PUBLIC DISCLOSURE COPY

Form 990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury

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

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

	rnai Revenue				tructions and the lates		iation.			ection			
			lar year, or tax year beginning		, 2021, and endi				20				
В	Check if ap	plicable:	C Name of organization THE HUN	MANE SOCIETY OF	THE UNITED STATES			D Employer id	entifica	tion number			
	Address ch	ange	Doing business as					53	02253	90			
	Name char	nge	Number and street (or P.O. box if	mail is not delivered to	street address)	Room/sui	ite	E Telephone n	umber				
	Initial return	ı	1255 23RD STREET, NW			SUITE	E 450	(202) 452-1	100			
$\overline{\Box}$	Final return	terminated/	City or town, state or province, co	ountry, and ZIP or forei	gn postal code			-					
✓	Amended r		WASHINGTON, DC 20037	•	,			G Gross receip	ts\$	311,402,667			
	Application		F Name and address of principal off			Yes V No							
ш	Application	pending	SAME AS C ABOVE			t			_	Yes No			
	Tax-exemp	t etatue:	✓ 501(c)(3) 501(c) () ◀ (insert no.)	4947(a)(1) or 527		•	ttach a list. See					
J			IUMANESOCIETY.ORG) 4 (moort no.)		ш/с		emption numb		iiorio.			
				tion Other N	1 Veer of form			-		ile: DE			
	_			tion	L Year of form	nation:	1954	M State of lega	ai domic	ile: DE			
	_	Summa	-										
-		-	cribe the organization's miss	_									
ဦ			HE HSUS) FIGHTS THE BIG FI	GHTS, WORKING T	O END ALL FORMS OF	F ANIMA	L CRUEL	TY AND ACH	IEVE				
na			ED ON SCHEDULE O)										
Ver			box ► ☐ if the organization			d of mo	ore than 2	25% of its n	et asse	ets.			
ဗ္	3 N	umber of	voting members of the gove	rning body (Part V	I, line 1a)			3		21			
∞	4 N	umber of	independent voting member	rs of the governing	body (Part VI, line 1	b)		4		21			
ţį	5 T	otal numb	er of individuals employed ir	n calendar year 20	21 (Part V, line 2a)			5		577			
Activities & Governance	6 T	otal numb	er of volunteers (estimate if	necessary)				6		1,122			
			ated business revenue from	= :	C), line 12			7a		125,527			
			ed business taxable income		•			7b		0			
				<u> </u>			Prior Year		Currer	nt Year			
_	8 C	ontributio	ns and grants (Part VIII, line	1h)			119,09			237,362,075			
Revenue			ervice revenue (Part VIII, line	•				02,736		3,664,933			
Ver		_	income (Part VIII, column (A				·						
æ							·	53,204		17,372,223			
			nue (Part VIII, column (A), line		· ·			35,695		1,120,507			
			ue—add lines 8 through 11 (n				· ·	34,806		259,519,738			
			similar amounts paid (Part I	21,93	30,997		26,123,956						
		-	aid to or for members (Part IX										
es			her compensation, employee	•			52,93	39,757		56,022,539			
Expenses	16a P	rofession	al fundraising fees (Part IX, c	olumn (A), line 11e	e)		10,22	20,361		9,423,192			
ğ	b T	otal fundr	aising expenses (Part IX, col	umn (D), line 25) 🕨	35,191,819								
Ш	17 O	ther expe	nses (Part IX, column (A), lin	es 11a-11d, 11f-2			50,55	51,357		46,604,176			
	18 T	otal expe	nses. Add lines 13-17 (must	equal Part IX, colu	ımn (A), line 25) .		135,64	42,472		138,173,863			
	19 R	evenue le	ss expenses. Subtract line 1	8 from line 12 .			(10,95	7,666)		121,345,875			
o se						Beginni	ing of Curre	nt Year	End o	f Year			
ets	20 T	otal asset	s (Part X, line 16)				321,06	64.965		449,724,533			
Net Assets or Fund Balances	21 T		(5 1)(11 66)					56,275		30,945,984			
₹.₹	22 N		or fund balances. Subtract li)		284,30			418,778,549			
			re Block				201,00	30,000		110,110,010			
			I declare that I have examined this	return including accom	nanying schedules and st	atemente	and to the	heet of my kno	wledge	and helief it is			
			e. Declaration of preparer (other than						wicago	and belief, it is			
Si	gn	Signatu	ure of officer				 Date						
	ere						Date						
П	# E		AM H HALL, TREASURER										
			r print name and title	Duna anada i i	1	D-4-	1		DTIV				
Pa	iid		preparer's name	Preparer's signature		Date		Check if	PTIN				
	eparer	MARC R.	BERGER, CPA					self-employed		1871563			
	se Only	Firm's nan	n's name ► BDO USA, LLP Firm							n's EIN ► 13-5381590			
			ress ► 8401 GREENSBORO D		· · · · · · · · · · · · · · · · · · ·		Phone	()					
Ma	y the IRS	discuss t	his return with the preparer s	shown above? See	e instructions				∠ Y	es 🗌 No			
For	Paperwo	rk Reduct	ion Act Notice, see the separa	te instructions.	Cat	t. No. 1128	82Y		Fo	rm 990 (2021)			

Form 990 (2021)

i Oiiii 33	30 (2021)	rage Z
Part		
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission: THE HUMANE SOCIETY OF THE UNITED STATES FIGHTS THE BIG FIGHTS TO END SUFFERING FOR ALL ANIMALS	
	AND ACHIEVE THE VISION BEHIND ITS NAME: A HUMANE SOCIETY. THE HSUS WORKS TO END THE CRUELEST	
	PRACTICES TOWARD ALL ANIMALS, CARE FOR ANIMALS IN CRISIS, AND BUILD A STRONGER ANIMAL PROTECTION	
	MOVEMENT.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
_	prior Form 990 or 990-EZ?	No
	If "Yes," describe these new services on Schedule O.	140
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services?	∠ 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.	red by
-	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to	
	the total expenses, and revenue, if any, for each program service reported.	
	(Code:) (Expenses \$ 41,387,534 including grants of \$ 7,631,416) (Revenue \$ 1,554,182	<u> </u>
4a	(Code:) (Expenses \$ 41,387,534 including grants of \$ 7,631,416) (Revenue \$ 1,554,182 BUILD A STRONGER ANIMAL PROTECTION MOVEMENT)
	THE HSUS SUPPORTS THE EFFORTS OF ALLIED ORGANIZATIONS AND PARTNERS-LOCALLY, NATIONALLY AND	
	GLOBALLY-TO ADVANCE HUMANE WORK THROUGH ADVOCACY, DIRECT CARE, EDUCATION, ENFORCEMENT OF LAWS	
	AND CONSUMER CHOICE INITIATIVES. THE MISSION INCLUDES HELPING THOSE WHO STAND WITH THE HSUS	
	BECOME STRONGER AND BETTER AND TO ENGAGE THEM MORE DEEPLY IN CAMPAIGNS. IN ADDITION TO	
	FOUNDATIONAL EDUCATION, OUTREACH AND TRAINING WORK, THE HSUS IS FOCUSING EFFORTS TO BUILD	
	CAPACITY FOR AGENCIES TO USE HUMANE AND EFFECTIVE METHODS FOR RESOLVING HUMAN-WILDLIFE	
	CONFLICTS.	
	CONTINUED ON SCHEDULE O	
4b	(Code:) (Expenses \$ 25,995,129 including grants of \$ 6,244,027) (Revenue \$ 969,496	`
TD	END THE CRUELEST PRACTICES	,
	THE HSUS FIGHTS THE WORST, MOST INSTITUTIONALIZED FORMS OF ANIMAL ABUSE AND CRUELTY. THE CURRENT	
	PRIORITIES INCLUDE ENDING COSMETICS TESTING ON ANIMALS, REDUCING THE TROPHY HUNTING OF WILDLIFE,	
	ENDING THE USE OF FUR IN FASHION, EASING THE SUFFERING OF BILLIONS OF FARM ANIMALS BY	
	ELIMINATING CRUEL SYSTEMS OF CONFINEMENT AND ENSURING THAT PUPPY MILLS CAN NO LONGER SELL	
	PUPPIES VIA PET STORES IN THE UNITED STATES.	
	CONTINUED ON SCHEDULE O	
4c	(Code:) (Expenses \$ 24,843,179 including grants of \$ 12,248,513) (Revenue \$ 926,534)
	CARE FOR ANIMALS IN CRISIS	
	THE HSUS WORKS WITH GOVERNMENT AGENCIES TO RESPOND TO CRUELTY AND DISASTERS WHERE THE NEED IS	
	GREATEST, ADVANCE ALTERNATIVES TO THE USE OF LETHAL AND CRUEL ANIMAL MANAGEMENT APPROACHES, AND	
	PROVIDE TRANSPORT AND SANCTUARY TO ANIMALS IN CRISIS. THE HSUS IS CURRENTLY INCREASING CAPACITY	
	TO RESPOND TO ANIMAL CRUELTY AND NATURAL DISASTERS AROUND THE WORLD.	
	CONTINUED ON SCHEDULE O	
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$\frac{\text{including grants of \$}}{\text{including grants of \$}}\) (Revenue \$	
4e	Total program service expenses ▶ 92,225,842	

Part IV **Checklist of Required Schedules**

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	~	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	~	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," complete Schedule C, Part I	3		~
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i>	4	~	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		~
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		~
7	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</i> "Yes," <i>complete Schedule D, Part II</i>	7		~
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		~
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If</i> "Yes," <i>complete Schedule D, Part IV</i>	9		~
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If</i> "Yes," <i>complete Schedule D, Part V</i>	10	~	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	~	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	~	
С	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>	11c		~
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX </i>	11d		~
e f	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> 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>	11e	<i>v</i>	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		~
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	~	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	~	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	~	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	~	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	16		~
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17	~	
18	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>	18	~	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		~
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	~	

3

Part	V Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	_	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	•	V
		_		
c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		~
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		٧
26	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>	26		·
27	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? If "Yes," complete Schedule L, Part III	27		· ·
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):	21		
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," complete Schedule L, Part IV	28a		~
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		~
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		\ \ \
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	~	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30	-	~
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	31		~
33	complete Schedule N, Part II	32		~
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		~
35a	or IV, and Part V, line 1	34 35a	V	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	~	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36	~	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		~
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	~	
Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		Yes	✓ No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 270			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	'	

Form 990 (2021)

	0 (2021)			rage U
Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 577			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . See instructions.			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		<u>.</u>
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O.	3b		~
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	~	
b	If "Yes," enter the name of the foreign country ► BE, CA, KS, LI, MX, SF, UK, VM			
- -	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		V
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		-
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		~
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	~	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	~	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7с	~	
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		~
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		~
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	~	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
•	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
a b	Gross income from members or shareholders			
D	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
u	Note: See the instructions for additional information the organization must report on Schedule O.	Tou		
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			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		~
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		~
-	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

5

Form 990 (2021)

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. Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year . . . 21 1a 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. Enter the number of voting members included on line 1a, above, who are independent . 1b 21 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 ~ Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, trustees, or key employees to a management company or other person? . 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a Each committee with authority to act on behalf of the governing body? 8b 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 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No **10a** Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? *If "No," go to line 13* 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 Did the organization have a written whistleblower policy? 13 Did the organization have a written document retention and destruction policy? 14 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official . . . 15a 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a V 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► AL, AR, CA, FL, (CONTINUED ON SCHEDULE O) 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (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) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 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 the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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 the instructions for the order in which to list the persons above.

	Chook this how it	noithar tha	organization no	r any related	organization	componented an	v current officer	director, or trustee.
- 1 - 1	Check this box ii	neither the	ordanization no	r anv related	organization	compensated an	v current officer.	director, or trustee.

(A) Name and title	(B) Average hours per week	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
(1) CRISTOBEL BLOCK	40.0									
PRESIDENT & CHIEF EXECUTIVE OFFICER	0.0			~				453,464	0	32,692
(2) MELISSA RUBIN	38.0									
SVP. ANIMAL RESCUE, CARE, & SANCTUARY	2.0					~		405,065	0	2,068
(3) ERIN FRACKLETON	40.0									
CHIEF OPERATING OFFICER	0.0			~				313,024	0	24,147
(4) KATHERINE KARL	39.0									
GENERAL COUNSEL & CHIEF LEGAL OFFICER	0.0			~				295,708	0	17,976
(5) WILLIAM H. HALL	38.0									
CHIEF FINANCIAL OFFICER & TREASURER	0.0			~				262,971	0	31,233
(6) ALEXA HERNDON	40.0									
CHIEF PEOPLE OFFICER	0.0			~				246,409	0	36,943
(7) NICOLE PAQUETTE	39.0									
CHIEF PROGRAMS & POLICY OFFICER	1.0			~				238,085	0	29,070
(8) REBECCA BRANZELL	40.0									
DEPUTY GENERAL COUNSEL	0.0					~		200,246	0	40,282
(9) KIMBERLEE DINN	40.0									
SVP., PHILANTHROPY	0.0				~			197,161	0	34,056
(10) JONATHAN LOVVORN	40.0									
SVP. & CHIEF COUNSEL, APL	0.0					~		208,356	0	20,802
(11) JAMIE NATELSON	40.0									
SVP. MARKETING OPERATIONS	0.0				~			204,101	0	20,419
(12) MICHAELEN BARSNESS	32.2									
SVP., FINANCE & ACCOUNTING	5.8					~		192,492	0	23,771
(13) STACY STONICH	40.0									
SVP. TECHNOLOGY & INFORMATION SOLUTIONS	0.0					~		193,998	0	10,369
(14) THERESA REESE	36.0									
FORMER SECOND DEPUTY TREASURER	4.0						~	156,315	0	16,719

Form **990** (2021)

Form 990 (2021)

Part VII Section A. Officers, Directors, 1	Trustees,	Key I	Em	plo	yee	s, an	d F	lighest Compe	nsated Em	ploy	ees (conti	nued)
				((C)							
(A) Name and title	(B) Average hours per week	box,	unles	neck ss pe d a d	rson	e than of is both or/trust	n an tee)	(D) Reportable compensation from the	(E) Reportable compensation from related		(F) Estimated an of other compensation	
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations († 1099-MISC 1099-NEC)	W-2/	from the organization related organi:	e and
(15) ALISON GREGG CORCORAN	40.0											
CHIEF DEVELOPMENT & MARKETING OFFICER	0.0			~				144,555		0	•	15,185
(16) AMY NICHOLS	40.0											
FORMER KEY EMPLOYEE	0.0						~	101,279		0		20,154
(17) JOHANIE V. PARRA	30.0											
SECRETARY	8.0			~				78,324		0	2	20,500
(18) MIGUEL ABI-HASSAN	40.0											
CHIEF ANIMAL RESCUE, CARE, & SANCTUARY OFFICER	0.0			~				50,896		0		2,705
(19) ADITYA KUMAR	0.7											
DIRECTOR	0.0	~						0		0		0
(20) BRAD JAKEMAN	0.7											_
DIRECTOR	0.0	-						0		0		0
(21) C. THOMAS MCMILLEN	0.7											•
DIRECTOR	0.0	-						0		0		0
(22) CAREN M. FLEIT	1.0											0
DIRECTOR (CO.) CAROLIVALENERS ON L	0.0	-						0		0		0
(23) CAROLYN EVERSON	0.3											0
DIRECTOR (04) CATHY KANCAS	0.0	~						0		0		0
(24) CATHY KANGAS	0.7	_						0				0
DIRECTOR (OE) (SEE STATEMENT)	0.0	-						0		0		0
(25) (SEE STATEMENT)		-										
1b Subtotal								3,942,447		0	20	99,091
c Total from continuation sheets to Part	 VII Sootio	 n A	•	•				3,942,447		0	38	0
	-		•	•				3,942,447		0	3(99,091
2 Total number of individuals (including but	 t not limited	to th	iose	· list	ed.	above	<u>-) w</u>		L e than \$100			33,031
reportable compensation from the organi							٠,	112	σ φ .σσ,			
								112			Yes	No
3 Did the organization list any former of	officer, dire	ector.	tru	ıste	e. k	cev e	lam	lovee, or highes	st compens	ated		
employee on line 1a? If "Yes," complete s							-		-		3 1	
4 For any individual listed on line 1a, is the organization and related organizations	sum of re	portal	ble	con	npei	nsatic						
individual											4 1	
5 Did any person listed on line 1a receive of												
for services rendered to the organization? If "Yes," complete Schedule J for such person							5	~				
Section B. Independent Contractors												
Complete this table for your five high compensation from the organization. Report												
(A)								(B)			(C)	

(A) Name and business address	(B) Description of services	(C) Compensation
FACEBOOK, INC., 1601 WILLOW RD, MENLO PARK, CA 94025	ADVERTISING	5,628,706
NAVISTAR DIRECT MARKETING LLC, 4612 NAVISTAR DR, FREDERICK, MD 21703	PRINT, DESIGN & COPY SERVICES	5,107,260
GIVEBRIDGE, INC., 525 W. MONROE ST, STE 2350, CHICAGO, IL 60661	FUNDRAISING CONSULTANT	3,498,687
GREEN PLANET SALES COMPANY, INC., 301 COMMERCE DR, MOORESTOWN, NJ 08057	FUNDRAISING CONSULTANT	2,754,707
GOOGLE, LLC, 1600 AMPHITHEATRE PKWY, MOUNTAIN VIEW, CA 94043	2,036,229	
2 Total number of independent contractors (including but not limited to		
received more than \$100,000 of compensation from the organization	11	

Page 9 Form 990 (2021)

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII (0) (1) (1) (2) (1) (2) (1) (2) (1) (2) (1) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (Part	VIII	Check if Schedule			spon	se or note to an	y line in this Pa	art VIII		\sqcap
B									(B) Related or exempt	(C) Unrelated	(D) Revenue excluded from tax under
Page	ts,	1a	Federated campaig	ns .		1a	34,236				
Page	ant	b				1b	0				
Page	P, G	С	Fundraising events			1c	215,908				
Page	fts, ır A	d	Related organization	ns .		1d	10,170				
Page	, Gi nila	е		•	,	1e	0				
Page	ons Sir	f									
Page	utic Jer					1f	237,101,761				
Page	irib Ott	g									
Page	oni							207.202.275			
200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200 200	O B	h	Total. Add lines 1a-	-1† .				237,362,075			
9 Total. Add lines 2a-2f	e e	0-	CURRORT CERVICE	C DEV	/ENILIE			2.005.440	2.005.440		
9 Total. Add lines 2a-2f	vic										
9 Total. Add lines 2a-2f	ser iue			NCOIV	IE				322,539		244 724
9 Total. Add lines 2a-2f	m S ven							•		125 527	214,721
9 Total. Add lines 2a-2f	yral Rev	-		ED\//				•		125,527	
9 Total. Add lines 2a-2f	rog	f						<u> </u>	*	0	0
New the property of the prop	Д	ı a						*		0	0
Other similar amounts		_	Investment income	(incl	udina divi	dends	interest and	3,004,333			
Income from investment of tax-exempt bond proceeds 5 Royalties								2.974.017			2.974.017
Second		4						_,_,,,,,,,			2,011,011
Second Continuous Second Continuous Second S						•	·	315.635			315.635
Description											
Description		6a	Gross rents	6a							
C Rental income or (loss) 6c 0 0 0				6b							
A		С		6с		0	0				
Sales of assets other than inventory Ta 66,139,350 0 0		d	, ,		s)		▶				
Section Page Pag		7a	Gross amount from		(i) Securit	ties	(ii) Other				
December Content Con			66 120 260		0						
and sales expenses . 7b			other than inventory	7a	00,13	19,330	U U				
Most gain or (loss) Most gain or (loss)	<u>e</u>	b									
Most gain or (loss) Most gain or (loss)	eni		and sales expenses .	7b	51,73	2,679					
of contributions reported on line 1c). See Part IV, line 18		С	, ,	7c	14,40	6,671	(8,465)				
of contributions reported on line 1c). See Part IV, line 18	er F	d	, ,				▶	14,398,206			14,398,206
of contributions reported on line 1c). See Part IV, line 18	χţ	8a			•						
1c). See Part IV, line 18 8a 105,072	O										
b Less: direct expenses						0-	405.070				
C Net income or (loss) from fundraising events . ▶ (36,713)			•								
9a Gross income from gaming activities. See Part IV, line 19 . 9b			•					(26.712)		0	(26.712)
activities. See Part IV, line 19 . 9a b Less: direct expenses 9b c Net income or (loss) from gaming activities ▶ 10a Gross sales of inventory, less returns and allowances 10a b Less: cost of goods sold 10b c Net income or (loss) from sales of inventory ▶ 11a LIST RENTAL 900099 290,287 290,287 b OTHER INCOME 900099 279,371 279,371 c OTHER FEES 541900 271,927 d All other revenue		_				y eve	111.5	(30,713)		0	(30,713)
b Less: direct expenses 9b		Ja				02					
C Net income or (loss) from gaming activities . ▶ 10a Gross sales of inventory, less returns and allowances 10a b Less: cost of goods sold 10b c Net income or (loss) from sales of inventory . ▶ 11a LIST RENTAL 900099 290,287 290,287 b OTHER INCOME 900099 279,371 279,371 c OTHER FEES 541900 271,927 d All other revenue		h									
10a Gross sales of inventory, less returns and allowances 10a			•				29				
Teturns and allowances 10a 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b		l									
Business Code Supplier Sup					-	10a					
C Net income or (loss) from sales of inventory ▶ Business Code Business Code 900099 290,287 290,287 b OTHER INCOME 900099 279,371 279,371 c OTHER FEES 541900 271,927 271,927 d All other revenue 0 0 0 e Total. Add lines 11a-11d ▶ 841,585		b									
Total. Add lines 11a-11d Business Code Business Code Business Code C		· ·	•				ory ▶				
e Total. Add lines Tra-Tru	g		, , , ,								
e Total. Add lines Tra-Tru	on e	11a	LIST RENTAL				900099	290,287			290,287
e Total. Add lines Tra-Tru	ane						900099				
e Total. Add lines Tra-Tru	elk eve	С					541900	271,927			271,927
e Total. Add lines Tra-Tru	isc Re	d	All other revenue						0	0	
	Σ	е		a–11d	I		▶	841,585			
		12						259,519,738	3,324,685	125,527	18,707,451

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).

Do not	Check if Schedule O contains a response include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	24,566,671	24,566,671		
	Grants and other assistance to domestic individuals. See Part IV, line 22				
	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	1,557,285	1,557,285		
	Benefits paid to or for members				
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	2,749,622	2,171,652	274,687	303,283
8	Other salaries and wages	42,732,138	33,749,879	4,267,625	4,714,634
	section 401(k) and 403(b) employer contributions)	2,186,639	1,726,985	218,358	241,296
	Other employee benefits	5,453,779	4,307,253	544,664	601,862
10	Payroll taxes	2,900,361	2,290,627	289,661	320,073
11	Fees for services (nonemployees):				
а	Management				
b	Legal	2,834,383	2,516,227	318,156	
_	Accounting	275,233	244,338	30,895	
d	Lobbying	1,188,036	527,963	66,756	593,317
_	Professional fundraising services. See Part IV, line 17	9,423,192		050.754	9,423,192
f g	Investment management fees	652,754		652,754	
9	(A), amount, list line 11g expenses on Schedule O.) .	4 640 251	1 700 170	702 625	2.067.427
12	· · · · · · · · · · · · · · · · · · ·	4,649,251 10,020,979	1,788,179 6,842,728	793,635 220,112	2,067,437
13	Advertising and promotion	3,522,803	591,660	1,865,855	2,958,139 1,065,288
	Information technology	4,764,099	3,246,300	410,467	1,107,332
	Royalties	4,7 04,000	0,240,000	410,401	1,107,002
	Occupancy	2,701,090	2,388,960	302,064	10,066
	Travel	1,023,178	869,289	113,663	40,226
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	1,0=0,110		,	,
19	Conferences, conventions, and meetings .	3,385	1,224	1,596	565
20	Interest				
	Payments to affiliates				
	Depreciation, depletion, and amortization .	513,817	437,074	76,743	0
23	Insurance	1,419,288	1,254,734	158,650	5,904
	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.)				
а	EDUCATION AND MARKETING MATERIAL	12,275,906	632,332	84,809	11,558,765
b	EQUIPMENT	613,581	418,100	52,865	142,616
C	RE & PROPERTY TAXES	146,393	96,382	12,187	37,824
d					
е	All other expenses	0	0	0	0
	Total functional expenses. Add lines 1 through 24e	138,173,863	92,225,842	10,756,202	35,191,819
	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ✓ if				
	following ŠOP 98-2 (ASC 958-720)	50,586,852	21,224,067	0	29,362,785

Part X Balance Sheet

	art A	Check if Schedule O contains a response or note to any line in this Par	t X								
			(A) Beginning of year		(B) End of year						
	1	Cash—non-interest-bearing	7,129	1	6,629						
	2	Savings and temporary cash investments	36,020,002	2	133,247,547						
	3	Pledges and grants receivable, net	3,641,587	3	9,635,673						
	4	Accounts receivable, net	5,106,468	4	5,445,923						
	5	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	5	0						
	6	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	6	0						
S	7	Notes and loans receivable, net									
Assets	8	Inventories for sale or use		8							
As	9	Prepaid expenses and deferred charges	1,012,331	9	1,174,482						
•	10a	Land, buildings, and equipment: cost or other	.,		,,,						
		basis. Complete Part VI of Schedule D 10a 17,281,217									
	b	Less: accumulated depreciation	8,154,256	10c	7,880,457						
	11	Investments—publicly traded securities	76,179,564	11	84,243,718						
	12	Investments—other securities. See Part IV, line 11	189,291,383	12	206,866,486						
	13	Investments—program-related. See Part IV, line 11	930,000	13	430,000						
	14	Intangible assets	000,000	14	100,000						
	15	Other assets. See Part IV, line 11	722,245	15	793,618						
	16	Total assets. Add lines 1 through 15 (must equal line 33)	321,064,965	16	449,724,533						
	17	Accounts payable and accrued expenses	19,751,481	17	11,048,094						
	18	Grants payable	97,918	18	2,260,602						
	19	Deferred revenue	191,944	19	513,792						
	20	Tax-exempt bond liabilities		20							
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21							
S	22	Loans and other payables to any current or former officer, director,									
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%									
Ϊ		controlled entity or family member of any of these persons	0	22	0						
E.	23	Secured mortgages and notes payable to unrelated third parties		23							
	24	Unsecured notes and loans payable to unrelated third parties		24							
	25	Other liabilities (including federal income tax, payables to related third									
		parties, and other liabilities not included on lines 17–24). Complete Part X									
		of Schedule D	16,714,932	25	17,123,496						
	26	Total liabilities. Add lines 17 through 25	36,756,275	26	30,945,984						
Net Assets or Fund Balances		Organizations that follow FASB ASC 958, check here ► ✓ and complete lines 27, 28, 32, and 33.									
lan	27	Net assets without donor restrictions	220,841,422	27	350,646,619						
Ba	28	Net assets with donor restrictions	63,467,268	28	68,131,930						
nd		Organizations that do not follow FASB ASC 958, check here ▶ □									
교		and complete lines 29 through 33.									
ō	29	Capital stock or trust principal, or current funds		29							
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30							
SS	31	Retained earnings, endowment, accumulated income, or other funds		31							
Ϋ́	32	Total net assets or fund balances	284,308,690	32	418,778,549						
Ž	33	Total liabilities and net assets/fund balances	321,064,965	33	449,724,533						
			, , , , , , , , ,		Form 990 (2021)						

Form **990** (2021)

Part	XI Reconciliation of Net Assets				-	
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2	59,51	9,738
2	Total expenses (must equal Part IX, column (A), line 25)	2		1	38,17	3,863
3	Revenue less expenses. Subtract line 2 from line 1	3		1	21,34	5,875
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		2	84,30	8,690
5	Net unrealized gains (losses) on investments	5			13,12	3,984
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10		4	18,77	8,549
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," e	xplain	on			
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. [2a		~
	If "Yes," check a box below to indicate whether the financial statements for the year were conreviewed on a separate basis, consolidated basis, or both:	npiled	or			
	•					
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			OI-	/	
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 aud	 Had a		2b	•	
	separate basis, consolidated basis, or both:	iteu o	II a			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis					
_	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ov	areiah	t of			
·	the audit, review, or compilation of its financial statements and selection of an independent account			2c	~	
	If the organization changed either its oversight process or selection process during the tax year, e			20		
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for	rth in	the			
	Single Audit Act and OMB Circular A-133?		. [3a		~
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a	_		3b		_

Form **990** (2021)

(A) Name and Title	(B) Average hours per week			C) Po	sitior that ap	n pply)		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(25) CHARLES A. LAUE	0.8	1						0	0	0
DIRECTOR	0.0	•						Ŭ		ŏ
(26) DAVID NIEKIRK	1.1	1						0	0	0
DIRECTOR	0.0	•						0		0
(27) ELIZABETH BRADHAM	0.9	./						0	0	0
DIRECTOR	0.0	•						0	0	0
(28) GEORGINA BLOOMBERG	0.3	/								
DIRECTOR	0.0	•						0	0	0
(29) KATHLEEN M. LINEHAN, ESQ.	0.9	/						0	0	0
DIRECTOR	0.0	•						0	0	0
(30) MARCUS EAST	0.1	/						0	0	0
DIRECTOR	0.0	•						0	0	0
(31) MARSHA PERELMAN	0.9	/						0	0	0
DIRECTOR	0.0	•						O	0	O
(32) NEIL B. FANG, ESQ., CPA	0.7	/							0	0
DIRECTOR	0.1	•						0	0	0
(33) ROBERT GREENSPON	1.0	/							0	
DIRECTOR	0.0	•						0	0	0
(34) SHARON LEE PATRICK	0.9	./						0	0	0
DIRECTOR	0.0	•						0	0	0
(35) STEVEN G. WHITE	0.6	/						0	0	0
DIRECTOR	1.0	•						0	0	0
(36) SUSAN ATHERTON	1.1	/						0	0	0
DIRECTOR	4.0	•						0	0	0
(37) SUZY WELCH	0.5	/						0	0	0
DIRECTOR	0.0	•						0	0	0
(38) SYLVIA KASER	0.9	/							0	
DIRECTOR	0.0	•						0	0	0
(39) THOMAS J. SABATINO, JR.	0.9	/							•	
DIRECTOR	0.0	•						0	0	0
(40) YOLANDA BERKOWITZ	0.4	/						0	0	0
DIRECTOR	0.0	•							U	

SCHEDULE A (Form 990)

Department of the Treasury

Public Charity Status and Public Support

OMB No. 1545-0047

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.

► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Internal Revenue Service

Name of the organization

Employer identification number

THE	HUMANE SOCIETY OF THE UNITED S	STATES				53-022	25390
Pa	rt I Reason for Public Char	ity Status. (All	organizations mus	t comple	ete this p	art.) See instruction	ons.
	organization is not a private founda		,		-	•	
1 2	☐ A church, convention of church☐ A school described in section					U(D)(T)(A)(I).	
3	☐ A hospital or a cooperative hos		·	-)(A)(iii).	
4	A medical research organizatio						iii). Enter the
	hospital's name, city, and state						
5	An organization operated for t section 170(b)(1)(A)(iv). (Comp		college or university	owned o	r operate	ed by a government	al unit described in
6 7	☐ A federal, state, or local govern ☐ An organization that normally described in section 170(b)(1)(receives a subst	tantial part of its sup				the general public
8	☐ A community trust described in	section 170(b)	(1)(A)(vi). (Complete I	Part II.)			
9	An agricultural research organizor university or a non-land-granuniversity:	nt college of agri	iculture (see instruction	ons). Ente	r the nam	ne, city, and state of	the college or
10	An organization that normally receipts from activities related support from gross investment acquired by the organization af	to its exempt fur income and unr	nctions, subject to ce related business taxal	rtain exce ole incom	eptions; a le (less se	and (2) no more than ection 511 tax) from	33 ¹ /3% of its
11	An organization organized and	•	•	-			
12	☐ An organization organized and one or more publicly supported the box on lines 12a through 12	organizations de	escribed in section 50	0 9(a)(1) o	r section	509(a)(2). See secti	on 509(a)(3). Check
a	Type I. A supporting organithe supported organization supporting organization. You	(s) the power to	regularly appoint or e	lect a ma	jority of t		
k	Type II. A supporting organ control or management of to organization(s). You must o	he supporting o	rganization vested in	the same			
C	Type III functionally integrits supported organization(s						ally integrated with,
c	Type III non-functionally in that is not functionally integrequirement (see instruction	rated. The orgai	nization generally mus	st satisfy	a distribu	ıtion requirement an	
e	Check this box if the organi functionally integrated, or T						e II, Type III
f	Enter the number of supported o	-					
Ę							
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	rganization ir governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
				Yes	No		
(A)							
(B)							
(C)							
(D)							
(E)							

Schedule A (Form 990) 2021 Page 2

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

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

Secti	on A. Public Support	<u> </u>		, , ,		,	
Calen	dar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	137,701,084	111,677,456	124,782,166	119,093,171	237,362,075	730,615,952
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	.07,101,901	, ,	. = 1,1 3=,100		201,002,010	0
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0
4	Total. Add lines 1 through 3	137,701,084	111,677,456	124,782,166	119,093,171	237,362,075	730,615,952
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						82,346,667
6	Public support. Subtract line 5 from line 4						648,269,285
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4	137,701,084	111,677,456	124,782,166	119,093,171	237,362,075	730,615,952
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	3,467,949	3,685,050	4,378,638	2,699,528	3,504,373	17,735,538
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	572,820	2,109,181	1,116,812	942,026	841,585	5,582,424
11 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc. First 5 years. If the Form 990 is for the organization, check this box and stop here	organization's	first, second,	third, fourth,	or fifth tax ye	12 ear as a section	````
Secti	on C. Computation of Public Suppor	t Percentage					
14	Public support percentage for 2021 (line 6	6, column (f), di	vided by line 1	1, column (f))		14	85.98 %
15	Public support percentage from 2020 Sch	nedule A, Part I	l, line 14 .			15	96.55 %
16a	331/3% support test-2021. If the organi	zation did not	check the box	on line 13, an	d line 14 is 33	3 ¹ /3% or more,	check this
	box and stop here. The organization qual						
b	331/3% support test—2020. If the organize						
	this box and stop here. The organization	qualifies as a p	oublicly suppor	rted organization	on		▶ □
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization m Part VI how the organization meets the organization	eets the facts- facts-and-circu	and-circumsta ımstances tes	ances test, che t. The organiza	eck this box a ation qualifies	nd stop here. as a publicly	Explain in supported
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizatio in Part VI how the organization meets the organization	n meets the facts-and-circ	cts-and-circun cumstances te	nstances test, st. The organiz	check this bozation qualifies	x and stop he s as a publicly	re. Explain supported
18	Private foundation. If the organization of instructions	did not check	a box on line	13, 16a, 16b,	17a, or 17b,	check this bo	x and see

Schedule A (Form 990) 2021 Page **3**

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.)

Secti	on A. Public Support		oto notoa por	ow, piedee ee	ompioto i art	,	
	dar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(4) = 3 1 1	(3) 2010	(5) = 5 : 5	(0) 2020	(0) = 0 = 1	(-)
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons .						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
с 8	Add lines 7a and 7b						
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the organization, check this box and stop her	•	s first, second		•		. , . ,
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2021 (line 8						<u>%</u>
16	Public support percentage from 2020 Sch			<u></u>		16	%
	on D. Computation of Investment Inc			u line 40	(f\)	47	
17	Investment income percentage for 2021 (I			•			<u>%</u>
18	Investment income percentage from 2020 331/3% support tests—2021. If the organic						% and line
19a	17 is not more than 33 ¹ / ₃ %, check this box a						
b	33 ¹ / ₃ % support tests—2020. If the organiza	-	_			-	_
D	line 18 is not more than 331/3%, check this b						
20	Private foundation. If the organization did	_	=	· ·			_

Schedule A (Form 990) 2021 Page 4

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.)

Se

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

Schedule A (Form 990) 2021

Schedule A (Form 990) 2021

ocnedu	16 A (1 01111 330) 2021			age 🔾
Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
а	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,	110		
·	provide detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations	10		
	21 11 5 5		Yes	No
1	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? 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.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	4		
2		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on 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? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1 a b	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in the organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below.			
с 2	☐ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (Activities Test. Answer lines 2a and 2b below.	see in	Yes	
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		. 63	.40
а	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	0-		
Ja.	·	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i>	Z D		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
_	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Schedule A (Form 990) 2021 Page **6**

Par	Type III Non-Functionally Integrated 509(a)(3) Supporting Organization	gan	izations	
1	☐ Check here if the organization satisfied the Integral Part Test as a qualifying	g tru	st on Nov. 20, 1970 (expla	ain in Part VI). See
	instructions. All other Type III non-functionally integrated supporting organ	nizat	ions must complete Secti	ons A through E.
Sec	tion A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C—Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	☐ Check here if the current year is the organization's first as a non-functional		integrated Type III suppor	ting organization

Schedule A (Form 990) 2021

(see instructions).

Schedule A (Form 990) 2021 Page 7

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Part V Section D-Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 1 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets 4 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 5 Other distributions (describe in Part VI). See instructions. 6 6 7 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. 8 Distributable amount for 2021 from Section C, line 6 9 9 10 10 Line 8 amount divided by line 9 amount (ii) (iii) **Underdistributions Distributable** Section E—Distribution Allocations (see instructions) **Excess Distributions** Pre-2021 Amount for 2021 Distributable amount for 2021 from Section C, line 6 2 Underdistributions, if any, for years prior to 2021 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2021 **a** From 2016 From 2017 **c** From 2018 **d** From 2019 **e** From 2020 Total of lines 3a through 3e Applied to underdistributions of prior years Applied to 2021 distributable amount Carryover from 2016 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2021 from 4 Section D, line 7: Applied to underdistributions of prior years Applied to 2021 distributable amount Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2021, if 5 any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2022. Add lines 3j and 4c. Breakdown of line 7: Excess from 2017 . . . Excess from 2018 . . . Excess from 2019 . . .

Schedule A (Form 990) 2021

Excess from 2020 . . . Excess from 2021 . . .

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,	Description	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
LINE 10 - OTHER INCOME	(1) OTHER INCOME	94,865	326,804	533,136	483,248	279,371	1,717,424
	(2) LIST RENTALS	288,955	293,377	286,640	216,181	290,287	1,375,440
	(3) OTHER FEES	189,000	193,000	297,036	242,597	271,927	1,193,560
	(4) PENSION REFUND	0	1,296,000	0	0	0	1,296,000
	Total	572,820	2,109,181	1,116,812	942,026	841,585	5,582,424

Schedule B (Form 990)

Schedule of Contributors

OMB No. 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization ► Attach to Form 990 or Form 990-PF.

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

2021

THE HUMANE SOCIETY OF THE UNITED STATES 53-0225390 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 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), 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

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), 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

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Cat. No. 30613X

Schedule B (Form 990) (2021)

Name of organization
THE HUMANE SOCIETY OF THE UNITED STATES

Employer identification number 53-0225390

Page 2

Part I	Contributors (see instructions).	Use duplicate copies of Part I if additional space is needed.

(-)	/L-\	(-)	(4)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$97,425,345	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$6,649,579	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$5,390,000	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

(b)

Description of noncash property given

Name of organization
THE HUMANE SOCIETY OF THE UNITED STATES

Employer identification number

53-0225390

Part II	Noncash Property (see instructions). Use duplicate co	ppies of Part II if additional spac	e is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	ANIMAL FEED AND PET FOOD		
		\$ 6,649,579	12/31/2021
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		· ·	

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

(d)

Date received

(a) No.

from

Part I

(c) FMV (or estimate)

(See instructions.)

Schedule B (Form 990) (2021) Page 4

Name of organization **Employer identification number** THE HUMANE SOCIETY OF THE UNITED STATES 53-0225390 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ Use duplicate copies of Part III if additional space is needed. (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held fŕom Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held fŕom Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (c) Use of gift (b) Purpose of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

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 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 **Employer identification number** THE HUMANE SOCIETY OF THE UNITED STATES 53-0225390 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for 1 definition of "political campaign activities." Volunteer hours for political campaign activities. See instructions Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 \$ 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 Yes No If "Yes," describe in Part IV. Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function 2 Enter the amount of the filing organization's funds contributed to other organizations for section Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, 3 4 Did the filing organization file **Form 1120-POL** for this year? 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 (e) Amount of political filing organization's contributions received and funds. If none, enter -0-. promptly and directly delivered to a separate political organization. If none, enter -0-. (1) (2)(3) (4)(5)

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

Cat. No. 50084S

Schedule C (Form 990) 2021

(6)

Scn	ledule C (Form 990) 2021					Page ∡
Pa	cart II-A Complete if the organization section 501(h)).	is exempt ι	ınder section 50	01(c)(3) and file	d Form 5768 (ele	ction under
Α	Check ► ☐ if the filing organization belongs address, EIN, expenses, and sh	nare of excess	s lobbying expend	itures).	liated group memb	er's name,
В	Check ▶ ☐ if the filing organization checked	d box A and '	'limited control" pr	ovisions apply.		
	Limits on Lobbyi				(a) Filing	(b) Affiliated
	(The term "expenditures" mea	ans amounts	paid or incurred.)		organization's totals	group totals
1	1a Total lobbying expenditures to influence p	ublic opinion	(grassroots lobbyi	ng)		
	b Total lobbying expenditures to influence a	legislative bo	dy (direct lobbying	g)		
	c Total lobbying expenditures (add lines 1a	and 1b) .				
	d Other exempt purpose expenditures					
	e Total exempt purpose expenditures (add li	ines 1c and 1	d)			
	f Lobbying nontaxable amount. Enter th columns.	e amount fr	om the following	table in both		
	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amount	t is:		
	Not over \$500,000	20% of the an	nount 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 or	ver \$1,500,000.		
	Over \$17,000,000	\$1,000,000.				
	g Grassroots nontaxable amount (enter 25%	of line 1f)				
	h Subtract line 1g from line 1a. If zero or less	s, enter -0-				
	i Subtract line 1f from line 1c. If zero or less, enter -0					
	j If there is an amount other than zero o	n either line	1h or line 1i, did	the organization	file Form 4720	
	reporting section 4911 tax for this year?					Yes No
	(Some organizations that made a sect See the s	ion 501(h) ele eparate insti	ructions for lines	e to complete all 2a through 2f.)	of the five column	ns below.
	Lobbying E	xpenditures	During 4-Year Av	eraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2	2a Lobbying nontaxable amount					
	b Lobbying ceiling amount (150% of line 2a, column (e))					
	c Total lobbying expenditures					
	d Grassroots nontaxable amount					
	e Grassroots ceiling amount (150% of line 2d, column (e))					
	f Grassroots lobbying expenditures					

Schedule C (Form 990) 2021

Schedule C (Form 990) 2021 Page 3

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)). (b) (a) For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity. Yes No Amount During the year, did the filing organization attempt to influence foreign, national, state, or local 1 legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ~ 100.255 Mailings to members, legislators, or the public? 671,346 Publications, or published or broadcast statements? 209,348 Grants to other organizations for lobbying purposes? 796,367 Direct contact with legislators, their staffs, government officials, or a legislative body? . . . 650,449 Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? . . . 9,394 Other activities? V 518,014 2,955,173 j 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? . . . ~ If "Yes." enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 ... 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 Were substantially all (90% or more) dues received nondeductible by members? 1 1 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 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." Dues, assessments and similar amounts from members 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a 2b 2c 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues . . . 3 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 4 Taxable amount of lobbying and political expenditures. See instructions 5 **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

Part IN	Э	a	r	٠	١	١	
---------	---	---	---	---	---	---	--

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 COLLECT SIGNATURES FOR REFERENDA, CONTACTED LEGISLATORS AND THEIR STAFF, AND PARTICIPATED IN RALLIES, DEMONSTRATIONS, SEMINARS, AND CONVENTIONS.
SCHEDULE C, PART II-B, LINE 1B - PAID STAFF OR MANAGEMENT	THE HSUS MANAGEMENT AND STAFF 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 AND TO INFLUENCE PUBLIC OPINION ON LEGISLATIVE MATTERS OR REFERENDA.
SCHEDULE C, PART II-B, LINE 1D - MAILINGS TO MEMBERS, LEGISLATORS, OR THE PUBLIC	THE HSUS SENT ELECTRONIC UPDATES ON ANIMAL WELFARE LEGISLATION TO UNPAID VOLUNTEERS, 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 AND TO INFLUENCE PUBLIC OPINION ON LEGISLATIVE MATTERS OR REFERENDA.
SCHEDULE C, PART II-B, LINE 1F - GRANTS TO OTHER ORGANIZATIONS	THE HSUS MADE GRANTS TO 501(C)(3) AND 501(C)(4) ORGANIZATIONS 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 OR REFERENDA, 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

► 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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

	if the organization IUMANE SOCIETY OF THE UNITED STATES		53-0225390
Par		sad Funds or Other Similar Fund	
Гаг	Complete if the organization answered "		is of Accounts.
	Complete if the organization answered	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(a) Donor advised funds	(b) I unds and other accounts
2	Aggregate value of contributions to (during year) .		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor a	-	
•	funds are the organization's property, subject to the		
6	Did the organization inform all grantees, donors, an		
	only for charitable purposes and not for the benefit		
	conferring impermissible private benefit?		· · · · · · U Yes U No
Par	Conservation Easements.		
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the o		
	☐ Preservation of land for public use (for example, recreation)	ation or education) $\ \ \square$ Preservation o	f a historically important land area
	☐ Protection of natural habitat	☐ Preservation o	f a certified historic structure
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organization hel	d a qualified conservation contributior	n in the form of a conservation
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		. 2 a
b	Total acreage restricted by conservation easements		
С	Number of conservation easements on a certified hi		
d	Number of conservation easements included in (
			· 2d
3	Number of conservation easements modified, trans	ferred, released, extinguished, or term	
	tax year ▶	3	
4	Number of states where property subject to conserv	vation easement is located ▶	
5	Does the organization have a written policy regard		ection, handling of
	violations, and enforcement of the conservation eas		
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing	conservation easements during the vear
	▶	g, a - g	,
7	Amount of expenses incurred in monitoring, inspecting	a, handling of violations, and enforcing of	conservation easements during the year
-	▶ \$	g,aag oo.aoe, aa oe.eg o	Jones Tuner Guestine in auting and year
8	Does each conservation easement reported on line 2	2(d) above satisfy the requirements of s	section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports co		
	balance sheet, and include, if applicable, the text of	the footnote to the organization's fina	incial statements that describes the
	organization's accounting for conservation easemer	nts.	
Part	III Organizations Maintaining Collections	of Art. Historical Treasures. or	Other Similar Assets.
	Complete if the organization answered "		
1a	If the organization elected, as permitted under FASI		e statement and balance sheet works
	of art, historical treasures, or other similar assets	·	
	service, provide in Part XIII the text of the footnote t		
b	If the organization elected, as permitted under FAS		
~	art, historical treasures, or other similar assets held	•	
	provide the following amounts relating to these item		,
	(i) Revenue included on Form 990, Part VIII, line 1		L ¢
	(ii) Assets included in Form 990, Part X		· · · · Ψ
2	If the organization received or held works of art,		
2	following amounts required to be reported under FA		assets for illiancial gain, provide the
	-	-	Δ.
a	Revenue included on Form 990, Part VIII, line 1 .		
b	Assets included in Form 990, Part X		▶ \$

Schedule D (Form 990) 2021

Part	Organizations Maintaining	Collections of A	Art. Historical T	reasures, or O	ther Similar Ass	ets (continued)
3	Using the organization's acquisition, collection items (check all that apply):	accession, and oth				
а	☐ Public exhibition		d Loan	or exchange prog	ram	
b	☐ Scholarly research		e 🗌 Other			
С	☐ Preservation for future generations					
4	Provide a description of the organizat XIII.	tion's collections a	nd explain how the	hey further the org	ganization's exem	pt purpose in Part
5	During the year, did the organization assets to be sold to raise funds rather					□ Yes □ No
Part						
	Complete if the organization 990, Part X, line 21.		on Form 990, F	Part IV, line 9, or	reported an amo	ount on Form
1a	Is the organization an agent, trustee included on Form 990, Part X?		-			☐ Yes ☐ No
b	If "Yes," explain the arrangement in Pa	art XIII and comple	te the following ta	able:		
					Am	nount
С	Beginning balance			10		
d	Additions during the year			10	d l	
е	Distributions during the year			16	9	
f	Ending balance			<u>1</u> 1	f	
2a	Did the organization include an amoun	nt on Form 990, Pa	ırt X, line 21, for e	scrow or custodia	al account liability?	☐ Yes ☐ No
	If "Yes," explain the arrangement in Pa	art XIII. Check here	e if the explanation	n has been provid	ed on Part XIII .	<u> \square</u>
Par						
	Complete if the organization	answered "Yes"	on Form 990, F	Part IV, line 10.		
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	35,975,307	26,846,489	21,905,601	24,818,863	21,988,041
b	Contributions	79,001,049	4,691,314	317,282	5,227	68,193
С	Net investment earnings, gains, and losses	4,432,527	5,089,060	5,268,196	(1,829,260)	4,048,041
d	Grants or scholarships					
е	Other expenditures for facilities and programs	710,254	651,556	644,590	1,089,229	1,285,412
f	Administrative expenses					
g	End of year balance	118,698,629	35,975,307	26,846,489	21,905,601	24,818,863
2	Provide the estimated percentage of t	the current year end	d balance (line 1g	, column (a)) held	as:	
а	Board designated or quasi-endowmer	nt ▶ 67.00	%			
b	Permanent endowment ► 22.	.00 %	-			
С	Term endowment ► 11.00 %	 !				
	The percentages on lines 2a, 2b, and	2c should equal 10	00%.			
3a	Are there endowment funds not in the	e possession of the	e organization tha	at are held and ac	dministered for the	
	organization by:					Yes No
	(i) Unrelated organizations					3a(i) 🗸
	(ii) Related organizations					3a(ii) ✓
b	If "Yes" on line 3a(ii), are the related o	rganizations listed	as required on So	chedule R?		3b
4	Describe in Part XIII the intended uses	s of the organizatio	n's endowment fu	unds.		
Part						
	Complete if the organization	answered "Yes"	on Form 990, F	Part IV, line 11a.	See Form 990, F	Part X, line 10.
	Description of property	(a) Cost or oth (investme			Accumulated lepreciation	(d) Book value
1a	Land	_		4,780,242		4,780,242
b	Buildings	•		7,127,135	6,106,157	1,020,978
C	Leasehold improvements	•		2,257,921	845,467	1,412,454
d	Equipment	•		1,706,059	1,342,130	363,929
e	Other	•		1,409,860	1,107,006	302,854
	Add lines 1a through 1e. (Column (d) n		00. Part X. column			7,880,457

Schedule D (Form 990) 2021

Schedule D (Form 990) 2021 Page **3**

Part VII	Investments – Other Securities.			
	Complete if the organization answered "Yes" on For	m 990, Part IV, lin	e 11b. See Form	990, Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	, ,	nod of valuation: -of-year market value
(1) Financial	derivatives			
(2) Closely h	eld equity interests	206,866,486	END OF YEAR MAI	RKET VALUE
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Colui	mn (b) must equal Form 990, Part X, col. (B) line 12.) . ▶	206,866,486		
Part VIII	Investments – Program Related.	•		
	Complete if the organization answered "Yes" on For	m 990, Part IV, lin	e 11c. See Form	990, Part X, line 13.
	(a) Description of investment	(b) Book value		nod of valuation: -of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colui	mn (b) must equal Form 990, Part X, col. (B) line 13.) .			
Part IX	Other Assets.			
	Complete if the organization answered "Yes" on For	m 990, Part IV, lin	e 11d. See Form	990, Part X, line 15.
	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colui	mn (b) must equal Form 990, Part X, col. (B) line 15.)			
Part X	Other Liabilities.			
	Complete if the organization answered "Yes" on For	m 990, Part IV, lin	e 11e or 11f. See	Form 990, Part X,
	line 25.			
1.	(a) Description of liability			(b) Book value
(1) Federal in	come taxes			
(2) ACCRUI	ED SEVERANCE OBLIGATION			438,466
(3) DEFERF	RED COMPENSATION LIABILITY			327,389
(4) ANNUIT	IES AND UNITRUSTS LIABILITY			11,972,877
(5) DUE TO	AFFILIATES			1,137,221
(6) DEFERF	RED RENT			1,837,813
	OLD ALLOWANCE			1,409,730
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line 25.)	<u> </u>		17,123,496
2. Liability for	uncertain tax positions. In Part XIII, provide the text of the footn	ote to the organization	n's financial stateme	nts 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

Schedule D (Form 990) 2021 Page **4**

Part				Return.	•
	Complete if the organization answered "Yes" on Form 990,	Part I	V, line 12a.		
1	Total revenue, gains, and other support per audited financial statements			1	254,423,775
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b	11,447,402		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	0		
е	Add lines 2a through 2d			2e	11,447,402
3	Subtract line 2e from line 1			3	242,976,373
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	16,543,365		
С	Add lines 4a and 4b			4c	16,543,365
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	259,519,738
Part				r Retui	rn.
	Complete if the organization answered "Yes" on Form 990,	Part I	V, line 12a.		
1	Total expenses and losses per audited financial statements			1	149,113,276
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		ı		
а	Donated services and use of facilities	2a	11,447,402		
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	141,785		
е	Add lines 2a through 2d			2e	11,589,187
3				3	137,524,089
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	652,754		
b	Other (Describe in Part XIII.)	_4b	(2,980)		
_C	Add lines 4a and 4b			4c	649,774
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	e 18.)		5	138,173,863
Part	• •	-l 4- D	t. IV / IV 41 I OI-	- D+ \/	En a 4. Don't V. En a
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part				
		to pro	Mue arry additional in	iomalio	/II.
SEE S	TATEMENT				

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 4(B) - OTHER REVENUE	(a) Description EXPENSES FROM FUNDRAISING EVENT REALIZED GAIN ON INVESTMENTS INTEREST AND DIVIDEND REVENUE ANNUITY LIABILITY CHANGE IN VALUATION	(b) Amount - 141,785 14,406,671 2,974,017 - 695,538
SCHEDULE D, PART XII, LINE 2(D) - OTHER EXPENSES IN AUDITED FINANCIAL STATEMENTS NOT IN FORM 990	(a) Description EXPENSES FROM FUNDRAISING EVENTS	(b) Amount 141,785
SCHEDULE D, PART XII, LINE 4(B) - OTHER EXPENSES	(a) Description FOREIGN CURRENCY GAIN	(b) Amount - 2,980

\Box	4	X	I
га	ш	Δ	ш

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 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	THE FOLLOWING FOOTNOTE IS FROM THE AUDITED CONSOLIDATED FINANCIAL STATEMENTS OF THE HUMANE SOCIETY OF THE UNITED STATES AND AFFILIATES (THE SOCIETY):
	THE HSUS, FFA (FUND FOR ANIMALS), HSI (HUMANE SOCIETY INTERNATIONAL), HSVMA (HUMANE SOCIETY VETERINARY MEDICAL ASSOCIATION), 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) QUALIFIED UNDER SECTION 501(C)(4) OF THE IRC THROUGH ITS DISAFFILIATION DATE OF SEPTEMBER 7, 2021. 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. TOTAL UNRELATED BUSINESS INCOME TAX FOR THE YEAR ENDED DECEMBER 31, 2021 WAS NOT MATERIAL
	TO THE CONSOLIDATED FINANCIAL STATEMENTS.
	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, 2018 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.

SCHEDULE F (Form 990)

Statement of Activities Outside the United States ► Complete if the organization answered "Yes" on Form 990. Part IV, line 14b. 15. or 16.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990. ▶ Go to 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 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990. Part IV. line 14b.

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 ☐ 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	199,685
	EAST ASIA AND THE PACIFIC			GRANTMAKING	N/A	
(2)		0	0			26,875
(3)	EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	GRANTMAKING	N/A	824,015
(4)	MIDDLE EAST AND NORTH AFRICA	0	0	GRANTMAKING	N/A	7,564
(5)	NORTH AMERICA (CANADA & MEXICO ONLY)	0	0	GRANTMAKING	N/A	2,449
(6)	SOUTH AMERICA	0	0	GRANTMAKING	N/A	9,500
	SOUTH ASIA			GRANTMAKING	N/A	
(7)		0	0			3,000
(0)	SUB-SAHARAN AFRICA	0	0	GRANTMAKING	N/A	404.407
(8)	CENTRAL AMERICA AND THE	U	0	INVESTMENTS	N/A	484,197
(9)	CARIBBEAN	0	0			59,525,895
(10)	EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	INVESTMENTS	N/A	7,910,264
(11)	CENTRAL AMERICA AND THE CARIBBEAN	0	1	PROGRAM SERVICES	CAMPAIGNS FOR COMPANION ANIMALS, WILD ANIMALS, AND RESOLUTION OF HUMAN-ANIMAL CONFLICT.	1,882
(12)	EAST ASIA AND THE PACIFIC	0	1	PROGRAM SERVICES	CAMPAIGNS FOR COMPANION ANIMALS, WILD ANIMALS, AND RESOLUTION OF HUMAN-ANIMAL CONFLICT.	59,624
(13)	EUROPE (INCLUDING ICELAND AND GREENLAND)	0	4	PROGRAM SERVICES	CAMPAIGNS FOR COMPANION ANIMALS, WILD ANIMALS, AND RESOLUTION OF HUMAN-ANIMAL CONFLICT.	193,314
(14)	NORTH AMERICA (CANADA & MEXICO ONLY)	0	2	PROGRAM SERVICES	CAMPAIGNS FOR COMPANION ANIMALS, WILD ANIMALS, AND RESOLUTION OF HUMAN-ANIMAL CONFLICT.	37,285
(15)	SOUTH AMERICA	0	0	PROGRAM SERVICES	CAMPAIGNS FOR COMPANION ANIMALS, WILD ANIMALS, AND RESOLUTION OF HUMAN-ANIMAL CONFLICT.	41,381
(16)	SOUTH ASIA	0	0	PROGRAM SERVICES	CAMPAIGNS FOR COMPANION ANIMALS, WILD ANIMALS, AND RESOLUTION OF HUMAN-ANIMAL CONFLICT.	23,118
(17)	SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	CAMPAIGNS FOR COMPANION ANIMALS, WILD ANIMALS, AND RESOLUTION OF HUMAN-ANIMAL CONFLICT.	63,244
3a	Subtotal	0	8			69,413,292
b		0	0			0
С	/	0	8			69,413,292

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

Cat. No. 50082W

Schedule F (Form 990) 2021

Schedule F (Form 990) 2021

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.

	(if applicable)		grant	cash grant	cash disbursement	noncash assistance	of noncash assistance	valuation (book, FMV, appraisal, other)
(1)		CENTRAL AMERICA AND THE CARIBBEAN	DONATE REAL PROPERTY TO ANIMAL CARE CENTER	0	N/A	198,930	DONATION OF REAL PROPERTY TO COSTA RICAN ANIMAL CARE SANCTUARY.	BOOK
(2)		SUB-SAHARAN AFRICA	GENERAL SUPPORT	448,817	WIRE	0		
(3)		EUROPE (INCLUDING ICELAND AND GREENLAND)	GENERAL SUPPORT	818,972	WIRE	0		
(4)		EAST ASIA AND THE PACIFIC	GENERAL SUPPORT	16,875	WIRE	0		
(5)		EAST ASIA AND THE PACIFIC	FUNDS TO BUY RESCUE EQUIPMENT AND VEHICLE	5,000	WIRE	0		
(6)								
(7)								
(8)								
(9)								
10)								
11)								
12)								
13)								
14)								
15)								
16) 2 E			sted above that are r					

Schedule F (Form 990) 2021

Schedule F (Form 990) 2021

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)							

Schedule F (Form 990) 2021 Page **4**

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

Schedule F (Form 990) 2021

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	MISSION CRITERIA.
GRANT FUNDS	GRANT OVERSIGHT IS ACCOMPLISHED THROUGH A VARIETY OF METHODS SUCH AS GRANT REPORTS, MEETINGS WITH GRANTEES, AND SITE VISITS.
3 - METHOD ÚSED TÓ ACCOUNT FOR	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	CENTRAL AMERICA AND THE CARIBBEAN -ACCRUAL EAST ASIA AND THE PACIFIC -ACCRUAL EUROPE (INCLUDING ICELAND AND GREENLAND) -ACCRUAL SUB-SAHARAN AFRICA -ACCRUAL

SCHEDULE G (Form 990)

Supplemental Information Regarding Fundraising or Gaming Activities

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.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

THE HUMANE SOCIETY OF THE UNITED	STATES				53-0	225390
Fundraising Activities. Form 990-EZ filers are n				vered "Yes" on F	Form 990, Part IV, I	ne 17.
 Indicate whether the organization Mail solicitations Internet and email solicitation Phone solicitations In-person solicitations In-person solicitations Did the organization have a writtor key employees listed in Form If "Yes," list the 10 highest paid compensated at least \$5,000 by 	ns ten or oral agree 990, Part VII) or individuals or er	e f g ment with entity in contities (fund	Solicitati Solicitati Special f any individ	on of non-govern on of government fundraising events lual (including offi vith professional f	ment grants t grants cers, directors, truste fundraising services?	✓ Yes □ No
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody o	draiser have r control of outions?	(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			
CHAPMAN CUBINE AND HUSSEY, INC., 2000 15TH STREET NORTH, SUITE 550, ARLINGTON, VA 22201	FUNDRAISING CONSULTANTS		~	25,548,301	1,484,064	24,064,237
2 GIVEBRIDGE, 525 WEST MONROE STREET, CHICAGO, IL 60661	FACE TO FACE APPEALS		~	7,313,579	3,498,687	3,814,892
3 GREEN PLANET SALES COMPANY, INC., 301 COMMERCE DRIVE, MOORESTOWN, NJ 08057	FACE TO FACE APPEALS		~	3,977,731	2,754,707	1,223,024
4 DIALOGUEDIRECT, INC., 351 WEST 39TH STREET, NEW YORK, NY 10018	FACE TO FACE APPEALS		~	934,537	943,211	(8,674)
5 CHARITABLE ADULT RIDES & SERVICES, 4669 MURPHY CANYON ROAD, SUITE 200, SAN DIEGO, CA 92123	AUTO RECOVERY SERVICES	•		799,013	229,274	569,739
6 AUTOMOTIVE RECOVERY SERVICES, INC., 13085 HAMILTON CROSSING, SUITE 500, CARMEL, IN 46032	AUTO RECOVERY SERVICES	•		185,750	29,684	156,066
7 TELEFUND INC., 186 LINCOLN STREET, SUITE 100, BOSTON, MA 02111	(SEE STATEMENT)		~	151,083	322,165	(171,082)
8 PUBLIC INTEREST COMMUNICATIONS, INC., 7700 LEESBURG PIKE, FALLS CHURCH, VA 22043	(SEE STATEMENT)		~	11,680	61,400	(49,720)
9 DATA AXLE, INC., 10 VOSE FARM ROAD, PETERBOROUGH, NH 03458	VIDEO CAMPAIGN		~	0	100,000	(100,000)
10						
Total				38,921,674	9,423,192	29,498,482
3 List all states in which the organ registration or licensing. AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL						u it is exempt from
OH, OK, OR, PA, RI, SC, TN, UT, VA, WA,		·				

Schedule G (Form 990) 2021 Page 2

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.

		gross receipts greater tha	11 \$5,000.			
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			TO THE RESCUE VIRTUAL GALA	A TASTE OF RESCUE	1	(add col. (a) through col. (c))
d)			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	283,655	32,201	5,124	320,980
ш	2	Less: Contributions	183,655	32,201	52	215,908
	3	Gross income (line 1 minus line 2)	100,000	0	5,072	105,072
		,	·			·
	4	Cash prizes				0
	5	Noncash prizes	47,530			47,530
enses	6	Rent/facility costs	11,400			11,400
Direct Expenses	7	Food and beverages	28,600			28,600
Direc	8	Entertainment				0
	9	Other direct expenses .	47,325	5,955	975	54,255
	10 11	Direct expense summary. Ad Net income summary. Subtra				141,785 (36,713)
Pa	rt III					
		\$15,000 on Form 990-E2	Z, line 6a.		, , , -	
<u>e</u>			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
ent			(a) Biligo	bingo/progressive bingo	(b) Other guilling	col. (a) through col. (c)
Revenue	_	0				
_	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
_	5	Other direct expenses .				
	6	Volunteer labor	☐ Yes % ☐ No	☐ Yes % ☐ No	☐ Yes % ☐ No	
	7	Direct expense summary. Ad	d lines 2 through 5 in c	olumn (d)		
	8	Net gaming income summary	/. Subtract line 7 from li	ne 1, column (d)		
9	a Is	Enter the state(s) in which the or s the organization licensed to co	ganization conducts ga onduct gaming activities	ming activities:s in each of these states		🗌 Yes 🗌 No
	b If	f "No," explain:				
10		Vere any of the organization's g	aming licenses revoked	, suspended, or termina	ated during the tax year?	
	b If	f "Yes," explain:				

Schedu	ule G (Form 990) 2021		Page 3
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:		
а	The organization's facility	+	%
b	An outside facility	-	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	I	
	Name ►		
	Address ►		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		□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 ▶ \$		
С	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:		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to)	
	retain the state gaming license?		☐ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations of spent in the organization's own exempt activities during the tax year ▶ \$	r	
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, columns Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional See instructions.		
CEE N	NEXT PAGE		
SEET	NEXT FAGE		

Da	rt	I۱

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
SCHEDULE G, PART I - GENERAL EXPLANATION:	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.
	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.
SCHEDULE G, PART I, LINE 2B(II) - LINE 2B COLUMN (II) ACTIVITY 7	TELEPHONE FR TO OBTAIN MULTI YR REVENUE
SCHEDULE G, PART I, LINE 2B(II) - LINE 2B COLUMN (II) ACTIVITY 8	TELEPHONE FR TO OBTAIN MULTI YR REVENUE
SCHEDULE G, PART I, LINE 2B(V) - PAYMENT OF FUNDRAISING EXPENSES	THE AGREEMENTS THE HSUS ENTERED INTO WITH CHAPMAN CUBINE AND HUSSEY, INC. AND DATA AXLE, 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 \$288,448 AND \$1,348,819 TO CHAPMAN CUBINE AND HUSSEY, INC. AND DATA AXLE, INC., RESPECTIVELY, FOR FUNDRAISING EXPENSES.
	IN ADDITION TO THE ORGANIZATIONS WHICH APPEAR ON SCHEDULE G, PART I, THE HSUS DID ENTER INTO ARRANGEMENTS WITH NINETEEN 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.

SCHEDULE I (Form 990)

Department of the Treasury

Internal Revenue Service

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

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

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Employer identification number** THE HUMANE SOCIETY OF THE UNITED STATES 53-0225390 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 the selection criteria used to award the grants or assistance? ✓ Yes No Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part II Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash (e) Amount of (g) Description of (h) Purpose of grant (book, FMV, appraisal, or government (if applicable) grant noncash assistance noncash assistance or assistance other) (SEE STATEMENT) 0 41-2185841 25,000 (SEE STATEMENT) 501 (C)(3) ALMOST HOME SHELTER PET RESCUE 794 HIGHWAY 28, HAZARD, KY 41701 46-0886370 0 81,560 FMV (SEE STATEMENT) (SEE STATEMENT) 501 (C)(3) (3) ALTUS ANIMAL WELFARE ASSOCIATION 2204 ENTERPRISE DRIVE, ALTUS, OK 73521 81-1137820 501 (C)(3) 175,000 79,973 FMV (SEE STATEMENT) (SEE STATEMENT) (SEE STATEMENT) 41-0693842 501 (C)(3) 21,764 FMV (SEE STATEMENT) (SEE STATEMENT) ANIMAL PROTECTION OF NEW MEXICO, INC P.O BOX 11395, ALBUQUERQUE, NM 87192 85-0283292 501 (C)(3) 5,000 0 (SEE STATEMENT) (SEE STATEMENT) 61-1199194 501 (C)(3) 128,073 FMV (SEE STATEMENT) (SEE STATEMENT) (SEE STATEMENT) 82-0351171 501 (C)(3) 90.000 20.106 FMV (SEE STATEMENT) (SEE STATEMENT) ASHEVILLE HUMANE SOCIETY 14 FOREVER FRIEND LANE, ASHEVILLE, NC 28806 56-1444098 501 (C)(3) 113.299 FMV (SEE STATEMENT) (SEE STATEMENT) (SEE STATEMENT) 54-2021941 501 (C)(3) 124,060 FMV (SEE STATEMENT) (SEE STATEMENT) AUBURN VALLEY HUMANE SOCIETY 4910 A STREET SE. AUBURN, WA 98092 45-0638467 501 (C)(3) 101,000 0 (SEE STATEMENT) (11) BAILING OUT BENJI P.O. BOX 203, AMES, IA 50010 6,000 47-1652323 501 (C)(3) 0 (SEE STATEMENT) (SEE STATEMENT) Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 130 Enter total number of other organizations listed in the line 1 table 3

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

Cat. No. 50055P

Schedule I (Form 990) 2021

Schedule I (Form 990) 2021

Part III	Grants and Other Assistance t Part III can be duplicated if addit	tional space is needed		o organization and	voica roo on roin ooo,	
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1						
2						
3						
4						
5						
6						
7						
Part IV	Supplemental Information. Pro	vide the information re	equired in Part I. li	ne 2: Part III. colum	n (b): and any other additi	onal information.
SEE STAT	LINENT)					

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Name and address of organization or government	EIN	IRC section if applicable	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of non-cash assistance	Purpose of grant or assistance
(12) BALTIMORE ANIMAL RESCUE & CARE SHELTER, INC. 301 STOCKHOLM STREET, BALTIMORE, MD 21230	86-1130456	501 (C)(3)	5,000	0			CARE FOR CATS RESCUED FROM A HOARDING SITUATION
(13) BETHEL FRIENDS OF CANINES P.O. BOX 2287, BETHEL, AK 99559	46-2344486	501 (C)(3)	250,000	19,675	FMV	PET FOOD AND ANIMAL FEED	DISTRIBUTE PET FOOD TO THOSE IN NEED, PROVIDE SPAY AND NEUTER SERVICES AND GENERAL VETERINARY SERVICES THROUGH THE PETS FOR LIFE PROGRAM
(14) BETTER TOGETHER ANIMAL ALLIANCE 870 KOOTENAI CUT-OFF ROAD, PONDERAY, ID 83852	94-3071245	501 (C)(3)	0	57,271	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(15) BI-STATE FOOD PANTRY P.O. BOX 462, TROY, IL 62294	27-2419695	501 (C)(3)	0	85,246	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(16) BLAZE S TRIBUTE EQUINE INC 17667 MARKITA DRIVE, JONES, OK 73049	43-2024364	501 (C)(3)	5,000	0			TO AID IN THE VETERINARY COSTS OF A LARGE ANIMAL RESCUE
(17) BLOUNT COUNTY ANIMAL WELFARE SOCIETY 3570 PINEVIEW ROAD, MARYVILLE, TN 37803	84-2672533	501 (C)(3)	0	51,099	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(18) CHARLESTON ANIMAL SERVICES 2455 REMOUNT ROAD, NORTH CHARLESTON, SC 29406	57-6021863	501 (C)(3)	0	18,000	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(19) CHARM CITY COMPANIONS 2601 GREENMOUNT AVENUE, BALTIMORE, MD 21218	46-5600469	501 (C)(3)	0	40,102	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(20) CHEROKEE NATION 17675 S MUSKOGEE AVENUE, TAHLEQUAH, OK 74464	73-0757033	TRIBAL GOVERNMENT	0	183,705	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(21) CINCINNATI ANIMAL CARE 3949 COLERAIN AVENUE, CINCINNATI, OH 45223	85-2177478	501 (C)(3)	0	54,481	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(22) CLACKAMAS COUNTY DOG SERVICES 13141 SE HIGHWAY 212, CLACKAMAS, OR 97015	45-4424555	501 (C)(3)	0	40,239	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(23) CLARKSDALE ANIMAL RESCUE EFFORT AND SHELTER P.O. BOX 142, CLARKSDALE, MS 38614	45-3765360	501 (C)(3)	0	39,604	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Name and address of organization or government	EIN	IRC section if applicable	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of non-cash assistance	Purpose of grant or assistance
(24) CLEVELAND ANIMAL PROTECTIVE LEAGUE 1729 WILLEY AVENUE, CLEVELAND, OH 44113	34-0714644	501 (C)(3)	15,000	0			FUNDING TO RESEARCH AND COLLECT DATA ON THE CURRENT LANDSCAPE OF PET INCLUSIVE AFFORDABLE HOUSING IN LOCAL COMMUNITIES
(25) COLORADO PET PANTRY P.O. BOX 323, BOULDER, CO 80306	45-4210185	501 (C)(3)	0	68,364	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(26) COLUMBUS HUMANE 3015 SCIOTO DARBY EXECUTIVE COURT, HILLIARD, OH 43026	31-4379492	501 (C)(3)	0	93,487	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(27) COMPANION ANIMAL ALLIANCE 2550 GOURIER AVENUE, BATON ROUGE, LA 70820	27-1204719	501 (C)(3)	0	70,089	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(28) COUNTY OF GUILFORD DBA GUILFORD COUNTY ANIMAL SHELTER 4525 WEST WENDOVER AVENUE, GREENSBORO, NC 27409	56-6000305	GOVERNMENT	0	46,000	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(29) DANE COUNTY HUMANE SOCIETY 5132 VOGES ROAD, MADISON, WI 53718	39-0806335	501 (C)(3)	80,000	10,681	FMV	PET FOOD AND ANIMAL FEED	DISTRIBUTE PET FOOD TO THOSE IN NEED, PROVIDE SPAY AND NEUTER SERVICES AND GENERAL VETERINARY SERVICES THROUGH THE PETS FOR LIFE PROGRAM
(30) DANVILLE-BOYLE COUNTY HUMANE SOCIETY P.O. BOX 487, DANVILLE, KY 40423	61-0732934	501 (C)(3)	15,000	0			DEVELOPMENT OF COMPREHENSIVE PROGRAMMING FOR COMMUNITY CATS BOTH IN AND OUT OF THE SHELTER, INCLUDING PRO-ACTIVE STRATEGIES AND BEST PRACTICES TO PROVIDE A HOLISTIC APPROACH TO MANAGING POPULATIONS OF CATS IN THEIR COMMUNITY
(31) DUBUQUE REGIONAL HUMANE SOCIETY 4242 CHAVENELLE ROAD, DUBUQUE, IA 52002	42-6039535	501 (C)(3)	0	72,112	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(32) EASTERN AGENCY ON AGING 240 STATE STREET, BREWER, ME 04412	01-0328376	501 (C)(3)	0	87,220	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(33) EL PASO ANIMAL SERVICES 5001 FRED WILSON AVENUE, EL PASO, TX 79906		GOVERNMENT	0	32,901	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Name and address of organization or government	EIN	IRC section if applicable	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of non-cash assistance	Purpose of grant or assistance
(34) EQUINE RESCUE OF AIKEN 532 GLENWOOD DRIVE, AIKEN, SC 29803	20-5162723	501 (C)(3)	500	35,623	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM, PROVIDE FUNDS TO REPAIR DAMAGE DUE TO FIRE
(35) FERALCARE INC. DBA NUTMEG SPAY NEUTER CLINIC 25 CHARLES STREET, STRATFORD, CT 06615	38-3746984	501 (C)(3)	0	22,827	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(36) FERGUSON ENTERPRISES HUMANE SOCIETY OF WASHINGTON COUNTY 2101 W WALNUT STREET, JOHNSON CITY, TN 37604	62-1582278	501 (C)(3)	0	44,364	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(37) FIDO INC. DBA FRIENDS OF INDIANAPOLIS DOGS OUTSIDE P.O. BOX 30069, INDIANAPOLIS, IN 46230	20-8089877	501 (C)(3)	0	222,548	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(38) FIX WEST TEXAS 4921 N CR 1147, MIDLAND, TX 79705	84-4108520	501 (C)(3)	0	80,787	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(39) FORT WAYNE PET FOOD PANTRY 2502 CHURCH STREET, FORT WAYNE, IN 46809	45-2902890	501 (C)(3)	0	134,575	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(40) FRANKLIN COUNTY HUMANE SOCIETY DBA PAWS FOR LIFE ANIMAL RESCUE INC. P.O. BOX 338, YOUNGSVILLE, NC 27596	01-0621772	501 (C)(3)	0	73,692	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(41) FREE99FRIDGE 1070 WHITE STREET SW, ATLANTA, GA 30310	N/A	NON-PROFIT	0	84,674	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(42) FRIENDS OF COLLETON COUNTY ANIMAL SHELTER 33 POOR FARM ROAD, WALTERBORO, SC 29488	26-4474266	501 (C)(3)	0	76,468	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(43) FRIENDS OF THE SHELTER DBA PANHANDLE ANIMAL SHELTER 870 KOOTENAI CUTOFF ROAD, PONDERAY, ID 83852	94-3071245	501 (C)(3)	130,000	32,208	FMV	PET FOOD AND ANIMAL FEED	DISTRIBUTE PET FOOD TO THOSE IN NEED, PROVIDE SPAY AND NEUTER SERVICES AND GENERAL VETERINARY SERVICES THROUGH THE PETS FOR LIFE PROGRAM
(44) THE FUND FOR ANIMALS, INC. 1255 23RD STREET, NW, SUITE 460, WASHINGTON, DC 20037	13-6218740	501 (C)(3)	6,105,051	0			GENERAL SUPPORT
(45) FURKIDS INC. 5235 UNION HILL ROAD, CUMMINGS, GA 30040	01-0766844	501 (C)(3)	5,000	0			SPAY AND NEUTER SURGERIES AND VACCINATIONS FOR RESCUED ANIMALS
(46) GERDA'S EQUINE RESCUE 5825 ROUTE 30, WEST TOWNSHEND, VT 05359	59-3800477	501 (C)(3)	5,000	0			FUNDING TO HELP COVER OPERATING COSTS AFTER FLASH FLOOD

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Name and address of organization or government	EIN	IRC section if applicable	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of non-cash assistance	Purpose of grant or assistance
(47) GLEANING FOR THE WORLD 7539 STAGE ROAD, CONCORD, VA 24538	54-1930105	501 (C)(3)	0	50,830	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(48) GLOBAL FEDERATION OF ANIMAL SANCTUARIES P.O. BOX 32294, WASHINGTON, DC 20007	26-1676217	501 (C)(3)	15,000	0			GENERAL SUPPORT
(49) GREATER HUNTSVILLE HUMANE SOCIETY 2812 JOHNSON ROAD, HUNTSVILLE, AL 35805	27-7093527	501 (C)(3)	0	36,074	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(50) GUILFORD COUNTY ANIMAL SERVICES 711 HUFFINE MILL ROAD, GREENSBORO, NC 27405	56-6000305	GOVERNMENT	0	58,320	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(51) HARBOR HUMANE SOCIETY 14345 BAGLEY STREET AT US HWY 31, WEST OLIVE, MI 49460	38-1623660	501 (C)(3)	0	38,335	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(52) HORRY COUNTY GOVERNMENT 1923 INDUSTRIAL PARK DRIVE, CONWAY, SC 29526	57-6000365	GOVERNMENT	0	55,652	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(53) HOUSTON SPCA 7007 OLD KATY ROAD, HOUSTON, TX 77024	74-1287171	501 (C)(3)	5,000	0			COVER ADDITIONAL AND UNEXPECTED EXPENSES DUE TO HURRICANE SEASON
(54) HSWC DBA NEW LEASH ON LIFE 507 JIM DRAPER BOULEVARD, LEBANON, TN 37087	62-1048196	501 (C)(3)	0	33,668	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(55) HUMANE PENNSYLVANIA DBA HUMANE SOCIETY MANAGEMENT SERVICES INC. 1729 N 11TH STREET, READING, PA 19604	23-1384936	501 (C)(3)	0	45,064	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(56) HUMANE SOCIETY INTERNATIONAL 1255 23RD STREET, NW SUITE 450, WASHINGTON, DC 20037	52-1769464	501 (C)(3)	5,679,457	0			GENERAL SUPPORT AND SUPPORT FOR LIBERIA CHIMPS
(57) HUMANE SOCIETY LEGISLATIVE FUND 1255 23RD STREET, NW SUITE 455, WASHINGTON, DC 20037	59-3786428	501 (C)(4)	1,617,159	0			FUNDS TO COVER FEDERAL AFFAIRS COSTS
(58) HUMANE SOCIETY OF CHARLOTTE, INC. 2700 TOOMEY AVENUE, CHARLOTTE, NC 28203	58-1342479	501 (C)(3)	27,500	0			FUNDING TO PROVIDE ANIMAL WELFARE TRAINING AND GUIDANCE ON DATA TRACKING OF RURAL SHELTER SERVICES
(59) HUMANE SOCIETY OF GREATER KANSAS CITY 5445 PARALLEL PARKWAY, KANSAS CITY, KS 66104	48-0581965	501 (C)(3)	0	125,160	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Name and address of organization or government	EIN	IRC section if applicable	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of non-cash assistance	Purpose of grant or assistance
(60) HUMANE SOCIETY OF NORTH CENTRAL FLORIDA 4205 NW 6TH STREET, GAINESVILLE, FL 32609	59-1908492	501 (C)(3)	3,000	115,786	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM, FUNDING FOR CARE OF RESCUED ANIMAL
(61) HUMANE SOCIETY OF PUERTO RICO P.O. BOX 2387, GUAYNABO, PR 00970	66-0329776	501 (C)(3)	30,000	0			PUERTO RICO SPAY AND NEUTER CAMPAIGN
(62) HUMANE SOCIETY OF SCOTT COUNTY 2802 WEST CENTRAL PARK, DAVENPORT, IA 52804	42-0801836	501 (C)(3)	15,000	0			DEVELOPMENT OF COMPREHENSIVE PROGRAMMING FOR COMMUNITY CATS BOTH IN AND OUT OF THE SHELTER, INCLUDING PRO-ACTIVE STRATEGIES FOR MANAGING POPULATIONS OF CATS IN THE COMMUNITY
(63) HUMANE SOCIETY OF SHELBY COUNTY DBA SHELBY HUMANE 381 MCDON ROAD, COLUMBIANA, AL 35051	63-0817987	501 (C)(3)	0	77,640	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(64) HUMANE SOCIETY OF TULSA 9521- B S. RIVERSIDE PARKWAY, #542, TULSA, OK 74137	73-1571476	501 (C)(3)	5,000	0			PROVIDE CARE TO ANIMALS RESCUED FROM PUPPY MILL
(65) HUMANE SOCIETY VETERINARY MEDICAL ASSOCIATION, INC. 1255 23RD STREET, NW SUITE 450, WASHINGTON, DC 20037	22-2768664	501 (C)(3)	504,877	0			GENERAL SUPPORT
(66) IDAHO ANIMAL RESCUE NETWORK DBA ANIMAL RESCUE NETWORK 2021 RIPON AVENUE, LEWISTON, ID 83501	84-3924550	501 (C)(3)	0	108,397	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(67) IDAHO HUMANE SOCIETY INC. 1300 S BIRD STREET, BOISE, ID 83709	82-0212536	501 (C)(3)	130,000	207,948	FMV	PET FOOD AND ANIMAL FEED	DISTRIBUTE PET FOOD TO THOSE IN NEED, PROVIDE SPAY AND NEUTER SERVICES AND GENERAL VETERINARY SERVICES THROUGH THE PETS FOR LIFE PROGRAM
(68) JEFFERSON PROTECTION AND ANIMAL WELFARE SERVICES 920 DAVID DRIVE, METAIRIE, LA 70003		GOVERNMENT	0	77,387	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(69) KENTUCKY HUMANE SOCIETY ANIMAL RESCUE LEAGUE INC. 1000 LYNDON LANE, SUITE B, LOUISVILLE, KY 40222	61-0463938	501 (C)(3)	4,800	44,899	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM, PROVIDE VETERINARY CARE FOR RESCUED HORSES
(70) LEECH LAKE BAND OF OJIBWE 190 SAILSTAR DRIVE NW, CASS LAKE, MN 56633	41-1242052	TRIBAL GOVERNMENT	190,000	44,357	FMV	PET FOOD AND ANIMAL FEED	DISTRIBUTE PET FOOD TO THOSE IN NEED, PROVIDE SPAY AND NEUTER SERVICES AND GENERAL VETERINARY SERVICES THROUGH THE PETS FOR LIFE PROGRAM

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Name and address of organization or government	EIN	IRC section if applicable	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of non-cash assistance	Purpose of grant or assistance
(71) LEILANI FARM SANCTUARY 260 E KUIAHA ROAD, HAIKU, HI 96708	26-1111144	501 (C)(3)	5,000	0			FENCING PROJECT TO PROVIDE ANIMALS WITH MORE ACRES UPON WHICH TO GRAZE
(72) LEON COUNTY HUMANE SOCIETY 413 TIMBERLANE ROAD, TALLAHASSEE, FL 32312	59-6138275	501 (C)(3)	1,000	39,882	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(73) LIFECARE ALLIANCE 1699 W MOUND STREET, COLUMBUS, OH 43223	31-4379494	501 (C)(3)	0	19,317	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(74) LIFELINE ANIMAL PROJECT 3180 PRESIDENTIAL DRIVE, ATLANTA, GA 30340	01-0599278	501 (C)(3)	0	144,005	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(75) LOUISIANA SPCA 1700 MARDI GRAS BOULEVARD, NEW ORLEANS, LA 70124	72-0471368	501 (C)(3)	197,000	87,320	FMV	PET FOOD AND ANIMAL FEED	FUNDS TO PURCHASE VEHICLE AND EQUIPMENT, PROVIDE PET FOOD TO PET OWNERS IN NEED
(76) MARYLAND SPCA 3300 FALLS ROAD, BALTIMORE, MD 21211	52-6001558	501 (C)(3)	500	74,970	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(77) MASSACHUSETTS SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS 350 SOUTH HUNTINGTON AVENUE, BOSTON, MA 02130	04-2103597	501 (C)(3)	20,000	213,037	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM, COLLECT DATA TO DETERMINE THE MAIN REASONS WHY PETS ARE RELINQUISHED TO ANIMAL SHELTERS
(78) MCPAW 7315 MUNCASTER MILL ROAD, DERWOOD, MD 20855	27-1335331	501 (C)(3)	5,300	0			PROVIDE FREE PET FOOD FOR THOSE IN NEED
(79) MEDICINE BEAR SHELTER P.O. BOX 1819, BROWNING, MT 59417	81-0212955	GOVERNMENT	0	168,238	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(80) METRO ANIMAL SHELTER 3140 35TH STREET, TUSCALOOSA, AL 35401	63-1120822	501 (C)(3)	0	49,168	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(81) MIAMI VETERINARY FOUNDATION 11622 SW 88 STREET, MIAMI, FL 33176	59-1911775	501 (C)(3)	85,000	0			FUND PETS FOR LIFE ACTIVITIES SUCH AS PROVIDING PET SUPPLIES, SPAY AND NEUTER SERVICES AND GENERAL VETERINARY SERVICES.
(82) MIAMI-DADE ANIMAL SERVICES 7401 NW 74TH STREET, MIAMI, FL 33166		GOVERNMENT	0	79,673	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Name and address of organization or government	EIN	IRC section if applicable	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of non-cash assistance	Purpose of grant or assistance
(83) MICHIGAN HUMANE 30300 TELEGRAPH ROAD SUITE 220, BINGHAM FARMS, MI 48025	38-1358206	501 (C)(3)	0	143,132		PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(84) MINN-KOTA PAAWS 2125 1ST AVENUE S, FARGO, ND 58103	30-0245020	501 (C)(3)	90,000	192,567	FMV	PET FOOD AND ANIMAL FEED	DISTRIBUTE PET FOOD TO THOSE IN NEED, PROVIDE SPAY AND NEUTER SERVICES AND GENERAL VETERINARY SERVICES THROUGH THE PETS FOR LIFE PROGRAM
(85) MONROE COUNTY HUMANE ASSOCIATION P.O. BOX 1334, BLOOMINGTON, IN 47402	35-6064277	501 (C)(3)	0	31,560	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(86) NASHVILLE HUMANE ASSOCIATION 213 OCEOLA AVENUE, NASHVILLE, TN 37209	62-0672999	501 (C)(3)	0	49,220	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(87) NEW HAMPSHIRE HUMANE SOCIETY P.O. BOX 572, LACONIA, NH 03247	02-6006374	501 (C)(3)	0	28,556	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(88) NO KILL LOUISVILLE P.O. BOX 6655, LOUISVILLE, KY 40206	27-2368180	501 (C)(3)	0	37,782	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(89) NORTHEAST MISSOURI HUMANE SOCIETY P.O. BOX 205, HANNIBAL, MO 63401	43-6063703	501 (C)(3)	0	65,178	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(90) OKLAHOMA HUMANE SOCIETY 628 S. WILSON, VINITA, OK 74301	20-8446621	501 (C)(3)	100,000	29,295	FMV	PET FOOD AND ANIMAL FEED	DISTRIBUTE PET FOOD TO THOSE IN NEED, PROVIDE SPAY AND NEUTER SERVICES AND GENERAL VETERINARY SERVICES THROUGH THE PETS FOR LIFE PROGRAM
(91) OKLAHOMA PRIMATE SANCTUARY INC. 2205 SW 24TH STREET, NEWCASTLE, OK 73065	73-1522989	501 (C)(3)	10,000	0			VETERINARY SERVICES AND FOOD FOR RESCUED ANIMALS
(92) ONE TAIL AT A TIME - PDX 8924 NORTH CLARENDON AVENUE, PORTLAND, OR 97203	81-5244538	501 (C)(3)	0	50,767	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(93) PALM VALLEY ANIMAL SOCIETY 2501 W. TRENTON ROAD, EDINBURG, TX 78539	74-1819910	501 (C)(3)	0	45,870	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(94) PAWS HUMANE SOCIETY 4900 MILGEN ROAD, COLUMBUS, GA 31907	58-2513501	501 (C)(3)	0	61,180	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Name and address of organization or government	EIN	IRC section if applicable	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of non-cash assistance	Purpose of grant or assistance
(95) PAWS SHELTER FOUNDATION - HELPING HANDS OF HOPE P.O. BOX 1116, ELIZABETHTOWN, KY 42702	45-2431905	501 (C)(3)	0	33,805	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(96) PEOPLE ASSISTING ANIMAL CONTROL PAAC 5804 AYERS STREET, CORPUS CHRISTI, TX 78415	38-3817365	501 (C)(3)	0	70,525	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(97) PET HELPERS INC. 1447 FOLLY ROAD, CHARLESTON, SC 29412	57-0802283	501 (C)(3)	0	20,652	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(98) PET RESOURCE CENTER OF KC 1116 E. 59TH STREET, KANSAS CITY, MO 64110	82-0563117	501 (C)(3)	0	70,551	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(99) PROJECT CHIMPS P.O. BOX 2140, BLUE RIDGE, GA 30513	47-1439557	501 (C)(3)	1,025,000	0			GENERAL SUPPORT
(100) RICHMOND SPCA 2519 HERMITAGE ROAD, RICHMOND, VA 23220	54-0506328	501 (C)(3)	15,000	0			FUNDING TO COLLECT DATA ON THE CURRENT LANDSCAPE OF PET INCLUSIVE AFFORDABLE HOUSING IN LOCAL COMMUNITIES
(101) ROBERT POTTER LEAGUE FOR ANIMALS, INC. 87 OLIPHANT LANE, MIDDLETOWN, RI 02842	05-0301553	501 (C)(3)	0	125,629	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(102) ROCHESTER ANIMAL SERVICES 184 VERONA STREET, ROCHESTER, NY 14608		GOVERNMENT	0	75,097	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(103) ROSEBUD SIOUX TRIBE 11TH LEGION AVENUE, ROSEBUD, SD 57750	46-0248724	TRIBAL GOVERNMENT	0	99,705	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(104) SALT LAKE COUNTY ANIMAL SERVICES 511 W 3900 S, SALT LAKE CITY, UT 84123	12-1526705	GOVERNMENT	0	95,975	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(105) SAN DIEGO HUMANE SOCIETY AND SPCA 5500 GAINES STREET, SAN DIEGO, CA 92110	95-1661688	501 (C)(3)	89,811	0			SUPPORT RAMONA, CA WILDLIFE CENTER
(106) SEDGWICK COUNTY ANIMAL CONTROL 1015 STILLWELL STREET, WICHITA, KS 67213		GOVERNMENT	0	115,737	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(107) SEK HUMANE SOCIETY 485 E 560TH AVENUE, PITTSBURG, KS 66762	23-7431389	501 (C)(3)	0	74,819	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Name and address of organization or government	EIN	IRC section if applicable	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of non-cash assistance	Purpose of grant or assistance
(108) SHELTER ANIMALS COUNT 41 WATCHUNG PLAZA, SUITE 393, MONTCLAIR, NJ 07042	46-2215168	501 (C)(3)	25,000	0			2021 OPERATIONAL AND PROJECT FUNDING
(109) SHOW YOUR SOFT SIDE, INC. 5712 VISITATION WAY, BALTIMORE, MD 21210	30-0774382	501 (C)(3)	0	93,841	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(110) SOURIS VALLEY ANIMAL SHELTER 1935 20TH AVE SE, MINOT, ND 58701	45-0345317	501 (C)(3)	0	182,380	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(111) SPAY ARKANSAS INC. 1909 W HUNTSVILLE AVENUE, SPRINGDALE, AR 72762	06-1833843	501 (C)(3)	0	141,829	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(112) SPCA EAST TEXAS 3405 EAST NORTHEAST LOOP, TYLER, TX 75713	27-2188982	501 (C)(3)	0	45,641	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(113) TERREBONNE PARISH 8026 MAIN STREET, 7TH FLOOR, HOUMA, LA 70360	72-6001390	GOVERNMENT	0	24,908	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(114) THE ANNA SHELTER 1555 EAST 10TH STREET, ERIE, PA 16511	20-1512416	501 (C)(3)	5,000	0			FUNDING FOR RESCUED ANIMALS
(115) THE ARIZONA PET PROJECT 3905 N. 7TH AVENUE, #7611, PHOENIX, AZ 85011	86-1008549	501 (C)(3)	0	82,394	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(116) THE BLACKFEET TRIBE OF THE BLACKFEET NATION P.O. BOX 850, ALL CHIEFS SQUARE, BROWNING, MT 59417	81-0212955	TRIBAL GOVERNMENT	115,000	0			FUND PETS FOR LIFE ACTIVITIES SUCH AS PROVIDING PET SUPPLIES, SPAY AND NEUTER SERVICES AND GENERAL VETERINARY SERVICES
(117) THE FELINE FIX DBA DIVINE FELINE, INC. 6075 PARKWAY DRIVE, UNIT 185, COMMERCE CITY, CO 80022	26-3781322	501 (C)(3)	5,000	0			FUNDS FOR SPAY AND NEUTER SURGERIES AND VACCINES FOR RESCUED CATS
(118) THE HUMANE SOCIETY FOR SEATTLE/KING COUNTY 13212 SE EASTGATE WAY, BELLEVUE, WA 98005	91-0282060	501 (C)(3)	125,000	39,872	FMV	PET FOOD AND ANIMAL FEED	DISTRIBUTE PET FOOD TO THOSE IN NEED, PROVIDE SPAY AND NEUTER SERVICES AND GENERAL VETERINARY SERVICES THROUGH THE PETS FOR LIFE PROGRAM
(119) THE HUMANE SOCIETY WILDLIFE LAND TRUST 1255 23RD STREET, NW SUITE 450, WASHINGTON, DC 20037	52-1808517	501 (C)(3)	145,604	0			GENERAL SUPPORT
(120) THE LITTLE ANGELS PROJECT 29348 ROADSIDE DRIVE, AGOURA HILLS, CA 91301	81-1635505	501 (C)(3)	5,000	0			FUND WELLNESS CLINICS FOR ANIMALS IN VENTURA COUNTY AND LOS ANGELES TO KEEP PETS IN HOMES

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Name and address of organization or government	EIN	IRC section if applicable	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of non-cash assistance	Purpose of grant or assistance
(121) THE SOUTH FLORIDA SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS P.O. BOX 924088, HOMESTEAD, FL 33092	65-0338657	501 (C)(3)	12,000	0			FUNDING FOR CARE OF RESCUED ANIMALS
(122) TRUSTEES OF TUFTS UNIVERSITY DBA TUFTS UNIVERSITY 169 HOLLAND STREET, SOMERSVILLE, MA 02144	04-2103634	501 (C)(3)	32,800	0			FERTILITY CONTROL STUDIES FOR WILD HORSES AND BURRO POPULATIONS
(123) TULSA SPCA P.O. BOX 581898, TULSA, OK 74158	73-0608144	501 (C)(3)	6,320	61,561	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM, PROVIDE CARE FOR RESCUED ANIMALS
(124) TWIN COUNTY HUMANE SOCIETY 352 DOGWOOD ROAD, FANCY GAP, VA 24328	54-2031424	501 (C)(3)	0	80,983	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(125) UNIVERSITY OF MINNESOTA FOUNDATION 200 OAK STREET SE, SUITE 500, MINNEAPOLIS, MN 55455	41-6042488	501 (C)(3)	10,000	0			FENCING TO PROTECT SHEEP FROM WOLVES
(126) WEST END ANIMAL WELLNESS CENTER 1195 RALPH DAVID ABERNATHY BLVD, ATLANTA, GA 30310	47-2203543	FOR-PROFIT BUSINESS	0	46,456	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(127) WHITE EARTH NATION 35500 EAGLE VIEW ROAD, OMEGA, MN 56569	41-1737979	TRIBAL GOVERNMENT	0	44,446	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(128) WINDHAM COUNTY HUMANE SOCIETY 916 WEST RIVER ROAD, BRATTLEBORO, VT 05301	03-6016140	501 (C)(3)	0	20,143	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(129) WISCONSIN HUMANE SOCIETY 4500 W WISCONSIN AVENUE, MILWAUKEE, WI 53208	39-0810533	501 (C)(3)	75,000	0			FUND PETS FOR LIFE ACTIVITIES SUCH AS PROVIDING PET SUPPLIES, SPAY AND NEUTER SERVICES AND GENERAL VETERINARY SERVICES
(130) WISE COUNTY HUMANE SOCIETY 2426 CLINCH HAVEN ROAD, BIG STONE GAP, VA 24219	32-0513008	501 C(3)	0	34,543	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
(131) YAKIMA HUMANE SOCIETY 2405 WEST BIRCHFIELD ROAD, YAKIMA, WA 98901	91-0580938	501 (C)(3)	110,000	50,216	FMV	PET FOOD AND ANIMAL FEED	DISTRIBUTE PET FOOD TO THOSE IN NEED, PROVIDE SPAY AND NEUTER SERVICES AND GENERAL VETERINARY SERVICES THROUGH THE PETS FOR LIFE PROGRAM
(132) YOLA AND BOOGY FUND DBA YOLA'S PET FUND 3562 BLUE BELL, CHEYENNE, WY 82007	82-3238814	501 (C)(3)	0	83,593	FMV	PET FOOD AND ANIMAL FEED	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Name and address of organization or government	EIN	IRC section if applicable	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of non-cash assistance	Purpose of grant or assistance
(133) YOUNG WILLIAMS ANIMAL CENTER OF EAST TENNESSEE 3201 DIVISION STREET, KNOXVILLE, TN 37919	45-5326778	501 (C)(3)	0	25,936	FMV	PET FOOD AND ANIMAL	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM

Return Reference - Identifier	Explanation
SCHEDULE I, PART I, LINE	THE HUMANE SOCIETY OF THE UNITED STATES ISSUES GRANTS TO ORGANIZATIONS THAT MEET THE
2 - PROCEDÚRES FÓR MONITORING USE OF	MISSION CRITERIA.
GRANT FUNDS.	GRANT OVERSIGHT IS ACCOMPLISHED THROUGH A VARIETY OF METHODS SUCH AS GRANT REPORTS, MEETINGS WITH GRANTEES, AND SITE VISITS.
(1) SCHEDULE I, PART II, COLUMN A - NAME AND	ALLIANCE FOR CONTRACEPTION IN CATS & DOGS
ADDRESS OF ORGANIZATION OR GOVERNMENT	11145 NW OLD CORNELIUS PASS ROAD, PORTLAND, OR 97231
(4) SCHEDULE I, PART II, COLUMN A - NAME AND	ANIMAL HUMANE SOCIETY
ADDRESS OF ORGANIZATION OR GOVERNMENT	845 MEADOW LANE NORTH, GOLDEN VALLEY, MN 55422
(6) SCHEDULE I, PART II, COLUMN A - NAME AND	ANIMAL SHELTER ACTION SOCIETY DBA MAYFIELD GRAVES COUNTY ANIMAL SHELTER
ADDRESS OF ORGANIZATION OR GOVERNMENT	1201 W BROADWAY, MAYFIELD, KY 42066
(7) SCHEDULE I, PART II, COLUMN A - NAME AND	ANIMAL SHELTER OF WOOD RIVER VALLEY INC. DBA MOUNTAIN HUMANE
ADDRESS OF ORGANIZATION OR GOVERNMENT	101 CROY CREEK ROAD, HAILEY, ID 83333
(9) SCHEDULE I, PART II, COLUMN A - NAME AND	ASSISI ANIMAL CLINICS OF VIRGINIA, INC. DBA ANGELS OF ASSISI
ADDRESS OF ORGANIZATION OR GOVERNMENT	415 CAMPBELL AVENUE SW, ROANOKE, VA 24016
SCHEDULE I, PART II, COLUMN G -	ALMOST HOME SHELTER PET RESCUE:
DESCRIPTION OF NON- CASH ASSISTANCE	PET FOOD AND ANIMAL FEED
SCHEDULE I, PART II, COLUMN G -	ALTUS ANIMAL WELFARE ASSOCIATION:
DESCRIPTION OF NON- CASH ASSISTANCE	PET FOOD AND ANIMAL FEED
SCHEDULE I, PART II, COLUMN G -	ANIMAL HUMANE SOCIETY:
DESCRIPTION OF NON- CASH ASSISTANCE	PET FOOD AND ANIMAL FEED
SCHEDULE I, PART II, COLUMN G -	ANIMAL SHELTER ACTION SOCIETY DBA MAYFIELD GRAVES COUNTY ANIMAL SHELTER:
DESCRIPTION OF NON- CASH ASSISTANCE	PET FOOD AND ANIMAL FEED
SCHEDULE I, PART II, COLUMN G -	ANIMAL SHELTER OF WOOD RIVER VALLEY INC. DBA MOUNTAIN HUMANE:
DESCRIPTION OF NON- CASH ASSISTANCE	PET FOOD AND ANIMAL FEED
SCHEDULE I, PART II, COLUMN G -	ASHEVILLE HUMANE SOCIETY:
DESCRIPTION OF NON- CASH ASSISTANCE	PET FOOD AND ANIMAL FEED
SCHEDULE I, PART II, COLUMN G -	ASSISI ANIMAL CLINICS OF VIRGINIA, INC. DBA ANGELS OF ASSISI:
DESCRIPTION OF NON- CASH ASSISTANCE	PET FOOD AND ANIMAL FEED
SCHEDULE I, PART II , COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	ALLIANCE FOR CONTRACEPTION IN CATS & DOGS: RESEARCH INTO NON-SURGICAL FERTILITY CONTROL FOR CATS AND DOGS
SCHEDULE I, PART II , COLUMN H - PURPOSE OF	ALMOST HOME SHELTER PET RESCUE:
GRANT OR ASSISTANCE	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
SCHEDULE I, PART II , COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	ALTUS ANIMAL WELFARE ASSOCIATION: DISTRIBUTE PET FOOD TO THOSE IN NEED, PROVIDE SPAY AND NEUTER SERVICES AND GENERAL
	DISTRIBUTE PET FOOD TO THOSE IN NEED, PROVIDE SPAY AND NEUTER SERVICES AND GENERAL VETERINARY SERVICES THROUGH THE PETS FOR LIFE PROGRAM ANIMAL BUMANE SOCIETY:
SCHEDULE I, PART II , COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	ANIMAL HUMANE SOCIETY: PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
SCHEDULE I, PART II ,	ANIMAL PROTECTION OF NEW MEXICO, INC:
COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	UPGRADING OF WATER WELL AND PUMP SYSTEM DUE TO DROUGHT TO MAKE SURE THERE IS WATER FOR FREE ROAMING WILD HORSES OF SAN FELIPE PUEBLO

Return Reference - Identifier	Explanation
SCHEDULE I, PART II , COLUMN H - PURPOSE OF	ANIMAL SHELTER ACTION SOCIETY DBA MAYFIELD GRAVES COUNTY ANIMAL SHELTER:
GRANT OR ASSISTANCE	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
SCHEDULE I, PART II , COLUMN H - PURPOSE OF	ANIMAL SHELTER OF WOOD RIVER VALLEY INC. DBA MOUNTAIN HUMANE:
GRANT OR ASSISTANCE	DISTRIBUTE PET FOOD TO THOSE IN NEED, PROVIDE SPAY AND NEUTER SERVICES AND GENERAL VETERINARY SERVICES THROUGH THE PETS FOR LIFE PROGRAM
SCHEDULE I, PART II , COLUMN H - PURPOSE OF	ASHEVILLE HUMANE SOCIETY:
GRANT OR ASSISTANCE	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
SCHEDULE I, PART II , COLUMN H - PURPOSE OF	ASSISI ANIMAL CLINICS OF VIRGINIA, INC. DBA ANGELS OF ASSISI:
GRANT OR ASSISTANCE	PROVIDE PET FOOD TO PET OWNERS IN NEED THROUGH PETS FOR LIFE PROGRAM
SCHEDULE I, PART II , COLUMN H - PURPOSE OF	AUBURN VALLEY HUMANE SOCIETY:
GRANT OR ASSISTANCE	FUND PETS FOR LIFE ACTIVITIES SUCH AS PROVIDING PET SUPPLIES, SPAY AND NEUTER SERVICES AND GENERAL VETERINARY SERVICES
SCHEDULE I, PART II , COLUMN H - PURPOSE OF	BAILING OUT BENJI:
GRANT OR ASSISTANCE	ADVOCACY WORK TO STOP PUPPY MILLS

SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service

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 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

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

Part	Questions Regarding Compensation			
			Ye	s No
1a	Check the appropriate box(es) if the organization provided a 990, Part VII, Section A, line 1a. Complete Part III to provide a			
	☐ First-class or charter travel ☐ Hou	sing allowance or residence for personal use		
	☐ Travel for companions ☐ Pay	ments for business use of personal residence		
	☐ Tax indemnification and gross-up payments ☐ Hea	Ith or social club dues or initiation fees		
	☐ Discretionary spending account ☐ Pers	sonal services (such as maid, chauffeur, chef)		
b	If any of the boxes on line 1a are checked, did the organ or reimbursement or provision of all of the expenses	described above? If "No," complete Part III to		
	explain		b	
2	Did the organization require substantiation prior to redirectors, trustees, and officers, including the CEO/Executa?	tive Director, regarding the items checked on line	2	
3	Indicate which, if any, of the following the organization use organization's CEO/Executive Director. Check all that apply related organization to establish compensation of the CEO.	y. Do not check any boxes for methods used by a		
	·	ten employment contract		
	_ · · · _ ·	npensation survey or study		
	Form 990 of other organizations	roval by the board or compensation committee		
4	During the year, did any person listed on Form 990, Part VI organization or a related organization:	I, Section A, line 1a, with respect to the filing		
а	Receive a severance payment or change-of-control payme	nt?	a 🗸	
b	Participate in or receive payment from a supplemental non	qualified retirement plan?	b	~
С	Participate in or receive payment from an equity-based cor	mpensation arrangement?	С	~
	If "Yes" to any of lines 4a-c, list the persons and provide the	ne applicable amounts for each item in Part III.		
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organiza	tions must complete lines 5_0		
5	For persons listed on Form 990, Part VII, Section A, I			
Ū	compensation contingent on the revenues of:	ine ra, did the organization pay or accrue any		
а	The organization?		2	V
b	Any related organization?			\ <u>'</u>
b	If "Yes" on line 5a or 5b, describe in Part III.			+
	ii 100 oii iiilo oa oi ob, describe ii 1 art III.			
6	For persons listed on Form 990, Part VII, Section A, I compensation contingent on the net earnings of:	ine 1a, did the organization pay or accrue any		
а	The organization?		а	~
b	Any related organization?		b	~
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For paragraphic listed on Form 000 Dart VIII Continue A list	on to did the organization provide any penfixed		
7	For persons listed on Form 990, Part VII, Section A, lir payments not described on lines 5 and 6? If "Yes," describ	e in Part III	,	~
8	Were any amounts reported on Form 990, Part VII, paid or		'	-
0	to the initial contract exception described in Regulati			
	in Part III		3	V
			,	
9	If "Yes" on line 8, did the organization also follow the	rebuttable presumption procedure described in		
•	Regulations section 53.4958-6(c)?		,	

5/3/2024 4:49:13 PM

Schedule J (Form 990) 2021 Page 2

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.

Trote: The sum of columns (B)(i) (iii) le			nd/or 1099-MISC and/or		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
(A) Name and Title		(i) Base compensation (ii) Bonus & incentive compensation		(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)–(D)	in column (B) reported as deferred on prior Form 990	
CRISTOBEL BLOCK	(i)	453,464	0	0	10,150	22,542	486,156	0	
1 PRESIDENT & CHIEF EXECUTIVE OFFICER	(ii)	0	0	0	0	0	0	0	
MELISSA RUBIN	(i)	49,760	0	355,305	1,741	327	407,133	0	
2 SVP. ANIMAL RESCUE, CARE, & SANCTUARY	(ii)	0	0	0	0	0	0	0	
ERIN FRACKLETON	(i)	298,024	15,000	0	14,500	9,647	337,170	0	
3CHIEF OPERATING OFFICER	(ii)	0	0	0	0	0	0	0	
KATHERINE KARL	(i)	295,708	0	0	14,500	3,476	313,683	0	
4 GENERAL COUNSEL & CHIEF LEGAL OFFICER	(ii)	0	0	0	0	0	0	0	
WILLIAM H. HALL	(i)	247,971	15,000	0	14,500	16,733	294,203	0	
5 ^{CHIEF FINANCIAL OFFICER & TREASURER}	(ii)	0	0	0	0	0	0	0	
ALEXA HERNDON	(i)	246,409	0	0	13,012	23,931	283,352	0	
6CHIEF PEOPLE OFFICER	(ii)	0	0	0	0	0	0	0	
NICOLE PAQUETTE	(i)	238,085	0	0	19,282	9,788	267,155	0	
7CHIEF PROGRAMS & POLICY OFFICER	(ii)	0	0	0	0	0	0	0	
REBECCA BRANZELL	(i)	200,246	0	0	19,491	20,792	240,528	0	
8DEPUTY GENERAL COUNSEL	(ii)	0	0	0	0	0	0	0	
KIMBERLEE DINN	(i)	187,161	10,000	0	13,290	20,766	231,217	0	
9SVP., PHILANTHROPY	(ii)	0	0	0	0	0	0	0	
JONATHAN LOVVORN	(i)	208,356	0	0	19,777	1,025	229,158	0	
10SVP. & CHIEF COUNSEL, APL	(ii)	0	0	0	0	0	0	0	
JAMIE NATELSON	(i)	194,101	10,000	0	10,320	10,099	224,520	0	
11SVP. MARKETING OPERATIONS	(ii)	0	0	0	0	0	0	0	
MICHAELEN BARSNESS	(i)	192,492	0	0	12,747	11,024	216,263	0	
12SVP., FINANCE & ACCOUNTING	(ii)	0	0	0	0	0	0	0	
STACY STONICH	(i)	193,998	0	0	9,691	678	204,367	0	
13 SVP. TECHNOLOGY & INFORMATION SOLUTIONS	(ii)	0	0	0	0	0	0	0	
THERESA REESE	(i)	156,315	0	0	14,916	1,803	173,034	0	
14 FORMER SECOND DEPUTY TREASURER	(ii)	0	0	0	0	0	0	0	
ALISON GREGG CORCORAN	(i)	144,555	0	0	7,404	7,781	159,740	0	
15 CHIEF DEVELOPMENT & MARKETING OFFICER	(ii)	0	0	0	0	0	0	0	
AMY NICHOLS	(i)	101,279	0	0	3,837	16,318	121,434	0	
16FORMER KEY EMPLOYEE	(ii)	0	0	0	0	0	0	0	

Schedule J (Form 990) 2021

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	MELISSA RUBIN: \$355,305 RECEIVED AS SEVERANCE.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

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 for instructions and the latest information.

Name of the organization THE HUMANE SOCIETY OF THE UNITED STATES Types of Property

Employer identification number 53-0225390

1 Art—Works of art			(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g		(d) ethod of deter sh contributio		
3 Art – Fractional interests . 4 Books and publications	1	Art-Works of art							
4 Books and publications	2	Art—Historical treasures							
5 Clothing and household goods 6 Cars and other vehicles	3	Art—Fractional interests							
goods	4								
7 Boats and planes	5								
8 Intellectual property 9 Securities—Publicity traded .			~	892	985,313	MARI	KET VALUE		
9 Securities—Publicity traded		•							
10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests . 12 Securities—Miscellaneous . 13 Qualified conservation contribution—Historic structures . 14 Qualified conservation contribution—Other . 15 Real estate—Residential .				88	1 007 448	MARI	(FT VALUE		
11 Securities—Partnership, LLC, or trust interests		•			1,007,440	100 (1 (1	KET VALUE		
13 Qualified conservation contribution—Historic structures. 14 Qualified conservation contribution—Other . 15 Real estate—Commercial . 16 Real estate—Commercial . 17 Real estate—Commercial . 18 Collectibles . 19 Food inventory .		Securities-Partnership, LLC,							
contribution—Historic structures	12	Securities-Miscellaneous							
contribution—Other	13	contribution-Historic							
16 Real estate — Commercial	14								
17 Real estate—Other	15	Real estate—Residential	~	1	283,200	MARI	KET VALUE		
18 Collectibles									
19 Food inventory									
Drugs and medical supplies .				444	7,000,040	1445	/FT \ / A F		
Taxidermy									
22 Historical artifacts			<i>'</i>	1	1,498	MARI	KET VALUE		
Scientific specimens									
Archeological artifacts									
25 Other ▶ (GIFTS FOR FR EVENTS)									
Other ► (ANIMAL CARE SUPPLIES)			.,	22	47.521	MADI	ZET VALUE		
27 Other ► (OFFICE SUPPLIES) V 1 650 MARKET VALUE 28 Other ► (OFFICE SUPPLIES) V 1 650 MARKET VALUE 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					·				
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									
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		` '		<u> </u>	000	100 0 0	(L1 1/1LOL		
which the organization completed Form 8283, Part V, Donee Acknowledgement		, , ,	by the ord	panization during the tax v	lear for contributions for				
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?						29	5		
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?		-						Yes	No
28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?	30a	During the year, did the organization	tion receive	by contribution any prope	erty reported in Part I, lines	1 thre	ough		
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?		28, that it must hold for at least t	hree years	from the date of the initial	contribution, and which isr	n't requ	uired		
Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?				e nolding period?			· 30a		
contributions?						_			
contributions?	31	contributions?					. 31	~	
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,		contributions?						~	
		If the organization didn't report an	amount in	column (c) for a type of pro	perty for which column (a) i	s ched	cked,		

D٥	rt	
Гα		

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					
SCHEDULE M, PART I -	CARS AND OTHER VEHICLES - NUMBER OF ITEMS RECEIVED					
EXPLANATIONS OF REPORTING METHOD FOR NUMBER OF	CURITIES - PUBLICLY TRADED - NUMBER OF CONTRIBUTIONS					
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					
	OTHER - OFFICE SUPPLIES NUMBER OF CONTRIBUTIONS					
	REAL ESTATE - RESIDENTIAL - NUMBER OF CONTRIBUTIONS					
SCHEDULE M, PART I, LINE 32B - THIRD PARTIES USED TO SOLICIT, PROCESS, OR SELL NONCASH CONTRIBUTIONS	AUTOMOTIVE RECOVERY SERVICES, INC., CHARITABLE ADULT RIDES AND SERVICES, 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.					

SCHEDULE O (Form 990)

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 for the latest information.

OMB No. 1545-0047 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	AFFILIATE DESCRIPTIONS FOR HSUS 990, SCHEDULE O
	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 PROGRAMS TO END THE CRUELEST PRACTICES, CARE FOR ANIMALS IN CRISIS AND BUILD A STRONGER ANIMAL PROTECTION MOVEMENT. 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:
	THE HUMANE SOCIETY WILDLIFE LAND TRUST EIN # 52-1808517 (HSWLT), FOUNDED IN 1993, PROTECTS WILDLIFE BY PERMANENTLY PRESERVING HABITAT AND PROVIDING HUMANE STEWARDSHIP. WITH HUMANE STEWARDSHIP, CAREFUL MONITORING AND MANAGEMENT OF THOUSANDS OF ACRES, HSWLT PROTECTS SPACES WHERE WILD ANIMALS THRIVE IN THEIR NATURAL HABITATS AND LOOKS TO CONNECT THESE LANDS WITH OTHER LAND TRUSTS THAT SHARE HSWLT'S MISSION OF PROTECTING ANIMALS.
	THE FUND FOR ANIMALS EIN #13-6218740 (THE FUND) CARES FOR THOUSANDS OF ANIMALS AT ITS RESCUE AND REHABILITATION CENTERS, SANCTUARIES AND THROUGH MOBILE VETERINARY CLINICS. THE FUND OPERATES BLACK BEAUTY RANCH (TX), DUCHESS SANCTUARY (OR) AND RURAL AREA VETERINARY SERVICES AND HAS BEEN AN AFFILIATE OF THE HSUS SINCE 2005.
	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. DDAL WAS AN AFFILIATE OF THE HSUS UNTIL SEPTEMBER 2021 WHEN DDAL MERGED WITH HUMANE SOCIETY LEGISLATIVE FUND.
	HUMANE SOCIETY INTERNATIONAL EIN #52-1769464 (HSI), FOUNDED IN 1991, FUNCTIONS AS THE INTERNATIONAL ARM OF THE HUMANE SOCIETY OF THE UNITED STATES. HSI WORKS AROUND THE GLOBE TO PROMOTE THE HUMAN-ANIMAL BOND, RESCUE AND PROTECT DOGS AND CATS, IMPROVE FARM ANIMAL WELFARE, PROTECT WILDLIFE, PROMOTE ANIMAL-FREE TESTING AND RESEARCH, RESPOND TO NATURAL DISASTERS AND CONFRONT CRUELTY TO ANIMALS IN ALL OF ITS FORMS. FOR MORE INFORMATION, PLEASE REFER TO THE 2021 HSUS/HSI ANNUAL REPORT.
	THE HUMANE SOCIETY VETERINARY MEDICAL ASSOCIATION, INC. EIN #22-2768664 (HSVMA) WAS FORMED AS A HOME FOR VETERINARY PROFESSIONALS WHO WANT TO ENGAGE IN DIRECT CARE PROGRAMS FOR ANIMALS IN NEED AND EDUCATE THE PUBLIC AND OTHERS IN THE PROFESSION ABOUT ANIMAL WELFARE ISSUES. HSVMA USES ITS EXPERTISE AND RESOURCES TO ADVANCE ANIMAL WELFARE VIA LEADERSHIP, ADVOCACY, EDUCATION AND SERVICE.
	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.
FORM 990, PART I, LINE 1 - BRIEF MISSION	THE VISION BEHIND ITS NAME: A HUMANE SOCIETY. THE HSUS WORKS TO END THE CRUELEST PRACTICES, RESCUE AND CARE FOR ANIMALS IN CRISIS, AND BUILD A STRONGER ANIMAL PROTECTION MOVEMENT.
FORM 990, PART III, LINE 2 - NEW PROGRAM SERVICES	IN 2018 THE HSUS STARTED A STRATEGIC PLANNING PROCESS TO ALIGN THE MISSION AND THE VISION OF THE ORGANIZATION WITH THE STRATEGY; THAT WORK CONTINUED INTO 2019 AND WAS IMPLEMENTED IN 2020 AND THE DATA TO CAPTURE REPORTING BASED ON THE STRATEGY BEGAN IN 2021. AS PART OF THE STRATEGIC PLANNING PROCESS, FOUR PILLARS, REPRESENTING THE FOUR MAIN BODIES OF WORK FOR THE HSUS, WERE CREATED (END THE CRUELEST INDUSTRIES AND PRACTICES, CARE FOR ANIMALS IN CRISIS, BUILD A STRONGER ANIMAL PROTECTION MOVEMENT, AND INCREASE CAPACITY TO DRIVE GLOBAL CHANGE). THE FIRST THREE PILLARS REPRESENT THE THREE MAIN PROGRAMS OF THE HSUS AND REPORTED IN THE FORM 990 FOR THE ORGANIZATION. IN 2021, THE STRATEGIC PLAN AND PRIORITY INITIATIVES WILL ALLOW THE FUNDRAISING TEAMS TO FOCUS ON MARKETING THE BIG FIGHTS RATHER THAN MANY SMALL ONE-OFF PROJECTS AND BETTER GROW THE REVENUE BASE FOR THE ORGANIZATION. THERE WILL BE MORE FOCUSED EFFORT ON PRIORITY PROJECTS ENABLING FASTER MOVEMENT AND MORE IMPACT ON ANIMALS.

Return Reference - Identifier	Explanation CONTINUED FROM BART III LINE 44
FORM 990, PART III, LINE 4A - BUILD A STRONGER ANIMAL PROTECTION MOVEMENT	CONTINUED FROM PART III, LINE 4A ACCESS TO CARE:
(CONTINUED)	PETS FOR LIFE IS AN HSUS SUPPORT PROGRAM FOR PETS AND THEIR OWNERS LIVING IN UNDERSERVED COMMUNITIES. DRIVEN BY SOCIAL JUSTICE PRINCIPLES AND GUIDED BY THE PHILOSOPHY THAT PEOPLE'S DEEP CONNECTION WITH THEIR PETS TRANSCENDS BOUNDARIES OF SOCIOECONOMICS, RACE, ETHNICITY AND GEOGRAPHY, PFL EXISTS TO TACKLE THE SYSTEMIC INEQUITY AND INSTITUTIONAL BARRIERS FACED BY MILLIONS OF PEOPLE IN OBTAINING CARE, RESOURCES AND SUPPORT FOR THEIR PETS.
	IN 2021, PFL HELPED NEARLY 27,000 ANIMALS. *IN TWO HSUS-STAFFED COMMUNITIES, 5,925 ANIMALS WERE SERVED, AND 15,122 NO-COST HEALTH SERVICES WERE PROVIDED.
	*IN 39 MENTORSHIP/SUPPORTED COMMUNITIES, 20,973 ANIMALS RECEIVED HELP AND 72,239 VETERINARY SERVICES WERE PROVIDED.
	*4.8 MILLION POUNDS OF FOOD AND 1,340 PALLETS OF PET SUPPLIES WERE DISTRIBUTED, WITH A COMBINED VALUE OF \$8.4 MILLION.
	*1,691 PROFESSIONALS, INCLUDING VETERINARIANS, VETERINARY TECHNICIANS AND STAFF AT ANIMAL SHELTERS, ANIMAL SERVICES AND ANIMAL CARE AND CONTROL AGENCIES, WERE TRAINED.
	*VOLUNTEERS LOGGED 1,968 HOURS.
	STRENGTHENING THE CAPACITY OF ANIMAL SHELTERS: *IN 2021, THE SHELTER AND RESCUE PARTNER PROGRAM GREW TO 399 ORGANIZATIONS, SURPASSING THE GOAL OF 380. THE HSUS PLACED 429 ANIMALS IN NEED WITH THESE PARTNERS, INCLUDING ANIMALS RESCUED FROM SOUTH KOREA'S DOG MEAT TRADE, DOGFIGHTING OPERATIONS, FARM ANIMAL CRUELTY, PUPPY MILLS AND A LARGE-SCALE NEGLECT CASE.
	*AS PART OF THE SHELTER ALLY PROJECT, THE HSUS COMPLETED THE FIRST CAPACITY-BUILDING MENTORSHIP PILOT, WHICH INVOLVES GRANTS AND SUPPORT FOR ANIMAL SHELTERS IN UNDERRESOURCED AREAS OF THE U.S. WHERE THE SAFETY NET FOR ANIMALS NEEDS STRENGTHENING.
	*THE HSUS PRODUCED THE SECOND ALL-VIRTUAL ANIMAL CARE EXPO-AIMED AT SHARING BEST PRACTICES IN SHELTERING- FEATURING 40 EDUCATIONAL SESSIONS, NETWORKING OPPORTUNITIES AND A VIRTUAL EXHIBIT HALL THAT MORE THAN 3,500 HUMANE PROFESSIONALS AND VOLUNTEERS "ATTENDED."
	*THE SHELTER PET PROJECT-A COLLABORATIVE EFFORT BETWEEN THE HUMANE SOCIETY OF THE UNITED STATES, MADDIE'S FUND, AND THE AD COUNCIL TO PROMOTE SHELTER ADOPTIONS THROUGH PUBLIC SERVICE ANNOUNCEMENTS- RECEIVED \$14.4 MILLION WORTH OF DONATED MEDIA IN 2021. SINCE THE PROGRAM'S INCEPTION IN 2009, IT HAS GENERATED \$568 MILLION IN DONATED MEDIA.
	ESTABLISHING AND STRENGTHENING LEGAL PROTECTIONS FOR ALL ANIMALS: *THE HSUS ADVOCATED FOR INCLUSION OF AN AMENDMENT TO THE INVEST IN AMERICA ACT TO BAN THE TRANSPORT OF AMERICAN HORSES TO SLAUGHTER-DOMESTICALLY OR ABROAD.THE AMENDMENT, WHICH PASSED THE HOUSE OF REPRESENTATIVES, WAS STRIPPED OUT OF THE FINAL BILL, BUT THE HOUSE WIN WAS HISTORIC AND BODES WELL FOR ITS FUTURE CHANCES.
	*IN A WIN FOR THE HSUS CAMPAIGN TO END HORSE SORING, THE USDA ANNOUNCED THAT STRENGTHENING THE HORSE PROTECTION ACT TO CRACK DOWN ON THIS BARBARIC PRACTICE IS NOW A TOP REGULATORY PRIORITY.
	*THE HSUS HELPED 164 NEW ANIMAL PROTECTION MEASURES BECOME LAW AT THE STATE (75) AND LOCAL (89) LEVEL, INCLUDING 10 NEW LAWS REQUIRING SHELTER FOR OUTDOOR DOGS, 11 MEASURES RELATED TO CAPTIVE WILDLIFE AND 15 LAWS TO PREVENT BREED-SPECIFIC LEGISLATION.
	*THE HSUS HELPED DEFEAT DOZENS OF HARMFUL PROPOSED STATE MEASURES, INCLUDING 34 BILLS THAT WOULD HAVE DIRECTLY IMPACTED THE EFFORTS TO END THE CRUELEST PRACTICES TOWARD ANIMALS.
	*THE HSUS TRAINED MORE THAN 8,400 ANIMAL ADVOCATES AND LAW ENFORCEMENT OFFICIALS ON ANIMAL PROTECTION ISSUES.
	PROMOTING PEACEFUL CO-EXISTENCE: *WILD NEIGHBORS, AN HSUS PROGRAM LAUNCHED IN 2016 TO HELP COMMUNITIES HUMANELY HANDLE WILDLIFE CONFLICTS, TRAINED 2,826 ANIMAL CARE PROFESSIONALS AND LAW ENFORCEMENT OFFICERS FROM 1,143 DIFFERENT AGENCIES/ORGANIZATIONS. THE COMPREHENSIVE TRAINING INCLUDES HOW TO RESPOND TO PUBLIC CONCERNS AND COMPLAINTS AND SPECIES-SPECIFIC APPROACHES TO CONFLICT RESOLUTION.
	*IN 2021, 138 ANIMAL CARE AND CONTROL AGENCIES AND ORGANIZATIONS SIGNED THE HSUS WILD NEIGHBORS PLEDGE,BRINGING THE TOTAL TO 433 AGENCIES THAT HAVE MADE A COMMITMENT TO USE NONLETHAL APPROACHES TO SOLVING HUMAN-WILDLIFE CONFLICTS.

Return Reference - Identifier	Explanation
FORM 990, PART III, LINE 4B -	CONTINUED FROM PART III, LINE 4B (1 OF 2)
END THE CRUELEST PRACTICES (CONTINUED)	STOP PUPPY MILLS: *WITH SUPPORT FROM THE HSUS, WASHINGTON STATE, ILLINOIS AND 30 MORE LOCALITIES ENACTED MEASURES AGAINST PET STORE SALES OF PUPPY MILL PUPPIES.
	*AN HSUS UNDERCOVER INVESTIGATION EXPOSED SICK AND SUFFERING PUPPIES AT ONE OF THE LARGEST PET STORES IN NEW YORK CITY, AMERICAN KENNELS. AFTER THE HSUS RELEASED A REPORT, WHICH WAS WIDELY COVERED IN THE MEDIA, AUTHORITIES STEPPED IN TO INVESTIGATE, THE STORE CLOSED ITS DOORS AND EFFORTS TO PASS A BAN ON PET STORE PUPPY SALES IN NEW YORK STATE GAINED NEW MOMENTUM.
	*IN A CASE THAT HSUS ATTORNEYS ASSISTED WITH, PUPPYFIND.COM AGREED TO PAY \$120,000 TO COMPLAINANTS WHO PURCHASED SICK AND DYING PUPPIES FROM ITS PLATFORM AND WILL STOP REMOVING NEGATIVE REVIEWS FROM ITS WEBSITE. THE ONLINE RETAILER ALSO AGREED TO REMOVE BREEDERS CONVICTED OF ANIMAL CRUELTY.
	*FIVE BREEDERS CITED IN THE ANNUAL HORRIBLE HUNDRED REPORT-IN WHICH THE HSUS PUBLICLY NAMED THE OWNERS OF PUPPY MILLS WHERE DOGS ARE SUFFERING-WERE SHUT DOWN BY AUTHORITIES AND A SIXTH WENT OUT OF BUSINESS IN 2021.
	*THE HSUS PASSED THE 45,000-MARK IN THE NUMBER OF DOGS ADOPTED THROUGH THE PUPPY FRIENDLY PET STORES PROGRAM, WHICH HELPS PET STORES TRANSITION FROM SELLING PUPPIES TO HELPING SHELTER DOGS FIND ADOPTIVE HOMES.
	END THE USE OF FUR IN FASHION: *THE WORK OF HSUS WITH ALEXANDER MCQUEEN, BALENCIAGA, VALENTINO AND TORY BURCH LED THEM TO DROP FUR FROM THEIR PRODUCTION LINES.
	*FOLLOWING OUTREACH AND ENGAGEMENT BY THE HSUS, LUXURY RETAILERS SAKS FIFTH AVENUE AND NEIMAN MARCUS JOINED THE MOVEMENT AWAY FROM CRUELTY BY ANNOUNCING FUR-FREE POLICIES.
	*ELLE INTERNATIONAL BECAME THE LATEST GLOBAL BRAND TO BAN CONTENT THAT PROMOTES ANIMAL FUR ON ITS PAGES, WEBSITES AND SOCIAL MEDIA-A DECISION THAT IMPACTS 45 GLOBAL EDITIONS AND 46 WEBSITES WITH A COMBINED REACH OF 175 MILLION READERS EACH MONTH.
	*THE HSUS HELPED PASS FOUR MORE LOCAL MEASURES BANNING FUR SALES: IN HALLANDALE BEACH, FLORIDA; BROOKLINE, MASSACHUSETTS; WESTON, MASSACHUSETTS; AND ANN ARBOR, MICHIGAN.
	*A FEDERAL JUDGE DISMISSED THE FUR INDUSTRY'S CHALLENGE TO SAN FRANCISCO'S BAN ON FUR SALES IN A LANDMARK CASE THAT AFFIRMED THE RIGHT OF CITIES AND STATES TO PROHIBIT THE SALE OF FUR PRODUCTS. THE HSUS CONTRIBUTED A LEGAL OPINION IN THE MATTER.
	*OUR WORK TO PASS FUR SALES BANS AND SUCCESS AT PERSUADING COMPANIES TO GO FURFREE HAS REDUCED THE DEMAND FOR FUR PRODUCTS: 2021 WAS THE WORST YEAR ON RECORD FOR THE U.S. MINK FUR TRADE, WHICH SUFFERED A NEARLY 50% DROP IN PRODUCTION OVER 2020.
	END ANIMAL COSMETIC TESTING AND TRADE: *FIVE STATES - HAWAII, MAINE, MARYLAND, NEW JERSEY AND VIRGINIA - BANNED THE SALE OF ANIMAL-TESTED COSMETICS.
	*WE MARSHALLED CRUCIAL INDUSTRY SUPPORT FOR THE HUMANE COSMETICS ACT, A FEDERAL BILL TO END THE USE OF ANIMALS IN COSMETICS TESTING.
	END THE USE OF VEAL CRATES, GESTATION CRATES AND CAGES FOR EGG-LAYING HENS: *THE HSUS'S STATE-BY-STATE CAMPAIGN TO ELIMINATE BATTERY CAGES FOR EGG-LAYING HENS CONTINUED TO SUCCEED: THE HSUS WON VICTORIES IN UTAH AND NEVADA, BANNING THE CONFINEMENT OF EGG-LAYING HENS AND MANDATING CAGE-FREE CONDITIONS. IN NEVADA, THE HSUS ALSO HELPED PASS A BAN ON THE SALE OF EGGS FROM CAGED HENS.
	*THE HSUS SUCCESSFULLY WAGED AND WON A CAMPAIGN IN MASSACHUSETTS TO UPGRADE THE LAW THAT THE HSUS HELPED PASS VIA BALLOT MEASURE IN 2016, THE UPDATED LAW ENSURES CAGE-FREE CONDITIONS FOR HENS, BANS THE SALE OF EGGS FROM CAGED HENS AND MANDATES ENRICHMENTS CRITICAL FOR THE WELFARE OF THE BIRDS. THE SALES COMPONENT OF THE LAW, WHICH NOW COVERS EGG PRODUCTS, PROTECTS AN ADDITIONAL 2 MILLION EGGLAYING HENS EACH YEAR.
	*THE HSUS LEGAL TEAM HELPED DEFEAT MULTIPLE LEGAL CHALLENGES BY THE MEAT INDUSTRY TO CALIFORNIA'S PROPOSITION 12 FARM ANIMAL WELFARE LAW, THE BALLOT MEASURE THAT THE HSUS LED TO PASSAGE IN 2018: THE U.S. SUPREME COURT REJECTED THE NORTH AMERICAN MEAT INSTITUTE'S LAWSUIT; THE U.S. COURT OF APPEALS FOR THE 9TH CIRCUIT RULED AGAINST THE NATIONAL PORK PRODUCERS COUNCIL AND THE AMERICAN FARM BUREAU FEDERATION; AND THE U.S. DISTRICT COURT FOR THE NORTHERN DISTRICT OF IOWAREJECTED A COMPLAINT BROUGHT BY THE IOWA PORK PRODUCERS ASSOCIATION AND THREE INDIVIDUAL PORK PRODUCERS.
	*THE HSUS WORKED WITH CONAGRA FOODS, AN \$8 BILLION PACKAGED FOODS COMPANY, TO WIN ITS COMMITMENT TO REACH 100% CAGE-FREE EGG USAGE ONE YEAR EARLIER THAN PLANNED.
	*THE HSUS PERSUADED DENNY'S, WHICH HAS MORE THAN 1,700 LOCATIONS, TO ESTABLISH ANNUAL MILESTONES THAT WILL ENSURE IT IS ONLY USING CAGE-FREE EGGS AT ALL ITS RESTAURANTS BY 2026.

Return Reference - Identifier	Explanation
FORM 990, PART III, LINE 4B -	CONTINUED FROM PART III, LINE 4B (2 OF 2)
END THE CRUELEST PRACTICES (CONTINUED)	END TROPHY HUNTING: *AFTER A CAMPAIGN LED BY THE HSUS AND ALLIES, THE WASHINGTON FISH AND WILDLIFE COMMISSION VOTED TO INDEFINITELY SUSPEND THE ANNUAL SPRING BEAR HUNTING SEASON, SPARING THE LIVES OF HUNDREDS OF BEARS.
	*A JUDGE IN WISCONSIN REFERENCED HSUS LEGAL RESEARCH AND ARGUMENTS WHEN ISSUING A TEMPORARY INJUNCTION HALTING THE STATE'S PLANNED FALL 2021 WOLF HUNT.
	*THE HSUS SUCCESSFULLY LED A CAMPAIGN IN MARYLAND TO PASS A STATEWIDE BAN ON WILDLIFE KILLING CONTESTS. THE HSUS ALSO LAID THE GROUNDWORK FOR MORE STATE BANS BY HELPING PASS 28 MUNICIPAL RESOLUTIONS CALLING FOR STATEWIDE ACTION.
	*THE HSUS HELPED DEFEAT PROPOSED OR EXPANDED HUNTS THAT WOULD HAVE TARGETED BLACK BEARS, MOUNTAIN LIONS OR WOLVES IN SIX STATES: CONNECTICUT, OKLAHOMA, MINNESOTA, MAINE, NEW JERSEY AND COLORADO.
	*WITH HSUS SUPPORT, ILLINOIS EXPANDED ITS IVORY BAN ACTTO OUTLAW TRADE IN PRODUCTS MADE FROM 16 MORE SPECIES, INCLUDING CHEETAHS, TIGERS, LIONS, PANGOLINS, WHALES, GIRAFFES AND SEA TURTLES.
	*AS A RESULT OF AN HSUS LAWSUIT, THE U.S. FISH AND WILDLIFE SERVICE CAN NO LONGER KEEP DATA ABOUT THE TYPE AND NUMBER OF TROPHIES HUNTERS IMPORT-A KEY TOOL FOR DETERMINING WHICH SPECIES ARE UNDER THREAT-FROM THE PUBLIC.
FORM 990, PART III, LINE 4C -	CONTINUED FROM PART III, LINE 4C
CARE FOR ANIMALS IN CRISIS (CONTINUED)	A LARGE PORTION OF THE HSUS'S WORK ON CARING FOR ANIMALS 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 2021 FORM 990; AND THE HUMANE SOCIETY INTERNATIONAL 2021 FORM 990. THE HSUS GRANTS FUNDS TO THESE AFFILIATES TO HELP SUPPORT THESE ANIMAL CARE ACTIVITIES AND THEIR OPERATIONS.
	*THE HSUS DEPLOYED TO KENTUCKY TO ASSIST THE MAYFIELD-GRAVES COUNTY ANIMAL SHELTER WITH SEARCH AND RESCUE AND SHELTER OPERATIONS AFTER DEVASTATING TORNADOES. THE HSUS REMAINED ON THE SCENE TO HELP REUNITE LOST PETS WITH THEIR FAMILIES, DISTRIBUTE RESOURCES TO DISPLACED PET OWNERS AND TRANSPORT SURRENDERED ANIMALS TO SHELTER PARTNERS FOR ADOPTION.
	*THE ANIMAL RESCUE TEAM HELPED LAW ENFORCEMENT IN GASTON COUNTY, NORTH CAROLINA RESCUE SEVEN DOGS FROM A SUSPECTED DOGFIGHTING OPERATION, AFTER WHICH THE HSUS BROUGHT THE DOGS TO SAFETY AND ENSURED THEY RECEIVED CARE AND TREATMENT WHILE A COURT DETERMINED CUSTODY. IN DETROIT, THE ANIMAL CRIMES TEAM WORKED WITH INFORMANTS AND THE WAYNE COUNTY PROSECUTOR'S OFFICE ON AN UNDERCOVER DOGFIGHTING INVESTIGATION THAT LED TO THE RESCUE OF 108 DOGS FROM 23 PROPERTIES.
	*THE HSUS HELPED THE SOUTH FLORIDA SPCA AND LOCAL LAW ENFORCEMENT RESCUE A HERD OF STARVING COWS IN SUNRISE, FLORIDA, ARRANGING TRANSPORT, SECURING TEMPORARY HOUSING AND PROVIDING A GRANT TO HELP CARE FOR THE ANIMALS UNTIL THEY FOUND A HOME AT A SANCTUARY IN GAINESVILLE, FLORIDA.
	*THE HSUS PROVIDED FINANCIAL SUPPORT AND PLACEMENT ASSISTANCE TO AN ANIMAL SHELTER IN ERIE, PENNSYLVANIA, AND THE PENNSYLVANIA STATE POLICE IN A NEGLECT CASE INVOLVING 179 RABBITS AND SEVERAL OTHER ANIMALS, INCLUDING CHICKENS AND CHINCHILLAS.
FORM 990, PART V, LINE 3B - REASON FOR NOT FILING FORM 990-T	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.
FORM 990, PART VI, LINE 1A - DELEGATE BROAD AUTHORITY TO A COMMITTEE	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.
FORM 990, PART VI, LINE 2 - FAMILY/BUSINESS RELATIONSHIPS AMONGST INTERESTED PERSONS	OFFICERS BLOCK, HALL, KARL, PARRA, AND PAQUETTE WERE EMPLOYED BY HSUS AND ALSO SERVED AS OFFICERS OF OTHER AFFILIATED TAX-EXEMPT ORGANIZATIONS ON WHOSE BOARD HSUS DIRECTORS ATHERTON, FANG, LAUE, LINEHAN, MCMILLEN, SABATINO, AND WHITE SERVED. THEREFORE, THESE INDIVIDUALS HAD "BUSINESS RELATIONSHIPS" WITH EACH OTHER BUSINESS RELATIONSHIP

Return Reference - Identifier	Explanation
FORM 990, PART VI, LINE 4 - SIGNIFICANT CHANGES TO ORGANIZATIONAL DOCUMENTS	THE BYLAWS AND CERTIFICATE OF INCORPORATION WERE MODIFIED IN 2021 TO PROVIDE THAT ANY VACANCY OCCURRING ON THE BOARD AND ANY NEWLY CREATED DIRECTORSHIP RESULTING FROM AN INCREASE IN THE BOARD'S SIZE MAY NOW BE FILLED EITHER BY THE AFFIRMATIVE VOTE OF A MAJORITY OF THE DIRECTORS THEN IN OFFICE (EVEN IF LESS THAN A QUORUM) OR BY THE MANAGING MEMBERS. IN ADDITION, THE BYLAWS WERE MODIFIED TO PROVIDE THAT THE SIZE OF THE BOARD MAY NOW BE FIXED BY EITHER THE BOARD OR THE MANAGING MEMBERS.
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 COMMITTEEIS 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, AND CONTEMPORANEOUS DOCUMENTATION OF THE MEETINGS, DELIBERATIONS, AND DECISIONS. THIS PROCESS, WHICH IS COMPLETED ANNUALLY, WAS UNDERTAKEN FOR THE TAX YEAR IN MAY 2021.
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, CHIEF PEOPLE OFFICER, AND CHIEF ANIMAL RESCUE CARE & SANCTUARY 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, AND CONTEMPORANEOUS DOCUMENTATION OF THE MEETINGS, DELIBERATIONS, AND DECISIONS. THIS PROCESS, WHICH IS COMPLETED ANNUALLY, WAS UNDERTAKEN FOR THE TAX YEAR IN MAY 2021 FOR ALL ABOVE-LISTED INDIVIDUALS EXCEPT THE CHIEF ANIMAL RESCUE CARE & SANCTUARY OFFICER, A NEW POSITION ADDED IN OCTOBER 2021.
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'S CERTIFICATE OF INCORPORATION, BYLAWS, AND CONFLICT OF INTEREST POLICY ARE POSTED ON THE HSUS'S WEBSITE AND ARE ALSO AVAILABLE BY MAIL 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)).

Deturn Deference Identifier	Evalenction
Return Reference - Identifier	Explanation
GENERAL NOTE - JOINT COST ALLOCATIONS	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.
	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 -
	1) END THE CRUELEST PRACTICES - THE HSUS IS FOCUSED ON ENDING THE WORST FORMS OF INSTITUTIONALIZED ANIMAL SUFFERING - PUPPY MILLS, FUR FARMS, TROPHY HUNTING, EXTREME CONFINEMENT OF FARM ANIMALS, THE USE OF ANIMALS IN COSMETICS TESTS AND THE DOG MEAT TRADE. THE PROGRESS IS THE RESULT OF THE WORK WITH GOVERNMENTS, THE PRIVATE SECTOR AND MULTINATIONAL BODIES; PUBLIC AWARENESS AND CONSUMER EDUCATION CAMPAIGNS; PUBLIC POLICY EFFORTS AND MORE.
	2) CARE FOR ANIMALS IN CRISIS - THE HSUS RESPONDS TO LARGE-SCALE CRUELTY CASES AND DISASTERS AROUND THE WORLD, PROVIDING RESCUE, HANDS-ON CARE, LOGISTICS AND EXPERTISE WHEN ANIMALS ARE CAUGHT IN CRISES. THE HSUS'S CARE CENTERS HEAL AND PROVIDE LIFELONG SANCTUARY TO ABUSED, ABANDONED, EXPLOITED VULNERABLE AND NEGLECTED ANIMALS.
	3) BUILD A STRONGER ANIMAL PROTECTION MOVEMENT - THROUGH PARTNERSHIPS, TRAININGS, SUPPORT, COLLABORATION AND MORE, THE HSUS IS BUILDING A MORE HUMANE WORLD BY EMPOWERING AND EXPANDING THE CAPACITY OF ANIMAL WELFARE ADVOCATES AND ORGANIZATIONS IN THE UNITED STATES AND ACROSS THE GLOBE. TOGETHER, FASTER CHANGE WILL BE BROUGHT ABOUT FOR ANIMALS.
PAGE 1, BOX B - REASON FOR AMENDED RETURN	ON THE 2021 FILED FORM 990, THE SCHEDULE J, PART I, LINE 1A CHECKBOX FOR FIRST-CLASS OR CHARTER TRAVEL WAS CHECKED, AND AN EXPLANATION WAS PROVIDED ON SCHEDULE J, PART III. IN 2023, IT WAS DISCOVERED THAT THE FIRST-CLASS TRAVEL WAS NOT PAID FOR BY THE HSUS, AND WAS INSTEAD A FREE UPGRADE WHICH DOES NOT QUALIFY AS A RESPONSE ON SCHEDULE J PART I. THE ERROR HAS BEEN CORRECTED ON THE AMENDED 2021 FORM 990.

SCHEDULE R (Form 990)

Part I

Related Organizations and Unrelated Partnerships

(b)

Primary activity

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

OMB No. 1545-0047

(f)

Direct controlling

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. **Open to Public** ▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection

(c)

Legal domicile (state

(d)

Total income

Department of the Treasury Internal Revenue Service

Name of the organization THE HUMANE SOCIETY OF THE UNITED STATES

Name, address, and EIN (if applicable) of disregarded entity

Employer identification number 53-0225390

(e)

End-of-year assets

					or foreign country)			enti	ίy
(1)			-						
(2)									
(3)									
(4)									
(5)									
(6)			-						
Part II	Identification of Related Tax-Exempt Organizations one or more related tax-exempt organizations du	ations. Curing the t	omplete if tax year.	he organization	answered "Yes"	on Form 990, Par	t IV, line 34, bed	ause it h	ıad
	(a) Name, address, and EIN of related organization	Prima	(b) ary activity	(c) Legal domicile (state or foreign country		(e) Public charity status (if section 501(c)(3))		con	(g) 512(b)(13) atrolled atity?
(1) (SEE S	TATEMENT)							Yes	No
(2)									
(3)		-							
(4)		-							
(5)		-							
(6)		-							
(7)		-							
For Paperw	ork Reduction Act Notice, see the Instructions for Form 99	90.		Ca	at. No. 50135Y		Schedule	R (Form 9	90) 2021

71

Schedule R (Form 990) 2021

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under	(f) Share of total income	(g) Share of end-of- year assets			(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	partner?		(k) Percentage ownership
		country)		sections 512-514)			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	Section 5 contr ent	512(b)(13) rolled tity?
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

Schedule R (Form 990) 2021

Schedule R (Form 990) 2021

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

Not	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.	Y	/es	No							
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?										
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	а	~								
b	Gift, grant, or capital contribution to related organization(s)	b	~								
С	Gift, grant, or capital contribution from related organization(s)	С	~								
d	Loans or loan guarantees to or for related organization(s)	d		~							
е	Loans or loan guarantees by related organization(s)	е		~							
f	Dividends from related organization(s)	lf		~							
g	Sale of assets to related organization(s)	g		~							
h	Purchase of assets from related organization(s)	h		~							
i		li		~							
j		ij		~							
k	Lease of facilities, equipment, or other assets from related organization(s)	k		~							
ı	Performance of services or membership or fundraising solicitations for related organization(s)	II	~								
m	Performance of services or membership or fundraising solicitations by related organization(s)	m		~							
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	n	~								
О		o	~								
р	Reimbursement paid to related organization(s) for expenses	р		~							
q			~								
•											
r	Other transfer of cash or property to related organization(s)	r	~								
s		s	~								
2											

(a) Name of related organization	(b) Transaction type (a—s)	(c) Amount involved	(d) Method of determining amount involved
DORIS DAY ANIMAL LEAGUE	R	4,828,391	CASH TRANSFERS
(1)			
DORIS DAY ANIMAL LEAGUE	S	1,177,304	CASH TRANSFERS
(2)			
DORIS DAY ANIMAL LEAGUE	Q	651,821	ACTUAL COSTS INCURRED
(3)			
HUMANE SOCIETY INTERNATIONAL	R	628,111	CASH TRANSFERS
(4)			
HUMANE SOCIETY INTERNATIONAL	S	500,000	CASH TRANSFERS
(5)			
(SEE STATEMENT)			
(6)			

Schedule R (Form 990) 2021

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	Are all sec 501 organiz	e) partners ction (c)(3) zations?	(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)	ode V—UBI General or bunt in box 20 managing Schedule K-1 partner?		(k) Percentage ownership
			sections 512-514)	Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
<u>(4)</u>													
(5)													
<u>(6)</u>													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

(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	512(t	ection b)(13) d 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 SHOP NO.39, SHREEJI SHOPPING ARCADE, SHETH GH COMPOUND, M.G.ROAD, BORIVALI(E), MUMBAI, MAHARASHTRA, 400066, 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) THE 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) THE FUND FOR ANIMALS, INC. (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.	>	
(12) 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.	>	
(13) HUMANE SOCIETY INTERNATIONAL - EUROPE AVENUE DES ARTS 50, 1000 BRUSSELS, BE	ANIMAL WELFARE	BELGIUM			THE HUMANE SOCIETY OF THE U.S.	>	
(14) 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.	>	
(15) 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.	✓	

(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) So 512(b controlle	
						Yes	No
(16) 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.	✓	
(17) 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	>	
(18) 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.	✓	
(19) 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	tion	ropor ate ation	(i) Code V - UBI amount in box 20 of Schedule K- 1 (Form	Gen	ieral or aging	(k) Percentage ownership
							Yes	No	1065)	Yes	No	
	WELFARE OF FARM ANIMALS	TX	THE HUMANE SOCIETY OF THE UNITED STATES	UNRELATED	2,946	5,344		✓	N/A	\		58.29

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	В	5,679,457	PROGRAM GRANT
(7) HUMANE SOCIETY INTERNATIONAL	0	3,147,404	SALARIES
(8) HUMANE SOCIETY INTERNATIONAL	Q	2,522,699	ACTUAL COSTS INCURRED
(9) THE HUMANE SOCIETY WILDLIFE LAND TRUST	R	1,036,936	CASH TRANSFERS
(10) THE HUMANE SOCIETY WILDLIFE LAND TRUST	S	2,459,040	CASH TRANSFERS
(11) THE HUMANE SOCIETY WILDLIFE LAND TRUST	В	145,604	PROGRAM GRANT
(12) THE HUMANE SOCIETY WILDLIFE LAND TRUST	0	,	SALARIES
(13) THE HUMANE SOCIETY WILDLIFE LAND TRUST	Q	1,542,571	ACTUAL COSTS INCURRED
(14) THE FUND FOR ANIMALS	R	122,409	CASH TRANSFERS
(15) THE FUND FOR ANIMALS	S	4,462,411	CASH TRANSFERS
(16) THE FUND FOR ANIMALS	В	6,105,051	PROGRAM GRANT
(17) THE FUND FOR ANIMALS	0	2,302,284	SALARIES
(18) THE FUND FOR ANIMALS	Q	3,963,308	ACTUAL COSTS INCURRED
(19) HUMANE SOCIETY VETERINARY MEDICAL ASSOCIATION, INC.	S	111,752	CASH TRANSFERS
(20) HUMANE SOCIETY VETERINARY MEDICAL ASSOCIATION, INC.	В	504,877	PROGRAM GRANT
(21) HUMANE SOCIETY VETERINARY MEDICAL ASSOCIATION, INC.	0	342,651	SALARIES
(22) HUMANE SOCIETY VETERINARY MEDICAL ASSOCIATION, INC.	Q	270,699	ACTUAL COSTS INCURRED
(23) HUMANE SOCIETY INTERNATIONAL - EUROPE	В	818,972	PROGRAM GRANT
(24) HUMANE SOCIETY INTERNATIONAL - EUROPE	Q	818,972	ACTUAL COSTS INCURRED
(25) HUMANE SOCIETY INTERNATIONAL - AFRICA	В	448,817	PROGRAM GRANT
(26) HUMANE SOCIETY INTERNATIONAL - AFRICA	Q	448,817	ACTUAL COSTS INCURRED
(27) HUMANE SOCIETY LEGISLATIVE FUND	R	708,498	CASH TRANSFERS
(28) HUMANE SOCIETY LEGISLATIVE FUND	S	1,292,235	CASH TRANSFERS
(29) HUMANE SOCIETY LEGISLATIVE FUND	A	214,721	RENT
(30) HUMANE SOCIETY LEGISLATIVE FUND	В	1,617,159	PROGRAM GRANT
(31) HUMANE SOCIETY LEGISLATIVE FUND	0	1,905,045	SALARIES
(32) HUMANE SOCIETY LEGISLATIVE FUND	Q	2,736,144	ACTUAL COSTS INCURRED

Tax Exempt Entity Declaration and Signature for Electronic Filing

OIVIB	INO.	1545-0047	

For calendar year 2021, or tax year beginning _____, 2021, and ending _____, 20

Department of the Treasury Internal Revenue Service

For use with Forms 990, 990-EZ, 990-PF, 990-T, 1120-POL, 4720, 8868, 5227, 5330, and 8038-CP ▶ Go to www.irs.gov/Form8453TE for the latest information.

Name of fi	iler									EIN or S	SN			
THE HU	IMAN	E SOCIETY OF	THE UNITED S	TATES	8						53-	-0225	5390	
Part I	•	Type of Reti	urn and Retu	ırn İn	formation									
and Form 6a, 7a, 8 6b, 7b, 8	m 533 3a, 9 a 8b, 9 l	30 filers may er a, or 10a below b, or 10b , whic	nter dollars and	l cents unt on able, b	. For all other fo that line of the blank (do not er	orms, ente return beir	r whole ng filed	dollars only with this fo	e amount, if any, y. If you check th rm was blank, th n the return, ther	ne box o nen leave	n line e line '	1a, 2 1b, 2	2a, 3a, 4 2b, 3b, 4l	a, 5a, b, 5b,
			re than one line			(F	000 0	مال المال		ı	46		250 51	0 729
		990 check her	_			• .			umn (A), line 12)	- 1	1b 2b		259,51	9,730
		990-EZ check	_								3b			
		1120-POL che 990-PF check	_								4b			
		8868 check he							-PF, Part V, line	1	5b			
			_		•		,			- 1	6b			
		990-T check he 4720 check he								- 1	7b			
		5227 check he								- 1	8b			
		5330 check he							7, Item D)		9b			
											10b			
10a F		8038-CP chec			son Subject		reques	lea (FOIIII o	038-CP, Part III, li	ne 22)	100			
b [co Ia in If ex	ontact the U.S. also authorize formation nece a copy of this recuted the electrical street and the second of the s	Treasury Finar the financial in essary to answer return is being the ectronic disclose	ncial Ag nstitution r inqui filed wi sure co	gent at 1-888-3 ons involved in ries and resolve th a state agene	53-4537 n the procests issues related by(ies) regreted within the	o later ressing lated to ulating his retu	than 2 busing of the electory the payme charities as the pallowing	y to this accounness days prior to tronic payment ont. part of the IRS For disclosure by the	o the pa of taxes ed/State	yments to re	t (set	ttlement) re confid , I certify	date. dential that I
(name of and that knowled of the ele to the IR	f entit t I ha lge ar ectro RS an	ave examined and belief, they a nic return. I cond to receive from	a copy of the are true, correct nsent to allow rom the IRS (a)	2021 t, and my inte an acl	electronic retu complete. I furt rmediate servic	rn and ac her declar e provider of receip	compa e that t , transr	nying sche he amount nitter, or ele	I am the personal lambda and state in Part I above is ectronic return or ection of the transport	, (EIN ments, s the am iginator	l) and, t ount s (ERO)	to the	e best on the end the	of my copy return
Sign		12	7. KM	7		1	5/3/20	.24	TDEACHDED					
Here	_	Signature of offi	cer or person su	ibioot to	o tov	Date	3/3/20		TREASURER Title, if applicable					
Part III							and [arer (see instr		-/			
I declare I am only The entit be filed Informati have exa	that y a c ty offi with ion fo	I have reviewe ollector, I am ricer or persons the IRS to the or Authorized Illed the above re	d the above reinot responsible subject to tax vofficer or persons 8 e-file Provideturn and according to the subject of the sub	turn an for revill hav on sub ders for	d that the entrice viewing the return this for the signed this for ject to tax, and r Business Return for schedules	es on Form Irn and or Irn before have follourns. If I ar and stater	n 8453- Ily decl I subm owed al m also ments,	TE are com are that this it the return I other requ the Paid Pr and, to the	plete and correct some accurately in I will give a copuirements in Pubeparer, under pebest of my knowave any knowled	t to the reflects by of all to 4163, enalties owledge a	best o s the o forms Moder of perj	data and rnize ury I	on the rainformat de-File declare	eturn. ion to (MeF) that I
ERO's Use	sigr	nature				Date		Check if also paid preparer		ERO's S	SN or F	PIN		
Only	Firn	n's name (or yours -employed),	s if							EIN				
———		dress, and ZIP coo	le 💆							Phone n	0.			
	vledg	e and belief, th							ng schedules and used on all inforn					
Paid		Print/Type prepa	rer's name		Preparer's si				Date	Check	k if self-	PT	IN	
	ror	MARC R. BER	GER, CPA		Ma	rc R.	Ber	ger	5/2/2024	emplo]	P018715	563
Prepa		Firm's name ►	BDO USA, LL				<u>'</u>			Firm's	s EIN ►	1	3-538159) 0
Use O	illy	Firm's address ▶	8401 GREEN	SBORC	DRIVE - SUITE	800, MCL	EAN, V	A 22102		Phone	no.	(703	3) 893-06	00