO THE ORGANIZATIONS' WORK.</p> <p>TO COMPLEMENT DIRECT MAIL, THE HSUS RELIES ON LARGER INDIVIDUAL GIFTS SOLICITED BY REGIONAL FUNDRAISERS, PLANNED GIVING, FACE TO FACE GIVING, AUTO DONATIONS, FOUNDATION GRANTS, TELEPHONE SOLICITATION, WORKPLACE GIVING, ONLINE SOLICITATION AND BEQUESTS. TOGETHER, THESE METHODS FORM THE BASIS OF A COMPREHENSIVE APPROACH TO SECURING THE FUNDS AND THE CONSTITUENCY NECESSARY TO MEET OUR URGENT AND LONG TERM ANIMAL WELFARE GOALS.</p>
<p>SCHEDULE G, PART I, LINE 2B(II) - LINE 2B COLUMN (II) ACTIVITY 10</p>	<p>TELEPHONE FR TO OBTAIN MULTI YR REVENUE</p>
<p>SCHEDULE G, PART I, LINE 2B(II) - LINE 2B COLUMN (II) ACTIVITY 6</p>	<p>TELEPHONE FR TO OBTAIN MULTI YR REVENUE</p>
<p>SCHEDULE G, PART I, LINE 2B(II) - LINE 2B COLUMN (II) ACTIVITY 8</p>	<p>TELEPHONE FR TO OBTAIN MULTI YR REVENUE</p>
<p>SCHEDULE G, PART I, LINE 2B(V) - PAYMENT OF FUNDRAISING EXPENSES</p>	<p>THE AGREEMENTS THE HSUS ENTERED INTO WITH CHAPMAN CUBINE AND HUSSEY, INC., DONOR SERVICES GROUP, LLC, TARGET MARKETTEAM, INC., AND TELEFUND INC. ALLOWED FOR THE PAYMENT OF FUNDRAISING EXPENSES (SUCH AS PRINTING, PAPER, POSTAGE, ENVELOPES AND MAILING LIST RENTALS) IN ADDITION TO THE PAYMENT OF FEES FOR PROFESSIONAL FUNDRAISING SERVICES. THESE VENDORS PROVIDE DETAILS WHICH ALLOW THE HSUS TO IDENTIFY WHICH COSTS ARE FOR PROFESSIONAL FUNDRAISING AND WHICH COSTS ARE RELATED TO GENERAL FUNDRAISING EXPENSES. THE HSUS PAID OUT \$221,399, \$116,068, \$872,055, AND \$6,286 TO CHAPMAN CUBINE AND HUSSEY, INC., DONOR SERVICES GROUP, LLC, TARGET MARKETTEAM, INC., AND TELEFUND INC., RESPECTIVELY, FOR FUNDRAISING EXPENSES.</p> <p>IN ADDITION TO THE ORGANIZATIONS WHICH APPEAR ON SCHEDULE G, PART I, THE HSUS DID ENTER INTO ARRANGEMENTS WITH EIGHTEEN FUNDRAISING VENDORS WHERE THE ORGANIZATION MADE PAYMENTS EXCLUSIVELY FOR FUNDRAISING EXPENSES BUT NOT FOR PROFESSIONAL FUNDRAISING SERVICES. THESE VENDORS HANDLE TASKS SUCH AS THE COMPILATION OF MAILING LISTS, PRINTING, DATA PROCESSING SERVICES, AND MAILING OF DIRECT MAIL PIECES, BUT THEY DO NOT ASSIST WITH THE CREATION OR PREPARATION OF THE DIRECT MAIL LETTERS, NOR ARE THEY INVOLVED IN ANY OTHER PROFESSIONAL FUNDRAISING ACTIVITY.</p>
<p>SCHEDULE G, PART I, LINE 2B(VI) - GENERAL EXPLANATION:</p>	<p>HSUS HAS RETAINED GRASSROOTS TEAM LLC TO MANAGE FACE TO FACE APPEALS AND CONTACTS FOR THE CHARITY.</p> <p>THIS FACE TO FACE PROGRAM IS EXPECTED TO ALLOW HSUS TO GROW ITS DONOR BASE EACH YEAR AND TO PROVIDE HSUS WITH AN INCREASED CASH FLOW OVER TIME.</p> <p>IT SHOULD ALSO BE POINTED OUT THAT DONATIONS FROM SUPPORTERS CONTACTED IN PRIOR YEARS VIA THE FACE TO FACE PROGRAM ARE NOT INCLUDED IN THE GROSS RECEIPTS TOTALS FOR THIS VENDOR ON THE CURRENT YEAR RETURN.</p> <p>FOR THIS REASON HSUS EXPECTS THE AMOUNT PAID TO THIS VENDOR TO EXCEED GROSS RECEIPTS FROM THESE FACE TO FACE CAMPAIGNS ON THE CURRENT YEAR 990, SCHEDULE G, PART I.</p>

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

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

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2020**

**Open to Public  
Inspection**

Name of the organization

THE HUMANE SOCIETY OF THE UNITED STATES

Employer identification number

53-0225390

**Part I General Information on Grants and Assistance**

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  **Yes**  **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) 3 GIRLS ANIMAL RESCUE INC P.O. BOX 1001, SHADY POINT, OK 74956	46-1830371	501 (C)(3)	70,000				(SEE STATEMENT)
(2) A HOPE INC P.O. BOX 4629, MILTON, FL 32572	82-2587109	501 (C)(3)	5,750				(SEE STATEMENT)
(3) ADOPT AN ANGEL P.O. BOX 15095, WILMINGTON, NC 28408	20-0576752	501 (C)(3)	21,555				(SEE STATEMENT)
(4) ALABAMA ANIMAL ALLIANCE 5316 ATLANTA HIGHWAY, MONTGOMERY, AL 36109	20-8251059	501 (C)(3)	9,295				(SEE STATEMENT)
(5) ALL ABOUT ANIMALS RESCUE 23451 PINWOOD STREET, WARREN, MI 48091	20-3006686	501 (C)(3)	10,000				(SEE STATEMENT)
(6) (SEE STATEMENT)	41-2185841	501 (C)(3)	25,000				OPERATIONAL SUPPORT
(7) ALOHA ILIO RESCUE P.O. BOX 492364, KEAAU, HI 96749	46-5495854	501 (C)(3)	11,840				(SEE STATEMENT)
(8) ALTUS ANIMAL WELFARE ASSOCIATION 2204 ENTERPRISE DRIVE, ALTUS, OK 73521	81-1137820	501 (C)(3)	146,665				(SEE STATEMENT)
(9) ANDERSON COUNTY, S.C. P.O. BOX 8002, ANDERSON, SC 29622-8002	57-6000303	GOVERNMENT	10,210				(SEE STATEMENT)
(10) ANIMAL ADOPTION CENTER INC P.O. BOX 8532, JACKSON, WY 83002	20-0629074	501 (C)(3)	8,240				(SEE STATEMENT)
(11) (SEE STATEMENT)	68-0630714	501 (C)(3)	111,975				(SEE STATEMENT)
(12) (SEE STATEMENT)							

**2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 258

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

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

Cat. No. 50055P

Schedule I (Form 990) 2020

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1					
2					
3					
4					
5					
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7					

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

(SEE STATEMENT)

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## Part II

## Grants and Other Assistance to Governments and Organizations in the United States (continued)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(12) ANIMAL CARE AND CONTROL OF NYC 11 PARK PLACE, NEW YORK, NY 10007	13-3788986	501 (C)(3)	10,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(13) ANIMAL CARE TRUST 4500 NORTH ACCESS ROAD, CHATTANOOGA, TN 37415	01-0824858	501 (C)(3)	16,499				PROVIDE PET FOOD, SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC AS WELL AS FUNDING FOR RESCUED ANIMALS
(14) ANIMAL FRIENDS INC 562 CAMP HOME ROAD, PITTSBURGH, PA 15237	25-0951565	501 (C)(3)	13,890				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(15) ANIMAL HAVEN INC 200 CENTRE STREET, NEW YORK, NY 10013	11-6101487	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(16) ANIMAL HUMANE SOCIETY 845 MEADOW LANE NORTH, GOLDEN VALLEY, MN 55422	41-0693842	501 (C)(3)	5,920				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(17) ANIMAL PROTECTION OF NEW MEXICO, INC P.O BOX 11395, ALBUQUERQUE, NM 87192	85-0283292	501 (C)(3)	11,500				FOOD AND SUPPLIES FOR EQUINES IN ARIZONA, VETERINARY CARE FOR CHIMPANZEES
(18) ANIMAL PROTECTIVE ASSOCIATION OF MO 1705 SOUTH HANLEY ROAD, ST. LOUIS, MO 63144	43-0699783	501 (C)(3)	12,629				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC AS WELL AS CARE FOR RESCUED ANIMALS
(19) ANIMAL RESCUE COALITION 6320 TOWER LANE, SARASOTA, FL 34240	65-0950292	501 (C)(3)	7,125				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(20) ANIMAL RESCUE GROUP OF NORTHERN NEVADA P.O BOX 1, FERNLEY, NV 89408	27-3980418	501 (C)(3)	7,500				FUNDS FOR SPAY AND NEUTER CAMPAIGN AS WELL AS ANIMAL CARE SUPPLIES AND VETERINARY CARE FOR ANIMALS IMPACTED BY COVID CRISIS
(21) ANIMAL RESCUE LEAGUE OF IOWA INC 5452 NE 22ND STREET, DES MOINES, IA 50313	42-0680427	501 (C)(3)	10,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(22) ANIMAL SERVICES CENTER OF THE MESILLA VALLEY 3551 BATAAN MEMORIAL WEST, LAS CRUCES, NM 88012	26-4297265	501 (C)(3)	6,750				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN

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(23) ANIMAL SHELTER OF WOOD RIVER VALLEY INC. 101 CROY CREEK ROAD, HAILEY, ID 83333	82-0351171	501 (C)(3)	110,000				COMMUNITY OUTREACH TRAINING, SPAY AND NEUTER SERVICES AS WELL AS SUPPLIES AND VETERINARY CARE FOR ANIMALS IMPACTED BY COVID CRISIS
(24) ANIMAL WELFARE LEAGUE OF ALEXANDRIA 4101 EISENHOWER AVENUE, ALEXANDRIA, VA 22304	54-0796610	501 (C)(3)	10,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(25) ANIMAL WELFARE LEAGUE OF ARLINGTON 2650 SOUTH ARLINGTON MILL DRIVE, ARLINGTON, VA 22206	54-0603502	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(26) ANIMAL WELFARE SOCIETY 46 HOLLAND ROAD, KENNEBUNK, ME 04043	23-7018176	501 (C)(3)	11,145				FUNDS FOR SPAY AND NEUTER CAMPAIGN AS WELL AS ANIMAL CARE SUPPLIES AND VETERINARY CARE FOR ANIMALS IMPACTED BY COVID CRISIS
(27) ASSISI ANIMAL CLINICS OF VIRGINIA, INC 415 CAMPBELL AVENUE SW, ROANOKE, VA 24016	54-2021941	501 (C)(3)	10,850				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN AS WELL AS ANIMAL ADOPTION CAMPAIGN FOR VETERANS
(28) ASSOCIATED HUMANE SOCIETIES INC 124 EVERGREEN AVENUE, NEWARK, NJ 07114	22-1487122	501 (C)(3)	15,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(29) ATLANTA HUMANE SOCIETY AND SPCA 981 HOWELL MILL ROAD NW, ATLANTA, GA 30318	58-0685900	501 (C)(3)	10,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(30) AUBURN VALLEY HUMANE SOCIETY 4910 A STREET SE, AUBURN, WA 98092	45-0638467	501 (C)(3)	45,000				FUND NO COST SERVICES TO PET OWNERS INCLUDING SPAY AND NEUTER SURGERIES, PET CARE SUPPLIES AND RESOURCES
(31) AUTONOMOUS MUNICIPAL GOVERNMENT OF CAROLINA P.O. BOX 8, CAROLINA, PR 00986-0008	66-0433539	GOVERNMENT	6,250				SUPPORT FEE-WAIVED ADOPTIONS OF SHELTER ANIMALS FROM THE CAROLINA ANIMAL CONTROL CENTER
(32) BAKERSFIELD SPCA 3000 GIBSON STREET, BAKERSFIELD, CA 93308	95-2141790	501 (C)(3)	15,755				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN AS WELL AS ANIMAL ADOPTION CAMPAIGN FOR VETERANS



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(33) BALTIMORE ANIMAL RESCUE & CARE SHELTER, INC 301 STOCKHOLM STREET, BALTIMORE, MD 21230	86-1130456	501 (C)(3)	7,500				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC AND CARE FOR RESCUED ANIMALS
(34) BELMONT COUNTY RESCUE LEAGUE INC 41981 NATIONAL ROAD, BELMONT, OH 43718	51-0138069	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(35) BERGEN SPAY AND NEUTER ALLIANCE 448 COOK STREET, DENVER, CO 80206	83-4677809	501 (C)(3)	10,470				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(36) BETHEL FRIENDS OF CANINES P.O. BOX 2287, BETHEL, AK 99559	46-2344486	501 (C)(3)	125,000				FUNDS FOR COMMUNITY OUTREACH TRAINING, FREE WELLNESS AND SPAY/NEUTER SERVICES
(37) BIG CAT RESCUE CORP. 12802 EASY STREET, TAMPA, FL 33625	59-3330495	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(38) BIG SKY RANCH 15442 JACK FORK ROAD, FOLSOM, LA 70437	47-4528787	501 (C)(3)	9,990				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(39) BLUETALES 4212 AMES BOULEVARD, MARRERO, LA 70072	47-4352861	501 (C)(3)	7,200				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(40) BRISTOL HUMANE SOCIETY 16222 LEE HIGHWAY, BRISTOL, VA 24202	54-0927975	501 (C)(3)	21,300				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(41) BROOME COUNTY HUMANE SOCIETY AND RELIEF ASSOCIATION 167 CONKLIN AVENUE, BINGHAMTON, NY 13903	15-0622327	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(42) BROTHER WOLF ANIMAL RESCUE INC P.O. BOX 8195, ASHEVILLE, NC 28814	20-8787719	501 (C)(3)	11,565				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(43) CAPE CORAL ANIMAL SHELTER CORPORATION 325 SW 2ND AVENUE, CAPE CORAL, FL 33991	81-3632884	501 (C)(3)	6,500				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(44) CAROLINA TIGER RESCUE 1040 HANKS CHAPEL ROAD, PITTSBORO, NC 27312	56-1522499	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(45) CAT HAVEN INC 11130 NORTH HARRELLS FERRY ROAD, BATON ROUGE, LA 70816	72-1454718	501 (C)(3)	13,500				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN

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(46) CEDAR VALLEY HUMANE SOCIETY 7411 MOUNT VERNON ROAD SE, CEDAR RAPIDS, IA 52403	42-0814023	501 (C)(3)	13,500				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(47) CEDARHILL ANIMAL SANCTUARY INC 144 SANCTUARY LOOP, CALEDONIA, MS 39740	64-0794082	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(48) CHARLESTON ANIMAL SOCIETY 2455 REMOUNT ROAD, NORTH CHARLESTON, SC 29406	57-6021863	501 (C)(3)	31,479				CARE FOR ANIMALS RESCUED AFTER HURRICANE DELTA
(49) CHARM CITY COMPANIONS 2601 GREENMOUNT AVENUE, BALTIMORE, MD 21218	46-5600469	501 (C)(3)	10,500				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(50) CHEYENNE RIVER SIOUX TRIBE P.O. BOX 590, EAGLE BUTTE, SD 57625	46-0217757	TRIBAL GOVERNMENT	9,300				FUNDS FOR SPAY AND NEUTER CAMPAIGN AS WELL AS ANIMAL CARE SUPPLIES AND VETERINARY CARE FOR ANIMALS IMPACTED BY COVID CRISIS
(51) CHIMPANZEE SANCTUARY NORTHWEST P.O. BOX 952, CLE ELUM, WA 98922	68-0552915	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(52) CITRUS COUNTY FLORIDA 110 NORTH APOPKA AVENUE, INVERNESS, FL 34450	59-6000548	GOVERNMENT	6,500				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(53) CITY AND COUNTY OF DENVER 201 WEST COLFAX AVENUE, DENVER, CO 80228	84-6000580	GOVERNMENT	20,000				FUNDS FOR COMMUNITY OUTREACH TRAINING, FREE WELLNESS AND SPAY/NEUTER SERVICES
(54) CITY OF BRENHAM 200 WEST VULCAN STREET, BRENHAM, TX 77833	74-6000404	GOVERNMENT	6,390				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(55) CITY OF DALLAS 1500 MARILLA STREET, DALLAS, TX 75201	75-6000508	GOVERNMENT	10,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(56) CITY OF FLORENCE P.O. BOX 98, FLORENCE, AL 35631	63-6001261	GOVERNMENT	6,410				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(57) CITY OF INDEPENDENCE MISSOURI 111 EAST MAPLE AVENUE, INDEPENDENCE, MO 64050	44-6000190	GOVERNMENT	10,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC

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(58) CITY OF MEMPHIS TENNESSEE - ANIMAL SERVICES 2350 APPLING CITY COVE, MEMPHIS, TN 38133	62-6000361	GOVERNMENT	10,000				SUPPORT FOR PET OWNERS WHO HAVE BEEN EVICTED AND NEED HELP TO KEEP THEIR PETS
(59) CITY OF SAN ANTONIO TEXAS P.O. BOX 839966, SAN ANTONIO, TX 78283-3966	74-6002070	GOVERNMENT	5,300				VETERINARY CARE FOR RESCUED DOGS AND CATS
(60) CLARKSDALE ANIMAL RESCUE EFFORT AND SHELTER P.O. BOX 142, CLARKSDALE, MS 38614	45-3765360	501 (C)(3)	5,200				FOOD, SUPPLIES AND VETERINARY CARE FOR ANIMALS IMPACTED BY HURRICANE SALLY, SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(61) COLUMBUS HUMANE 3015 SCIOTO DARBY EXECUTIVE COURT, HILLIARD, OH 43026	31-4379492	501 (C)(3)	10,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(62) COMMUNITY CAT COALITION OF CLARK COUNTY 4516 WEST SAN MIGUEL AVENUE, NORTH LAS VEGAS, NV 89032	27-1273887	501 (C)(3)	21,150				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(63) COMPANION ANIMAL ALLIANCE 2550 GOURRIER AVENUE, BATON ROUGE, LA 70820	27-1204719	501 (C)(3)	44,000				SPAY AND NEUTER CAMPAIGN, CARE FOR ANIMALS IMPACTED BY HURRICANE SALLY, FUNDING FOR ANIMALS IMPACTED BY COVID CRISIS
(64) COMPANION ANIMAL RESCUE OF ASCENSION INC 9894 AIRLINE HIGHWAY, SORRENTO, LA 70778	90-0877497	501 (C)(3)	8,100				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(65) COMPASSION WITHOUT BORDERS 1130 BUTLER AVENUE, SANTA ROSA, CA 95407	20-4698227	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(66) CORNELL UNIVERSITY 341 PINE TREE ROAD, ITHACA, NY 14850	15-0532082	501 (C)(3)	35,000				FUNDING FOR SPAY AND NEUTER CLINIC IN PUERTO RICO
(67) DANE COUNTY HUMANE SOCIETY 5132 VOGES ROAD, MADISON, WI 53718	39-0806335	501 (C)(3)	90,000				FUNDS FOR COMMUNITY OUTREACH TRAINING, FREE WELLNESS AND SPAY/NEUTER SERVICES
(68) DAYS END FARM HORSE RESCUE INC 1372 WOODBINE ROAD, WOODBINE, MD 21797	52-1759077	501 (C)(3)	10,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(69) DEFENDERS OF WILDLIFE 1130 17TH STREET NW, WASHINGTON, DC 20036	53-0183181	501 (C)(3)	5,000				GRANT FOR STARTUP FUNDS FOR EXTERNAL PRAIRIE DOG COALITION, COORDINATOR.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(70) ELKO FELINE FIX PROJECT INC 928 SPRING VALLEY PARKWAY, SPRING CREEK, NV 89815	83-3112551	501 (C)(3)	20,250				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(71) EMANCIPET INC 7010 EASY WIND DRIVE, AUSTIN, TX 78752	74-2913624	501 (C)(3)	58,500				SPAY AND NEUTER CAMPAIGN AS WELL AS PET FOOD, ANIMAL CARE SUPPLIES FOR PETS/COMMUNITY ANIMALS DURING COVID-19 PANDEMIC
(72) EVERY PAW ANIMAL RESCUE (EPAR) P.O. BOX 1119, VILLE PLATTE, LA 70586	47-4100874	501 (C)(3)	6,075				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(73) EXOTIC AVIAN SANCTUARY OF TENNESSEE, INC 981 OLD LEBANON DIRT ROAD, HERMITAGE, TN 37076	46-1756583	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(74) FACE LOW COST ANIMAL CLINIC 1500 MASSACHUSETTS AVENUE, INDIANAPOLIS, IN 46201	35-1917847	501 (C)(3)	10,620				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(75) FEEDING PETS OF THE HOMELESS 400 WEST KING STREET, CARSON CITY, NV 89703	26-3010540	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(76) FERAL CAT FRIENDS, INC 528 NORTH WALNUT STREET, BLOOMINGTON, IN 47404	55-0893153	501 (C)(3)	5,000				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(77) FERALCARE INC 25 CHARLES STREET, STRATFORD, CT 06615	38-3746984	501 (C)(3)	10,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(78) FERNDALE CAT SHELTER 821 LIVERNOIS STREET, FERNDALE, MI 48220	47-0979290	501 (C)(3)	5,000				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(79) FIDO INC P.O. BOX 30069, INDIANAPOLIS, IN 46230	20-8089877	501 (C)(3)	7,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(80) FLEET OF ANGELS 3226 SOUTH NEWCOMBE STREET, LAKEWOOD, CO 80227	46-3895690	501 (C)(3)	55,000				FUNDS FOR HAY, FEED AND OTHER SUPPLIES TO HORSE OWNERS AND RESCUES DURING COVID-19 PANDEMIC
(81) FORGOTTEN CATS INC 4023 KENNETT PIKE, GREENVILLE, DE 19807	20-0691180	501 (C)(3)	6,350				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(82) FOSTER PARROTS LTD 35 VERNON STREET, ROCKLAND, MA 02370	04-3458267	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC

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(83) FRANKLIN COUNTY HUMANE SOCIETY 1041 KENTUCKY AVENUE, FRANKFORT, KY 40601	61-0498423	501 (C)(3)	7,780				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(84) FRESNO H.O.P.E. ANIMAL FOUNDATION 5490 WEST SPRUCE AVENUE, FRESNO, CA 93722	77-0508414	501 (C)(3)	19,980				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(85) FRIENDS OF CHICAGO ANIMAL CARE AND CONTROL P.O. BOX 4414, CHICAGO, IL 60680	36-4427796	501 (C)(3)	15,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(86) FRIENDS OF CULEBRA ANIMALS INC P.O. BOX 527, CULEBRA, PR 00775	66-0760257	501 (C)(3)	5,000				SPAY AND NEUTER CAMPAIGN IN PUERTO RICO
(87) FRIENDS OF PRAIRIE GROVE POUND, INC 314 EAST PARKS STREET, PRAIRIE GROVE, AR 72753	46-5518421	501 (C)(3)	16,125				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(88) FRIENDS OF VERONA STREET ANIMAL SHELTER INC P.O. BOX 22874, ROCHESTER, NY 14692	74-3141579	501 (C)(3)	10,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(89) THE FUND FOR ANIMALS, INC 1255 23RD STREET, NW, SUITE 460, WASHINGTON, DC 20037	13-6218740	501 (C)(3)	1,172,175				FUNDING FOR RAMONA, CA WILDLIFE CENTER AS WELL AS GENERAL SUPPORT
(90) GABRIEL FOUNDATION 39520 COUNTY ROAD 13, ELIZABETH, CO 80107	84-1396085	501 (C)(3)	10,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(91) GINNY MILLNER FOUNDATION, INC 3640 TUXEDO ROAD NW, ATLANTA, GA 30305	58-2121970	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(92) GODSPEED HORSE HOSTEL INC P.O. BOX 146, AMENIA, NY 12501	20-1943299	501 (C)(3)	5,000				FUNDING FOR CARE OF RESCUED ANIMALS
(93) GREAT PLAINS SPCA 5428 ANTIOCH DRIVE, MERRIAM, KS 66202	05-0552529	501 (C)(3)	10,325				FUNDS FOR SPAY AND NEUTER CAMPAIGN AS WELL AS ANIMAL CARE SUPPLIES AND VETERINARY CARE FOR ANIMALS IMPACTED BY COVID CRISIS
(94) GREATER ANDROSCOGGIN HUMANE SOCIETY 55 STRAWBERRY AVENUE, LEWISTON, ME 04240	01-6011843	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(95) H.O.P.E. FOR ANIMALS INC 1333 MAYCREST DRIVE, FORT WAYNE, IN 46805	26-2466638	501 (C)(3)	10,660				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN

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(96) HARBOR HUMANE SOCIETY 14345 BAGLEY STREET, WEST OLIVE, MI 49460	38-1623660	501 (C)(3)	12,250				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(97) HAWAIIAN HUMANE SOCIETY 2700 WAIALAE AVENUE, HONOLULU, HI 96826	99-0073490	501 (C)(3)	5,000				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(98) HEARTS ALIVE VILLAGE 4132 SOUTH RAINBOW BOULEVARD, SUITE 113, LAS VEGAS, NV 89103	46-3622732	501 (C)(3)	19,000				FUNDS FOR SPAY AND NEUTER CAMPAIGN AS WELL AS ANIMAL CARE SUPPLIES AND VETERINARY CARE FOR ANIMALS IMPACTED BY COVID CRISIS
(99) HEAVEN CAN WAIT ANIMAL SOCIETY P.O. BOX 30158, LAS VEGAS, NV 89173	88-0450947	501 (C)(3)	33,930				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(100) HELEN WOODWARD ANIMAL CENTER P.O. BOX 64, RANCHO SANTA FE, CA 92067	23-7228287	501 (C)(3)	9,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(101) HELPING PAWS ACROSS BORDERS 16 CHAMISA ROAD, PLACITAS, NM 87043	46-4129178	501 (C)(3)	43,000				FUNDING FOR SPAY AND NEUTER SURGERIES IN PUERTO RICO
(102) HOMEWARD BOUND CAT ADOPTIONS 2675 EAST FLAMINGO, LAS VEGAS, NV 89121	26-0569097	501 (C)(3)	6,390				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(103) HOPE EQUINE RESCUE, INC 3805 HIGH STREET, WINTER HAVEN, FL 33881	26-2647977	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(104) HORSE RESCUE RELIEF AND RETIREMENT FUND INC 1768 NEWT GREEN ROAD, CUMMING, GA 30028	58-2479748	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(105) HOUSTON SPCA 7007 OLD KATY ROAD, HOUSTON, TX 77024	74-1287171	501 (C)(3)	10,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(106) HUDSON VALLEY HUMANE SOCIETY 200 QUAKER ROAD, POMONA, NY 10970	13-1740025	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(107) HUI PONO HOLOHOLONA P.O. BOX 943, MT. VIEW, HI 96771	20-8567302	501 (C)(3)	9,800				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(108) HUMANE ANIMAL RESCUE 1101 WESTERN AVENUE, PITTSBURGH, PA 15233	25-0325750	501 (C)(3)	10,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC

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(109) HUMANE RESCUE ALLIANCE 71 OGLETHORPE STREET NW, WASHINGTON, DC 20011	53-0219724	501 (C)(3)	16,145				FUNDS FOR SPAY AND NEUTER CAMPAIGN AS WELL AS ANIMAL CARE SUPPLIES AND VETERINARY CARE FOR ANIMALS IMPACTED BY COVID CRISIS
(110) HUMANE SOCIETY FOR TACOMA AND PIERCE COUNTY 2608 CENTER STREET, TACOMA, WA 98409	91-0577128	501 (C)(3)	45,000				COMMUNITY OUTREACH TRAINING, SPAY AND NEUTER SERVICES AS WELL AS SUPPLIES AND VETERINARY CARE FOR ANIMALS IMPACTED BY COVID CRISIS
(111) HUMANE SOCIETY INTERNATIONAL 1255 23RD STREET, NW SUITE 450, WASHINGTON, DC 20037	52-1769464	501 (C)(3)	1,851,627				GENERAL SUPPORT AND FUNDING FOR LIBERIA CHIMPS
(112) HUMANE SOCIETY LEGISLATIVE FUND 1255 23RD STREET, NW SUITE 455, WASHINGTON, DC 20037	59-3786428	501 (C)(4)	1,387,718				FUNDS TO COVER FEDERAL AFFAIRS COSTS
(113) HUMANE SOCIETY OF BROWARD COUNTY, INC 2070 GRIFFIN ROAD, FT. LAUDERDALE, FL 33312	59-6002321	501 (C)(3)	18,125				FUNDS FOR SPAY AND NEUTER CAMPAIGN AS WELL AS ANIMAL CARE SUPPLIES AND VETERINARY CARE FOR ANIMALS IMPACTED BY COVID CRISIS
(114) HUMANE SOCIETY OF CENTRAL OREGON 61170 SE 27TH STREET, BEND, OR 97702	93-0616957	501 (C)(3)	6,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC, DIRECT CARE FOR A LARGE NUMBER OF DOGS
(115) HUMANE SOCIETY OF CHARLOTTE 2700 TOOMEY AVENUE, CHARLOTTE, NC 28203	58-1342479	501 (C)(3)	12,600				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC, ADOPTION CAMPAIGN FOR VETERANS
(116) HUMANE SOCIETY OF CLARKSVILLE MONTGOMERY COUNTY INC P.O. BOX 571, CLARKSVILLE, TN 37041	58-1465345	501 (C)(3)	10,325				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(117) HUMANE SOCIETY OF HALL COUNTY 845 WEST RIDGE ROAD, GAINESVILLE, GA 30501	58-0678817	501 (C)(3)	10,225				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(118) HUMANE SOCIETY OF NORTH CENTRAL FLORIDA 4205 NW 6TH STREET, GAINESVILLE, FL 32609	59-1908492	501 (C)(3)	25,000				FUNDS FOR GUIDANCE AND SUPPORT FOR RURAL SHELTERS, INCLUDING TRAINING ON HUMANE ANIMAL CARE AND COMMUNITY CAT PROGRAMS, ACCESS TO ONGOING PROFESSIONAL DEVELOPMENT PROGRAMS

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(119) HUMANE SOCIETY OF PUERTO RICO P.O. BOX 2387, GUAYNABO, PR 00970	66-0329776	501 (C)(3)	20,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(120) HUMANE SOCIETY OF PUTNAM COUNTY INC 180 MILLER ROAD, COOKEVILLE, TN 38501	58-1387894	501 (C)(3)	5,300				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(121) HUMANE SOCIETY OF SHELBY COUNTY 381 MCDOOM ROAD, COLUMBIANA, AL 35051	63-0817987	501 (C)(3)	15,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC, CARE FOR ANIMALS IMPACTED BY HURRICANE SALLY
(122) HUMANE SOCIETY OF SOUTH MISSISSIPPI 2615 25TH AVENUE, GULFPORT, MS 39501	64-6034439	501 (C)(3)	16,810				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN, CARE FOR RESCUED ANIMALS AND ANIMALS IMPACTED BY HURRICANE SALLY
(123) HUMANE SOCIETY OF SOUTHERN WISCONSIN 222 SOUTH ARCH STREET, JANESVILLE, WI 53548	39-0973879	501 (C)(3)	5,570				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(124) HUMANE SOCIETY OF THE PIEDMONT 4527 WEST WENDOVER AVENUE, GREENSBORO, NC 27409	56-6030054	501 (C)(3)	19,575				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(125) HUMANE SOCIETY OF TULSA 9521- B SOUTH RIVERSIDE PARKWAY, TULSA, OK 74137	73-1571476	501 (C)(3)	46,380				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(126) HUMANE SOCIETY OF UNION COUNTY INC P.O. BOX 101, MONROE, NC 28111	58-1586626	501 (C)(3)	5,760				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(127) HUMANE SOCIETY OF VERO BEACH & INDIAN RIVER CO INC 6230 77TH STREET, VERO BEACH, FL 32966	59-0863199	501 (C)(3)	8,750				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(128) HUMANE SOCIETY OF WASHINGTON COUNTY, INC 13011 MAUGANSVILLE ROAD, HAGERSTOWN, MD 21740	52-0542025	501 (C)(3)	6,115				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(129) HUMANE SOCIETY OF WEST MICHIGAN 3077 WILSON DRIVE NW, GRAND RAPIDS, MI 49534	38-1360926	501 (C)(3)	7,050				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(130) HUMANE SOCIETY VETERINARY MEDICAL ASSOCIATION INC 1255 23RD STREET, NW SUITE 450, WASHINGTON, DC 20037	22-2768664	501 (C)(3)	616,993				GENERAL SUPPORT
(131) HUMANE SPCA 121 HUMANE LANE, COLUMBIA, SC 29209	57-0407367	501 (C)(3)	7,395				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN



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(132) IDAHO HUMANE SOCIETY INC 1300 SOUTH BIRD STREET, BOISE, ID 83709	82-0212536	501 (C)(3)	120,000				COMMUNITY OUTREACH TRAINING, SPAY AND NEUTER SERVICES AS WELL AS SUPPLIES AND VETERINARY CARE FOR ANIMALS IMPACTED BY COVID CRISIS
(133) INSYNC EXOTICS INC 3430 PR 5329, WYLIE, TX 75098	31-1726497	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(134) ITS MEOW OR NEVER FOR FERALS INC P.O. BOX 12326, TALLAHASSEE, FL 32308	26-1298437	501 (C)(3)	9,550				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(135) JEFFERSON PARISH COUNCIL 200 DERBIGY STREET, SUITE 4200, GRETNA, LA 70053	72-6013920	GOVERNMENT	15,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(136) JOHNS HOPKINS UNIVERSITY 3910 KESWICK ROAD, BALTIMORE, MD 21211	52-0595110	501 (C)(3)	10,000				COVID RESEARCH USING NON-ANIMAL METHODS
(137) JUNGLE FRIENDS PRIMATE SANCTUARY 13915 NORTH STATE ROAD 121, GAINESVILLE, FL 32653	86-0859789	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(138) KALAMAZOO COUNTY HUMANE SOCIETY 3661 EASY STREET, KALAMAZOO, MI 49001	38-1474932	501 (C)(3)	8,510				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(139) KANAWHA-CHARLESTON HUMANE ASSOCIATION 1248 GREENBRIER STREET, CHARLESTON, WV 25311	55-0435381	501 (C)(3)	10,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(140) KENTUCKY HUMANE SOCIETY ANIMAL RESCUE LEAGUE INC 1000 LYNDON LANE, LOUISVILLE, KY 40222	61-0463938	501 (C)(3)	10,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(141) KENTUCKY RIVER REGIONAL ANIMAL SHELTER P.O. BOX 465, HAZARD, KY 41702	62-1155329	501 (C)(3)	6,375				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(142) KITSAP HUMANE SOCIETY 9167 DICKEY ROAD, SILVERDALE, WA 98383	91-0728353	501 (C)(3)	5,070				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(143) LAFAYETTE ANIMAL AID P.O. BOX 298, CARENCRO, LA 70520	23-7414331	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC

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(144) LAFAYETTE CITY PARISH CONSOLIDATED GOVERNMENT 705 WEST UNIVERSITY AVENUE, LAFAYETTE, LA 70506	72-1335255	GOVERNMENT	6,300				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(145) LAFOURCHE PARISH GOVERNMENT 402 GREEN STREET, THIBODAUX, LA 70301	72-6000634	GOVERNMENT	9,000				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(146) LAS VEGAS VALLEY HUMANE SOCIETY 3395 SOUTH JONES BOULEVARD, LAS VEGAS, NV 89146	88-0277449	501 (C)(3)	13,500				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(147) LEECH LAKE BAND OF OJIBWE 190 SAILSTAR DRIVE NW, CASS LAKE, MN 56633	41-1242052	TRIBAL GOVERNMENT	125,000				COMMUNITY OUTREACH TRAINING, SPAY AND NEUTER SERVICES AS WELL AS SUPPLIES AND VETERINARY CARE FOR ANIMALS IMPACTED BY COVID CRISIS
(148) LEWIS AND CLARK HUMANE SOCIETY P.O. BOX 4455, HELENA, MT 59604	81-6014910	501 (C)(3)	10,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(149) LIFELINE ANIMAL PROJECT INC P.O. BOX 15466, ATLANTA, GA 30333	01-0599278	501 (C)(3)	10,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(150) LIONS TIGERS AND BEARS 24402 MARTIN WAY, ALPINE, CA 91901	33-0938499	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(151) LOST DOG & CAT RESCUE FOUNDATION P.O. BOX 50037, ARLINGTON, VA 22205	31-1789600	501 (C)(3)	7,000				SHELTER AND MEDICAL CARE FOR ANIMALS IMPACTED BY FLOODING AFTER TROPICAL STORM
(152) LOUISIANA SPCA 1700 MARDI GRAS BOULEVARD, NEW ORLEANS, LA 70124	72-0471368	501 (C)(3)	47,495				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN, COVID PANDEMIC RELIEF, SUPPLIES AND VETERINARY CARE AFTER HURRICANE SALLY
(153) MADACC 3839 WEST BURNHAM STREET, WEST MILWAUKEE, WI 53215	39-1947192	GOVERNMENT	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(154) MARICOPA COUNTY 301 WEST JEFFERSON STREET, PHOENIX, AZ 85003	86-6000472	GOVERNMENT	20,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC

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(155) MAUI HUMANE SOCIETY P.O. BOX 1047, PUUNENE, HI 96784	99-6000953	501 (C)(3)	13,050				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(156) MCKINLEY COUNTY HUMANE SOCIETY OF NEW MEXICO P.O. BOX 10, GALLUP, NM 87305	85-0398197	501 (C)(3)	5,995				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(157) MIAMI DADE COUNTY BOARD OF COUNTY COMMISSIONERS 111 NW 1ST STREET, MIAMI, FL 33128	59-6000573	GOVERNMENT	14,300				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(158) MIAMI VETERINARY FOUNDATION 11622 SW 88 STREET, MIAMI, FL 33176	59-1911775	501 (C)(3)	15,500				FUNDS FOR SPAY AND NEUTER CAMPAIGN AS WELL AS ANIMAL CARE SUPPLIES AND VETERINARY CARE FOR ANIMALS IMPACTED BY COVID CRISIS
(159) MICHIGAN HUMANE 30300 TELEGRAPH ROAD SUITE 220, BINGHAM FARMS, MI 48025	38-1358206	501 (C)(3)	20,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(160) MINNESOTA HORSE WELFARE COALITION 15055 210TH STREET, HASTINGS, MN 55033	47-2567911	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(161) MINNESOTA SPAY NEUTER ASSISTANCE PROGRAM 2822 WASHINGTON AVENUE NORTH, MINNEAPOLIS, MN 55411	90-0397515	501 (C)(3)	6,290				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(162) MINN-KOTA PAAWS 2125 1ST AVENUE SOUTH, FARGO, ND 58103	30-0245020	501 (C)(3)	93,935				FUNDS FOR COMMUNITY OUTREACH TRAINING, FREE WELLNESS AND SPAY/NEUTER SERVICES
(163) MISSISSIPPI SPAY AND NEUTER 657 HIGHWAY 49 SOUTH, RICHLAND, MS 39218	20-2938077	501 (C)(3)	10,125				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(164) MOVIMIENTO SOCIAL PRO BIENESTAR ANIMAL QUINTAS DE CUPEY A11 CALLE 14, SAN JUAN, PR 00926	66-0866412	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(165) MSPCA 350 SOUTH HUNTINGTON AVENUE, BOSTON, MA 02130	04-2103597	501 (C)(3)	10,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(166) NALA'S NEW LIFE RESCUE INC 2740 SW MARTIN DOWNS BOULEVARD, PALM CITY, FL 34990	26-2312990	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC

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(167) NATIONAL SPAY ALLIANCE FOUNDATION 2518 CLEVELAND HIGHWAY, DALTON, GA 30721	46-5460727	501 (C)(3)	6,000				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(168) NATURE TRUST OF THE AMERICAS INC 4091 PARK AVENUE, MIAMI, FL 33133	83-2161645	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(169) NEIGHBORHOOD PETS 3711 EAST 65 STREET, CLEVELAND, OH 44105	27-2026307	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(170) NEVADA HUMANE SOCIETY 2825 LONGLY LANE, RENO, NV 89502	88-0072720	501 (C)(3)	45,000				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(171) NEVADA SPCA 4800 WEST DEWAY DRIVE, LAS VEGAS, NV 89118	88-0187383	501 (C)(3)	9,000				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(172) NORTH ALABAMA SPAY NEUTER ASSISTANCE INC 2115 JONATHAN DRIVE NW, HUNTSVILLE, AL 35810	26-1717108	501 (C)(3)	17,500				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(173) NORTHEAST ARKANSAS HUMANE ASSOCIATION 6111 EAST HIGHLAND DRIVE, JONESBORO, AR 72401	71-0621263	501 (C)(3)	12,175				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(174) OGLALA PET PROJECT 19980 BIA 2, KYLE, SD 57752	45-3844277	501 (C)(3)	7,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(175) OKEECHOBEE COUNTY SHERIFF'S OFFICE 504 N.W. 4TH STREET, OKEECHOBEE, FL 34972	59-6002747	GOVERNMENT	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(176) OKLAHOMA ALLIANCE FOR ANIMALS, INC 5321 SOUTH SHERIDAN ROAD, TULSA, OK 74145	84-1640954	501 (C)(3)	6,000				CARE FOR LARGE NUMBER OF BIRDS RESCUED FROM COCKFIGHTING OPERATION, ADVOCACY EFFORTS TO END PUPPY SELLING AT PET STORES
(177) OKLAHOMA PRIMATE SANCTUARY INC 2205 SW 24TH STREET, NEWCASTLE, OK 73065	73-1522989	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(178) OKTIBBEHA COUNTY HUMANE SOCIETY P.O. BOX 297, STARKVILLE, MS 39760	64-0618170	501 (C)(3)	12,015				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(179) P.E.T.S. LOW COST SPAY AND NEUTER CLINIC P.O. BOX 4669, WICHITA FALLS, TX 76308	68-0648159	501 (C)(3)	17,370				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN

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(180) PANHANDLE ANIMAL WELFARE SOCIETY INC 752 LOVEJOY ROAD, FORT WALTON BEACH, FL 32548	59-0815515	501 (C)(3)	10,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC, SUPPLIES AND VETERINARY CARE FOR COMMUNITIES IMPACTED BY HURRICANE SALLY
(181) PARC 1426 WEST 300 N, ALBION, IN 46701	33-1020728	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(182) PAWS LEE COUNTY INC 965 PONDELLA ROAD, NORTH FORT MYERS, FL 33903	94-3467822	501 (C)(3)	8,350				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(183) PEACEFUL ANIMAL ADOPTION SHELTER 628 SOUTH WILSON, VINITA, OK 74301	45-5414625	501 (C)(3)	67,256				COMMUNITY OUTREACH TRAINING, SPAY AND NEUTER SERVICES AS WELL AS SUPPLIES AND VETERINARY CARE FOR ANIMALS IMPACTED BY COVID CRISIS
(184) PEARL RIVER COUNTY SPCA INC 1700 PALESTINE ROAD, PICAYUNE, MS 39466	64-0798887	501 (C)(3)	6,075				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(185) PEOPLE ASSISTING ANIMAL CONTROL PAAC 5804 AYERS STREET, CORPUS CHRISTI, TX 78415	38-3817365	501 (C)(3)	15,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(186) PEOPLE FOR ANIMALS INC 401 HILLSIDE AVENUE, HILLSIDE, NJ 07205	22-2331492	501 (C)(3)	12,870				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(187) PERFORMING ANIMAL WELFARE SOCIETY 11435 SIMMERHORN ROAD, GALT, CA 95632	94-3005157	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(188) PET COMMUNITY CENTER, INC 943-B DOCTOR RICHARD G. ADAMS DRIVE, NASHVILLE, TN 37207	45-1524886	501 (C)(3)	10,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(189) PET PAL RESCUE INC 405 22ND STREET SOUTH, ST. PETERSBURG, FL 33712	59-2967819	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(190) PET PANTRY OF LANCASTER COUNTY INC 26 MILLERSVILLE ROAD, LANCASTER, PA 17603	45-4701712	501 (C)(3)	5,350				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN

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(191) PIMA COUNTY GOVERNMENT 4000 NORTH SILVERBELL ROAD, TUCSON, AZ 85745	86-6000543	GOVERNMENT	10,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(192) PLANNED PETHOOD OF GEORGIA INC 2860 BUFORD HIGHWAY, DULUTH, GA 30096	90-0516757	501 (C)(3)	7,700				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(193) POINTE COUPEE PARISH GOVERNMENT P.O. BOX 290, NEW ROADS, LA 70760	72-6001105	GOVERNMENT	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(194) PRIMATES INCORPORATED P.O. BOX 7384, MADISON, WI 53707	81-0632763	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(195) PROJECT CHIMPS P.O. BOX 2140, BLUE RIDGE, GA 30513	47-1439557	501 (C)(3)	782,825				GENERAL SUPPORT
(196) PROTECTORS OF ANIMALS, INC 144 MAIN STREET, EAST HATFORD, CT 06118	06-0959891	501 (C)(3)	6,145				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(197) ROBERT POTTER LEAGUE FOR ANIMALS, INC 87 OLIPHANT LANE, MIDDLETOWN, RI 02842	05-0301553	501 (C)(3)	14,145				FUNDS FOR SPAY AND NEUTER CAMPAIGN AS WELL AS ANIMAL CARE SUPPLIES AND VETERINARY CARE FOR ANIMALS IMPACTED BY COVID CRISIS
(198) ROBINSONS RESCUE INC 2515 LINE AVENUE, SHREVEPORT, LA 71104	42-1717278	501 (C)(3)	24,300				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(199) RUDE RANCH ANIMAL RESCUE INC 3200 IVY WAY, HARWOOD, MD 20776	52-2312763	501 (C)(3)	13,220				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(200) SAFE HAVEN FOR CATS 8431 GARVEY DRIVE, RALEIGH, NC 27616	56-1916620	501 (C)(3)	5,625				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(201) SAFE HEAVEN WILDLIFE SANCTUARY P.O. BOX 184, IMLAY, NV 89418	02-0785597	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(202) SAN DIEGO HUMANE SOCIETY AND SPCA 5500 GAINES STREET, SAN DIEGO, CA 92110	95-1661688	501 (C)(3)	4,250,000				SUPPORT FOR RAMONA, CA WILDLIFE CENTER
(203) SANTUARIO DE ANIMALES SAN FRANCISCO DE ASIS INC STATE ROAD 114KM 4.7 BAJURA WARD, CABO ROJO, PR 00622	66-0717096	501 (C)(3)	12,875				FUNDING FOR FACILITY REBUILDING AFTER EARTHQUAKE, SPAY AND NEUTER CAMPAIGN, CAMPAIGN TO ADOPT SHELTER PETS

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(204) SAVING SUNNY INC 8803 STONY FIELD WAY, LOUISVILLE, KY 40299	35-2379444	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(205) SEATTLE HUMANE 13212 SE EASTGATE WAY, BELLEVUE, WA 98005	91-0282060	501 (C)(3)	125,000				FUNDS FOR COMMUNITY OUTREACH TRAINING, FREE WELLNESS AND SPAY/NEUTER SERVICES
(206) SECOND CHANCE ANIMAL SERVICES INC 111 YOUNG ROAD, EAST BROOKFIELD, MA 01515	04-3490671	501 (C)(3)	15,045				FUNDS FOR SPAY AND NEUTER CAMPAIGN AS WELL AS ANIMAL CARE SUPPLIES AND VETERINARY CARE FOR ANIMALS IMPACTED BY COVID CRISIS
(207) SHAKESPEARE ANIMAL FUND P.O. BOX 8701, RENO, NV 89507	41-2182628	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(208) SHELTER ANIMALS COUNT 41 WATCHUNG PLAZA, MONTCLAIR, NJ 07042	46-2215168	501 (C)(3)	25,000				GENERAL SUPPORT
(209) SHELTER OUTREACH SERVICES 78 DODGE ROAD, ITHACA, NY 14850	06-1697719	501 (C)(3)	13,320				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(210) SIDEWALK ANGELS INC 3130 WILSHIER BOULEVARD, SANTA MONICA, CA 90403	20-0285336	501 (C)(3)	150,000				PROVIDE OPERATIONAL FUNDS TO VARIOUS NO KILL ANIMAL SHELTERS
(211) SIOUXLAND HUMANE SOCIETY INC 1015 TRI-VIEW AVENUE, SIOUX CITY, IA 51103	42-6000336	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(212) SNAKE RIVER ANIMAL SHELTER, INC 3000 LINDSAY BOULEVARD, IDAHO FALLS, ID 83402	20-5175430	501 (C)(3)	7,790				FUNDS FOR SPAY AND NEUTER CAMPAIGN AS WELL AS ANIMAL CARE SUPPLIES AND VETERINARY CARE FOR ANIMALS IMPACTED BY COVID CRISIS
(213) SOUND EQUINE OPTIONS P.O. BOX 1150, GRESHAM, OR 97030	27-1064431	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(214) SOUTH FLORIDA WILDLIFE CENTER, INC 3200 S.W. 4TH AVENUE, FORT LAUDERDALE, FL 33315	23-7086391	501 (C)(3)	6,331,748				SUPPORT FOR GENERAL OPERATIONS

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(215) SOUTHERN PINES ANIMAL SHELTER P.O. BOX 2021, HATTIESBURG, MS 39403	64-0514796	501 (C)(3)	20,125				FUNDS FOR SPAY AND NEUTER CAMPAIGN AS WELL AS ANIMAL CARE SUPPLIES AND VETERINARY CARE FOR ANIMALS IMPACTED BY COVID CRISIS
(216) SPAY AND NEUTER KANSAS CITY 1116 EAST 59TH STREET, KANSAS CITY, MO 64110	82-0563117	501 (C)(3)	12,775				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(217) SPAY ARKANSAS INC 1909 WEST HUNTSVILLE AVENUE, SPRINGDALE, AR 72762	06-1833843	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(218) SPAY NEUTER IMPERATIVE PROJECT CALIFORNIA 67 FRONT STREET, DANVILLE, CA 94526	46-1587546	501 (C)(3)	8,100				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(219) SPAY TODAY INC 4550-B COUNTY HOME ROAD, GREENVILLE, NC 27858	33-1173160	501 (C)(3)	9,000				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(220) SPCA OF FREDERICKSBURG VA INC 10819 COURTHOUSE ROAD, FREDERICKSBURG, VA 22408	54-0648185	501 (C)(3)	9,500				FUNDS FOR SPAY AND NEUTER CAMPAIGN AS WELL AS ANIMAL CARE SUPPLIES AND VETERINARY CARE FOR ANIMALS IMPACTED BY COVID CRISIS
(221) SPCA OF NORTHERN NEVADA 4950 SPECTRUM BOULEVARD, RENO, NV 89512	88-0386601	501 (C)(3)	18,000				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(222) SPCA OF TEXAS 2400 LONE STAR DRIVE, DALLAS, TX 75212	75-1216660	501 (C)(3)	12,900				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC, DOG ADOPTION CAMPAIGN
(223) SPIRIT OF CHEYENNE 7807 GREENWELL SPRINGS ROAD, BATON ROUGE, LA 70814	72-1460312	501 (C)(3)	14,175				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(224) ST TAMMANY HUMANE SOCIETY 20384 HARRISON AVENUE, COVINGTON, LA 70433	72-0543369	501 (C)(3)	6,750				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(225) ST. BERNARD PARISH GOVERNMENT 8201 WEST JUDGE PEREZ DRIVE, CHALMETTE, LA 70043	72-6001193	GOVERNMENT	9,000				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(226) ST. CHARLES PARISH P.O. BOX 302, HAHNVILLE, LA 70057	72-6001208	GOVERNMENT	8,550				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(227) STAFFORD ANIMAL SHELTER 3 BUSINESS PARK ROAD, LIVINGSTON, MT 59047	36-3432468	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC



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(228) SUNCOAST HUMANE SOCIETY INC 6781 SAN CASA DRIVE, ENGLEWOOD, FL 34224	23-7174193	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(229) TAILS OF NYE COUNTY INC P.O. BOX 9045, PAHRUMP, NV 89060	45-4791572	501 (C)(3)	9,000				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(230) THE ANIMAL FOUNDATION 655 N MOJAVE ROAD, LAS VEGAS, NV 89101	88-0144253	501 (C)(3)	63,000				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(231) THE ANTI CRUELTY SOCIETY 157 WEST GRAND AVENUE, CHICAGO, IL 60654	36-2179814	501 (C)(3)	5,000				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(232) THE ARIZONA PET PROJECT 3905 NORTH 7TH AVENUE, PHOENIX, AZ 85011	86-1008549	501 (C)(3)	10,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(233) THE BLACKFEET TRIBE OF THE BLACKFEET NATION P.O. BOX 850, BROWNING, MT 59417	81-0212955	TRIBAL GOVERNMENT	125,000				FUNDS FOR COMMUNITY OUTREACH TRAINING, FREE WELLNESS AND SPAY/NEUTER SERVICES
(234) THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS 506 SOUTH WRIGHT STREET, URBANA, IL 61801	37-6000511	501 (C)(3)	21,280				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(235) THE CAT NETWORK INC P.O. BOX 347228, MIAMI, FL 33234	65-0597008	501 (C)(3)	5,250				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(236) THE FIX FOUNDATION P.O. BOX 181, FRANKLIN, KY 42135	81-0660851	501 (C)(3)	5,420				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(237) THE FIXEM CLINIC 102 DEE DRIVE, CHARLESTON, WV 25311	46-3553568	501 (C)(3)	8,730				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(238) THE LITTLE ANGELS PROJECT 29348 ROADSIDE DRIVE, AGOURA HILLS, CA 91301	81-1635505	501 (C)(3)	7,500				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(239) THE PET PROJECT FOR PETS INC 2200 NEW 9TH AVENUE, WILTON MANORS, FL 33311	37-1440098	501 (C)(3)	10,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(240) THE PONGO FUND P.O. BOX 9000, PORT, OR 97207	27-0646992	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(241) THE RESCUE RANCH INC P.O. BOX 55527, MCRAE HELENA, GA 31055	42-1598987	501 (C)(3)	9,370				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN

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(242) THE STREET DOG COALITION 220 JACKSON AVENUE, FORT COLLINS, CO 80521	81-0793989	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(243) THE WILD ANIMAL SANCTUARY 1946 COUNTY ROAD 53, KEENESBURG, CO 80643	84-1351483	501 (C)(3)	7,500				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC, CARE FOR SHELTER ANIMALS
(244) THE WILDCAT SANCTUARY 51085 LITTLE SAND CREEK ROAD, SANDSTONE, MN 55051	22-3857401	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(245) TRUSTEES OF TUFTS UNIVERSITY 169 HOLLAND STREET, SOMERSVILLE, MA 02144	04-2103634	501 (C)(3)	64,800				IMPLEMENTATION OF FERTILITY CONTROL STUDIES FOR WILD HORSE AND BURRO POPULATIONS
(246) TURPENTINE CREEK FOUNDATION INC 239 TURPENTINE CREEK LANE, EUREKA SPRINGS, AR 72632	71-0721742	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(247) UNIVERSITY OF FLORIDA FOUNDATION INC 1938 WEST UNIVERSITY AVENUE, GAINESVILLE, FL 32603	59-0974739	501 (C)(3)	20,000				FUND WORK DONE AT PUERTO RICAN SHELTERS BY UNIVERSITY OF FLORIDA SHELTER MEDICINE PROGRAM STAFF
(248) VIDAS - VETERINARIOS INTERNACIONALES DEDICADOS A ANIMALES SANOS 9457 SOUTH UNIVERSITY BOULEVARD, HIGHLAND RANCH, CO 80126	58-2683682	501 (C)(3)	75,000				FUNDING FOR SPAY AND NEUTER CLINIC IN PUERTO RICO
(249) VIRGINIA BEACH SPCA 3040 HOLLAND ROAD, VIRGINIA BEACH, VA 23453	54-6061532	501 (C)(3)	33,700				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC, ANIMAL ADOPTION CAMPAIGN FOR VETERANS
(250) WAYNE COUNTY HUMANE SOCIETY INC 1161 MECHANICSBURG ROAD, WOOSTER, OH 44691	38-2016098	501 (C)(3)	7,230				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
(251) WAYSIDE WAIFS, INC 3901 MARTHA TRUMAN ROAD, KANSAS CITY, MO 64137	44-0605374	501 (C)(3)	11,574				CARE FOR ANIMALS RESCUED AFTER HURRICANE LAURA
(252) WILD CAT FOUNDATION INC 1640 NORTH BERTRAND DRIVE, LAFAYETTE, LA 70506	02-0647617	501 (C)(3)	20,835				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN

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(253) WILDCAT RIDGE SANCTUARY 21389 HAZELNUT RIDGE ROAD, SCOTTS MILLS, OR 97375	93-1320051	501 (C)(3)	6,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC, CARE OF WILD CATS RESCUED FROM AREA FIRES
(254) WILDLIFE RESCUE AND REHABILITATION INC 335 OLD BLANCO ROAD, KENDALIA, TX 78227	74-2012897	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(255) WISCONSIN HUMANE SOCIETY 4500 WEST WISCONSIN AVENUE, MILWAUKEE, WI 53208-3156	39-0810533	501 (C)(3)	94,585				COMMUNITY OUTREACH TRAINING, SPAY AND NEUTER SERVICES AS WELL AS SUPPLIES AND VETERINARY CARE FOR ANIMALS IMPACTED BY COVID CRISIS
(256) WYNNE FRIENDS OF ANIMALS 1878R HIGHWAY 64 SPUR, WYNNE, AR 72396	71-0828870	501 (C)(3)	6,000				FUND SPAY AND NEUTER CLINIC
(257) YAKIMA HUMANE SOCIETY 2405 WEST BIRCHFIELD ROAD, YAKIMA, WA 98901	91-0580938	501 (C)(3)	160,000				COMMUNITY OUTREACH TRAINING, SPAY AND NEUTER SERVICES AS WELL AS SUPPLIES AND VETERINARY CARE FOR ANIMALS IMPACTED BY COVID CRISIS
(258) YOLA AND BOOGY FUND 5807 NORTH COLLEGE DRIVE, CHEYENNE, WY 82009	82-3238814	501 (C)(3)	5,000				PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
(259) YOUNG WILLIAMS ANIMAL CENTER OF EAST TENNESSEE 3201 DIVISION STREET, KNOXVILLE, TN 37919	45-5326778	501 (C)(3)	6,425				SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN

Return Reference - Identifier	Explanation
SCHEDULE I, PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANT FUNDS.	THE HUMANE SOCIETY OF THE UNITED STATES ISSUES GRANTS TO ORGANIZATIONS THAT MEET THE MISSION CRITERIA. GRANT OVERSIGHT IS ACCOMPLISHED THROUGH A VARIETY OF METHODS SUCH AS GRANT REPORTS, MEETINGS WITH GRANTEEES, AND SITE VISITS.
SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	ALLIANCE FOR CONTRACEPTION IN CATS & DOGS 11145 NW OLD CORNELIUS PASS ROAD, PORTLAND, OR 97231
SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	ANIMAL BALANCE 4950 CALIFORNIA STREET, SAN FRANCISCO, CA 94118
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	3 GIRLS ANIMAL RESCUE INC: FUNDS FOR COMMUNITY OUTREACH TRAINING, FREE WELLNESS AND SPAY/NEUTER SERVICES
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	A HOPE INC: SUPPORT FOR DOG AND CAT SPAY AND NEUTER CAMPAIGN
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	ADOPT AN ANGEL: SUPPORT FOR DOG AND CAT SPAY AND NEUTER CAMPAIGN
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	ALABAMA ANIMAL ALLIANCE: SUPPORT FOR DOG AND CAT SPAY AND NEUTER CAMPAIGN
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	ALL ABOUT ANIMALS RESCUE: PROVIDE PET FOOD, ANIMAL CARE SUPPLIES, AND VETERINARY CARE DURING COVID-19 PANDEMIC
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	ALOHA ILIO RESCUE: SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	ALTUS ANIMAL WELFARE ASSOCIATION: COMMUNITY OUTREACH TRAINING, SPAY AND NEUTER SERVICES AS WELL AS SUPPLIES AND VETERINARY CARE FOR ANIMALS IMPACTED BY COVID CRISIS
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	ANDERSON COUNTY, S.C.: SUPPORT DOG AND CAT SPAY AND NEUTER CAMPAIGN
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	ANIMAL ADOPTION CENTER INC: FUNDS FOR SPAY AND NEUTER CAMPAIGN AS WELL AS ANIMAL CARE SUPPLIES AND VETERINARY CARE FOR ANIMALS IMPACTED BY COVID CRISIS
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	ANIMAL BALANCE: FUNDS FOR SPAY AND NEUTER SURGERIES IN CALIFORNIA, LOUISIANA AND TEXAS

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

**Compensation Information**

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.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020**

**Open to Public Inspection**

THE HUMANE SOCIETY OF THE UNITED STATES

Employer identification number

53-0225390

**Part I Questions Regarding Compensation**

	Yes	No
<p><b>1a</b> 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.</p> <p> <input type="checkbox"/> First-class or charter travel                      <input type="checkbox"/> Housing allowance or residence for personal use  <input type="checkbox"/> Travel for companions                                      <input type="checkbox"/> Payments for business use of personal residence  <input type="checkbox"/> Tax indemnification and gross-up payments              <input type="checkbox"/> Health or social club dues or initiation fees  <input type="checkbox"/> Discretionary spending account                              <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) </p>		
<p><b>b</b> 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 . . . . .</p>		
<b>1b</b>		
<p><b>2</b> Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? . . . . .</p>		
<b>2</b>		
<p><b>3</b> Indicate which, if any, of the following the 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.</p> <p> <input checked="" type="checkbox"/> Compensation committee                                      <input checked="" type="checkbox"/> Written employment contract  <input checked="" type="checkbox"/> Independent compensation consultant                              <input checked="" type="checkbox"/> Compensation survey or study  <input checked="" type="checkbox"/> Form 990 of other organizations                                      <input checked="" type="checkbox"/> Approval by the board or compensation committee </p>		
<p><b>4</b> 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:</p>		
<p><b>a</b> Receive a severance payment or change-of-control payment? . . . . .</p>	<input checked="" type="checkbox"/>	
<b>4a</b>	<input checked="" type="checkbox"/>	
<p><b>b</b> Participate in or receive payment from a supplemental nonqualified retirement plan? . . . . .</p>		<input checked="" type="checkbox"/>
<b>4b</b>		<input checked="" type="checkbox"/>
<p><b>c</b> Participate in or receive payment from an equity-based compensation arrangement? . . . . .</p>		<input checked="" type="checkbox"/>
<b>4c</b>		<input checked="" type="checkbox"/>
<p>If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.</p>		
<p><b>Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.</b></p>		
<p><b>5</b> 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:</p>		
<p><b>a</b> The organization? . . . . .</p>		<input checked="" type="checkbox"/>
<b>5a</b>		<input checked="" type="checkbox"/>
<p><b>b</b> Any related organization? . . . . .</p>		<input checked="" type="checkbox"/>
<b>5b</b>		<input checked="" type="checkbox"/>
<p>If "Yes" on line 5a or 5b, describe in Part III.</p>		
<p><b>6</b> 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:</p>		
<p><b>a</b> The organization? . . . . .</p>		<input checked="" type="checkbox"/>
<b>6a</b>		<input checked="" type="checkbox"/>
<p><b>b</b> Any related organization? . . . . .</p>		<input checked="" type="checkbox"/>
<b>6b</b>		<input checked="" type="checkbox"/>
<p>If "Yes" on line 6a or 6b, describe in Part III.</p>		
<p><b>7</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III . . . . .</p>		<input checked="" type="checkbox"/>
<b>7</b>		<input checked="" type="checkbox"/>
<p><b>8</b> Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III . . . . .</p>		<input checked="" type="checkbox"/>
<b>8</b>		<input checked="" type="checkbox"/>
<p><b>9</b> If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? . . . . .</p>		
<b>9</b>		

**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 aren't listed on Form 990, Part VII.

**Note:** The sum of columns (B)(i)–(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported as deferred on prior Form 990	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation					
1	AMY NICHOLS	(i)	155,178	0	0	8,545	27,425	191,149	0
	FORMER KEY EMPLOYEE	(ii)	0	0	0	0	0	0	0
2	CRISTOBEL BLOCK	(i)	396,153	0	0	21,846	22,528	440,527	0
	PRESIDENT & CHIEF EXECUTIVE OFFICER	(ii)	0	0	0	0	0	0	0
3	JOHN VRANAS	(i)	195,436	0	127,500	7,037	13,729	343,702	0
	CHIEF DEVELOPMENT & MARKETING OFFICER	(ii)	0	0	0	0	0	0	0
4	ERIN FRACKLETON	(i)	283,664	0	0	11,309	7,586	302,559	0
	CHIEF OPERATING OFFICER	(ii)	0	0	0	0	0	0	0
5	KATHERINE KARL	(i)	274,262	0	0	12,788	8,668	295,718	0
	GENERAL COUNSEL & CHIEF LEGAL OFFICER	(ii)	0	0	0	0	0	0	0
6	ERIC SAKACH	(i)	79,304	0	152,082	7,194	16,159	254,739	0
	SENIOR LAW ENFORCEMENT SPECIALIST	(ii)	0	0	0	0	0	0	0
7	WILLIAM H. HALL	(i)	221,693	6,000	0	10,750	15,096	253,539	0
	CHIEF FINANCIAL OFFICER & TREASURER	(ii)	0	0	0	0	0	0	0
8	SARAH COMIS	(i)	147,590	0	92,593	5,179	1,368	246,730	0
	VP., BUSINESS DEVELOPMENT & CORPORATE RELATIONS	(ii)	0	0	0	0	0	0	0
9	REBECCA BRANZELL	(i)	202,751	0	0	19,804	17,987	240,542	0
	DEPUTY GENERAL COUNSEL	(ii)	0	0	0	0	0	0	0
10	NICOLE PAQUETTE	(i)	214,506	0	0	15,564	9,839	239,909	0
	CHIEF PROGRAMS & POLICY OFFICER	(ii)	0	0	0	0	0	0	0
11	JONATHAN LOVVORN	(i)	203,516	0	0	19,044	1,039	223,599	0
	SVP. & CHIEF COUNSEL, APL	(ii)	0	0	0	0	0	0	0
12	MICHAEL BARNESS	(i)	191,802	0	0	12,841	13,164	217,806	0
	SENIOR VP., FINANCE & ACCOUNTING	(ii)	0	0	0	0	0	0	0
13	JAMIE NATELSON	(i)	179,332	0	0	9,082	11,089	199,504	0
	SVP. MARKETING OPERATIONS	(ii)	0	0	0	0	0	0	0
14	KIMBERLEE DINN	(i)	165,094	0	0	11,371	22,963	199,429	0
	SENIOR VP., PHILANTHROPY	(ii)	0	0	0	0	0	0	0
15	G. THOMAS WAITE, III	(i)	76,938	0	95,444	7,364	4,635	184,380	0
	TREASURER & CFO	(ii)	0	0	0	0	0	0	0
16		(i)	157,608	0	0	14,906	1,705	174,219	0
		(ii)	0	0	0	0	0	0	0

Schedule J (Form 990) 2020

Part III

**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 - Identifier	Explanation
SCHEDULE J, PART I, LINE 4A - SEVERANCE OR CHANGE-OF-CONTROL PAYMENT	JOHN VRANAS: \$127,500 RECEIVED AS SEVERANCE. ERIC SAKACH: \$152,082 RECEIVED AS SEVERANCE. SARAH COMIS: \$92,593 RECEIVED AS SEVERANCE. G. THOMAS WAITE, III: \$95,444 RECEIVED AS SEVERANCE.

**SCHEDULE L**  
**(Form 990 or 990-EZ)**

**Transactions With Interested Persons**

OMB No. 1545-0047

**2020**

**Open To Public Inspection**

Department of the Treasury  
Internal Revenue Service

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.**  
▶ **Attach to Form 990 or Form 990-EZ.**  
▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

Name of the organization

THE HUMANE SOCIETY OF THE UNITED STATES

Employer identification number

53-0225390

**Part I Excess Benefit Transactions** (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958. . . . . ▶ \$ \_\_\_\_\_

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . ▶ \$ \_\_\_\_\_

**Part II Loans to and/or From Interested Persons.**

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
			(1)									
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
<b>Total</b> . . . . . ▶						\$						

**Part III Grants or Assistance Benefiting Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				





**Part IV****Business Transactions Involving Interested Persons** (continued)

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) FRANK LOFTUS	FAMILY MEMBER OF OFFICER	\$41,497	EMPLOYMENT		✓

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2020**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

- ▶ **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](http://www.irs.gov/Form990) for instructions and the latest information.**

Name of the organization: **THE HUMANE SOCIETY OF THE UNITED STATES** Employer identification number: **53-0225390**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .	✓	3,651	2,542,614	MARKET VALUE
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .	✓	76	622,332	MARKET VALUE
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .				
17 Real estate—Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .	✓	6	1,240,903	MARKET VALUE
20 Drugs and medical supplies . . . . .	✓	8	683,735	MARKET VALUE
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ▶ ( GIFTS FOR FR EVENTS ) . . . . .	✓	14	59,803	MARKET VALUE
26 Other ▶ ( ANIMAL CARE SUPPLIES ) . . . . .	✓	4	598,680	MARKET VALUE
27 Other ▶ ( ) . . . . .				
28 Other ▶ ( ) . . . . .				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement . . . . . **29** 7

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

**Part II**

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

Return Reference - Identifier	Explanation
<p>SCHEDULE M, PART I - EXPLANATIONS OF REPORTING METHOD FOR NUMBER OF CONTRIBUTIONS</p>	<p>CARS AND OTHER VEHICLES - NUMBER OF ITEMS RECEIVED                      SECURITIES - PUBLICLY TRADED - NUMBER OF CONTRIBUTIONS                      FOOD INVENTORY - NUMBER OF CONTRIBUTIONS                      DRUGS AND MEDICAL SUPPLIES - NUMBER OF CONTRIBUTIONS                      OTHER - GIFTS FOR FR EVENTS NUMBER OF CONTRIBUTIONS                      OTHER - ANIMAL CARE SUPPLIES NUMBER OF CONTRIBUTIONS</p>
<p>SCHEDULE M, PART I, LINE 31 - NON-STANDARD CONTRIBUTIONS</p>	<p>EXPLANATION: ANY NONSTANDARD ITEMS ARE REVIEWED, AND ACCEPTED IF:                      -THE DONATED GOODS CAN BE USED IN THE ORGANIZATION'S OPERATIONS, OR                      -IF DONATED GOODS HAVE VALUE LARGE ENOUGH THAT THEY ARE WORTH SELLING.</p>
<p>SCHEDULE M, PART I, LINE 32B - THIRD PARTIES USED TO SOLICIT, PROCESS, OR SELL NONCASH CONTRIBUTIONS</p>	<p>AUTOMOTIVE RECOVERY SERVICES, INC., CHARITABLE ADULT RIDES AND SERVICES, AMERICA'S BEST CHARITIES AND ARC THRIFT ACT AS HSUS'S AGENTS FOR THE VEHICLE DONATION PROGRAM FOR THE PROCESSING OF DONATED VEHICLES. THESE AGENTS MAKE PAYMENTS TO HSUS FOR UNITS SOLD UNDER THEIR AGREEMENT NET OF FEES AND EXPENSES.</p>

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

Department of Treasury Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

- ▶ Attach to Form 990 or 990-EZ.
- ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2020**

Open to Public Inspection

Name of the Organization  
**THE HUMANE SOCIETY OF THE UNITED STATES**

Employer Identification Number  
**53-0225390**

Return Reference - Identifier	Explanation
- AFFILIATE DESCRIPTIONS	<p>AFFILIATE DESCRIPTIONS FOR HSUS SCHEDULE O</p> <p>THE HUMANE SOCIETY OF THE UNITED STATES AND AFFILIATES (COLLECTIVELY, THE SOCIETY) ARE NONPROFIT ORGANIZATIONS WHOSE PRIMARY PURPOSE IS THE WORLDWIDE ADVANCEMENT OF HUMANE TREATMENT OF ANIMALS THROUGH CORPORATE AND LEGISLATIVE REFORMS, PUBLIC EDUCATION AND AWARENESS PROGRAMS, AND DIRECT RESCUE AND CARE. THE CONSOLIDATED FINANCIAL DATA, PRESENTED IN THE ANNUAL REPORT OF THE HUMANE SOCIETY OF THE UNITED STATES (THE HSUS), INCLUDES THE OPERATIONS OF THE HSUS AND THE FOLLOWING ENTITIES WHOSE MISSIONS ARE DESCRIBED BELOW:</p> <p>THE HUMANE SOCIETY WILDLIFE LAND TRUST EIN # 52-1808517 (HSWLT), FOUNDED IN 1993, PROTECTS WILDLIFE BY PERMANENTLY PRESERVING AND CONNECTING HABITAT. HSWLT PERMANENTLY PROTECTS A PORTFOLIO OF WILDLIFE SANCTUARIES COMPRISING MORE THAN 20,000 ACRES IN THE UNITED STATES. ON EACH SANCTUARY, WILDLIFE HABITAT AND OTHER CONSERVATION VALUES ARE MANAGED AND PROTECTED CONSISTENT WITH HSWLT'S MISSION.</p> <p>THE FUND FOR ANIMALS EIN #13-6218740 (THE FUND), SINCE 2005, IS RESPONSIBLE FOR MOST HSUS ANIMAL CARE FACILITIES INCLUDING, FOR 2020, CLEVELAND AMORY BLACK BEAUTY RANCH (TX), DUCHESS SANCTUARY (OR), AND (UNTIL SEPTEMBER 2020) THE FUND FOR ANIMALS WILDLIFE CENTER (CA). THESE FACILITIES FOCUS ON REHABILITATION AND RELEASE, AND OTHER HANDS-ON CARE AND RESCUE OF INJURED, ORPHANED, AND ABANDONED ANIMALS. THEY ALSO PROMOTE THE HUMANE TREATMENT OF ALL ANIMALS AND THE PREVENTION OF CRUELTY THROUGH EDUCATION AND ADVOCACY. IN SEPTEMBER 2020, THE FUND FOR ANIMALS WILDLIFE CENTER WAS GIFTED TO THE SAN DIEGO HUMANE SOCIETY AND SEPARATED FROM THE FUND.</p> <p>DORIS DAY ANIMAL LEAGUE EIN #95-4117651 (DDAL), FOUNDED IN 1987 BY THE LATE ACTRESS, IS A NONPROFIT, NATIONAL, CITIZENS LOBBYING ORGANIZATION WORKING FOR THE HUMANE TREATMENT OF ANIMALS. SINCE ITS INCEPTION, DDAL, A 501(C)(4) ENTITY, HAS BEEN A LEADER ON ANIMAL WELFARE LEGISLATION AND PUBLIC POLICY. DDAL WORKS WITH THE U.S. CONGRESS, GOVERNMENT AGENCIES, STATE AND LOCAL OFFICIALS AND OTHER STAKEHOLDERS TO SECURE PASSAGE OF LAWS, IMPLEMENTATION OF REGULATIONS AND THE ENFORCEMENT OF EXISTING LAWS AND REGULATIONS TO REDUCE OR ELIMINATE THE SUFFERING OF ANIMALS.</p> <p>HUMANE SOCIETY INTERNATIONAL EIN #52-1769464 (HSI), FOUNDED IN 1991, EDUCATES AUDIENCES WORLDWIDE ABOUT COMPASSION TOWARD ANIMALS; CARRIES OUT DIRECT ANIMAL CARE, RESCUE, AND DISASTER RESPONSE; PROVIDES TECHNICAL AND SCIENTIFIC SUPPORT TO LOCAL PARTNERS; AND SEEKS TO ESCALATE ATTENTION TO ANIMAL PROTECTION ISSUES BY POLICY-MAKERS, INDUSTRY, AND CIVIL SOCIETY AROUND THE WORLD.</p> <p>SOUTH FLORIDA WILDLIFE CENTER EIN #23-7086391 (SFWC), INCORPORATED IN 1969, HELPS ANIMALS IN SOUTH FLORIDA'S TRI-COUNTY REGION (PALM BEACH, BROWARD, AND MIAMI-DADE). PERSONNEL RESTORE MOBILITY AND FUNCTION TO INJURED WILDLIFE, PROVIDE REHABILITATIVE CARE IN ENRICHED, SPECIES-SPECIFIC HABITATS, AND WHENEVER FEASIBLE RELEASE REHABILITATED ANIMALS BACK INTO THE WILD. THEY ALSO TREAT AND PLACE DOMESTIC, EXOTIC AND FARM ANIMALS IN NEED; AND TEACH THE PUBLIC ABOUT LIVING IN HARMONY WITH WILDLIFE. IN 2020, SFWC WAS AN AFFILIATE OF THE HSUS UNTIL JULY 1, WHEN THE CENTER SEPARATED FROM THE HSUS AND BECAME AN INDEPENDENT ENTITY.</p> <p>THE HUMANE SOCIETY VETERINARY MEDICAL ASSOCIATION EIN #22-2768664 (HSVMA) PROMOTES VETERINARY LEADERSHIP IN ANIMAL ADVOCACY, PUBLIC EDUCATION AND DIRECT CARE FOR ANIMALS IN NEED. HSVMA'S PROGRAM AREAS INCLUDE COMMUNICATION, EDUCATIONAL, LEGISLATIVE AND REGULATORY EFFORTS, CONTINUING EDUCATION EVENTS FOCUSING ON ANIMAL WELFARE ISSUES, AND ADVOCATING FOR HUMANE ALTERNATIVES IN VETERINARY EDUCATION.</p> <p>PROJECT CHIMPS EIN #47-1439557 (PC) IS A SEPARATE 501(C)(3) ORGANIZATION FINANCIALLY SUPPORTED BY THE HSUS. THE HSUS DOES NOT EXERCISE DIRECT OPERATIONAL CONTROL OF PC. THE ORGANIZATION WAS FOUNDED IN 2014 TO ESTABLISH A SANCTUARY TO PROVIDE LIFETIME CARE FOR FORMER RESEARCH CHIMPANZEES. PROJECT CHIMPS HAS ENTERED INTO AN AGREEMENT WITH THE UNIVERSITY OF LOUISIANA'S NEW IBERIA RESEARCH CENTER TO, OVER TIME, RELOCATE THE CENTER'S PRIVATELY-OWNED CHIMPANZEE POPULATION, PREVIOUSLY USED FOR RESEARCH, TO PERMANENT HOUSING IN A SANCTUARY SETTING.</p>
FORM 990, PART I, LINE 1 - BRIEF MISSION	END THE CRUELEST PRACTICES TOWARD ANIMALS, RESCUE AND CARE FOR ANIMALS IN CRISIS, AND BUILD A STRONGER ANIMAL PROTECTION MOVEMENT.

Return Reference - Identifier	Explanation
FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION	<p>CONTINUED FROM PART III, LINE 1</p> <p>THE HSUS HELPS ANIMALS THROUGH CORPORATE REFORM, DIRECT CARE, DISASTER AND EMERGENCY RESPONSE, EDUCATION, FIELD WORK, INVESTIGATIONS, LITIGATION, RESEARCH AND TECHNICAL ANALYSIS, MEDIA OUTREACH, AND LEGISLATIVE AND POLICY INITIATIVES.</p> <p>OUR CURRENT PRIORITIES INCLUDE ELIMINATING THE EXTREME CONFINEMENT OF FARM ANIMALS, STOPPING THE INHUMANE MASS BREEDING OF PUPPIES IN PUPPY MILLS, AND ENDING COSMETICS TESTING, TROPHY HUNTING OF WILDLIFE AND THE KILLING OF ANIMALS FOR FUR.</p> <p>THE HSUS FOCUSES ON ENDING THE WORST FORMS OF INSTITUTIONALIZED ANIMAL SUFFERING. THIS WORK INVOLVES PUBLIC POLICY INITIATIVES, AND INCLUDES CONTACT WITH GOVERNMENTS, THE PRIVATE SECTOR AND MULTINATIONAL BODIES, PUBLIC AWARENESS CAMPAIGNS AND MORE. CORPORATE POLICY WORK ENCOMPASSES ACTIVITIES SUCH AS EXPANDING THE NUMBER AND SCOPE OF CORPORATE POLICIES CONCERNING THE TREATMENT OF ANIMALS, URGING CONSUMERS TO MODIFY THEIR SPENDING AND LIFESTYLE HABITS, AND PERSUADING THOUGHT LEADERS IN THE CORPORATE AND OTHER SECTORS TO ALIGN WITH HUMANE VALUES. FOR MORE DETAILED INFORMATION ON THE HSUS'S PROGRAMS, VISIT HUMANESOCIETY.ORG TO CONSULT OUR 2020 ANNUAL REPORT AND OTHER RESOURCES, OR SEE THE HSUS'S PROFILES ON THE WEBSITES OF GUIDESTAR, THE BBB WISE GIVING ALLIANCE AND OTHER CHARITY REVIEW ENTITIES.</p>
FORM 990, PART III, LINE 4A - EDUCATION AND ENGAGEMENT (CONTINUED)	<p>CONTINUED FROM PART III, LINE 4A</p> <p>IN ADDITION, THE HSUS DISTRIBUTES PRESS RELEASES, STATEMENTS, NEWS BRIEFS, OP-EDS, GUEST COLUMNS, AND LETTERS TO THE EDITOR TO PRINT AND DIGITAL OUTLETS. ITS CREATIVE DEPARTMENT CREATES PRINT AND ELECTRONIC MAGAZINES, BROCHURES, ADVERTISEMENTS, REPORTS, AND OTHER DOCUMENTS, INCLUDING ALL ANIMALS MAGAZINE AND ANIMAL SHELTERING MAGAZINE.</p> <p>THE HSUS HOSTS SEVERAL CONFERENCES AND EVENTS FOR ANIMAL ADVOCATES INCLUDING ANIMAL CARE EXPO, A GLOBAL PROFESSIONAL ANIMAL CARE AND SERVICES CONFERENCE, AND TAKING ACTION FOR ANIMALS (TAF), A BIENNIAL EVENT FOR ADVOCATES INTERESTED IN PUBLIC POLICY ENGAGEMENT. THE HSUS PIVOTED TO HOST BOTH EVENTS VIRTUALLY IN 2020.</p> <p>THE HSUS HELPS SHELTERS IMPROVE THEIR PROGRAMS FOR ANIMALS AND SAVE THE LIVES OF PETS AT RISK OF LOSING THEIR HOMES, PROVIDING EXPERT ADVICE, GUIDANCE AND TRAINING ON OPERATIONS, STANDARDS, AND BEST PRACTICES. ANIMAL SHELTERING MAGAZINE OFFERED COVERAGE OF BEST PRACTICES IN SHELTERING AND RESCUE; ANALYSIS OF TRENDS AND DEVELOPMENTS; INFORMATION ON TRAINING AND NETWORKING OPPORTUNITIES; A JOBS BOARD FOR THE INDUSTRY; A SHARED TRAINING AND EVENTS CALENDAR; AND AN ARCHIVE OF BACK ISSUES.</p> <p>IN 2020, THE HSUS TRAINED NEARLY 5,000 LAW ENFORCEMENT OFFICERS AND HUMANE PROFESSIONALS TO RECOGNIZE AND PREVENT ANIMAL CRUELTY IN THEIR COMMUNITIES. THE HSUS ALSO RESPONDED TO CRUELTY CASES INVOLVING THE RESCUE OF HUNDREDS OF ANIMALS AND HELPED TO SECURE PASSAGE OF 184 NEW ANIMAL PROTECTION LAWS-80 AT THE STATE LEVEL AND 104 AT THE LOCAL LEVEL.</p> <p>IN 2020, 86 ANIMAL CARE AND CONTROL AGENCIES/ORGANIZATIONS SIGNED THE WILD NEIGHBORS PLEDGE (A COMMITMENT TO USING HUMANE POLICIES AND PRACTICES FOR THE HANDLING OF WILDLIFE CONFLICTS), BRINGING THE HSUS'S TOTAL NUMBER OF PLEDGES SIGNED TO 295.</p> <p>THE HSUS TRAINED 1,500 ANIMAL CARE AND CONTROL PROFESSIONALS FROM 750 COMMUNITIES IN HUMANE SOLUTIONS FOR CONFLICTS WITH WILDLIFE.</p>

Return Reference - Identifier	Explanation
<p>FORM 990, PART III, LINE 4B - DIRECT CARE AND SERVICE (CONTINUED)</p>	<p>CONTINUED FROM PART III, LINE 4B</p> <p>A LARGE PORTION OF THE HSUS'S WORK ON DIRECT CARE AND SERVICE COMES VIA SUCH AFFILIATED ENTITIES AS THE FUND FOR ANIMALS AND HUMANE SOCIETY INTERNATIONAL, WHICH, TOGETHER, CARE FOR, RESCUE, REHABILITATE, AND PROTECT TENS OF THOUSANDS OF ANIMALS YEARLY. FOR FURTHER DETAILS, SEE ENTRIES CONCERNING THE FUND FOR ANIMALS AND HUMANE SOCIETY INTERNATIONAL ON SCHEDULE O; THE FUND FOR ANIMALS 2020 FORM 990; AND THE HUMANE SOCIETY INTERNATIONAL 2020 FORM 990.</p> <p>ANIMAL RESCUE WORK:</p> <p>IN 2020, THE HSUS ANIMAL RESCUE TEAM WAS INVOLVED IN 37 RESCUES, FIVE OF WHICH INVOLVED FIELD RESPONSE. OF THE TOTAL ANIMALS RESCUED FROM CRUELTY SITUATIONS, 614 WERE FROM PUPPY MILLS, 2,132 FROM ANIMAL FIGHTING OPERATIONS, AND 1,331 FROM HOARDING AND NEGLECT CASES. DURING THE YEAR, THE ANIMAL RESCUE TEAM ASSISTED AND/OR RELOCATED 417 ANIMALS IMPACTED BY NATURAL DISASTER.</p> <p>STAFF AND VOLUNTEERS CARED FOR AND REHABILITATED TRAUMATIZED DOGS RESCUED FROM THE SOUTH KOREAN DOG MEAT TRADE IN A CUSTOM-BUILT TEMPORARY SHELTER SET UP BY THE HSUS INSIDE AN UNUSED AIRLINE HANGAR IN MARYLAND. WHEN THEY WERE READY, THE DOGS WENT TO SHELTER AND RESCUE PARTNERS TO FIND LOVING HOMES.</p> <p>SUPPORTING SHELTERS AND PET OWNERS DURING COVID-19:</p> <p>THE HSUS GAVE \$1.4 MILLION IN EMERGENCY GRANTS TO 268 ANIMAL WELFARE ORGANIZATIONS SO THEY COULD CONTINUE TO HELP ANIMALS AND THEIR OWNERS WEATHER THE CHALLENGING ECONOMIC CONDITIONS CREATED BY COVID-19.</p> <p>IN 2020, THE PETS FOR LIFE (PFL) PROGRAM TRANSFORMED ITS USUAL METHODS OF ENGAGEMENT TO ENSURE THE SAFETY OF CLIENTS AND STAFF AND RESPOND TO URGENT NEEDS CREATED BY THE PANDEMIC. PFL PROVIDED OVER 760,000 POUNDS OF FOOD ACROSS THE COUNTRY IN 2020. IN THE FLAGSHIP MARKETS OF LOS ANGELES AND PHILADELPHIA, THE HSUS SERVED 5,041 PETS.</p> <p>IN PFL MENTORSHIP MARKETS OPERATED BY LOCAL GROUPS THAT HAVE RECEIVED FINANCIAL SUPPORT AND TRAINING, 18,547 PETS RECEIVED SUPPORT AND 72,372 SERVICES AND SUPPLIES WERE PROVIDED. THE HSUS HOSTED A SERIES OF WEBINARS AND TRAININGS ON THE PANDEMIC-DRIVEN EVICTION CRISIS AND PUBLISHED AN ONLINE TOOLKIT TO HELP ALLIES SUPPORT PET OWNERS FACING EVICTION, FUND NEW OR EXPANDED SERVICES, AND RAISE PUBLIC AWARENESS OF THE PROBLEM.</p> <p>THE HSUS PROVIDED FREE PET FOOD TO PEOPLE LIVING IN UNDERSERVED AREAS WITH HELP FROM A \$1 MILLION DONATION FROM CHEWY. THE PFL AND RURAL AREA VETERINARY SERVICES PROGRAMS DISTRIBUTED MORE THAN 4 MILLION POUNDS OF FOOD IN HARD-HIT COMMUNITIES AND RURAL AND REMOTE AREAS HELPING TO KEEP THOUSANDS OF PEOPLE AND PETS TOGETHER.</p> <p>THE HSUS HELPED ENSURE THAT EVERY U.S. STATE THAT ENACTED STAY-AT-HOME ORDERS ALSO DESIGNATED ANIMAL SHELTERS AND VETERINARY SERVICES AS ESSENTIAL, ENSURING PEOPLE AND THEIR PETS WOULD STILL HAVE ACCESS TO THESE CRITICAL SERVICES.</p> <p>REALIZING THE LIKELY EFFECT OF EMERGENCY PUBLIC HEALTH MEASURES ON SPAY/NEUTER SURGERIES, THE HSUS LED A COALITION OF MORE THAN 25 NONPROFIT ORGANIZATIONS IN #SPAYTOGETHER, A \$2.4 MILLION STIMULUS FUND THAT HELPED MORE THAN 250 ANIMAL SHELTERS AND SPAY/NEUTER CLINICS PERFORM MORE THAN 75,000 FAST-TRACKED, HIGH-QUALITY, LIFESAVING SPAY/NEUTER PROCEDURES.</p> <p>IN FEBRUARY, THE HSUS COMPLETED ROUND 6 OF SPAYATHON FOR PUERTO RICO, A HIGH QUALITY, HIGH-VOLUME FREE SPAY/NEUTER INITIATIVE TO ADDRESS THE SEVERE OVERPOPULATION OF UNOWNED CATS AND DOGS IN THE COMMONWEALTH. SINCE 2018, AND IN CONJUNCTION WITH OTHER HSUS-SPONSORED SPAY/NEUTER CLINICS, THE HSUS HAS ALTERED AND VACCINATED MORE THAN 56,000 PETS ACROSS THE ISLAND AT NO COST TO THEIR OWNERS, PREVENTING HUNDREDS OF THOUSANDS OF LITTERS.</p>

Return Reference - Identifier	Explanation
<p>FORM 990, PART III, LINE 4C - PUBLIC POLICY AND ENFORCEMENT (CONTINUED)</p>	<p>CONTINUED FROM PART III, LINE 4C (1 OF 2)</p> <p>THE HSUS ALSO HELPED TO MAINTAIN THE PROHIBITION ON THE SLAUGHTER OF AMERICAN HORSES FOR CONSUMPTION ABROAD AND GAINED ADDITIONAL FUNDING FOR ENFORCEMENT OF THE HORSE PROTECTION ACT TO PREVENT THE SORING OF HORSES IN THE TENNESSEE WALKING HORSE INDUSTRY.</p> <p>FARM ANIMAL WELFARE:</p> <p>THE HSUS WON A CAMPAIGN TO SECURE PASSAGE OF A STATE LAW BANNING THE CONFINEMENT OF EGG-LAYING HENS AND THE SALE OF EGGS FROM CAGED CHICKENS, SAVING SOME 6 MILLION BIRDS PER YEAR FROM THE MISERY OF EXTREME CONFINEMENT AND BRINGING TO 12 THE NUMBER OF STATES WHERE LAWS HAVE BEEN PASSED AGAINST EXTREME CONFINEMENT.</p> <p>THE HSUS HELPED DEFEAT CHALLENGES TO PROPOSITION 12, THE LANDMARK CALIFORNIA BALLOT MEASURE THAT OUTLAWED THE EXTREME CONFINEMENT OF EGG-LAYING HENS, MOTHER PIGS, AND CALVES USED FOR VEAL, AND STOPS THE SALE OF PRODUCTS FROM INTENSIVELY CONFINED ANIMALS NO MATTER WHERE THEY WERE RAISED.</p> <p>STOPPING PUPPY MILLS:</p> <p>THE HSUS'S ANNUAL REPORT ON PUPPY MILLS IN AMERICA AGAIN EXPOSED THE SUFFERING BEHIND "THAT DOGGIE IN THE WINDOW," AND AUTHORITIES IN SEVERAL STATES TOOK LEGAL ACTION AGAINST BREEDERS THE REPORT NAMED.</p> <p>THE USDA FINALIZED A NEW RULE, REQUIRING COMMERCIAL BREEDERS TO GIVE DOGS REGULAR VETERINARY CARE AND VACCINATIONS, PROVIDE A CONSTANT SOURCE OF FRESH WATER AND DEMONSTRATE COMPLIANCE WITH THE ANIMAL WELFARE ACT BEFORE OBTAINING A NEW LICENSE.</p> <p>LAWS TO PROHIBIT THE SALE OF PUPPY MILL PUPPIES IN PET STORES TOOK EFFECT IN MAINE AND MARYLAND. CALIFORNIA CLOSED A LOOPHOLE THAT PET STORES WERE USING TO SELL BREEDER PUPPIES AS RESCUED DOGS. IOWA ENACTED STRONGER REGULATIONS ON PUPPY MILLS AND NOW REQUIRES COMMERCIAL BREEDERS AND SELLERS TO COMPLY WITH HIGHER STANDARDS OF CARE.</p> <p>THE HSUS FOUGHT OFF PET STORE PREEMPTION BILLS THAT SOUGHT TO VOID LOCAL ORDINANCES BANNING THE SALE OF PUPPY MILL DOGS IN PET STORES IN ALABAMA, FLORIDA, ILLINOIS, IOWA, KANSAS, AND OKLAHOMA.</p> <p>THE USDA RESTORED THOUSANDS OF UNREDACTED PUPPY MILL INSPECTION REPORTS TO ITS PUBLIC WEBSITE AT THE DIRECTION OF CONGRESS, ENDING A THREE-YEAR BLACKOUT.</p> <p>MORE THAN 30 LOCALITIES PASSED ORDINANCES PROHIBITING THE SALE OF COMMERCIALY RAISED DOGS AND CATS IN PET STORES. THE HSUS'S NATIONWIDE ORDINANCE TOTAL NOW STANDS AT 377.</p> <p>THE HSUS'S LEGAL TEAM SUCCESSFULLY DEFEATED AN ATTEMPT BY PUPPYFIND.COM, AN ONLINE PUPPY MARKETPLACE THAT PROMOTES THE SALE OF PUPPY MILL PUPPIES, TO AVOID A CONSUMER PROTECTION LAWSUIT FILED AGAINST IT FOR MISLEADING CONSUMERS.</p> <p>WINS FOR WILDLIFE:</p> <p>THE HSUS WON ITS LEGAL BATTLE TO KEEP GRIZZLY BEARS IN THE GREATER YELLOWSTONE ECOSYSTEM PROTECTED FROM TROPHY HUNTING BY GETTING THE BEARS RELISTED UNDER THE ENDANGERED SPECIES ACT.</p> <p>COLORADO AND WASHINGTON STATE BANNED WILDLIFE KILLING CONTESTS, BRINGING TO SEVEN THE NUMBER OF STATEWIDE BANS ON THIS PRACTICE. THE HSUS CONDUCTED THREE UNDERCOVER INVESTIGATIONS INTO WILDLIFE KILLING CONTESTS AND PUBLICLY RELEASED THE RESULTING VIDEO AND PICTURES: SCORES OF DEAD ANIMALS, THEIR BODIES STACKED IN PILES OR DISCARDED AS TRASH.</p> <p>TROPHY HUNTERS ARE PROHIBITED FROM LURING BROWN BEARS WITH DOUGHNUTS, DOG FOOD AND FOOD WASTE TO BAIT SITES AND CERTAIN DEATH IN ALASKA'S KENAI NATIONAL WILDLIFE REFUGE, THANKS TO A FEDERAL COURT CASE THE HSUS HELPED WIN.</p> <p>AS A RESULT OF THE UNDERCOVER INVESTIGATION INTO THE IVORY MARKET IN WASHINGTON, D.C., THE CITY PASSED A LAW PROHIBITING THE ELEPHANT IVORY AND RHINO HORN TRADE. A NEW VERMONT LAW BANNED THE SALE OF PRODUCTS FROM IMPERILED SPECIES, INCLUDING ELEPHANT IVORY, RHINOCEROS HORN, AND PARTS FROM LEOPARDS, SEA TURTLES AND GIRAFFES.</p>



Return Reference - Identifier	Explanation
FORM 990, PART III, LINE 4C - PUBLIC POLICY AND ENFORCEMENT (CONTINUED)	<p>CONTINUED FROM PART III, LINE 4C (2 OF 2)</p> <p>HUMAN-WILDLIFE CONFLICT RESOLUTION:</p> <p>THE HSUS'S RESEARCH PROJECT WITH TUFTS UNIVERSITY SEEKS TO ADVANCE A HUMANE FERTILITY CONTROL TOOL FOR DEER, THE PZP IMMUNOCONTRACEPTIVE VACCINE, TO STABILIZE AND REDUCE DEER NUMBERS IN URBAN COMMUNITIES. IN 2020, OBSERVATIONS WERE COMPLETED ON FAWNING RATES AND SEASONAL DEER MOVEMENT IN A NEW YORK PILOT PROJECT.</p> <p>THE PLATERO PROJECT, A COLLABORATION BETWEEN THE HSUS AND BUREAU OF LAND MANAGEMENT, EXAMINES THE REPRODUCTIVE, HEALTH AND BEHAVIORAL IMPACTS OF PZP ON A GROUP OF WILD BURROS IN NORTHERN ARIZONA, EVALUATING THE FEASIBILITY AND LOGISTICS OF USING PZP TO MANAGE WILD BURRO POPULATIONS ON A LARGE SCALE ON THE WESTERN RANGE. IN 2020, THE HSUS COMPLETED FIELD OBSERVATIONS AND DATA COLLECTION FOR FEMALE BURROS AND SUCCESSFULLY DELIVERED REMOTE BOOSTERS BY DART.</p>
FORM 990, PART III, LINE 4D - DESCRIPTION OF OTHER PROGRAM SERVICES	<p>(EXPENSES \$2,640,382 INCLUDING GRANTS OF \$170,075)(REVENUE \$95,302)</p> <p>CORPORATE POLICY</p>
FORM 990, PART III, LINE 4D - DESCRIPTION OF OTHER PROGRAM SERVICES	<p>CORPORATE POLICY</p> <p>THE WORK OF CORPORATE POLICY ENCOMPASSES ACTIVITIES SUCH AS EXPANDING THE SCOPE OF CORPORATE POLICIES CONCERNING THE TREATMENT OF ANIMALS, URGING CONSUMERS TO MODIFY THEIR SPENDING AND LIFESTYLE HABITS, AND PERSUADING THOUGHT LEADERS IN THE CORPORATE AND OTHER SECTORS TO ALIGN WITH HUMANE VALUES.</p> <p>FARM ANIMAL WELFARE:</p> <p>CAL-MAINE FOODS, THE WORLD'S LARGEST EGG PRODUCER, ANNOUNCED THAT THE HSUS'S CAMPAIGNS AGAINST EXTREME CONFINEMENT LED IT TO INVEST \$310 MILLION IN CAGE-FREE FACILITIES.</p> <p>THE HSUS PERSUADED AHOLD DELHAIZE, THE FOURTH LARGEST GROCERY COMPANY IN THE U.S., TO ELIMINATE THE USE OF CHICKEN CAGES AND SOW GESTATION CRATES BY 2025 OR SOONER.</p> <p>THE WORK WITH FRESH IDEAS, ONE OF AMERICA'S BIGGEST COLLEGE AND UNIVERSITY FOOD SERVICE COMPANIES, LED IT TO PLEDGE TO OFFER AN EQUAL NUMBER OF PLANT-BASED AND ANIMAL-BASED ENTREES AT EVERY FOOD STATION IN CAFETERIAS AT THE 40 CAMPUSES AND OTHER INSTITUTIONS IT SERVES.</p> <p>THE HSUS'S AUDIT OF THE PRACTICES AND PROMISES OF 90 OF THE LARGEST U.S. FOOD COMPANIES LED TO THE FIRST FOOD INDUSTRY SCORECARD, WHICH HOLDS CORPORATIONS ACCOUNTABLE FOR THEIR ANIMAL WELFARE PLEDGES. THE SCORECARD'S RELEASE PUSHED MCDONALD'S, JACK IN THE BOX, AND STARBUCKS TO TAKE TANGIBLE, MEANINGFUL STEPS TOWARD THEIR PLEDGES TO SWITCH TO 100% CAGE-FREE EGGS.</p> <p>ANIMALS IN RESEARCH AND TESTING:</p> <p>THE HSUS PERSUADED 48 MORE COSMETICS COMPANIES TO ENDORSE THE FEDERAL HUMANE COSMETICS ACT, WHICH, WITH SOME EXCEPTIONS, WOULD END ALL ANIMAL TESTING FOR COSMETIC PRODUCTS AND INGREDIENTS IN THE U.S. AND PROHIBIT THE IMPORT OF COSMETICS THAT HAVE BEEN TESTED ON ANIMALS ANYWHERE IN THE WORLD.</p> <p>ENDING THE USE OF FUR:</p> <p>IN PARTNERSHIP WITH THE HSUS, NORDSTROM, ONE OF AMERICA'S LARGEST LUXURY FASHION RETAILERS, ANNOUNCED IT WILL STOP SELLING PRODUCTS MADE WITH FUR AND EXOTIC ANIMAL SKINS BY THE END OF 2021.</p> <p>WELLESLEY, MASSACHUSETTS, BECAME THE FIRST U.S. CITY OUTSIDE CALIFORNIA TO BAN NEW FUR SALES WHEN THE TOWN COUNCIL APPROVED A MEASURE PROPOSED BY A LOCAL HSUS VOLUNTEER.</p> <p>THE HSUS'S LEGAL TEAM HELPED WIN DISMISSAL OF A CHALLENGE FILED IN FEDERAL COURT BY THE INTERNATIONAL FUR FEDERATION TO SAN FRANCISCO'S BAN ON FUR SALES.</p>
FORM 990, PART V, LINE 3B - REASON FOR NOT FILING FORM 990-T	<p>THE ORGANIZATION IS AWAITING RECEIPT OF CERTAIN K-1'S RELATED TO INVESTMENT INCOME THAT ARE NEEDED TO COMPLETE THE ORGANIZATION'S FORM 990-T.</p>
FORM 990, PART VI, LINE 1A - DELEGATE BROAD AUTHORITY TO A COMMITTEE	<p>THE HSUS'S BYLAWS PERMIT THE BOARD OF DIRECTORS TO ESTABLISH AN EXECUTIVE COMMITTEE. PURSUANT TO THE BYLAWS, THE EXECUTIVE COMMITTEE HAS AND MAY EXERCISE ALL THE POWERS OF THE BOARD WHEN THE BOARD IS NOT IN SESSION EXCEPT (1) THE POWER TO APPROVE OR ADOPT, OR RECOMMEND TO THE MANAGING MEMBERS, ANY ACTION OR MATTER (OTHER THAN THE ELECTION OR REMOVAL OF DIRECTORS) EXPRESSLY REQUIRED BY DELAWARE LAW TO BE SUBMITTED TO THE MANAGING MEMBERS FOR APPROVAL; (2) THE POWER TO AMEND, ADOPT, OR REPEAL THE BYLAWS; (3) THE POWER TO ELECT AND REMOVE OFFICERS; AND (4) SUCH POWERS AS THE BOARD MAY SPECIFICALLY RESERVE TO ITSELF OR MAY BE SPECIFICALLY ASSIGNED TO ANY OTHER BOARD COMMITTEE OR OFFICER. THE EXECUTIVE COMMITTEE CONSISTS OF THE BOARD CHAIR, THE CHAIRS OF THE BOARD'S SIX OTHER STANDING COMMITTEES, AND ONE AT-LARGE MEMBER (WHO IS A DIRECTOR), IF APPOINTED BY THE BOARD IN ITS DISCRETION.</p>

Return Reference - Identifier	Explanation					
FORM 990, PART VI, LINE 2 - FAMILY/BUSINESS RELATIONSHIPS AMONGST INTERESTED PERSONS	OFFICERS BLOCK, KARL, PARRA, PAQUETTE, AND WAITE, AND KEY EMPLOYEE DINN, WERE EMPLOYED BY HSUS ALONG WITH OTHER AFFILIATED TAX-EXEMPT ORGANIZATIONS ON WHOSE BOARD HSUS DIRECTORS ATHERTON, BRADHAM, FANG, KISLAK, LAUE, LINEHAN, MCMILLEN, PERELMAN, SABATINO, AND WHITE SERVED. THEREFORE, THESE INDIVIDUALS HAD "BUSINESS RELATIONSHIPS" WITH EACH OTHER. - BUSINESS RELATIONSHIP					
FORM 990, PART VI, LINE 11B - REVIEW OF FORM 990 BY GOVERNING BODY	AFTER THE HSUS'S INTERNAL ACCOUNTING STAFF DRAFTS THE 990, THE DRAFT IS SUBMITTED TO THE HSUS'S CORPORATE OFFICERS AND OUTSIDE INDEPENDENT TAX PREPARERS FOR THEIR REVIEW, REACTION, AND REVISION. ADDITIONALLY, THE HSUS'S TREASURER/CFO, WHO IS AN OFFICER, AND THE BOARD'S AUDIT COMMITTEE CONDUCT A FURTHER REVIEW OF AN ADVANCED OR FINAL DRAFT. PRIOR TO FILING WITH THE IRS, THE FINALIZED FORM 990 IS DISTRIBUTED TO ALL MEMBERS OF THE BOARD FOR THEIR REVIEW AND COMMENTS.					
FORM 990, PART VI, LINE 12C - CONFLICT OF INTEREST POLICY	THE HSUS'S CONFLICT OF INTEREST POLICY APPLIES TO ALL DIRECTORS, OFFICERS, AND EMPLOYEES OF THE HSUS. THE POLICY IS INCORPORATED IN THE HSUS'S EMPLOYEE HANDBOOK, WHICH ALL EMPLOYEES (INCLUDING OFFICERS) RECEIVE UPON JOINING THE ORGANIZATION, AND THE BOARD MANUAL, WHICH ALL DIRECTORS RECEIVE UPON JOINING THE BOARD. THE POLICY IS ALSO COVERED IN ORIENTATION SESSIONS FOR NEW BOARD DIRECTORS. ADDITIONALLY, A QUESTIONNAIRE IS DISTRIBUTED TO DIRECTORS, OFFICERS, AND KEY EMPLOYEES ON AN ANNUAL BASIS IN ORDER TO ASCERTAIN THE PRESENCE OF ANY CONFLICTS AND ENABLE THE ORGANIZATION TO ANSWER PART VI, LINES 1B AND 2. THE QUESTIONNAIRES ARE COMPLETED, SIGNED, AND RETURNED TO THE CORPORATE SECRETARY, WHO NOTIFIES THE GENERAL COUNSEL OF ANY CONCERNS. A COMMITTEE OF THE BOARD OF DIRECTORS--THE GOVERNANCE COMMITTEE--IS CHARGED WITH CONSIDERING CONFLICTS OF INTEREST INVOLVING DIRECTORS AND OFFICERS. INDIVIDUALS HAVING POSSIBLE CONFLICTS OF INTEREST CANNOT VOTE, PARTICIPATE IN COMMITTEE DELIBERATIONS ON THE SUBJECT, OR BE COUNTED TOWARD MEETING A QUORUM (THEY MAY ANSWER QUESTIONS). CONFLICTS OF INTEREST INVOLVING NON-OFFICER EMPLOYEES ARE REVIEWED BY THE GENERAL COUNSEL.					
FORM 990, PART VI, LINE 15A - PROCESS TO ESTABLISH COMPENSATION OF TOP MANAGEMENT OFFICIAL	A COMMITTEE OF THE BOARD OF DIRECTORS, THE HUMAN RESOURCES COMMITTEE ("HR COMMITTEE"), IS CHARGED WITH ANNUALLY LEADING THE COMPENSATION DETERMINATION PROCESS FOR THE PRESIDENT/CEO. THE HR COMMITTEE MAKES A RECOMMENDATION TO THE BOARD OF DIRECTORS ABOUT THE PRESIDENT/CEO'S JOB PERFORMANCE AND COMPENSATION, EACH OF WHICH MUST BE APPROVED BY THE FULL BOARD. IN ACCORDANCE WITH THE "SAFE HARBOR" PROVISIONS OF TREAS. REG. 53.4958-6, THE PROCESS OF DETERMINING THE PRESIDENT/CEO'S COMPENSATION INVOLVES ATTENTION TO AND AVOIDANCE OF CONFLICTS OF INTEREST, USE OF COMPARABILITY DATA GATHERED AND PRESENTED BY AN OUTSIDE COMPENSATION EXPERT, AND CONTEMPORANEOUS DOCUMENTATION OF THE MEETINGS, DELIBERATIONS, AND DECISIONS. THIS PROCESS, WHICH IS COMPLETED ANNUALLY, WAS UNDERTAKEN FOR THE TAX YEAR IN MAY 2020.					
FORM 990, PART VI, LINE 15B - PROCESS TO ESTABLISH COMPENSATION OF OTHER OFFICERS OR KEY EMPLOYEES	THE BOARD OF DIRECTORS DETERMINES THE COMPENSATION FOR THE HSUS'S "EXECUTIVE MANAGEMENT" (I.E., THE TREASURER/CFO, COO, GENERAL COUNSEL/CLO, CHIEF DEVELOPMENT & MARKETING OFFICER, CHIEF PROGRAMS & POLICY OFFICER, AND THE CHIEF PEOPLE OFFICER) AS WELL AS ANY OTHER INDIVIDUALS DEEMED TO BE "DISQUALIFIED PERSONS" UNDER SECTION 4958 OF THE INTERNAL REVENUE CODE. THE BOARD'S HR COMMITTEE REVIEWS THE PERFORMANCE REVIEWS OF EXECUTIVE MANAGEMENT AND OTHER DISQUALIFIED PERSONS, AS WELL AS THE PRESIDENT/CEO'S RECOMMENDED COMPENSATION FOR SUCH INDIVIDUALS. THE HR COMMITTEE THEN RECOMMENDS THE APPROPRIATE COMPENSATION TO THE FULL BOARD FOR APPROVAL. IN ACCORDANCE WITH THE "SAFE HARBOR" PROVISIONS OF TREAS. REG. 53.4958-6, THE BOARD PROCESS FOR DETERMINING COMPENSATION FOR THE HSUS'S EXECUTIVE MANAGEMENT AND DISQUALIFIED PERSONS INVOLVES ATTENTION TO AND AVOIDANCE OF CONFLICTS OF INTEREST, USE OF COMPARABILITY DATA GATHERED AND PRESENTED BY AN OUTSIDE COMPENSATION EXPERT, AND CONTEMPORANEOUS DOCUMENTATION OF THE MEETINGS, DELIBERATIONS, AND DECISIONS. THIS PROCESS, WHICH IS COMPLETED ANNUALLY, WAS UNDERTAKEN FOR THE TAX YEAR IN MAY 2020.					
FORM 990, PART VI, LINE 17 - STATES WITH WHICH A COPY OF THIS FORM 990 IS REQUIRED TO BE FILED	GA, HI, IL, KS, KY, MA, MD, MI, MN, MS, NC, NH, NJ, NM, NY, OR, PA, RI, SC, TN, UT, VA, WI, WV					
FORM 990, PART VI, LINE 19 - REQUIRED DOCUMENTS AVAILABLE TO THE PUBLIC	THE HSUS MAKES COPIES OF ITS CERTIFICATE OF INCORPORATION AND BYLAWS AVAILABLE UPON REQUEST. THE FORMAL AUDITED FINANCIAL STATEMENTS ARE POSTED ON HSUS'S WEBSITE, ARE FILED WITH STATE CHARITABLE SOLICITATION REGISTRATIONS, AND PROVIDED TO CALIFORNIA RESIDENTS, AND TO MAJOR DONORS AND THEIR REPRESENTATIVES, BY MAIL, UPON REQUEST (FINANCIAL INFORMATION IN OTHER FORMATS - E.G., THE FORM 990 AND THE ANNUAL REPORT - IS AVAILABLE ON THE HSUS'S WEBSITE AND WILL ALSO BE MAILED, ON REQUEST, AS SET FORTH IN IRS CODE SECTION 6104(D)). THE CONFLICT OF INTEREST POLICY WAS NOT MADE AVAILABLE TO THE PUBLIC DURING THE TAX YEAR.					
FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS OR FUND BALANCES	<table border="1" style="width: 100%;"> <thead> <tr> <th data-bbox="467 1692 1304 1719">(a) Description</th> <th data-bbox="1312 1692 1513 1719">(b) Amount</th> </tr> </thead> <tbody> <tr> <td data-bbox="467 1730 1304 1753">OTHER</td> <td data-bbox="1312 1730 1513 1753" style="text-align: right;">- 22,357</td> </tr> </tbody> </table>		(a) Description	(b) Amount	OTHER	- 22,357
	(a) Description	(b) Amount				
OTHER	- 22,357					

Return Reference - Identifier	Explanation
GENERAL NOTE - JOINT COST ALLOCATIONS	<p>FOR MANY YEARS, HSUS HAS RELIED ON DIRECT MAIL, EMAIL, TELEPHONE AND OTHER MEANS OF SOLICITATION TO RECRUIT, EXPAND AND MAINTAIN ITS MEMBERSHIP. DIRECT MARKETING AND OTHER DONOR CHANNELS ALLOW THE HSUS TO SHARE SPECIFIC DETAILS ABOUT RECENT ACCOMPLISHMENTS AND TO PROVIDE INFORMATION ABOUT CURRENT CAMPAIGNS AND PRIORITIES TO MILLIONS OF SUPPORTERS. THE HSUS ALSO USES POSTAL MAIL -- AND OTHER CHANNELS -- TO EDUCATE AND TO CALL THE PUBLIC TO ACTION TO ADVANCE ITS MISSION AND LIFESAVING WORK FOR ANIMALS.</p> <p>THIS IS WHY, IN ACCORDANCE WITH FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) GUIDELINES, THE HSUS ALLOCATES A PORTION OF ITS DIRECT MAIL, EMAIL, PHONE AND OTHER COMMUNICATION COSTS TO PROGRAM SERVICES AND TO FUNDRAISING. SUCH COSTS ARE ALLOCATED TO EACH MAJOR PROGRAM, INCLUDING -</p> <p>1)EDUCATION AND ENGAGEMENT - THE HSUS REACHES TENS OF MILLIONS OF PEOPLE THROUGH ITS WEBSITE AND SOCIAL MEDIA PLATFORMS, AWARD-WINNING VIDEOS AND MAGAZINES, TRAINING AND EDUCATIONAL CONFERENCES FOR ANIMAL ADVOCATES, NATIONAL MEDIA COVERAGE AND MORE.</p> <p>2)PUBLIC POLICY AND ENFORCEMENT - THE HSUS SEEKS TO STRENGTHEN LEGAL PROTECTIONS FOR ANIMALS AT THE LOCAL, STATE AND NATIONAL LEVELS. THE HSUS DEFENDS THEIR VICTORIES IN COURT AND TRAINS THOUSANDS OF LAW ENFORCEMENT OFFICERS TO INVESTIGATE AND PROSECUTE ANIMAL CRUELTY.</p> <p>3)DIRECT CARE AND SERVICE - THE HSUS AND ITS AFFILIATES PROVIDE HANDS-ON CARE FOR MORE THAN 100,000 ANIMALS EVERY YEAR, INCLUDING HORSES, COMPANION ANIMALS AND WILDLIFE. THE HSUS RESPONDS TO MAJOR CRUELTY CASES, SAVES ANIMALS FROM THE DOG MEAT TRADE, TAKES IN WILD EXOTICS CONFISCATED FROM IRRESPONSIBLE PERSONS, PROVIDES RELIEF TO ANIMALS DURING DISASTERS, RESCUES ANIMALS FROM ANIMAL FIGHTING RINGS, ARRANGES VETERINARY CARE AND SPAY/NEUTER SERVICES FOR PETS IN UNDERSERVED COMMUNITIES, AND MUCH MORE.</p> <p>4)CORPORATE POLICY - THE HSUS WORKS WITH THE WORLD'S BIGGEST FOOD COMPANIES, COSMETICS MANUFACTURERS, FASHION BRANDS, AND OTHER INDUSTRY LEADERS TO IMPROVE THE TREATMENT OF ANIMALS IN THEIR SECTORS.</p>

**SCHEDULE R  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
**THE HUMANE SOCIETY OF THE UNITED STATES**

**Related Organizations and Unrelated Partnerships**

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

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020**

**Open to Public Inspection**

Employer identification number  
**53-0225390**

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) .....					
(2) .....					
(3) .....					
(4) .....					
(5) .....					
(6) .....					

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) (SEE STATEMENT) .....							
(2) .....							
(3) .....							
(4) .....							
(5) .....							
(6) .....							
(7) .....							

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512–514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) (SEE STATEMENT)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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

**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

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

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
DORIS DAY ANIMAL LEAGUE	R	958,029	CASH TRANSFERS
<b>(1)</b> DORIS DAY ANIMAL LEAGUE	S	1,829,053	CASH TRANSFERS
<b>(2)</b> DORIS DAY ANIMAL LEAGUE	Q	880,340	ACTUAL COSTS INCURRED
<b>(3)</b> HUMANE SOCIETY INTERNATIONAL	R	821,847	CASH TRANSFERS
<b>(4)</b> HUMANE SOCIETY INTERNATIONAL	S	4,418,972	CASH TRANSFERS
<b>(5)</b> (SEE STATEMENT)			
<b>(6)</b>			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1) .....													
(2) .....													
(3) .....													
(4) .....													
(5) .....													
(6) .....													
(7) .....													
(8) .....													
(9) .....													
(10) .....													
(11) .....													
(12) .....													
(13) .....													
(14) .....													
(15) .....													
(16) .....													

**Part II**

**Identification of Related Tax-Exempt Organizations** (continued)

(a) Name, address and EIN of related organization	(b) Primary Activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) DORIS DAY ANIMAL LEAGUE (95-4117651) 1255 23RD STREET, NW SUITE 450, WASHINGTON, DC 20037	ANIMAL WELFARE	CA	501(C)(4)		THE HUMANE SOCIETY OF THE U.S.	✓	
(2) FRIENDS OF HUMANE SOCIETY INTERNATIONAL FOR THE PROTECTION AND CONSERVATION OF ANIMALS 4035 SAINT AMBROISE STREET, SUITE 320, MONTREAL, QUEBEC, H4C2E1, CA	ANIMAL WELFARE	CANADA			THE HUMANE SOCIETY OF THE U.S.	✓	
(3) HUMANE SOCIETY INTERNATIONAL (52-1769464) 1255 23RD STREET, NW SUITE 450, WASHINGTON, DC 20037	ANIMAL WELFARE	DC	501(C)(3)	7	THE HUMANE SOCIETY OF THE U.S.	✓	
(4) HUMANE SOCIETY INTERNATIONAL/CANADA 4035 SAINT AMBROISE STREET, SUITE 320, MONTREAL, QUEBEC, H4C2E1, CA	ANIMAL WELFARE	CANADA			THE HUMANE SOCIETY OF THE U.S.	✓	
(5) HUMANE SOCIETY INTERNATIONAL:INDIA REGUS 5TH & 6TH FLOOR, MAFATLAL HOUSE (BUILDING), HT PAREKH MARG BACKBAY RECLAMATION, MUMBAI, 400020, IN	ANIMAL WELFARE	INDIA			THE HUMANE SOCIETY OF THE U.S.	✓	
(6) ASSOCIATION HUMANE SOCIETY INTERNATIONAL -LATIN AMERICA BARRIO ESCALANTE, 100 MTS ESTE Y NORTE, CASA #951, SAN JOSE, 11501, CS	ANIMAL WELFARE	COSTA RICA			THE HUMANE SOCIETY OF THE U.S.	✓	
(7) HUMANE SOCIETY INTERNATIONAL (UK) 5 UNDERWOOD STREET, LONDON, N1 7LY, UK	ANIMAL WELFARE	UNITED KINGDOM (ENGLAND, NORTHERN IRELAND, SCOTLAND, AND WALES)			THE HUMANE SOCIETY OF THE U.S.	✓	
(8) HUMANE SOCIETY OF THE UNITED STATES CALIFORNIA BRANCH (94-6050420) 1255 23RD STREET, NW SUITE 450, WASHINGTON, DC 20037	ANIMAL WELFARE	CA	501(C)(3)	7	THE HUMANE SOCIETY OF THE U.S.	✓	
(9) HUMANE SOCIETY OF THE UNITED STATES NEW JERSEY BRANCH, INC. (22-1671626) 1255 23RD STREET, NW SUITE 450, WASHINGTON, DC 20037	ANIMAL WELFARE	NJ	501(C)(3)	7	THE HUMANE SOCIETY OF THE U.S.	✓	
(10) HUMANE SOCIETY VETERINARY MEDICAL ASSOCIATION, INC. (22-2768664) 1255 23RD STREET, NW SUITE 450, WASHINGTON, DC 20037	ANIMAL WELFARE	NY	501(C)(3)	7	THE HUMANE SOCIETY OF THE U.S.	✓	
(11) SOUTH FLORIDA WILDLIFE CENTER, INC. (23-7086391) 3200 SW 4TH AVENUE, FORT LAUDERDALE, FL 33315	ANIMAL WELFARE	FL	501(C)(3)	10	THE HUMANE SOCIETY OF THE U.S.	✓	
(12) THE FUND FOR ANIMALS (13-6218740) 1255 23RD STREET, NW SUITE 460, WASHINGTON, DC 20037	ANIMAL WELFARE	NY	501(C)(3)	7	THE HUMANE SOCIETY OF THE U.S.	✓	
(13) THE HUMANE SOCIETY WILDLIFE LAND TRUST (52-1808517) 1255 23RD STREET, NW SUITE 450, WASHINGTON, DC 20037	ANIMAL WELFARE	DC	501(C)(3)	7	THE HUMANE SOCIETY OF THE U.S.	✓	
(14) HUMANE SOCIETY INTERNATIONAL - EUROPE AVENUE DES ARTS 50, 1000 BRUSSELS, BE	ANIMAL WELFARE	BELGIUM			THE HUMANE SOCIETY OF THE U.S.	✓	
(15) PROJECT CHIMPS (47-1439557) P.O. BOX 2140, BLUE RIDGE, GA 30513	ANIMAL WELFARE	OR	501(C)(3)	7	THE HUMANE SOCIETY OF THE U.S.	✓	



(a) Name, address and EIN of related organization	(b) Primary Activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(16) HUMANE SOCIETY INTERNATIONAL MEXICO, A.C. VICENTE SUAREZ 73, COLONIA CONDESA, DELEGACION CUAUHTEMOC, MEXICO CITY, 06140, MX	ANIMAL WELFARE	MEXICO			THE HUMANE SOCIETY OF THE U.S.	✓	
(17) HUMANE SOCIETY INTERNATIONAL - AFRICA GROUND FLOOR, STATE STREET HOUSE, RIVER PARK - GLOUCESTER ROAD, MOWBRAY, CAPE TOWN, 7700, SF	ANIMAL WELFARE	SOUTH AFRICA			THE HUMANE SOCIETY OF THE U.S.	✓	
(18) HUMANE SOCIETY LEGISLATIVE FUND (59-3786428) 1255 23RD STREET, NW, SUITE 455, WASHINGTON, DC 20037	ANIMAL WELFARE	DC	501(C)(4)		THE HUMANE SOCIETY OF THE U.S.	✓	
(19) HUMANE SOCIETY LEGISLATIVE FUND POLITICAL ACTION COMMITTEE (27-0906603) 1255 23RD STREET, NW, SUITE 455, WASHINGTON, DC 20037	POLITICAL ACTION COMMITTEE	DC	527 POL. ORG.		HUMANE SOCIETY LEGISLATIVE FUND	✓	
(20) HUMANE SOCIETY INTERNATIONAL KOREA POSCO P&S TOWER 16F & 17F, TEHERANRO 134, GANGNAMGU, SEOUL, KS	ANIMAL WELFARE	KOREA, REPUBLIC OF (SOUTH)			THE HUMANE SOCIETY OF THE U.S.	✓	
(21) HUMANE SOCIETY INTERNATIONAL LIBERIA, INC. HERITAGE HOUSE, 1 HERITAGE DRIVE, P. O. BOX 10-1760, CONGO TOWN, LI	ANIMAL WELFARE	LIBERIA			THE HUMANE SOCIETY OF THE U.S.	✓	

**Part III**

**Identification of Related Organizations Taxable as a Partnership** (continued)

(a) Name, address and EIN of related organization	(b) Primary Activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income related, unrelated, excluded from tax under sections 512-514	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) UNITED STATES OF ANIMALS, LLC (47-4252115) 311 BOWIE STREET, STE 800, AUSTIN, TX 78703	WELFARE OF FARM ANIMALS	TX	THE HUMANE SOCIETY OF THE UNITED STATES	UNRELATED	3,994	7,493		✓	N/A	✓		42.83

**Part V**

**Transactions with Related Organizations** (continued)

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount Involved	(d) Method of determining amount involved
(6) HUMANE SOCIETY INTERNATIONAL	B	1,851,627	PROGRAM GRANT
(7) HUMANE SOCIETY INTERNATIONAL	O	4,111,936	SALARIES
(8) HUMANE SOCIETY INTERNATIONAL	Q	1,563,799	ACTUAL COSTS INCURRED
(9) HUMANE SOCIETY VETERINARY MEDICAL ASSOCIATION, INC.	S	142,129	CASH TRANSFERS
(10) HUMANE SOCIETY VETERINARY MEDICAL ASSOCIATION, INC.	B	616,993	PROGRAM GRANT
(11) HUMANE SOCIETY VETERINARY MEDICAL ASSOCIATION, INC.	O	400,506	SALARIES
(12) HUMANE SOCIETY VETERINARY MEDICAL ASSOCIATION, INC.	Q	391,354	ACTUAL COSTS INCURRED
(13) SOUTH FLORIDA WILDLIFE CENTER, INC.	S	670,104	CASH TRANSFERS
(14) SOUTH FLORIDA WILDLIFE CENTER, INC.	O	956,037	SALARIES
(15) SOUTH FLORIDA WILDLIFE CENTER, INC.	Q	5,375,907	ACTUAL COSTS INCURRED
(16) SOUTH FLORIDA WILDLIFE CENTER, INC.	B	6,331,748	PROGRAM GRANT
(17) SOUTH FLORIDA WILDLIFE CENTER, INC.	C	801,701	PROGRAM GRANT
(18) THE FUND FOR ANIMALS	R	72,845	CASH TRANSFERS
(19) THE FUND FOR ANIMALS	S	10,499,433	CASH TRANSFERS
(20) THE FUND FOR ANIMALS	B	1,172,175	PROGRAM GRANT
(21) THE FUND FOR ANIMALS	D	1,075,705	LOANS
(22) THE FUND FOR ANIMALS	O	2,840,072	SALARIES
(23) THE FUND FOR ANIMALS	Q	7,616,314	ACTUAL COSTS INCURRED
(24) THE HUMANE SOCIETY WILDLIFE LAND TRUST	R	392,340	CASH TRANSFERS
(25) THE HUMANE SOCIETY WILDLIFE LAND TRUST	S	2,957,577	CASH TRANSFERS
(26) THE HUMANE SOCIETY WILDLIFE LAND TRUST	O	326,270	SALARIES
(27) THE HUMANE SOCIETY WILDLIFE LAND TRUST	Q	3,605,074	ACTUAL COSTS INCURRED
(28) PROJECT CHIMPS	S	1,000,000	CASH TRANSFERS
(29) PROJECT CHIMPS	B	782,825	PROGRAM GRANT
(30) PROJECT CHIMPS	O	329,057	SALARIES
(31) PROJECT CHIMPS	Q	667,109	ACTUAL COSTS INCURRED
(32) HUMANE SOCIETY LEGISLATIVE FUND	A	212,433	RENT
(33) HUMANE SOCIETY LEGISLATIVE FUND	B	1,387,718	PROGRAM GRANT
(34) HUMANE SOCIETY LEGISLATIVE FUND	O	623,293	SALARIES
(35) HUMANE SOCIETY LEGISLATIVE FUND	Q	897,394	ACTUAL COSTS INCURRED
(36) HUMANE SOCIETY INTERNATIONAL/CANADA	B	203,124	PROGRAM GRANT
(37) HUMANE SOCIETY INTERNATIONAL/CANADA	Q	203,134	ACTUAL COSTS INCURRED

# Exempt Organization Declaration and Signature for Electronic Filing

For calendar year 2020, or tax year beginning \_\_\_\_\_, 2020, and ending \_\_\_\_\_, 20\_\_\_\_\_

# 2020

Department of the Treasury  
Internal Revenue Service

For use with Forms 990, 990-EZ, 990-PF, 990-T, 1120-POL, 4720, and 8868  
▶ Go to [www.irs.gov/Form8453EO](http://www.irs.gov/Form8453EO) for the latest information.

Name of exempt organization or person subject to tax

THE HUMANE SOCIETY OF THE UNITED STATES

Taxpayer identification number

53-0225390

### Part I Type of Return and Return Information (Whole Dollars Only)

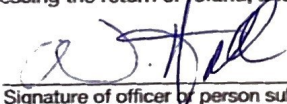
Check the box for the type of return being filed with Form 8453-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, or 7a below, and the amount on that line of the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, or 7b, whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here ▶ <input checked="" type="checkbox"/>	<b>b Total revenue</b> , if any (Form 990, Part VIII, column (A), line 12) . . . . .	<b>1b</b>	124,684,806
2a Form 990-EZ check here ▶ <input type="checkbox"/>	<b>b Total revenue</b> , if any (Form 990-EZ, line 9) . . . . .	<b>2b</b>	
3a Form 1120-POL check here ▶ <input type="checkbox"/>	<b>b Total tax</b> (Form 1120-POL, line 22) . . . . .	<b>3b</b>	
4a Form 990-PF check here ▶ <input type="checkbox"/>	<b>b Tax based on investment income</b> (Form 990-PF, Part VI, line 5) . . . . .	<b>4b</b>	
5a Form 8868 check here ▶ <input type="checkbox"/>	<b>b Balance due</b> (Form 8868, line 3c) . . . . .	<b>5b</b>	
6a Form 990-T check here ▶ <input type="checkbox"/>	<b>b Total tax</b> (Form 990-T, Part III, line 4) . . . . .	<b>6b</b>	
7a Form 4720 check here ▶ <input type="checkbox"/>	<b>b Total tax</b> (Form 4720, Part III, line 1) . . . . .	<b>7b</b>	

### Part II Declaration of Officer or Person Subject to Tax


- 8  I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.
- If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that  I am an officer of the above named organization or  I am the person subject to tax with respect to (name of organization) \_\_\_\_\_, (EIN) \_\_\_\_\_, and that I have examined a copy of the 2020 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund.

**Sign Here** ▶  10/29/21 ▶ **TREASURER**  
Signature of officer or person subject to tax Date Title, if applicable

### Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above return and that the entries on Form 8453-EO are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The organization officer or person subject to tax will have signed this form before I submit the return. I will give a copy of all forms and information to be filed with the IRS to the officer or person subject to tax, and have followed all other requirements in Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

<b>ERO's Use Only</b>	ERO's signature ▶ 	Date	Check if also paid preparer <input checked="" type="checkbox"/>	Check if self-employed <input type="checkbox"/>	ERO's SSN or PTIN
	Firm's name (or yours if self-employed), address, and ZIP code				EIN Phone no.

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>MARC R. BERGER, CPA</b>	Preparer's signature 	Date 6/29/2021	Check if self-employed <input type="checkbox"/>	PTIN P01871563
	Firm's name ▶ <b>BDO USA, LLP</b>				Firm's EIN ▶ <b>13-5381590</b>
	Firm's address ▶ <b>8401 GREENSBORO DRIVE - SUITE 800, MCLEAN, VA 22102</b>				Phone no. <b>(703) 893-0600</b>