	0	0	Return of Organization Exempt From In	voom	o Tav		OMB No. 1545-0047				
Form	99	<b>JU</b>		2022							
			Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (exce	ept priva	ate foundati	ions)	LULL				
Denarti	nent of i	the Treasury	Do not enter social security numbers on this form as it may be	made pi	ublic.		Open to Public				
		ue Service	Go to www.irs.gov/Form990 for instructions and the latest in	formatio	on.		Inspection				
<u>A</u> F	A For the 2022 calendar year, or tax year beginning , 2022, and ending										
<b>B</b> c	heck if a	pplicable:	C Name of organization Petfinder Foundation			) Emplo	oyer identification number				
□ ▲	ddress o	hange	Doing business as				87-0694641				
<u></u> N	ame cha	ange	Number and street (or P.O. box if mail is not delivered to street address)	Room/suit	e E	Teleph	none number				
In In	itial retu	m	4729 E Sunrise Drive	1	19		(520)207-0626				
Fi	nal retu	m/terminated	City or town, state or province, country, and ZIP or foreign postal code			G Gross	s receipts				
	nended	return	Tucson, AZ 85718			\$	<u>1,781,615</u>				
	oplicatio	n pending	F Name and address of principal officer: Betsy Saul		H(a) is this a gro	oup return t	for subordinates? Yes X No				
			Same as C above		H(b) Are all su	bordinate	es included?				
I Ta	ax-exem	pt status: 🛛 🗶	501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or 527		If "No," at	ttach a lis	t. See instructions				
<u>1 N</u>	ebsite:		w.petfinderfoundation.com		H(c) Group ex	emption	number				
			Corporation Trust Association Other L Year of formatic	on: 200	3 M St	ate of leg	al domicile: AZ				
Par	T	Summar									
	1	-		he eut	hanasia	of a	adoptable pets				
ė		and supp	port animal welfare groups to this end.								
and			٠ ••••••••••••••••••••••••••••••••••••								
Governance			—————								
No.	2	Check this b									
	3		voting members of the governing body (Part VI, line 1a)			3	6				
les	4	÷	ndependent voting members of the governing body (Part VI, line 1b)			4	. 6				
ivit	5		er of individuals employed in calendar year 2022 (Part V, line 2a)			5	3				
Activities &	6	Total numbe	6								
	7a		ted business revenue from Part VIII, column (C), line 12			7a	00				
	b	Net unrelate	ed business taxable income from Form 990-T, Part I, line 11	<u></u>	· · · · ·	7b	0				
			· · · · ·		Prior Year		Current Year				
đ	8		is and grants (Part VIII, line 1h)		1,496	,242	1,754,806				
Revenue	9		0								
eve	10		income (Part VIII, column (A), lines 3, 4, and 7d)		46	,546	26,809				
œ	11		ue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1 5 4 0	700	0				
	12 13		ie - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,542		1,781,615				
			similar amounts paid (Part IX, column (A), lines 1-3)		944	, 662	1,219,989				
	14	•					0				
S	15 16a		ner compensation, employee benefits (Part IX, column (A), lines 5-10)		238	,992	253,530				
sue	1						· 0				
Expense	17		Ising expenses (Part IX, column (D), line 25) 86, 945 Ises (Part IX, column (A), lines 11a-11d, 11f-24e)	·	1.00	070	06 400				
ш	18		ses. Add lines 13-17 (must equal Part IX, column (A), line 25)		162		96,483				
	19		ss expenses. Subtract line 18 from line 12		1,346	, <u>832</u> , 156	1,570,002				
	1.0			Begin	ning of Currer		211,613 End of Year				
ts ol	20	Total assets	(Part X, line 16)	begin							
<b>Sse</b> Ball	21		es (Part X, line 26)		3,562	,489	<u>3,171,729</u> 51,463				
Net Assets or Fund Balances	22		or fund balances. Subtract line 21 from line 20		3,125		3,120,266				
Pa			ure Block		5,125	,070	3,120,200				
Unde	r penalti	es of perjury, I de	clare that I have examined this return, including accompanying schedules and statements, and to the best o	of my knowl	edge and belief	, it is	· · · · · · · · · · · · · · · · · · ·				
true,	correct,	and complete. De	eclaration of preparer (other than officer) is based on all information of which preparer has any knowledge.								
							, , ,				
Sigı	ו	Signature of offi	icer			Da	te				
Her	Ð				/		ν.				
		Type or print nar	ime and title								
		Print/Type pre	reparer's name Preparer's signature Date Date		Check	X if	PTIN				
Paic	i	Jennife	self-emp		P01607578						
Pre	barei		·····								
	Only	the second se			rm's EIN						
	•		Tucson AZ 85718		-	520-	247-7087				
May	he IRS	S discuss this	return with the preparer shown above? See instructions				· · · Ves X No				
For F	aperv	vork Reducti	ion Act Notice, see the separate instructions.				Form 990 (2022)				

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-	n 990 (2022) Petfinder Foundation	87-0694641	Pa	ge <b>2</b>
Pa	rt III Statement of Program Service Accomplishments			_
	Check if Schedule O contains a response or note to any line in this Part III			
1	Briefly describe the organization's mission:		_	
	To prevent the euthanasia of adoptable pets and support animal welfare groups	to this end	1.	
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	🗙 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	-		
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to othe	rs,		
	the total expenses, and revenue, if any, for each program service reported.			
4a	(Code: ) (Expenses \$ 1,243,571 including grants of \$ 1,034,416 ) (Revenue	۹		<u> </u>
τu			·	,
	Quality of Life programs - See attached PDF.			
4b	(Code: ) (Expenses \$ 161,164 including grants of \$ 147,323 ) (Revenue	\$		)
	Other programs - See attached PDF.			
4c	(Code:) (Expenses \$43,509 including grants of \$38,250 ) (Revenue	\$		)
	Disaster relief program - See Attached PDF.			
4d	Other program services (Describe on Schedule O.)			
	(Expenses \$ including grants of \$ ) (Revenue \$	)		
4e	Total program service expenses 1,448,244			

Pa	rt IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	-		
-	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	-		
Ū	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	-		
Ũ	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		v
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			_ <u>x</u> _
'	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		v
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i>	-		<u>x</u>
0	complete Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	•		x
9				
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or	9		
10	debt negotiation services? If "Yes," complete Schedule D, Part IV         Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	9		<u>x</u>
10	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		<u>x</u>
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes,"</i>			
a	complete Schedule D, Part VI	11a	x	
b			~	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more			
Ũ	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d				
ŭ	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
6	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		<u></u>	
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	x	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	x	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If		-	
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		x
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		x
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		x
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	

#### 87-0694641 Page 3

# Form 99

90 (2	2022)	

	Petfinder	Foundation
of	Required S	chodulos

		87-06946	41	P	age <b>4</b>
Pa	rt IV Checklist of Required Schedules (continued)				
				Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on				
~~	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		22		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? If "Yes," complete Schedule J		23		v
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than		23		x
24a	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b				
	through 24d and complete Schedule K. If "No," go to line 25a		24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year		240		
Ũ	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? If "Yes," complete Schedule L, Part I		25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior				
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?				
	If "Yes," complete Schedule L, Part I		25b		х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current				
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%				
	controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part II		26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key				
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee				
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these				
	persons? If "Yes," complete Schedule L, Part III • • • • • • • • • • • • • • • • •		27		х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,				
	Part IV, instructions, for applicable filing thresholds, conditions, and exceptions):				
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If				
	"Yes," complete Schedule L, Part IV		28a		х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV		28b		х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If				
	"Yes," complete Schedule L, Part IV		28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		29	x	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified				
	conservation contributions? If "Yes," complete Schedule M		30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"				
~~	complete Schedule N, Part II		32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations				
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1		34		v
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		34 35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a		35a		х
b	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable		335		
	related organization? If "Yes," complete Schedule R, Part V, line 2		36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization				
•••	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		37		x
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and	-			
	19? Note: All Form 990 filers are required to complete Schedule O		38	x	
Par					·
	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	3			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and				
	reportable gaming (gambling) winnings to prize winners?		1c		
			_		

Form	990 (2022) Petfinder Foundation 87-06946	41	F	Page 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 3			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		x
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		x
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		x
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.) • • • • • • • • • • • • • • • • • • •			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year [12b]			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand	4.4-		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		├──
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	4-		
	excess parachute payment(s) during the year?	15		X
16	If "Yes," see the instructions and file Form 4720, Schedule N.	40		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
17	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	47		
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	n rea, completer offit 0000.			

	m 990 (2022) Petfinder Foundation 87-0694		P	age <b>6</b>
Pa	art VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a	"No"		
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			_
	Check if Schedule O contains a response or note to any line in this Part VI			х
Se	ction 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 1a			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent <b>1</b>			
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?	2		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?	3		v
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
<del>-</del> 5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		x x
о 7а	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	-		
	one or more members of the governing body?	7a		x
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	x	
b	Each committee with authority to act on behalf of the governing body?	8b	x	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		х
Sec	tion 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?	10a		х
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?	11a	x	
b	Describe on 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? <i>If "No," go to line 13</i>	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	x	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	40-		
13	describe on Schedule O how this was done	12c 13	X	
	Did the organization have a written document retention and destruction policy?		X	
14 15	Did the process for determining compensation of the following persons include a review and approval by	14	X	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	x	
b	Other officers or key employees of the organization	15b		x
-	If "Yes" to line 15a or 15b, describe the process on 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?	16a		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		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,			
	and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records.			
	The Corporation (520)207-0626, 4729 E Sunrise Drive No 119, Tucson, AZ 85718			

Form 990 (202)	2) Petfinder Foundation	87-0694641 Pa	ge <b>7</b>
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, I	Highest Compensated Employees, a	nd
	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 Comp	ensated Employees	
1a Complete th	is table for all persons required to be listed. Report compensation for the calendar year en	ding with or within the	
organization's t	ax 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

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

See instructions for the order in which to list the persons above.

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

			-p		C)	<u> </u>				
(A)	(B)		Position					(D)	(E)	(F)
Name and title	Average	(do not check more than one box, unless person is both an officer and a director/trustee)					ı	Reportable	Reportable	Estimated amount
	hours							compensation from the	compensation from related	of other compensation
	per week (list any							organization (W-2/	organizations (W-2/	from the
	hours for	Individual trustee or director	Instit	Officer	Key employee	Highest compensated employee	Former	1099-MISC/ 1099-NEC)	1099-MISC/ 1099-NEC)	organization and related organizations
	related	idual	ution	er	empl	est c loyee	ler	1033-NEC)	1099-1120)	related organizations
	organizations below	r	Institutional trustee		oyee	ompe				
	dotted line)	lee	istee			ensat				
						ed				
(1) Toni Morgan	40.00									
Executive Director					х			93,878	0	0
(2) Jim Morris	<u>5.00</u>									
Board Member		х						0	0	0
(3) Amanda Sumner	5.00									
Board Member		X						0	0	0
(4) John Boone	<u>5.00</u>									
Board Member		х						0	0	0
(5) Jared Saul	<u>5.0</u> 0							0		0
Board Member	5.00	х						0	0	0
(6) Betsy Saul Chairman, President and Treasurer	<u> </u>	x		x				0	0	0
(7) Rob Rauh	5.00			^				0	U	0
Secretary	<u></u>	x		x				0	0	0
(8)									Ŭ	
<u>(9)</u>										
(10)										
<u>(11)</u>										
<u>(12)</u>										
<u>(13)</u>										
<u>(14)</u>										

	90 (2022) Petfinder Foundati			_							-06946			age <b>8</b>
Part	VII Section A. Officers, Directors, T	rustees, I	Key E	mp	oloy	/ee	s, an	dŀ	lighest Comp	ensated	Emplo	yees	(conti	inued)
	(A) Name and title	(B) Average hours per week (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/	(E) Reportable compensation from related organizations (W-2/		cor	(F) nated am of other mpensati from the			
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	1099-MISC/ 1099-NEC)	1099-MIS 1099-NE(	SC/	orga	nization d organiz	
<u>(15)</u>														
<u>(16)</u>														
<u>(17)</u>														
<u>(18)</u>														
<u>(19)</u>														
<u>(20)</u>														
<u>(21)</u>														
<u>(22)</u>														
<u>(23)</u>														
<u>(24)</u>														
(25)														
1b כ	Subtotal		· · · · · ·	• • •	 	 	· · · · · ·	•			0			0
d 2	Total (add lines 1b and 1c)          Total number of individuals (including but not limite							• mor	<b>93,878</b> e than \$100,000 of					
3	reportable compensation from the organization Did the organization list any <b>former</b> officer, director	r tructoo ko	v ompl		or	high	octico	mpo	prested				Yes	0 No
	employee on line 1a? If "Yes," complete Schedule	J for such ind	dividua	1		•••		•••				3		x
4	For any individual listed on line 1a, is the sum of re organization and related organizations greater than	n \$150,000?												
5	individual	compensatio		-			-					4		X
Sect	for services rendered to the organization? <i>If "Yes,"</i> on <b>B. Independent Contractors</b>	complete Sc	cneaule	e J 10	or su	cn p	erson				<u> </u>	5		X
1	Complete this table for your five highest compensa	ited independ	dent co	ontra	ctors	s tha	t recei	ved	more than \$100,00	10 of				
	compensation from the organization. Report compe	ensation for t	the cal	enda	ır ye	ar ei	nding	with	-	zation's tax	year.			
	(A) Name and business address	s							(B) Description of servic	es	(	(C) Compens	ation	
2	Total number of independent contractors (including			nose	liste	ed al	pove) v	who						
	received more than \$100,000 of compensation from	m the organiz	zation											

Form 99		22) Petfi	nde	r Foundat	ion				87-06946	5 <b>41</b> Page <b>9</b>
Part	VIII	Statement of Rev	eni	le						
		Check if Schedule O co	ntair	ns a response	or no	te to any line in this	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Grants ounts	1a b c	Federated campaigns · · · · · · · · · · · · · · · · · · ·	· ·		1a 1b 1c					sections 512–514
Contributions, Gifts, Grants and Other Similar Amounts	d e f g	Related organizations Government grants (contr All other contributions, gift and similar amounts not ir Noncash contributions inc lines 1a-1f	ibuti s, gr ncluc lude	ons) • • rants, led above d in	1d 1e 1f 1g	1,754,806 \$ 36,796				
ສບ 	h	Total. Add lines 1a-1f	••	<u></u>	• •	Business Code	1,754,806			
Program Service Revenue	2a b c d e f	All other program service ro								
	3	Total. Add lines 2a-2f . Investment income (includi other similar amounts) . Income from investment of	ng d	ividends, inter	est, a	and • • • • • • • • •	26,809			26,809
	6a b	Royalties       .       .       .         Gross rents       .       .       .         Less: rental expenses       .       .         Rental income or (loss)       .       .		(i) Real		(ii) Personal				
	d 7a	Net rental income or (loss) Gross amount from sales of assets other than inventory				(ii) Other				
evenue	b c	Less: cost or other basis and sales expenses Gain or (loss) Net gain or (loss)	7b 7c							
Other Revenu	8a	Gross income from fundrai events (not including \$ _ of contributions reported or 1c). See Part IV, line 18	sing n line		8a					
	c	Less: direct expenses Net income or (loss) from f	••		8b					
	b	Gross income from gaming activities, See Part IV, line Less: direct expenses • Net income or (loss) from g	19 		9a 9b					
	10a	Gross sales of inventory, le returns and allowances . Less: cost of goods sold	ss		10a					
	с	Net income or (loss) from s	ales	of inventory						
Miscellanous Revenue	b c									
Mis R	е	All other revenue Total. Add lines 11a-11d Total revenue. See instruct					1,781,615	0	0	26,809

Pa	ade	1	ſ
	ayu		•

8b, 9b, and         1       Grant:         and divid         2       Grant:         individ         3       Grant:         organ         foreig         4       Benef         5       Comp         perso         perso         perso         9       Other         8       Pensi:         sectio         9       Other         10       Payro         11       Fees :         a       Mana:         b       Legal         c       Accou         d       Lobby         e       Profest         f       Invest         g       Other         12       Adver         13       Office         14       Inform         15       Royal         16       Occup	Check if Schedule O contains a response or note to a lude amounts reported on lines 6b, 7b, d 10b of Part VIII. Its and other assistance to domestic organizations domestic governments. See Part IV, line 21 Its and other assistance to domestic iduals. See Part IV, line 22	(A) Total expenses 1,219,989 93,878 93,878	(B) Program service expenses 1,219,989 57,428 86,462	(C) Management and general expenses	(D) Fundraising expenses 28,956
1Grant: and di2Grant: indivic3Grant: indivic3Grant: organ foreig4Benef5Comp persoi persoi persoi6Comp persoi persoi7Other8Pensi sectio9Other10Payro11FeesaMana: bbLegal ccAccou ddLobby epOther13Office14Inform15Royal16Occup17Trave18Paym for an19Confee20Intere21Paym22Depre23Insura24Other	Its and other assistance to domestic organizations domestic governments. See Part IV, line 21 ts and other assistance to domestic iduals. See Part IV, line 22	1,219,989 1,219,989 93,878	expenses 1,219,989 57,428	general expenses	expenses
and data2Grant: individ3Grant: organ foreig4Benef5Comp truster6Comp persor persor persor7Other8Pensi sectio9Other10Payro11Fees6Legal c7Other8Pensi sectio9Other10Payro11Fees6Legal c7Other10Payro11Fees12Adver13Office14Inform15Royal16Occup17Trave18Paym for an19Confee21Paym22Depre23Insura24Other	domestic governments. See Part IV, line 21	93,878	57,428	7,494	28,956
<ul> <li>2 Grant: individ</li> <li>3 Grant: organ foreig</li> <li>4 Benef</li> <li>5 Comp truster</li> <li>6 Comp persoi</li> <li>7 Other</li> <li>8 Pensis sectio</li> <li>9 Other</li> <li>10 Payro</li> <li>11 Fees</li> <li>a Manage</li> <li>b Legal</li> <li>c Accould Lobby</li> <li>e Profest</li> <li>f Invest</li> <li>g Other. (A) and</li> <li>12 Adver</li> <li>13 Office</li> <li>14 Inform</li> <li>15 Royal</li> <li>16 Occup</li> <li>17 Trave</li> <li>18 Paym for an</li> <li>19 Confer</li> <li>20 Intere</li> <li>21 Paym</li> <li>22 Depre</li> <li>23 Insura</li> <li>24 Other</li> </ul>	Its and other assistance to domestic iduals. See Part IV, line 22	93,878	57,428	7,494	28,956
<ul> <li>individ</li> <li>Grant:</li> <li>organ</li> <li>foreig</li> <li>Benef</li> <li>Comp</li> <li>truster</li> <li>Comp</li> <li>persoi</li> <li>persoi<td>iduals. See Part IV, line 22</td><td></td><td></td><td>7,494</td><td>28,956</td></li></ul>	iduals. See Part IV, line 22			7,494	28,956
<ul> <li>3 Grant: organ foreigi</li> <li>4 Benef</li> <li>5 Comp trustei</li> <li>6 Comp persoi persoi</li> <li>7 Other</li> <li>8 Pensi sectio</li> <li>9 Other</li> <li>10 Payro</li> <li>11 Fees</li> <li>a Mana- b Legal</li> <li>c Accou</li> <li>d Lobby</li> <li>e Profes</li> <li>f Invest</li> <li>g Other.</li> <li>(A) an</li> <li>12 Adver</li> <li>13 Office</li> <li>14 Inform</li> <li>15 Royal</li> <li>16 Occup</li> <li>16 Occup</li> <li>17 Trave</li> <li>18 Paym for an</li> <li>19 Confe</li> <li>20 Intere</li> <li>21 Paym</li> <li>22 Depre</li> <li>23 Insura</li> <li>24 Other</li> </ul>	Its and other assistance to foreign nizations, foreign governments, and gn individuals. See Part IV, lines 15 and 16 offits paid to or for members			7,494	28,956
<ul> <li>organ foreig</li> <li>Benef</li> <li>Comp truster</li> <li>Comp persor</li> <li>Pensis</li> <li>sectio</li> <li>Pensis</li> <li>sectio</li> <li>Other</li> <li>Ressis</li> <li>Legal</li> <li>Legal</li> <li>Legal</li> <li>Legal</li> <li>Legal</li> <li>Cocut</li> <li>Benesis</li> <li>Sectio</li> <li>Payro</li> <li>Accout</li> <li>Legal</li> <li>Cocut</li> <li>Royal</li> <li>Invest</li> <li>Office</li> <li>Invest</li> <li>Office</li> <li>Invest</li> <li>Office</li> <li>Royal</li> <li>Confe</li> <li>Royal</li> <li>Confe</li> <li>Royal</li> <li>Confe</li> <li>Confe</li> <li>Confe</li> <li>Confe</li> <li>Paym</li> <li>For an</li> <li>Confe</li> <li>Depre</li> <li>Newst</li> <li>Confe</li> <li>Confe</li> <li>Newst</li> <li>Confe</li> <li>Confe<!--</td--><td>nizations, foreign governments, and gn individuals. See Part IV, lines 15 and 16 efits paid to or for members</td><td></td><td></td><td>7,494</td><td>28,956</td></li></ul>	nizations, foreign governments, and gn individuals. See Part IV, lines 15 and 16 efits paid to or for members			7,494	28,956
4 Benef 5 Comp truster 6 Comp persol persol persol persol 7 Other 8 Pensi sectio 9 Other 8 Pensi sectio 9 Other 10 Payro 11 Fees 1 Adver 1 I Fees 1 I Fees 1 Adver 1 I Secol 1 I Fees 1	gn individuals. See Part IV, lines 15 and 16 afits paid to or for members			7,494	28,956
<ul> <li>4 Benefi</li> <li>5 Comp truster</li> <li>6 Comp persor</li> <li>7 Other</li> <li>8 Pensis sectio</li> <li>9 Other</li> <li>10 Payro</li> <li>11 Fees</li> <li>a Manage</li> <li>b Legal</li> <li>c Accould Lobby</li> <li>e Profes</li> <li>f Investi</li> <li>g Other</li> <li>13 Office</li> <li>14 Inform</li> <li>15 Royal</li> <li>16 Occup</li> <li>17 Trave</li> <li>18 Paym for an</li> <li>19 Confe</li> <li>20 Intere</li> <li>21 Paym</li> <li>22 Depre</li> <li>23 Insura</li> <li>24 Other</li> </ul>	fits paid to or for members			7,494	28,956
<ul> <li>5 Comp truster</li> <li>6 Comp persor</li> <li>7 Other</li> <li>8 Pensi sectio</li> <li>9 Other</li> <li>10 Payro</li> <li>11 Fees</li> <li>a Manage</li> <li>b Legal</li> <li>c Accould</li> <li>b Lobby</li> <li>e Profest</li> <li>f Invest</li> <li>g Other</li> <li>12 Adver</li> <li>13 Office</li> <li>14 Inform</li> <li>15 Royal</li> <li>16 Occup</li> <li>17 Trave</li> <li>18 Paym</li> <li>for an</li> <li>19 Confe</li> <li>20 Intere</li> <li>21 Paym</li> <li>22 Depre</li> <li>23 Insura</li> <li>24 Other</li> </ul>	pensation of current officers, directors, ees, and key employees			7,494	28,956
<ul> <li>fruster</li> <li>6 Comperson person person</li> <li>7 Other</li> <li>8 Pensis section</li> <li>9 Other</li> <li>10 Payron</li> <li>11 Feesting</li> <li>12 Adverting</li> <li>13 Office</li> <li>14 Inform</li> <li>15 Royal</li> <li>16 Occupita</li> <li>16 Occupita</li> <li>17 Trave</li> <li>18 Paymento for antipation of the paymento of the p</li></ul>	ees, and key employees			7,494	28,956
<ul> <li>6 Comp persol persol</li> <li>7 Other</li> <li>8 Pensis sectio</li> <li>9 Other</li> <li>10 Payro</li> <li>11 Fees</li> <li>a Manaib</li> <li>Legal</li> <li>c Accould</li> <li>Lobby</li> <li>e Profes</li> <li>f Invest</li> <li>g Other.</li> <li>(A) and</li> <li>12 Adver</li> <li>13 Office</li> <li>14 Inform</li> <li>15 Royal</li> <li>16 Occup</li> <li>16 Occup</li> <li>17 Trave</li> <li>18 Paym</li> <li>16 Occup</li> <li>18 Paym</li> <li>17 Trave</li> <li>18 Paym</li> <li>19 Confe</li> <li>20 Intere</li> <li>21 Paym</li> <li>22 Depre</li> <li>23 Insura</li> <li>24 Other</li> </ul>	pensation not included above to disqualified ons (as defined under section 4958(f)(1)) and ons described in section 4958(c)(3)(B) r salaries and wages			7,494	28,950
person person 7 Other 8 Pensi sectio 9 Other 10 Payro 11 Fees 1 Adver 13 Confee 14 Inform 12 Adver 13 Office 14 Inform 15 Royal 16 Occup 17 Trave 18 Paym 16 Confee 18 Paym 19 Confee 20 Intere 21 Paym 22 Depre 23 Insura 24 Other	ons (as defined under section 4958(f)(1)) and ons described in section 4958(c)(3)(B) r salaries and wages	141,339	86,462		
7 Other 8 Pensi sectio 9 Other 10 Payro 11 Fees 1 Fees 1 Adver 1 Legal 1 C Accou 1 Legal 1 C Accou 1 Legal 1 C Accou 1 Legal 1 C Accou 1 C	ons described in section 4958(c)(3)(B)	141,339	86,462		
<ul> <li>7 Other</li> <li>8 Pensisectio</li> <li>9 Other</li> <li>10 Payro</li> <li>11 Fees</li> <li>a Manage</li> <li>b Legal</li> <li>c Accold</li> <li>d Lobby</li> <li>e Profes</li> <li>f Invest</li> <li>g Other</li> <li>(A) and</li> <li>12 Adver</li> <li>13 Office</li> <li>14 Inform</li> <li>15 Royal</li> <li>16 Occup</li> <li>17 Trave</li> <li>18 Paym</li> <li>for and</li> <li>19 Confe</li> <li>20 Intere</li> <li>21 Paym</li> <li>22 Depre</li> <li>23 Insura</li> <li>24 Other</li> </ul>	r salaries and wages	141,339	86,462		
<ul> <li>8 Pensii sectio</li> <li>9 Other</li> <li>10 Payro</li> <li>11 Fees</li> <li>a Mana,</li> <li>b Legal</li> <li>c Accoud</li> <li>d Lobby</li> <li>e Profes</li> <li>f Invest</li> <li>g Other,</li> <li>(A) an</li> <li>12 Advert</li> <li>13 Office</li> <li>14 Inform</li> <li>15 Royal</li> <li>16 Occup</li> <li>17 Trave</li> <li>18 Paym</li> <li>for an</li> <li>19 Confe</li> <li>20 Intere</li> <li>21 Paym</li> <li>22 Depre</li> <li>23 Insura</li> <li>24 Other</li> </ul>	sion plan accruals and contributions (include on 401(k) and 403(b) employer contributions) r employee benefits	141,339	86,462		
9 Other 10 Payro 11 Fees 1 A Mana b Legal c Accou d Lobby e Profes f Invest g Other (A) an 12 Adver 13 Office 14 Inform 15 Royal 16 Occup 17 Trave 18 Paym for an 19 Confe 20 Intere 21 Paym 22 Depre 23 Insura 24 Other	on 401(k) and 403(b) employer contributions) r employee benefits		I	11,282	43,595
<ul> <li>9 Other</li> <li>10 Payro</li> <li>11 Fees</li> <li>a Mana</li> <li>b Legal</li> <li>c Accoud</li> <li>d Lobby</li> <li>e Profes</li> <li>f Invest</li> <li>g Other.</li> <li>(A) and</li> <li>12 Adver</li> <li>13 Office</li> <li>14 Inform</li> <li>15 Royal</li> <li>16 Occup</li> <li>17 Trave</li> <li>18 Paym</li> <li>16 Occup</li> <li>18 Paym</li> <li>17 Trave</li> <li>18 Paym</li> <li>19 Confe</li> <li>20 Intere</li> <li>21 Paym</li> <li>22 Depre</li> <li>23 Insura</li> <li>24 Other</li> </ul>	r employee benefits				
10Payro11FeesaManaebLegalcAccoudLobbyeProfesfInvestgOther.(A) an12Adver13Office14Inform15Royal16Occup17Trave18Paym19Confe20Intere21Paym22Depre23Insura24Other	oll taxes	ı – – – – – – – – – – – – – – – – – – –			
11FeesaManabLegalcAccoudLobbyeProfesfInvestgOther.(A) anAdver13Office14Inform15Royal16Occup17Trave18Paymfor anfor an19Confe20Intere21Paym22Depre23Insura24Other					
a Manag b Legal c Accou d Lobby e Profes f Invest g Other. (A) an 12 Adver 13 Office 14 Inform 15 Royal 16 Occup 17 Trave 18 Paym for an 19 Confe 20 Intere 21 Paym 22 Depre 23 Insura 24 Other	· · · · · ·	18,313	11,171	1,465	5,677
<ul> <li>b Legal</li> <li>c Accou</li> <li>d Lobby</li> <li>e Profest</li> <li>f Invest</li> <li>g Other. (A) an</li> <li>12 Adver</li> <li>13 Office</li> <li>14 Inform</li> <li>15 Royal</li> <li>16 Occup</li> <li>17 Trave</li> <li>18 Paym</li> <li>for an</li> <li>19 Confe</li> <li>20 Intere</li> <li>21 Paym</li> <li>22 Depre</li> <li>23 Insura</li> <li>24 Other</li> </ul>	for services (nonemployees):				
c Accou d Lobby e Profes f Invest g Other. (A) an 12 Adver 13 Office 14 Inform 15 Royal 16 Occup 17 Trave 18 Paym for an 19 Confe 20 Intere 21 Paym 22 Depre 23 Insura 24 Other	agement				
d Lobby e Profes f Invest g Other. (A) an 12 Adver 13 Office 14 Inform 15 Royal 16 Occup 17 Trave 18 Paym for an 19 Confe 20 Intere 21 Paym 22 Depre 23 Insura 24 Other	1				
e Profes f Invest g Other. (A) an 12 Adver 13 Office 14 Inform 15 Royal 16 Occup 17 Trave 18 Paym for an 19 Confe 20 Intere 21 Paym 22 Depre 23 Insura 24 Other	unting	31,654	28,489	1,582	1,583
f Invest g Other. (A) an 12 Adver 13 Office 14 Inform 15 Royal 16 Occup 17 Trave 18 Paym for an 19 Confe 20 Intere 21 Paym 22 Depre 23 Insura 24 Other	ying				
g Other. (A) an (A) (A) an (A) (A) (A) (A) (A) (A) (A) (A) (A) (A)	essional fundraising services. See Part IV, line 17 .				
<ul> <li>(A) an</li> <li>(A) an</li> <li>(A) dver</li> <li>(A) dve</li></ul>	stment management fees • • • • • • • • • • • • • • • • • •	8,257		8,257	
<ul> <li>Adver</li> <li>Office</li> <li>Inform</li> <li>Royal</li> <li>Royal</li> <li>Occup</li> <li>Royal</li> <li>Occup</li> <li>Trave</li> <li>Paym</li> <li>for an</li> <li>Confe</li> <li>Confe</li> <li>Intere</li> <li>Paym</li> <li>Intere</li> <li>Paym</li> <li>Intere</li> <li>Insura</li> <li>Other</li> </ul>	r. (If line 11g amount exceeds 10% of line 25, column				
<ul> <li>13 Office</li> <li>14 Inform</li> <li>15 Royal</li> <li>16 Occup</li> <li>17 Trave</li> <li>18 Paym for an</li> <li>19 Confe</li> <li>20 Intere</li> <li>21 Paym</li> <li>22 Depre</li> <li>23 Insura</li> <li>24 Other</li> </ul>	mount, list line 11g expenses on Schedule O.) ••				
<ul> <li>Inform</li> <li>Royal</li> <li>Royal</li> <li>Occup</li> <li>Trave</li> <li>Paym</li> <li>for an</li> <li>Confe</li> <li>Confe</li> <li>Intere</li> <li>Paym</li> <li>Depre</li> <li>Insura</li> <li>Other</li> </ul>	ertising and promotion				
<ul> <li>15 Royal</li> <li>16 Occup</li> <li>17 Trave</li> <li>18 Paym for an</li> <li>19 Confe</li> <li>20 Intere</li> <li>21 Paym</li> <li>22 Depre</li> <li>23 Insura</li> <li>24 Other</li> </ul>	e expenses	27,173	20,720	1,292	5,161
<ul> <li>16 Occup</li> <li>17 Trave</li> <li>18 Paym for an</li> <li>19 Confe</li> <li>20 Intere</li> <li>21 Paym</li> <li>22 Depre</li> <li>23 Insura</li> <li>24 Other</li> </ul>	mation technology	7,187	7,116		71
<ol> <li>Trave</li> <li>Trave</li> <li>Paym</li> <li>for an</li> <li>Confe</li> <li>Confe</li> <li>Intere</li> <li>Intere</li> <li>Paym</li> <li>Depre</li> <li>Insura</li> <li>Other</li> </ol>	alties				
<ul> <li>Paym for an for an</li> <li>Confe</li> <li>Intere</li> <li>Paym</li> <li>Paym</li> <li>Depre</li> <li>Insura</li> <li>Other</li> </ul>	ipancy				
for an for an Confe 20 Intere 21 Paym 22 Depre 23 Insura 24 Other	el	559	559		
<ol> <li>Confe</li> <li>Intere</li> <li>Paym</li> <li>Depre</li> <li>Insura</li> <li>Other</li> </ol>	nents of travel or entertainment expenses				
20Intere21Paym22Depre23Insura24Other	ny federal, state, or local public officials				
21Paym22Depression23Insura24Other	erences, conventions, and meetings				
22Depresentation23Insuration24Other	est • • • • • • • • • • • • • • • • • • •				
23 Insura 24 Other	nents to affiliates				
24 Other	eciation, depletion, and amortization ••••••				
	ance	3,248	974	2,112	162
above	r expenses. Itemize expenses not covered				
	e (List miscellaneous expenses on line 24e. If				
	24e amount exceeds 10% of line 25, column				
(A), ai	amount, list line 24e expenses on Schedule O.)				
a <u>Dues</u>		13,624	11,989	1,090	545
b	s and registrations				
c	s and registrations				
d	s and registrations				
			3,347	239	1,195
	her expenses	4,781	1,448,244	34,813	86,945
	her expenses	4,781 1,570,002			
	t costs. Complete this line only if the		Т	I	
fundra	her expenses				

Form 990 (2022) Petfinder Foundat	ion
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87-0694641

Page 11

Par	t X	Balance Sheet					
		Check if Schedule O contains a response or note	to ar	y line in this Part X			
					(A)		(B)
					Beginning of year		End of year
	1	Cash - non-interest-bearing			240,565	1	240,612
	2	Savings and temporary cash investments			1,593,756	2	1,756,322
	3	Pledges and grants receivable, net			80,879	3	53,972
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current or former of	officer,	director,			
		trustee, key employee, creator or founder, substantial con	ntribute	or, or 35%			
		controlled entity or family member of any of these person	s			5	
	6	Loans and other receivables from other disqualified perso	•				
		under section 4958(f)(1)), and persons described in secti				6	
s	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
As	9	Prepaid expenses and deferred charges			1,874	9	10,587
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	= / = = =			
	b	Less: accumulated depreciation	10b	=/===		10c	
	11	Investments - publicly traded securities	• • •		1,310,493	11	1,110,236
	12			•••••		12	
	13	Investments - program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			335,000	15	
	16	Total assets. Add lines 1 through 15 (must equal line 33			3,562,567	16	3,171,729
	17	Accounts payable and accrued expenses			2,489	17	4,463
	18				18		
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV of				21	
Liabilities	22	Loans and other payables to any current or former officer					
ilid		trustee, key employee, creator or founder, substantial con				22	
Lia	22	controlled entity or family member of any of these person Secured mortgages and notes payable to unrelated third				22 23	
	23 24		•			23	
	24 25	Unsecured notes and loans payable to unrelated third pa Other liabilities (including federal income tax, payables to				24	
	25	parties, and other liabilities not included on lines 17-24).					
		of Schedule D			435,000	25	47,000
	26	Total liabilities. Add lines 17 through 25			437,489	26	51,463
		Organizations that follow FASB ASC 958, check here		-	457,405		51,405
S		and complete lines 27, 28, 32, and 33.		1			
nce	27				2,825,776	27	2,917,389
ala	28	Net assets with donor restrictions			299,302	28	202,877
Б	-	Organizations that do not follow FASB ASC 958, chee		_		_	
Fun		and complete lines 29 through 33.		-			
or	29					29	
ets	30	Paid-in or capital surplus, or land, building, or equipment	fund			30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or		funds		31	
et 4	32	Total net assets or fund balances			3,125,078	32	3,120,266
z	33	Total liabilities and net assets/fund balances			3,562,567	33	3,171,729

EEA

Form **990** (2022)

	990 (2022) Petfinder Foundation	87-0694641		Pa	age <b>12</b>
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,	781,	615
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,	570,	002
3	Revenue less expenses. Subtract line 2 from line 1	3	:	211,	613
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	з,:	125,	078
5	Net unrealized gains (losses) on investments	5	(2	216,	425)
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	з,:	120,	266
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
		_		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	х	
	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:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	х	
	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				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		T		
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
EEA			Form	990 (	2022)

SCHEDULE	Α
(Form 990)	

# **Public Charity Status and Public Support**

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

OMB No. 1545-0047
2022
Open to Public

	tment of the Treasury		Attac	h to Form 990 or Form	990-EZ.			Open to Public
Interna	al Revenue Service	Go to	www.irs.gov/Forr	n990 for instructions ar	tion.	Inspection		
Name	of the organization						Employer identification	n number
Petf	inder Founda						87-069464	
Par	t I Reason	for Public Cha	rity Status. (Al	l organizations mus	st comple	ete this p	art.) See instructi	ons.
The o	rganization is not a	private foundation be	ecause it is: (For line	es 1 through 12, check or	nly one box	(.)		
1	A church, conv	ention of churches, o	or association of ch	urches described in <b>secti</b>	on 170(b)(	1)(A)(i).		
2	A school descr	ibed in section 170(	b)(1)(A)(ii). (Attach	Schedule E (Form 990).)				
3	A hospital or a	cooperative hospital	service organizatio	n described in section 1	70(b)(1)(A)	(iii).		
4	A medical rese	arch organization op	erated in conjunction	on with a hospital describe	ed in <b>secti</b> e	on 170(b)( <sup>-</sup>	1)(A)(iii). Enter the	
	hospital's name	e, city, and state:						
5	An organization	n operated for the be	nefit of a college or	university owned or oper	rated by a g	governmen	tal unit described in	
	section 170(b)	(1)(A)(iv). (Complete	e Part II.)					
6	A federal, state	, or local governmen	t or governmental ι	unit described in section	170(b)(1)(/	4)(v).		
7	X An organization	n that normally receiv	ves a substantial pa	rt of its support from a go	overnmenta	al unit or fro	m the general public	
	described in <b>se</b>	ection 170(b)(1)(A)(v	<b>/i).</b> (Complete Part I	II.)				
8	A community tr	ust described in <b>sec</b>	tion 170(b)(1)(A)(v	i). (Complete Part II.)				
9	An agricultural	research organizatio	n described in <b>sect</b>	ti <b>on 170(b)(1)(A)(ix)</b> oper	rated in cor	njunction w	ith a land-grant college	9
	or university or	a non-land-grant co	llege of agriculture (	(see instructions). Enter t	he name, c	ity, and sta	te of the college or	
	university:							
10	receipts from a support from gi acquired by the	ctivities related to its ross investment inco e organization after J	exempt functions, s me and unrelated b une 30, 1975. See	33 1/3% of its support from subject to certain exception usiness taxable income ( section 509(a)(2). (Comp	ons; and (2 (less sectio plete Part II	!) no more i n 511 tax) i ll.)	than 33 1/3% of its	5
11		•	•	test for public safety. See				
12		•		r the benefit of, to perform				
				d in <b>section 509(a)(1)</b> or				DNECK
_		-	• •	e of supporting organizat		•	-	
а				vised, or controlled by its	••	-	.,	J
		• • • • •		ly appoint or elect a majo	nty of the c	inectors of	trustees of the	
b		-	-	t IV, Sections A and B. Introlled in connection wi	th its supp	orted organ	vization(a) by boying	
U			•	tion vested in the same p		-	.,	4
		on(s). You must com					manage the supported	4
с		. ,	-	anization operated in con	nection wit	h and fund	tionally integrated with	ı
Ŭ				u must complete Part IV				',
d		• • • •	,	g organization operated in				(s)
				generally must satisfy a				. ,
			•	te Part IV, Sections A an				-
е		. ,	•	n determination from the			Type II. Type III	
		-		integrated supporting org		<b>,</b>	51 7 51	
f		r of supported organi	-		·			
g	Provide the follow	ving information abo	ut the supported or	ganization(s).				
	(i) Name of supported or	•	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the o listed in you docum	ir governing	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
(A)								
(B)								
(C)								
(D)								
(E)								

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

Schedu	le A (Form 990) 2022 <b>Petfinder</b>	Foundation				87-0694643	1 Page <b>2</b>
Part		ations Descr	ribed in Sect	tions 170(b)(	1)(A)(iv) and	170(b)(1)(A)	(vi)
	(Complete only if you checked th	ne box on line	5, 7, or 8 of	Part I or if the	e organizatio	n failed to qua	lify under
	Part III. If the organization fails t						2
Secti	on A. Public Support				•	,	,
-	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and	(0)		(-)			
-	membership fees received. (Do not						
	include any "unusual grants.")	1,233,494	862 374	1,577,317	1 496 242	1 754 806	6,924,233
2	Tax revenues levied for the	1,233,434	002,574	1,577,517	1,490,242	1,754,000	0,524,255
-	organization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
Ŭ	furnished by a governmental unit to the						
	organization without charge						
4	<b>Total.</b> Add lines 1 through 3	1 022 404	0.00 074	1 599 019	1 400 040	1 754 000	6 004 000
5	The portion of total contributions by	1,233,494	862,374	1,577,317	1,496,242	1,754,806	6,924,233
5	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)						1,605,695
$\frac{6}{2}$	Public support. Subtract line 5 from line 4 .						5,318,538
	on B. Total Support	( ) 0040	(1) 0040	( ) 0000	( 1) 0004	( ) 0000	(0 T )
	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	<b>(f)</b> Total
7	Amounts from line 4	1,233,494	862,374	1,577,317	1,496,242	1,754,806	6,924,233
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from						
	similar sources	16,701	18,788	50,127	37,901	36,796	160,313
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						7,084,546
12	Gross receipts from related activities, etc.	•	,			12	
13	First 5 years. If the Form 990 is for the or	rganization's fir	st, second, thir	d, fourth, or fif	th tax year as a	a section 501(c)	(3)
	organization, check this box and stop he	re					🔲
Secti	on C. Computation of Public Suppo	ort Percentag	е				
14	Public support percentage for 2022 (line 6	6, column (f), di	vided by line 1	1, column (f))		14	75.07 %
15	Public support percentage from 2021 Sch					15	71.63 %
16a	33 1/3% support test - 2022. If the organ	ization did not	check the box	on line 13, and	l line 14 is 33 ′	/3% or more, c	heck this
	box and stop here. The organization qua	lifies as a publi	cly supported	organization .			x
b	33 1/3% support test - 2021. If the organ	ization did not	check a box o	n line 13 or 16a	a, and line 15 is	s 33 1/3% or mo	ore, check
	this box and stop here. The organization						
17a	10%-facts-and-circumstances test - 202		• • • •	-			_
	10% or more, and if the organization mee	-					
	Part VI how the organization meets the fa					•	
	organization						
b	10%-facts-and-circumstances test - 20						_
U	15 is 10% or more, and if the organization	-					
	-					-	
	in Part VI how the organization meets the			•	•		•
40	organization						_
18	Private foundation. If the organization di						_
	instructions						

Schedu	le A (Form 990) 2022 Petfinder F					87-069464	1 Page 3
Part	III Support Schedule for Organiza	ations Desci	ribed in Sect	ion 509(a)(2)			
	(Complete only if you checked th	e box on line	10 of Part I	or if the orgar	nization failed	to qualify ur	ider Part II.
	If the organization fails to qualify	under the te	sts listed belo	ow, please co	mplete Part II.	)	
Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	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						
Socti	line 6.)						
		(-) 2019	(1) 2010	(a) 2020	(4) 2021	(e) 2022	(5) Total
9	dar year (or fiscal year beginning in) Amounts from line 6	<b>(a)</b> 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
5 10a							<u> </u>
IVa	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						
с	Add lines 10a and 10b						
11	Net income from unrelated business						
••	activities not included on 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 or	ganization's fir	st, second, thir	d, fourth, or fift	h tax year as a	section 501(	:)(3)
	organization, check this box and stop her	е					🗌
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2022 (line 8			3, column (f))		15	%
16	Public support percentage from 2021 Sch					16	%
Secti	on D. Computation of Investment Inc	come Perce	ntage				
17	Investment income percentage for 2022 (li		.,	•		17	%
18	Investment income percentage from 2021					18	%
19a	33 1/3% support tests - 2022. If the organ						
	17 is not more than 33 1/3%, check this be	-	-	-		•••••	anization
b	33 1/3% support tests - 2021. If the organization						_
• -	line 18 is not more than 33 1/3%, check this box		-			-	<u> </u>
20	Private foundation. If the organization did	a not check a b	box on line 14,	19a, or 19b, cł	neck this box an	d see instruc	tions 📋

Page 4

### Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of 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

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? 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.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer lines 3b and 3c below.*
- **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)? *If "Yes," describe in Part VI when and how the organization made the determination.*
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and *if* you checked 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *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.*
- **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)? *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.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? 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).
- **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? *If "Yes," provide detail in Part VI.*
- 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? *If "Yes," complete Part I of Schedule L (Form 990).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **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))? *If "Yes," provide detail in Part VI.*
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI.*
- **c** Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in Part VI.*
- **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)? *If "Yes," answer 10b below.* 
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		
3b		
3c		
30		
4a		
Tu		
4b		
4c		
5a		
Ja		
5b		
5c		
6		
_		
7		
8		
0		
9a		
9b		
9c		
10a		
104		
	orm 99	

	e A (Form 990) 2022 Petfinder Foundation 87-0694641		F	Page 5
Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,	44 -		
Sacti	provide detail in Part VI. on B. Type I Supporting Organizations	11c		
Secu	on B. Type I Supporting Organizations		Yes	No
1	Did the reversing body members of the reversing body officers esting in their official conscity or membership of one or		Tes	NO
•	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 <b>Part VI</b> how the supported organization(s)</i>			
	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.	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? If "Yes," explain in <b>Part</b>			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			1
			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	2		
5	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's			
	supported organizations played in this regard.	3		
Secti	on 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	instru	iction	is).
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruction	s).		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on 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? If			
	"Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would	0		
~	have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i>			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or tructors of each of the supported ergenizations? If "Yee" or "Ne " provide details in <b>Port VI</b>	2-		
h	trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in <b>Part VI</b>.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	2h		
	of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		l

Schedule A (Form 990) 2022

Sacti	instructions. All other Type III non-functionally integrated supporting organiz on A - Adjusted Net Income		(A) Prior Year	(B) Current Year
Secu	on A - Adjusted Net Income		(A) FIIOI fear	(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		
Secti	on 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other factors			
	(explain in detail in <b>Part VI</b> ):			
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		
Secti	on 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		

EEA

Schedule A (Form 990) 2022

Petfinder Foundation

Schedule A (Form 990) 2022

Page 6

87-0694641

Schedul	e A (Form 990) 2022 Petfinder Foundation V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organi	87-069	94641 Page 7
	on D - Distributions	, oupporting organi		Current Year
1	Amounts paid to supported organizations to accomplish ex	xempt purposes	1	
2	Amounts paid to perform activity that directly furthers exer		ed	
	organizations, in excess of income from activity		2	
3	Administrative expenses paid to accomplish exempt purpo	oses of supported organi		
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required)	- provide details in Part	VI) 5	
6	Other distributions (describe in Part VI). See instructions.		6	
7	Total annual distributions. Add lines 1 through 6.		7	
8	Distributions to attentive supported organizations to which	the organization is resp	onsive	
	(provide details in <b>Part VI</b> ). See instructions.	0	8	
9	Distributable amount for 2022 from Section C, line 6		9	
10	Line 8 amount divided by line 9 amount		10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2022			
	(reasonable cause required - <i>explain in Part VI</i> ). See			
	instructions.			
3	Excess distributions carryover, if any, to 2022			
a	From 2017			
b	From 2018			
C	From 2019			
d	From 2020			
е	From 2021			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2022 distributable amount			
i	Carryover from 2017 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2022 from			
	Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2022 distributable amount			
C	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2022, 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 2022. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2023. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
a	Excess from 2018			
b	Excess from 2019			
<u> </u>	Excess from 2020			
d	Excess from 2021			
e	Excess from 2022			
EEA				Schedule A (Form 990) 2022

Schedule A (Form 990) 2022

Part VI	<b>Supplemental Information.</b> Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part II, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

### Schedule B (Form 990)

Schedule of Contributors

OMB No. 1545-0047

2022

#### Attach to Form 990 or Form 990-PF.

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

Employer identification number 87-0694641 Section: 501(c)( 3 ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization

Department of the Treasury	
nternal Revenue Service	

Name of the or	ganization
Petfinder	Foundation

Organization	type	(check	one):

Filers of:	Section:
Form 990 or 990-EZ	<b>X</b> 501(c)( <b>3</b> ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> 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), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or
   (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year

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

Petfind	er Foundation		87-0694641
Part I	Contributors (see instructions). Use duplicate copies of	of Part I if additional space is n	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_1_	Orvis 178 Conservation Way Arlington VT 05250	- \$ <u>35,097</u>	PersonImage: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_2	Nestle Purina PetCare Company 30500 Bainbridge Rd Solon OH 44139	- \$ <u>50,000</u> -	PersonxPayrollINoncashI(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_3_	<u>Kia America</u> <u>111 Peters Canyon Rd</u> <u>Irvine CA 92606</u>	- _ \$500,000	PersonImage: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_4	Leonard Pastore Estate 27 Executive Dr Hauppauge NY 11788	- \$ <u>75,000</u>	PersonImage: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	<u>SocialSweet</u> <u>30 W Park Pl</u> <u>Morristown NJ 07960</u>	- \$ <u>96,915</u> -	PersonImage: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- _ \$	PersonPayrollNoncash(Complete Part II for noncash contributions.)

Page 2

Employer identification number

Schedule B (Form 990) (2022) Name of organization

SCHEDULE D	
(Form 990)	

EEA

а b

# **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.

OMB No. 1545-0047 22 ZU

Open to Public

Departme	ent of the Treasury	Attach to Form 990.		Open to P	
Internal F	Go to www.irs.gov/Form9	90 for instructions and the latest information		Inspection	n
Name of	the organization		Employer identifica	ation number	
	nder Foundation		87-06946	41	
Par			counts.		
	Complete if the organization answered "Yes"	on Form 990, Part IV, line 6.			
		(a) Donor advised funds	(b) Funds	s and other account	s
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 organiza	ation's exclusive legal control?		🗌 Yes	🗌 No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be use	ed		
	only for charitable purposes and not for the benefit of the do	nor or donor advisor, or for any other purpose	•		
	conferring impermissible private benefit?	<u></u>	<u></u> .	🗌 Yes	🗌 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 organiza	tion (check all that apply).			
	Preservation of land for public use (for example, recreation		historically importa	nt land area	
	Protection of natural habitat		certified historic str		
	Preservation of open space	—			
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contribution in the form of a	conservation		
	easement on the last day of the tax year.			at the End of the	Tax Year
	Total number of conservation easements				
	Total acreage restricted by conservation easements				
	Number of conservation easements on a certified historic sti				
	Number of conservation easements included in (c) acquired				
	historic structure listed in the National Register	•	2d		
	Number of conservation easements modified, transferred, re		-	ne	
~	tax year		Jan Lation during t		
4	Number of states where property subject to conservation ea	sement is located			
	Does the organization have a written policy regarding the pe				
	violations, and enforcement of the conservation easements			🗌 Yes	
	Staff and volunteer hours devoted to monitoring, inspecting,				
0		nanding of violations, and emotioning conserv	ลแบบ ออออากอากอิ นไ	aning une year	
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and onforcing conservation	essements during	the year	
1	Amount of expenses mourred in monitoring, inspecting, fiant		reasements during	uie yeal	
8		we satisfy the requirements of section 170/b)	(4)(B)(i)		
	Does each conservation easement reported on line 2(d) abo			🗌 Yes	∏ No
9	In Part XIII, describe how the organization reports conservat				
	balance sheet, and include, if applicable, the text of the footr	iole to the organization's financial statements	a mat describes the		
Part	organization's accounting for conservation easements. III Organizations Maintaining Collections	of Art Historical Trageuros or (	Other Similar /	lecote	
i ait				-33513.	
4-	Complete if the organization answered "Yes"		halanas starting 1		
	If the organization elected, as permitted under FASB ASC 98			5	
	of art, historical treasures, or other similar assets held for pu		erance of public		
	service, provide in Part XIII the text of the footnote to its final				
	If the organization elected, as permitted under FASB ASC 99	•			
	art, historical treasures, or other similar assets held for publi	c exhibition, education, or research in further	ance of public servi	ce,	
	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				
	If the organization received or held works of art, historical tre	-	ain, provide the		
	following amounts required to be reported under FASB ASC	958 relating to these items:			
а	Revenue included on Form 990 Part VIII line 1				

Assets included in Form 990, Part X .....

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	e D (Form 990) 2022		dation			_		87-069		Page <b>2</b>
Par	t III   Organiz	zations Maintaining	Collections of	Art, Hist	orical T	reasures,	, or Ot	her Similar A	ssets (co	ntinued)
3	Using the organization	ation's acquisition, access	ion, and other record	s, check an	y of the fol	llowing that m	nake sig	nificant use of its		
	collection items (c	check all that apply):								
а	Public exhibition	on		d [	Loan or	r exchange p	rogram			
b	Scholarly resea	arch		е [	Other					
с	Preservation for	or future generations								
4	Provide a descript	tion of the organization's c	ollections and explair	n how they f	urther the	organization'	s exemp	ot purpose in Part		
	XIII.	-		-		-				
5	During the year, d	lid the organization solicit o	or receive donations of	of art, histor	ical treasu	ires, or other	similar			
	assets to be sold t	to raise funds rather than t	o be maintained as p	art of the or	ganization	n's collection?	· · · ·		. Yes	No
Par		and Custodial Arra			•					
	Complet	te if the organization	answered "Yes"	on Form	1990, Pa	art IV, line	9, or r	eported an an	nount on F	Form
	990, Pai	rt X, line 21.						-		
1a	Is the organizatior	n an agent, trustee, custod	lian or other intermed	iary for con	tributions of	or other asse	ts not			
		990, Part X?							· · Yes	No
b	If "Yes," explain th	ne arrangement in Part XIII	l and complete the fol	lowing table	e:				_	_
		-		-				Ar	nount	
с	Beginning balance	e					. 10	c .		
d		he year • • • • • • • • •						d l		
е		ng the year						e		
f								;		
2a	-	on include an amount on F						v?	. Yes	No
b	-	ne arrangement in Part XIII								
Par		ment Funds.	-	1						
		te if the organization	answered "Yes"	on Form	1 990, Pa	art IV, line	10.			
	- 1	5	(a) Current year	(b) Pric		(c) Two years		(d) Three years back	(e) Four	years back
1a	Reginning of year	balance			, your		DUON	(u) Three years bach		youro buok
b										
c		arnings, gains, and								
Ŭ		•••••								
d		ships								
	Other expenditure	•								
е	•									
f		penses								
		ce								
g	•			 	olumn (a))					
2		ated percentage of the cur or quasi-endowment			olumi (a))					
а ь										
b	Permanent endow		)							
С	Term endowment		auld agual 1000/							
20		on lines 2a, 2b, and 2c sho		tion that ar		administered	d for the			
3a		nent funds not in the posse	ession of the organiza	uon inai an	e neiu anu	auministered			Г	Yes No
	organization by:	anizations								Tes NO
									· 3a(i)	
									. 3a(ii)	
b		(ii), are the related organiz	•						. 3b	
4		(III the intended uses of the uildings, and Equi		wment iund	lS.					
Part				on Form		ort IV/ line	112 9	See Form 000	Dart V li	no 10
	· · · · · ·	te if the organization								
	Descript	tion of property	(a) Cost or oth			r other basis	. ,	Accumulated	(d) Book	value
	1		(investme	unit <i>j</i>	(0	other)	C	lepreciation		
1a		• • • • • • • • • • • • • •								
b	•	• • • • • • • • • • • • • •								
C	Leasehold improv									
d						1,243		1,243		
e										
rotal.	Add lines 1a throug	gh 1e. <i>(Column (d) must</i> eo	qual ⊢orm 990, Part X	t, column (E	s), line 10c	.) ••••				

Schedule D (F	orm 990	) 2022
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	Complete if the organization answered	"Yes" on Forr	m 990, Part	IV, line	e 11b. See Form	990, Part X, line 12.
	<ul> <li>(a) Description of security or category (including name of security)</li> </ul>		<b>(b)</b> Book va	lue		ethod of valuation: d-of-year market value
(1) Financial d	erivatives					
(2) Closely-hel	d equity interests					
(3) Other						
(A)						
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
	(b) must equal Form 990, Part X, col. (B) line 12.)					
Part VIII	Investments - Program Related.					
	Complete if the organization answered	"Yes" on Forr	n 990, Part	IV, line	e 11c. See Form	990, Part X, line 13.
	(a) Description of investment		<b>(b)</b> Book va	lue		ethod of valuation: d-of-year market value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	(b) must equal Form 990, Part X, col. (B) line 13.)					
Part IX	Other Assets.					
	Complete if the organization answered	"Yes" on Forr	m 990, Part	IV, line	e 11d. See Form	990, Part X, line 15.
	( <b>a</b> ) De	scription				(b) Book value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Part X	Other Liabilities.					
	Complete if the organization answered line 25.	"Yes" on Forr	m 990, Part	IV, line	e 11e or 11f. See	e Form 990, Part X,
1.	(a) Description of liability	(b) Book v	alue			
(1) Federal in	icome taxes					
(2 <b>Refunda</b>	ble advances		47,000			
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Total. (Column (b	o) must equal Form 990, Part X, col. (B) line 25.) ••		47,000			
2 Liability for u	Incertain tax positions. In Part XIII, provide the text (	of the footnote to t	he organization	n's financ	cial statements that r	enorts the

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

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Schedule D (Form 990) 2022

Part VII

Petfinder Foundation

Investments - Other Securities.

-		87-0694641	Page <b>4</b>
Part		<sup>.</sup> 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	1,556,933
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	(216,425)
3	Subtract line <b>2e</b> from line <b>1</b>	3	1,773,358
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 8,257		
b	Other (Describe in Part XIII.)		
С	Add lines <b>4a</b> and <b>4b</b>	4c	8,257
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,781,615
Part		er Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	1,561,745
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	1,561,745
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 8,257		
b	Other (Describe in Part XIII.)		
C	Add lines <b>4a</b> and <b>4b</b>	4c	8,257
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,570,002
Part			
Provide	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; F	art 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.		
<u>01. e</u>	Footnote for uncertain tax position under FIN 48 (Part X)		

Management of the Foundation considers the likelihood of changes by taxing authorities in its filed

tax returns and recognizes a liability for or discloses potential significant changes if management

believes it is more likely than not for a change to occur, including changes to the organization's

status as a not-for-profit entity.

SCHEDULE I	Grants and Other Assistance to Organizations,						OMB No. 1545-0047		
(Form 990)	Gov	ernments, and	Individuals in t	the United Stat	tes		2022		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.								
Department of the Treasury Internal Revenue Service	Attach to Form 990. Go to <i>www.irs.gov/Form990</i> for the latest information.								
Name of the organization		j				Employer identificat	Inspection on number		
Petfinder Foundation						87-0694641			
Part I General Information of	on Grants and Assi	stance				0, 0004041			
1 Does the organization maintain record	ls to substantiate the amo	unt of the grants or assis	tance, the grantees' elig	ibility for the grants or a	ssistance, and				
the selection criteria used to award the		-					. 🗙 Yes 🗌 No		
2 Describe in Part IV the organization's	procedures for monitoring	the use of grant funds ir	the United States.						
Part II Grants and Other Assist				s. Complete if the or	ganization answered "	Yes" on Form 990,			
Part IV, line 21, for any re		-							
1 (a) Name and address of organization	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of	(f) Method of valuation	(g) Description of	(h) Purpose of grant		
or government		(if applicable)	grant	noncash assistance	(book, FMV, appraisal, other)	noncash assistance	or assistance		
(1) Hawaii Island Humane Socie	et						2022 Kia Pet		
78-6767 Mamalahoa Hwy							Adoption		
Holualoa HI 96725	99-6009437	501c3	5,000				Grant		
(2) Puppy Kitty NY City							2022 Kia Pet		
6329 75th Street							Adoption		
Middle Village NY 11379	83-1059040	501c3	5,000				Grant		
(3) Town and Country Humane So	be						2022 Kia Pet		
14110 S. 84th St.							Adoption		
Papillion NE 68046	47-0655586	501c3	5,000				Grant		
(4) Pasadena Humane Society							2022 Kia Pet		
361 S Raymond Ave							Adoption		
Pasadena CA 91105	95-1643344	501c3	5,000				Grant		
(5) Ruff Start Rescue							2022 Kia Pet		
12526 319th Avenue							Adoption		
Princeton MN 55371	27-2545988	501c3	5,000				Grant		
(6) Florence Area Humane Socie	et						2022 Kia Pet		
P.O. Box 4808							Adoption		
Florence SC 29502	57-0573276	501c3	5,000				Grant		
(7) Pups Without Borders							2022 Kia Pet		
14928 Bassett St							Adoption		
Van Nuys CA 91405	85-4373524	501c3	5,000				Grant		
(8) Humane Society of Greater	J						2022 Play		
100 Capital Street							Yard		
Jupiter FL 33458	59-2111273	501c3	5,000				Renovation		
(9) HELP the Animals, Inc.							2022 Kia Pet		
P.O. Box 117							Adoption		
Richmond IN 47374	35-1772951	501c3	6,000				Grant		
(10County of LA Department o:	E						2022 Kia Pet		
5898 Cherry Avenue							Adoption		
Long Beach CA 90805	95-9000927	501c3	6,000				Grant		
2 Enter total number of section 501(c)(3	) and government organiz	ations listed in the line 1	table				20		

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

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

SCHEDULE I	G	L	OMB No. 1545-0047							
(Form 990)	GOV	ernments, and ete if the organization a	Individuals in	the United Sta			2022			
Department of the Treasury	Comple	ale il the organization a	Attach to Form 990.	in 550, Part IV, inte 21 0	JI 22.		Open to Public Inspection			
Internal Revenue Service	Go to www.irs.gov/Form990 for the latest information.									
Name of the organization						Employer identification number				
Petfinder Foundation						87-0694641				
Part I General Information or	Grants and Ass	istance								
1 Does the organization maintain records	to substantiate the amo	ount of the grants or assis	stance, the grantees' elig	jibility for the grants or a	ssistance, and					
the selection criteria used to award the	the selection criteria used to award the grants or assistance?									
2 Describe in Part IV the organization's pr										
Part II Grants and Other Assista						'Yes" on Form 990				
Part IV, line 21, for any reci	pient that received n	nore than \$5,000. Par	t II can be duplicated	if additional space is	s needed.					
1 (a) Name and address of organization	<b>(b)</b> EIN	(c) IRC section	(d) Amount of cash	(e) Amount of	(f) Method of valuation (book, FMV, appraisal,	(g) Description of	(h) Purpose of grant			
or government		(if applicable)	grant	noncash assistance	other)	noncash assistance	or assistance			
(1) <sup>Humane</sup> Indiana							2022 REDI			
8149 Kennedy Ave.							Implementatio			
Highland IN 46322	35-0895837	501c3	6,000				n Grant			
(2) Darlington County Humane So							2022 Kia Pet			
PO Box 503							Adoption			
Darlington SC 29540	57-1050670	501c3	6,500				Grant			
(3) St. Francis Animal Rescue of	)									
1925 S. Tamiami Trail							2022 Disaster			
Venice FL 34293	65-0409317	501c3	7,000				Grant			
(4) Animal Welfare League of Ch	ı 🔤									
3519 Drance St.							2022 Disaster			
Punta Gorda FL 33980	59-1146309	501c3	7,000				Grant			
(5) Humane Society for Seattle	·						2022 Kia Pet			
13212 SE Eastgate Way							Adoption			
Bellevue WA 98005	91-0282060	501c3	7,000				Grant			
(6) Philadelphia Animal Welfare	•						2022 Kia Pet			
100 N. 2nd Street							Adoption			
Philadelphia PA 19106	26-3862631	501c3	7,000				Grant			
(7)Gerda's Equine Rescue							2022 REDI			
PO BOX 1325							Implementatio			
West Townshend VT 05359	59-3800477	501c3	8,000				n Grant			
(8) Brandywine Valley SPCA							2022 Kia Pet			
1212 Phoenixville Pike							Adoption			
West Chester PA 19380	23-1381030	501c3	8,500				Grant			
(9) Arizona Humane Society							2022 Kia Pet			
1521 W Dobbins Road							Adoption			
Phoenix AZ 85041	86-0135567	501c3	10,000				Grant			
(10Always & Forever Midwest Ar			, -				2022 Kia Pet			
23595 W. 223 ST							Adoption			
Spring Hill KS 66083	81-5468682	501c3	10,000				Grant			
2 Enter total number of section 501(c)(3) a							<u>I</u>			
3 Enter total number of other organization										

For Paperwork Reduction Act Notice, see the Instructions for Form 990.  $_{\mbox{\scriptsize EEA}}$ 

Schedule I (Form 990) (2022) Petfinder Foundation 87-0694641 Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
V Supplemental Information. Pro	ovide the information re	equired in Part I. li	ne 2; Part III, colum	n (b); and any other addit	ional information.
Monitoring procedures etfinder Foundation has the for e grant requirements:	·		ure that granted	funds are used in th	ne proper way based
ring the grant application pro	cess applying organ	izations must	agree to submit a	a final grant report	on how the granted
were used, how many pets were	helped, what speci	fically the fu	nds were spent o	n, etc. This grant re	eport must include
entation of expenditures to en	sure that the funds	were spent in	the correct way		
the official grant award lette	er, which is mailed	along with the	e grant check, g	rantees are notified	that the funds are

Page **2** 

Part III Grants and Other Assistance to D Part III can be duplicated if additional			e organization answ	vered "Yes" on Form 990	), Part IV, line 22.
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
_ 1					
2					
3					
4					
5					
6					
7					
Part IV Supplemental Information. Provid	e the information re	equired in Part I, lir	ne 2; Part III, colum	n (b); and any other addi	tional information.
of the grant terms and conditions liste	ed in the letter	. The repo	orting requirement	nt is stated again i	n each grant award
letter.					
3) 60-90 days after receiving the grant	t, awarded group	os are notified	that their grant	t report and documen	tation is due. Groups
are given one week to complete this rep	port. After the	reporting dead	line has passed o	groups who have not	complied are sent a
second notice, if they still do not cor	mply they are se	ent a third noti	ce which indicat	tes that if they do a	not submit their
grant report they will be required to a	return the grant	ed funds and wi	ill not be eligib	ole for future grant	s from the Petfinder
Foundation.					

87-0694641

#### SCHEDULE M (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047

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

. . ..

Open to Public Inspection

Name of the exception
Internal Revenue Service
Department of the Treasury

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

Name of the organization

Employer identification number 87-0694641

Petf	inder Foundation				87-0694	4641				
Par	t I Types of Property									
		<b>(a)</b> Check if applicable	<b>(b)</b> Number of contributions or items contributed	(c) Noncash contri amounts repor Form 990, Part V	ted on		ethod c		rmining on amo	
1	Art - Works of art									
2	Art - Historical treasures									
3	Art - Fractional interests									
4	Books and publications									
5	Clothing and household									
	goods									
6	Cars and other vehicles									
7	Boats and planes									
8	Intellectual property									
9	Securities - Publicly traded									
10	Securities - Closely held stock									
11	Securities - Partnership, LLC,									
	or trust interests									
12	Securities - Miscellaneous									
13	Qualified conservation									
	contribution - Historic									
	structures									
14	Qualified conservation									
	contribution - Other									
15	Real estate - Residential									
16	Real estate - Commercial									
17	Real estate - Other									
18	Collectibles									
19	Food inventory									
20	Drugs and medical supplies									
21	Taxidermy									
22	Historical artifacts									
23	Scientific specimens									
24	Archeological artifacts									
25	Other ( <u>Dog Toys</u> )	x	1,200		16,788					
26	Other ( <u>Dog Beds</u> )	x	360		19,008					
27	Other ( <u>Other</u> )	x	4		1,000	fair	mark	et v	alue	1
28 29	Other ( ) Number of Forms 8283 received by the o	raopization a	l							
29	which the organization completed Form 8	-				29				
		5205, Fait V,	Donee Acknowledgement			29			Yes	No
30a	During the year, did the organization rece	aive by contri	bution any property reported in I	Part L lines 1 throug	1h				163	NO
Jua	28, that it must hold for at least three yea	-		-						
	used for exempt purposes for the entire h							30a		v
b	If "Yes," describe the arrangement in Par	• •					••	30a		x
31	Does the organization have a gift accepta		nat requires the review of any no	onstandard						
51	• • •							31		v
32a	Does the organization hire or use third pa						••	51	├──┤	Х
JZa								32a		v
b	If "Yes," describe in Part II.						•••	JEa		X
33	If the organization didn't report an amoun	t in column (	c) for a type of property for whic	h column (a) is che	cked					
	describe in Part II.				chou,					

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

# SCHEDULE O (Form 990)

# Supplemental Information to Form 990 or 990-EZ

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

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



Department of the Treasury Internal Revenue Service Name of the organization

#### Petfinder Foundation

Employer identification number 87-0694641

### 01. Form 990 governing body review (Part VI, line 11)

Each board member will review the 990 before it is filed with the IRS. The Executive

Director will supply a copy of the drafted 990 (via email or mail) to each board member

once complete. Each board member will review the 990 and respond with any comments or

questions within a one-week time period. After the board reviews and the majority votes

(four votes) to approve it, it will be signed by an authorized board member and submitted

to the IRS.

#### 02. Conflict of interest policy compliance (Part VI, line 12c)

To ensure that Petfinder Foundation's Conflict of Interest Policy is followed, board

members are asked to do the following:

1) Complete a new Conflict of Interest form at annual Petfinder Foundation Board

meetings,

2) To inform the Board and Executive Director of any new jobs or relationships within the

animal welfare community immediately and

3) To be committed to the Petfinder Foundation and ensure that no contacts or

relationships made as a board member will be used for personal or professional gain

outside the Petfinder Foundation.

### 03. CEO, executive director, top management comp (Part VI, line 15a)

The Petfinder Foundation's Board of Directors has conducted research to determine if the

compensation of the Executive Director of the Foundation is within widely accepted

industry standards. The conclusion of the Board is that the Executive Director's

compensation is not only well within widely accepted industry standards, but also slightly

below industry standards for a Foundation the size of Petfinder Foundation.

Schedule O (Form 990) 2022	Page <b>2</b>			
Name of the organization	Employer identification number			
Petfinder Foundation 87-0694641				

#### 04. Form 990 availability to public (Part VI, line 18)

The 990 is available to the public via our website as well as uploaded to the various

charity monitoring wesites like Charity Navigator and Guidestar.org. All documents are

available upon request.

#### 05. Governing documents, etc, available to public (Part VI, line 19)

Financial statements are available to the public via our website as well as uploaded to

the various charity monitoring wesites like Charity Navigator and Guidestar.org. All

documents are available upon request.

### Part III Line 4a: Statement of Program Accomplishments

**Quality of Life programs** – The Petfinder Foundation believes that by helping to improve the quality of life for pets while they are in shelters or with a rescue group, they will be happier, healthier and more adoptable. Grants in this category include enrichment products, training, pet food, vaccines, sheltering, and general operating grants.

*Orvis Animal Care Grants:* Thanks to a generous matching donation campaign from the Orvis Company the Petfinder Foundation was able to provide general animal care grants to help support shelter and rescue group's dog adoption efforts in a positive way. In 2022 we celebrated our 10<sup>th</sup> year and \$1 million donated in partnership with Orvis.

Kong Dog Enrichment Grants: The Petfinder Foundation is working with KONG to provide enrichment toys and products to shelters and adopters across the country. The Kong Company joins the Petfinder Foundation in the belief that by providing enrichment toys to shelter pets, you stimulate their mind, making them more adoptable. In 20212we sent 1,200 KONG toys to 60 adoption organizations.

*Dog Short-Term Foster/Fieldtrip Grants*: Getting dogs out of shelters and into a real-world environment is beneficial to the dogs and their overall mental and physical health. In addition to being good for the dog's health and well-being these short-term fostering programs valuable information on how they are in real life settings which helps get them adopted faster. The Dog Field Trip grant is used to provide funding to purchase needed supplies for a shelters short-term foster/dog field-trip program, including but not limited to: collars, leashes, harnesses, gentle leaders, collapsible or portable water/food bowls, potty bags, "Adopt Me" vests, etc. Grant recipients are required to have completed the Maddie's Fund Field Trip and Sleepover Foster Apprenticeship online course or 3- to 5-day hands-on training to be eligible for this grant. In 2021 we awarded 15 shelters grants to purchase necessary supplies to help support their fieldtrip programs.

*Cat Enrichment Grants:* Every adoptable cat deserves enrichment to stay happy and healthy while waiting for a new home. Grant funds from this program are used to provide enrichment for cats, which can include indoor entertainment using products and objects, allowing cats to enjoy the outdoors safely or human interactive cat-enrichment activities. In 2022 we awarded \$30,000 in grants to 44 adoption organizations to help their cats.

*Emergency Medical Grants:* The Petfinder Foundation Emergency Medical grant program is to assist Petfinder members who are caring for a pet that needs special veterinary care in order to become adoptable. Grants from this program can be used to cover expenses that fall outside of normal day to day vet services like spay/neuter, vaccines or routine exams, such as emergency surgery, dental work, etc. for one single pet. In 20212we awarded \$30,000 in grants to 42 organizations to help pets in need of emergency veterinary care.

*Play Yard Renovation Grants:* Play Yard Renovation Grants will be given to shelters that have completed or are scheduled to complete play-group training seminars conducted by <u>Dogs Playing for Life</u>. Grant funds must be used to construct or improve play yards to bring them into compliance with DPFL's recommendations. This grant program is part of our commitment to enhancing shelter dogs' quality of life by allowing them to engage in natural social behaviors.

*Play Group Training Grants*: Play Group Training Grants are awarded to shelters to cover the cost of attending a Mentorship program conducted by Dogs Playing for Life. DPFL Mentorship programs help teach shelter personnel and volunteers DPFL methods for conducting safe and productive dog play groups. The program also helps attendees advance their skills as handlers and trainers, with a better understanding of canine behavior so that they can enhance quality of life for the animals as well as save more lives. Grant funds MUST be used to cover the tuition cost of attending a Dogs Playing for Life Mentorship session. In 2022 we awarded \$10,000 in grant scholarships to help shelters receive training on effectively and safely running play groups.

*P.L.A.Y. Pet Bed Grants*: The Petfinder Foundation has partnered with P.L.A.Y. Pet Lifestyle and You through the Warm Bellies Initiative to give luxury beds to shelter pets. P.L.A.Y. joins us in the belief that every pet deserves a warm and cozy place to sleep. To that end, in 2021 we awarded 360 beds to 34 adoption organizations.

Senior Pet Grants: Senior Pet grants are intended to help facilitate the adoption of senior pets in the care of Petfinder-member shelters and rescue groups. Grants of up to \$1,000 may be used to promote the adoption of a specific pet by funding one or more of the following: The dog's adoption fee; transportation to an approved adopter, and/or necessary medication for the duration of the dog's lifetime. In 2022 we awarded 20 adoption organizations funds to help their senior pets find new homes.

*Bar Dog Operation Grants:* For the love of dogs and all they bring to our lives, Bar Dog wines has committed to supporting rescue shelters across North America. Through our partnership, this grant program will support animal adoption groups and their day-to-day operations. In 2022 we awarded \$26,000 to 48 adoption organizations helping over 4,000 pets.

**Disaster relief program** – The Petfinder Foundation is committed to assisting animal adoption organizations with Disaster relief and recovery. Funds are used to offer animal-related resources and assistance during and after significant natural or man-made disasters including extreme weather events. The Petfinder Foundation awards grants to provide emergency equipment or supplies, physical improvements to the animal shelters and property, animal transport and housing equipment allocated for use in the event of a disaster, file and records management systems, and training for staff and/or volunteers who are critical responders for the organization during an emergency. In 2022 we awarded grants to 10 adoption organizations impacted by natural disasters.

**Other programs** – The Foundation works with its corporate partners and funders to offer needed in-kind supplies or educational tools to Petfinder.com members, as well as grants in the forms of providing assistance for daily operations and care of pets and promoting adoption and transportation needs. Additional grants awarded are:

*Sponsor A Pet*: The Sponsor A Pet program encourages Petfinder.com visitors to help homeless pets by sponsoring the cost of their shelter and care until they find a forever home. When someone has found a homeless pet that has touched their heart but they are unable to provide that pet their forever home this program gives them a way to help. Donations are collected by the Petfinder Foundation and kept for the designated shelter. Once a quarter, these donations are distributed to the shelter, less 10 percent

for administrative fees. In 2021 we disbursed over \$415,000 in funds raised through this program to Petfinder member adoption organizations.

*Kia Adoption Grants:* The 2021 Capital Improvement Grant program provided funds to repair or improve existing shelter facilities in ways that would increase adoptable pets' quality of life and adoption rates. Example of projects funded were repairing or installing HVAC systems to ensure comfortable temperatures for sheltered animals, setting up a meet and greet room for adopters and pets, purchasing materials to cover outdoor kennels to protect dogs from the elements, and more. Through this program we granted out \$200,000 and were able to help 19 shelters make much needed facility repairs or upgrades.

*REDI Training and Implementation Grants:* The REDI Training grant was created to help animal-adoption organizations recognize and overcome biases and barriers that can prevent people of color, low-income individuals, and senior citizens from adopting. When everyone who can care for a pet is able to adopt, regardless of their age, race, ethnicity, or income, more pets will find loving homes. Through training and best practices, both shelters and rescue groups can make their adoption processes more inclusive and, as a result, save more pets. In partnership with Companions and Animals for Reform and Equity (CARE), we were proud to provide Petfinder members with access to an online Racial Equity, Diversity, and Inclusion (REDI) training program specifically created for animal shelters and rescue groups and hosted by Maddie's University. This grant covered the \$1,500 cost per person to take the CARE REDI: Bronze Level course. We were able to grant out 250 individual trainings in 2022. Additionally, once all of a groups attendees completed the course and received their certifications, their organization was then eligible for additional REDI Implementation grants to put what they learned into action! These additional grants could earn adoption groups up to 10,000 in operational funds just for taking simple steps to make their adoptions more inclusive.