# EXTENDED TO NOVEMBER 15, 20 Return of Private Foundation

Form **990-PF** 

Department of the Treasury Internal Revenue Service

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

Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.



For calendar year 2017 or tax year beginning , and ending								
Nar	ne of	foundation	A Employer identification number					
		MAL CARE SANCTUARY	22-1837635					
		and street (or P.O. box number if mail is not delivered to street $f BOX \ A$	address)	Room/suite	B Telephone number 570-596-22	0.0		
City	or t	own, state or province, country, and ZIP or foreign p		I	C If exemption application is p			
		T SMITHFIELD, PA 18817			<b>D</b> 4 Fiiii	abaatabaaa 🔊 🗖		
G (	песк	all that apply: Initial return Final return	Initial return of a fo	rmer public charity	<b>D</b> 1. Foreign organizations	, cneck nere		
		Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test, mputation		
H C	_	type of organization: X Section 501(c)(3) exction 4947(a)(1) nonexempt charitable trust	cempt private foundation Other taxable private founda	tion	E If private foundation state			
I Fa		, , , , ,	ng method: Cash	X Accrual	under section 507(b)(1)  F If the foundation is in a 6	•		
(fr	om F	Part II, col. (c), line 16)	ther (specify)		under section 507(b)(1)			
		4,774,448. (Part I, colur	nn (d) must be on cash basis	5.)		(4)		
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	(a) Revenue and expenses per books	( <b>b)</b> Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)		
	1	Contributions, gifts, grants, etc., received	883,863.					
	2	Check if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments	37,493.	37,493.	37,493.	STATEMENT 1		
	4	Dividends and interest from securities	27,180.	27,180.	27,180.	STATEMENT 2		
	5a	Gross rents		•	•			
		Net rental income or (loss)						
ē	6a	Net gain or (loss) from sale of assets not on line 10	37,948.					
Revenue	_b	dood on the od		37,948.				
Rev	7	Capital gain net income (from Part IV, line 2)		3/,940.	15,276.			
	8 9	Net short-term capital gain			15,270.			
	10a	Net short-term capital gain  Income modifications Gross sales less returns and allowances  Less: Cost of goods sold  17.				STATEMENT 3		
	C	Gross profit or (loss)	31,544.	10 025	31,544.	G		
	11	Other income	374,679. 1,392,707.	10,235. 112,856.	486,172.	STATEMENT 4		
	12 13	Total. Add lines 1 through 11	69,473.	0.	480,172.	69,473.		
	14	Other employee salaries and wages	960,591.	0.	188,384.	772,207.		
	15	Pension plans, employee benefits	141,714.	0.	34,419.	107,295.		
ses	16a	Legal fees STMT 5	14,894.	0.	13.	14,881.		
pen		Accounting fees STMT 6	15,875.	0.	14.	15,861.		
Ĕ		Other professional fees STMT 7	95,974.	28,318.	28,376.	67,598.		
ative	1/	Interest Taxes STMT 8	7,813.	0.	1,025.	6,378.		
istr	19	Depreciation and depletion	88,294.	0.	88,294.	0,3700		
Ä	20	Occupancy			,			
PΑ	21	Travel, conferences, and meetings	16,009.	0.	156.	15,853.		
and	22	Printing and publications	16,079.	0.	0.	16,079.		
ing	23	Other expenses STMT 9	460,836.	0.	137,022.	323,814.		
Operating and Administrative Expens	24	Total operating and administrative expenses. Add lines 13 through 23	1,887,552.	28,318.	477,703.	1,409,439.		
Ö	25	Contributions, gifts, grants paid	0.	20,0201	27777000	0.		
	26	Total expenses and disbursements.						
		Add lines 24 and 25	1,887,552.	28,318.	477,703.	1,409,439.		
		Subtract line 26 from line 12:	-494,845.					
		Excess of revenue over expenses and disbursements  Net investment income (if negative, enter -0-)	434,043.	84,538.				
		Adjusted net income (if negative, enter -0-)		22,000	8,469.			

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions.

Part    Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of year			
Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value		
1 Cash - non-interest-bearing	54,345.	52,972.	52,972		
2 Savings and temporary cash investments	173,059.	94,059.	94,059		
3 Accounts receivable ► 1,918.					
Less: allowance for doubtful accounts ▶	1,371.	1,918.	1,918		
4 Pledges receivable ►					
Less: allowance for doubtful accounts					
5 Grants receivable		96,693.	96,693		
6 Receivables due from officers, directors, trustees, and other			·		
disqualified persons					
7 Other notes and loans receivable					
Less; allowance for doubtful accounts					
	4,444.	6,320.	6,320		
8 Inventories for sale or use     9 Prepaid expenses and deferred charges  10 Investments   U.S. and other government obligations	36,888.	291.	291		
10a Investments - U.S. and state government obligations	,				
b Investments - corporate stock STMT 10	11,274.	13,867.	13,867		
c Investments - corporate bonds STMT 11	787,581.	524,228.	524,228		
11 Investments - land, buildings, and equipment: basis	/		<u> </u>		
Less: accumulated depreciation					
12 Investments - mortgage loans					
12 Investments - mortgage loans 13 Investments - other STMT 12	2,787,667.	2,717,385.	2,717,385		
14 Land, buildings, and equipment: basis ► 2,674,507.	2710170011	2712170000	2,727,700		
Less: accumulated depreciation STMT 13 1,420,392.	1,186,473.	1,254,115.	1,254,11		
15 Other assets (describe ► GOODWILL )	14,400.	12,600.	12,600		
16 Total assets (to be completed by all filers - see the	11/1001	22,000	12,00		
instructions. Also, see page 1, item I)	5,057,502.	4,774,448.	4,774,448		
17 Accounts payable and accrued expenses	166,560.	196,228.	1,,,1,11		
18 Grants payable	200,000	270,2200			
19 Deferred revenue					
20 Loans from officers, directors, trustees, and other disqualified persons					
21 Mortgages and other notes payable	67,600.	67,052.			
22 Other liabilities (describe )	0.,000	07,0020			
22 Other Habilities (describe					
23 Total liabilities (add lines 17 through 22)	234,160.	263,280.			
Foundations that follow SFAS 117, check here	231/1001	20372001			
and complete lines 24 through 26, and lines 30 and 31.					
24 Unrestricted	2,983,241.	2,565,802.			
25 Temporarily restricted	187,143.	229,511.			
26 Permanently restricted	1,652,958.	1,715,855.			
Foundations that do not follow SFAS 117, check here	1,032,330.	1,713,033.			
and complete lines 27 through 31.					
27 Capital stock, trust principal, or current funds					
28 Paid-in or capital surplus, or land, bldg., and equipment fund					
I					
l	4,823,342.	4,511,168.			
30 Total net assets or fund balances	4,023,342.	4,311,100.			
31 Total liabilities and net assets/fund balances	5,057,502.	4,774,448.			
Part III Analysis of Changes in Net Assets or Fund Ba		1,771,110			
Total net assets or fund balances at beginning of year - Part II, column (a), line 3					
(must agree with end-of-year figure reported on prior year's return)		1	4,823,34		
Enter amount from Part I, line 27a		2	-494,84		
Other increases not included in line 2 (itemize)   UNREALIZED G	AIN/LOSS	3	182,671		

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1	4,823,342.
2	Enter amount from Part I, line 27a	2	-494,845.
3	Other increases not included in line 2 (itemize) <b>UNREALIZED GAIN/LOSS</b>	3	182,671.
4	Add lines 1, 2, and 3	4	4,511,168.
5	Decreases not included in line 2 (itemize) ▶	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	4,511,168.

Ī	Part IV Capital Gains	and Losses	for Tax on In	vestmen	t Income						
	(a) List and describe 2-story brick w		operty sold (for exar mon stock, 200 shs		te,	( <b>b)</b> H P - D -	ow acq Purcha Donati	uired ase on	( <b>c)</b> Date a (mo., da		(d) Date sold (mo., day, yr.)
1											
	b SEE ATTACHEI	STATEME	ENT								
_	C										
_	d										
_	e	T				Ц,					
	(e) Gross sales price	. , ,	ation allowed owable)		st or other basis expense of sale					nin or (loss) (f) minus (	
_	a					_					
	b										
_	C										
_	d 1 262 612				1 200 68						25 242
_	e 1,360,618.		(1)		1,322,67	0.					37,948.
_	Complete only for assets showi		• • • • • • • • • • • • • • • • • • • •					(I)	Gains (Co	ol. (h) gain ot less thar	minus
	(i) FMV as of 12/31/69		sted basis		cess of col. (i)			COI. (	Losses (	ot less that (from col. (	h))
_	(1) 1 11 40 61 12/0 1/00	as or	12/31/69	over	col. (j), if any	_				` `	
_	a					_					
	b					_					
_	C										
	d					_					25 242
_	е										37,948.
			If gain, also enter If (loss), enter -0-	in Part I, line	7	λl					25 242
2	Capital gain net income or (net c	apital loss)	If (loss), enter -0-	in Part I, line	7	. J.L	2				37,948.
3	Net short-term capital gain or (lo	ss) as defined in s	sections 1222(5) an	d (6):		ς					
	If gain, also enter in Part I, line 8					$\downarrow$					45 056
_	If (loss), enter -0- in Part I, line 8		4040/ \ 4			<u>. 11</u>	3				15,276.
L	Part V   Qualification \	Jnder Section	on 4940(e) for	Reduced	lax on Net	Inve	estme	ent Inco	ome		
(F	or optional use by domestic privat	te foundations sub	ject to the section 4	1940(a) tax on	net investment in	icome.	)				
lf	section 4940(d)(2) applies, leave	this nart hlank									
"	3000011 4340(d)(2) applies, loave	uno part biarik.									
	las the foundation liable for the sec				•	riod?					Yes X No
_	"Yes," the foundation doesn't qual	-	, ,								
1	Enter the appropriate amount in	each column for o	each year; see the in	structions be	fore making any e	ntries.					7.30
	( <b>a)</b> Base period vears		(b)			(c)				Distrib	( <b>d)</b> oution ratio
_	Calendar year (or tax yéar beginn	ing in) Adj	usted qualifying dist		Net value of no						ided by col. (c))
_	2016		1,63	0,043.				,931.			.440441
_	2015		1,49	4,053.				,432.			.442757
	2014			0,171.		4,	097	,350.			.358810
	2013		1,83	0,985.		3,	799	,090.	,		.481954
	2012		1,74	4,550.		3,	300	,756.			.528530
2	Total of line 1, column (d)								2		2.252492
3	Average distribution ratio for the	5-year base perio	d - divide the total o	on line 2 by 5.0	O, or by the numb	er of y	ears				
	the foundation has been in existe	ence if less than 5	years						3		.450498
4	Enter the net value of noncharita	ble-use assets for	2017 from Part X, I	ine 5					4		3,747,960.
5	Multiply line 4 by line 3								5		1,688,448.
											-
6	Enter 1% of net investment inco	me (1% of Part I.	line 27b)						6		845.
Ī			,								
7	Add lines 5 and 6								7		1,689,293.
•	5655 5 and 5								$\vdash$		, : : : , = : : :
8	Enter qualifying distributions fro								8		1,409,439.
	If line 8 is equal to or greater tha See the Part VI instructions.	n line 7, check the	box in Part VI, line	1b, and comp	lete that part usin	g a 1%	tax rat	te.			

	Based on Investment Income (Section			48 - see	instru	ctio	ns)
1a Exempt operating foundation	s described in section 4940(d)(2), check here 🕨 🔙	and enter "N/A" on line 1.					
Date of ruling or determination	on letter: (attach copy of letter	er if nece <u>ssary</u> -see instru	ctions)				
	eet the section 4940(e) requirements in Part V, check h			1		1,6	<u>91.</u>
of Part I, line 27b							
	ns enter 2% of line 27b. Exempt foreign organizations, o		` '				
	estic section 4947(a)(1) trusts and taxable foundations			2			0.
				3		1,6	91.
	estic section 4947(a)(1) trusts and taxable foundations		_	4		1 6	0.
	<b>come</b> . Subtract line 4 from line 3. If zero or less, enter-	-0-		5		Ι,6	91.
6 Credits/Payments:		1 - 1	600				
	s and 2016 overpayment credited to 2017		600.				
	s - tax withheld at source		0.				
	extension of time to file (Form 8868)	<del> </del>	0.				
	usly withheld			_		6	00
7 Total credits and payments. A	Add lines 6a through 6d			7		0	$\frac{00.}{2.}$
	ayment of estimated tax. Check here if Form 222			8		1 0	$\frac{2\cdot}{93\cdot}$
	5 and 8 is more than line 7, enter <b>amount owed</b>		<del>-</del>	9		1,0	93.
	re than the total of lines 5 and 8, enter the amount over	rpaid	<del>_</del>	10			
	be: Credited to 2018 estimated tax ► ts Regarding Activities		Refunded -	11			
	oundation attempt to influence any national, state, or loa	aal lagialation or did it nort	sinata ar intarvana in			Yes	No
1111 1 1 0			•		10	163	X
7.1	during the year (either directly or indirectly) for politica				1a 1b		X
-	or <b>1b</b> , attach a detailed description of the activities and			JII	10		22
	in connection with the activities.	copies of any materials pur	Jiisiieu oi				
					1c		Х
	1120-POL for this year?ax on political expenditures (section 4955) imposed du				10		22
, -,	0 • (2) On foundation m		0.				
	any) paid by the foundation during the year for political						
managers. ▶ \$	0 •	experientare tax imposed o	ii iodiidatioii				
	in any activities that have not previously been reported	to the IRS?			2		Х
If "Yes," attach a detailed desc		to the into:			_		
	changes, not previously reported to the IRS, in its gov	verning instrument, articles	of incorporation or				
	uments? If "Yes," attach a conformed copy of the chang	=			3		Х
	lated business gross income of \$1,000 or more during				4a		X
	n on <b>Form 990-T</b> for this year?				4b		
	ination, dissolution, or substantial contraction during th				5		Х
	required by General Instruction T.						
6 Are the requirements of section	on 508(e) (relating to sections 4941 through 4945) sat	tisfied either:					
<ul> <li>By language in the governing</li> </ul>	ng instrument, or						
<ul> <li>By state legislation that effe</li> </ul>	ectively amends the governing instrument so that no m	andatory directions that co	nflict with the state la	ıw			
remain in the governing instr	ument?				6		X
7 Did the foundation have at lea	ast \$5,000 in assets at any time during the year? If "Yes	s," complete Part II, col. (c)	, and Part XV		7	Х	
8a Enter the states to which the	foundation reports or with which it is registered. See in	structions. ►					
PA,NY,NJ							
<b>b</b> If the answer is "Yes" to line 7	7, has the foundation furnished a copy of Form 990-PF	to the Attorney General (or	designate)				
	General Instruction G? If "No," attach explanation				8b	X	
	atus as a private operating foundation within the meani						
year 2017 or the tax year beg	ginning in 2017? See the instructions for Part XIV. If "Ye	es," complete Part XIV			9	X	
10 Did any persons become sub	stantial contributors during the tax year? If "Yes," attach	a schedule listing their names	and addresses		10		X

Г	Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		х
10	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			21
12	If "Yes," attach statement. See instructions	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address WWW.ANIMALCARESANCTUARY.ORG			
14	The books are in care of ► JOAN SMITH-REESE  Telephone no. ► 570-59	6-2	200	
	Located at ▶P.O. BOX A, EAST SMITHFIELD, PA ZIP+4 ▶18			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041 -</b> check here		<b></b>	
	and enter the amount of tax-exempt interest received or accrued during the year <b>15</b>		/A	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
Pa	art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1	a During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)? Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions $N/A$	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2017?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
-	a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2017? Yes X No			
	If "Yes," list the years			
	b Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement - see instructions.)  N/A	2b		
	statement - see instructions.)  c If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.	20		
	in the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
2	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
3				
	during the year?			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2017.) $N/A$	3b		
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		Х

ı	Page 6
s	No

Part VII-B   Statements Regarding Activities for Which F	orm 4/20 May Be F	<b>Requirea</b> (contin	ued)					
5a During the year, did the foundation pay or incur any amount to:				Yes	No			
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Y	es X No					
(2) Influence the outcome of any specific public election (see section 4955); o								
any voter registration drive?			es X No					
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y	es X No					
(4) Provide a grant to an organization other than a charitable, etc., organization								
4945(d)(4)(A)? See instructions		Y	es X No					
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or						
the prevention of cruelty to children or animals?		Y	es X No					
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations								
section 53.4945 or in a current notice regarding disaster assistance? See instru	ıctions		N/A	5b				
Organizations relying on a current notice regarding disaster assistance, check h	nere		▶□					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it maintai	ined						
expenditure responsibility for the grant?	N	[/A Y	es 🔲 No					
If "Yes," attach the statement required by Regulations section 53.4945-5(d).								
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on							
a personal benefit contract?		Y	es X No					
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b	X			
If "Yes" to 6b, file Form 8870.								
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Y	es X No					
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attribu	table to the transaction?		N/A	7b				
Part VIII Information About Officers, Directors, Trusto								
Paid Employees, and Contractors	•							
1 List all officers, directors, trustees, and foundation managers and t	heir compensation.							
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Exp account	ense			
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	allowa				
	-	,						
SEE STATEMENT 17		69,473.	0.		0.			
		,						
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."		•				
A Name and address of each are less with a three MEO COO	(b) Title, and average		(d) Contributions to employee benefit plans and deferred	(e) Exp	ense			
(a) Name and address of each employee paid more than \$50,000	` 'hours per week ' devoted to position	(c) Compensation	and deferred compensation	account	i, otner inces			
DEBORAH URBAN - C/O ORGANIZATION PO	VETERINARIAN		compensation					
BOX A, EAST SMITHFIELD, PA 18817	40.00	64,232.	0.		0.			
	DEVELOPMENT	01,2021						
PO BOX A, EAST SMITHFIELD, PA 18817	40.00	58,376.	0.		0.			
20 2011 11, 11101 51111111111111111111111111	1000	30,370.	ļ .	-				
				<del>                                     </del>				
				<del>                                     </del>				
Total number of other employees paid over \$50,000		1	<u> </u>	<u>I</u>	0			
Total number of other employees paid over \$50,000			······ <u> </u>	000 5=	(00 17)			

Part VIII Information About Officers, Directors, Trustees, Four Paid Employees, and Contractors (continued)	dation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, el	nter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities		<u></u> ▶
List the foundation's four largest direct charitable activities during the tax year. Include relevant st number of organizations and other beneficiaries served, conferences convened, research papers		Expenses
	oroduced, etc.	
1		
SEE STATEMENT 18		454,274.
2		434,274
SEE STATEMENT 19		429,659.
3		
SEE STATEMENT 20		333,484.
4		
SEE STATEMENT 21		64,380.
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2.	Amount
1N/A		
2		
All allows are well at all an arter of the Continue to the Con		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	<b>•</b>	0.

Page 8

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 3,246,563. a Average monthly fair market value of securities 1a 558,473. **b** Average of monthly cash balances 1b c Fair market value of all other assets 1c 3,805,036. d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and Acquisition indebtedness applicable to line 1 assets 2 3,805,036. Subtract line 2 from line 1d 3 3 57,076. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 3,747,960 187,398 Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here \( \neq \mathbb{X} \) and do not complete this part.) Minimum investment return from Part X, line 6 Tax on investment income for 2017 from Part VI, line 5 2a Income tax for 2017. (This does not include the tax from Part VI.) 2b 2c Add lines 2a and 2b Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1,409,439. 1a Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) За Cash distribution test (attach the required schedule) 3b 1,409,439. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b 5 Adjusted qualifying distributions. Subtract line 5 from line 4

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

Form **990-PF** (2017)

4940(e) reduction of tax in those years.

# Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	( <b>d)</b> 2017
1 Distributable amount for 2017 from Part XI,	•	•		
line 7				0.
2 Undistributed income, if any, as of the end of 2017:				
<b>a</b> Enter amount for 2016 only			0.	
<b>b</b> Total for prior years:		_		
		0.		
3 Excess distributions carryover, if any, to 2017:				
a From 2012 1,582,308.				
b From 2013 1,646,516.				
<b>c</b> From 2014				
d From 2015				
e From 2016	3,228,824.			
f Total of lines 3a through e	3,220,024.			
4 Qualifying distributions for 2017 from Part XII, line 4: ►\$ N/A				
a Applied to 2016, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior			0.	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		0,		
(Election required - see instructions)	0.			
<b>d</b> Applied to 2017 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2017	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	3,228,824.			
<b>b</b> Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously				
assessed		0.		
<b>d</b> Subtract line 6c from line 6b. Taxable		0		
amount - see instructions		0.		
e Undistributed income for 2016. Subtract line			0.	
4a from line 2a. Taxable amount - see instr  f Undistributed income for 2017. Subtract			0.	
lines 4d and 5 from line 1. This amount must				
be distributed in 2018				0.
7 Amounts treated as distributions out of				<u> </u>
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2012				
not applied on line 5 or line 7	1,582,308.			
9 Excess distributions carryover to 2018.				
Subtract lines 7 and 8 from line 6a	1,646,516.			
10 Analysis of line 9:				
<b>a</b> Excess from 2013 1,646,516.				
<b>b</b> Excess from 2014				
c Excess from 2015				
d Excess from 2016				
e Excess from 2017				

Part XIV   Private Operating F	oundations (see ins	structions and Part VII-	A, question 9)		
1 a If the foundation has received a ruling of	or determination letter that	it is a private operating			
foundation, and the ruling is effective fo	or 2017, enter the date of t	he ruling			
<b>b</b> Check box to indicate whether the foun	dation is a private operatin	g foundation described in	sectionX	4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2017	<b>(b)</b> 2016	(c) 2015	<b>(d)</b> 2014	(e) Total
investment return from Part X for					
each year listed	8,469.	4,545. 3,863.	36,077.	204,868.	
<b>b</b> 85% of line 2a	7,199.	3,863.	30,665.	174,138.	215,865.
c Qualifying distributions from Part XII,					
line 4 for each year listed	1,409,439.	1,630,613.	1,494,796.	1,473,316.	6,008,164.
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities	543,749.	690,913.	516,254.	544,274.	2,295,190.
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c	865,690.	939,700.	978,542.	929,042.	3,712,974.
<b>3</b> Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					0.
(2) Value of assets qualifying					_
under section 4942(j)(3)(B)(i)					0.
<b>b</b> "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year					_
listed					0.
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest, dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)	1,290,086.	2,787,188.	1,119,746.	1,013,060.	6,210,080.
(2) Support from general public and 5 or more exempt					
organizations as provided in	000 050	0 250 551	604 055	F44 440	4 200 652
sečtion 4942(j)(3)(B)(iii)	883,863.	2,359,771.	624,875.	511,149.	4,379,658.
(3) Largest amount of support from					

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)

91,849.

96,332.

### 1 Information Regarding Foundation Managers:

an exempt organization .....

(4) Gross investment income

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

### NONE

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

#### NONE

## ${\bf 2} \quad \text{Information $\underline{\textbf{Rega}}$ rding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:} \\$

Check here  $\triangleright X$  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

112,856.

- **b** The form in which applications should be submitted and information and materials they should include:
- c Any submission deadlines:
- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

3 Grants and Contributions Paid During the Ye		Dovmont		
	If recipient is an individual	Payment 	1	
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (nome of business)	or substantial contributor	recipient		
a Paid during the year				
•				
NONE				
1101111				
Total			> 3a	0.
b Approved for future payment				
• Approved for ratare payment				
NONE				
MOINE				
Total			<b>&gt;</b> 3b	0.
ι υται		<u></u>	× 30	orm <b>990-PF</b> (2017)
			F	um <b>330-FF</b> (/U]/)

# Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated b	ousiness income		y section 512, 513, or 514	(e)
Ç	(a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion code	Amount	function income
a VET CLINIC					278,084
b ADOPTION					47,518
d					
e					
f					
<b>g</b> Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	37,493.	
4 Dividends and interest from securities			14	27,180.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
<b>b</b> Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income			15	10,235.	
8 Gain or (loss) from sales of assets other					
than inventory			18	37,948.	
9 Net income or (loss) from special events			01	-1,036.	24 544
10 Gross profit or (loss) from sales of inventory					31,544
11 Other revenue:			01	2 122	
a MISCELLANEOUS			01	3,132.	
b BOARDING INCOME			01	3,058.	
<u> </u>					
d					
e			0.	118,010.	357,146
12 Subtotal. Add columns (b), (d), and (e)				_	475,156
13 Total. Add line 12, columns (b), (d), and (e)				13	4/3,130

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
•	INCOME IS USED TO PROVIDE FOR NEGLECTED AND SURRENDERED
	ANIMALS AND PETS OF ALL KINDS, AND TO ACT AS A DEPOSITORY
	OF FUNDS DONATED AND BEQUESTED BY THE PUBLIC FOR THE CARE
	OF SUCH ANIMALS. FOR SPAY/NEUTER AND WELLNESS CARE FOR PETS IN OUR
	LOCAL COMMUNITIES.
1A	TO PROVIDE VETERINARY CARE TO ANIMAL CARE SANCTUARY DOGS AND CATS
	IN BOTH EAST SMITHFIELD AND WELLSBORO.
<u>1B</u>	TO PROVIDE ADOPTION OF ANIMALS TO APPROVED HOMES.
	_
10	TO INCREASE THE PUBLIC'S AWARENESS OF ACS AS AN ORGANIZATION SINCE
	THESE RETAIL ITEMS CARRY THE ACS LOGO. COLLARS, LEASHES, T-SHIRTS
	ARE EXAMPLES OF THE RETAIL ITEMS THAT ACS SELLS AT VARIOUS ADOPTION
	EVENTS HELD ANNUALLY.
11A	MISCELLANEOUS INCOME RECEIVED FOR PROGRAM SERVICES.
<u>11B</u>	TO BOARD ANIMALS WHILE OWNERS ARE UNABLE TO CARE FOR THEM.

#### 22-1837635 Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable **Exempt Organizations**

1	Did the c	ragnization directly or indir	ractly angage in any	of the followin	g with any other organizati	ion described in secti	on 501(c)		Yes	Nο
•		•			g to political organizations?		011 30 1(0)			
•	•		•							
a Transfers from the reporting foundation to a noncharitable exempt organization of:  (1) Cash										Х
(1) Cash										X
(2) Other assets b Other transactions:										
D			hla avament avamenimet					1b(1)		х
(1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization										X
	(2) Pur	chases of assets from a nor	ncharitable exempt o	rganization				1b(2)		X
	(3) Ren	iai oi iaciiilies, equipment, (	or other assets					1b(3)		X
	(4) Rein	nbursement arrangements						1b(4)		X
	(5) Loa	is or loan guarantees						1b(5)		X
					ns			1b(6)		X
					ployees			1c		
d		=		-	• •		narket value of the goods, o		ets,	
					ed less than fair market val	ue in any transaction	or sharing arrangement, sh	ow in		
(2)		(d) the value of the goods, (b) Amount involved			a avamet arganization	(4)				
(a)Li	ine no.	(b) Amount involved	(c) Name of		e exempt organization	(0) Description	of transfers, transactions, and s	haring ar	rangeme	nts
				N/A						
2a					or more tax-exempt organ			_		_
	in sectio	n 501(c) (other than section	n 501(c)(3)) or in sec	ction 527?			L	Yes	X	No
b	If "Yes," (	complete the following sche								
		(a) Name of org	anization		(b) Type of organization		(c) Description of relationsh	ip		
		N/A								
					ng accompanying schedules and n taxpayer) is based on all infort			the IRS on with th	discuss 1	this
Sig		, one, 11 10 mae, con con, and con	riprotor 2 decidiation of pro	paror (ourier una	n taxpayer) is based on all inform		shov	<u>/n</u> below	? Se <u>e in</u> :	er str.
He		•				DIRECT	OR X	Yes		J No
	Sig	nature of officer or trustee			Date	Title	<b></b> _			
		Print/Type preparer's na	ıme	Preparer's s	ignature	Date	Check if PTIN			
_							self- employed	_		
								063		
	eparer	Firm's name ► FRI	EDMAN LLP				Firm's EIN ► 13-16	108	09	
Us	e Only									
					T, SUITE 500	)				
		PH	ILADELPHI	A, PA	19103		Phone no. 215-49	<u>6-9</u>	200	
							Fo	m <b>99</b> (	)-PF	(2017)

CONTINUATION	FOR	990	-PF,	PART	ΙV
22-1837635	P.	AGE	1	OF	1

Capital Gaills allu Lo	sses for Tax on investment income				
(a) List and 2-story bi	d describe the kind(s) of property sol rick warehouse; or common stock, 2	d, e.g., real estate, 00 shs. MLC Co.	( <b>b)</b> How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a BENEFICIAL TRU	ST		P		12/31/17
b BENEFICIAL TRU			P		12/31/17
c RAYMOND JAMES	<u> </u>		P	<u> </u>	$\frac{12}{31}$
d MERRILL LYNCH			P		12/31/17
e PERSHING LLC -		UNTS	P		12/31/17
f PERSHING LLC -	INVESTMENT ACCO	UNTS	P		12/31/17
g					
h					
i					
				<u> </u>	
<u>j</u>					
<u>k</u>					
m					
n					
0					
	(f) Depreciation allowed	(g) Cost or other basis	/h	) Gain or (loss)	
(e) Gross sales price	(or allowable)	plus expense of sale	(II) (A)	olus (f) minus (g)	
12 000	(======================================	· '	(0)1	. (.,	139.
a 12,808.		12,669.			
b 423,029.		410,367.			12,662.
c 121,242.		114,145.			7,097.
d 194.		184.			10.
e 189,683.		181,653.			8,030.
f 613,662.		603,652.			10,010.
		000,0020			
<u>g</u>					
h					
<u>i</u>					
j					
k					
Ī					
m					
n					
Complete only for accets chowing	I ng gain in column (h) and owned by	the foundation on 12/21/60	(1) 1	(fuero (h))	
Complete only for assets shown	· · · · · · · · · · · · · · · · · · ·		(I) LOS	sses (from col. (h)) of col. (h) gain ove	real (k)
(i) F.M.V. as of 12/31/69	(j) Adjusted basis	(k) Excess of col. (i)	hut r	not less than "-0-")	i coi. (k),
(1)1 1111111 45 61 12/6 1/66	as of 12/31/69	over col. (j), if any		,	
a			* *		139.
b					12,662.
С			**		7,097.
d			* *		10.
			**		8,030.
e f					10,010.
					<u> </u>
<u>g</u>					
h					
i					
j					
k				<u> </u>	
I					
m					
n					
0					
	c If gain, also enter	in Part I. line 7			25 242
2 Capital gain net income or (net ca	apital loss) ······ { If (loss), enter "-C	)-" in Part I, line 7	2		37,948.
3 Net short-term capital gain or (los					
If gain, also enter in Part I, line 8,		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
If (loss), enter "-0-" in Part I, line 8		J	3		15,276.
		******			

## Form **2220**

# **Underpayment of Estimated Tax by Corporations**

Attach to the corporation's tax return.

FORM 990-PF

OMB No. 1545-0123

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form2220 for instructions and the latest information.

2017

## ANIMAL CARE SANCTUARY

Employer identification number 22-1837635

Note: Generally, the corporation isn't required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38 on the estimated tax penalty line of the corporation's income tax return, but do not attach Form 2220.

_	amated tax penalty line of the corporation's income tax i	otai	ii, bat <b>ao not</b> attaori i	OIIII ZZZO.				
F	Part I Required Annual Payment							T
1	Total tax (see instructions)						1	1,691.
	a Personal holding company tax (Schedule PH (Form 1120), line			2a				
t	<b>b</b> Look-back interest included on line 1 under section 460(b)(2)							
	contracts or section 167(g) for depreciation under the income	fore	cast method	2b			_	
	c Credit for federal tax paid on fuels (see instructions)			2c				
	d Total. Add lines 2a through 2c	<b>na</b> 4 o	amplete or file this form	The corneration			2d	
3	Subtract line 2d from line 1. If the result is less than \$500, <b>do</b> doesn't owe the penalty			•			3	1,691.
1	Enter the tax shown on the corporation's 2016 income tax retu						-	1,051.
7	or the tax year was for less than 12 months, skip this line ar						4	570.
	of the tax year was for 1000 than 12 months, skip this fine at	iu cii	iter the amount nom me				_	3700
5	Required annual payment. Enter the smaller of line 3 or line	4. If 1	the corporation is require	d to skip line 4.				
•	enter the amount from line 3						5	570.
F	Part II Reasons for Filing - Check the boxes belo						220	
	even if it doesn't owe a penalty. See instructions.							
6	The corporation is using the adjusted seasonal installr	nent	method.					
7	The corporation is using the annualized income install	ment	method.					
8	The corporation is a "large corporation" figuring its firs	t req	uired installment based o	n the prior year's	tax.			
F	Part III Figuring the Underpayment							
			(a)	(b)		(c)		(d)
9	Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers:							
	(d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the							
	corporation's tax year	9	05/15/17	06/15/	17	09/15/	17	12/15/17
10	Required installments. If the box on line 6 and/or line 7							
	above is checked, enter the amounts from Sch A, line 38. If							
	the box on line 8 (but not 6 or 7) is checked, see instructions							
	for the amounts to enter. If none of these boxes are checked,			_				
	enter 25% (0.25) of line 5 above in each column	10	143.	1	42.		<b>.43.</b>	142.
11	Estimated tax paid or credited for each period. For							
	column (a) only, enter the amount from line 11 on line 15.		100					440
	See instructions	11	190.					410.
	Complete lines 12 through 18 of one column							
	before going to the next column.				47			
	Enter amount, if any, from line 18 of the preceding column	12			<u>47.</u>			410
	Add lines 11 and 12	13			47.		Λ.F.	410.
	Add amounts on lines 16 and 17 of the preceding column	14	100		47		95.	238.
	Subtract line 14 from line 13. If zero or less, enter -0-	15	190.		47.		0.	172.
16	If the amount on line 15 is zero, subtract line 13 from line	اړا			0		٥E	
4-	14. Otherwise, enter -0-	16			0.		95.	
1/	Underpayment. If line 15 is less than or equal to line 10,							
	subtract line 15 from line 10. Then go to line 12 of the next	_			95.	-	<b>43.</b>	
10	column. Otherwise, go to line 18	17			<i>5</i> 0.	-	43.	
18	Overpayment. If line 10 is less than line 15, subtract line 10		47.					
	from line 15. Then go to line 12 of the next column	18	4 / •			1		

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

For Paperwork Reduction Act Notice, see separate instructions.

Form 2220 (2017)

Form 2220 (2017)

# Part IV Figuring the Penalty

			(a)	(b)	(c)	(d)
19	Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier.  (C Corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month.  Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions	19				
20	Number of days from due date of installment on line 9 to the					
	date shown on line 19	20				
21	Number of days on line 20 after 4/15/2017 and before 7/1/2017	21				
22	Underpayment on line 17 x Number of days on line 21 x 4% (0.04)	22	\$	\$	\$	\$
23	Number of days on line 20 after 06/30/2017 and before 10/1/2017	23				
24	Underpayment on line 17 x Number of days on line 23 x 4% (0.04)	24	\$	\$	\$	\$
25	Number of days on line 20 after 9/30/2017 and before 1/1/2018	25				
26	Underpayment on line 17 x Number of days on line 25 x 4% (0.04)	26	\$	\$	\$	\$
27	Number of days on line 20 after 12/31/2017 and before 4/1/2018	27	SEE	ATTACHED W	ORKSHEET	
28	Underpayment on line 17 x Number of days on line 27 x 4% (0.04)	28	\$	\$	\$	\$
29	Number of days on line 20 after 3/31/2018 and before 7/1/2018	29				
30	Underpayment on line 17 x Number of days on line 29 x *% 365	30	\$	\$	\$	\$
31	Number of days on line 20 after 6/30/2018 and before 10/1/2018	31				
32	Underpayment on line 17 x Number of days on line 31 x *% 365	32	\$	\$	\$	\$
33	Number of days on line 20 after 9/30/2018 and before 1/1/2019	33				
34	Underpayment on line 17 x Number of days on line 33 x *%	34	\$	\$	\$	\$
35	Number of days on line 20 after 12/31/2018 and before 3/16/2019	35				
36	Underpayment on line 17 x Number of days on line 35 x *%	36	\$	\$	\$	\$
37	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	\$	\$	\$
38	<b>Penalty.</b> Add columns (a) through (d) of line 37. Enter the to or the comparable line for other income tax returns			•	20	\$ 2.

<sup>\*</sup> Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

Form **2220** (2017)

# FORM 990-PF UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

Name(s)				Identifying N	umber
ANIMAL CAR	E SANCTUARY			22-18	37635
(A) *Date	(B) Amount	(C) Adjusted Balance Due	(D) Number Days Balance Due	(E) Daily Penalty Rate	(F) Penalty
		-0-			,
05/15/17	143.	143.			
05/15/17	-190.	-47.			
06/15/17	142.	95.	92	.000109589	1.
09/15/17	143.	238.	56	.000109589	1.
11/10/17	-260.	-22.			
12/15/17	142.	120.			
12/15/17	-150.	-30.			
03/31/18	0.	-30.	45	.000136986	
Penalty Due (Sum of Colu	mn F).			•	2.

<sup>\*</sup> Date of estimated tax payment, withholding credit date or installment due date.

712511 04-01-17

FORM 990-PF	INTERES	T ON	SAVING	S ANI	TEMPOR	ARY	CASH	INVESTMENTS	STA	PEMENT	1
SOURCE				]	(A) REVENUE PER BOOK		NET	(B) INVESTMENT INCOME		(C) OJUSTED I INCOM	E
INVESTMENT INC	COME				37,4	93.		37,493.		37,4	93.
TOTAL TO PART I, LINE 3		37,493.			37,493.		37,493.				
FORM 990-PF		DIV	IDENDS	AND :	INTEREST	FRC	OM SEC	URITIES	STA	TEMENT	2
SOURCE			OSS DUNT	G	PITAL AINS IDENDS		(A) EVENUE R BOOK			(C) ADJUSTI NET INCO	
DIVIDEND INCOM	ME	27	7,180.		0.		27,18	0. 27,18	30.	27,1	80.
TO PART I, LII	NE 4	27	7,180.		0.		27,18	0. 27,18	30.	27,1	80.

FORM 990-PF INCOME AND COST OF GOODS SOLD INCLUDED ON PART I, LINE 10		STATEMENT 3
INCOME		
1. GROSS RECEIPTS	31,561	31,561
4. COST OF GOODS SOLD (LINE 15) 5. GROSS PROFIT (LINE 3 LESS LINE 4)	17	31,544
6. OTHER INCOME		
7. GROSS INCOME (ADD LINES 5 AND 6)		31,544
COST OF GOODS SOLD		
8. INVENTORY AT BEGINNING OF YEAR	17	
12. OTHER COSTS		17
14. INVENTORY AT END OF YEAR		17

FORM 990-PF	OTHER	INCOME	<u> </u>	STATEMENT 4
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
ROYALTY INCOME VET CLINIC ADOPTION MISCELLANEOUS	_	10,235. 278,084. 47,518. 3,132.	10,235. 0. 0. 0.	10,235. 278,084. 47,518. 3,132.
BOARDING INCOME GROSS INCOME FROM SPECIAL FUNDRAISING EVENTS		3,058. 32,652.	0.	3,058.
TOTAL TO FORM 990-PF, PART I	, LINE 11 =	374,679.	10,235.	374,679.
FORM 990-PF	LEGA	L FEES	S	STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	14,894	. 0	. 13.	14,881.
TO FM 990-PF, PG 1, LN 16A	14,894	. 0	. 13.	14,881.
FORM 990-PF	ACCOUNT	ING FEES	2	STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	15,875	. 0	. 14.	15,861.
TO FORM 990-PF, PG 1, LN 16B	15,875	. 0	. 14.	15,861.

FORM 990-PF	OTHER PROFES	SIONAL FEES	S7	PATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
GENERAL PROFESSIONAL SERVICES STRATEGIC PLANNING INVESTMENT FEES PUBLIC RELATIONS TO FORM 990-PF, PG 1, LN 16C	12,804. 1,506. 28,318. 53,346.		11. 1. 28,318. 46. 28,376.	12,793. 1,505. 0. 53,300.
FORM 990-PF	TAX	ES	SI	PATEMENT 8
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EXCISE TAX LICENSE & PERMITS REAL ESTATE	410. 2,252. 5,151.	0.	0. 1,025. 0.	0. 1,227. 5,151.
TO FORM 990-PF, PG 1, LN 18	7,813.	0.	1,025.	6,378.
FORM 990-PF	OTHER E	XPENSES	Si	PATEMENT 9
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ADVERTISING FOOD - ANIMALS AUTO EXPENSES BANK CHARGES & FEES COMPUTER EXPENSES DUES & SUBSCRIPTIONS INSURANCE INTEREST JANITORIAL/CLEANING MISCELLANEOUS OFFICE EXPENSE REFUSE REMOVAL REPAIRS & MAINTENANCE SMALL TOOLS & EQUIPMENT	32,326. 18,680. 11,493. 6,289. 37,217. 12,281. 66,069. 3,844. 13,691. 24,200. 3,042. 3,340. 20,351. 1,856.	0. 0. 0. 0.	197. 263. 57. 13. 6,327. 468. 14,701. 0. 2,390. 5,835. 954. 556. 512. 396.	32,129. 18,417. 11,436. 6,276. 30,890. 11,813. 51,368. 3,844. 11,301. 18,365. 2,088. 2,784. 19,839. 1,460.

ANIMAL CARE SANCTUARY					22-1	.83763	35
SUPPLIES TELECOMMUNICATIONS TRAINING UTILITIES VETERINARY SERVICES	2,198 12,109 2,053 70,873	9. 2. 2.	0. 0. 0. 0.	62 2,62 6,55	0.	1,574 9,486 2,052 54,316 292	5. 2.
VETERINARY SUPPLIES AND MEDICATION SPECIAL EVENT COSTS AMORTIZATION	83,14! 33,688 1,80	3.	0. 0. 0.	59,06 33,68 1,80	88.		1. ).
TO FORM 990-PF, PG 1, LN 23	460,830	5. ====================================	0. 137,0		22. 323,814.		
FORM 990-PF	CORPORA	ATE STOCK			STATEME	ENT 1	L 0
DESCRIPTION			воок	VALUE	FAIR MA		
EQUITIES			13,867.		13,867.		
TOTAL TO FORM 990-PF, PART II, LINE 10B				13,867.	13,867.		
FORM 990-PF	CORPORA	ATE BONDS			STATEME	ENT 1	<u>=</u> l1
DESCRIPTION			воок	VALUE	FAIR MA		
CORPORATE/GOVERNMENT BONDS		-	524,228.		524,228.		
TOTAL TO FORM 990-PF, PART II, LINE 10C		- C	524,228.		524,228.		- }. =
FORM 990-PF OTHER INVESTMENT		NVESTMENTS			STATEME	ENT 1	<u></u> L 2
DESCRIPTION	7	/ALUATION METHOD	воок	VALUE	FAIR MA		_ <b>_</b>
MUTUAL FUNDS	<u>-</u>	FMV	1,	072,561.	1,07	2,561	
BENEFICIAL INTEREST IN PERPETUTUST	JAL	FMV	1,	644,824.	1,64	4,824	<b>!</b> .
TOTAL TO FORM 990-PF, PART II,	, LINE 13	-	2,	717,385.	2,71	7,385	<u> </u>

FORM 990-PF DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 13

	COST OR	ACCUMULATED	
DESCRIPTION	OTHER BASIS	DEPRECIATION	BOOK VALUE
BUILDING	492,253.	492,251.	2.
CAT ROOM	10,822.	10,409.	413.
BUILDING	11,969.	11,228.	741.
CONCRETE	1,025.	961.	64.
GRAVEL	557.	523.	34.
FLOORING	1,299.	1,218.	81.
BLDG - OPER ROOM	16,527.	15,307.	1,220.
PAVING	5,290.	4,760.	530.
BLDG	2,285.	2,105.	180.
BLDG	4,700.	4,330.	370.
BARN	595.	591.	4.
DOORS & FLOORS	975.	965.	10.
BLDG - SUPPLIES	978.	947.	31.
SAND & GRATING KENNEL	5,562.	5,357.	205.
LINOLEUM	2,800.	2,682.	118.
ADDITION	69,096.	65,807.	3,289.
HOSPITAL ADDITION	23,000.	21,113.	1,887.
IMPROVEMENTS	5,950.	5,950.	0.
IMPROVEMENTS	981.	492.	489.
WINDOWS	305.	305.	0.
ROOF	9,500.	4,528.	4,972.
IMPROVEMENTS	855.	855.	0.
ROAD	46,062.	46,062.	0.
IMPROVEMENTS	70,332.	32,009.	38,323.
MOBILE HOME	19,935.	12,747.	7,188.
PARKING LOT	4,700.	4,700.	0.
DOORS	1,555.	688.	867.
FLOORING	2,300.	998.	1,302.
KENNEL BUILDING	185,775.	73,535.	112,240.
BUILDINGS	8,491.	3,394.	5,097.
TRAILER DOORS	635.	243.	392.
BUILDINGS - MOLDINGS	4,680.	1,870.	2,810.
BUIDLING	3,648.	1,443.	2,205.
CEMENT RUNS	2,647.	1,047.	1,600.
CEMENT RUNS	1,000.	394.	606.
BUIDLING - NEW	35,000.	14,582.	20,418.
BULDING - NEW	25,000.	10,310.	14,690.
BULDING - NEW	20,000.	8,206.	11,794.
BULDING - NEW	28,880.	11,788.	17,092.
BUILDING ACCESSORIES	1,977.	812.	1,165.
HEATING SYSTEMS	20,160.	15,288.	4,872.
FURNACE	3,270.	2,468.	802.
ELECTRIC UPGRADE	2,740.	1,627.	1,113.
SIDING	24,618.	17,951.	6,667.
TRAILER	13,807.	4,868.	8,939.
	,,	_,	-,
BUILDING IMPROVEMENTS	48,953.	17,886.	31,067.

ANIMAL CARE SANCTUARY			22-103/033
WELL PUMP	2,554.	823.	1,731.
WATER LINE	4,453.	1,493.	2,960.
KENNEL ROOF	15,609.	5,236.	10,373.
DRIVEWAY	57,550.	49,238.	8,312.
2005 ASTRO 14X72 TRAILER	28,870.	9,191.	19,679.
PORCH	1,747.	557.	1,190.
HEATER	5,724.	4,771.	953.
HEATERS	9,534.	7,840.	1,694.
ROOFING	39,750.	11,805.	27,945.
SHED	2,412.	758.	1,654.
WELL PUMP	3,974.	1,223.	2,751.
FENCE	630.	497.	133.
WATER TANK	7,145.	7,145.	0.
WATER TANK	2,991.	2,991.	0.
WASHER	828.	828.	0.
DRYER	420.	420.	0.
DRYER	365.	365.	0.
BULDING IMPROVEMENTS	36,313.	10,475.	25,838.
FENCE	5,382.	5,382.	0.
TOOLS	2,500.	2,500.	0.
INCINERATOR	2,678.	2,678.	0.
TRAILER SKIRTING	953.	953.	0.
BUILDING - 30X12	4,602.	1,219.	3,383.
BUILDING - 8X10	1,179.	312.	867.
DRIVEWAY	11,340.	11,340.	0.
	500.	500.	0.
CHAIR			
TWO WASHERS	735.	735.	0.
BENCHES	1,417.	1,417.	0.
HUMIDIFIER	1,193.	1,193.	0.
WASHER	350.	350.	0.
DRYER	360.	360.	0.
FLOOR CLEANER	1,012.	1,012.	0.
CHAIR	440.	440.	0.
SECURITY SYSTEM	6,792.	6,792.	0.
INCINERATOR	37,900.	35,689.	2,211.
DISHWASHER	300.	300.	0.
CATHOUSE FLOOR	8,470.	2,189.	6,281.
SHOWER	400.	400.	0.
ROOF CAT BUILDING	2,780.	688.	2,092.
FLOOR WORK SPECIALS ROOM	4,200.	1,960.	2,240.
LAND	126,368.	0.	126,368.
PET DOORS	41,427.	36,241.	5,186.
BUILDING IMPROVEMENTS	34,210.	7,163.	27,047.
BUILDING IMPROVEMENTS	7,501.	1,474.	6,027.
CARPET FLOORING	4,639.	4,639.	0.
COMPUTER EQUIPMENT	2,707.	2,707.	0.
COMPUTER EQUIPMENT	1,354.	1,354.	0.
SIGN	1,752.	877.	875.
DRYERS - 2	1,161.	1,161.	0.
KENNEL EQUIPMENT	5,092.	5,092.	0.
2008 SILVER SUV	19,639.	19,639.	0.
CARPETING	1,300.	1,040.	260.
BUILDING IMPROVEMENTS	147,322.	63,838.	83,484.
EQUIPMENT	1,198.	1,112.	86.

ANTHAL CARE SANCTOART			22-103/033
ENGRAVER	6,237.	5,643.	594.
COMPUTER EQUIPMENT	2,283.	2,283.	0.
APPLIANCES	2,762.	2,566.	196.
CARPET	5,411.	5,411.	0.
FILE CABINETS	87.	72.	15.
FURNACE	19,372.	7,640.	11,732.
OFFICE EQUIPMENT	48.	39.	9.
CANON MF595 PRINTER	843.	843.	0.
DELL PC	349.	349.	0.
	74.	57 <b>.</b>	17.
WALKIE TALKIES		21,378.	
FURNITURE & EQUIPMENT CATTERY & WELL	27,207 <b>.</b>	•	5,829.
	17,300.	1,923.	15,377.
HUSQVARNA YTH26V54 LAWN	2 127	2 127	0
TRACTOR	2,137.	2,137.	0.
LAPTOPS	1,487.	1,487.	0.
DONATED CARGO VAN AND GRAPHICS	11,500.	8,050.	3,450.
WELLSBORO LAND	71,030.	0.	71,030.
COMMERCIAL WASHER	3,600.	1,713.	1,887.
COMMERICAL DRYER	8,000.	3,810.	4,190.
SURGICAL LIGHT	3,371.	2,247.	1,124.
PARTITION WALLS & INTAKE	4 550	250	4 400
DRAINAGE	4,550.	370.	4,180.
PORTABLE XRAY MACHINE	18,400.	14,413.	3,987.
CATTERY RENOVATION	4,800.	441.	4,359.
WELLSBORO BUILDING	166,498.	16,720.	149,778.
CATTERY PHONE SYSTEM	8,711.	5,516.	3,195.
CAT COMMUNAL	2,926.	1,491.	1,435.
WORK TABLE	2,776.	1,619.	1,157.
STORAGE CABINETS - ISOLATION			
ROOM	1,126.	656.	470.
1992 FORD VAN	1,250.	521.	729.
FREESTANDING MEDICAL CABINET -			
ISOLATION ROOM	6,973.	3,720.	3,253.
AIR CONDITIONER - CATTERY	16,315.	8,429.	7,886.
QUICKBOOKS PREMIER	919.	506.	413.
OKI DATA COLOR LASER PRINTER	1,299.	607.	692.
COMPU-GEN INTEL CORE SERIES			
WORKSTATION - WELLSBORO	769.	321.	448.
COMPU-GEN INTEL CORE SERIES			
WORKSTATION - EAST SMITHFIELD	769.	321.	448.
UNIMAX WASHER - CATTERY	1,105.	461.	644.
WATERLINES - EAST SMITHFIELD	35,491.	4,929.	30,562.
ROOF - EAST SMITHFIELD	3,800.	855.	2,945.
TWO DECKS - EAST SMITHFIELD	18,968.	1,175.	17,793.
ENTRY WAVE	8,000.	1,000.	7,000.
CATTERY	38,708.	1,324.	37,384.
FELINE FLATS	10,051.	279.	9,772.
FURNACE - WB	2,200.	281.	1,919.
BANKED CAGES	6,466.	1,463.	5,003.
SHARP COPIER	4,483.	1,345.	3,138.
RACHELLE LAPTOP	829.	249.	580.
KAREN COMPUTER	829.	221.	608.
CANON	934.	249.	685.
PHONE SYSTEM	9,419.	2,041.	7,378.

ANIMAL CARE SAN	ICTUARY					2	2-1837	635
FELINE FLATS CLINIC LIGHTS AIR EXCHANGE IN C COMPUTER JULIES C DONATED TRUCK HUNT ENGINEERS		2, 62, 5,	325. 525. 000. 888. 500. 696.		228. 112. 2,067. 163. 92.			13. 933. 725. 108.
TOTAL TO FM 990-F	F, PART II, LN 1	2,674,	507.	1,42	0,392.	1	,254,1	15.
FORM 990-PF	INTERES	ST AND PENAL	TIES			STAT	EMENT	14
TAX DUE FROM FOR UNDERPAYMENT FLATE PAYMENT FLATE PAYMENT FOTAL AMOUNT DUE	ENALTY NTEREST ENALTY	<b>7</b> I						91. 2. 28. 33.
FORM 990-PF	LAT	TE PAYMENT F	ENALTY			STAT	EMENT	15
DESCRIPTION	DATE	E AMOUN	T	BALANC	E M	ONTHS	PENAL	ΊΤΥ
TAX DUE DATE FILED	05/15/ 11/15/	•	091.		091. 091.	6		33.
TOTAL LATE PAYMEN	T PENALTY							33.
FORM 990-PF	LAT	TE PAYMENT I	NTERES	T		STAT	EMENT	16
DESCRIPTION	DATE	AMOUNT	BALA	NCE	RATE	DAYS	INTER	REST
TAX DUE DATE FILED	05/15/18 11/15/18	1,091.		1,091. 1,119.	.0500	184		28.
TOTAL LATE PAYMEN	IM TNIMEDECM							28.

STATEMENT

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FORM 990-PF

PART VIII - LIST OF OFFICERS, DIRECTORS

TRUSTEES AND FOUNDATION MANAGERS

NAME AND ADDRESS		TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
RICHARD (DICK) MACIN C/O ORGANIZATION PO EAST SMITHFIELD, PA	BOX A	CHAIRPERSON 6.00	0.	0.	0.
CINDY OPEKA C/O ORGANIZATION PO EAST SMITHFIELD, PA		SECRETARY 2.00	0.	0.	0.
ROBERT BARNES C/O ORGANIZATION PO EAST SMITHFIELD, PA		DIRECTOR 4.00	0.	0.	0.
MARJORIE ULKINS C/O ORGANIZATION PO EAST SMITHFIELD, PA		DIRECTOR 1.00	0.	0.	0.
DAVE BURCH C/O ORGANIZATION PO EAST SMITHFIELD, PA		VICE CHAIRPERSO	О. 0	0.	0.
JOAN SMITH-REESE C/O ORGANIZATION PO EAST SMITHFIELD, PA		EXECUTIVE DIREC	CTOR 69,473.	0.	0.
RUTH BARBER C/O ORGANIZATION PO EAST SMITHFIELD, PA		DIRECTOR (FORME	ER)	0.	0.
SARAH DUNN C/O ORGANIZATION PO EAST SMITHFIELD, PA		TREASURER (FORM	MER)	0.	0.
JACK WHEELER C/O ORGANIZATION PO EAST SMITHFIELD, PA		DIRECTOR (FORMS	ER)	0.	0.
MICHELE LICATA C/O ORGANIZATION PO EAST SMITHFIELD, PA		DIRECTOR (FORMS	ER)	0.	0.
STAN NICHOLS C/O ORGANIZATION PO EAST SMITHFIELD, PA		DIRECTOR (FORMS	ER)	0.	0.

ANIMAL CARE SANCTUARY			22-1837	635
THOMAS SAVERI C/O ORGANIZATION PO BOX A EAST SMITHFIELD, PA 18817	DIRECTOR (FORMER 4.00	0.	0.	0.
SHARON WALSH C/O ORGANIZATION PO BOX A EAST SMITHFIELD, PA 18817	TREASURER 4.00	0.	0.	0.
MARY O'MALLEY-TRUMBLE C/O ORGANIZATION PO BOX A EAST SMITHFIELD, PA 18817	DIRECTOR 2.00	0.	0.	0.
ELLEN FELDMAN C/O ORGANIZATION PO BOX A EAST SMITHFIELD, PA 18817	DIRECTOR 10.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAG	GE 6, PART VIII	69,473.	0.	0.
FORM 990-PF SUMMARY OF	DIRECT CHARITABLE ACT	IVITIES	STATEMENT	18

## ACTIVITY ONE

CATTERY - RESIDENT ACS CATS ARE PROVIDED WITH MULTIPLE TYPES OF ENRICHMENT DESIGNED TO STIMULATE THE PERSONALITY AND DRIVE OF EACH CAT. COMMUNAL LIVING SPACES PROVIDE THE CATS WITH THE COMPANIONSHIP AND STIMULATION OF OTHER CATS, ENABLING THE OPPORTUNITY FOR PLAY, INTERACTION, MUTUAL GROOMING, AND OTHER NORMAL CAT BEHAVIORS. THESE ENVIRONMENTS ARE ALSO FURNISHED WITH SHELVES, TUNNELS, BOOKSHELVES, CHAIRS, AND OTHER ITEMS DESIGNED TO ALLOW CATS TO CLIMB, HIDE, AND SLEEP AS THEY WOULD IN A HOUSEHOLD ENVIRONMENT. THEY ALSO HAVE ACCESS DURING MORNING HOURS TO A "CATIO" THAT IS OPEN SEASONALLY; A SCREENED-IN PORCH PROVIDES ACCESS TO FRESH AIR, BIRD- AND BUG-WATCHING, AND NEW AND INTERESTING SMELLS. ACS PROVIDES TOYS, SCRATCHING POSTS AND CAT TOWERS FOR ADDITIONAL ENRICHMENT, AND SEVERAL TIMES EACH MONTH, CATNIP IS DISTRIBUTED FOR THEIR ENJOYMENT. WE ALSO DISPENSE TREATS ONCE WEEKLY IN A SCATTERING METHOD INTENDED TO STIMULATE THE CATS' HUNTING INSTINCTS.

TO FORM 990-PF, PART IX-A, LINE 1 454,274.

FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES

STATEMENT

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## ACTIVITY TWO

KENNEL - DOGS IN OUR CARE RECEIVE DAILY ENRICHMENT ACTIVITIES TO IMPROVE THEIR QUALITY OF LIFE. ACS STAFF AND VOLUNTEERS PROVIDE TOYS, TREATS, EXERCISE AND LOVE TO MAKE THE TEMPORARY STAY AT THE SHELTER LESS STRESSFUL. ON A DAILY BASIS ACS PROVIDES DOGS WITH 20 MINUTES OF LEASH WALKING, OFF LEASH YARD PLAY OR PLAY GROUP INTERACTION, DAILY SCENTS, BLANKETS & TOYS, LIGHTS OUT AND MUSIC THERAPY EITHER LIVE OR VIA CLASSICAL MUSIC PLAYED OVER THE STEREO SYSTEM, TREAT DISPENSING TOYS, PUZZLES, OR KONGS, & DAILY POSITIVE REINFORCEMENT TRAINING.

**EXPENSES** 

TO FORM 990-PF, PART IX-A, LINE 2

429,659.

FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES

STATEMENT

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## ACTIVITY THREE

VETERINARY CARE - ANIMAL CARE SANCTUARY IS ONE OF THE FEW SHELTERS IN THE NATION THAT HAS ITS OWN VETERINARY STAFF. IT HAS ADOPTED THE STANDARDS OF THE AMERICAN ASSOCIATION OF SHELTER VETERINARIANS AND PARTICIPATES IN MADDIE'S SHELTER MEDICINE PROGRAM AT CORNELL'S COLLEGE OF VETERINARY MEDICINE. ALL ANIMALS AT ACS ARE EVALUATED BY THE VETERINARY TEAM UPON INTAKE AND A TREATMENT PLAN IS ESTABLISHED. THE VETERINARIAN PERFORMS WEEKLY ROUNDS AND ADJUSTS TREATMENT PLANS AS NECESSARY. PRIOR TO ADOPTION, A PRE-ADOPTION PHYSICAL IS COMPLETED AND, IF NECESSARY, THE VETERINARIAN MEETS WITH THE ADOPTER TO EXPLAIN ANY OUTSTANDING MEDICAL CONDITION, HOW TO CARE FOR IT, SIGNS AND SYMPTOMS OF AILMENTS, AND ANY REQUIRED FOLLOW UP. HAVING RESIDENT VETS ENSURES THAT ALL ACS ANIMALS ARE VACCINATED, CHECKED FOR PARASITES AND DISEASE, SPAYED OR NEUTERED, AND MICROCHIPPED FOR IDENTIFICATION SO THAT THEY ARE HEALTHY AND READY FOR ADOPTION.

**EXPENSES** 

TO FORM 990-PF, PART IX-A, LINE 3

333,484.

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FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES

STATEMENT

#### ACTIVITY FOUR

ADOPTIONS - ACS HAS A VIGOROUS ADOPTION PROGRAM WITH A CONSISTENT RECORD OF ADOPTING 90% OF THE ANIMALS IT TAKES IN ON AN ANNUAL BASIS. ACS CONSIDERS THE NEEDS AND LIFESTYLES OF BOTH THE ADOPTER AND THE PET, TAKING CARE TO MATCH THE ANIMAL WITH A COMPATIBLE FAMILY AND COUNSELLING THE ADOPTIVE FAMILY ON NEEDED CARE AND ANY MEDICATIONS. ADOPTERS SIGN AN AGREEMENT STATING THAT IF THEY DO NOT KEEP THE ANIMAL FOR ANY REASON, THEY WILL RETURN IT TO ACS.

ANIMALS THAT ARE NOT ADOPTED REMAIN AT THE SANCTUARY WHERE QUALITY OF LIFE TAKES PRECEDENCE. IN ADDITION TO THE ONSITE ADOPTION PROGRAM, ACS BEGAN A PARTNERSHIP WITH A PETSMART STORE IN A NEIGHBORING COUNTY IN 2012. IN THE LAST QUARTER OF 2016 WE ADDED TWO ADDITIONAL PETSMART SITES TO OUR PARTNERS LIST. THE PETSMART PARTNERSHIP RESULTED IN 67 ADDITIONAL CAT ADOPTIONS IN 2016. ACS' ADOPTION PROGRAM EXTENDS TO OTHER REGIONS WITH 50% OF OUR ADOPTIONS BEING IN PA AND THE OTHER 50% BEING IN NEIGHBORING NY, NJ AND OTHER STATES.

**EXPENSES** 

TO FORM 990-PF, PART IX-A, LINE 4

64,380.