2022

Exempt Organization Tax Return

Prepared For:

Animal Friends Alliance 2321 E. Mulberry St. Fort Collins, CO 80524 (970)484-8516

Prepared By:

Cindy McGrorey, CPA, LLC 1913 Catkins Court Fort Collins, CO 80528 Telephone: (970)481-3835 Email: cmcgrorey.cpa@gmail.com

	(990	Return of Organization Exempt From Inco	me ⁻	Гах	OMB No. 1545-0047	,		
Forn	n '	330	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except pri			ons) 2022	_		
Dena	rtmor	nt of the Treasury		Open to Public					
		evenue Service	Go to www.irs.gov/Form990 for instructions and the latest information and t	ation.		Inspection			
<u>A</u>	For	the 2022 calen	dar year, or tax year beginning and ending						
в	Che	ck if applicable:	^c Name of organization Animal Friends Alliance		D Emp	loyer identification number			
	Add	ress change	Doing business as			1969731			
	Nam	ne change	Number and street (or P.O. box if mail is not delivered to street address) Room/suite			phone number			
	Initia	al return	2321 E. Mulberry St.		(970))484-8516			
		return/terminated	City or town, state or province, country, and ZIP or foreign postal code						
Ц			Fort Collins, CO 80524			ss receipts \$ 4 , 926 , 327			
\Box	Appli		F Name and address of principal officer: Kris Cafaro	1		p return for subordinates? Yes 🔀			
			2321 E. Mulberry Street Fort Collins, CO 80524	-		ordinates included? Yes	No		
			X 501(c)(3) 501(c)() (insert no.) 4947(a)(1) or 527	-1		ach a list. See instructions			
JV			savinganimalstoday.org		-	mption number			
		of organization:	Corporation Trust Association Other L Year of formation: 2	2006	I	M State of legal domicile:	<u> </u>		
P		Summa							
	1	•	ibe the organization's mission or most significant activities:						
Governance			e comprehensive companion animal resources,						
nai			community to prevent homelessness and prom			nan-anımal bor	na		
Nel	2		ox if the organization discontinued its operations or disposed of more than 25% of its			-	• •		
	3		oting members of the governing body (Part VI, line 1a)				12		
ې مې	4		dependent voting members of the governing body (Part VI, line 1b)				12		
itie	5		r of individuals employed in calendar year 2022 (Part V, line 2a)				<u>85</u>		
Activities &	6		r of volunteers (estimate if necessary).				<u>50</u>		
∢			ed business revenue from Part VIII, column (C), line 12				<u>).</u>		
		b Net unrelate	d business taxable income from Form 990-T, Part I, line 11		. 7b		<u>).</u>		
				r Year	7 6 4	Current Year			
đ	8				<u>754.</u>	2,979,474			
Revenue	9	-		<u>563,</u>		1,711,430			
eve	10		ncome (Part VIII, column (A), lines 3, 4, and 7d)		706.				
R	11				$\frac{304}{170}$				
	12			5/4,	178.	4,854,991	<u>L.</u>		
	13		similar amounts paid (Part IX, column (A), lines 1-3)						
	14	•	to or for members (Part IX, column (A), line 4)	11	010	0.201.000	_		
es	15			241,	918.	2,391,266	<u>.</u>		
sue			fundraising fees (Part IX, column (A), line 11e)						
Expenses			sing expenses (Part IX, column (D), line 25) 372,599.	117	020	1 270 400			
ш					<u>930.</u>	1,372,402			
	18				<u>848.</u>	3,763,668			
	19	Revenue les		<u>914,</u>		1,091,323	<u>.</u>		
Net Assets or Fund Balances	0	Tatal assists	(Det X line 10)						
ssef Bala	20				<u>747.</u>				
let ⊿	21				<u>083.</u>				
_	22 art)38,	004.	4,129,987	<u>/ .</u>		
			ry, I declare that I have examined this return, including accompanying schedules and statements, an	d to the	boot of n	ny knowledge and belief it is			
			ete. Declaration of preparer (other than officer) is based on all information of which preparer has any			ny kilowiedge and bellel, it is			
	e, co				uye.				
¢;	an	Signature of off	Cer	Date					
п	Here Sarah Swanty, Executive Director Type or print name and title								
_	Paid Print/Type preparer's name Preparer's signature Date Check X if PTIN								
				12000	1 10		51		
			hia B McGrorey Cynthia B McGrorey 05/09,		,	^{employed} <u>P0063915</u> 84-3213527	14		
U	se (ame Cindy McGrorey, CPA, LLC				—		
Mai	the		ddress 1913 Catkins Court Fort Collins, CO 80528			(970)481-3835 XYes 🗌 N			
iviay	uie	INO UISCUSS IN	is return with the preparer shown above? See instructions			X Yes 🛄 N	U		

For Paperwork Reduction Act Notice, see the separate instructions. UYA

Form	990 (2022) Animal Friends Alliance 20-4969731 Page 2
Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III.
1	Briefly describe the organization's mission:
-	The prevention of pet over-population and the sheltering and placement
	of surrendered cats and dogs. See detailed descriptions below.
	or surrendered cats and dogs. See detailed descriptions below.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ? Yes 🗴 No
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
J	
	— — — — — — — — — — — — — — — — — — — —
	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 \$1,712,356. including grants of \$) (Revenue \$)
	Animal Shelter: Animal Friends Alliance provides shelter and adoption
	for cats, kittens, dogs and puppies that have been abandoned or
	surrendered by their previous owner. All animals taken into the
	shelter receive thorough medical care including but not limited
	to: spay/neuter, vaccines and de-worming before going up for
	adoption.
4b	(Code:) (Expenses \$1,447,375. including grants of \$) (Revenue \$)
	Community Pet Resources: This program consists of:
	a. Public Veterinary Clinic which provides subsidized spay/neuter
	procedures for dogs and cats belonging to members of the general
	public and to other animal shelters and rescue organizations. Low-
	cost vaccination clinics are also offered several times per month.
	This program includes the PAL program which provides free services
	for those who qualify.
	b. Community Cat Program traps, spays/neuters and vaccinates feral
	cats and either finds loving homes or returns them to safe outdoors.
	c. Kibble Supply Pet Food pantry offers free pet food and supplies,
	much of which is donated by local businesses and the general public.
	much of which is donated by focal businesses and the general public.
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses3,159,731.

Form 990 (2022) Animal Friends Alliance 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	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
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		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		
•	the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			v
•	complete Schedule D, Part III	8		X
9	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		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	3		
10	or in quasi endowments? If "Yes," complete Schedule D, Part V.	10		x
11	If the organization's answer to any of the following questions is 'Yes," then complete Schedule D, Parts VI,	10		
••	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		x
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		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<u>X</u>
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
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	140		
10	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV.	15		x
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		x
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. See instructions	17		x
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	х	
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
20 a	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		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x

Form 990 (2022) Animal Friends Alliance Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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		X
24 a				
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b</i>			
	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?	240 24d		
25 a		240		
20 4	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.	25a		x
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		х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or			
	founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity			
	(including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III.	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,			
	Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor?			
	If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?			
	If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
~	conservation contributions? If "Yes," complete Schedule M	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,	20		v
22	Part II	32		X
33	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,	- 33		~
54	or IV, and Part V, line 1	34		x
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	000		
-	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		x
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		x
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
	19? Note: All Form 990 filers are required to complete Schedule O	38	х	
Pa	rt 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
1 a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reporatble gaming (gambling)			
	winnings to prize winners?	1c		

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Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4 a	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	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	_		
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	_		
e	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 7e		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g 7h		
h 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	70		
0	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	0		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	0.5		
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14 a	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 on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration			
	or excess parachute payment(s) during the year?	15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes." complete Form 6069.			

Form 99	0 (2022) Animal Friends Alliance 20-4	9697	' 31 F	Page 6
Part V	VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for	a "No"		
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions	÷.		
	Check if Schedule O contains a response or note to any line in this Part VI			X
Secti	on A. Governing Body and Management			
			Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year	.2		
	If there are material differences in voting rights among members of the governing body, or if the governing	_		
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b		.2		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	<u> </u>		
-	any other officer, director, trustee, or key employee ?	. 2		x
3	Did the organization delegate control over management duties customarily performed by or under the direct	·		
5	supervision of officers, directors, trustees, or key employees to a management company or other person?	. 3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			X
4				X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			X
6	Did the organization have members or stockholders?	. 6		<u> </u>
7 a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	_		
	one or more members of the governing body?	. 7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	. 7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	. 8a	X	
b	Each committee with authority to act on behalf of the governing body?	. 8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	. 9		X
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10 a	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 chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	. 10b		
11 a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	. 11a		X
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12 a	Did the organization have a written conflict of interest policy? If "No," go to line 13.	. 12a	х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe on Schedule O how this was done.	. 12c	x	
13	Did the organization have a written whistleblower policy?	. 13	X	
14	Did the organization have a written document retention and destruction policy?		x	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
10	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
2	The organization's CEO, Executive Director, or top management official.	. 15a	x	
	Other officers or key employees of the organization		^	x
b		. 150		
40 -	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	40-		
	with a taxable entity during the year?	. <u>16a</u>		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint			
	venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with			
0	respect to such arrangements?	. 16b		
	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed CO			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3	s only)		
	available for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and			
	financial statements available to the public during the tax year.	_	_	
20))484		
	Animal Friends Alliance 2321 E. Mulberry Street Fort Collins,	CO	805	24

Form **990** (2022)

Form 990 (2022) Animal Friends Alliance

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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

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

				(0))					
(A)	(B)			Posi	ition			(D)	(E)	(F)
Name and title	Average	(do n	ot ch	ieck i	more	e than c	ne	Reportable	Reportable	Estimated amount
	hours	box, ı	box, unless person is both an			an	compensation	compensation	of other	
	per week (list any	office	er and	d a d	irect	or/trust	ee)	from the organization (W-2/	from related organization (W-2/	compensation from the
	hours for	or o	Ins	Officer	Key	Hig	For	1099-MISC/	1099-MISC/	organization and
	related	Individual or director	tituti	licer	/ en	ploy	Former	1099-NEC)	1099-NEC)	related organizations
	organizations	Individual trustee or director	Institutional trustee		Key employee	ee				
	below dotted line)	uste	ltru		/ee	npe				
		l ë	stee			Highest compensated employee				
						ted				
(1) Kris Cafaro	04.00									
President		X		x						
(2) Jana Dean, DVM	02.00									
Vice President		X		x						
(3) Julie Piepho	02.00									
Treasurer		X		x						
(4) Kirk Reimann	02.00									
Secretary		X		x						
(5) Kathy Dalton	02.00									
Voting member		X								
(6) Holly Ashby	02.00									
Voting member		X								
(7) Sarah Swanty	40.00									
Executive Director				X				103,266.		
(8) Karen Horn	02.00									
Voting Member		X								
(9) Lisa Maggio-Golicher	02.00									
Voting Member		X								
(10) Jenna Riedi	02.00									
Voting Member		X								
(11) Bob Gregory	02.00									
Voting Member		X								
(12) Simone Clasen	02.00	-								
Voting Member		X				<u> </u>				
(13) Jean Opsomer	02.00									
Voting Member		X				<u> </u>				
(14)										

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Form 990 (2022) Animal Friends Alliance

Part VII Section A. Officers, Directors, Tr		Í		(0		-	5				,	
(A)	(B)			Posi				(D)	(E)		(F)	
Name and title	Average	do n	ot ch			than o	ne	Reportable	Reportabl	le	Estimated a	mount
	hours per box, unless person is bo				is both	an	compensation	compensati	sation of o			
	week (list any hours for	office	er and	dad	irecto	or/truste	,	from the organization (W-2/	from relate organization (compensa from th	
	related	Ind or o	Ins	Off	Key	Highest cc employee	Former	1099-MISC/	1099-MISC		organizatio	
	organizations	Individual or director	Institutional	Officer	Key employee	hes	mer	1099-NEC)	1099-NEC	C)	related organ	izatior
	below dotted	tor tr	onal		lploy	ee						
	line)	Individual trustee or director	truste		/ee	Highest compensated employee						
		ě	stee			nsat						
5)						d						
,		1										
6)												
7)												
8)												
9)												
20)												
21)												
22)												
23)												
24)												
25)												
1b Subtotal	I	 	 	 				103,266.				
c Total from continuation sheets to Pa	art VII, Sec	tion	Α.									
d Total (add lines 1b and 1c)								103,266.				
2 Total number of individuals (including reportable compensation from the orga	but not limi	ted to	tho						ore than \$1	00,00	00 of	
	anization	1									Yes	s No
3 Did the organization list any former offic	er, director	, trus	tee,	key	/ em	ploye	e, e	or highest comp	ensated			
employee on line 1a? If "Yes," complete											3	X
4 For any individual listed on line 1a, is the	-				-					the		
organization and related organizations g	reater than	\$150	,000)? li	f "Ye	es," c	om	plete Schedule J	for such			
individual										· · ·	4	X
5 Did any person listed on line 1a receive												
for services rendered to the organization	? If "Yes,"	сотр	lete	SC	nea	ule J	for .	sucn person			5	X
 A Complete this table for your five highest compensation from the organization. Re 	compensat	ed ind	depe on fe	end or th	ent ne c	contra alend	acto ar v	ors that received	more than s	\$100, e ora:	000 of anization's	
tax year.							j	-		9		
(A) Name and business address								(B) Description of se	ervices	((C) Compensatio	n
								,				
2 Total number of independent contractors	(including	but n	ot li	mite	ed to	o thos	l se li	sted above) who)			

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

Form 990 (2022) Animal Friends Alliance Part VIII Statement of Revenue

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i di t	VIII	Check if Schedule O contains a response or note	e to any line in this	Part VIII			
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business	(D) Revenue excluded from tax under
						revenue	sections 512-514
nts, its	1a	Federated campaigns					
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues					
s, G	С	Fundraising events	95,691.				
Gift Iar	d	Related organizations					
ini (е	Government grants (contributions) 1e					
ition Pr S	f	All other contributions, gifts, grants,					
ibut Cthe			2,883,783.				
d tr	g	Noncash contributions included in lines 1a-1f					
ar	h	Total. Add lines 1a–1f		2,979,474.			
ne			Business Code				
Program Service Revenue		Clinic Income		892,707.			
e Re		Shelter & Adoptions		806,316.			
<u>Zi</u>	С	Supply Sales, net		12,407.	12,407.		
Se	d						
lraπ	е						
rog	f	All other program service revenue					
	g	Total. Add lines 2a-2f		1,711,430.			
	3	Investment income (including dividends, interest,					0.406
		and other similar amounts)		-2,426.			-2,426.
	4	Income from investment of tax-exempt bond proce					
	5	Royalties					
		(i) Real	(ii) Personal				
		Gross rents 6a					
		Less: rental expenses 6b					
		Rental income or (loss) 6c					
		Net rental income or (loss)					
	7 a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a					
	D	Less: cost or other basis					
		and sales expenses 7b Gain or (loss) 7c					
		· · · · · · · · · · · · · · · · · · ·					
	u	Net gain or (loss)					
Other Revenue		Gross income from fundraising events (not including \$ 95,691. of contributions reported on line 1c). See Part IV, line 18	<u>217,070.</u> 71,336.				
		Net income or (loss) from fundraising events	-	145,734.			
		Gross income from gaming activities.					
		See Part IV, line 19					
	b	Less: direct expenses					
	с	Net income or (loss) from gaming activities					
	10 a	Gross sales of inventory, less					
		returns and allowances					
	b	Less: cost of goods sold					
	С	Net income or (loss) from sales of inventory					
S			Business Code				
e	11 a	Volunteer Fees		18,616.			
scellaneo Revenue	b	Miscellaneous		2,163.	2,163.		
Cell	с						
Miscellaneous Revenue	d	All other revenue					
_	е	Total. Add lines 11a-11d		20,779.			
	12	Total revenue. See instructions		4,854,991.	1,732,209.		-2,426.
UYA							Form 990 (2022)

Form 990 (2022) Animal Friends Alliance Part IX Statement of Functional Expenses

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

Form **990** (2022)

Check if Schedule O contains a response or note to any line in this Part IX (B) (C) (D) Do not include amounts reported on lines 6b, 7b, 8b, 9b, Total expenses Program service Management and Fundraising and 10b of Part VIII. expenses general expenses expenses 1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic individuals. See Part IV, line 22. 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, 4 Benefits paid to or for members. 5 Compensation of current officers, directors, trustees, 103,266. 34,078. 34,078. 35,110. 6 Compensation not included above to disgualified persons (as defined under section 4958(f)(1)) and persons 2,023,364. 1,746,793 113,704 7 162,867. 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions). 9 96,982 69,742 19,743. 7,497. 140,396. 11,650. 15,608. 10 Payroll taxes 167,654. 11 Fees for services (nonemployees): 8,906. 8,906 15,885 1,885. 14,000. e Professional fundraising services. See Part IV, line 17 . . . f Investment management fees **g** Other. (If line 11g amount exceeds 10% of line 25, column 26,074. 26,074 (A), amount, list line 11g expenses on Schedule O.) 19,196. 12 19,196. <u>12,7</u>96. 13 32,894 10,540. 9,558. 14 40,550. 35,941. 2,459. 2,150. Information technology 15 Royalties 140,970 128,262. 7,010 5,698. 16 17 21,763. 21,763. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 45,271. 38,409. 6,862. 21 Payments to affiliates 79,379. 72,770. 22 Depreciation, depletion, and amortization 2,688. 3,921. 23 44,022 36,864 3,060. 4,098. Insurance. 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 366,463. a Medical Supplies 366,463. b Clinic & Shelter Supplies 282,810. 282,810 c Vet & Lab Services 43,300. 43,300. <u>83,6</u>65 83,665. d Fundraising Expenses 8,753. 121,254. 84,074 28,427. e All other expenses Total functional expenses. Add lines 1 through 24e 3,763,668. 3,159,<u>731</u> 231,338. 372,599. 25 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).

UYA

Form 990 (2022) Animal Friends Alliance Part X Balance Sheet

Pa	art 2	Check if Schedule O contains a reasonable or note to any line in this Part X			F
Т		Check if Schedule O contains a response or note to any line in this Part X	(A)		(B)
			(A) Beginning of year		(B) End of year
-					-
	1	Cash — non-interest-bearing.		1	496,75
	2	Savings and temporary cash investments		2	301,09
	3	Pledges and grants receivable, net	· · · ·	3	24,29
	4	Accounts receivable, net	4,062.	4	22,49
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
)	6	Loans and other receivables from other disqualified persons (as defined			
Ś		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net.		7	
•	8	Inventories for sale or use	9,217.	8	5,62
	9	Prepaid expenses and deferred charges.	17,782.	9	20,15
	10 a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D			
	b		2,082,833.	10c	4,591,64
	11	Investments — publicly traded securities		11	
	12	Investments — other securities. See Part IV, line 11		12	
	13	Investments — program-related. See Part IV, line 11	23,496.	13	20,07
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33).		16	5,482,14
	17	Accounts payable and accrued expenses	73,709.	17	52,13
	18	Grants payable		18	
	19	Deferred revenue		19	10,75
2	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or			
5		founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
1	23	Secured mortgages and notes payable to unrelated third parties	1,092,422.	23	1,143,82
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities			
		not included on lines 17-24). Complete Part X of Schedule D	121,952.	25	145,44
_	26	Total liabilities. Add lines 17 through 25	1,288,083.	26	1,352,15
		Organizations that follow FASB ASC 958, check here			
		and complete lines 27, 28, 32, and 33.			
5	27	Net assets without donor restrictions	<u>1,617,623.</u>	27	4,033,57
	28	Net assets with donor restrictions.			
		_	1,421,041.	28	96,40
5		Organizations that do not follow FASB ASC 958, check here			
5		and complete lines 29 through 33.			
?	29	Capital stock or trust principal, or current funds		29	
S	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
2	31	Retained earnings, endowment, accumulated income, or other funds		31	
	32	Total net assets or fund balances.	3,038,664.	32	4,129,98
· •	33	Total liabilities and net assets/fund balances.	1 226 717	33	5,482,14

UYA

Form **990** (2022)

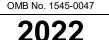
Form 9	^{30 (2022)} Animal Friends Alliance	20-496	9731	Pag	je 12
Par	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12) 1	4	,854	, 99	91.
2	Total expenses (must equal Part IX, column (A), line 25). 2	3	,763	, 6	68.
3	Revenue less expenses. Subtract line 2 from line 1	1	,091	, 32	23.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	3	,038	, 6	64.
5	Net unrealized gains (losses) on investments				
6	Donated services and use of facilities				
7	Investment expenses				
8	Prior period adjustments				
9	Other changes in net assets or fund balances (explain on Schedule O)				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	4	,129	, 98	87.
Part	XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII.		<u> </u>	<u></u>	
			<u> </u>	′es	No
1	Accounting method used to prepare the Form 990: 🗌 Cash 🛛 🗶 Accrual 📃 Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.				
2 a	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 on a	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	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate bas	s, consolidated			
	basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	x	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.				
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	theUniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.		3b		
UYA			Form	990	(2022)

SCHEDULE	Α
(Form 990)	

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.



Open to Public Department of the Treasury Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service Inspection Name of the organization Employer identification number 20-4969731 Animal Friends Alliance Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 🛛 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. **a Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. **b** Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. **c Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. **d Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III е functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations f Provide the following information about the supported organization(s). g (i) Name of supported organization (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of (iv) Is the organization (described on lines 1-10 other support (see support (see listed in your governing above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D) (E)

Total

Schedu	le A (Form 990) 2022 Animal Fr	iends Al	liance			20-496	9731 Page 2
Part				tions 170(b)	(1)(A)(iv) and	170(b)(1)(A)(vi)
	(Complete only if you checked th						
	Part III. If the organization fails to	o qualify und	er the tests li	sted below, p	lease comple	ete Part III.)	-
Secti	Section A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.").						
2	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a governmental						
	unit or publicly supported organization)						
	included on line 1 that exceeds 2%						
	of the amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
	on B. Total Support	1	T	,	1	1	
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from similar						
	sources						
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on						
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc	•	,			12	44.3403
13	First 5 years. If the Form 990 is for the c						
0	organization, check this box and stop he						
	on C. Computation of Public Suppo			11 oolump (f		14	%
14	Public support percentage for 2022 (line Public support percentage from 2021 Sch	• • •	-	• •		14	%
15	33 1/3 % support test–2022. If the organ						
16a	box and stop here . The organization qua						
h	33 1/3 % support test–2021. If the organ	•	• • • •	•			
b	check this box and stop here. The organ						
47-		•			•		
17a	10%-facts-and-circumstances test-202	•					
	10% or more, and if the organization me						
	Part VI how the organization meets the fa			-			
ь.	organization						<u></u>
b	10%-facts-and-circumstances test-202	•					
	15 is 10% or more, and if the organization					-	
	Explain in Part VI how the organization m				•		-
40							
18	Private foundation. If the organization d						
	instructions						🗀

Schedule A (Form 990) 2022 Animal Friends Alliance Part III Support Schedule for Organizations Described in Section 509(a)(2)

Part	Part III Support Schedule for Organizations Described in Section 509(a)(2)						
	(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.						
	If the organization fails to qualify	under the te	sts listed bel	ow, please co	omplete Part	II.)	
Secti	ion A. Public Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees						
		892.258.	1.292.098	2.498.712	2.552.754	2.979.474	10,215,296.
2	Gross receipts from admissions, merchandise						10/210/2001
	sold or services performed, or facilities						
	furnished in any activity that is related to the organization's tax-exempt purpose	884 068	989 950	1 276 066	1 515 179	1 711 430	6,376,693.
3	Gross receipts from activities that are not an		5057500.	1,2,0,000.	1,010,179.	1,711,450.	
Ũ	•	131,454.	84 431	112 142	154 074	166 513	648,614.
4	Tax revenues levied for the	191,494.	04,451.	<u>,</u>	134,074.		
-	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
5	furnished by a governmental unit to the						
	organization without charge						
6	•	1 005 500				4 055 445	
6	Total. Add lines 1 through 5	1,907,780.	2,366,479.	3,886,920.	4,222,007.	4,857,417.	17,240,603.
/a	Amounts included on lines 1, 2, and 3 received from disqualified persons.						
L	Amounts included on lines 2 and 3					+	+
a	received from other than disgualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year				260 625	000 400	1 050 005
•	Add lines 7a and 7b.						1,350,025.
8	Public support. (Subtract line 7c from				360,625.	989,400.	1,350,025.
0							
Saati	line 6.)						15,890,578.
	ndar year (or fiscal year beginning in)	(-) 2019	(1) 2010	(a) 2020	(4) 2024	(a) 2022	
9		(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
-		1,907,780.	2,366,479.	3,886,920.	4,222,007.	4,857,417.	17,240,603.
10a	Gross income from interest, dividends, payments received on securities loans, rents,						
		1.00	4 011	0 5 6 4	2 020	0.400	0.051
	royalties, and income from similar sources	166.	4,011.	2,564.	3,936.	-2,426.	8,251.
a	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
_	acquired after June 30, 1975	1.00	4 011	0.54	2.026	0.400	0.051
	Add lines 10a and 10b	166.	4,011.	2,564.	3,936.	-2,426.	8,251.
11	Net income from unrelated business						
	activities not included on line 10b, whether			100 550	1 4 9 9 9 5		
40	or not the business is regularly carried on			196,558.	148,235.	, 	344,793.
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
40	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
4.4	and 12.)	<u>1,907,946.</u>	2,370,490.	4,086,042.	4,374,178.	<u>4,854,991.</u>	17,593,647.
14	-	-			-		
Cast	organization, check this box and stop he		<u></u>				<u> [</u>
	ion C. Computation of Public Suppo			avilina 12 aa	(f)	45	00 20%
15	Public support percentage for 2022 (li						90.32%
<u>16</u>	Public support percentage from 2021			10		. 10	94.37%
	ction D. Computation of Investment Income Percentage						
17 19	Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f))1700.05%Investment income percentage from 2021 Schedule A, Part III, line 171800.09%						
18							00.09%
19a							
L	line 17 is not more than $33^{1/3}$ %, check this		-				
b							
00	line 18 is not more than 331/3%, check this	-	-	•		• • •	
20	Private foundation. If the organization d	iu not check a	box on line 14	, 19a, or 19b,	CHECK THIS DOX	and see instru	

Schedule	В
(Form 990)	

Department of the Treasury Internal Revenue Service

Schedule of Contributors

OMB No. 1545-0047

20

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information.

Name of the organization	Employer identif	fication number
Animal Friends Alliance	20-4969	731
Organization type (check one):		

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

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

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

General Rule

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

Special Rules

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

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

SCHEDULE D	
(Form 990)	

nlomontal Financial St

Department of the Treasur Internal Revenue Service Name of the organization

Animal

Part I

1 2

3

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2

а

b

С

d

3

4

5

6

Part II

DULE D	Supplement	tal Financial	Statements			OMB No. 1545-0047
า 990)	Complete if the or	ganization answered	"Yes" on Form 990,			2022
	Part IV, line 6, 7, 8, 9,	10, 11a, 11b, 11c, 11c	l, 11e, 11f, 12a, or 12b).		
ent of the Treasury		Attach to Form 990.				Open to Public
Revenue Service	Go to www.irs.gov/For	m990 for instructions				Inspection
f the organization			E			tion number
	ds Alliance				9697	
	ations Maintaining Donor Adv			ds or <i>l</i>	Accoun	nts.
Complet	te if the organization answered "	Yes" on Form 990), Part IV, line 6.			
		(a) Donor	advised funds		(b) Fund	ds and other accounts
Total number at e	end of year					
Aggregate value	of contributions to (during year)					
Aggregate value	of grants from (during year)					
	at end of year					
	ion inform all donors and donor advisors ir					
property, subject	to the organization's exclusive legal control	bl?				🗌 Yes 🗌 No
-	ion inform all grantees, donors, and donor	-	-	-	or charitab	ble
purposes and no	t for the benefit of the donor or donor advis	or, or for any other pur	pose conferring imperm	nissible		
						🔄 Yes 📃 No
	vation Easements.					
	te if the organization answered "					
	nservation easements held by the organiza		ly).			
Preservation	of land for public use (for example, recrea	tion or education)	Preservation of hist	torically i	mportant	land area
Protection of	natural habitat		Preservation of a co	ertified h	istoric stru	ucture
Preservation	of open space					
Complete lines 2	a through 2d if the organization held a qua	lified conservation cont	ribution in the form of a	conserv		,
of the tax year.				_	Held	at the End of the Tax Year
	conservation easements			_	2a	
Total acreage res	stricted by conservation easements			· · ·	2b	
	ervation easements on a certified historic s				2c	
	ervation easements included in (c) acquired	-				
	onal Register			L	2d	
Number of conse	ervation easements modified, transferred, r	eleased, extinguished,	or terminated by the			
organization durir						
	where property subject to conservation ea					
-	ation have a written policy regarding the pe		-			
	of the conservation easements it holds?					
Staff and volunte	er hours devoted to monitoring, inspecting	, handling of violations,	and enforcing conserva	ation eas	ements d	uring the year

7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
~	

8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and

include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

1a	If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works
	of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public
	service, provide in Part XIII the text of the footnote to its financial statements that describes these items.
b	If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of
	art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service,
	provide the following amounts relating to these items:

provide the following amounts relating to these items.	
(i) Revenue included on Form 990, Part VIII, line 1	

	(ii) Assets included in Form 990, Part X	\$
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, p	rovide the following

required to be reported under FASB ASC 958 relating to these items:

	required to be reported under 17 to b 7 to b 600 relating to under terms.	
а	Revenue included on Form 990, Part VIII, line 1	
b	Assets included in Form 990, Part X	

							 		-, -			•	•		•	•	•		•	•	•	•
For	Pan	orw	ork	R۵	duic	tion	Noti	ice	SOC	h th	o Ir	nef	ru	rtio	ns	fr	٦r	F٥	rm	9	٩N	_
1 01	ιαμ	CI W.		110	uuc	uon			366	, un	c 11	131	. u	suiu	113						30	
UYA																						

amounts

\$

	ule D (Form 990) 2022 Animal Fri							<u>4969731</u>	
	III Organizations Maintaining								
3	Using the organization's acquisition, access (check all that apply):	ion, and other record	s, check any	of the follo	owing that m	ake sign	ificant use of its c	collection item	IS
а	Public exhibition		d	Loan or	⁻ exchange p	rogram			
b	Scholarly research		е	Other_					
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain	how they fu	rther the or	ganization's	exempt	purpose in Part X	(111.	
5	During the year, did the organization solicit of		,		,				
Dout	rather than to be maintained as part of the o		on?					🔄 Yes	
Part	IV Escrow and Custodial Arra Complete if the organization 990, Part X, line 21.		' on Form	990, Pa	rt IV, line	9, or r	reported an ar	mount on I	Form
1a	Is the organization an agent, trustee, custod	ian or other intermed	iary for contri	ibutions or	other assets	s not inc	luded		
	on Form 990, Part X?							🗌 Yes	;
b	If "Yes," explain the arrangement in Part XII	and complete the fo	llowing table:						
							Am	nount	
с	Beginning balance.					. 1c			
d	Additions during the year.					. 1d			
е	Distributions during the year					. 1e			
f	Ending balance								
2a	Did the organization include an amount on F						?	Yes	;
	If "Yes," explain the arrangement in Part XII								
	V Endowment Funds.		1						
	Complete if the organization	answered "Yes"	' on Form	990. Pa	rt IV. line	10.			
		(a) Current year	(b) Pric	· · ·	(c) Two year		(d) Three years ba	ack (e) Four	years
1a	Beginning of year balance	., , , , , , , , , , , , , , , , , , ,	(,	,			, , , ,	(2) . 50	,
b	Contributions		1						
С	Net investment earnings, gains, and								
لم	losses								
	Grants or scholarships.								
е	Other expenditures for facilities and								
-	programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the cur		e (line 1g, col	umn (a)) h	eld as:				
а	Board designated or quasi-endowment								
	Permanent endowment %	D							
b									
b c	Term endowment%								
	Term endowment% The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.							
с			ation that are	held and a	administered	for the		_	
с	The percentages on lines 2a, 2b, and 2c sh		ation that are	held and a	administered	for the		[Yes
с	The percentages on lines 2a, 2b, and 2c she Are there endowment funds not in the posse	ession of the organiza							Yes
с	The percentages on lines 2a, 2b, and 2c she Are there endowment funds not in the posse organization by:	ession of the organiza						3a(i)	Yes
c 3a	The percentages on lines 2a, 2b, and 2c she Are there endowment funds not in the posse organization by: (i) Unrelated organizations	ession of the organiza						3a(i) 3a(ii)	Yes
c 3a	The percentages on lines 2a, 2b, and 2c she Are there endowment funds not in the posse organization by: (i) Unrelated organizations (ii) Related organizations	ession of the organiza	red on Scheo					3a(i) 3a(ii)	Yes
c 3a b 4	The percentages on lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by: (i) Unrelated organizations (ii) Related organizations If "Yes" on line 3a(ii), are the related organiz Describe in Part XIII the intended uses of the	ession of the organiza ations listed as requi e organizaton's endo	red on Scheo					3a(i) 3a(ii)	Yes
c 3a b 4	 The percentages on lines 2a, 2b, and 2c shows a comparison of the posses or ganization by: (i) Unrelated organizations	ession of the organiza ations listed as requi e organizaton's endo oment.	red on Scheo wment funds	 Jule R? .	· · · · · · · ·	· · · · ·		3a(i) 3a(ii) 3b	
c 3a b 4	The percentages on lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by: (i) Unrelated organizations (ii) Related organizations If "Yes" on line 3a(ii), are the related organiz Describe in Part XIII the intended uses of the VI Land, Buildings, and Equi	ession of the organiza ations listed as requi e organizaton's endo oment.	red on Sched wment funds ' on Form ner basis (I	 Jule R? .	rt IV, line	11a. S		3a(i) 3a(ii) 3b	ine 1
c 3a b 4 Part	The percentages on lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by: (i) Unrelated organizations (ii) Related organizations If "Yes" on line 3a(ii), are the related organiz Describe in Part XIII the intended uses of the VI Land, Buildings, and Equip Complete if the organization Description of property	ations listed as requi e organizaton's endo oment. answered "Yes" (a) Cost or oth (investm	red on Sched wment funds ' on Form ner basis (I	dule R? . 990, Pa b) Cost or c (oth	rt IV, line	11a. S	See Form 990	3a(i) 3a(ii) 3b), Part X, li (d) Book	ne 1 value
c 3a b 4 Part	The percentages on lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by: (i) Unrelated organizations (ii) Related organizations If "Yes" on line 3a(ii), are the related organiz Describe in Part XIII the intended uses of th VI Land, Buildings, and Equip Complete if the organization Description of property Land	ations listed as requi e organizaton's endo pment. answered "Yes" (a) Cost or oth (investrr	red on Sched wment funds ' on Form ner basis (I	dule R? 990, Pa b) Cost or o (oth 284	rt IV, line	11a. S	See Form 990 Accumulated epreciation	3a(i) 3a(ii) 3b), Part X, li (d) Book	ine 1 value
c 3a b 4 Part 1a b	The percentages on lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by: (i) Unrelated organizations (ii) Related organizations (ii) Related organizations	ession of the organizators listed as required organizators endor pment. answered "Yes" (a) Cost or oth (investmodia)	red on Sched wment funds ' on Form ner basis (I	dule R? 990, Pa b) Cost or o (oth 284	rt IV, line	11a. S	See Form 990	3a(i) 3a(ii) 3b), Part X, li (d) Book	ine 1 value
c 3a b 4 Part 1a b c	The percentages on lines 2a, 2b, and 2c shows Are there endowment funds not in the posses organization by: (i) Unrelated organizations (ii) Related organizations If "Yes" on line 3a(ii), are the related organization Describe in Part XIII the intended uses of the Land, Buildings, and Equip Complete if the organization Description of property Land Land Land Laad Laasehold improvements	ession of the organizations listed as requi e organizaton's endor pment. answered "Yes" (a) Cost or oth (investron) 	red on Sched wment funds ' on Form ner basis (I	990, Pa 990, Pa b) Cost or c (oth 284 4,45	rt IV, line other basis er) 1,528. 7,198.	11a. S	See Form 990 Accumulated epreciation 225,577.	3a(i) 3a(ii) 3b), Part X, li (d) Book 284 4,231	ine 1 value 1,5 L,6
c 3a b 4 Part 1a b	The percentages on lines 2a, 2b, and 2c sho Are there endowment funds not in the posse organization by: (i) Unrelated organizations (ii) Related organizations (ii) Related organizations	ession of the organizations listed as required organizaton's endoropoment. answered "Yes" (a) Cost or oth (investro)	red on Sched wment funds ' on Form ner basis (I	990, Pa 990, Pa b) Cost or c (oth 284 4,457	rt IV, line	11a. S	See Form 990 Accumulated epreciation	3a(i) 3a(ii) 3b), Part X, li (d) Book 284 4,231	ine 1 value

	Complete if the organization answered "Yes" on Form	Form 990, Part IV, line 11b. See Form 990, Part X, line 1					
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value				
(1)	Financial derivatives						
(2)	Closely held equity interests						
(3)	Other						
	(A)						
	(B)						
	(C)						
	(D)						
	(E)						
	(F)						
	(G)						
	(H)						
Tot	al. (Column (b) must equal Form 990, Part X, col. (B) line 12.)						

Part VIII Investments — Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Investment in Community Foundation	20,078.	?
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)	20,078.	

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) Accrued Payroll Liabilities	145,446.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	145,446.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII....

Schedu	ule D (Form 990) 2022 Animal Friends Alliance		20-	4969731	Page 4
	t XI Reconciliation of Revenue per Audited Financial Statements With Re		Retur	'n.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	2a.			
1	Total revenue, gains, and other support per audited financial statements		1	4,904,	643.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments				
b	Donated services and use of facilities	49,652.			
C	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)				
е	Add lines 2a through 2d		2e		652.
3	Subtract line 2e from line 1		3	4,854,	<u>991.</u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b				
b	Other (Describe in Part XIII.)				
С	Add lines 4a and 4b		4c		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	4,854,	991.
Part			er Ret	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	2a.			
1	Total expenses and losses per audited financial statements		1	<u>3,813</u> ,	320.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	49,652.			
b	Prior year adjustments				
с	Other losses				
d	Other (Describe in Part XIII.)				
е	Add lines 2a through 2d		2e	49,	652.
3	Subtract line 2e from line 1		3	3,763,	668.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b				
b	Other (Describe in Part XIII.)				
с	Add lines 4a and 4b		4c		
5	Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 18.</i>)		5	3,763,	668.
Part	XIII Supplemental Information.			<u> </u>	
Provide	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; P	Part V, line 4; Pa	art X, lin	e 2;	

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

(Forn	EDULE G n 990)	Complete if the o	anization entered	18, or 19, or if the	OMB No. 1545-0047 2022 Open to Public			
	nent of the Treasury Revenue Service			ttach to For Form990 for		orm 990-EZ.	ormation.	Inspection
	of the organization						Employer identification	
Aniı	mal Frien	ds Allianc	е				20-49697	31
Part	Fundrai		Complete if th	•		wered "Yes" on	Form 990, Part IV	
1	Indicate whether	the organization raise	ed funds through a	ny of the follo	wing activitie	s. Check all that ap	oly.	
а	X Mail solicitati	ons		е 🛛	Solicitation	n of non-government	grants	
b	Internet and	email solicitations		f 🛛	Solicitation	n of government gra	nts	
с	X Phone solicit	ations		g 🗴	Special fu	ndraising events		
d	In-person so	licitations						
2a	Did the organizat	ion have a written or o	oral agreement with	n any individu	al (including	officers, directors, t	rustees, or key employe	ees
	-	0, Part VII) or entity ir	-	-				🗌 Yes No
b					-		h the fundraiser is to b	e
		least \$5,000 by the or	•	, ,	0			
	1	, - , ,	5					
	(i) Name and addr or entity (f	ess of individual undraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
				Yes	No			
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
		hich the organizat				contributions or I	nas been notified it i	s exempt from

registration or licensing.

CO

Animal Friends Alliance

Part II

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

		gross receipts greater than	\$5,000.			
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			Gala	Run4Fun	2	(add col. (a) through
			(event type)	(event type)	(total number)	col. (c))
ne						
Revenue	1	Gross receipts	218,218.	38,130.	56,413.	312,761.
Ś	•		210,210.	50,150.	50,415.	512,701.
ш	_	Lesse Contributions	05 001			05 (01
	2	Less: Contributions.	95,691.			95,691.
	3	Gross income (line 1 minus				
		line 2)	122,527.	38,130.	56,413.	217,070.
	4	Cash prizes				
	5	Noncash prizes	2,873.	6,094.		8,967.
		-	<i>•</i>			· · · · · ·
Direct Expenses	6	Rent/facility costs.	25,257.			25,257.
SUS		·····,				
ďx	7	Food and beverages		1,420.		1,420.
Ш		Tood and beverages		1,420.		1,420.
ec		Enderste in mente				F F00
Ē	8	Entertainment.	5,500.			5,500.
	9	Other direct expenses	8,348.	5,900.	15,944.	30,192.
	10	Direct expense summary. Ac	ld lines 4 through 9 in c	olumn (d)		71,336.
	11	Net income summary. Subtra	act line 10 from line 3, o	column (d)		145,734.
	4 111					· · · · ·

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

Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d)Total gaming (add col. (a) through col. (c))
Reve	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
irect E	4	Rent/facility costs.				
ō	5	Other direct expenses				
	6	Volunteer labor	☐ Yes% ☐ No	│	│	
	7	Direct expense summary. Ac	d lines 2 through 5 in c	olumn (d)		0.
	8	Net gaming income summar	y. Subtract line 7 from	line 1, column (d)		0.
9	E	Enter the state(s) in which the o	organization conducts g	aming activities:		
	a l	s the organization licensed to c	conduct gaming activitie	s in each of these state	es?	Yes 🛛 No
	_					
10		Vere any of the organization's of f "Yes," explain:	gaming licenses revoke	d, suspended, or termir	nated during the tax yea	r? 🗌 Yes 🗌 No

Schedu	e G (Form 990) 2022 Animal	Friends	Alliance	20	-4969731	Page 3
11	Does the organization conduct gaming	g activities wi	h nonmembers?		🔲 Yes	No No
12	Is the organization a grantor, beneficia	ary or trustee	of a trust, or a member of a	partnership or other enti	ity	
	formed to administer charitable gamin	ıg?			🗍 Yes	🗌 No
13	Indicate the percentage of gaming act	ivity conducte	ed in:		_	
а	The organization's facility	•			13a	%
b	An outside facility.					%
14	Enter the name and address of the pe					/0
14	records:		bares the organization's gar	mig/special events book		
	Name ►					
	Address ► CO					
15a	Does the organization have a contract	t with a third p	party from whom the organiz	zation receives gaming		
	revenue?				🗌 Yes	□ No
b	If "Yes," enter the amount of gaming r amount of gaming revenue retained b	evenue receiv	ved by the organization \$	and		
с	If "Yes," enter name and address of th		·, +			
		• •				
	Name					
	Address					
16	Gaming manager information:					
	Name					
	Gaming manager compensation \$					
	Description of services provided					
	Director/officer	nployee	Independent con	tractor		
17	Mandatory distributions:					
а	Is the organization required under stat	te law to make	e charitable distributions fro	m the gaming proceeds	to	
	retain the state gaming license?				🗌 Yes	∏ No
b	Enter the amount of distributions requ					
	spent in the organization's own exemp	ot activities du	ring the tax year.	\$		
Part		Provide the	explanations required by	Part I, line 2b, column		and
	See instructions.	100, 10, and	110, as applicable. Also	provide any additiona	i mornation.	

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

OMB No. 1545-0047

2022 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Go to www.irs.gov/Form990 for instructions and the latest information.			
	Employer identification	on number	

				20-4	20-4969731				
Part	Types of Property	(a)	(b)	(c)		(d)			
		Check if applicable	Number of contributions or items contributed	Noncash contribution amounts reported on Form 990, Part VIII, line 10	l noncash c	d of dete	ermining on amo	g ounts	
1	Art – Works of art								
2	Art – Historical treasures								
3	Art – Fractional interests								
4	Books and publications								
5	Clothing and household								
	goods								
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities – Publicly traded								
10	Securities – Closely held stock								
11	Securities – Partnership, LLC,								
	or trust interests								
12	Securities – Miscellaneous								
13	Qualified conservation								
	contribution – Historic								
	structures								
14	Qualified conservation								
	contribution – Other								
15	Real estate – Residential								
16	Real estate – Commercial								
17	Real estate – Other								
18	Collectibles								
19	Food inventory.								
20	Drugs and medical supplies								
21	Taxidermy.								
22	Historical artifacts								
23	Scientific specimens.								
24	Archeological artifacts								
25	Other (Pet Food)	Х		149,300).				
26	Other (Pet Supplies)	Х		95,514	1.				
27	Other (Office Suppl)	Х		9,059					
28	Other (· · · · ·					
29	Number of Forms 8283 received by the	organization	during the tax year for contributi	ons for which the					
	organization completed Form 8283, Part				. 29			2	
							Yes	No	
30 a	During the year, did the organization rec	eive by contri	bution any property reported in	Part I, lines 1 through 28,					
	that it must hold for at least 3 years from	the date of t	he initial contribution, and which	n isn't required to be used for	exempt				
	purposes for the entire holding period?					30a		Х	
b	If "Yes," describe the arrangement in Pa	rt II.							
31	Does the organization have a gift accept	ance policy tl	nat requires the review of any no	onstandard					
	contributions?					31	X		
32 a	Does the organization hire or use third pa								
	contributions?		· · · · · · · · · · · · · · ·			32a		Х	
b	If "Yes," describe in Part II.								
33	If the organization didn't report an amour	nt in column (c) for a type of property for whi	ch column (a) is checked,					
	describe in Part II.								
For Par	erwork Reduction Act Notice, see the Instr	uctions for F	orm 990.		Sched	ule M (Fo	orm 990)) 2022	

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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



Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Animal Friends Alliance

Employer identification number

20-4969731

Schedule O (Form 990) 2022	Page 2
Name of the organization	Employer identification number
Animal Friends Alliance	20-4969731
Part VI Line 11b	
Reviewed and approved by the executive bo	ard prior to filing
Part VI Line 19	
Upon request	
	· · · · · · · · · · · · · · · · · · ·
	· · · · · · · · · · · · · · · · · · ·