Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.

► Information about Form 990 and its instructions is at www irs gov/form990.

Open to Public

A I	or the	2013 calendar year, or tax year beginning and e	ending		
B	Check if applicable	C Name of organization		D Employer identific	ation number
	Addres	CARVER SCOTT COUNTY HUMANE SOCIETY			
	Name change	Doing Business As		41-16	538325
Initial return Term		,	Room/suite	E Telephone number) 202-2424
	⊒ated ⊒Amenc ⊒return	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	176,136.
	Application pending	CHASKA, MN 33310		H(a) Is this a group re	
	pendin	F Name and address of principal officer:			? Yes X No
_		SAME AS C ABOVE	1 1507	H(b) Are all subordinates in	
		empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or e: ► WWW.CARVERSCOTTHS.ORG	r 527		list. (see instructions)
		e: ► WWW. CARVERSCOTINS. ORG organization: X Corporation Trust Association Other ►	I Voor	H(c) Group exemption	State of legal domicile: MN
		Summary	L Year C	oriorination. 1967 M	State of legal doffliche. PIIN
_		Briefly describe the organization's mission or most significant activities: TO PR	OVIDE	SERVICES FO	OR LINMANTED
Governance		ANIMALS TO BECOME DESIRED PETS	CVIDE	BERVICES IX	ok okwawie
ern	2	Check this box $lacktriangle$ if the organization discontinued its operations or dispose	ed of more	than 25% of its net as	
ŏ		Number of voting members of the governing body (Part VI, line 1a)			10
<u>«</u>		Number of independent voting members of the governing body (Part VI, line 1b) $ \dots $			10
ies		Total number of individuals employed in calendar year 2013 (Part V, line 2a)			1
Activities &		Total number of volunteers (estimate if necessary)			75
Act		Total unrelated business revenue from Part VIII, column (C), line 12			0.
	b	Net unrelated business taxable income from Form 990-T, line 34	<u></u>		0.
ine		0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Prior Year 64,992.	Current Year
	1	Contributions and grants (Part VIII, line 1h)		71,207.	79,750. 64,612.
Revenue		Program service revenue (Part VIII, line 2g)		7,658.	4,875.
Be	1	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		28,039.	18,276.
	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		171,896.	167,513.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
G		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	24,819.
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
per	1		0.	-	-
ш	1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		150,908.	112,380.
	1	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		150,908.	137,199.
	19	Revenue less expenses. Subtract line 18 from line 12		20,988.	30,314.
Net Assets or Fund Balances			Be	ginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		932,757.	963,071.
t As	21	Total liabilities (Part X, line 26)		0.	0.
<u></u>	22	Net assets or fund balances. Subtract line 21 from line 20		932,757.	963,071.
	art II	Signature Block			
		tties of perjury, I declare that I have examined this return, including accompanying schedules			knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which	ch preparer	has any knowledge.	
		Signature of officer		Date	
Sig		DAVID ADAMS, TREASURER		Date	
Her	e	Type or print name and title			
			10	ate Check	PTIN
Paid	,	Print/Type preparer's name Preparer's signature DRAZAN, HENKE & ASSOCIATE		7/18/14 of self-employer	_
	parer	Firm's name DRAZAN, HENKE & ASSOCIATES, PLLC		Firm's EIN	20-0188549
	Only	Firm's address 544 BAVARIA LANE	•	THIII 3 LIN	20 0100347
550	Jy	CHASKA, MN 55318		Phone no 95	2-448-4220
May	the IF	RS discuss this return with the preparer shown above? (see instructions)		1. 110110 110.5 5 2	X Yes No

Га	Check if Schoolule O centains a reasonable or note to any line in this Part III
1	Check if Schedule O contains a response or note to any line in this Part III
•	TO PROVIDE SERVICES FOR UNWANTED ANIMALS TO BECOME DESIRED PETS
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 99,260 • including grants of \$) (Revenue \$
	PROVIDED BOARDING AND VETERINARY CARE FOR ANIMALS PRIOR TO BEING PLACED
	FOR ADOPTION
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
40	(Code:) (Expenses \$
4c	(Code:) (Expenses \$
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ▶ 99,260.

Form 990 (2013) CARVER SCOTT 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	х	
2	If "Yes," complete Schedule A	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		- 22	
3	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
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 Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	х	
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	X	
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? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	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)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	100		Х
h		12a		21
Ь	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		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	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		Х
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		Х
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? If "Yes," complete Schedule F, Parts III and IV	16		Х
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? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form 990 (2013) CARVER SCOTT COUNT Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
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		Х
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		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	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) and 501(c)(4) 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		Х
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		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
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		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	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?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
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? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	

Form 990 (2013) CARVER SCOTT COUNTY HUMANE SOCIAL 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							
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable							
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming							
	(gambling) winnings to prize winners?	1c	X					
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							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)							
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		X				
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		<u> </u>				
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		Х				
b	b If "Yes," enter the name of the foreign country: ►							
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.								
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?								
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х				
	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	0-		Х				
L	any contributions that were not tax deductible as charitable contributions?	6a						
D	b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?							
7	Were not tax deductible? Organizations that may receive deductible contributions under section 170(c).	6b						
a 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?								
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b		Х				
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required							
	to file Form 8282?	7с		Х				
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						
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?								
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 and section 509(a)(3) supporting organizations. Did the supporting							
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8						
9	Sponsoring organizations maintaining donor advised funds.							
	Did the organization make any taxable distributions under section 4966?	9a		-				
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b						
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 10a							
a 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:							
	Gross income from members or shareholders							
	Gross income from other sources (Do not net amounts due or paid to other sources 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						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
а	Is the organization licensed to issue qualified health plans in more than one state?	13a						
	Note. See the instructions for additional information the organization must report on Schedule O.							
b	Enter the amount of reserves the organization is required to maintain by the states in which the							
	organization is licensed to issue qualified health plans							
С	Enter the amount of reserves on hand							
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х				
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		(0010)				

Pai	tVI Governance, Management, and Disclosure For each "Yes" response to lines 2 the to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule Co			"No" r	espon	se
						v
200	Check if Schedule O contains a response or note to any line in this Part VI					X
sec	tion A. Governing Body and Management				V	
4.		۔ ا	10		Yes	No
та	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing	1a	10			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.					
L		1b	10			
	Enter the number of voting members included in line 1a, above, who are independent					
2		ıp witi i	any other	2	Х	
3	officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the	o diro	ct cupon/icion		- 21	
3	of officers, directors, or trustees, or key employees to a management company or other person?		•	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form			4		X
5	Did the organization become aware during the year of a significant diversion of the organization's as			5		X
6	Did the organization have members or stockholders?			6		X
	Did the organization have members, stockholders, or other persons who had the power to elect or a			Ů		
<i>,</i> u	more members of the governing body?			7a		Х
h	Are any governance decisions of the organization reserved to (or subject to approval by) members,					
	persons other than the governing body?			7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the ye					
а	The governing body?	-	-	8a	Х	
	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real					
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	evenu	e Code.)			
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such of	hapter	s, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes? $$			10b 11a	Х	
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?						
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				77	
	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris			12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "You School Jo Deput the way done		escribe	40-	х	
42	in Schedule O how this was done			12c	Λ	X
13 14	Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?			13 14		X
15	Did the process for determining compensation of the following persons include a review and approve			14		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		aopondont			
а	The organization's CEO, Executive Director, or top management official			15a		Х
	Other officers or key employees of the organization			15b		X
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment v	vith a			
	taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organic	ınizatic	n's			
	exempt status with respect to such arrangements?			16b		
	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed MN					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	ı (Sect	tion 501(c)(3)s only) a	availab	ie	
	for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website Upon request Other (explain	in Co	hedule (1)			
10	LX Own website Another's website LX Upon request Other (explain Describe in Schedule O whether (and if so, how), the organization made its governing documents, c			d finar	oial	
19	statements available to the public during the tax year.	OHIHUL	or interest policy, an	u iiilal	icial	
20	State the name, physical address, and telephone number of the person who possesses the books a	nd rec	ords of the organiza	tion: 🕨	•	
	DAVID ADAMS - (612) 202-2424					
	1750 CTY RD 92, MINNETRISTA, MN 55359					

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)	(B)			(0	C)			ted any current officer, o	(E)	(F)
Name and Title	Average	(do		Pos		1 than	one	Reportable	Reportable	Estimated
	hours per	box, unless perso officer and a direct				is bot	h an	compensation	compensation	amount of
	week			14 4 4	I	ootoi/ii uS		from	from related	other
	hours for	directo				_		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	ee or	stee			nsate		(W-2/1099-MISC)	(** 2, 1000 *********************************	organization
	(list any hours for related organizations below line)	trust	Institutional trustee		oyee	Highest compensated employee		,		and related
	below	vidua	tution	Je.	Key employee	lest c	ner			organizations
	line)	lhdi	Insti	Officer	Key	High	Бог			
(1) MARJORY ADAMS	10.00								_	
CAT & EXOTICS		Х						0.	0.	0
(2) MARGE AMBERSON	10.00								_	_
DIRECTOR		Х						0.	0.	0
(3) ABBY GREGORY	5.00								_	_
SECRETARY / FUND RAISING CHAIR		Х		Х				0.	0.	0
(4) ANNE KEALING	5.00								_	_
DIRECTOR		Х						0.	0.	0
(5) JULIE ODENBACH	5.00								_	_
VOLUNTEER COORDINATOR		Х						0.	0.	0
(6) SABINE CASAZZA	5.00								_	
DIRECTOR		Х						0.	0.	0
(7) CELAYNE JONES	5.00								_	_
MARKETING CHAIR		Х						0.	0.	0
(8) DAVID ADAMS	5.00								_	_
TREASURER				Х				0.	0.	0
(9) LARRY FASCHING	5.00									
VICE PRESIDENT				Х				0.	0.	0
(10) JENNIFER WILLIAMS	10.00									
PRESIDENT				Х				0.	0.	0
					_					
					_					
					_					
		l	1	1	1	1	l	1		

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
(A) Name and title	(B) Average hours per week (list any hours for related	or director op xoq op)	not c , unle cer ar	Pos heck ss pe	C) Position eck more than one s person is both an d a director/trustee)			(D) Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC		am comp	(F) timated tount of other oensate om the	of tion
	organizations below line)	Individual trustee	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W 27 1000 MILEO)		"		l relate	ed
1b Sub-total							<u> </u>	0.		0.			0.
c Total from continuation sheets to Part V d Total (add lines 1b and 1c)							> 20 r	0. 0.	000 of reportab	0.			0.
compensation from the organization	iot iii iii ii ca to ti		11310				10 1	ecoved more than ¢roc	7,000 of reportab			Yes	No
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s	such individual										3		Х
 4 For any individual listed on line 1a, is the su and related organizations greater than \$15 5 Did any person listed on line 1a receive or an arrest or arrest or an arrest or an arrest or ar	0,000? If "Yes,	" co	mple	ete S	Sche	edule	e J t	for such individual			4		X
rendered to the organization? If "Yes," com Section B. Independent Contractors											5		Х
Complete this table for your five highest countries the organization. Report compensation for	=	-						n the organization's tax		npens			
(A) Name and business	address	NO	ONI	3				(B) Description of s	services	C	(C Comper		1
Total number of independent contractors (including but n	ot lii	mite	d to		_	stec	d above) who received n	nore than				
\$100,000 of compensation from the organi	zation >				(0					Eorm (200 (0	040

		` /		COUNTY H	UMANE SOCI	ETY	41-1638	325 Page 9
Pa	rt VI				=			
		Check if Schedule O contain	ins a response	or note to any lir	e in this Part VIII (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Related organizations	1b 1c 1d 1d 1e 5, and 1f 1f 1s 1f 1s	79,750.	79,750.			
		PET ANIMAL ADOPT		Business Code	61,550.	61,550.		
Program Service Revenue								
le e	b		R DONAT		2,826.	2,826.		
S III	С				200.	200.		
eve	d	MISCELLANEOUS			36.	36.		
<u></u>	е		,					
Ŗ	f		110					
					64,612.			
	9	Total. Add lines 2a-2f			04,012.			
	3 4 5	Investment income (including dother similar amounts)	exempt bond p	proceeds	4,875.	4,875.		
		·	(i) Real	(ii) Personal				
	6 0	Gross rents	(i) Hour	(ii) i ciocitai				
	6 a							
	b	Less: rental expenses						
	С	Rental income or (loss)						
	d	Net rental income or (loss) <u>.</u>		<u>,</u>				
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	•					
	b	Less: cost or other basis and sales expenses						
	С	Gain or (loss)						
	d	Net gain or (loss)						
_o	8 a	Gross income from fundraising	events (not					
Other Revenue		including \$	•					
š		contributions reported on line 1						
<u>بة</u>		•	,	26,899.				
Je		Part IV, line 18		2 6 2 2				
₹I		Less: direct expenses		0,043.	10 076			10 000
	С	Net income or (loss) from fundr	aising events	<u></u>	18,276.			18,276.
	9 a	Gross income from gaming acti	ivities. See					
		Part IV, line 19						
	b	Less: direct expenses	b					
		Net income or (loss) from gamir		>				
	10 a	Gross sales of inventory, less re	eturns					
		and allowances						
	h-	Less: cost of goods sold						
ļ	С	Net income or (loss) from sales						
ļ		Miscellaneous Revenue		Business Code				
	11 a							
	b							

0.

d All other revenue

Total revenue. See instructions.

e Total. Add lines 11a-11d

167,513.

69,487.

Form 990 (2013) CARVER SCOTT Part IX | Statement of Functional Expenses

Secti	ion 501(c)(3) and 501(c)(4) organizations must com				
	Check if Schedule O contains a respor	nse or note to any line in (A)	this Part IX(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	20,129.	14,090.	6,039.	
6	trustees, and key employees Compensation not included above, to disqualified	20,125.	11,000	0,033.	
Ü	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	3,100.	3,100.		
8	Pension plan accruals and contributions (include	- ,	-,		
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	1,590.	1,113.	477.	
11	Fees for services (non-employees):				
а	Management	12,720.		12,720.	
b	Legal				
С	Accounting	1,950.		1,950.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	•				
	column (A) amount, list line 11g expenses on Sch O.)	1 215	1 21 7		
12	Advertising and promotion	1,317.	1,317.	2 422	
13	Office expenses	2,433. 280.	280.	2,433.	
14	Information technology	200.	200.		
15	Royalties	8,512.		8,512.	
16 17	Occupancy	0,512.		0,312.	
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	269.		269.	
20	Interest				
20 21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
 23	Insurance	3,771.	1,885.	1,886.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	VETERINARY EXPENSES	55,347.	55,347.		
b	ADOPTION PROGRAMS	10,277.	10,277.		
c	PRINTING AND PUBLICATIO	5,400.	5,400.		
d	POSTAGE AND SHIPPING	4,299.	4,299.		
	All other expenses	5,805.	2,152.	3,653.	
25	Total functional expenses. Add lines 1 through 24e	137,199.	99,260.	37,939.	0
26	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 SOP 98-2 (ASC 958-720)				

Form 990 (2013) Part X Balance Sheet

Pai	LA	Balance Sneet					
		Check if Schedule O contains a response or no	te to any line	e in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			21,112.	1	35,000.
	2	Savings and temporary cash investments			256,121.	2	270,092.
	3	Pledges and grants receivable, net			3		
	4	Accounts receivable, net		4			
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compens.					
		Part II of Schedule L				5	
	6	Loans and other receivables from other disqual					
		section 4958(f)(1)), persons described in section	n 4958(c)(3)(l	B), and contributing			
		employers and sponsoring organizations of sec	tion 501(c)(9) voluntary			
S		employees' beneficiary organizations (see instr)		·		6	
Assets	7	Notes and loans receivable, net				7	
ĕ	8	Inventories for sale or use				8	
	9	B				9	
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	401,967.			
	b	Less: accumulated depreciation			401,967.	10c	401,967.
	11	Investments - publicly traded securities		11			
	12	Investments - other securities. See Part IV, line		253,057.	12	255,512.	
	13	Investments - program-related. See Part IV, line			13		
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	500.	15	500.		
	16	Total assets. Add lines 1 through 15 (must equ	932,757.	16	963,071.		
	17	Accounts payable and accrued expenses		17			
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
S	22	Loans and other payables to current and forme	r officers, dir	ectors, trustees,			
Liabilities		key employees, highest compensated employee	es, and disq	ualified persons.			
iabi		Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelate	ed third partie	es		24	
	25	Other liabilities (including federal income tax, pa	ayables to rel	lated third			
		parties, and other liabilities not included on lines	s 17-24). Cor	mplete Part X of			
		Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			0.	26	0.
		Organizations that follow SFAS 117 (ASC 958	B), check he	re ▶ X and			
es		complete lines 27 through 29, and lines 33 ar	nd 34.				
anc	27	Unrestricted net assets			932,757.	27	963,071.
3ak	28	Temporarily restricted net assets				28	
힏	29	Permanently restricted net assets				29	
Ξ		Organizations that do not follow SFAS 117 (A	ASC 958), ch	eck here			
ō		and complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds		30			
Ass	31	Paid-in or capital surplus, or land, building, or ed	quipment fur	nd		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in				32	
Z	33	Total net assets or fund balances			932,757.	33	963,071.
	34	Total liabilities and net assets/fund balances			932,757.	34	963,071.

Form **990** (2013)

Pa	rt 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		7,5	
2	Total expenses (must equal Part IX, column (A), line 25)	2		7,1	
3	Revenue less expenses. Subtract line 2 from line 1	3			14.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	93	2,7	57.
5	Net unrealized gains (losses) on investments	5			
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 in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	96	3,0	71.
Pa	rt 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: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed				
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate				
	consolidated basis, or both:	•			
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si				
	Act and OMB Circular A-133?	Ŭ	За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2013)