

PUBLIC DISCLOSURE COPY

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions. GREATER GOOD CHARITIES	Taxpayer identification number (TIN) 20-4846675
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 600 UNIVERSITY STREET, NO. 1000	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. SEATTLE, WA 98101	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

JEMIMAH OKANTEY

- The books are in the care of ▶ **600 UNIVERSITY STREET #1000 - SEATTLE, WA 98101**
Telephone No. ▶ **206-268-5417** Fax No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **MAY 16, 2022** , to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ calendar year _____ or
▶ tax year beginning **JUL 1, 2020** , and ending **JUN 30, 2021** .

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2020

Department of the Treasury
Internal Revenue Service

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

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

Open to Public Inspection

A For the 2020 calendar year, or tax year beginning **JUL 1, 2020** and ending **JUN 30, 2021**

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 GREATER GOOD CHARITIES		D Employer identification number 20-4846675
	Doing business as		E Telephone number 520-441-9067
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 76,965,098.
	600 UNIVERSITY STREET		1000
	City or town, state or province, country, and ZIP or foreign postal code SEATTLE, WA 98101		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 ▶
F Name and address of principal officer: LIZ BAKER 6262 N SWAN ROAD, SUITE 165, TUCSON, AZ 857		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: GREATER GOOD CHARITIES IS DEVOTED TO IMPROVING THE HEALTH AND WELL-BEING OF PEOPLE, PETS, 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	12
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	12
	5 Total number of individuals employed in calendar year 2020 (Part V, line 2a)	5	52
	6 Total number of volunteers (estimate if necessary)	6	12
	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, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 73,643,664.	Current Year 75,529,973.
	9 Program service revenue (Part VIII, line 2g)	1,005,965.	922,133.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	60,659.	14,244.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	683,823.	494,190.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	75,394,111.	76,960,540.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	65,057,408.
14 Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		4,340,591.	4,842,714.
16a Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 2,108,337.			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		3,519,564.	6,441,999.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	72,917,563.	78,814,261.	
19 Revenue less expenses. Subtract line 18 from line 12	2,476,548.	-1,853,721.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 9,977,818.	End of Year 7,916,385.
	21 Total liabilities (Part X, line 26)	1,448,587.	1,230,823.
	22 Net assets or fund balances. Subtract line 21 from line 20	8,529,231.	6,685,562.

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	
	LIZ BAKER, CHIEF EXECUTIVE OFFICER Type or print name and title			
Paid Preparer Use Only	Print/Type preparer's name COLLEEN RAMIRES	Preparer's signature COLLEEN RAMIRES	Date 05/04/22	Check if self-employed <input type="checkbox"/> PTIN P01251320
	Firm's name ▶ MOSS ADAMS LLP	Firm's EIN ▶ 91-0189318	Phone no. 206-302-6500	
Firm's address ▶ 999 THIRD AVENUE, SUITE 2800		SEATTLE, WA 98104		

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: GREATER GOOD CHARITIES IS DEVOTED TO IMPROVING THE HEALTH AND WELL-BEING OF PEOPLE, PETS, AND THE PLANET. WE CREATE, OPERATE AND/ OR FUND A VARIETY OF PROGRAMS IN THE AREAS OF HUMAN HEALTH, EDUCATION AND WELFARE, ANIMAL WELFARE AND PROTECTION, AND GLOBAL CONSERVATION AND

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 \$ 68,969,859. including grants of \$ 64,280,182.) (Revenue \$ 922,133.)

ANIMAL WELFARE (RESCUED ANIMALS): \$64,280,182 WAS GRANTED TO ANIMAL WELFARE ORGANIZATIONS FOR ITEMS LIKE FOOD, VACCINATIONS, SHELTER RENOVATIONS, ENRICHMENT, SPAY/NEUTER, EDUCATION AND TRAINING, AND DISASTER PREPAREDNESS AND RESPONSE. GREATER GOOD CHARITIES' 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 \$ 4,187,279. including grants of \$ 2,396,839.) (Revenue \$ 0.)

HUNGER & POVERTY: \$2,396,839 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 \$ 1,177,707. including grants of \$ 402,273.) (Revenue \$ 0.)

BREAST CANCER & WOMEN'S HEALTH: \$402,273 WAS GRANTED TO NON-PROFIT PARTNERS AND VARIOUS HOSPITALS AND CLINICS IN THE U.S. AND ABROAD WHERE MAMMOGRAM SCREENING SERVICES ARE PROVIDED.

4d Other program services (Describe on Schedule O.) (Expenses \$ 1,179,398. including grants of \$ 450,254.) (Revenue \$ 0.)

4e Total program service expenses 75,514,243.

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 donor-restricted endowments or in 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
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	

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22 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>	23 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>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
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?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b	X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26	X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	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, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a X	
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29 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>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	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>	32	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>	33	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>	34	X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	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>	37	X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38 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

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 26	
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 16 regarding employee counts, tax returns, business income, 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 on Schedule O. See instructions.

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
	1a 12		
b	Enter the number of voting members included on line 1a, above, who are independent		
	1b 12		
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?	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	X	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
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?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **AL, AR, CA, CO, DC, FL, GA, GU, HI, IL, KS, KY**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **JEMIMAH OKANTEY - 206-268-5417**
600 UNIVERSITY STREET #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. See instructions for the order in which to list the persons above.

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

(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) DAVID YASKULKA BOARD CHAIR	2.00	X		X				0.	0.	0.
(2) DAVID SAMUELSON BOARD VICE CHAIR	1.00	X		X				0.	0.	0.
(3) JOHN GEHRT BOARD TREASURER	3.00	X		X				0.	0.	0.
(4) JULIA CHRISTOPHERSON BOARD SECRETARY	1.00	X		X				0.	0.	0.
(5) EVE HIGGS 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) JACKSON GALAXY BOARD MEMBER	1.00	X						0.	0.	0.
(9) JAM STEWART BOARD MEMBER	1.00	X						0.	0.	0.
(10) JULIE RYAN BOARD MEMBER	1.00	X						0.	0.	0.
(11) JANIS ROSENTHAL BOARD MEMBER (UNTIL 6/21)	1.00	X						0.	0.	0.
(12) JEFF ZUBA BOARD MEMBER	1.00	X						0.	0.	0.
(13) LIZ BAKER CHIEF EXECUTIVE OFFICER	50.00			X				202,684.	0.	18,427.
(14) NOAH HORTON CHIEF MARKETING OFFICER	50.00			X				154,577.	0.	11,490.
(15) JEMIMAH OKANTEY CHIEF FINANCIAL OFFICER	50.00			X				144,900.	0.	11,302.
(16) CHRIS BALASKI CHIEF OPERATING OFFICER (UNTIL 1/21)	50.00			X				100,000.	0.	1,267.
(17) MELISSA RUBIN CHIEF STRATEGY OFFICER	50.00			X				0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related 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			
(18) STEPHEN MINTER GENERAL COUNSEL	50.00				X			159,907.	0.	8,996.
(19) ELIZABETH ASHER PROGRAM DIRECTOR (UNTIL 8/20)	50.00					X		199,936.	0.	9,939.
(20) ROWENA KOENIG PROGRAM DIRECTOR	50.00					X		129,725.	0.	11,185.
(21) BRYNA DONNELLY PROGRAM DIRECTOR	50.00					X		123,000.	0.	10,880.
(22) DENISE BINGLER PROGRAM DIRECTOR	50.00					X		119,526.	0.	14,226.
(23) SUSAN ROSENBERG PROGRAM DIRECTOR	50.00					X		119,332.	0.	10,525.
1b Subtotal								1,453,587.	0.	108,237.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								1,453,587.	0.	108,237.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **14**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

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	692,198.			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	74,837,775.			
	g	Noncash contributions included in lines 1a-1f	1g	\$ 62,709,968.			
	h	Total. Add lines 1a-1f		75,529,973.			
Program Service Revenue	2 a	PET FOOD STORAGE/HANDLING	Business Code				
			493000	922,133.	922,133.		
	b						
	c						
	d						
	e						
	f	All other program service revenue					
g	Total. Add lines 2a-2f		922,133.				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		11,163.		11,163.	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties		494,190.		494,190.	
	6 a	Gross rents	(i) Real				
			(ii) Personal				
	b	Less: rental expenses	6b				
	c	Rental income or (loss)	6c				
	d	Net rental income or (loss)					
	7 a	Gross amount from sales of assets other than inventory	(i) Securities				
			(ii) Other				
				7,639.			
	b	Less: cost or other basis and sales expenses	7b	4,558.			
	c	Gain or (loss)	7c	3,081.			
d	Net gain or (loss)		3,081.		3,081.		
8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a					
b	Less: direct expenses	8b					
c	Net income or (loss) from fundraising events						
9 a	Gross income from gaming activities. See Part IV, line 19	9a					
b	Less: direct expenses	9b					
c	Net income or (loss) from gaming activities						
10 a	Gross sales of inventory, less returns and allowances	10a					
b	Less: cost of goods sold	10b					
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue	11 a		Business Code				
	b						
	c						
	d	All other revenue					
	e	Total. Add lines 11a-11d					
12	Total revenue. See instructions		76,960,540.	922,133.	0.	508,434.	

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(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	66,286,028.	66,286,028.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	236,338.	236,338.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	1,007,182.	1,007,182.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	931,449.	301,641.	513,859.	115,949.
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	3,190,822.	2,537,931.	133,044.	519,847.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	27,039.	22,488.	114.	4,437.
9 Other employee benefits	379,687.	279,407.	41,217.	59,063.
10 Payroll taxes	313,717.	217,605.	47,673.	48,439.
11 Fees for services (nonemployees):				
a Management				
b Legal	106,735.	4,602.	102,133.	
c Accounting	56,000.		56,000.	
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.)	487,293.	173,972.	41.	313,280.
12 Advertising and promotion	1,134,821.	124,709.	74,871.	935,241.
13 Office expenses	792,209.	752,320.	35,295.	4,594.
14 Information technology	31,694.	7,500.	19,594.	4,600.
15 Royalties				
16 Occupancy	98,750.		82,017.	16,733.
17 Travel	160,304.	155,545.	573.	4,186.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	7,095.	7,095.		
20 Interest	4,086.		4,086.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	53,602.	25,186.	25,554.	2,862.
23 Insurance	45,520.	477.	42,349.	2,694.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a LOGISTICS	1,797,265.	1,796,488.	777.	0.
b INVENTORY OBSOLESCENCE	1,396,862.	1,396,862.		
c DUES & SUBSCRIPTIONS	256,730.	178,939.	3,629.	74,162.
d TAXES AND LICENSES	10,397.	1,928.	8,469.	0.
e All other expenses	2,636.		386.	2,250.
25 Total functional expenses. Add lines 1 through 24e	78,814,261.	75,514,243.	1,191,681.	2,108,337.
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 <input type="checkbox"/> 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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	1,799,057.	1	2,256,079.
	2 Savings and temporary cash investments	3,742,822.	2	3,761,482.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	1,021,096.	4	352,827.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	2,653,294.	8	759,446.
	9 Prepaid expenses and deferred charges	299,106.	9	344,387.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 286,844.		
	b Less: accumulated depreciation	10b 165,620.		
	11 Investments - publicly traded securities	146,998.	10c	121,224.
	12 Investments - other securities. See Part IV, line 11	315,445.	11	320,940.
	13 Investments - program-related. See Part IV, line 11		12	
	14 Intangible assets		13	
	15 Other assets. See Part IV, line 11		14	
16 Total assets. Add lines 1 through 15 (must equal line 33)	9,977,818.	15		
		16	7,916,385.	
Liabilities	17 Accounts payable and accrued expenses	357,178.	17	531,486.
	18 Grants payable	134,815.	18	97,431.
	19 Deferred revenue	269,644.	19	601,906.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties	686,950.	24	0.
	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	1,448,587.	26	1,230,823.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	1,853,765.	27	1,875,498.
	28 Net assets with donor restrictions	6,675,466.	28	4,810,064.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	8,529,231.	32	6,685,562.
	33 Total liabilities and net assets/fund balances	9,977,818.	33	7,916,385.

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	76,960,540.
2	Total expenses (must equal Part IX, column (A), line 25)	2	78,814,261.
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,853,721.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	8,529,231.
5	Net unrealized gains (losses) on investments	5	10,052.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	6,685,562.

Part XII Financial Statements and Reporting

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

- 1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain 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:
 Separate basis Consolidated basis Both consolidated and separate basis
- 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:
 Separate basis Consolidated basis Both consolidated and separate basis
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 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?
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

	Yes	No
1		
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2020)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization **GREATER GOOD CHARITIES** Employer identification number **20-4846675**

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	49965059.	48080930.	61061274.	73643664.	75529973.	308280900
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	49965059.	48080930.	61061274.	73643664.	75529973.	308280900
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)						150423257
6 Public support. Subtract line 5 from line 4.						157857643

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 Amounts from line 4	49965059.	48080930.	61061274.	73643664.	75529973.	308280900
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	410,527.	1450358.	332,082.	720,077.	505,353.	3418397.
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						311699297
12 Gross receipts from related activities, etc. (see instructions)					12	4,947,085.
13 First 5 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 2020 (line 6, column (f), divided by line 11, column (f))	14	50.64 %
15 Public support percentage from 2019 Schedule A, Part II, line 14	15	50.21 %
16a 33 1/3% support test - 2020. 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 - 2019. 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 - 2020. 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 - 2019. 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) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(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) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(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 5 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 2020 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2019 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2019 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2020. 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 - 2019. 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 box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</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 (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <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 line 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 lines 11b and 11c below, the governing body of a supported organization?		
11a		
b A family member of a person described in line 11a above?		
11b		
c A 35% controlled entity of a person described in line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>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.</i>		
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)? <i>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).</i>		
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?		
1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
2		
3 By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
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 governmental entity (see instructions).		
2 Activities Test. Answer lines 2a and 2b below.		
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? <i>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.</i>	Yes	No
2a		
b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>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.</i>		
2b		
3 Parent of Supported Organizations. Answer lines 3a and 3b 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? <i>If "Yes" or "No" provide details in Part VI.</i>		
3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
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 (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<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	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2020 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2020			
a From 2015			
b From 2016			
c From 2017			
d From 2018			
e From 2019			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2021. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016			
b Excess from 2017			
c Excess from 2018			
d Excess from 2019			
e Excess from 2020			

Schedule A (Form 990 or 990-EZ) 2020

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

OMB No. 1545-0047

2020

Name of the organization

GREATER GOOD CHARITIES

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 (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

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

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

Name of organization GREATER GOOD CHARITIES	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	_____ _____ _____	\$ <u>3,177,339.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
2	_____ _____ _____	\$ <u>3,970,800.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
3	_____ _____ _____	\$ <u>6,603,661.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
4	_____ _____ _____	\$ <u>11,597,176.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
5	_____ _____ _____	\$ <u>30,056,538.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization GREATER GOOD CHARITIES	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	CLOTHES, SHOES, PET PRODUCTS _____ _____ _____	\$ <u>2,993,506.</u>	<u>06/30/21</u>
2	PET FOOD AND PET PRODUCTS _____ _____ _____	\$ <u>3,750,800.</u>	<u>06/30/21</u>
3	PET FOOD _____ _____ _____	\$ <u>6,468,661.</u>	<u>06/30/21</u>
4	PET FOOD _____ _____ _____	\$ <u>11,547,176.</u>	<u>06/30/21</u>
5	PET FOOD AND PET PRODUCTS _____ _____ _____	\$ <u>30,056,538.</u>	<u>06/30/21</u>
	_____ _____ _____	\$ _____	_____

Name of organization GREATER GOOD CHARITIES	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	
(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	
(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	
(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	

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.**

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization **GREATER GOOD CHARITIES** 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 (for example, 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 7/25/06, 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 FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(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 FASB ASC 958 relating to these items:

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

b Assets included in Form 990, Part X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2020

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 make 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 program
 - 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 Term 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? <input type="checkbox"/> | 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		23,000.		23,000.
b Buildings				
c Leasehold improvements				
d Equipment		263,844.	165,620.	98,224.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				121,224.

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 FASB 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	77,281,788.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	10,053.
b	Donated services and use of facilities	2b	311,195.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	321,248.
3	Subtract line 2e from line 1	3	76,960,540.
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	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	76,960,540.

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	79,125,457.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	311,196.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	311,196.
3	Subtract line 2e from line 1	3	78,814,261.
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	78,814,261.

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 X, LINE 2:

FEDERAL INCOME TAXES THE INTERNAL REVENUE SERVICE HAS RECOGNIZED THE ORGANIZATION AS EXEMPT FROM FEDERAL INCOME TAXES UNDER PROVISIONS OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (IRC) EXCEPT TO THE EXTENT OF UNRELATED BUSINESS TAXABLE INCOME AS DEFINED UNDER IRC SECTIONS 511 THROUGH 515. ANY UNRELATED BUSINESS INCOME GENERATED IS NOT SIGNIFICANT; THEREFORE, NO PROVISION FOR INCOME TAXES HAS BEEN RECORDED. THE COMPANY FOLLOWS FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ACCOUNTING STANDARDS CODIFICATION (ASC) 740-10, INCOME TAXES, RELATING TO ACCOUNTING FOR UNCERTAIN TAX POSITIONS. ASC 740-10 PRESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT PROCESS FOR ACCOUNTING FOR UNCERTAIN TAX POSITIONS AND ALSO PROVIDES GUIDANCE ON VARIOUS RELATED MATTERS SUCH AS DERECOGNITION,

Part XIII Supplemental Information *(continued)*

INTEREST, PENALTIES AND DISCLOSURES REQUIRED. MANAGEMENT DOES NOT BELIEVE
THE ORGANIZATION HAS AN UNCERTAIN TAX POSITION AS OF AND FOR THE YEARS
ENDED JUNE 30, 2021 AND 2020.

Multiple horizontal lines for supplemental information.

**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.

2020

▶ Attach to Form 990.

Open to Public Inspection

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

Department of the Treasury
Internal Revenue Service

Name of the organization

Employer identification number

GREATER GOOD CHARITIES

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	GRANTMAKING		177,249.
EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA,	0	0	GRANTMAKING		595,513.
EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM	0	0	GRANTMAKING		3,341.
MIDDLE EAST AND NORTH AFRICA - ALGERIA, BAHRAIN, DJIBOUTI, EGYPT,	0	0	GRANTMAKING		2,930.
NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	0	4	GRANTMAKING AND PROGRAM SERVICE	EXPLORATION, STUDY, AND PROTECTING BIODIVERSITY	107,589.
RUSSIA AND NEIGHBORING STATES - ARMENIA, AZERBIJAN, BELARUS,	0	0	GRANTMAKING		11,220.
SOUTH AMERICA - ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA, ECUADOR,	0	0	GRANTMAKING		9,950.
SOUTH ASIA - AFGHANISTAN, BANGLADESH, BHUTAN, INDIA, MALDIVES,	0	0	GRANTMAKING		46,018.
3 a Subtotal	0	4			953,810.
b Total from continuation sheets to Part I	0	0			53,372.
c Totals (add lines 3a and 3b)	0	4			1,007,182.

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

Schedule F (Form 990) 2020

Part I Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	0	0	GRANTMAKING		53,372.
Totals					53,372.

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)
		EAST ASIA AND THE PACIFIC	SUPPORT BREAST CANCER & WOMEN'S HEALTH, HUNGER & POVERTY, LITERACY & CHILDREN'S	518,433.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	SUPPORT LITERACY & CHILDREN'S EDUCATION AND HEALTH	80,549.	CHECK	0.		
		EAST ASIA AND THE PACIFIC	SUPPORT PROTECTING/RESTORING ENVIRONMENT	31,500.	WIRE	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	SUPPORT PROTECTING/RESTORING ENVIRONMENT	20,226.	WIRE	0.		
		NORTH AMERICA (CANADA AND MEXICO)	SUPPORT PROTECTING/RESTORING ENVIRONMENT	20,045.	CHECK	0.		
		SOUTH ASIA	SUPPORT LITERACY & CHILDREN'S EDUCATION AND HEALTH	19,561.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	SUPPORT RESCUED ANIMALS	12,937.	CHECK	0.		
		SOUTH ASIA	SUPPORT HUNGER & POVERTY, LITERACY & CHILDREN'S EDUCATION AND HEALTH	12,100.	WIRE	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **17**

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

SEE PART V FOR COLUMN (D) DESCRIPTIONS

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	SUPPORT PROTECTING/RESTORING ENVIRONMENT	10,970.	CHECK	0.		
		EAST ASIA AND THE PACIFIC	SUPPORT PROTECTING/RESTORING ENVIRONMENT	10,284.	CHECK	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	SUPPORT HUNGER & POVERTY	10,064.	CHECK	0.		
		NORTH AMERICA (CANADA AND MEXICO)	SUPPORT RESCUED ANIMALS	10,000.	CHECK	31,670.	PET PRODUCTS, PET PHARMACEUTICALS	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	SUPPORT HUNGER & POVERTY	8,700.	CHECK	0.		
		EAST ASIA AND THE PACIFIC	SUPPORT PROTECTING/RESTORING ENVIRONMENT	6,500.	WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	SUPPORT PROTECTING/RESTORING ENVIRONMENT	5,716.	WIRE	0.		
		SOUTH AMERICA	SUPPORT LITERACY & CHILDREN'S EDUCATION AND HEALTH	2,000.	WIRE	6,600.	SOFTWARE LICENSES	FMV
		CENTRAL AMERICA AND THE CARIBBEAN	SUPPORT RESCUED ANIMALS	0.		44,015.	PET FOOD, PET PRODUCTS	FMV

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* Yes No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* Yes No

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 GREATER GOOD CHARITIES 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. 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. WHEN POSSIBLE, ACTUAL SITE VISITS ARE CONDUCTED TO SEE ACTUAL EVIDENCE OF THE USE OF FUNDS.

PART I, LINE 3:

THE AMOUNT ON PART I, LINE 3, COLUMN (F) REPRESENTS ACTUAL EXPENDITURES IN THE REGION FOR A TAXPAYER ON THE ACCRUAL BASIS OF ACCOUNTING.

PART II, COLUMN (D):

REGION: EAST ASIA AND THE PACIFIC

(D) PURPOSE OF GRANT: SUPPORT BREAST CANCER & WOMEN'S HEALTH, HUNGER & POVERTY, LITERACY & CHILDREN'S EDUCATION AND HEALTH

PART II, LINE 1, COLUMN (E):

THE AMOUNT ON PART II, LINE 1, COLUMN (E) REPRESENTS ACTUAL EXPENDITURES IN THE REGION FOR A TAXPAYER ON THE ACCRUAL BASIS OF ACCOUNTING.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2020

**Open to Public
Inspection**

Name of the organization **GREATER GOOD CHARITIES** 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
10TH LIFE SURGICAL CENTER DBA A DOGGIE 4 YOU - PO BOX 63078 - PIPE CREEK, TX 78063	26-2578483	501(C)(3)	5,000.	494,169.	FMV	APPAREL, HOUSEWARE, PET FOOD, PET PRODUCTS	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS
4 PAWS 4 LIFE RESCUE 3648 N. PERRY PARK ROAD SEDALIA, CO 80135	45-4932922	501(C)(3)	10,701.	502.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
4 PAWS ANIMAL RESCUE PO BOX 735 WILLIS, MI 48191	27-3741642	501(C)(3)	0.	3,667,457.	FMV	PET FOOD, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
805 BULLY FRIENDS AND FAMILY, INC. 543 COUNTRY CLUB DR B336 SIMI VALLEY, CA 93065	83-1845598	501(C)(3)	2,491.	10,127.	FMV	PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
ABANDONED PET RESCUE 1137 NE 9TH AVE FORT LAUDERDALE, FL 33304-2110	65-0655473	501(C)(3)	17,353.	10,127.	FMV	PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
ACADIANA ANIMAL AID 142 LE MDECIN RD CARENCRO, LA 70520	23-7414331	501(C)(3)	1,878.	148,852.	FMV	PET FOOD, PET PHARMACEUTICALS , PET PRODUCTS, FACE	SUPPORT FOR RESCUED ANIMALS

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **▶ 364.**

3 Enter total number of other organizations listed in the line 1 table **▶ 0.**

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

Schedule I (Form 990) 2020

SEE PART IV FOR COLUMN (G) DESCRIPTIONS

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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
ACADIANA OUTREACH CENTER P.O. BOX 2747 LAFAYETTE, LA 70502	58-1925867	501(C)(3)	0.	31,461.	FMV	PET PRODUCTS, APPAREL, HOUSEWARE	SUPPORT FOR HUNGER & POVERTY
ACE OF HEARTS INC PO BOX 2357 BEVERLY HILLS, CA 90213	95-4863739	501(C)(3)	3,400.	2,770.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
AGEE MEMORIAL WILDLIFE FUND INC 2059 SWEET VALLEY ROAD EL DORADO HILLS, CA 95762	88-0545331	501(C)(3)	0.	777,460.	FMV	PET FOOD	SUPPORT FOR RESCUED ANIMALS
ALACHUA COUNTY HS DBA HUMANE SOCIETY OF NORTH CENTRAL FLORIDA - 4205 NW 6TH STREET - GAINESVILLE, FL 32609	59-1908492	501(C)(3)	0.	8,317.	FMV	PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
ALAQUA ANIMAL REFUGE 914 WHITFIELD ROAD FREEPORT, FL 32439	02-0806313	501(C)(3)	0.	38,934.	FMV	PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
ALASKA NATIVE RURAL VETERINARY, INC. - 3875 GEIST ROAD, BOX 301 - FAIRBANKS, AK 99709	45-5167681	501(C)(3)	10,000.	67,990.	FMV	PET FOOD	SUPPORT FOR RESCUED ANIMALS
ALL HANDS AND HEARTS 6 COUNTY RD, SUITE 6 MATTAPOISETT, MA 02739	20-3414952	501(C)(3)	5,000.	10,000.	FMV	FACE MASKS	SUPPORT FOR HUNGER & POVERTY
ALLEN COUNTY SPCA 4914 SOUTH HANNA STREET FORT WAYNE, IN 46806	35-6042135	501(C)(3)	21,087.	124.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
ALOHA ILIO RESCUE P.O. BOX 492364 KEAAU, HI 96749	46-5495854	501(C)(3)	910.	5,201.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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
ALTERNATIVE HUMANE SOCIETY 112 GRANDVIEW LANE BELLINGHAM, WA 98229	91-1551706	501(C)(3)	15,000.	0.			SUPPORT FOR RESCUED ANIMALS
AMERICAN BELGIAN MALINOIS RESCUE PO BOX 847 STEVENS POINT, WI 54481	81-6099454	501(C)(3)	4,500.	5,967.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
AMERICAN CHESTNUT FOUNDATION 50 NORTH MERRIMON AVE, STE 115 ASHEVILLE, NC 28804	41-1483019	501(C)(3)	9,000.	0.			SUPPORT FOR PROTECTING/RESTORING ENVIRONMENT
AMERICAN SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS (ASPCA) - 520 EIGHTH AVENUE, 7TH FLOOR - NEW YORK, NY 10018	13-1623829	501(C)(3)	0.	6,000.	FMV	FACE MASKS	SUPPORT FOR RESCUED ANIMALS
ANGELICO CAT RESCUE, INC. 7451 NW 34TH STREET LAUDERHILL, FL 33319	27-4621513	501(C)(3)	38,700.	0.			SUPPORT FOR RESCUED ANIMALS
ANIMAL AID SOCIETY 80 BUTLER FARM ROAD HAMPTON, VA 23430	54-1018249	501(C)(3)	12,983.	14,614.	FMV	PET PRODUCTS, PET PHARMACEUTICALS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
ANIMAL CARE LEAGUE 1011 GARFIELD ST OAK PARK, IL 60304	23-7367847	501(C)(3)	6,028.	500.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
ANIMAL FRIENDS OF THE VALLEYS 33751 MISSION TRAIL ROAD WILDOMAR, CA 92595	33-0276892	501(C)(3)	567.	10,127.	FMV	PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
ANIMAL HARBOR 56 NOR-NAN RD WINCHESTER, TN 37398	91-2171475	501(C)(3)	6,144.	0.			SUPPORT FOR RESCUED ANIMALS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 HUMANE SOCIETY 845 MEADOW LANE N. GOLDEN VALLEY, MN 55422	41-0693842	501(C)(3)	0.	37,500.	FMV	PET FOOD	SUPPORT FOR RESCUED ANIMALS
ANIMAL LIFELINE WARRINGTON PAVILION, 1111 EASTON RO WARRINGTON, PA 18976	20-4444813	501(C)(3)	12,546.	0.			SUPPORT FOR RESCUED ANIMALS
ANIMAL LIGHTHOUSE RESCUE PO BOX 30349 NEW YORK, NY 10011	46-3954783	501(C)(3)	18,654.	10,127.	FMV	PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
ANIMAL OUTREACH OF SHELBY COUNTY 910 REVELLO ST SHELBYVILLE, IN 46176	26-1536704	501(C)(3)	0.	5,254.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
ANIMAL PROTECTIVE ASSOCIATION OF MISSOURI - 1705 SOUTH HANLEY ROAD - ST. LOUIS, MO 63144	43-0699783	501(C)(3)	7,500.	6,726.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
ANIMAL REFUGE LEAGUE OF GREATER PORTLAND - PO BOX 336 - WESTBROOK, ME 04098	01-0212541	501(C)(3)	0.	12,205.	FMV	PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
ANIMAL REFUGEE RESPONSE 2905 SAN PABLO DAM RD. SAN PABLO, CA 94803	45-3248828	501(C)(3)	0.	6,438.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
ANIMAL RESCUE FOUNDATION (A.R.F.) 23W042 WOODCROFT DRIVE GLEN ELLYN, IL 60137	36-4236669	501(C)(3)	11,501.	1,000.	FMV	FACE MASKS	SUPPORT FOR RESCUED ANIMALS
ANIMAL RESCUE LEAGUE OF IOWA 5452 NE 22ND ST. DES MOINES, IA 50313	42-0680427	501(C)(3)	0.	35,416.	FMV	PET FOOD, PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 RESCUE NEW ORLEANS 1219 COLISEUM STREET NEW ORLEANS, LA 70123	51-0569173	501(C)(3)	337.	20,648.	FMV	PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
ANIMAL SERVICES, CITY OF EL PASO 5001 FRED WILSON EL PASO, TX 79906	74-6000749	GOVT	23.	22,395.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
ANTINANCO EARTH ARTS SCHOOL 46 SEVEN OAKS CIR HOLMDEL, NJ 07733-1936	47-3280825	501(C)(3)	0.	5,482.	FMV	APPAREL, HOUSEWARE, PET FOOD, PET PRODUCTS, FACE	SUPPORT FOR HUNGER & POVERTY
ARIZONA ANIMAL WELFARE LEAGUE & SPCA - 25 NORTH 40TH STREET - PHOENIX, AZ 85034	23-7149453	501(C)(3)	0.	83,457.	FMV	PET PRODUCTS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
ARIZONA FOOD BANK NETWORK 340 E CORONADO ROAD SUITE 400 PHOENIX, AZ 85004	86-0507679	501(C)(3)	0.	10,000.	FMV	FACE MASKS	SUPPORT FOR HUNGER & POVERTY
ARKANSAS FOODBANK 4301 WEST 65TH STREET LITTLE ROCK, AR 72209	71-0596734	501(C)(3)	20,000.	0.			SUPPORT FOR HUNGER & POVERTY
ASSOCIATIONS OF GLEANING ORGANIZATIONS (SPONSORED BY GREEN URBAN LUNCH BOX) - 1140 SOUTH, 1100 EAST - SALT LAKE CITY, UT	45-4320152	501(C)(3)	0.	8,000.	FMV	FACE MASKS	SUPPORT FOR HUNGER & POVERTY
ATHENS ANIMAL RESCUE SHELTER 901 W COLLEGE ATHENS, TX 75751	84-4172818	501(C)(3)	3,114.	20,254.	FMV	PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
ATLANTA COMMUNITY FOOD BANK 3400 N DESERT DRIVE ATLANTA, GA 30344	58-1376648	501(C)(3)	10,000.	0.			SUPPORT FOR HUNGER & POVERTY

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ATLANTA HUMANE SOCIETY 981 HOWELL MILL ROAD NW ATLANTA, GA 30318	58-0685900	501(C)(3)	0.	378,323.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
AUSTIN PETS ALIVE! 1156 W. CESAR CHAVEZ ST AUSTIN, TX 78703	74-2893360	501(C)(3)	149.	20,513.	FMV	PET FOOD, PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
BAKERSFIELD SPCA 3000 GIBSON STREET BAKERSFIELD, CA 93308	95-2141790	501(C)(3)	2,653.	10,995.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
BALTIMORE ANIMAL RESCUE AND CARE SHELTER - 301 STOCKHOLM STREET - BALTIMORE, MD 21230	86-1130456	501(C)(3)	0.	27,953.	FMV	PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
BANCO DE ALIMENTOS PUERTO RICO, INC. - PO BOX 3990 - CAROLINA, PR 00984	66-0444882	501(C)(3)	21,318.	0.			SUPPORT FOR HUNGER & POVERTY
BANDERA COUNTY COMMITTEE ON AGING INC. / DBA SILVER SAGE - 803 BUCK CREEK DRIVE, PO BOX 1416 - BANDERA, TX 78003	74-2309449	501(C)(3)	0.	21,223.	FMV	APPAREL, HOUSEWARE, PET PRODUCTS	SUPPORT FOR HUNGER & POVERTY
BANNER HEALTH FOUNDATION 2901 N CENTRAL AVE, SUITE 160 PHOENIX, AZ 85012	94-2545356	501(C)(3)	0.	15,500.	FMV	FACE MASKS	SUPPORT FOR HUNGER & POVERTY
BEREA ANIMAL RESCUE FUND INC. 10015 EAST RIVER RD COLUMBIA STATION, OH 44028	34-1621423	501(C)(3)	20,699.	0.			SUPPORT FOR RESCUED ANIMALS
BERKELEY EAST BAY HUMANE SOCIETY 2700 NINTH STREET BERKELEY, CA 94710	94-1347069	501(C)(3)	24,700.	356,464.	FMV	PET FOOD, PET PRODUCTS, APPAREL, HOUSEWARE	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS

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BERNIE'S BOOK BANK 917 NORTH SHORE DR LAKE BLUFF, IL 60044	27-0914453	501(C)(3)	448.	5,000.	FMV	FACE MASKS	SUPPORT FOR HUNGER & POVERTY
BETWEEN FRIENDS OUTREACH 100 MECHANICS STREET DOYLESTOWN, PA 18901	81-3277518	501(C)(3)	0.	19,148.	FMV	APPAREL, HOUSEWARE	SUPPORT FOR HUNGER & POVERTY
BLIND CAT RESCUE & SANCTUARY, INC. 3101 E. GREAT MARSH CHURCH ROAD ST. PAULS, NC 28384	20-3410498	501(C)(3)	16,698.	7,080.	FMV	PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
BLUE MOUNTAIN HUMANE SOCIETY 7 GEORGE STREET WALLA WALLA, WA 99362	91-0828499	501(C)(3)	4,500.	145,555.	FMV	PET FOOD, PET PHARMACEUTICALS , PET PRODUCTS, PET	SUPPORT FOR RESCUED ANIMALS
BORDERLANDS RESTORATION NETWORK PO BOX 121 PATAGONIA, AZ 85624	47-2581032	501(C)(3)	5,398.	10,547.	FMV	FACE MASKS, APPAREL	SUPPORT FOR HUNGER & POVERTY
BRANDYWINE VALLEY SPCA 1212 PHOENIXVILLE PIKE WEST CHESTER, PA 19380	23-1381030	501(C)(3)	9,456.	127,949.	FMV	PET FOOD, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
BRAZORIA COUNTY SPCA 141 CANNA LANE LAKE JACKSON, TX 77566	23-7404451	501(C)(3)	102.	38,947.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
BRECKINRIDGE CO ANIMAL SHELTER 498 GLEN NASH LANE HARDINBURG, KY 40143	61-6000794	501(C)(3)	0.	10,275.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
BROOKHAVEN ANIMAL RESCUE LEAGUE P.O. BOX 3477 BROOKHAVEN, MS 39601	64-0659454	501(C)(3)	0.	8,989.	FMV	PET PRODUCTS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS

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BUTTE COUNTY HUMANE SOCIETY 2580 FAIR STREET CHICO, CA 95928	94-1580621	501(C)(3)	5,000.	83,114.	FMV	PET FOOD	SUPPORT FOR RESCUED ANIMALS
CABOT ANIMAL SUPPORT SERVICES 2951 S. FIRST ST CABOT, AR 72023	71-0334905	501(C)(3)	7,500.	292,150.	FMV	PET FOOD, PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
CALIFORNIA VETERINARY MEDICAL FOUNDATION (HOUSES THE CALIFORNIA VETERINARY MEDIC - 1400 RIVER PARK DRIVE, SUITE 100 - SACRAMENTO, CA	68-0356619	501(C)(3)	0.	30,646.	FMV	PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
CAPITAL HUMANE SOCIETY 2320 PARK BLVD LINCOLN, NE 68502	47-0376622	501(C)(3)	3,454.	10,127.	FMV	PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
CARA'S HOUSE 9894 AIRLINE HWY SORRENTO, LA 70778	90-0877497	501(C)(3)	2,563.	108,686.	FMV	PET FOOD, PET PRODUCTS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
CASTLE OF DREAMS ANIMAL RESCUE 434 CLIFFWOOD AVE CLIFFWOOD, NJ 07721	20-0034726	501(C)(3)	0.	5,121.	FMV	PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
CAT TALES INC PO BOX 165 WARMINSTER, PA 18974	35-2182828	501(C)(3)	0.	8,427.	FMV	PET PRODUCTS, PET FOOD VOUCHERS	SUPPORT FOR RESCUED ANIMALS
CATNIP FOUNDATION 15442 JACK FORK RD FOLSOM, LA 70437	47-4528787	501(C)(3)	16,644.	418,767.	FMV	PET FOOD, PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
CC'S CUPBOARD PET FOOD PANTRY 26700 HIGHLAND RD RICHMOND HEIGHTS, OH 44143	84-4484018	501(C)(3)	0.	316,966.	FMV	PET FOOD	SUPPORT FOR RESCUED ANIMALS

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CENTER FOR ANIMAL RESCUE AND ENRICHMENT OF ST. LOUIS - 2700 WALNUT PLACE - SAINT LOUIS , MO 63103	83-1080279	501(C)(3)	5,000.	6,381.	FMV	PET FOOD	SUPPORT FOR RESCUED ANIMALS
CENTRAL CALIFORNIA ANIMAL DISASTER TEAM - 5132 N PALM AVE., #113 - FRESNO, CA 93704	45-1686477	501(C)(3)	0.	20,488.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
CENTRAL CALIFORNIA FOOD BANK 4010 E AMENDOLA DRIVE FRESNO, CA 93725	77-0320851	501(C)(3)	21,318.	0.			SUPPORT FOR HUNGER & POVERTY
CENTRAL MISSOURI HUMANE SOCIETY 616 BIG BEAR BLVD COLUMBIA, MO 65202	43-0666742	501(C)(3)	9.	158,985.	FMV	PET FOOD, PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
CHARITY HQ 4301 NORTHEAST LAURELHURST PLACE PORTLAND, OR 97213	87-1402056	501(C)(3)	0.	14,115.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
CHARLOTTE-MECKLENBURG POLICE DEPARTMENT: ANIMAL CARE AND CONTROL DIVISION - 8315 BYRUM DRIVE - CHARLOTTE, NC 28217	52-1333483	GOVT	0.	28,090.	FMV	PET PRODUCTS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
CHIHUAHUA RESCUE OF SAN DIEGO 521 ALPINE TRAIL ROAD ALPINE, CA 91901	33-0832378	501(C)(3)	5,105.	16,194.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
CHILDREN'S HOME SOCIETY OF SOUTH DAKOTA (CHS) - 801 N. SYCAMORE AVENUE - SIOUX FALLS, SD 57103	46-0224542	501(C)(3)	0.	8,000.	FMV	FACE MASKS	SUPPORT FOR HUNGER & POVERTY
CHULA VISTA ANIMAL CARE FACILITY 130 BEYER WAY CHULA VISTA, CA 91910	95-6000690	501(C)(3)	0.	6,486.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS

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CINCINNATI ANIMAL CARE HUMANE SOCIETY - 3949 COLERAIN AVENUE - CINCINNATI, OH 45223	85-2177478	501(C)(3)	0.	7,275.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
CITRUS COUNTY ANIMAL SERVICES 4030 S. AIRPORT RD INVERNESS, FL 34450	59-6000548	GOVT	256.	24,460.	FMV	PET FOOD, PET PRODUCTS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
CITY OF CHARLESTON POLICE DEPARTMENT - 501 VIRGINIA STREET EAST - CHARLESTON, WV 25301	55-6000160	GOVT	0.	172,934.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
CITY OF CHICO ANIMAL SHELTER 2579 FAIR ST. CHICO, CA 95928	94-6000308	GOVT	0.	16,280.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
CLIPPED EAR CAT SANCTUARY 206A SOUTH LOOP 336 CONROE, TX 77304	26-2968977	501(C)(3)	19,862.	0.			SUPPORT FOR RESCUED ANIMALS
COCKER SPANIEL RESCUE OF AUSTIN/SAN ANTONIO - P.O. BOX 27453 - AUSTIN, TX 78755	20-5647630	501(C)(3)	1,000.	7,319.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
CODE 3 ASSOCIATES 1456 SKYWAY DRIVE LONGMONT, CO 80504	84-1461821	501(C)(3)	5,000.	10,400.	FMV	FACE MASKS	SUPPORT FOR RESCUED ANIMALS
CODY'S FRIENDS P.O. BOX 36502 TUCSON, AZ 85704	47-4052727	501(C)(3)	0.	2,384,197.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
COLORADO PET PANTRY P.O. BOX 323 BOULDER, CO 80306	45-4210185	501(C)(3)	0.	450,907.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS

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COLUMBUS HUMANE 3015 SCIOTO DARBY EXECUTIVE COURT HILLIARD, OH 43026	31-4379492	501(C)(3)	2,500.	288,403.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
COMMUNITY ACTION NORTH BAY 416 UNION AVE. FAIRFIELD, CA 94533	68-0041385	501(C)(3)	0.	20,896.	FMV	APPAREL, HOUSEWARE, CHILDREN'S TOYS, BOOKS,	SUPPORT FOR HUNGER & POVERTY
COMPASSIONATE ANIMAL RESCUE EFFORTS - P.O. BOX 283 - COWETA, OK 74429	81-2575185	501(C)(3)	8,500.	0.			SUPPORT FOR RESCUED ANIMALS
COOPER'S CHANCE ANIMAL RESCUE 2727 E. BOSTON ST. GILBERT, AZ 85295	26-3634154	501(C)(3)	6,512.	5,542.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
DAKIN HUMANE SOCIETY PO BOX 6307 SPRINGFIELD, MA 01101	20-5318898	501(C)(3)	4,000.	4,496.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
DELAWARE HUMANE ASSOCIATION 701 A STREET WILMINGTON, DE 19801	51-0082499	501(C)(3)	0.	191,981.	FMV	PET FOOD	SUPPORT FOR RESCUED ANIMALS
EAST BAY SPCA 8323 BALDWIN ST. OAKLAND, CA 94621	94-1322202	501(C)(3)	5,214.	0.			SUPPORT FOR RESCUED ANIMALS
EDEN ANIMAL HAVEN 1649 E 562ND ROAD BRIGHTON, MO 65617-7159	47-1992772	501(C)(3)	13,086.	0.			SUPPORT FOR RESCUED ANIMALS
EDMONDS FOOD BANK 828 CASPERS ST SW L100 EDMONDS, WA 98020	84-2209131	501(C)(3)	10,000.	0.			SUPPORT FOR HUNGER & POVERTY

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EL FARO DE LOS ANIMALES, INC. PO BOX 637 PUNTA SANTIAGO, PR 00741	66-0601885	501(C)(3)	0.	18,907.	FMV	PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
EL PASOANS FIGHTING HUNGER FOOD BANK - 9541 PLAZA CIRCLE - EL PASO, TX 79927	45-2893839	501(C)(3)	25,000.	0.			SUPPORT FOR HUNGER & POVERTY
EMILY'S ANIMAL WELFARE 1309 WARSON PLACE ST. LOUIS, MO 63117	81-2407036	501(C)(3)	0.	116,448.	FMV	PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
EQUINE RESCUE LEAGUE PO BOX 4366 LEESBURG, VA 20177	54-1541993	501(C)(3)	14,269.	0.			SUPPORT FOR RESCUED ANIMALS
EQUINE RESCUE OF AIKEN 532 GLENWOOD DR AIKEN, SC 29803	20-5162723	501(C)(3)	0.	125,793.	FMV	PET FOOD, PET PRODUCTS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
ESPERANZA EN ESCALANTE 3700 S. CALLE POLAR TUCSON, AZ 85730	86-0714588	501(C)(3)	0.	8,498.	FMV	PET PRODUCTS, FACE MASKS	SUPPORT FOR HUNGER & POVERTY
FANCY CATS & DOGS RESCUE TEAM 13110 PELFREY LANE FAIRFAX, VA 22033	54-1859914	501(C)(3)	8,289.	0.			SUPPORT FOR RESCUED ANIMALS
FAYETTEVILLE ANIMAL PROTECTION SOCIETY - 3927 BRAGG BLVD - FAYETTEVILLE, NC 28303	58-1483982	501(C)(3)	0.	17,139.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
FEED OUR VETERANS 286 GENESSE ST #7 UTICA, NY 13502	26-3108361	501(C)(3)	7,647.	0.			SUPPORT FOR HUNGER & POVERTY

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FEEDING AMERICA PO BOX 96749 WASHINGTON, DC 20090-6749	36-3673599	501(C)(3)	324,244.	0.			SUPPORT FOR HUNGER & POVERTY
FEEDING FURRY FRIENDS 21233 LITHIUM ST NW NOWTHEN, MN 55303	83-2754250	501(C)(3)	0.	466,881.	FMV	PET FOOD, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
FELINES & CANINES 6379 N PAULINA STREET CHICAGO, IL 60660	36-2922975	501(C)(3)	0.	5,345.	FMV	PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
FERAL CAT CARETAKERS COALITION 11956 DOROTHY STREET, #7 LOS ANGELES, CA 90049	95-4781600	501(C)(3)	0.	534,253.	FMV	PET FOOD	SUPPORT FOR RESCUED ANIMALS
FLEET OF ANGELS 3226 S NEWCOMBE STREET NO. 101 LAKEWOOD, CO 80227	46-3895690	501(C)(3)	10,000.	0.			SUPPORT FOR RESCUED ANIMALS
FOOD BANK OF NORTH ALABAMA 2000-B VERNON AVE HUNTSVILLE, ALABAMA, PUERTO RICO 35805	63-0844372	501(C)(3)	10,000.	0.			SUPPORT FOR HUNGER & POVERTY
FOOD BANK OF THE RIO GRANDE VALLEY, INC. - 724 N. CAGE BLVD. - PHARR, TX 78577	74-2421560	501(C)(3)	80,000.	73,542.	FMV	APPAREL, HOUSEWARE, CONFECTION, PET FOOD, PET	SUPPORT FOR HUNGER & POVERTY
FORGOTTEN HARVEST 21800 GREENFIELD OAK PARK, MI 98237	38-2926476	501(C)(3)	20,000.	0.			SUPPORT FOR HUNGER & POVERTY
FORT WORTH ANIMAL CARE AND CONTROL 4900 MARTIN STREET FORT WORTH, TX 76119	75-6000528	GOVT	63.	7,857.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS

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FRANKLIN COUNTY ANIMAL SHELTER NC 351 T KEMP RD LOUISBURG, NC 27549	56-6000299	GOVT	1,322.	10,127.	FMV	PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
FRIENDLY FERALS, INC. P.O. BOX 754033 FOREST HILLS, NY 11375	26-2249492	501(C)(3)	0.	1,463,175.	FMV	PET FOOD	SUPPORT FOR RESCUED ANIMALS
FRIENDS FOR FELINES, INC. - TABBY TOWN - 3701 MCKINLEY PARKWAY - BLASDELL, NY 14219	27-0663113	501(C)(3)	13,081.	0.			SUPPORT FOR RESCUED ANIMALS
FRIENDS OF CHICAGO ANIMAL CARE & CONTROL - P.O. BOX 4414 - CHICAGO, IL 60680-4255	36-4427796	501(C)(3)	12,231.	0.			SUPPORT FOR RESCUED ANIMALS
FRIENDS OF MIAMI ANIMAL FOUNDATION 2665 S BAYSHORE DRIVE, SUITE 1200 MIAMI, FL 33133	81-4578892	501(C)(3)	5,000.	5,000.	FMV	FACE MASKS	SUPPORT FOR RESCUED ANIMALS
FRIENDS OF PALM SPRINGS ANIMAL SHELTER - 4575 E MESQUITE AVE - PALM SPRINGS, CA 92264	33-0731853	501(C)(3)	0.	27,951.	FMV	PET FOOD, PET FOOD VOUCHERS	SUPPORT FOR RESCUED ANIMALS
FRIENDS OF PIMA ANIMAL CARE CENTER PO BOX 85370 TUCSON, AZ 85754	47-4160770	501(C)(3)	14,000.	290,530.	FMV	PET FOOD, PET PRODUCTS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
FRIENDS OF RUSSELL COUNTY ANIMALS 447 DENNISON CHAPEL RD. LEBANON, VA 24266	81-0983361	501(C)(3)	0.	12,376.	FMV	PET FOOD VOUCHERS, PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
FRIENDS OF THE ALAMEDA ANIMAL SHELTER - 1590 FORTMANN WAY - ALAMEDA, CA 94501	27-0864431	501(C)(3)	16,865.	0.			SUPPORT FOR RESCUED ANIMALS

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FRIENDS OF THE ANIMAL SHELTER FOTAS - PO BOX 2207 - AIKEN, SC 29802	27-0609272	501(C)(3)	5,113.	0.			SUPPORT FOR RESCUED ANIMALS
FRIENDS OF UPLAND ANIMAL SHELTER 1275 SAN BERNARDINO ROAD UPLAND, CA 91786	46-2546783	501(C)(3)	4,053.	3,395.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
FURRY FRIENDS ROCKIN RESCUE PO BOX 7364 BISMARCK, ND 58507	47-4976049	501(C)(3)	5,000.	4,367.	FMV	PET FOOD	SUPPORT FOR RESCUED ANIMALS
GALVESTON COUNTY CONTINUUM OF CARE COUNCIL - 4700 BROADWAY, SUITE E100A - GALVESTON, TX 77551	85-1328908	501(C)(3)	0.	36,210.	FMV	APPAREL, HOUSEWARE, PET PRODUCTS	SUPPORT FOR HUNGER & POVERTY
GALVESTON ISLAND HUMANE SOCIETY 6814 BROADWAY GALVESTON, TX 77554	74-2159658	501(C)(3)	0.	5,639.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
GATEWAY PET GUARDIANS 725 N. 15TH STREET EAST ST. LOUIS, IL 62205	26-0096240	501(C)(3)	0.	2,804,437.	FMV	PET FOOD, PET PRODUCTS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
GIVE A DOG A HOME 187 DOWNS ROAD SEBEC, ME 04481	27-5241306	501(C)(3)	0.	72,000.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
GIVE ME SHELTER PROJECT 47-48 196 STREET FLUSHING, NY 11358	45-3207025	501(C)(3)	55,627.	500.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
GLEANNING FOR THE WORLD, INC. 7539 STAGE ROAD, P.O. BOX 645 CONCORD, VA 24538	54-1930105	501(C)(3)	0.	281,184.	FMV	FACE MASKS, APPAREL, HOUSEWARE, PET FOOD, PET	SUPPORT FOR HUNGER & POVERTY

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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
GOOD MEWS ANIMAL FOUNDATION, INC. 3805 ROBINSON ROAD NE MARIETTA, GA 30068	58-1790828	501(C)(3)	5,500.	3,337.	FMV	PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
GOOD WORLD ANIMAL RESCUE AND PROTECTION - 404 GARDEN STATE DRIVE - CHERRY HILL, NJ 08002	84-3779390	501(C)(3)	24,593.	0.			SUPPORT FOR RESCUED ANIMALS
GRAY FACE ACRES SENIOR DOG RESCUE 4625 SUDLEY RD #393 CATHARPIN, VA 20143	81-2325481	501(C)(3)	7,279.	10,127.	FMV	PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
GREAT LAKES BENGAL RESCUE 10720 HITE CREEK ROAD LOUISVILLE, KY 40241	26-1120616	501(C)(3)	0.	1,370,187.	FMV	PET FOOD, PET PRODUCTS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
GREAT PLAINS SPCA 5428 ANTIOCH DR MERRIAM, KS 66202	05-0552529	501(C)(3)	2,500.	471,808.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
GREATER BIRMINGHAM HUMANE SOCIETY 300 SNOW DRIVE BIRMINGHAM, AL 35209-6301	63-0288810	501(C)(3)	0.	532,162.	FMV	APPAREL, HOUSEWARE, PET FOOD, PET PRODUCTS	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS
GREATER HUNTSVILLE HUMANE SOCIETY 2812 JOHNSON ROAD HUNTSVILLE, AL 35805	23-7093527	501(C)(3)	0.	5,003.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
GREENHILL HUMANE SOCIETY 88530 GREEN HILL RD EUGENE, OR 97402	93-0467412	501(C)(3)	8,177.	0.			SUPPORT FOR RESCUED ANIMALS
GREENVILLE COUNTY ANIMAL CARE 328 FURMAN HALL ROAD GREENVILLE, SC 29609	57-6000356	GOVT	5,000.	405,862.	FMV	PET FOOD, PET PRODUCTS, PET PHARMACEUTICALS , FACE MASKS	SUPPORT FOR RESCUED ANIMALS

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HALIFAX HUMANE SOCIETY 2364 LPGA BLVD DAYTONA BEACH, FL 32124	59-0530990	501(C)(3)	1,370.	10,118.	FMV	PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
HALLIE HILL ANIMAL SANCTUARY 5604 NEW ROAD HOLLYWOOD, SC 29449	76-0731341	501(C)(3)	6,430.	0.			SUPPORT FOR RESCUED ANIMALS
HAPPY CAT INC CHRIS ARSENAULT, PO BOX 688 CORAM, NY 11727	90-0576904	501(C)(3)	8,519.	0.			SUPPORT FOR RESCUED ANIMALS
HAPPY TALES RANCH AND RESCUE 8235 N 19TH AVE W COLFAX, IA 50054	47-1713816	501(C)(3)	1,566.	4,854.	FMV	PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
HARVESTERS - THE COMMUNITY FOOD NETWORK - 3801 TOPPING AVENUE - KANSAS CITY, MO 64129	43-1208665	501(C)(3)	0.	10,000.	FMV	FACE MASKS	SUPPORT FOR HUNGER & POVERTY
HAWAII FOODBANK KAUAI 4241 HANAHAO PLACE STE. 101 LIHUE, KAUA'I, HI 96766	99-0220699	501(C)(3)	0.	64,234.	FMV	APPAREL, HOUSEWARE, PET FOOD, PET PRODUCTS	SUPPORT FOR HUNGER & POVERTY
HAWAII ISLAND HUMANE SOCIETY 78-6767 MAMALAOA HWY HOLUALOA, HI 96725	99-6009437	501(C)(3)	3,337.	12,223.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
HAWAII VETERINARY MEDICAL ASSOCIATION - P.O. BOX 61309 - HONOLULU, OAHU, HI 96839-1309	99-0265672	501(C)(3)	0.	191,558.	FMV	PET FOOD, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
HAWAIIAN HUMANE SOCIETY 2700 WAIALAE AVENUE HONOLULU, HI 96826	99-0073490	501(C)(3)	12,195.	15,169.	FMV	PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS

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HEARTLAND ANIMAL SHELTER 2975 MILWAUKEE AVE. NORTHBROOK, IL 60062	16-1617345	501(C)(3)	7,846.	6,868.	FMV	PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
HEARTS ALIVE VILLAGE 1750 S RAINBOW BLVD #4 LAS VEGAS, NV 89146	46-3622732	501(C)(3)	0.	769,014.	FMV	PET FOOD, PET PHARMACEUTICALS , PET PRODUCTS, FACE	SUPPORT FOR RESCUED ANIMALS
HEAVEN ON EARTH SOCIETY FOR ANIMALS - 7342 FULTON AVENUE - NORTH HOLLYWOOD, CA 91605	77-0538189	501(C)(3)	22,303.	2,621.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
HELEN SANDERS CATPAWS 1198 PACIFIC COAST HWY, STE D-227 SEAL BEACH, CA 90740	27-1400697	501(C)(3)	6,006.	500.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
HELPING ANIMALS LIVE AND OVERCOME (HALO RESCUE) - 710 JACKSON STREET - SEBASTIAN, FL 32958	20-8466866	501(C)(3)	6,000.	124.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
HELPING PAWS ACROSS BORDERS 16 CHAMISA RD PLACITAS, NM 87043	46-4129178	501(C)(3)	0.	130,000.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
HENRY'S HOUSE FERAL COMMUNITY 3285 EARHART WAY BUFORD, GA 30519	81-2710918	501(C)(3)	0.	2,080,964.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
HOMEWARD TRAILS TRAILS UP PROGRAM 11116 FAIRFAX STATION RD FAIRFAX STATION, VA 22039	32-0086330	501(C)(3)	0.	24,793.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
HOOFBEATS AND PAWPRINTS RESCUE 17341 RIVER RD NATCHEZ, MS 39120	64-0562683	501(C)(3)	0.	15,592.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS

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HOUNDHAVEN, INC. 10051 DOG PATCH LANE MINNEOLA, FL 34715	59-3655448	501(C)(3)	7,531.	876.	FMV	PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
HOUSTON FOOD BANK 535 PORTWALL STREET HOUSTON, TX 77029	74-2181456	501(C)(3)	25,000.	7,964.	FMV	APPAREL, HOUSEWARE, PET PRODUCTS	SUPPORT FOR HUNGER & POVERTY
HOUSTON HUMANE SOCIETY 14700 ALMEDA ROAD HOUSTON, TX 77053	74-1340341	501(C)(3)	24,678.	1,245,571.	FMV	PET FOOD, PET PHARMACEUTICALS , PET PRODUCTS, FACE	SUPPORT FOR RESCUED ANIMALS
HUMANE PENNSYLVANIA 1729 N. 11TH STREET READING, PA 19604	23-1384936	501(C)(3)	49.	328,020.	FMV	APPAREL, HOUSEWARE, PET FOOD, PET PRODUCTS, PET	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS
HUMANE RESCUE ALLIANCE 71 OGLETHORPE ST NW WASHINGTON, DC 20011	53-0219724	501(C)(3)	7,550.	397,338.	FMV	PET FOOD, PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
HUMANE SOCIETY FOR ANIMALS INC PO BOX 476 ROGERS, AR 72757	71-0462466	501(C)(3)	40,629.	0.			SUPPORT FOR RESCUED ANIMALS
HUMANE SOCIETY INTERNATIONAL 1255 23RD STREET NW, SUITE 450 WASHINGTON, DC 20037	52-1769464	501(C)(3)	0.	6,000.	FMV	FACE MASKS	SUPPORT FOR RESCUED ANIMALS
HUMANE SOCIETY OF BALTIMORE COUNTY (DBA BALTIMORE HUMANE SOCIETY) - 1601 NICODEMUS ROAD - REISTERSTOWN, MD 21136	52-0623165	501(C)(3)	11,745.	20,254.	FMV	PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
HUMANE SOCIETY OF BARRON COUNTY 1571 GUY AVE BARRON, WI 54812	39-1456327	501(C)(3)	0.	5,361.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS

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HUMANE SOCIETY OF BROWARD COUNTY 2070 GRIFFIN ROAD FT LAUDERDALE, FL 33312	59-6002321	501(C)(3)	15,319.	61,457.	FMV	PET PRODUCTS, PET PHARMACEUTICALS , FACE MASKS	SUPPORT FOR RESCUED ANIMALS
HUMANE SOCIETY OF CARROLL COUNTY 2517 LITTLESTOWN PIKE WESTMINSTER, MD 21158	52-0689149	501(C)(3)	0.	110,846.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
HUMANE SOCIETY OF CENTRAL OREGON 61170 SE 27TH ST BEND, OR 97702-9694	93-0616957	501(C)(3)	5,169.	7,460.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
HUMANE SOCIETY OF HALL COUNTY DBA HUMANE SOCIETY OF NORTHEAST GEORGIA - 845 WEST RIDGE ROAD - GAINESVILLE, GA 30501	58-0678817	501(C)(3)	0.	5,010.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
HUMANE SOCIETY OF INDIANAPOLIS 7929 N MICHIGAN RD INDIANAPOLIS, IN 46268	35-0876385	501(C)(3)	0.	39,500.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
HUMANE SOCIETY OF NORTH TEXAS 1840 E. LANCASTER AVE. FORT WORTH, TX 76103	75-1245911	501(C)(3)	0.	5,256.	FMV	PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
HUMANE SOCIETY OF SKAGIT VALLEY 18841 KELLEHER ROAD BURLINGTON, WA 98233	91-0903532	501(C)(3)	1,500.	10,498.	FMV	PET PRODUCTS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
HUMANE SOCIETY OF ST. JOSEPH COUNTY - 2506 GRAPE RD - MISHAWAKA, IN 46545	35-6006532	501(C)(3)	0.	10,127.	FMV	PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
HUMANE SOCIETY OF WASHINGTON COUNTY - 2101 W WALNUT ST - JOHNSON CITY, TN 37604	62-1582278	501(C)(3)	0.	5,702.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS

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HUMANE SOCIETY OF WESTERN MONTANA 5930 HWY 93 SOUTH MISSOULA, MT 59804	81-0290933	501(C)(3)	3,000.	150,298.	FMV	APPAREL, HOUSEWARE, PET FOOD, PET PRODUCTS	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS
I STAND WITH MY PACK 10736 JEFFERSON BLVD # 273 CULVER CITY, CA 90230	81-4291281	501(C)(3)	10,500.	0.			SUPPORT FOR RESCUED ANIMALS
INTERFAITH MINISTRIES FOR GREATER HOUSTON - 3202 SAN JACINTO ST. - HOUSTON, TX 77004	74-1488102	501(C)(3)	0.	66,886.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
INTERMOUNTAIN CENTERS 401 N. BONITA AVE TUCSON, AZ 85745	85-0254535	501(C)(3)	0.	16,004.	FMV	FACE MASKS, APPAREL, CHILDREN'S TOYS	SUPPORT FOR HUNGER & POVERTY
IOWA HUMANE ALLIANCE 6540 6TH ST SW CEDAR RAPIDS, IA 52404	26-1992986	501(C)(3)	0.	706,816.	FMV	PET FOOD	SUPPORT FOR RESCUED ANIMALS
JAMESON HUMANE 1199 CUTTINGS WHARF RD NAPA, CA 94559	47-1230166	501(C)(3)	5,000.	52,000.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
JEFF DAVIS ANIMAL WELFARE GROUP 96 JYRO LANE CARENCRO, LA 70520	58-2099342	501(C)(3)	0.	11,252.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
JEFFERSON PARISH ANIMAL SHELTER 2701 LAPALCO BLVD HARVEY, LA 70058	72-6013920	GOVT	0.	211,206.	FMV	PET FOOD, PET PRODUCTS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
JOURNEYS END HORSE SANCTUARY, INC. 1766 11TH AVE FRIENDSHIP, WI 53934	83-3130238	501(C)(3)	7,015.	0.			SUPPORT FOR RESCUED ANIMALS

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KANAWHA-CHARLESTON HUMANE ASSOCIATION - 1248 GREENBRIER ST. - CHARLESTON, WV 25311	55-0435381	501(C)(3)	0.	58,487.	FMV	PET FOOD, PET PRODUCTS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
KATIE'S ROADSIDE RESCUE 7025 W FM 476 POTEET, TX 78065	45-1551568	501(C)(3)	0.	167,000.	FMV	PET FOOD, PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
KAUAI HUMANE SOCIETY PO BOX 3330 LIHUE, HI 96766	99-0089250	501(C)(3)	39,668.	11,688.	FMV	PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
KENTUCKY HUMANE SOCIETY 1000 LYNDON LANE, SUITE B LOUISVILLE, KY 40222	61-0463938	501(C)(3)	1,980.	294,586.	FMV	PET FOOD, PET PRODUCTS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
KINGDOM CAT RESCUE CORPORATION 6324 LAKE SMITH CIR WINDERMERE, FL 34786	85-1747505	501(C)(3)	20,819.	0.			SUPPORT FOR RESCUED ANIMALS
KITTY CITY, INC. P.O. BOX 25034 MEMPHIS, TN 38125	45-3972342	501(C)(3)	0.	30,000.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
KOKOMO RESCUE MISSION P.O. BOX 476 KOKOMO, IN 46903-0476	35-1104430	501(C)(3)	10,000.	0.			SUPPORT FOR HUNGER & POVERTY
LA FAMILY HOUSING 7843 LANKERSHIM BLVD NORTH HOLLYWOOD, CA 91605	95-3920560	501(C)(3)	0.	81,093.	FMV	FACE MASKS, APPAREL, HOUSEWARE, PET PRODUCTS	SUPPORT FOR HUNGER & POVERTY
LAB RESCUERS OF SAN DIEGO PO BOX 221038 SAN DIEGO, CA 92192	81-0646390	501(C)(3)	13,881.	2,770.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS

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LAFAYETTE ANIMAL SHELTER & CARE CENTER - 410 N. DUGAS RD - LAFAYETTE, LA 70507	72-1335255	501(C)(3)	307.	4,715.	FMV	PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
LAFOURCHE PARISH ANIMAL SHELTER 934 HIGHWAY 3185 THIBODAUX, LA 70301	72-6000634	GOVT	533.	10,944.	FMV	PET PRODUCTS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
LANAI CAT SANCTUARY PO BOX 631577 LANAI CITY, HI 96763	26-1329156	501(C)(3)	3,510.	6,744.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
LIBERTY HUMANE SOCIETY 235 JERSEY CITY BLVD JERSEY CITY, NJ 07305	22-3585263	501(C)(3)	12,868.	0.			SUPPORT FOR RESCUED ANIMALS
LIFELINE ANIMAL PROJECT P.O. BOX 15466 ATLANTA, GA 30333	01-0599278	501(C)(3)	0.	12,933.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
LITTLE WANDERERS NYC 16 WEST 77TH STREET, #1EE NEW YORK, NY 10024	82-2451142	501(C)(3)	20,458.	1,002.	FMV	PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
LONE STAR PRYS AND PAWS PO BOX 128 MERIT, TX 75458	80-0190229	501(C)(3)	0.	14,556.	FMV	PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
LOS ANGELES COUNTY DEPARTMENT OF ANIMAL CARE AND CONTROL - 5898 CHERRY AVENUE - LONG BEACH, CA 90805	95-9000927	GOVT	0.	78,124.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
LOUDON COUNTY FRIENDS OF ANIMALS 231 OLIGI CIRCLE LOUDON, TN 37774	46-3105831	501(C)(3)	18,809.	0.			SUPPORT FOR RESCUED ANIMALS

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LOUISIANA SPCA 1700 MARDI GRAS BLVD NEW ORLEANS, LA 70114	72-0471368	501(C)(3)	10,000.	75,247.	FMV	PET FOOD, PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
LOUISIANA STATE ANIMAL RESPONSE TEAM (LSART) - 8550 UNITED PLAZA BLVD., SUITE 1001 - BATON ROUGE, LA 70809	72-1507753	501(C)(3)	0.	117,403.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
LOWCOUNTRY ANIMAL RESCUE P O BOX 952 LADSON, SC 29456	57-1129219	501(C)(3)	0.	8,153.	FMV	PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
LOWCOUNTRY FOOD BANK 2864 AZALEA DR NORTH CHARLESTON, SC 29405	57-0751835	501(C)(3)	20,000.	0.			SUPPORT FOR HUNGER & POVERTY
LUCKY DOG ANIMAL RESCUE 5159 LEE HWY ARLINGTON, VA 22207	30-0559037	501(C)(3)	8,559.	50.	FMV	FACE MASKS	SUPPORT FOR RESCUED ANIMALS
M&M'S FUR-EVER FURBABIES 4529 HILLMON GROVE ROAD CAMERON, NC 28326	47-3636348	501(C)(3)	2,868.	5,018.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
MARICOPA COUNTY ANIMAL CARE AND CONTROL - 2500 SOUTH 27TH AVENUE - PHOENIX, AZ 85009	86-6000472	GOVT	0.	211,352.	FMV	PET FOOD, PET PHARMACEUTICALS, PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
MARYLAND SPCA, INC. 3300 FALLS ROAD BALTIMORE, MD 21211	52-6001558	501(C)(3)	0.	360,570.	FMV	PET FOOD, PET PRODUCTS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
MASSACHUSETTS SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS - 350 SOUTH HUNTINGTON AVE - BOSTON, MA 02130	04-2103597	501(C)(3)	2,500.	38,155.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS

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MAUI HUMANE SOCIETY PO BOX 1047 PUUNENE, HI 96784	99-6000953	501(C)(3)	10,486.	92,473.	FMV	PET FOOD, PET PRODUCTS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
MAYFIELD GRAVES COUNTY ANIMAL SHELTER - 500 N 12TH STREET - MAYFIELD, KY 42066	61-1199194	501(C)(3)	2,500.	11,307.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
MCKAMEY ANIMAL CENTER 4500 N. ACCESS RD CHATTANOOGA, TN 37415	01-0824858	501(C)(3)	454.	8,342.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
MEMPHIS ANIMAL SERVICES 2350 APPLING CITY COVE MEMPHIS, TN 38133	62-6000361	GOVT	0.	39,500.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
MEOOWZRESQ 960 N TUSTIN ST SUITE 200 ORANGE, CA 92867	26-3035880	501(C)(3)	19,552.	0.			SUPPORT FOR RESCUED ANIMALS
MICHIGAN HUMANE SOCIETY 30300 TELEGRAPH RD. STE. 220 BINGHAM FARMS, MI 48025	38-1358206	501(C)(3)	5,000.	1,759,062.	FMV	PET FOOD, PET PHARMACEUTICALS, PET PRODUCTS, FACE	SUPPORT FOR RESCUED ANIMALS
MISSISSIPPI BOARD OF ANIMAL HEALTH 121 N. JEFFERSON ST. JACKSON, MS 39201	64-6000793	501(C)(3)	0.	39,213.	FMV	PET PRODUCTS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
MISSISSIPPI FOOD NETWORK PO BOX 411 JACKSON, MS 39205	64-0676325	501(C)(3)	21,318.	0.			SUPPORT FOR HUNGER & POVERTY
MOBILE SPCA 620 ZEIGLER CIR W MOBILE, AL 36608	63-0500374	501(C)(3)	1,756.	10,127.	FMV	PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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
MOHAWK HUDSON HUMANE SOCIETY 3 OAKLAND AVE. MENANDS, NY 12204	14-1338459	501(C)(3)	0.	61,300.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
MONTCLAIR TOWNSHIP ANIMAL SHELTER 77 NORTH WILLOW STREET MONTCLAIR, NJ 07042	45-4506433	501(C)(3)	0.	40,567.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
MONTGOMERY COUNTY ANIMAL CARE & ADOPTION - 480 CINNABAR RD - CHRISTIANSBURG, VA 24073	54-6001430	GOVT	2,083.	10,127.	FMV	PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
MOTLEY ZOO ANIMAL RESCUE 16725 CLEVELAND ST REDMOND, WA 98052	26-4338166	501(C)(3)	5,620.	6,714.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
MOVIMIENTO SOCIAL PRO BIENESTAR ANIMAL - QUINTAS DE CUPEY A-11 14TH STREET - SAN JUAN, PR 00926	66-0866412	501(C)(3)	0.	153,670.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
NASHVILLE HUMANE ASSOCIATION 213 OCEOLA AVE NASHVILLE, TN 37209	62-0672999	501(C)(3)	0.	281,650.	FMV	APPAREL, HOUSEWARE, PET FOOD, PET PHARMACEUTICALS	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS
NATIVE AMERICAN ADVANCEMENT FOUNDATION (NAAF) - PO BOX 64877 - TUCSON, AZ 85728-4877	45-2725155	501(C)(3)	0.	23,244.	FMV	FACE MASKS, APPAREL, HOUSEWARE, CHILDREN'S	SUPPORT FOR HUNGER & POVERTY
NATIVE AMERICAN HUMANE SOCIETY 3838 WEST CARSON STREET, SUITE 218 TORRANCE, CA 90503	46-5445818	501(C)(3)	0.	44,000.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
NAVAJO NATION PO BOX 2010 WINDOW ROCK, AZ 86515	86-0092335	501(C)(3)	0.	14,100.	FMV	FACE MASKS	SUPPORT FOR RESCUED ANIMALS

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NEVADA HUMANE SOCIETY 2825 LONGLEY LANE RENO, NV 89502	88-0072720	501(C)(3)	0.	49,752.	FMV	PET FOOD, PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
NEW HAMPSHIRE SPCA PO BOX 196 STRATHAM, NH 03885	02-6000614	501(C)(3)	7,500.	37,571.	FMV	PET PRODUCTS, PET FOOD, FACE MASKS, PET FOOD VOUCHERS	SUPPORT FOR RESCUED ANIMALS
NOAH PROJECT 5205 AIRLINE ROAD MUSKEGON, MI 49451	38-3456850	501(C)(3)	0.	25,490.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
NOAH'S ANIMAL HOUSE FOUNDATION 1 WEST OWENS AVENUE NORTH LAS VEGAS, NV 89030	46-0869579	501(C)(3)	0.	18,642.	FMV	APPAREL, HOUSEWARE, PET FOOD, PET PRODUCTS, FACE	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS
NOBLE FRIENDS FOUNDATION FOR OC ANIMAL CARE - 8502 EAST CHAPMAN AVENUE, #351 - ORANGE, CA 92869	38-3801007	501(C)(3)	0.	15,022.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
NORTH VALLEY ANIMAL DISASTER GROUP PO BOX 441 CHICO, CA 95927	06-1672191	501(C)(3)	0.	180,671.	FMV	PET FOOD	SUPPORT FOR RESCUED ANIMALS
NORTHEAST OHIO SPCA 9555 BROOKPARK ROAD PARMA, OH 44129	04-3767472	501(C)(3)	0.	43,881.	FMV	PET FOOD	SUPPORT FOR RESCUED ANIMALS
NORTHERN OKLAHOMA HUMANE SOCIETY 900 W PROSPECT AVE PONCA CITY, OK 74601	73-1245251	501(C)(3)	2,000.	5,370.	FMV	PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
NORTHSHORE HUMANE SOCIETY (FORMERLY ST. TAMMANY HUMANE SOCIETY) - 20384 HARRISON AVE - COVINGTON, LA 70433	72-0543369	501(C)(3)	835.	25,617.	FMV	PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS

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OCONEE HUMANE SOCIETY 1925 SANDIFER BLVD. SENECA, SC 29678	46-0485454	501(C)(3)	6,495.	631.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
OPERATION COMMUNITY CATS 1077 S. GARDEN PLACE BOISE, ID 83705	27-0977993	501(C)(3)	0.	73,058.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
OREGON HUMANE SOCIETY 1067 NE COLUMBIA BLVD PORTLAND, OR 97211	93-0386880	501(C)(3)	0.	27,818.	FMV	PET FOOD, PET PRODUCTS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
ORGANIZATION OF HOPE (BRIDGING HOPE) - 218 EAST LEXINGTON STREET, SUITE 600 - BALTIMORE, MD 21202	30-0590424	501(C)(3)	6,674.	203,814.	FMV	FACE MASKS, APPAREL, HOUSEWARE, PET PRODUCTS	SUPPORT FOR HUNGER & POVERTY
OUACHITA PARISH ANIMAL CONTROL 417 WELL ROAD WEST MONROE, LA 71292	72-6001064	GOVT	0.	67,270.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
OUR BIG FAT CARIBBEAN RESCUE INC PO BOX 1377 VIEQUES, PR 00765	66-0871157	501(C)(3)	0.	39,494.	FMV	PET PRODUCTS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
PACIFIC MARINE MAMMAL CENTER 20612 LAGUNA CANYON ROAD LAGUNA BEACH, CA 92651	95-3680896	501(C)(3)	5,294.	0.			SUPPORT FOR RESCUED ANIMALS, PROTECTING/RESTORING ENVIRONMENT
PALM VALLEY ANIMAL SOCIETY 2501 W. TRENTON RD EDINBURG, TEXAS, PUERTO RICO 78539	74-1819910	501(C)(3)	0.	287,431.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
PALS (PETS A-LONE SANCTUARY OF LINCOLN CO - 4287 MO-47 - TROY, MO 63379	43-1507779	501(C)(3)	6,309.	0.			SUPPORT FOR RESCUED ANIMALS

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PARIS ANIMAL WELFARE SOCIETY, INC. 6 LEGION ROAD PARIS, KY 40361	61-1224933	501(C)(3)	0.	9,118.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
PAW SALVATION INC PO BOX 489 POSEN POSEN, IL 60469	83-2619561	501(C)(3)	0.	88,943.	FMV	APPAREL, HOUSEWARE, PET PRODUCTS	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS
PAWS HUMANE, INC. 4900 MILGEN RD COLUMBUS, GA 31907	58-2513501	501(C)(3)	0.	50,000.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
PAWS OF HERTFORD COUNTY PO BOX 153 MURFREESBORO, NC 27855	20-4940600	501(C)(3)	9,041.	502.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
PAWS4THOUGHT ANIMAL RESCUE PO BOX 1893 BONITA, CA 91908	81-3216020	501(C)(3)	1,500.	9,217.	FMV	PET FOOD, PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
PAZA TREE OF LIFE 1005 MITMAN ROAD EASTON, PA 18040	83-3581282	501(C)(3)	0.	50,931.	FMV	FACE MASKS, APPAREL, HOUSEWARE, CHILDREN'S	SUPPORT FOR HUNGER & POVERTY
PENNSYLVANIA SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS (PSPCA) - 350 EAST ERIE AVENUE - PHILADELPHIA, PA 19134	23-1352269	501(C)(3)	2,594.	602,242.	FMV	PET FOOD, PET PRODUCTS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
PEORIA COUNTY ANIMAL PROTECTION SERVICES - 2600 NE PERRY AVE - PEORIA, IL 61603	37-6001763	GOVT	25.	46,000.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
PET FOOD PANTRY OF EASTERN NC PO BOX 2492, 408 W. ARLINGTON BLVD. (PHYSICAL ADDRESS) - GREENVILLE, NC 2783	47-1475565	501(C)(3)	0.	91,300.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS

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PETS & PEOPLE HUMANE SOCIETY PO BOX 850587 YUKON, OK 73085	73-1435577	501(C)(3)	0.	25,091.	FMV	PET PRODUCTS, FACE MASKS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
PETS ARE WONDERFUL SUPPORT - PAWS LA - 2121 S. FLOWER STREET - LOS ANGELES, CA 90007	95-4178092	501(C)(3)	0.	126,000.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
PICK YOUR PAW ANIMAL RESCUE 450 SHREWSBURY PLAZA #129 SHREWSBURY, NJ 07702	45-2806083	501(C)(3)	0.	7,427.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
PIMA ANIMAL CARE CENTER 4000 N SILVERBELL RD TUCSON, AZ 85745	86-6000543	501(C)(3)	2,500.	292,763.	FMV	APPAREL, HOUSEWARE, PET FOOD, PET PRODUCTS	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS
PITTSYLVANIA COUNTY BOARD OF SUPERVISORS FOR THE PITTSYLVANIA PET CENTER - 11880 US HIGHWAY 29 - CHATHAM, VA 24531	54-6001508	GOVT	17,685.	122,799.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
PROGRESSIVE ANIMAL WELFARE SOCIETY (PAWS) - 15305 44TH AVE W - LYNNWOOD, WA 98087	91-6073154	501(C)(3)	0.	7,143.	FMV	PET PRODUCTS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
PROTECTIVE ANIMAL WELFARE SOCIETY (PAWS KC) - 7833 WORNALL ROAD - KANSAS CITY, MO 64114	27-1087517	501(C)(3)	0.	684,537.	FMV	PET FOOD, PET PRODUCTS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
PUPPY KITTY NY CITY INC 6329 75TH STREET MIDDLE VILLAGE, NY 11379	83-1059040	501(C)(3)	7,460.	1,010.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
PUPPY RESCUE MISSION PO BOX 1516 CELINA, TX 75009	27-4295476	501(C)(3)	12,447.	0.			SUPPORT FOR RESCUED ANIMALS

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QUEEN ANNE'S COUNTY ANIMAL SERVICES - 201 CLAY DRIVE - QUEENSTOWN, MD 21658	52-1011271	GOVT	0.	126,774.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
RAINBOW'S EDGE ANIMAL REFUGE 697 PINE HAVEN DR. TILLMAN, SC 29943	30-0008001	501(C)(3)	0.	1,412,577.	FMV	PET FOOD, PET PRODUCTS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
RAMAPO-BERGEN ANIMAL REFUGE, INC. 2 SHELTER LANE OAKLAND, NJ 07436	22-6094179	501(C)(3)	13,650.	8,829.	FMV	PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
RANCHO COASTAL HUMANE SOCIETY 389 REQUEZA ST ENCINITAS, CA 92024	95-2151583	501(C)(3)	0.	534,206.	FMV	PET FOOD, PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
RANDALL'S RESCUE PO BOX 1281 MOUNT LAUREL, NJ 08054	45-5189759	501(C)(3)	0.	168,000.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
REBELS RESCUE INC 3103 N 18TH STREET TAMPA, FL 33605	46-3842112	501(C)(3)	9,500.	0.			SUPPORT FOR RESCUED ANIMALS
REDROVER PO BOX 188890 SACRAMENTO, CA 95818	68-0124097	501(C)(3)	37,055.	0.			SUPPORT FOR RESCUED ANIMALS
RESCUE PACK CHICAGO 1306 W NORTHWEST HWY PALATINE, IL 60067	81-1738093	501(C)(3)	7,500.	5,237,007.	FMV	PET FOOD, PET PRODUCTS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
RESTORE GLOBAL PO BOX 77293 CHARLOTTE, NC 28271	26-0745879	501(C)(3)	0.	582,856.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS

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ROGUE VALLEY HUMANE SOCIETY 429 NW SCENIC DRIVE GRANTS PASS, OR 97526	93-0558872	501(C)(3)	0.	7,956.	FMV	PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
SAK RESCUE PO BOX 418233 SACRAMENTO, CA 95841	71-0960995	501(C)(3)	0.	883,247.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
SAN ANTONIO ANIMAL CARE SERVICES 4710 STATE HIGHWAY 151 SAN ANTONIO, TX 78227	74-6002070	501(C)(3)	5,167.	0.			SUPPORT FOR RESCUED ANIMALS
SAN DIEGO HUMANE SOCIETY 5500 GAINES ST SAN DIEGO, CA 92110	95-1661688	501(C)(3)	12,494.	802,901.	FMV	PET FOOD, PET PHARMACEUTICALS , PET PRODUCTS, FACE	SUPPORT FOR RESCUED ANIMALS
SANTA BARBARA COTTAGE HOSPITAL FOUNDATION - PO BOX 689 - SANTA BARBARA, CA 93105	95-3802238	501(C)(3)	0.	15,500.	FMV	FACE MASKS	SUPPORT FOR HUNGER & POVERTY
SANTA CRUZ COUNTY ANIMAL SHELTER 1001 RODRIGUEZ ST. SANTA CRUZ, CA 95062	90-0039494	GOVT	10,000.	234,327.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
SANTA PAULA ANIMAL RESCUE CENTER 705 E SANTA BARBARA ST - SANTA PAULA, CALIFORNIA, PUERTO RICO 93060	45-4185395	501(C)(3)	1,152.	10,982.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
SAVE A GATO PO BOX 9021227 SAN JUAN, PR 00902	66-0550555	501(C)(3)	223.	48,100.	FMV	PET FOOD, PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
SCOTT'S WISH INC 742 MILLIKENS BND COVINGTON, LA 70433	26-3566004	501(C)(3)	0.	17,130.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS

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SEA TURTLE INC 6617 PADRE BLVD SOUTH PADRE ISLAND, TX 78597	74-2042030	501(C)(3)	21,376.	0.			SUPPORT FOR PROTECTING/RESTORING ENVIRONMENT
SEATTLE HUMANE 13212 SE EASTGATE WAY BELLEVUE, WA 98005	91-0282060	501(C)(3)	5,600.	263,400.	FMV	PET PHARMACEUTICALS, PET FOOD, PET PRODUCTS,	SUPPORT FOR RESCUED ANIMALS
SECOND CHANCE ANIMAL SERVICES 111 YOUNG ROAD EAST BROOKFIELD, MA 01515	04-3490671	501(C)(3)	16,731.	15,502.	FMV	PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
SECOND HARVEST FOOD BANK OF GREATER NEW ORLEANS AND ACADIANA - 700 EDWARDS AVENUE - NEW ORLEANS, LA 70123	72-0956468	501(C)(3)	20,000.	120,454.	FMV	APPAREL, HOUSEWARE, PET PRODUCTS	SUPPORT FOR HUNGER & POVERTY
SECOND HARVEST FOOD BANK OF MIDDLE TENNESSEE - 331 GREAT CIRCLE ROAD - NASHVILLE, TN 37228	62-1049447	501(C)(3)	10,000.	2,000.	FMV	FACE MASKS	SUPPORT FOR HUNGER & POVERTY
SECOND HARVEST FOOD BANK OF THE MAHONING VALLEY - 2805 SALT SPRINGS RD - YOUNGSTOWN, OH 44509	34-1380074	501(C)(3)	20,000.	0.			SUPPORT FOR HUNGER & POVERTY
SHELTER PARTNERSHIP 520 S.GRAND AVENUE, SUITE 695 LOS ANGELES, CA 90071	95-3976214	501(C)(3)	0.	106,998.	FMV	HOUSEWARE	SUPPORT FOR HUNGER & POVERTY
SHENANDOAH SHEPHERD RESCUE PO BOX 764 STEPHENS CITY, VA 22655	81-4746690	501(C)(3)	12,500.	5,006.	FMV	PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
SHUTT'ER DOWN RANCH 4455 COUNTY ROAD 702 FARMERVILLE, TX 75442	81-4633428	501(C)(3)	0.	2,613,939.	FMV	PET FOOD, PET PRODUCTS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS

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SILICON VALLEY ANIMAL CONTROL AUTHORITY - 3370 THOMAS ROAD - SANTA CLARA, CA 95054	77-0574936	GOVT	9,079.	0.			SUPPORT FOR RESCUED ANIMALS
SIOUXLAND HUMANE SOCIETY 1015 TRI-VIEW AVENUE SIOUX CITY, IA 51103	42-6000336	501(C)(3)	0.	6,124.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
SOCIETY OF ST. ANDREW GEORGIA 3383 SWEET HOLLOW RD BIG ISLAND, VA 24526	54-1285793	501(C)(3)	0.	6,000.	FMV	FACE MASKS	SUPPORT FOR HUNGER & POVERTY
SOJOURNER CENTER PO BOX 20156 PHOENIX, AZ 85036	94-2465081	501(C)(3)	55,000.	0.			SUPPORT FOR RESCUED ANIMALS
SONOMA COUNTY CHANGE PROGRAM 3810 FOWLER ROAD WEST SACRAMENTO, CA 95691	26-2135318	501(C)(3)	0.	210,000.	FMV	PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
SOUTH BEND ANIMAL RESOURCE CENTER 521 ECLIPSE PL SOUTH BEND, IN 46628	00-3122131	501(C)(3)	1,988.	11,127.	FMV	PET PRODUCTS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
SOUTHEAST VOLUSIA HUMANE SOCIETY 1200 S GLENCOE RD NEW SMYRNA BEACH, FL 32114	59-1148843	501(C)(3)	5,141.	0.			SUPPORT FOR RESCUED ANIMALS
SOUTHERN PINES ANIMAL SHELTER 1901 N. 31ST AVE. HATTIESBURG, MS 39401	64-0514796	501(C)(3)	0.	278,558.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
SPCA OF WESTCHESTER 590 NORTH STATE ROAD BRIARCLIFF MANOR, NY 10510	13-1740069	501(C)(3)	0.	9,179.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS

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SPECIAL PALS INC. 3830 GREENHOUSE RD. HOUSTON, TX 77084	74-2050052	501(C)(3)	0.	5,520.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
SPOKANIMAL 710 N. NAPA ST SPOKANE, WA 99202	91-1223929	501(C)(3)	2,000.	10,285.	FMV	PET PRODUCTS, FACE MASKS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
SPOOFDAWG TO THE RESCUE PO BOX 6074, 1208 W. COLLINS AVE. ORANGE, CA 92867 - ORANGE, CA 92863	82-0870764	501(C)(3)	0.	19,561.	FMV	PET FOOD	SUPPORT FOR RESCUED ANIMALS
ST. CHARLES PARISH ANIMAL SHELTER 921 DEPUTY JEFF G. WATSON DRIVE LULING, LA 70070	72-6001208	GOVT	2,966.	274,431.	FMV	APPAREL, HOUSEWARE, PET FOOD, PET PHARMACEUTICALS	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS
ST. CLAIR COUNTY ANIMAL CONTROL 3378 GRISWOLD RD PORT HURON, MI 48060	38-6006420	GOVT	0.	7,135.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
ST. HUBERT'S ANIMAL WELFARE CENTER 575 WOODLAND AVE, PO BOX 159 MADISON, NJ 07940	22-1627726	501(C)(3)	4,742.	334,334.	FMV	PET FOOD, PET PRODUCTS, FACE MASKS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
ST. MARTIN PARISH ANIMAL SERVICES 1004 INDUSTRIAL PARK RD SAINT MARTINVILLE, LA 70582	72-6001273	GOVT	504.	57,327.	FMV	PET PRODUCTS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
ST. PAWS / KIBBLE KITCHEN COLORADO SPRINGS - 3275 E. PLATTE, UNIT E - COLORADO SPRINGS, CO 80909	27-1133755	501(C)(3)	0.	861,925.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
STAFFORD ANIMAL SHELTER 3 BUSINESS PARK RD LIVINGSTON, MT 59047	36-3432468	501(C)(3)	500.	138,704.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS

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STRAY DOG RANCH 585 CARNEYS BRANCH TRAIL SE BOLIVIA, NC 28422	46-3532760	501(C)(3)	0.	262,122.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
STREET DOGZ PO BOX 752432 LAS VEGAS, NV 89136	47-2517336	501(C)(3)	0.	8,982.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
SULZBACHER 611 EAST ADAMS ST. JACKSONVILLE, FL 32202	59-3229898	501(C)(3)	0.	27,618.	FMV	FACE MASKS, APPAREL, HOUSEWARE, PET PRODUCTS	SUPPORT FOR HUNGER & POVERTY
SUN CITIES 4 PAWS RESCUE INC 11129 W MICHIGAN AVE #1 YOUNGTOWN, AZ 85363	86-0822208	501(C)(3)	1,626.	10,825.	FMV	PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
SUSTAINABLE COASTLINES HAWAII 2909 WAIALAE AVE #19 HONOLULU, HI 96826	45-2596726	501(C)(3)	33,376.	0.			SUPPORT FOR PROTECTING/RESTORING ENVIRONMENT
THE ANIMAL PAD 1526 MYRTLE AVENUE SAN DIEGO, CA 92103	45-4902841	501(C)(3)	0.	18,759.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
THE CAT HOUSE ON THE KINGS 7120 SOUTH KINGS RIVER ROAD PARLIER, CA 93648	27-0015288	501(C)(3)	71,720.	12,275.	FMV	PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
THE CENTER FOR ANIMAL HEALTH & WELFARE - 1165 ISLAND PARK ROAD - EASTON, PA 18042	23-6290430	501(C)(3)	11,010.	0.			SUPPORT FOR RESCUED ANIMALS
THE CENTER FOR IMPACT COMMUNICATIONS INC. - 116 DEVOE ST, STE 2 - BROOKLYN, NY 11211	83-3381165	501(C)(3)	11,000.	0.			SUPPORT FOR PROTECTING/RESTORING ENVIRONMENT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 CONNECTICUT HUMANE SOCIETY 701 RUSSELL ROAD NEWINGTON, CT 06111	06-0667605	501(C)(3)	0.	17,299.	FMV	PET FOOD, PET FOOD VOUCHERS	SUPPORT FOR RESCUED ANIMALS
THE DOG HOUSE PROJECT 7625 132ND WAY SEMINOLE, FL 33776	83-4340683	501(C)(3)	0.	70,530.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
THE HUMANE SOCIETY OF NORTH MYRTLE BEACH - 409 BAY STREET, PO BOX 3369 - NORTH MYRTLE BEACH, SC 29582	57-1116175	501(C)(3)	28,472.	11,788.	FMV	PET PRODUCTS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
THE HUMANE SOCIETY OF PUERTO RICO PO BOX 2387 GUAYNABO, PR 00970	66-0329776	501(C)(3)	3,987.	18,907.	FMV	PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
THE HUMANE SOCIETY OF THE USA (HSUS) - 1255 23RD ST. NW, SUITE 450 - WASHINGTON, DC 20037	53-0225390	501(C)(3)	0.	335,241.	FMV	PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
THE HUMANE SOCIETY OF TULSA 9521-B.S. RIVERSIDE DRIVE, BOX 542 TULSA, OK 74137	73-1571476	501(C)(3)	5,000.	817,116.	FMV	PET FOOD, PET PRODUCTS, FACE MASKS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
THE NEW YORK ACADEMY OF SCIENCES 250 GREENWICH STREET, 40TH FLOOR NEW YORK, NY 10007	13-1773640	501(C)(3)	0.	16,500.	FMV	SOFTWARE LICENSES	SUPPORT FOR LITERACY & CHILDREN'S EDUCATION
THE PANTRY BY FEEDING HAWAII TOGETHER - 2522 ROSE STREET - HONOLULU, OAHU, HI 96819	47-0901806	501(C)(3)	0.	8,250.	FMV	APPAREL, HOUSEWARE, PET FOOD, PET PRODUCTS	SUPPORT FOR HUNGER & POVERTY
THE PARMA ANIMAL SHELTER, INC P.O. BOX 347321 PARMA, OH 44134	02-0693967	501(C)(3)	7,037.	3,162.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 PET PROJECT FOR PETS INC 2200 NW 9TH AVENUE WILTON MANORS, FL 33311	37-1440098	501(C)(3)	0.	3,342,147.	FMV	PET FOOD, PET PRODUCTS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
THE PUBLIC FOR ANIMAL WELFARE INC DBA PAWS SHELTER - PO BOX 695 - DRIPPING SPRINGS, TX 78620	74-2421563	501(C)(3)	15,301.	10,127.	FMV	PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
THE SATO PROJECT 130 WATER STREET BROOKLYN, NY 11201	45-3743534	501(C)(3)	0.	18,907.	FMV	PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
THE SEATTLE STAND DOWN 23812 17TH PL W BOTHHELL, WA 98021	45-1597766	501(C)(3)	0.	28,505.	FMV	APPAREL, HOUSEWARE, CHILDREN'S TOYS, BOOKS	SUPPORT FOR HUNGER & POVERTY
THE SPARTANBURG HUMANE SOCIETY 150 DEXTER ROAD SPARTANBURG, SC 29303	57-0481019	501(C)(3)	0.	10,118.	FMV	PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
THINK DIGNITY 3525 30TH STREET SAN DIEGO, CA 92104	33-1146733	501(C)(3)	40.	31,461.	FMV	APPAREL, HOUSEWARE, PET PRODUCTS	SUPPORT FOR HUNGER & POVERTY
THOMASVILLE THOMAS COUNTY HUMANE SOCIETY (TTCBS) - 180 BIG STAR DRIVE - THOMASVILLE, GA 31757	58-1299962	501(C)(3)	3,333.	10,127.	FMV	PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
THREE SQUARE 4190 NORTH PECOS ROAD LAS VEGAS, NV 89115	30-0396918	501(C)(3)	21,318.	0.			SUPPORT FOR HUNGER & POVERTY
TIGGERTOWN 2226 ENCOMPASS DRIVE, SUITE 100 CHATTANOOGA, TN 37421	81-3743659	501(C)(3)	0.	907,164.	FMV	PET FOOD, PET PRODUCTS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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
TRACY'S PAWS RESCUE 182 CR 245 HONDO, TX 78861	84-3933841	501(C)(3)	5,000.	5,242.	FMV	PET FOOD	SUPPORT FOR RESCUED ANIMALS
TRAP NEUTER RETURN RIVERSIDE 8428 WILLIAMSBURG PLACE RIVERSIDE, CA 92504	30-0880247	501(C)(3)	0.	1,227,310.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
TRI-CITY FREE BREAKFAST PROGRAM 4181 IRVINGTON AVE FREMONT, CA 94538	94-2174885	501(C)(3)	10,000.	0.			SUPPORT FOR HUNGER & POVERTY
TULSA SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS, INC. (TULSA SPCA) - 2910 MOHAWK BLVD. - TULSA, OK 74110	73-0608144	501(C)(3)	0.	8,937.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
TURNING RESCUES INTO PETS 1115 PRIMROSE DR BOUTTE, LA 70039	84-3645349	501(C)(3)	12,500.	0.			SUPPORT FOR RESCUED ANIMALS
TURTLE MOUNTAIN ANIMAL RESCUE PO BOX 896 ROLLA, ND 58367	81-2435858	501(C)(3)	4,000.	1,991.	FMV	PET PRODUCTS, FACE MASKS	SUPPORT FOR RESCUED ANIMALS
TWO LEGS FOUR PAWS 10901 S.W. 59TH STREET MUSTANG, OK 73064	84-2345729	501(C)(3)	0.	1,557,924.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
UNITED MILITARY CARE 1220 OLD CANTON ROAD MARIETTA, GA 30062	46-0552042	501(C)(3)	0.	44,160.	FMV	FACE MASKS, APPAREL, HOUSEWARE, PET PRODUCTS	SUPPORT FOR HUNGER & POVERTY
UNITED PET FUND 9401 TOWNE SQUARE AVENUE BLUE ASH, OH 45242	27-2582105	501(C)(3)	0.	2,168,348.	FMV	PET FOOD, PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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
UTAH FOOD BANK 3150 SOUTH 900 WEST SALT LAKE CITY, UT 84119	87-0212453	501(C)(3)	25,000.	0.			SUPPORT FOR HUNGER & POVERTY
VETERANS VILLAGE OF SAN DIEGO 4141 PACIFIC HIGHWAY SAN DIEGO, CA 92110	95-3649525	501(C)(3)	972.	147,784.	FMV	APPAREL, HOUSEWARE	SUPPORT FOR HUNGER & POVERTY
VIDAS 9457 S UNIVERSITY BLVD #232 HIGHLANDS RANCH, CO 80126	58-2683682	501(C)(3)	0.	30,170.	FMV	APPAREL, HOUSEWARE, CHILDREN'S TOYS, PET	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS
VOLUNTEERS OF AMERICA-GREATER NEW YORK - 135 W 50TH ST, 9TH FL - NEW YORK, NY 10020	58-1959781	501(C)(3)	0.	29,105.	FMV	APPAREL, HOUSEWARE, PET PRODUCTS	SUPPORT FOR HUNGER & POVERTY
WAGGLE FOUNDATION, INC. P.O. BOX 153, 12 MAIN ST, STE 5 ESSEX, CT 06426	32-0518559	501(C)(3)	20,155.	0.			SUPPORT FOR RESCUED ANIMALS
WAGS & WHISKERS ANIMAL RESCUE OF MN - PO BOX 304 - SHAKOPEE, MN 55379	36-4641735	501(C)(3)	0.	300,130.	FMV	PET FOOD, PET PRODUCTS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
WASHINGTON PARISH ANIMAL SHELTER 909 PEARL STREET FRANKLINTON, LA 70438	72-6001458	GOVT	496.	10,911.	FMV	PET PRODUCTS, PET PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
WEST POINT-CLAY COUNTY ANIMAL SHELTER - 5122 (1212) OLD TIBBEE ROAD - WEST POINT, MS 39773	27-1883339	501(C)(3)	0.	11,895.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
WEST VIRGINIA VOLUNTARY ORGANIZATIONS ACTIVE IN DISASTERS - PO BOX 178 - WILLIAMSON, WV 25661	46-3022382	501(C)(3)	0.	48,363.	FMV	APPAREL, HOUSEWARE, PET FOOD, PET PRODUCTS	SUPPORT FOR HUNGER & POVERTY

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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
WIGGLIN HOME BOXER RESCUE PO BOX 1354 BATTLE GROUND, WA 98604	81-2751560	501(C)(3)	0.	5,933.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
WILD ANIMAL SANCTUARY 1945 CR 53 KEENESBURG, CO 80643-4029	84-1351483	501(C)(3)	0.	130,560.	FMV	PET FOOD	SUPPORT FOR RESCUED ANIMALS
WINGS OF RESCUE P.O. BOX 6045 LA QUINTA, CA 92248	45-3343408	501(C)(3)	576,200.	5,000.	FMV	FACE MASKS	SUPPORT FOR RESCUED ANIMALS
WOLF TRAP ANIMAL RESCUE 8300 MERRIFIELD AVE, SUITE C FAIRFAX, VA 22031	47-5126327	501(C)(3)	0.	5,499.	FMV	PET PRODUCTS	SUPPORT FOR RESCUED ANIMALS
WORLD CENTRAL KITCHEN 655 NEW YORK AVE NW, 6TH FLOOR WASHINGTON, DC 20001	27-3521132	501(C)(3)	19,488.	0.			SUPPORT FOR HUNGER & POVERTY
YMCA OF SOUTHERN ARIZONA PO BOX 1111 TUCSON, AZ 85702-1111	86-0101237	501(C)(3)	0.	13,923.	FMV	APPAREL, HOUSEWARE, CHILDREN'S TOYS, PET	SUPPORT FOR HUNGER & POVERTY
YUMA COMMUNITY FOOD BANK 2404 EAST 24TH STREET YUMA, AZ 85365	86-0457836	501(C)(3)	10,000.	0.			SUPPORT FOR HUNGER & POVERTY

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
SUPPORT FOR RESCUED ANIMALS	445	0.	236,338.	FMV	PET FOOD, PET PRODUCTS, APPAREL, HOUSEWARE

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 GREATER GOOD CHARITIES 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. WHEN POSSIBLE ACTUAL SITE VISITS ARE CONDUCTED TO SEE ACTUAL EVIDENCE OF THE USE

Part IV Supplemental Information

OF FUNDS.

PART II, LINE 1, COLUMN (G):

NAME OF ORGANIZATION OR GOVERNMENT: ACADIANA ANIMAL AID

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PET FOOD, PET PHARMACEUTICALS,
PET PRODUCTS, FACE MASKS

NAME OF ORGANIZATION OR GOVERNMENT: ANTINANCO EARTH ARTS SCHOOL

(G) DESCRIPTION OF NON-CASH ASSISTANCE: APPAREL, HOUSEWARE, PET FOOD,
PET PRODUCTS, FACE MASKS

NAME OF ORGANIZATION OR GOVERNMENT: BLUE MOUNTAIN HUMANE SOCIETY

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PET FOOD, PET PHARMACEUTICALS,
PET PRODUCTS, PET FOOD VOUCHERS

NAME OF ORGANIZATION OR GOVERNMENT: COMMUNITY ACTION NORTH BAY

(G) DESCRIPTION OF NON-CASH ASSISTANCE: APPAREL, HOUSEWARE, CHILDREN'S
TOYS, BOOKS, PET PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT:

FOOD BANK OF THE RIO GRANDE VALLEY, INC.

(G) DESCRIPTION OF NON-CASH ASSISTANCE: APPAREL, HOUSEWARE, CONFECTION,
PET FOOD, PET PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: GLEANING FOR THE WORLD, INC.

(G) DESCRIPTION OF NON-CASH ASSISTANCE: FACE MASKS, APPAREL, HOUSEWARE,
PET FOOD, PET PRODUCTS

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: HEARTS ALIVE VILLAGE

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PET FOOD, PET PHARMACEUTICALS,
PET PRODUCTS, FACE MASKS

NAME OF ORGANIZATION OR GOVERNMENT: HOUSTON HUMANE SOCIETY

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PET FOOD, PET PHARMACEUTICALS,
PET PRODUCTS, FACE MASKS

NAME OF ORGANIZATION OR GOVERNMENT: HUMANE PENNSYLVANIA

(G) DESCRIPTION OF NON-CASH ASSISTANCE: APPAREL, HOUSEWARE, PET FOOD,
PET PRODUCTS, PET FOOD VOUCHERS

NAME OF ORGANIZATION OR GOVERNMENT:

MARICOPA COUNTY ANIMAL CARE AND CONTROL

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PET FOOD, PET PHARMACEUTICALS,
PET PRODUCTS, FACE MASKS

NAME OF ORGANIZATION OR GOVERNMENT: MICHIGAN HUMANE SOCIETY

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PET FOOD, PET PHARMACEUTICALS,
PET PRODUCTS, FACE MASKS

NAME OF ORGANIZATION OR GOVERNMENT: NASHVILLE HUMANE ASSOCIATION

(G) DESCRIPTION OF NON-CASH ASSISTANCE: APPAREL, HOUSEWARE, PET FOOD,
PET PHARMACEUTICALS, PET PRODUCTS, FACE MASKS

NAME OF ORGANIZATION OR GOVERNMENT:

NATIVE AMERICAN ADVANCEMENT FOUNDATION (NAAF)

(G) DESCRIPTION OF NON-CASH ASSISTANCE: FACE MASKS, APPAREL, HOUSEWARE,

Part IV Supplemental Information

CHILDREN'S TOYS, PET PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: NOAH'S ANIMAL HOUSE FOUNDATION

(G) DESCRIPTION OF NON-CASH ASSISTANCE: APPAREL, HOUSEWARE, PET FOOD, PET PRODUCTS, FACE MASKS

NAME OF ORGANIZATION OR GOVERNMENT: PAZA TREE OF LIFE

(G) DESCRIPTION OF NON-CASH ASSISTANCE: FACE MASKS, APPAREL, HOUSEWARE, CHILDREN'S TOYS, PET PRODUCTS, PET FOOD

NAME OF ORGANIZATION OR GOVERNMENT: SAN DIEGO HUMANE SOCIETY

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PET FOOD, PET PHARMACEUTICALS, PET PRODUCTS, FACE MASKS

NAME OF ORGANIZATION OR GOVERNMENT: SEATTLE HUMANE

(G) DESCRIPTION OF NON-CASH ASSISTANCE: PET PHARMACEUTICALS, PET FOOD, PET PRODUCTS, FACE MASKS, PET FOOD VOUCHERS

NAME OF ORGANIZATION OR GOVERNMENT: ST. CHARLES PARISH ANIMAL SHELTER

(G) DESCRIPTION OF NON-CASH ASSISTANCE: APPAREL, HOUSEWARE, PET FOOD, PET PHARMACEUTICALS, PET PRODUCTS, FACE MASKS

NAME OF ORGANIZATION OR GOVERNMENT: VIDAS

(G) DESCRIPTION OF NON-CASH ASSISTANCE: APPAREL, HOUSEWARE, CHILDREN'S TOYS, PET FOOD, PET PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: YMCA OF SOUTHERN ARIZONA

(G) DESCRIPTION OF NON-CASH ASSISTANCE: APPAREL, HOUSEWARE, CHILDREN'S

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

2020

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

GREATER GOOD CHARITIES

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 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 checked="" 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) 2020

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 CHIEF EXECUTIVE OFFICER	(i)	202,684.	0.	0.	3,105.	15,322.	221,111.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) NOAH HORTON CHIEF MARKETING OFFICER	(i)	154,577.	0.	0.	2,319.	9,171.	166,067.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JEMIMAH OKANTEY CHIEF FINANCIAL OFFICER	(i)	144,900.	0.	0.	2,174.	9,128.	156,202.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) STEPHEN MINTER GENERAL COUNSEL	(i)	159,907.	0.	0.	0.	8,996.	168,903.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) ELIZABETH ASHER PROGRAM DIRECTOR (UNTIL 8/20)	(i)	117,136.	0.	82,800.	0.	9,939.	209,875.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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 I, LINE 4A:

ELIZABETH ASHER RECEIVED A SEVERANCE PAYMENT OF \$82,800.

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	25,348.	REIMBURSEME		X
CHARITYUSA.COM	CREATOR/FOUNDER	74,470.	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

(D) DESCRIPTION OF TRANSACTION: REIMBURSEMENT OF EMPLOYEE SALARIES AND BENEFITS, RENT EXPENSES, ACCOUNTING SERVICES AND BANK EXPENSES PAID ON BEHALF OF GREATER GOOD CHARITIES.

(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 GREATER GOOD CHARITIES ON WEBSITE ADVERTISING AND IN CONNECTION WITH THE SALE OF CHARITYUSA.COM PRODUCTS.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2020

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization: **GREATER GOOD CHARITIES** 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		1,010.	FAIR MARKET VALUE
5 Clothing and household goods	X		2,248,713.	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	49,095,446.	FAIR MARKET VALUE
20 Drugs and medical supplies	X	12	2,751,560.	FAIR MARKET VALUE
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (<u>PET PRODUCTS</u>)	X	12	8,512,507.	FAIR MARKET VALUE
26 Other ▶ (<u>KIDS' TOYS</u>)	X	12	53,543.	FAIR MARKET VALUE
27 Other ▶ (<u>SOFTWARE LICE</u>)	X	1	47,190.	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 V, 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.		

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.

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

OMB No. 1545-0047

2020

Open to Public
Inspection

Name of the organization

GREATER GOOD CHARITIES

Employer identification number

20-4846675

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

THE PLANET.

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

BIODIVERSITY. GREATER GOOD CHARITIES LEVERAGES DONOR GENEROSITY AND THE
RESULTING IMPACTS OF ITS WIDE-RANGING PROGRAM SUCCESSES BY
STRATEGICALLY DEVELOPING THE SYNERGIES CREATED BY THE MULTIPLE
INTERSECTIONS OF THESE ACTIVITIES. THE OUTCOMES ACHIEVED THROUGH THIS
UNIQUE APPROACH AMPLIFY THE GOOD.

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 4D, OTHER PROGRAM SERVICES:

LITERACY & CHILDREN'S EDUCATION AND HEALTH:

\$181,378 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

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

Schedule O (Form 990 or 990-EZ) 2020

032211 11-20-20

Name of the organization GREATER GOOD CHARITIES	Employer identification number 20-4846675
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WITH A PUBLISHER HAS ALLOWED FOR THE DIRECT DISTRIBUTION OF BOOKS.

EXPENSES \$438,984. INCLUDING GRANTS OF \$181,378.

PROTECTING/RESTORING THE ENVIRONMENT:

\$268,876 WAS 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 \$740,414. INCLUDING GRANTS OF \$268,876.

EXPENSES \$ 1,179,398. INCLUDING GRANTS OF \$ 450,254. REVENUE \$ 0.

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

GREG HESTERBERG IS AN OWNER OF CHARITYUSA, A PRIMARY GREATER GOOD CHARITIES PARTNER. GREG IS ON THE BOARD OF DIRECTORS BUT CANNOT BE AN OFFICER.

JULIA CHRISTOPHERSON IS AN EMPLOYEE OF CHARITYUSA.

FORM 990, PART VI, SECTION A, LINE 4:

BYLAWS WERE REVISED TO UPDATE THE ORGANIZATION NAME TO GREATER GOOD CHARITIES.

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

THE CHIEF EXECUTIVE OFFICER, CHIEF FINANCIAL OFFICER, CHIEF OF OPERATIONS, BOARD CHAIR AND THE FINANCE COMMITTEE REVIEW THE 990 DRAFT PRIOR TO FILING.

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

THE ORGANIZATION'S 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 HAD 17 PEOPLE WHO FELL UNDER THIS DEFINITION DURING THE FISCAL YEAR.

Name of the organization GREATER GOOD CHARITIES	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 GREATER GOOD CHARITIES	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 15:

COMPENSATION COMMITTEE REVIEWS CEO SALARY BASED ON CURRENT DATA FOR SIMILAR SIZED ORGANIZATIONS. COMPENSATION COMMITTEE REVIEWS HIGHLY COMPENSATED EMPLOYEES AFTER EACH REVIEW CYCLE. THE LAST CEO COMPENSATION REVIEW OCCURRED IN FEBRUARY 2021.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, AR, CA, CO, DC, FL, GA, GU, HI, IL, KS, KY, MA, MD, MI, MS, MT, NC, NH, NJ, NM, NY, OR, PA, PR
RI, SC, TN, TX, UT, VA, WI, WV

FORM 990, PART VI, SECTION C, LINE 18:

ORGANIZATION PROVIDES FORMS TO GUIDESTAR AND CHARITY NAVIGATOR.

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

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

Name of the organization

GREATER GOOD CHARITIES

Employer identification number

20-4846675

DOCUMENTS ARE AVAILABLE ON REQUEST. THE FINANCIAL STATEMENTS ARE MADE
AVAILABLE TO THE PUBLIC THROUGH THE ANNUAL REPORT.

Multiple horizontal lines for additional text or notes.