

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016
Open to Public Inspection

A For the **2016** calendar year, or tax year beginning **JUL 1, 2016** and ending **JUN 30, 2017**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization GREATERGOOD.ORG		D Employer identification number 20-4846675
	Doing business as		E Telephone number 206-268-5400
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	600 UNIVERSITY AVENUE SEATTLE, WA 98101		1000
F Name and address of principal officer: ELIZABETH BAKER SAME AS C ABOVE			H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: ▶ WWW.GREATERGOOD.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation: 2006
			M State of legal domicile: WA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: GREATERGOOD.ORG IS DEVOTED TO ADDRESSING HEALTH AND WELL-BEING OF PEOPLE (PARTICULARLY WOMEN AND		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	10
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	10
	5 Total number of individuals employed in calendar year 2016 (Part V, line 2a)	5	29
	6 Total number of volunteers (estimate if necessary)	6	10
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	33,242,159.	49,965,059.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	786,799.	1,026,502.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	288.	299.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,774,849.	410,228.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	36,804,095.	51,402,088.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	31,187,313.	46,603,775.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	1,406,428.	1,977,123.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 456,227.	0.	0.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,193,118.	1,593,257.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	33,786,859.	50,174,155.
19 Revenue less expenses. Subtract line 18 from line 12	3,017,236.	1,227,933.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	7,191,320.	8,049,281.
	22 Net assets or fund balances. Subtract line 21 from line 20	348,562.	290,882.
		6,842,758.	7,758,399.

Part II Signature Block

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

Sign Here	▶ Signature of officer		Date		
	▶ JOHN GEHRT, TREASURER Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name JANE M. SEARING	Preparer's signature JANE M. SEARING	Date 05/02/18	Check if self-employed <input type="checkbox"/>	PTIN P00000565
	Firm's name ▶ CLARK NUBER, PS	Firm's EIN ▶ 91-1194016		Phone no. 425-454-4919	
Firm's address ▶ 10900 NE 4TH STREET, SUITE 1400 BELLEVUE, WA 98004					

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: GREATERGOOD.ORG IS DEVOTED TO ADDRESSING HEALTH AND WELL-BEING OF PEOPLE (PARTICULARLY WOMEN AND CHILDREN), ANIMALS, AND THE PLANET. THE ORGANIZATION WILL MAKE EDUCATIONAL MATERIALS AVAILABLE TO THE GENERAL PUBLIC AND PROVIDE FUNDING TO OTHER REGISTERED CHARITABLE

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

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

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

4a (Code:) (Expenses \$ 44,949,873. including grants of \$ 43,460,148.) (Revenue \$ 1,026,502.) ANIMAL WELFARE (RESCUED ANIMALS): \$43,460,148 WAS GRANTED TO ANIMAL WELFARE ORGANIZATIONS FOR ITEMS LIKE FOOD, VACCINATIONS, SHELTER RENOVATIONS, ENRICHMENT, SPAY/NEUTER, EDUCATION AND TRAINING, AND DISASTER PREPAREDNESS AND RESPONSE. GREATERGOOD.ORG'S RESCUE BANK PROGRAM IS OUR LOGISTICS SERVICES COMPONENT, RESPONSIBLE FOR SECURING, TRANSPORTING, STORING AND DISTRIBUTING IN-KIND DONATIONS TO APPROVED ANIMAL WELFARE NON-PROFIT RECIPIENTS. THE PROGRAM CONFORMS TO OUR INTERNAL GUIDELINES FOR EVALUATING AND RESPONDING TO GRANT APPLICATIONS, DELIVERING PRODUCTS SUCH AS PET FOOD, VACCINES, LITTER AND OTHER SUPPLIES INSTEAD OF FINANCIAL GRANTS. THE NATIONAL RESCUE BANK NETWORK SERVES BOTH ONGOING NEEDS OF ANIMAL WELFARE ORGANIZATIONS AS WELL AS MAKING PRODUCTS

4b (Code:) (Expenses \$ 904,836. including grants of \$ 433,160.) (Revenue \$) HUNGER & POVERTY: \$433,160 WAS DISTRIBUTED TO CHARITIES ADDRESSING HUNGER AND POVERTY IN THE U.S. AND INTERNATIONALLY. FUNDS SUPPORTED PROGRAMS TO DISTRIBUTE FOOD, PROVIDE STOVES FOR DISPLACED PEOPLE IN DARFUR, PROVIDE HIGH YIELD SEEDS IN AGRICULTURAL AREAS IN AFRICA, PROVIDE CLEAN WATER IN AFRICAN COMMUNITIES, HIGH-CALORIE, NUTRITIOUS FOOD FOR INFANTS AND MOTHERS IN NIGER AND BASIC SURVIVAL SUPPLIES IN AREAS AFFECTED BY DISASTERS.

4c (Code:) (Expenses \$ 2,485,364. including grants of \$ 2,240,022.) (Revenue \$) LITERACY & CHILDREN'S EDUCATION AND HEALTH: \$2,240,022 WAS GRANTED TO VARIOUS NON-PROFIT GROUPS PROVIDING PROGRAMS THAT SUPPORT CHILDREN'S LITERACY, EDUCATION AND BASIC HEALTH IN THE U.S. AND ABROAD. FUNDS WERE USED TO DISTRIBUTE BOOKS TO UNDERPRIVILEGED CHILDREN DOMESTICALLY AND SUPPLY LOCAL LANGUAGE BOOKS IN SCHOOLS OVERSEAS, IN ADDITION TO PROVIDING SHOES, SUPPLIES AND UNIFORMS TO SCHOOL AGED GIRLS IN AFRICA AND SOUTH ASIA. FUNDS WERE ALSO USED TO PROVIDE BASIC HEALTH SERVICES, SUCH AS THE ADMINISTRATION OF VITAMIN A TO PREVENT CHILDHOOD ILLNESS AND DISEASE, PROVIDE HIV TESTING TO NEWBORNS, FUND AMPUTEE AND MOBILE HEALTH SERVICES TO CHILDREN IN HAITI, AND SUPPLY CLEAN CHILDBIRTH KITS TO THIRD WORLD MOTHERS. A PARTNERSHIP WITH A PUBLISHER HAS ALLOWED FOR THE DIRECT DISTRIBUTION OF

4d Other program services (Describe in Schedule O.) (Expenses \$ 1,001,096. including grants of \$ 470,445.) (Revenue \$)

4e Total program service expenses 49,341,169.

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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors?</i>	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		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? <i>If "Yes," complete Schedule C, Part II</i>		X
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? <i>If "Yes," complete Schedule C, Part III</i>		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? <i>If "Yes," complete Schedule D, Part I</i>		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>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		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? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		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)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		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>	X	
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		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? <i>If "Yes," complete Schedule G, Part I</i>		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? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
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? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
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? <i>If "Yes," complete Schedule J</i>	X	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		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? <i>If "Yes," complete Schedule L, Part I</i>		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? <i>If "Yes," complete Schedule L, Part II</i>		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? <i>If "Yes," complete Schedule L, Part III</i>		X
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):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	X	
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c 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? <i>If "Yes," complete Schedule L, Part IV</i>	X	
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
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? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		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? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Input box for Schedule O check

Main table with columns for question number, description, and Yes/No checkboxes. Includes sections for backup withholding, employee reporting, foreign accounts, prohibited transactions, and charitable contributions.

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included in line 1a, above, who are independent; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 7a 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?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 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 in Schedule O.

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b 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?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed NONE
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 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 [] Another's website [X] Upon request [] Other (explain in Schedule O)
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records: JOHN GEHRT - 206-268-5477 600 UNIVERSITY AVE, #1000, SEATTLE, WA 98101

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.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) CYNTHIA NESSER BOARD PRESIDENT	1.00	X		X				0.	0.	0.
(2) JENNIFER FERMON BOARD VICE PRESIDENT	1.00	X		X				0.	0.	0.
(3) JOHN GEHRT BOARD TREASURER	2.00	X		X				0.	0.	0.
(4) EVE HIGGS BOARD SECRETARY	1.00	X		X				0.	0.	0.
(5) JULIA CHRISTOPHERSEN BOARD MEMBER	1.00	X						0.	0.	0.
(6) GREG HESTERBERG BOARD MEMBER	1.00	X						0.	0.	0.
(7) KIMBERLY KLINTWORTH BOARD MEMBER	1.00	X						0.	0.	0.
(8) TIM KUNIN BOARD MEMBER	1.00	X						0.	0.	0.
(9) DAVID SAMUELSON BOARD MEMBER	1.00	X						0.	0.	0.
(10) DAVID YASKULKA BOARD MEMBER	1.00	X						0.	0.	0.
(11) LIZ BAKER EXECUTIVE DIRECTOR	30.00			X				135,917.	0.	5,671.
(12) SUSAN ROSENBERG PROGRAM DIRECTOR	40.00					X		104,729.	0.	6,576.
(13) ELIZABETH ASHER PROGRAM DIRECTOR	40.00					X		124,510.	0.	6,411.
(14) JOHN KANE PROGRAM DIRECTOR	40.00					X		122,271.	0.	6,372.
(15) NOAH HORTON DIRECTOR OF OPERATIONS	40.00					X		101,542.	0.	6,367.

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	49,965,059.				
	g Noncash contributions included in lines 1a-1f: \$		43,950,991.				
	h Total. Add lines 1a-1f		49,965,059.				
Program Service Revenue	2 a PET FOOD STORAGE/HANDL	Business Code					
		493000	1,026,502.	1,026,502.			
	b						
	c						
	d						
	e						
	f All other program service revenue						
g Total. Add lines 2a-2f		1,026,502.					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		299.			299.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties		410,228.			410,228.	
	6 a Gross rents	(i) Real	(ii) Personal				
		b Less: rental expenses					
		c Rental income or (loss)					
		d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b Less: cost or other basis and sales expenses					
		c Gain or (loss)					
		d Net gain or (loss)					
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
		b Less: direct expenses	b				
		c Net income or (loss) from fundraising events					
	9 a Gross income from gaming activities. See Part IV, line 19	a					
b Less: direct expenses		b					
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a							
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions.			51,402,088.	1,026,502.	0.	410,527.	

Part IX Statement of Functional Expenses

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

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

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	44,759,696.	44,759,696.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	421,906.	421,906.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	1,422,173.	1,422,173.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	149,305.	88,656.	30,788.	29,861.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,562,352.	1,189,479.	128,204.	244,669.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	139,652.	110,181.	5,946.	23,525.
10 Payroll taxes	125,814.	94,164.	11,014.	20,636.
11 Fees for services (non-employees):				
a Management				
b Legal	5,721.	915.	4,806.	
c Accounting	32,212.		32,212.	
d Lobbying				
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 (A) amount, list line 11g expenses on Sch. O.)	130,965.	119,430.	11,535.	
12 Advertising and promotion	97,010.	5,323.	2,568.	89,119.
13 Office expenses	923,455.	854,928.	24,233.	44,294.
14 Information technology	94,982.	72,232.	22,750.	
15 Royalties				
16 Occupancy	95,246.	32,321.	62,925.	
17 Travel	185,900.	158,456.	23,495.	3,949.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	4,025.	3,851.		174.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	10,777.	6,238.	4,539.	
23 Insurance	12,964.	1,220.	11,744.	
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 O.)				
a _____				
b _____				
c _____				
d _____				
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	50,174,155.	49,341,169.	376,759.	456,227.
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)

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	1,290,046.	1	4,255,132.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	5,454,372.	4	3,242,114.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	336,493.	8	326,885.
	9 Prepaid expenses and deferred charges	9,943.	9	66,810.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 99,373.		
	b Less: accumulated depreciation	10b 20,533.		
		20,966.	10c	78,840.
	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		13	
	14 Intangible assets	79,500.	14	79,500.
15 Other assets. See Part IV, line 11		15		
16 Total assets. Add lines 1 through 15 (must equal line 34)	7,191,320.	16	8,049,281.	
Liabilities	17 Accounts payable and accrued expenses	347,681.	17	248,632.
	18 Grants payable		18	
	19 Deferred revenue	881.	19	42,250.
	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 current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	348,562.	26	290,882.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> X and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	1,680,467.	27	2,394,373.
	28 Temporarily restricted net assets	5,162,291.	28	5,364,026.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	6,842,758.	33	7,758,399.	
34 Total liabilities and net assets/fund balances	7,191,320.	34	8,049,281.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	51,402,088.
2	Total expenses (must equal Part IX, column (A), line 25)	2	50,174,155.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,227,933.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	6,842,758.
5	Net unrealized gains (losses) on investments	5	-602.
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	-311,690.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	7,758,399.

Part XII Financial Statements and Reporting

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

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,673,128.	5,241,534.	15,336,272.	33,242,159.	49,965,059.	105,458,152.
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	1,673,128.	5,241,534.	15,336,272.	33,242,159.	49,965,059.	105,458,152.
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)						54,511,181.
6 Public support. Subtract line 5 from line 4.						50,946,971.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 Amounts from line 4	1,673,128.	5,241,534.	15,336,272.	33,242,159.	49,965,059.	105,458,152.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...	1,271,281.	1,892,361.	2,264,761.	2,775,137.	410,527.	8,614,067.
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						114,072,219.
12 Gross receipts from related activities, etc. (see instructions)					12	2,044,334.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	14	44.66 %
15 Public support percentage from 2015 Schedule A, Part II, line 14	15	50.52 %
16a 33 1/3% support test - 2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2015 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2015 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2016. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
1		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
1		
2		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
2 Activities Test. Answer (a) and (b) below.		Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
3 Parent of Supported Organizations. Answer (a) and (b) below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			
2a			
2b			
3a			
3b			

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount		(A) Prior Year	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9 Distributable amount for 2016 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1 Distributable amount for 2016 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2016 (reasonable cause required- explain in Part VI). See instructions			
3 Excess distributions carryover, if any, to 2016:			
a			
b			
c From 2013			
d From 2014			
e From 2015			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2016 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions			
6 Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions			
7 Excess distributions carryover to 2017. Add lines 3j and 4c			
8 Breakdown of line 7:			
a			
b Excess from 2013			
c Excess from 2014			
d Excess from 2015			
e Excess from 2016			

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Name of the organization

GREATERGGOOD.ORG

Employer identification number

20-4846675

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization GREATERGOOD.ORG	Employer identification number 20-4846675
----------------------------------------------------	---------------------------------------------------------

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	_____ _____ _____	\$ 16,459,663.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
2	_____ _____ _____	\$ 15,862,831.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
3	_____ _____ _____	\$ 3,665,754.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
4	_____ _____ _____	\$ 2,768,879.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
5	_____ _____ _____	\$ 2,022,517.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
6	_____ _____ _____	\$ 1,157,208.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization GREATERGOOD.ORG	Employer identification number 20-4846675
---------------------------------------------	--------------------------------------------------

Part II Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	PET FOOD _____ _____ _____	\$ 16,145,544.	06/30/17
2	PET FOOD _____ _____ _____	\$ 15,862,831.	06/30/17
3	PET FOOD _____ _____ _____	\$ 3,555,754.	06/30/17
4	PET FOOD _____ _____ _____	\$ 2,768,879.	06/30/17
5	BOOKS _____ _____ _____	\$ 2,022,517.	06/30/17
6	PET FOOD _____ _____ _____	\$ 1,157,208.	06/30/17

Name of organization GREATERGOOD.ORG	Employer identification number 20-4846675
---------------------------------------------	--------------------------------------------------

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ **Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.**

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization GREATERGOOD.ORG **Employer identification number** 20-4846675

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during 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 SFAS 116 (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 SFAS 116 (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:

(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, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

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

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

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

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

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

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

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

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

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

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

- a Board designated or quasi-endowment _____ %
- b Permanent endowment _____ %
- c Temporarily restricted endowment _____ %

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

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

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b	

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		99,373.	20,533.	78,840.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				78,840.

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (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)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
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)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

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

1	Total revenue, gains, and other support per audited financial statements	1	51,574,112.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	483,714.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	483,714.
3	Subtract line 2e from line 1	3	51,090,398.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	311,690.
c	Add lines 4a and 4b	4c	311,690.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	51,402,088.

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

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

1	Total expenses and losses per audited financial statements	1	50,658,471.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	483,714.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	602.
e	Add lines 2a through 2d	2e	484,316.
3	Subtract line 2e from line 1	3	50,174,155.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	50,174,155.

Part XIII Supplemental Information.

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

PART XI, LINE 4B - OTHER ADJUSTMENTS:

SECTION 481 NET POSITIVE ADJUSTMENT FOR CASH TO ACCRUAL ACCOUNTING METHOD

CHANGE, TO BE RECOGNIZED EVENLY OVER FOUR YEARS.

\$1,246,757/4 = \$311,690 (4TH OF FOUR YEAR RECOGNITION) 311,690.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

UNREALIZED LOSS ON INVESTMENTS 602.

PART XI, LINE 2B AND PART XII, LINE 2A - DONATED SERVICES:

DIFFERENT FROM GAAP REPORTING, FOR TAX REPORTING PURPOSES ON THE FORM 990,

THE VALUE OF DONATED SERVICES ARE NOT INCLUDED IN CONTRIBUTIONS. THEREFORE

THE \$483,714 VALUE OF DONATED ADVERTISING SPACE FROM GOOGLE ADWORDS HAS

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

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

2016

▶ Attach to Form 990.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization GREATERGOOD.ORG	Employer identification number 20-4846675
-------------------------------------------------	--------------------------------------------------

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

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

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,	0	0	GRANT-MAKING	N/A	167,320.
EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA,	0	0	GRANT-MAKING	N/A	251,910.
EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM	0	0	GRANT-MAKING	N/A	700.
MIDDLE EAST AND NORTH AFRICA - ALGERIA, BAHRAIN, DJIBOUTI, EGYPT,	0	0	GRANT-MAKING	N/A	67,380.
NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	0	0	GRANT-MAKING AND PROGRAM SERVICE	EXPLORATION, STUDY, AND PROTECTING BIODIVERSITY	221,824.
RUSSIA AND NEIGHBORING STATES - ARMENIA, AZERBAIJAN, BELARUS,	0	0	GRANT-MAKING	N/A	1,109.
SOUTH AMERICA - ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA, ECUADOR,	0	0	GRANT-MAKING	N/A	383,787.
SOUTH ASIA - AFGHANISTAN, BANGLADESH, BHUTAN, INDIA, MALDIVES,	0	0	GRANT-MAKING	N/A	105,050.
3 a Sub-total	0	0			1,199,080.
b Total from continuation sheets to Part I	0	0			223,093.
c Totals (add lines 3a and 3b)	0	0			1,422,173.

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

Schedule F (Form 990) 2016

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	RESCUED ANIMALS	0.		139,066.	PET FOOD	FMV
		SOUTH AMERICA	HUNGER & POVERTY	10,000.	CHECK	0.		
		SUB-SAHARAN AFRICA	RESCUED ANIMALS	131,221.	WIRE	0.		
		SUB-SAHARAN AFRICA	BREAST CANCER & WOMEN'S HEALTH	1,155.	CHECK	0.		
		SUB-SAHARAN AFRICA	CHILDREN'S HEALTH & WELL BEING	1,163.	CHECK	0.		
		SUB-SAHARAN AFRICA	HUNGER & POVERTY	368.	CHECK	0.		
		SUB-SAHARAN AFRICA	LITERACY & CHILDREN'S EDUCATION	3,970.	CHECK	0.		
		SOUTH ASIA	RESCUED ANIMALS	40,835.	CHECK	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **30**

3 Enter total number of other organizations or entities **0**

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	RESCUED ANIMALS	10,000.	CHECK	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	LITERACY & CHILDREN'S EDUCATION	25,000.	CHECK	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	LITERACY & CHILDREN'S EDUCATION	5,995.	WIRE	0.		
		SOUTH AMERICA	PROTECTING/RESTORING ENVIRONMENT	278,574.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	HUNGER & POVERTY	8,500.	CHECK	0.		
		SOUTH ASIA	HUNGER & POVERTY	10,763.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	RESCUED ANIMALS	69,798.	CHECK	0.		
		SOUTH ASIA	RESCUED ANIMALS	2,085.	CHECK	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	RESCUED ANIMALS	185.	CHECK	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	RESCUED ANIMALS	4,140.	CHECK	0.		
		EUROPE	RESCUED ANIMALS	430.	CHECK	0.		
		RUSSIA AND NEIGHBORING STATES	RESCUED ANIMALS	555.	CHECK	0.		
		SOUTH AMERICA	RESCUED ANIMALS	4,640.	CHECK	0.		
		SOUTH ASIA	RESCUED ANIMALS	2,804.	CHECK	0.		
		SUB-SAHARAN AFRICA	RESCUED ANIMALS	7,929.	CHECK	0.		
		SOUTH ASIA	RESCUED ANIMALS	10,146.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	HUNGER & POVERTY	62,745.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	LITERACY & CHILDREN'S EDUCATION	1,115.	WIRE	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST AND NORTH AFRICA	HUNGER & POVERTY	3,380.	CHECK	0.		
		SUB-SAHARAN AFRICA	HUNGER & POVERTY	4,299.	CHECK	0.		
		SUB-SAHARAN AFRICA	HUNGER & POVERTY	5,024.	CHECK	0.		
		SUB-SAHARAN AFRICA	LITERACY & CHILDREN'S EDUCATION	20.	CHECK	0.		
		MIDDLE EAST AND NORTH AFRICA	CHILDREN'S HEALTH & WELL BEING	64,000.	CHECK	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	BREAST CANCER & WOMEN'S HEALTH	408.	CHECK	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	CHILDREN'S HEALTH & WELL BEING	13.	CHECK	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	HUNGER & POVERTY	4,171.	CHECK	0.		
		SUB-SAHARAN AFRICA	BREAST CANCER & WOMEN'S HEALTH	9,723.	CHECK	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHILDREN'S HEALTH & WELL BEING	43.	CHECK	0.		
		SUB-SAHARAN AFRICA	HUNGER & POVERTY	4,949.	CHECK	0.		
		SUB-SAHARAN AFRICA	RESCUED ANIMALS	5,235.	CHECK	0.		
		NORTH AMERICA	PROTECTING/RESTORING ENVIRONMENT	42,800.	CHECK	0.		
		EAST ASIA AND THE PACIFIC	RESCUED ANIMALS	79,440.	CHECK	0.		
		SUB-SAHARAN AFRICA	RESCUED ANIMALS	7,160.	WIRE	0.		
		SOUTH ASIA	RESCUED ANIMALS	9,430.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	RESCUED ANIMALS	16,690.	CHECK	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	HUNGER & POVERTY	115,362.	CHECK	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	LITERACY & CHILDREN'S EDUCATION	10,500.	WIRE	0.		
		NORTH AMERICA	RESCUED ANIMALS	11,000.	CHECK	0.		
		SOUTH AMERICA	PROTECTING/RESTORING ENVIRONMENT	9,060.	WIRE	0.		
		SOUTH AMERICA	PROTECTING/RESTORING ENVIRONMENT	80,142.	CHECK	0.		

Part IV Foreign Forms

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

Schedule F (Form 990) 2016

Part V Supplemental Information

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

PART I, LINE 2:

EACH NON-PROFIT THAT RECEIVES GRANTS FROM GREATERGOOD.ORG IS REQUIRED TO
SUPPLY PROOF OF THEIR NON-PROFIT STATUS UNDER THE LAWS OF THE COUNTRY IN
WHICH IT WAS FORMED PRIOR TO RECEIVING FUNDS. THEY MUST ALSO SIGN A MEMO
OF UNDERSTANDING THAT OUTLINES OUR INTENTIONS FOR USE OF FUNDS AND THAT
THEY AGREE TO USE THE FUNDS AS SPECIFIED. AFTER THE END OF OUR FISCAL
YEAR, WE REQUIRE A REPORT FROM EACH CHARITY THAT RECAPS HOW FUNDS WERE
USED. IF FUNDS ARE NOT USED PROPERLY OR DOCUMENTATION FOR HOW FUNDS WERE
USED IS NOT PROVIDED, FUTURE FUNDS CAN BE WITHHELD. WHEN POSSIBLE,
ACTUAL SITE VISITS ARE CONDUCTED TO SEE ACTUAL EVIDENCE OF THE USE OF
FUNDS.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

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

▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Open to Public
Inspection

Name of the organization **GREATERGOOD.ORG** Employer identification number **20-4846675**

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
1MATTERS.ORG 3450 W. CENTRAL AVE. #108 TOLEDO, OH 43606	26-2052237	501(C)(3)	6,175.	0.			HUNGER & POVERTY
4 PAWS ANIMAL RESCUE PO BOX 735 WILLIS, MI 48191	27-3741642	501(C)(3)	0.	1,112,931.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
A BETTER LIFE - PEACE, LOVE & ANIMALS - 19135 NUCLEAR PLANT RD - TANNER, AL 35671	27-0977892	501(C)(3)	6,015.	0.			RESCUED ANIMALS
ABANDONED PET RESCUE 1137 NE 9TH AVE FORT LAUDERDALE, FL 33304-2110	65-0655473	501(C)(3)	10,000.	0.			RESCUED ANIMALS
ACTORS & OTHERS FOR ANIMALS 11523 BURBANK BLVD NORTH HOLLYWOOD, CA 91601	95-2783139	501(C)(3)	0.	5,187.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
ALBANY HUMANE 1705 W OAKRIDGE DR ALBANY, GA 31707	23-7013884	501(C)(3)	0.	5,061.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **248.**

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

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

Schedule I (Form 990) (2016)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALL 4 PAWS 708 PETIGRU DR PAWLEYS ISLAND, SC 29585	45-3676896	501(C)(3)	0.	115,635.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
ALL ABOUT ANIMALS RESCUE 4401 WEST DAILEY STREET GLENDALE, AZ 85306	27-5410456	501(C)(3)	4,740.	12,750.	FMV	VACCINATIONS	RESCUED ANIMALS
ALL ABOUT SPAY NEUTER 104 BEACH ROAD MASSAPEQUA, NY 11758	26-0095027	501(C)(3)	4,190.	1,337,001.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
ALLEN COUNTY SPCA 4914 SOUTH HANNA STREET FORT WAYNE, IN 46806	35-6042135	501(C)(3)	20.	5,357.	FMV	KITTY LITER	RESCUED ANIMALS
AMERICAN RED CROSS 431 18TH STREET, NW WASHINGTON, DC 20006	53-0196605	501(C)(3)	0.	15,000.	FMV	CLOTHING, ANIMAL CARE ITEMS	HUNGER & POVERTY
AMERICAN SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS - 520 EIGHTH AVENUE, 7TH FLOOR - NEW YORK, NY 10018	13-1623829	501(C)(3)	0.	76,873.	FMV	VACCINATIONS, PET FOOD	RESCUED ANIMALS
ANGELS OF ASSISI 415 CAMPBELL AVE ROANOKE, VA 24016	54-2021941	501(C)(3)	27,120.	148,851.	FMV	VACCINATIONS, PET FOOD	RESCUED ANIMALS
ANIMAL HOUSE PROJECT 1055 S HANOVER ST STE 1 POTTSTOWN, PA 19465	23-3098089	501(C)(3)	0.	1,249,222.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
ANIMAL LIFELINE 1111 EASTON ROAD, WARRINGTON PAVILLION #24 - WARRINGTON, PA 18976	20-4444813	501(C)(3)	4,760.	47,281.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANIMAL REFUGEE RESPONSE 2905 SAN PABLO DAM RD SAN PABLO, CA 94803	45-3248828	501(C)(3)	0.	21,736.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
ANIMAL RESCUE FUND OF THE HAMPTONS 91 DANIELS HOLE ROAD WAINSCOTT, NY 11975	23-7400663	501(C)(3)	0.	5,546.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
ANIMAL RESCUE LEAGUE OF IOWA 5452 NE 22ND ST. DES MOINES, IA 50313	42-0680427	501(C)(3)	5,000.	46,068.	FMV	PET TREATS/TOY/PROD PET FOOD	RESCUED ANIMALS
ANIMAL RESOURCE FOUNDATION OF IOWA PO BOX 723 PALO, IA 52324	94-3471348	501(C)(3)	0.	876,898.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
ANIMAL SHELTER OF NORTHEAST NEBRASKA - 1000 EAST OMAHA AVE - NORFOLK, NE 68701	47-0792814	501(C)(3)	500.	8,208.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
ANIMAL WELFARE LEAGUE 10305 SOUTHWEST HIGHWAY CHICAGO RIDGE, IL 60415	36-2235155	501(C)(3)	1,000.	7,939.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
ANIMEALS 1700 RANKIN ST. MISSOULA, MT 59808	20-4694132	501(C)(3)	0.	196,857.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
ARIZONA ANIMAL WELFARE LEAGUE 25 NORTH 40TH ST. PHOENIX, AZ 85034	23-7149453	501(C)(3)	0.	82,659.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
ASAVET CHARITIES 5408 S 12TH AVE TUCSON, AZ 85745	46-5746312	501(C)(3)	0.	11,676.	FMV	VACCINATIONS	RESCUED ANIMALS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AUSTIN PETS ALIVE 1156 W. CESAR CHAVEZ ST AUSTIN, TX 78703	74-2893360	501(C)(3)	23,910.	32,950.	FMV	KITTY LITER, VACCINATIONS	RESCUED ANIMALS
AZALEA CITY CAT COALITION PO BOX 1612 MOBILE, AL 36633	26-1999865	501(C)(3)	0.	7,482.	FMV	PET FOOD, PET TREATS, VACCINATIONS	RESCUED ANIMALS
BEAUFORT COUNTY FIRST STEPS 2201 BOUNDARY ST. BEAUFORT, SC 29902	57-1097779	501(C)(3)	0.	97,437.	FMV	BOOKS	LITERACY & CHILDREN'S EDUCATION
BERKSHIRE HUMANE SOCIETY 214 BARKER ROAD PITTSFIELD, MA 01201	04-3148018	501(C)(3)	0.	5,546.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
BERNARD P. FLORIANI FOUNDATION DBA BERNIE'S BOOK BANK - 917 NORTH SHORE DR. - LAKE BLUFF, IL 60044	27-0914453	501(C)(3)	0.	712,330.	FMV	BOOKS	LITERACY & CHILDREN'S EDUCATION
BEST FRIENDS ANIMAL SOCIETY 5001 ANGEL CANYON RD. KANAB, UT 84741	23-7147797	501(C)(3)	0.	48,500.	FMV	VACCINATIONS	RESCUED ANIMALS
BISHOP'S SMALL DOG RESCUE 118 E. NORTH ST. WAYNET, IL 61379	45-5360501	501(C)(3)	500.	6,415.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
BLIND CAT RESCUE & SANCTUARY, INC. 3101 E. GREAT MARSH CHURCH ROAD ST. PAULS, NC 28384	20-3410498	501(C)(3)	16,842.	0.			RESCUED ANIMALS
BUCKS COUNTY SPCA PO BOX 277 LAHASKA, PA 18931	23-1365196	501(C)(3)	3,395.	1,940.	FMV	VACCINATIONS	RESCUED ANIMALS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAMP HAVEN KENNELS 1907 ROUTE 2023 MONONGAHELA, PA 15063	25-1847581		0.	10,794.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
CANINE COLLECTIVE 4365 MAYNARD RD. DELAWARE, OH 43015	26-1495848	501(C)(3)	0.	616,081.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
CAROLINA WATERFOWL RESCUE PO BOX 1484 INDIAN TRAIL, NC 28079	20-1938232	501(C)(3)	7,000.	0.			RESCUED ANIMALS
CASHIERS-HIGHLANDS HUMANE SOCIETY P.O. BOX 638 CASHIERS, NC 28717	58-1798769	501(C)(3)	0.	6,213.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
CAT HAVEN RANCH PO BOX 64 PINEVILLE, MO 64856	46-3098118	501(C)(3)	0.	5,820.	FMV	VACCINATIONS	RESCUED ANIMALS
CAT WELFARE ASSOCIATION 741 WETMORE RD COLUMBUS, OH 43214	31-6049232	501(C)(3)	0.	45,805.	FMV	PET BEDS, PET FOOD	RESCUED ANIMALS
CATNIP FOUNDATION 15442 JACK FORK RD FOLSOM, LA 70437	47-4528787	501(C)(3)	5,000.	2,150.	FMV	VACCINATIONS, KENNELS	RESCUED ANIMALS
CENTRAL OHIO POMERANIAN RESCUE 1355 CURVE ROAD DELAWARE, OH 43015	46-2966619	501(C)(3)	500.	6,415.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
CHARLESTON ANIMAL SOCIETY 2455 REMOUNT ROAD NORTH CHARLESTON, SC 29406	57-6021863	501(C)(3)	10,000.	0.			RESCUED ANIMALS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHULA VISTA ANIMAL CARE FACILITY 130 BEYER WAY CHULA VISTA, CA 91910	95-6000690	170(C)(1)	0.	9,700.	FMV	VACCINATIONS	RESCUED ANIMALS
CODE 3 ASSOCIATES 1530 SKYWAY DRIVE LONGMONT, CO 80504	84-1461821	501(C)(3)	7,000.	0.			RESCUED ANIMALS
CODY'S FRIENDS 4702 N FLOWING WELLS TUCSON, AZ 85705	47-4052727	501(C)(3)	185.	941,459.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
COFFEE COUNTY HUMANE SOCIETY PO BOX 252 MANCHESTER, TN 37349	62-1543154	501(C)(3)	0.	42,066.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
COMPANION ANIMAL ALLIANCE OF BATON ROUGE - 2680 PROGRESS ROAD - BATON ROUGE, LA 70816	27-1204719	501(C)(3)	7,405.	0.			RESCUED ANIMALS
DOG AIDE COMMUNITY AWARENESS PROGRAM - 511 RIGGS ST - FENTON, MI 48430	45-5352922	501(C)(3)	0.	29,355.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
DOWNTOWN DOG RESCUE 10941 GARFIELD PLACE SOUTH GATE, CA 90280	46-1958507	501(C)(3)	0.	6,690.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
DUNCAN'S PLACE, A CAT SANCTUARY 742 S. EDINBURGH DR LOVELAND, CO 80537	80-0201322	501(C)(3)	0.	7,195.	FMV	VACCINATIONS	RESCUED ANIMALS
DUTCHESS CO SPCA 636 VIOLET AVENUE HYDE PARK, NY 12538	14-1340058	501(C)(3)	0.	9,807.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EMILY'S ANIMAL WELFARE 1309 WARSON PLACE ST. LOUIS, MO 63117	81-2407036	501(C)(3)	0.	3,390,437.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
FENCES FOR FIDO PO BOX 42265 PORTLAND, OR 97242	30-0554675	501(C)(3)	10,977.	0.			RESCUED ANIMALS
FERAL CAT CARETAKERS COALITION 11956 DORTHY STREET #7 LOS ANGELES, CA 90049	95-4781600	501(C)(3)	1,140.	1,915,949.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
FIRST BOOK 1319 F STREET NW WASHINGTON, DC 20004	52-1779606	501(C)(3)	6,032.	0.			LITERACY & CHILDREN'S EDUCATION
FIRST COAST NO MORE HOMELESS PETS 6817 NORWOOD AVE. JACKSONVILLE, FL 32210	01-0709158	501(C)(3)	0.	6,790.	FMV	VACCINATIONS	RESCUED ANIMALS
FIXNATION P.O. BOX 26 WOODLAND HILLS, CA 91367	83-0452460	501(C)(3)	11,195.	0.			RESCUED ANIMALS
FOOD RECOVERY NETWORK 4321 HARTWICK ROAD, SUITE 316 COLLEGE PARK, MD 20740	45-3836775	501(C)(3)	23,134.	0.			HUNGER & POVERTY
FOOTHILLS ANIMAL SHELTER 580 MCINTYRE STREET GOLDEN, CO 80401	46-2809962	501(C)(3)	0.	11,670.	FMV	KITTY LITER	RESCUED ANIMALS
FOR FORGOTTEN FELINES 281 EHILANI ST PUKALANI, HI 96768	46-1022858	501(C)(3)	0.	231,216.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOR THE LOVE OF DOGS P. O. BOX 1597 SODDY DAISY, TN 37384	38-3752113	501(C)(3)	0.	2,411,690.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
FRIENDS OF MATENWA PO BOX 494 LINCOLN, MA 01773	27-2898086	501(C)(3)	10,000.	0.			HUNGER & POVERTY
FROM FORGOTTEN TO FOREVER RESCUE & TRANSPORT - 3704 INDIANPIPE CIRCLE - COLORADO SPRINGS, CO 80918	47-2190205	501(C)(3)	9,265.	0.			RESCUED ANIMALS
GINGERED BLESSINGS ANIMAL RESCUE 202 AVENUE U LEVELLAND, TX 79336	47-5465264	501(C)(3)	6,680.	0.			RESCUED ANIMALS
GLOBAL WILDLIFE CONSERVATION PO BOX 129 AUSTIN, TX 78767	26-2887967	501(C)(3)	5,993.	0.			PROTECTING/RESTORING ENVIRONMENT
GREAT LAKES BENGAL RESCUE 10720 HITE CREEK ROAD LOUISVILLE, KY 40241	26-1120616	501(C)(3)	0.	1,100,684.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
GREENHILL HUMANE SOCIETY 88530 GREEN HILL RD EUGENE, OR 97402	93-0467412	501(C)(3)	0.	22,759.	FMV	PET TREATS/TOY/PROD VACCINATIONS	RESCUED ANIMALS
HALO LOVE PEACE 8 AVON LANE S BARRINGTON, IL 60010	81-1738093	501(C)(3)	0.	3,499,327.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
HAPPY TAILS RESCUE FOUNDATION 260 2222N LN NW OAK GROVE, MN 55011	20-2388312	501(C)(3)	0.	172,603.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HELP HUMANE SOCIETY 17122 BEL RAY PLACE BELTON, MO 64012	43-1787083	501(C)(3)	5,018.	0.			RESCUED ANIMALS
HICKMAN HUMANE SOCIETY 9026 SO. TATUM CREEK ROAD LYLES, TN 37098	62-1639736	501(C)(3)	0.	14,550.	FMV	VACCINATIONS	RESCUED ANIMALS
HOMeward PET ADOPTION CENTER 13132 NE 177TH PLACE WOODINVILLE, WA 98072	91-1526803	501(C)(3)	7,133.	4,524.	FMV	VACCINATIONS, PET FOOD	RESCUED ANIMALS
HSUS 700 PROFESSIONAL DRIVE GAITHERSBURG, MD 20879	53-0225390	501(C)(3)	17,665.	0.			RESCUED ANIMALS
HUMANE EDUCATIONAL SOCIETY 212 N HIGHLAND PARK AVE CHATTANOOGA, TN 37404	62-0478240	501(C)(3)	0.	9,753.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
HUMANE SOCIETY OF CENTRAL OREGON 61170 SE 27TH ST BEND, OR 97702	93-0616957	501(C)(3)	0.	34,812.	FMV	KITTY LITER, PE FOOD	RESCUED ANIMALS
HUMANE SOCIETY OF CHARLOTTE 2700 TOOMEY AVENUE CHARLOTTE, NC 28203	58-1342479	501(C)(3)	0.	5,335.	FMV	VACCINATIONS	RESCUED ANIMALS
HUMANE SOCIETY OF FORSYTH COUNTY, GA - 4440 KEITH BRIDGE ROAD - CUMMING, GA 30041	58-1375502	501(C)(3)	0.	28,137.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
HUMANE SOCIETY OF LOUISIANA PO BOX 740321 NEW ORLEANS, LA 70174	58-1795272	501(C)(3)	15,000.	74,071.	FMV	PET FOOD, KENNELS, VACCINATIONS, MEDICAL TESTS	RESCUED ANIMALS

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HUMANE SOCIETY OF MCCORMICK COUNTY PO BOX 900 MCCORMICK, SC 29835	57-1099596	501(C)(3)	1,000.	6,415.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
HUMANE SOCIETY OF TAMPA BAY 3607 N ARMENIA AVE TAMPA, FL 33607	59-0799907	501(C)(3)	0.	7,349.	FMV	VACCINATIONS, PET FOOD	RESCUED ANIMALS
HUMANE SOCIETY OF THE DELTA 16175 HWY 49 MARVELL, AR 72366	26-2283048	501(C)(3)	0.	7,792.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
HUMANE SOCIETY PET RESCUE AND ADOPTION CENTER - 4200 BROOKE AVE - GADSDEN, AL 35904	63-0676560	501(C)(3)	0.	6,420.	FMV	VACCINATIONS	RESCUED ANIMALS
HUNT COUNTY PETS ALIVE PO BOX 97 LONE OAK, TX 75453	47-3818349	501(C)(3)	0.	9,700.	FMV	VACCINATIONS	RESCUED ANIMALS
IFAW 290 SUMMER STREET YARMOUTH PORT, MA 02675	31-1594197	501(C)(3)	46,254.	0.			RESCUED ANIMALS
INTERFAITH MINISTRIES FOR GREATER HOUSTON - 3303 MAIN ST - HOUSTON, TX 77002	74-1488102	501(C)(3)	0.	237,529.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
JACKSONVILLE ANIMAL CARE AND PROTECTIVE SERVICES - 2020 FOREST STREET - JACKSONVILLE, FL 32204	59-6000344	170(C)(1)	0.	9,700.	FMV	VACCINATIONS	RESCUED ANIMALS
JEFFERSON PARISH ANIMAL SHELTER #1 HUMANE WAY JEFFERSON, LA 70123	72-6013920	170(C)(1)	0.	13,752.	FMV	KENNELS, VACCINATIONS, MEDICAL TESTS	RESCUED ANIMALS

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JURASSIC BARK RESCUE 926 KENFOREST DR MISSOURI CITY, TX 77489	27-3058150	501(C)(3)	16,680.	0.			RESCUED ANIMALS
KATIE'S ROADSIDE RESCUE 7025 W FM 476 POTEET, TX 78065	45-1551568	501(C)(3)	0.	259,607.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
KENTUCKY PETS ALIVE 224 PRODUCTION CT IS LOUISVILLE, KY 40299	27-1920439	501(C)(3)	0.	1,124,209.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
KIDS NEED TO READ 2450 W BROADWAY ROAD, SUITE 110 MESA, AZ 85202	26-2755631	501(C)(3)	310.	577,500.	FMV	BOOKS	LITERACY & CHILDREN'S EDUCATION
KITTEN RESCUE 3519 CASITAS AVENUE LOS ANGELES, CA 90039	95-4670174	501(C)(3)	2,889.	2,466.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
LAWRENCE COUNTY HUMANE SOCIETY 820 ISAAC PARK ROAD LOUISA, KY 41230	61-1208526	501(C)(3)	0.	5,604.	FMV	VACCINATIONS	RESCUED ANIMALS
LEKOTEK 2001 N CLYBOURN AVE, SUITE 100 CHICAGO, IL 60614	36-2244895	501(C)(3)	46,013.	0.			CHILDREN'S HEALTH & WELL BEING
LIBERTY HUMANE SOCIETY 235 JERSEY CITY BLVD JERSEY CITY, NJ 07305	22-3585263	501(C)(3)	4,100.	40,628.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
LOLLYPOP FARM, HUMANE SOCIETY OF GREATER ROCHESTER - 99 VICTOR RD - FARIPORT, NY 14450	16-0743047	501(C)(3)	0.	9,169.	FMV	VACCINATIONS, PET FOOD	RESCUED ANIMALS

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LONE STAR PYRS AND PAWS 5531 FM 2194 CELESTE, TX 75458	80-0190229	501(C)(3)	0.	1,300,655.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
LOUISIANA BOBCAT REFUGE PO BOX 1680 EUNICE, LA 70535	27-3791636	501(C)(3)	20.	10,544.	FMV	KENNELS, STEEL BUILDING	RESCUED ANIMALS
LOUISIANA PET PANTRY 8440 JEFFERSON HWY STE 301 BATON ROUGE, LA 70809	47-2729190	501(C)(3)	0.	368,253.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
LUMEN LS, INC 640 SE 13TH ST APT. 301 DANIA, FL 33004	47-3089932	501(C)(3)	1,460.	6,848.	FMV	KITTY LITER, PE FOOD	RESCUED ANIMALS
MARIN HUMANE SOCIETY 171 BEL MARIN KEYS BLVD NOVATO, CA 94949	94-1156562	501(C)(3)	0.	51,583.	FMV	VACCINATIONS, PET FOOD	RESCUED ANIMALS
MARYLAND SPCA 3300 FALLS ROAD BALTIMORE, MD 21211	52-6001558	501(C)(3)	0.	13,650.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
MAUI PITBULL 99 KANE ROAD HAIKU, HI 96708	27-1204305	501(C)(3)	0.	87,318.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
MIDWEST GREYHOUND ADOPTION, INC. PO BOX 338 SUGAR GROVE, IL 60554	36-3884066	501(C)(3)	10,000.	0.			RESCUED ANIMALS
MILK AND BOOKIES 1448 15TH ST. #202 SANTA MONICA, CA 90404	26-3245228	501(C)(3)	1,000.	77,000.	FMV	BOOKS	LITERACY & CHILDREN'S EDUCATION

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MILO FOUNDATION 220 S GARRARD BLVD POINT RICHMOND, CA 94801	68-0337858	501(C)(3)	0.	5,783.	FMV	KITTY LITER	RESCUED ANIMALS
MOSBY FOUNDATION 415 NORTH COALTER STREET STAUNTON, VA 24401	20-1468817	501(C)(3)	0.	153,139.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
NATIONAL AUTISM ASSOCIATION ONE PARK AVENUE, SUITE 1 PORTSMOUTH, RI 02871	20-0032380	501(C)(3)	6,736.	0.			CHILDREN'S HEALTH & WELL BEING
NATIVE AMERICAN ADVANCEMENT FOUNDATION - PO BOX 64877 - TUCSON, AZ 85728	45-2725155	501(C)(3)	8,383.	0.			LITERACY & CHILDREN'S EDUCATION
NMDOG, INC. 9445 COORS BLVD NW #171 ALBUQUERQUE, NM 87114	45-2781292	501(C)(3)	0.	6,099.	FMV	PET BEDS, PET FOOD	RESCUED ANIMALS
NO NONSENSE NEUTERING 1044 N QUEBEC ST ALLENTOWN, PA 18109	26-3430346	501(C)(3)	0.	5,904.	FMV	VACCINATIONS	RESCUED ANIMALS
NORCAL BULLY BREED RESCUE 1852 PORTELLO WAY LINCOLN, CA 95648	46-3665141	501(C)(3)	0.	204,090.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
NORTH TEXAS FOOD BANK 4500 S. COCKRELL HILL RD DALLAS, TX 75237	75-1785357	501(C)(3)	0.	184,290.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
NORTHWEST HARVEST PO BOX 12272 SEATTLE, WA 98102	91-0826037	501(C)(3)	15,000.	0.			HUNGER & POVERTY

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ONE BY ONE ANIMAL ADVOCATES 216 11TH AVENUE WEST HUNTINGTON, WV 25701	35-2541637	501(C)(3)	500.	7,469.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
OPERATION GRATITUDE 21100 LASSEN STREET CHATSWORTH, CA 91406	20-0103575	501(C)(3)	0.	20,465.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
OPERATION SUPPORT OUR TROOPS - AMERICA - 1807 S WASHINGTON SUITE 110 #359 - NAPERVILLE, IL 60565	20-4275756	501(C)(3)	13,178.	0.			HUNGER & POVERTY
PAL HUMANE SOCIETY 4175 N RANCHO DRIVE, SUITE 110 LAS VEGAS, NV 89130	95-4516403	501(C)(3)	0.	72,743.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
PALS (PETS ARE LOVING SUPPORT) ATLANTA - 2115 LIDDEL DRIVE NE - ATLANTA, GA 30324	58-1970421	501(C)(3)	0.	1,528,810.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
PARTNERS FOR PETS PO BOX 354 SPOKANE VALLEY, WA 99037	91-1720757	501(C)(3)	13,340.	0.			RESCUED ANIMALS
PATRIOTS PAWS SERVICE DOGS 254 RANCH TRAIL ROCKWALL, TX 75032	04-3815107	501(C)(3)	28,638.	0.			RESCUED ANIMALS
PAUSE 4 PAWS P O BOX 41028 PLYMOUTH, MN 55441	45-2865854	501(C)(3)	0.	305,654.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
PAWS (PROTECTIVE ANIMAL WELFARE SOCIETY) KC - 7833 WORNALL RD - KANSAS CITY, MO 64114	27-1087517	501(C)(3)	0.	940,290.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS

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PAWS CHICAGO 1933 N MARCEY STREET CHICAGO, IL 60614	36-4219778	501(C)(3)	0.	6,590.	FMV	VACCINATIONS, PET FOOD	RESCUED ANIMALS
PAWS ILLINOIS 9524 S 89TH AVE PALOS HILLS, IL 60465	46-3609869	501(C)(3)	0.	66,009.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
PAWS LA 1150 S. HOPE STREET - A LOS ANGELES, CA 90015	95-4178092	501(C)(3)	0.	167,899.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
PAWS N'TIME CANINE RESCUE 909 CARDINAL RD LANCASTER, PA 17601	46-2950458	501(C)(3)	500.	6,415.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
PEN PALS 5568 HWY 68 JACKSON, LA 70748	80-0646300	501(C)(3)	0.	18,930.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
PET PROJECT FOR PETS 2200 NW 9TH AVENUE WILTON MANORS, FL 33311	37-1440098	501(C)(3)	0.	2,028,730.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
PETS & PEOPLE HUMANE SOCIETY PO BOX 850587 YUKON, OK 73085	73-1435577	501(C)(3)	1,000.	1,264,358.	FMV	PET TREATS/TOY/PROD PET FOOD	RESCUED ANIMALS
PETS FOR PATRIOTS 218 E PARK AVE, SUITE 543 LONG BEACH, NY 11561	27-1082210	501(C)(3)	12,950.	0.			RESCUED ANIMALS
PETS FOR VETS P.O. BOX 10860 WILMINGTON, NC 28404	27-1250302	501(C)(3)	11,175.	0.			RESCUED ANIMALS

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PETS LIFELINE 19686 8TH STREET EAST SONOMA, CA 95476	94-2851279	501(C)(3)	0.	7,240.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
PITMAN ANIMAL RESCUE FOUNDATION 10626 OHIO AVE LOS ANGELES, CA 90024	47-2905327	501(C)(3)	0.	6,690.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
PITTSBURGH PET RELIEF 1037 DELFIELD DRIVE BETHEL PARK, PA 15102	81-2364490	501(C)(3)	0.	561,481.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
POSH PETS 770 PARK PLACE LONG BEACH, NY 11561	20-3536270	501(C)(3)	0.	5,811.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
PROJECT PETSNIIP, INC. 14790 SW 88 ST. #866 MIAMI, FL 33196	47-3351028	501(C)(3)	0.	5,820.	FMV	VACCINATIONS	RESCUED ANIMALS
PUPPY RESCUE MISSION PO BOX 1516 CELINA, TX 75009	27-4295476	501(C)(3)	8,375.	0.			RESCUED ANIMALS
RAINBOWS EDGE ANIMAL REFUGE 697 PINEHAVEN DR TILLMAN, SC 29943	30-0008001	501(C)(3)	0.	2,938,577.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
RANCHO COASTAL HUMANE SOCIETY 389 REQUEZA ST ENCINITAS, CA 92024	95-2151583	501(C)(3)	8,145.	68,827.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
RANGER PROJECT 15476 COON HOLLOW RD SE STAYTON, OR 97383	82-0608572	501(C)(3)	0.	22,820.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS

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READ ALOUD WEST VIRGINIA PO BOX 1784 CHARLESTON, WV 25326	55-0671504	501(C)(3)	0.	192,500.	FMV	BOOKS	LITERACY & CHILDREN'S EDUCATION
READ INDEED 625 ST. LOUIS ST., STE 20 HOPKINS, MN 55343	27-0376834	501(C)(3)	0.	96,250.	FMV	BOOKS	LITERACY & CHILDREN'S EDUCATION
RED LAKE ROSIE'S RESCUE, INC. 23880 SOUTH GOOD ROAD TRAIL, MN 56684	20-3917194	501(C)(3)	0.	6,408.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
REDROVER PO BOX 188890 SACRAMENTO, CA 95818	68-0124097	501(C)(3)	6,630.	0.			RESCUED ANIMALS
REMOTE AREA MEDICAL VOLUNTEER CORPS - 2200 STOCK CREEK BLVD. - ROCKFORD, TN 37853	58-1647546	501(C)(3)	12,480.	0.			RESCUED ANIMALS
MAYORS ALLIANCE FOR NYC'S ANIMALS INC. - 244 FIFTH AVE STE R290 - NEW YORK, NY 10001	73-1653635	501(C)(3)	0.	5,507.	FMV	KITTY LITER	RESCUED ANIMALS
RIMROCK HUMANE SOCIETY PO BOX 834 225 CANYON ROAD ROUNDUP, MT 59072	81-0531128	501(C)(3)	0.	23,179.	FMV	PET BEDS, PET FOOD	RESCUED ANIMALS
ROAD RUNNER FOOD BANK 5840 OFFICE BLVD NE ALBUQUERQUE, NM 87109	85-0278525	501(C)(3)	0.	73,540.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
ROYAL POTCAKE RESCUE P O BOX 2852 TUCKER, GA 30085	26-0718131	501(C)(3)	0.	1,041,635.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS

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SAN ANTONIO FOOD BANK 5200 OLD HIGHWAY 90 WEST SAN ANTONIO, TX 78227	74-2122979	501(C)(3)	0.	361,904.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
SAN DIEGO HUMANE SOCIETY 5500 GAINES ST SAN DIEGO, CA 92110	95-1661688	501(C)(3)	3,168.	741,161.	FMV	PET FOOD, PET TREATS, VACCINATIONS	RESCUED ANIMALS
SAN FRANCISCO ANIMAL CARE AND CONTROL - 1200 15TH STREET - SAN FRANCISCO, CA 94102	94-6000417	170(C)(1)	0.	91,882.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
SEATTLE HUMANE PET 13212 SE EASTGATE WAY BELLEVUE, WA 98005	91-0282060	501(C)(3)	0.	7,593.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
SECOND CHANCE ANIMAL SHELTER 111 YOUNG ROAD EAST BROOKFIELD, MA 01515	04-3490671	501(C)(3)	2,910.	7,891.	FMV	PET BEDS, PET FOOD, VACCINATIONS	RESCUED ANIMALS
SECOND HARVEST FOOD BANK NOLA 700 EDWARDS AVE NEW ORLEANS, LA 70123	72-0956468	501(C)(3)	0.	7,391.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
SECOND HARVEST FOOD BANK OF METROLINA - 500B SPRATT ST - CHARLOTTE, NC 28206	56-1352593	501(C)(3)	0.	61,392.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
SEVIER COUNTY HUMANE SOCIETY P.O. BOX 976 PIGEON FORGE, TN 37868	62-0938001	501(C)(3)	10,000.	0.			RESCUED ANIMALS
SILICONE VALLEY HUMANE SOCIETY 901 AMES AVE MILPITAS, CA 95035	94-1196215	501(C)(3)	0.	12,902.	FMV	KITTY LITER	RESCUED ANIMALS

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SOCIAL TEES ANIMAL RESCUE 325 EAST 5TH STREET NEW YORK, NY 10003	06-1818756	501(C)(3)	0.	5,062.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
SOLES4SOULS, INC. 319 MARTINGALE DRIVE OLD HICKORY, TN 37138	20-4023482	501(C)(3)	10,000.	0.			HUNGER & POVERTY
SOMERVILLE FOUNDATION 15 WESTSWOOD ROAD SOMERVILLE, MA 02143	45-2677862	501(C)(3)	0.	50,639.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
SOUTHERN CA GERMAN SHEPHEARD RESCUE - 6161 EL CAJON BLVD. #460 - SAN DIEGO, CA 92115	20-5500458	501(C)(3)	5,460.	0.			RESCUED ANIMALS
SPACE COAST KIBBLE KITCHEN 6321 SPINAKER DRIVE ROCKLEDGE, FL 32955	01-0964816	501(C)(3)	0.	134,358.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
SPCA OF WESTCHESTER 590 NORTH STATE ROAD BRIARCLIFF MANOR, NY 10510	13-1740069	501(C)(3)	0.	51,212.	FMV	VACCINATIONS, PET FOOD, KITTY LITTER	RESCUED ANIMALS
SPCA SUNCOAST 7734 CONGRESS ST. NEW PORT RICHEY, FL 33546	59-1144139	501(C)(3)	9,440.	0.			RESCUED ANIMALS
SPOKANIMAL 710 N. NAPA SPOKANE, WA 99202	91-1223929	501(C)(3)	310.	4,809.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
SPREAD THE WORD NEVADA 1065 AMERICAN PACIFIC DRIVE HENDERSON, NV 89074	22-3829041	501(C)(3)	0.	192,500.	FMV	BOOKS	LITERACY & CHILDREN'S EDUCATION

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ST. FRANCIS ANIMAL SHELTER 109 FLATIRON DRIVE BUFFALO, WY 82834	84-1393800	501(C)(3)	0.	9,886.	FMV	PET BEDS, VACCINATIONS	RESCUED ANIMALS
ST. PAWS COLORADO SPRINGS 3275 E. PLATTE AVE. UNIT E COLORADO SPRINGS, CO 80909	27-1133755	501(C)(3)	6,000.	959,918.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
ST. TAMMANY HUMANE SOCIETY 20384 HARRISON AVE COVINGTON, LA 70433	72-0543369	501(C)(3)	3,000.	8,629.	FMV	KENNELS, VACCINATIONS, MEDICAL TESTS	RESCUED ANIMALS
STEPPING STONES CANINE FOSTERS WV 6918 HERITAGE DR CHARLESTON, WV 25312	46-5627166	501(C)(3)	500.	6,415.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
SURFCAT CAFE & ADOPTIONS 4515 GATESHEAD BAY OXNARD, CA 93035	47-3663662	501(C)(3)	6,490.	0.			RESCUED ANIMALS
TEAM RUBICON 6171 W CENTURY BLVD, SUITE 310 LOS ANGELES, CA 90045	27-1720480	501(C)(3)	17,400.	0.			HUNGER & POVERTY
THE CAT HOUSE ON THE KINGS 7120 SOUTH KINGS RIVER ROAD PARLIER, CA 93648	27-0015288	501(C)(3)	1,000.	57,255.	FMV	KITTY LITER, PE FOOD	RESCUED ANIMALS
THE FUND FOR ANIMALS, INC. PO BOX 87598 MONTGOMERY VILLAGE, MD 20866	13-6218740	501(C)(3)	38,667.	0.			RESCUED ANIMALS
THE HUMANE SOCIETY OF TULSA 9521-B S. RIVERSIDE DRIVE, BOX 542 TULSA, OK 74137	73-1571476	501(C)(3)	5,540.	1,164.	FMV	VACCINATIONS	RESCUED ANIMALS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE LANGE FOUNDATION 2106 S. SEPULVEDA BLVD. LOS ANGELES, CA 90025	95-4407687	501(C)(3)	0.	5,951.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
THE LISA NOVAK COMMUNITY LIBRARIES 60 CUTTER MILL ROAD, SUITE 511 GREAT NECK, NY 11021	13-3650725	501(C)(3)	0.	77,000.	FMV	BOOKS	LITERACY & CHILDREN'S EDUCATION
THE OCEAN FOUNDATION 1320 19TH ST NW, 5TH FLOOR WASHINGTON, DC 20036	71-0863908	501(C)(3)	10,125.	0.			RESCUED ANIMALS
THE PARMA ANIMAL SHELTER, INC 2261 BROOK HOLLOW OVAL HINCKLEY, OH 44233	02-0693967	501(C)(3)	19,850.	0.			RESCUED ANIMALS
THE PAWS CLINIC 21210 GODDARD ROAD TAYLOR, MI 48180	27-3257737	501(C)(3)	0.	5,820.	FMV	VACCINATIONS	RESCUED ANIMALS
TNR RIVERSIDE 8428 WILLIAMSBURG PLACE RIVERSIDE, CA 92504	30-0880247	501(C)(3)	0.	142,810.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
TULSA SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS, INC. - 2910 MOHAWK BLVD. - TULSA, OK 74110	73-0608144	501(C)(3)	0.	79,673.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
UNITED PET FUND 9401 TOWNE SQUARE AVE. CINCINNATI, OH 45242	27-2582105	501(C)(3)	0.	965,382.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
VARIOUS PRODUCT GRANTS			0.	108,902.	FMV	VACCINATIONS, PET FOOD, SPAY/NETUER SERVICES	RESCUED ANIMALS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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VERMONT FOOD BANK 33 PARKER ROAD BARRE, VT 05641	22-3021942	501(C)(3)	0.	118,438.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
VETERAN HOMESTEAD 3 VICTORY LANE GARDNER, MA 01440	04-3199887	501(C)(3)	18,664.	0.			HUNGER & POVERTY
VETERANS VILLAGE OF SAN DIEGO 4141 PACIFIC HIGHWAY SAN DIEGO, CA 92110	95-3649525	501(C)(3)	18,664.	0.			HUNGER & POVERTY
WASHINGTON COUNTY ANIMAL SHELTER 801 W. CLYDESDALE DRIVE FAYETTEVILLE, AR 72701	71-6003197	501(C)(3)	0.	10,710.	FMV	VACCINATIONS	RESCUED ANIMALS
WAYNE COUNTY ANIMAL SHELTER 5694 BURBANK ROAD WOOSTER, OH 44691	34-6003005	501(C)(3)	0.	7,074.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
WE CARE ANIMAL RESCUE DBA HOOSIER HOOVES & HOUNDS - 85 SOUTH WESLEY ROAD - VEEDERSBURG, IN 47987	26-0738291	501(C)(3)	0.	27,972.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
WESTSIDE GERMAN SHEPHERD RESCUE OF LA - 2721 WIGTOWN RD - LOS ANGELES, CA 90064	41-2078176	501(C)(3)	0.	7,535.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
WILDLIFE FRIENDLY ENTERPRISE NETWORK - 433 SPROUT PATH NW - BAINBRIDGE ISLAND, WA 98110	20-3083333	501(C)(3)	6,276.	0.			PROTECTING/RESTORING ENVIRONMENT
WINGS OF RESCUE 9478 CHEROKEE LANE BEVERLY HILLS, CA 90210	45-3343408	501(C)(3)	68,200.	0.			RESCUED ANIMALS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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WONDER DOG RESCUE P.O. BOX 40121 SAN FRANCISCO, CA 94140-0121	26-3249838	501(C)(3)	500.	6,415.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
YOUTH WITHOUT BORDERS 8070 LA JOLLA SHORES DR PMB #138 LA JOLLA, CA 92037	56-2514200	501(C)(3)	8,000.	0.			HUNGER & POVERTY
ZEUS' RESCUES 4601 FRERET STREET NEW ORLEANS, LA 70115	46-1940493	501(C)(3)	0.	9,055.	FMV	KENNELS, VACCINATIONS, MEDICAL TESTS	RESCUED ANIMALS
A PETS WISH 810 S MAIN ST DEL RIO, TX 78840	46-1258600	501(C)(3)	0.	6,481.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
ADOPT RESCUE DOGS/LEGACY RANCH PO BOX 898 POINTBLANK, TX 77364	27-3563456	501(C)(3)	0.	16,253.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
ADORABLE MUTTS RESCUE 13547 ANDREW WAY HOUSTON, TX 77082	46-4761200	501(C)(3)	0.	78,133.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
ADORE HOUSTON 5225 KATY FREEWY STE 500 HOUSTON, TX 77007	45-2828055	501(C)(3)	0.	9,558.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
ALL BORDER COLLIE RESCUE 1054 FOREST HAVEN CT CONROE, TX 77384	26-3926511	501(C)(3)	0.	11,066.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
AMERICAN STREET CAT 213 23RD STREET BROOKLYN, NY 11232	90-0648758	501(C)(3)	0.	7,239.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BAILEY ANIMAL RESCUE TRUST 1610 WINDING CANYON CT KATY, TX 77493	47-6842847	501(C)(3)	0.	19,399.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
BARRIO DOGS P.O. BOX 230677 HOUSTON, TX 77223	27-2233574	501(C)(3)	0.	27,770.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
BFF PET ADOPTIONS 1165 N 4TH ST SILSBEE, TX 77656	45-4962629	501(C)(3)	0.	7,523.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
CAMO RESCUE - CITIZENS FOR ANIMALS OF MIDLAND ODESSA - 15014 MYSTIC BLUE TRAIL - CYPRESS, TX 77433	46-5486022	501(C)(3)	0.	9,861.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
CAPE KITTY RESCUE 971 KINGS WAY COLDSRING, TX 77331	46-3195057	501(C)(3)	0.	12,814.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
CATS FOR LIFE 12723 STILLINGTON DR HOUSTON, TX 77015	26-2538970	501(C)(3)	0.	53,962.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
CENTRAL TEXAS FELINE RESCUE 2106 WILLOW WAY ROUND ROCK, TX 78664	26-3536327	501(C)(3)	0.	14,379.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
CLIPPED EAR CAT SANCTUARY 206 A SOUTH LOOP 336 W-229 CONROE, TX 77304	26-2968977	501(C)(3)	0.	102,337.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
COCKER SPANIEL RESCUE EAST TEXAS 11937 MEMORIAL DR HOUSTON, TX 77024	76-0594052	501(C)(3)	0.	14,251.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CORRIDOR RESCUE 10134 HAMMERLY BLVD. HOUSTON, TX 77080	27-1168389	501(C)(3)	0.	41,132.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
EAST TEXAS PAWS 2881 FM 326 LUFKIN, TX 75901	26-0073773	501(C)(3)	0.	75,165.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
EASTHAVEN DOG RESCUE P. O. BOX 123 FRIENDSWOOD, TX 77549	81-1274369	501(C)(3)	0.	19,380.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
FORGOTTEN DOGS FIFTH WARD PROJECT 206 A SOUTH LOOP 336 W-229 CONROE, TX 77304	26-2968977	501(C)(3)	0.	6,051.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
FRIENDS FOR LIFE ANIMAL SHELTER 107 E. 22ND STREET HOUSTON, TX 77008	26-0020294	501(C)(3)	0.	18,807.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
FRIENDS LEAGUE CITY ANIMAL SHELTER P.O.BOX 57069 WEBSTER, TX 77598	26-4034216	501(C)(3)	0.	10,389.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
FRIENDS OF BARC 3200 CARR ST HOUSTON, TX 77026	75-3096252	501(C)(3)	0.	53,510.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
FRIENDS OF HARRIS COUNTY PETS 612 CANINO ROAD HOUSTON, TX 77076	27-2208248	501(C)(3)	0.	10,681.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
FRIENDS OF LEAGUE CITY ANIMAL SHELTER - P.O.BOX 57069 - WEBSTER, TX 77598	26-4034216	501(C)(3)	0.	22,496.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HILL COUNTRY CATS 206 DEER HOLLOW DR HORSESHOE BAY, TX 78657	20-4073290	501(C)(3)	0.	23,328.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
HOMELESS PET PLACEMENT LEAGUE P.O. BOX 273027 HOUSTON, TX 77277	76-0283479	501(C)(3)	0.	14,586.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
HOUSTON AREA DOBERMAN RESCUE 2429 BISSONNET, #755 HOUSTON, TX 77005	81-0623698	501(C)(3)	0.	10,786.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
K9 AIRLIFT 155 N. DEER LAKE ROAD HUFFMAN, TX 77336	26-4489947	501(C)(3)	0.	27,722.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
K9 KARE ANIMAL RESCUE 4958 WICK WILLOW LANE ALVIN, TX 77511	47-3294752	501(C)(3)	0.	41,105.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
KITTY CITY FERAL SANCTUARY 11511 KATY FREEWAY, SUITE 600 HOUSTON, TX 77079	20-8332516	501(C)(3)	0.	14,579.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
LAKE CHARLES PIT BULL RESCUE 419 CONTOUR DRIVE LAKE CHARLES, LA 70605	27-4078570	501(C)(3)	0.	7,649.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
LITTLE WOMAN HOME FOR ANIMALS 66 EVELYN LANE HUNTSVILLE, TX 77340	35-2159518	501(C)(3)	0.	59,720.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
LMN FELINE RESCUE P.O. BOX 600 HUFFMAN, TX 77336	26-4180772	501(C)(3)	0.	33,675.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOVE AT LAST PET RESCUE 22427 STAMFORD BROOK CT KATY, TX 77449	47-2925599	501(C)(3)	0.	5,053.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
MISSION FOR PAWS RESCUE & ADOPTION 6407 COG HILL DRIVE PASADENA, TX 77505	81-2918451	501(C)(3)	0.	6,316.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
OPERATION PETS ALIVE 175 N TAYLOR POINT DR SPRING, TX 77382	27-4226307	501(C)(3)	0.	61,058.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
PALACIOS PET PALS 217 5TH STREET PALACIOS, TX 77465	86-1066727	501(C)(3)	0.	45,853.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
PET RESCUE TEAM 13115 BASSFORD DR HOUSTON, TX 77099	81-1551636	501(C)(3)	0.	23,953.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
POODLE RESCUE 10611 GAWAIN LANE HOUSTON, TX 77024	81-0673717	501(C)(3)	0.	17,940.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
PUP SQUAD 547 THREE CORNERS HOUSTON, TX 77024	26-3396615	501(C)(3)	0.	10,450.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
PUPS PREVENT UNWANTED PETS 1884 BOSTIK ROAD CAT SPRING, TX 78933	05-0590896	501(C)(3)	0.	35,893.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
R.U.F.F. RESCUERS UNITED FOR FURRY FRIENDS - 132 OAK HOLLOW DR - LA VERNIA, TX 78121	77-0715244	501(C)(3)	0.	17,885.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS

Schedule I (Form 990)

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SECOND CHANCE PETS PO BOX 1216 LEAGUE CITY, TX 77574	76-0463217	501(C)(3)	0.	23,370.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
SOUTH SIDE STREET DOGS 8005 BOWEM #3 HOUSTON, TX 77051	46-3019202	501(C)(3)	0.	12,904.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
SOUTHERN COMFORTS ANIMAL RESCUE P.O. BOX 2112 ALVIN, TX 77512	36-4669590	501(C)(3)	0.	54,183.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
THE FORGOTTEN PET ADVOCATES P.O. BOX 3037 PEARLAND, TX 77588	45-4323174	501(C)(3)	0.	5,200.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
TINY PAWS & CHI RESCUE 18 WINTERWHEAT WOODLANDS, TX 77381	27-1100346	501(C)(3)	0.	9,002.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
TOMBALL SOS 9402 NAVAJO RD MAGNOLIA, TX 77354	75-3257313	501(C)(3)	0.	63,582.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
TX GREAT PYRENEES 13124 RANCHETTE RD. MONTGOMERY, TX 77356	76-0694131	501(C)(3)	0.	14,852.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
VOLUNTEERS FOR ANIMAL PROTECTION 2215 FM1960 EAST HUMBLE, TX 77338	76-0133402	501(C)(3)	0.	16,533.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS
WESTIE RESCUE 10811 LAKE WINDCREST MAGNOLIA, TX 77354	20-5652026	501(C)(3)	0.	12,880.	FMV	PET FOOD, PET TREATS	RESCUED ANIMALS

Schedule I (Form 990)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
RESCUE ANIMALS	8100	0.	421,906.	FAIR MARKET VALUE	PET FOOD

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

PART I, LINE 2:

EACH NON-PROFIT THAT RECEIVES GRANTS FROM GREATERGOOD.ORG IS REQUIRED TO
 SUPPLY PROOF OF THEIR NON-PROFIT STATUS PRIOR TO RECEIVING FUNDS. THEY
 MUST ALSO SIGN A MEMO OF UNDERSTANDING THAT OUTLINES OUR INTENTIONS FOR USE
 OF FUNDS AND THAT THEY AGREE TO USE THE FUNDS AS SPECIFIED. THROUGHOUT THE
 YEAR, WE REQUIRE REPORTS FROM EACH CHARITY THAT RECAPS HOW FUNDS WERE USED.
 IF FUNDS ARE NOT USED PROPERLY OR DOCUMENTATION FOR HOW FUNDS WERE USED IS
 NOT PROVIDED, FUTURE FUNDS CAN BE WITHHELD.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

2016

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

GREATERGOD.ORG

Employer identification number

20-4846675

Part I Questions Regarding Compensation

- 1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.
- | | |
|--------------------------------------------------------------------|-----------------------------------------------------------------------------|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as, maid, chauffeur, chef) |

- b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain
- 2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

- 3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.
- | | |
|--------------------------------------------------------------|-------------------------------------------------------------------------------------|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

- 4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

- 5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

- 6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

- 7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

- 8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

- 9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2016

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) LIZ BAKER EXECUTIVE DIRECTOR	(i)	135,917.	0.	0.	0.	5,671.	141,588.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART II, LINE 1

ELIZABETH BAKER IS COMPENSATED BY CHARITYUSA, AN UNRELATED ORGANIZATION. GREATERGORG REIMBURSES CHARITYUSA FOR 70% OF MS. BAKER'S COMPENSATION; THE 70% ALLOCATION FOR FISCAL YEAR 2016 WAS \$135,917 IN BASE COMPENSATION, AND \$5,671 FOR ADDITIONAL NONTAXABLE BENEFITS.

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
CHARITYUSA.COM	CREATOR/FOUNDER	2,831,000.	REIMBURSEME		X
CHARITYUSA.COM	CREATOR/FOUNDER	98,538.	ROYALTIES F		X

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: CHARITYUSA.COM

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

CREATOR/FOUNDER

(C) AMOUNT OF TRANSACTION \$ 2,831,000.

(D) DESCRIPTION OF TRANSACTION: REIMBURSEMENT OF EMPLOYEE SALARIES AND

BENEFITS PAID ON BEHALF OF GREATERGOOD.ORG, ACCOUNTING SERVICES,

SUPPLIES, AND BANK EXPENSES.

(E) SHARING OF ORGANIZATION REVENUES? = NO

(A) NAME OF PERSON: CHARITYUSA.COM

(D) DESCRIPTION OF TRANSACTION: ROYALTIES FROM CHARITYUSA FOR A

NONEXCLUSIVE LICENSE TO USE THE NAME AND/OR LOGO OF GREATERGOOD.ORG ON

WEBSITE ADVERTISING AND IN CONNECTION WITH THE SALE OF CHARITYUSA.COM

PRODUCTS.

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

OMB No. 1545-0047

2016

Open To Public
Inspection

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization: GREATERGOOD, ORG
Employer identification number: 20-4846675

Part I	Types of Property	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications	X		2,022,517.	FAIR MARKET VALUE
5	Clothing and household goods	X		15,000.	FAIR MARKET VALUE
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	X	12	40,105,242.	FAIR MARKET VALUE
20	Drugs and medical supplies	X	12	1,412,163.	FAIR MARKET VALUE
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other (KITTY LITTER)	X	12	290,867.	FAIR MARKET VALUE
26	Other (PET PRODUCTS)	X	12	98,227.	FAIR MARKET VALUE
27	Other (PET BEDS)	X	1	6,975.	FAIR MARKET VALUE
28	Other				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement: 29 0

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

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

Schedule M (Form 990) (2016)

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Open to Public
Inspection

Name of the organization

GREATERGOOD.ORG

Employer identification number

20-4846675

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

CHILDREN), ANIMALS, AND THE PLANET.

THE ORGANIZATION WILL MAKE EDUCATIONAL MATERIALS AVAILABLE TO THE

GENERAL PUBLIC AND PROVIDE FUNDING TO OTHER REGISTERED CHARITABLE

ORGANIZATIONS THAT ALLEVIATE AND ADDRESS THE ROOT CAUSES OF WORLD

HUNGER AND FOOD INSECURITY, EARLY DETECTION & TREATMENT OF BREAST

CANCER, PREVENTION & TREATMENT OF CHILDHOOD ILLNESS & DISEASE,

CHILDREN'S EDUCATION, PROTECTING AND RESTORING THE ENVIRONMENT, AND

PROVIDING FUNDING FOR THE CARE & FEEDING OF RESCUED ANIMALS.

FORM 990, PART I, LINE 6:

THE NUMBER OF VOLUNTEERS CONSISTS OF THE 10 VOLUNTEER BOARD MEMBERS.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

ORGANIZATIONS THAT ALLEVIATE AND ADDRESS THE ROOT CAUSES OF WORLD

HUNGER AND FOOD INSECURITY, EARLY DETECTION & TREATMENT OF BREAST

CANCER, PREVENTION & TREATMENT OF CHILDHOOD ILLNESS & DISEASE,

CHILDREN'S EDUCATION, PROTECTING AND RESTORING THE ENVIRONMENT, AND

PROVIDING FUNDING FOR THE CARE & FEEDING OF RESCUED ANIMALS.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

AVAILABLE FOR DISASTER RESPONSE, INCLUDING LARGE SCALE DISASTERS, LOCAL

DISASTERS AND LAW ENFORCEMENT RAIDS.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

BOOKS.

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

Schedule O (Form 990 or 990-EZ) (2016)

Name of the organization GREATERGOOD.ORG	Employer identification number 20-4846675
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FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

BREAST CANCER & WOMEN'S HEALTH:

\$16,456 WAS GRANTED TO NON-PROFIT PARTNERS AND VARIOUS HOSPITALS AND CLINICS IN THE U.S. AND ABROAD WHERE MAMMOGRAM SCREENING SERVICES ARE PROVIDED.

EXPENSES \$ 35,018. INCLUDING GRANTS OF \$ 16,456. REVENUE \$ 0.

PROTECTING/RESTORING THE ENVIRONMENT:

\$453,989 GRANTED TO NON-PROFIT PARTNERS WHO WORK TO PROTECT ENDANGERED ANIMAL SPECIES, PLANT TREES IN DEFORESTED AREAS TO OFFSET CARBON EMISSIONS AND STUDY HABITAT FOR CONSERVATION AND RESTORATION PURPOSES.

EXPENSES \$ 966,078. INCLUDING GRANTS OF \$ 453,989. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 2:

JULIA CHRISTOPHERSEN, JENNIFER FERMON, TIM KUNIN, GREG HESTERBERG AND ELIZABETH BAKER HAVE A BUSINESS RELATIONSHIP.

FORM 990, PART VI, SECTION B, LINE 11B:

THE 990 IS REVIEWED BY THE PRESIDENT AND TREASURER PRIOR TO FILING. IT IS PROVIDED TO THE REMAINING BOARD MEMBERS ONCE IT HAS BEEN FILED.

FORM 990, PART VI, SECTION B, LINE 12C:

OUR CONFLICT OF INTEREST POLICY APPLIES TO ANY DIRECTOR, PRINCIPAL OFFICER OR MEMBER OF A COMMITTEE WITH GOVERNING BOARD DELEGATED POWERS, WHO HAS DIRECT OR INDIRECT FINANCIAL INTEREST. WE HAVE NINE PEOPLE WHO FALL UNDER THIS DEFINITION.

Name of the organization GREATERGOOD.ORG	Employer identification number 20-4846675
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1. DUTY TO DISCLOSE

IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, AN INTERESTED PERSON MUST DISCLOSE THE EXISTENCE AND NATURE OF HIS OR HER FINANCIAL INTEREST TO THE BOARD OF DIRECTORS (BOARD) [OR SPECIAL COMMITTEES WITH BOARD DELEGATED POWERS (E.G. CONFLICTS OR COMPENSATION COMMITTEES)] CONSIDERING THE PROPOSED TRANSACTION OR ARRANGEMENT.

2. DETERMINING WHETHER A CONFLICT OF INTEREST EXISTS

AFTER DISCLOSURE OF THE FINANCIAL INTEREST, THE INTERESTED PERSON SHALL LEAVE THE BOARD OR COMMITTEE MEETING WHILE THE FINANCIAL INTEREST IS DISCUSSED AND VOTED UPON. THE REMAINING BOARD OR COMMITTEE MEMBERS SHALL DECIDE IF A CONFLICT OF INTEREST EXISTS.

3. PROCEDURES FOR ADDRESSING THE CONFLICT OF INTEREST

A. THE CHAIRPERSON OF THE BOARD OR COMMITTEE SHALL, IF APPROPRIATE, APPOINT A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT.

B. AFTER EXERCISING DUE DILIGENCE, THE BOARD OR COMMITTEE SHALL DETERMINE WHETHER THE CORPORATION CAN OBTAIN A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT WITH REASONABLE EFFORTS FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST.

C. IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY ATTAINABLE UNDER CIRCUMSTANCES THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST, THE BOARD OR COMMITTEE SHALL DETERMINE BY A MAJORITY VOTE OF THE DISINTERESTED DIRECTORS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE CORPORATION'S BEST INTEREST AND FOR ITS OWN BENEFIT AND WHETHER THE TRANSACTION IS FAIR AND REASONABLE TO THE CORPORATION AND SHALL MAKE ITS DECISION AS TO WHETHER TO ENTER INTO THE TRANSACTION OR ARRANGEMENT IN

Name of the organization GREATERGOOD.ORG	Employer identification number 20-4846675
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CONFORMITY WITH SUCH DETERMINATION.

4. VIOLATIONS OF THE CONFLICT OF INTEREST POLICY

A. IF THE BOARD OR COMMITTEE HAS REASONABLE CAUSE TO BELIEVE THAT A MEMBER

HAS FAILED TO DISCLOSE ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, IT SHALL

INFORM THE MEMBER OF THE BASIS FOR SUCH BELIEF AND AFFORD THE MEMBER AN

OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE.

B. IF, AFTER HEARING THE RESPONSE OF THE MEMBER AND MAKING SUCH FURTHER

INVESTIGATION AS MAY BE WARRANTED IN THE CIRCUMSTANCES, THE BOARD OR

COMMITTEE DETERMINES THAT THE MEMBER IS AN INTERESTED PERSON AND HAS FAILED

TO DISCLOSE AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST, IT SHALL TAKE

APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION.

FORM 990, PART VI, SECTION B, LINE 15A:

GREATERGOOD EXECUTIVE DIRECTOR COMPENSATION WAS REVIEWED PRIOR TO HIRE BY

THE BOARD BASED ON EXPERIENCE AND COMPARATIVE STUDIES OF SIMILAR POSITIONS.

THE BOARD VOTED TO ACCEPT THE SALARY FOR THE EXECUTIVE DIRECTOR. THE

EXECUTIVE DIRECTOR HAS THE AUTHORITY GIVEN BY THE BOARD TO HIRE OTHER

EMPLOYEES, INCLUDING KEY EMPLOYEES WITH COMPENSATION COMMENSURATE WITH

POSITION, EXPERIENCE AND SIMILAR COMPARATIVE SALARIES. THE LAST

COMPENSATION REVIEW WAS COMPLETED FEBRUARY OF 2016.

FORM 990, PART VI, SECTION C, LINE 19:

THE 990 IS POSTED ON OUR WEBSITE AT WWW.GREATERGOOD.ORG. GOVERNING

DOCUMENTS ARE AVAILABLE ON REQUEST. THE FINANCIAL STATEMENTS ARE MADE

AVAILABLE TO THE PUBLIC THROUGH THE ANNUAL REPORT.

FORM 990, PART X, LINE 27 AND 28:

Name of the organization GREATERGOOD.ORG	Employer identification number 20-4846675
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DURING 2017, MANAGEMENT DETERMINED THAT SEVERAL CONTRIBUTIONS RECEIVED FROM VARIOUS DONORS REFLECTED IN THE FINANCIAL STATEMENTS IN THE YEAR ENDED JUNE 30, 2016 SHOULD HAVE BEEN RECOGNIZED AS TEMPORARILY RESTRICTED CONTRIBUTIONS. AS A RESULT, MANAGEMENT MADE A PRIOR PERIOD ADJUSTMENT TO APPROPRIATELY RECOGNIZE THE CONTRIBUTIONS DURING THE YEAR ENDED JUNE 30, 2016. AS SUCH, THE BEGINNING NET ASSETS HAS BEEN RESTATED TO SHOW UNRESTRICTED AND TEMPORARILY RESTRICTED NET ASSETS.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

SECTION 481 ADJUSTMENT RECOGNIZED IN 2016. \$1,246,757/4	-311,690.
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