

**\*\* PUBLIC DISCLOSURE COPY \*\***

**Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

Form **990**

Department of the Treasury  
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)  
Do not enter social security numbers on this form as it may be made public.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

**2023**  
Open to Public  
Inspection

**A** For the **2023** calendar year, or tax year beginning **JAN 30, 2023** and ending **JAN 28, 2024**

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>PETSMART CHARITIES, INC.</b>		<b>D</b> Employer identification number <b>93-1140967</b>
	Doing business as		<b>E</b> Telephone number <b>800-423-7387</b>
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	<b>19601 NORTH 27TH AVENUE</b>		
	City or town, state or province, country, and ZIP or foreign postal code <b>PHOENIX, AZ 85027</b>		<b>G</b> Gross receipts \$ <b>76,395,293.</b>
<b>F</b> Name and address of principal officer: <b>AIMEE GILBREATH</b> <b>SAME AS C ABOVE</b>		<b>H(a)</b> Is this a group return for subordinates? ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions <b>H(c)</b> Group exemption number	
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527 <b>J</b> Website: <b>WWW.PETSMARTCHARITIES.ORG</b>			
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other			<b>L</b> Year of formation: <b>1994</b>
<b>M</b> State of legal domicile: <b>AZ</b>			

**Part I Summary**

Activities & Governance	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>PETSMART CHARITIES, INC. (PCI)</b> <b>IS A NONPROFIT ANIMAL WELFARE ORGANIZATION THAT ENVISIONS A WORLD</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>11</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>8</b>
	<b>5</b> Total number of individuals employed in calendar year 2023 (Part V, line 2a)	<b>5</b>	<b>0</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>11</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0.</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	<b>0.</b>	
Revenue	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b> 59,943,484.	<b>Current Year</b> 55,060,070.
	<b>9</b> Program service revenue (Part VIII, line 2g)	95,000.	95,000.
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-206,732.	1,517,956.
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4,916,934.	5,211,683.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	64,748,686.	61,884,709.
	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	50,023,499.	44,241,185.
Expenses	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25)	1,755,949.	
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	17,289,628.	16,151,596.
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	67,313,127.	60,392,781.
Net Assets or Fund Balances	<b>19</b> Revenue less expenses. Subtract line 18 from line 12	-2,564,441.	1,491,928.
	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b> 76,738,672.	<b>End of Year</b> 81,244,570.
	<b>21</b> Total liabilities (Part X, line 26)	6,605,386.	3,728,741.
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	70,133,286.	77,515,829.

**Part II Signature Block**

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

<b>Sign Here</b>	Signed by: <u>AIMEE GILBREATH</u> Signature of officer AIMEE GILBREATH, PRESIDENT Type or print name and title		Date <b>8/6/2024</b>
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>JACQUELINE ECKMAN</b>	Preparer's signature <b>JACQUELINE ECKMAN</b>	Date <b>08/06/24</b>
	Check <input type="checkbox"/> if self-employed PTIN <b>P01300648</b>		Firm's name <b>CLIFTONLARSONALLEN LLP</b>
	Firm's address <b>20 EAST THOMAS ROAD, SUITE 2300</b> <b>PHOENIX, AZ 85012</b>		Firm's EIN <b>41-0746749</b>
			Phone no. (602) 266-2248

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

Part III Statement of Program Service Accomplishments

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

1

Briefly describe the organization's mission:  
PETSMART CHARITIES ENVISIONS A WORLD WHERE COMMUNITIES UNITE IN  
SUPPORT OF PETS TOGETHER WITH THEIR FAMILIES. OUR MISSION IS TO MAKE  
THE WORLD A BETTER PLACE BY INVESTING IN COMMUNITY PARTNERS THAT  
ADVOCATE AND CARE FOR THE WELL-BEING OF PETS AND ALL WHO LOVE THEM.

2

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

3

Did the organization cease conducting, or make significant changes in how it conducts, any program 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 by expenses.  
Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and  
revenue, if any, for each program service reported.

4a

(Code: ) (Expenses \$ 26,062,845. including grants of \$ 18,562,814. ) (Revenue \$ 61,606. )  
CONNECTING PEOPLE & PETS BY CREATING FAMILIES THROUGH ADOPTION  
PROGRAMS. WHETHER IT'S THROUGH OUR IN-STORE ADOPTION CENTERS, NATIONAL  
ADOPTION WEEK, OR OUR ONLINE SEARCH TOOL, WE HELP PETS IN NEED FIND  
LOVING FAMILIES TO CALL THEIR OWN. IN 2023, WE PARTNERED WITH OVER  
2,000 ANIMAL WELFARE GROUPS ACROSS THE UNITED STATES TO HELP 370,000  
PETS FIND HOMES THROUGH OUR IN-STORE ADOPTION PROGRAM IN OVER 1,500  
PETSMART STORES. WE ALSO CELEBRATED OUR 10 MILLIONTH ADOPTION IN 2022!  
WE ALSO SUPPORTED THE TRANSPORT OF 48,000 PETS TO AREAS WHERE THEY HAD  
A BETTER CHANCE OF BEING ADOPTED.

4b

(Code: ) (Expenses \$ 31,119,688. including grants of \$ 25,678,371. ) (Revenue \$ 33,394. )  
SUPPORTING PETS & PEOPLE BY KEEPING FAMILIES TOGETHER: WE SUPPORT PETS  
AND THEIR FAMILIES THROUGH PROGRAMS THAT WORK TO MAKE VETERINARY CARE  
MORE ACCESSIBLE, HELP BATTLE FOOD INSECURITY, AND PROVIDE DISASTER  
RESPONSE IN TIMES OF NEED. IN 2023, WE PARTNERED WITH HUMAN SERVICES  
AGENCIES TO DONATE OVER \$10M IN PET FOOD (39 MILLION MEALS) TO SUPPORT  
THOSE FACING PET FOOD INSECURITY. WE INVESTED \$13.6M IN GRANTS TO FUND  
PROGRAMS THAT SUPPORT ACCESSIBLE VETERINARY MEDICINE MODELS THAT BRING  
MORE AFFORDABLE VET CARE INTO COMMUNITIES. WE ALSO GRANTED OVER \$750K  
TO SUPPORT DISASTER RESPONSE DURING 11 MAJOR NATURAL DISASTERS TO HELP  
AN ESTIMATED 35,000 PETS STAY WITH THEIR FAMILIES DURING TIMES OF  
CRISIS.

4c

(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d

Other program services (Describe on Schedule O.)  
(Expenses \$ including grants of \$ ) (Revenue \$ )

4e

Total program service expenses 57,182,533.

Form 990 (2023)

332002 12-21-23

3

08470806 131839 A223876

2023.04010 PETSMART CHARITIES, INC. A2238761

**Part IV Checklist of Required Schedules**

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

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....	<b>22</b>	X
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .....	<b>23</b>	X
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....	<b>24a</b>	X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....	<b>24b</b>	
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....	<b>24c</b>	
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....	<b>24d</b>	
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....	<b>25a</b>	X
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> .....	<b>25b</b>	X
<b>26</b> Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> .....	<b>26</b>	X
<b>27</b> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....	<b>27</b>	X
<b>28</b> 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):		
<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28a</b>	X
<b>b</b> A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28b</b>	X
<b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28c</b>	X
<b>29</b> Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i> .....	<b>29</b>	X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....	<b>30</b>	X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....	<b>31</b>	X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....	<b>32</b>	X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....	<b>33</b>	X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....	<b>34</b>	X
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....	<b>35a</b>	X
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....	<b>35b</b>	X
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....	<b>36</b>	X
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....	<b>37</b>	X
<b>38</b> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O .....	<b>38</b>	X

**Part V Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
<b>1a</b> Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable .....	<b>1a</b>	19
<b>b</b> Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable .....	<b>1b</b>	0
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? .....	<b>1c</b>	X

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

	Yes	No
<b>2a</b> 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 <span style="float:right">2a 0</span>		
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	<b>2b</b>	
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>	X
<b>b</b> If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>	<b>3b</b>	
<b>4a</b> 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)?	<b>4a</b>	X
<b>b</b> If "Yes," enter the name of the foreign country <u>CANADA</u> See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>	X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>	X
<b>c</b> If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>	
<b>6a</b> 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?	<b>6a</b>	X
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>	
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b> 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?	<b>7a</b>	X
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7b</b>	
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7c</b>	X
<b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year <span style="float:right">7d</span>		
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7e</b>	X
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7f</b>	X
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7g</b>	
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>7h</b>	
<b>8 Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	<b>8</b>	
<b>9 Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b> Did the sponsoring organization make any taxable distributions under section 4966?	<b>9a</b>	
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	<b>9b</b>	
<b>10 Section 501(c)(7) organizations.</b> Enter:		
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12 <span style="float:right">10a</span>		
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities <span style="float:right">10b</span>		
<b>11 Section 501(c)(12) organizations.</b> Enter:		
<b>a</b> Gross income from members or shareholders <span style="float:right">11a</span>		
<b>b</b> Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) <span style="float:right">11b</span>		
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>	
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year <span style="float:right">12b</span>		
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b> Is the organization licensed to issue qualified health plans in more than one state? <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	<b>13a</b>	
<b>b</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 <span style="float:right">13b</span>		
<b>c</b> Enter the amount of reserves on hand <span style="float:right">13c</span>		
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>	X
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	<b>14b</b>	
<b>15</b> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	<b>15</b>	X
<b>16</b> Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	<b>16</b>	X
<b>17 Section 501(c)(21) organizations.</b> Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	<b>17</b>	

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

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year	11		
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>b</b> Enter the number of voting members included on line 1a, above, who are independent	8		
<b>2</b> 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	
<b>3</b> 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	X	
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
<b>6</b> Did the organization have members or stockholders?	6		X
<b>7a</b> 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>b</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
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
<b>a</b> The governing body?	8a	X	
<b>b</b> Each committee with authority to act on behalf of the governing body?	8b		X
<b>9</b> Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X

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

	Yes	No
<b>10a</b> Did the organization have local chapters, branches, or affiliates?	10a	X
<b>b</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	
<b>11a</b> 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>b</b> Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b> Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X
<b>b</b> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
<b>c</b> Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c	X
<b>13</b> Did the organization have a written whistleblower policy?	13	X
<b>14</b> Did the organization have a written document retention and destruction policy?	14	X
<b>15</b> Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
<b>a</b> The organization's CEO, Executive Director, or top management official	15a	X
<b>b</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.		
<b>16a</b> 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>b</b> If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

**Section C. Disclosure**

**17** List the states with which a copy of this Form 990 is required to be filed AL, AK, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY

**18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

**19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

**20** State the name, address, and telephone number of the person who possesses the organization's books and records  
STEPHANIE JENSEN - 800-423-7387  
19601 NORTH 27TH AVENUE, PHOENIX, AZ 85027

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

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

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

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's **current** key employees, if any. See 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 the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) J.K. SYMANCYK CHAIR	2.00	X						0.	0.	0.
(2) NEAL LITVACK VICE-CHAIR	2.00	X						0.	0.	0.
(3) BEN JACOBS DIRECTOR	2.00	X						0.	0.	0.
(4) CHERISE ORDLOCK DIRECTOR	2.00	X						0.	0.	0.
(5) DAWN WILLOUGHBY DIRECTOR	2.00	X						0.	0.	0.
(6) DEBO MUKHERJEE DIRECTOR	2.00	X						0.	0.	0.
(7) ELLIOTT FRANCIS DIRECTOR	2.00	X						0.	0.	0.
(8) LISA ROJAS BACUS DIRECTOR	2.00	X						0.	0.	0.
(9) MANJIT SINGH DIRECTOR	2.00	X						0.	0.	0.
(10) MARK STETTER DIRECTOR	2.00	X						0.	0.	0.
(11) MIKE SCHULTHEIS DIRECTOR	2.00	X						0.	0.	0.
(12) AIMEE GILBREATH PRESIDENT	40.00			X				0.	0.	0.
(13) STEPHANIE JENSEN TREASURER	40.00			X				0.	0.	0.
(14) JANET HENRY SECRETARY	40.00			X				0.	0.	0.





**Part VIII Statement of Revenue**

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns .....	<b>1a</b>	121,187.				
	<b>b</b> Membership dues .....	<b>1b</b>					
	<b>c</b> Fundraising events .....	<b>1c</b>					
	<b>d</b> Related organizations .....	<b>1d</b>					
	<b>e</b> Government grants (contributions) .....	<b>1e</b>					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above ...	<b>1f</b>	54,938,883.				
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$ 8,331,848.				
	<b>h Total.</b> Add lines 1a-1f .....						
<b>Program Service Revenue</b>	<b>2 a</b> MANAGEMENT FEE INCOME	<b>Business Code</b>	900099	95,000.	95,000.		
	<b>b</b> .....						
	<b>c</b> .....						
	<b>d</b> .....						
	<b>e</b> .....						
	<b>f</b> All other program service revenue .....						
	<b>g Total.</b> Add lines 2a-2f .....				95,000.		
	<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....			1,286,597.		
<b>4</b> Income from investment of tax-exempt bond proceeds .....							
<b>5</b> Royalties .....				5,211,683.			5,211,683.
<b>6 a</b> Gross rents .....		<b>6a</b>	(i) Real (ii) Personal				
<b>b</b> Less: rental expenses ...		<b>6b</b>					
<b>c</b> Rental income or (loss) .....		<b>6c</b>					
<b>d</b> Net rental income or (loss) .....							
<b>7 a</b> Gross amount from sales of assets other than inventory .....		<b>7a</b>	(i) Securities (ii) Other				
<b>b</b> Less: cost or other basis and sales expenses .....		<b>7b</b>	14,741,943.				
<b>c</b> Gain or (loss) .....		<b>7c</b>	14,510,584.				
<b>d</b> Net gain or (loss) .....		231,359.					
<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 .....		<b>8a</b>					
<b>b</b> Less: direct expenses .....		<b>8b</b>					
<b>c</b> Net income or (loss) from fundraising events .....							
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....		<b>9a</b>					
<b>b</b> Less: direct expenses .....	<b>9b</b>						
<b>c</b> Net income or (loss) from gaming activities .....							
<b>10 a</b> Gross sales of inventory, less returns and allowances .....	<b>10a</b>						
<b>b</b> Less: cost of goods sold .....	<b>10b</b>						
<b>c</b> Net income or (loss) from sales of inventory .....							
<b>Miscellaneous Revenue</b>	<b>11 a</b> .....	<b>Business Code</b>					
	<b>b</b> .....						
	<b>c</b> .....						
	<b>d</b> All other revenue .....						
	<b>e Total.</b> Add lines 11a-11d .....						
	<b>12 Total revenue.</b> See instructions .....				61,884,709.	95,000.	0.

Form 990 (2023)

PETSMART CHARITIES, INC.

93-1140967

Page **10**

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	44,241,185.	44,241,185.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22 .....				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 .....				
<b>4</b> Benefits paid to or for members .....				
<b>5</b> Compensation of current officers, directors, trustees, and key employees .....				
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....				
<b>7</b> Other salaries and wages .....				
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) .....				
<b>9</b> Other employee benefits .....				
<b>10</b> Payroll taxes .....				
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management .....	5,863,431.	5,305,907.	339,457.	218,067.
<b>b</b> Legal .....	9,095.		9,095.	
<b>c</b> Accounting .....	47,548.		47,548.	
<b>d</b> Lobbying .....				
<b>e</b> Professional fundraising services. See Part IV, line 17 .....				
<b>f</b> Investment management fees .....	213,124.		213,124.	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	1,489,264.	1,366,858.	105,133.	17,273.
<b>12</b> Advertising and promotion .....	2,116,199.	945,886.	458,788.	711,525.
<b>13</b> Office expenses .....	1,232,345.	979,501.	109,943.	142,901.
<b>14</b> Information technology .....	1,172,135.	1,059,596.	56,463.	56,076.
<b>15</b> Royalties .....				
<b>16</b> Occupancy .....				
<b>17</b> Travel .....	302,614.	256,792.	36,439.	9,383.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
<b>19</b> Conferences, conventions, and meetings .....	182,469.	127,344.	52,031.	3,094.
<b>20</b> Interest .....				
<b>21</b> Payments to affiliates .....				
<b>22</b> Depreciation, depletion, and amortization .....	163,945.	137,667.	26,278.	
<b>23</b> Insurance .....				
<b>24</b> Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
<b>a</b> DONATED PET SUPPLIES	2,697,012.	2,697,012.		
<b>b</b> BANK FEES	597,630.			597,630.
<b>c</b> EQUIPMENT RENTAL	64,785.	64,785.		
<b>d</b> _____				
<b>e</b> All other expenses _____				
<b>25</b> Total functional expenses. Add lines 1 through 24e	60,392,781.	57,182,533.	1,454,299.	1,755,949.
<b>26</b> Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	18,899,800.	<b>1</b>	21,532,448.
	<b>2</b> Savings and temporary cash investments .....	90,512.	<b>2</b>	73,958.
	<b>3</b> Pledges and grants receivable, net .....		<b>3</b>	
	<b>4</b> Accounts receivable, net .....	10,332,328.	<b>4</b>	7,348,714.
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	273,739.	<b>9</b>	273,644.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	10a 8,059,888.		
	<b>b</b> Less: accumulated depreciation .....	10b 7,668,664.		
	<b>11</b> Investments - publicly traded securities .....	407,658.	<b>10c</b>	391,224.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	46,734,635.	<b>11</b>	51,624,582.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>12</b>	
	<b>14</b> Intangible assets .....		<b>13</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....		<b>14</b>	
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	76,738,672.	<b>15</b>		
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	76,738,672.	<b>16</b>	81,244,570.
	<b>18</b> Grants payable .....	5,743,386.	<b>17</b>	3,171,741.
	<b>19</b> Deferred revenue .....	862,000.	<b>18</b>	557,000.
	<b>20</b> Tax-exempt bond liabilities .....		<b>19</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>20</b>	
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>21</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>22</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>23</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....		<b>24</b>	
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 .....		<b>25</b>	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>	6,605,386.	<b>26</b>	3,728,741.
	<b>27</b> Net assets without donor restrictions .....			
	<b>28</b> Net assets with donor restrictions .....	70,133,286.	<b>27</b>	76,221,335.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>		<b>28</b>	1,294,494.
	<b>29</b> Capital stock or trust principal, or current funds .....			
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>29</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>30</b>	
	<b>32</b> Total net assets or fund balances .....		<b>31</b>	
	<b>33</b> Total liabilities and net assets/fund balances .....	70,133,286.	<b>32</b>	77,515,829.
	76,738,672.	<b>33</b>	81,244,570.	

Form **990** (2023)

Part XI

Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	61,884,709.
2	Total expenses (must equal Part IX, column (A), line 25)	2	60,392,781.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,491,928.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	70,133,286.
5	Net unrealized gains (losses) on investments	5	3,472,606.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	2,418,009.
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	77,515,829.

Part XII

Financial Statements and Reporting

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

X

		Yes	No
1	Accounting method used to prepare the Form 990: <div>Cash</div> <div>X</div> Accrual <div>Other</div>		
	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?		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:		
	<div>Separate basis</div> <div>Consolidated basis</div> <div>Both consolidated and separate basis</div>		
b	Were the organization's financial statements audited by an independent accountant?	X	
	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:		
	<div>X</div> Separate basis <div>Consolidated basis</div> <div>Both consolidated and separate basis</div>		
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
	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?		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

Form 990 (2023)

SCHEDULE A  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Public Charity Status and Public Support  
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
Attach to Form 990 or Form 990-EZ.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public  
Inspection

Name of the organization	Employer identification number
PETSMART CHARITIES, INC.	93-1140967

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

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

1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)

3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: \_\_\_\_\_

5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8

☐

A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9

☐

An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: \_\_\_\_\_

10

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

11

☐

An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

12

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a

☐

**Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b

☐

**Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c

☐

**Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d

☐

**Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f

Enter the number of supported organizations

g

Provide the following information about the supported organization(s).

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

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	56,972,172.	59,396,223.	65,207,466.	59,943,482.	55,060,070.	296,579,413.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	56,972,172.	59,396,223.	65,207,466.	59,943,482.	55,060,070.	296,579,413.
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) .....						34,681,143.
<b>6 Public support.</b> Subtract line 5 from line 4.						261,898,270.

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
<b>7</b> Amounts from line 4 .....	56,972,172.	59,396,223.	65,207,466.	59,943,482.	55,060,070.	296,579,413.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	2,734,718.	2,740,817.	4,946,966.	6,697,980.	6,498,280.	23,618,761.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>11 Total support.</b> Add lines 7 through 10						320,198,174.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	475,000.

**13 First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)) .....	<b>14</b>	81.79 %
<b>15</b> Public support percentage from 2022 Schedule A, Part II, line 14 .....	<b>15</b>	83.91 %

**16a 33 1/3% support test - 2023.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☒

**b 33 1/3% support test - 2022.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

**17a 10% -facts-and-circumstances test - 2023.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐

**b 10% -facts-and-circumstances test - 2022.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐

**18 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ☐

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> 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 .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</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 .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2022 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2023</b> (line 10c, column (f), divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from <b>2022</b> Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2023.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

**b 33 1/3% support tests - 2022.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

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

**Part IV Supporting Organizations**

(Complete only if you checked a box 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**

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



**Part IV** Supporting Organizations *(continued)*

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> 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?		
<b>11a</b>		
<b>b</b> A family member of a person described on line 11a above?		
<b>11b</b>		
<b>c</b> A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

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

**Section C. Type II Supporting Organizations**

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

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?		
<b>1</b>		
<b>2</b> 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>		
<b>2</b>		
<b>3</b> By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

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

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

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

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990) 2023

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

Section D - Distributions		Current Year
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	<b>1</b>	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	<b>2</b>	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	<b>3</b>	
<b>4</b> Amounts paid to acquire exempt-use assets	<b>4</b>	
<b>5</b> Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i> )	<b>5</b>	
<b>6</b> Other distributions ( <i>describe in Part VI</i> ). See instructions.	<b>6</b>	
<b>7 Total annual distributions.</b> Add lines 1 through 6.	<b>7</b>	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in Part VI</i> ). See instructions.	<b>8</b>	
<b>9</b> Distributable amount for 2023 from Section C, line 6	<b>9</b>	
<b>10</b> Line 8 amount divided by line 9 amount	<b>10</b>	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
<b>1</b> Distributable amount for 2023 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2023 (reasonable cause required - <i>explain in Part VI</i> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2023			
<b>a</b> From 2018			
<b>b</b> From 2019			
<b>c</b> From 2020			
<b>d</b> From 2021			
<b>e</b> From 2022			
<b>f Total</b> of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2023 distributable amount			
<b>i</b> Carryover from 2018 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
<b>4</b> Distributions for 2023 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2023 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from line 4.			
<b>5</b> Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>6</b> Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>7 Excess distributions carryover to 2024.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2019			
<b>b</b> Excess from 2020			
<b>c</b> Excess from 2021			
<b>d</b> Excess from 2022			
<b>e</b> Excess from 2023			

Schedule A (Form 990) 2023



Schedule B  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

2023

Name of the organization	Employer identification number
PETSMART CHARITIES, INC.	93-1140967

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	<input checked="" type="checkbox"/> 501(c)( 3 ) (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 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).

Name of organization	Employer identification number
PETSMART CHARITIES, INC.	93-1140967

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 7,753,147.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization	Employer identification number
PETSMART CHARITIES, INC.	93-1140967

Part III

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

Use duplicate copies of Part III if additional space is needed.

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



SCHEDULE C  
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2023

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527  
Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

If the organization answered "Yes" on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then:

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then:

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization	Employer identification number
PETSMART CHARITIES, INC.	93-1140967

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political campaign activity expenditures ..... \$ 38,608.
- 3 Volunteer hours for political campaign activities ..... 12.

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ..... \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ..... \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a Was a correction made? ☐ Yes ☐ No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... \$
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ..... \$
- 4 Did the filing organization file Form 1120-POL for this year? ☐ Yes ☐ No
- 5 Enter the names, addresses, and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

**Part II-A** Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
<b>1 a</b> Total lobbying expenditures to influence public opinion (grassroots lobbying) .....			
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .....			
<b>c</b> Total lobbying expenditures (add lines 1a and 1b) .....			
<b>d</b> Other exempt purpose expenditures .....			
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) .....			
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.			
<b>If the amount on line 1e, column (a) or (b) is:</b>	<b>The lobbying nontaxable amount is:</b>		
not over \$500,000,	20% of the amount on line 1e.		
over \$500,000 but not over \$1,000,000,	\$100,000 plus 15% of the excess over \$500,000.		
over \$1,000,000 but not over \$1,500,000,	\$175,000 plus 10% of the excess over \$1,000,000.		
over \$1,500,000 but not over \$17,000,000,	\$225,000 plus 5% of the excess over \$1,500,000.		
over \$17,000,000,	\$1,000,000.		
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f) .....			
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0- .....			
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0- .....			
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? .....			

☐ Yes ☐ No

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
<b>2 a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

Schedule C (Form 990) 2023

**Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
<b>a</b> Volunteers? .....			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ...			
<b>c</b> Media advertisements? .....			
<b>d</b> Mailings to members, legislators, or the public? .....			
<b>e</b> Publications, or published or broadcast statements? .....			
<b>f</b> Grants to other organizations for lobbying purposes? .....			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body? .....			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .....			
<b>i</b> Other activities? .....			
<b>j</b> Total. Add lines 1c through 1i .....			
<b>2a</b> Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? .....			
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912 .....			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .....			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? .....			

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members? .....	<b>1</b>	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less? .....	<b>2</b>	
<b>3</b> Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? .....	<b>3</b>	

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."**

<b>1</b> Dues, assessments and similar amounts from members .....	<b>1</b>	
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b> Current year .....	<b>2a</b>	
<b>b</b> Carryover from last year .....	<b>2b</b>	
<b>c</b> Total .....	<b>2c</b>	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .....	<b>3</b>	
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year? .....	<b>4</b>	
<b>5</b> Taxable amount of lobbying and political expenditures. See instructions .....	<b>5</b>	

**Part IV Supplemental Information**

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

PART I-A, LINE 1:

ADVOCACY WORK ON STATE OF ARIZONA LEGISLATION OF VETERINARIAN

TELEMEDICINE

**SCHEDULE D**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

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

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2023**

Open to Public  
Inspection

Name of the organization

PETSMART CHARITIES, INC.

Employer identification number

93-1140967

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

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

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (for example, recreation or education) ☐ Preservation of a historically important land area

☐ Protection of natural habitat ☐ Preservation of a certified historic structure

☐ Preservation of open space

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

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included on line 2a .....	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register .....	2d

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year .....

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

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

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

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

(i) Revenue included on Form 990, Part VIII, line 1 ..... \$ .....

(ii) Assets included in Form 990, Part X ..... \$ .....

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ..... \$ .....

b Assets included in Form 990, Part X ..... \$ .....

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

Schedule D (Form 990) 2023

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

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

- a** ☐ Public exhibition **d** ☐ Loan or exchange program  
**b** ☐ Scholarly research **e** ☐ Other \_\_\_\_\_  
**c** ☐ Preservation for future generations

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

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

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

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

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

	Amount
<b>1c</b> Beginning balance	
<b>1d</b> Additions during the year	
<b>1e</b> Distributions during the year	
<b>1f</b> Ending balance	

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

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

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

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

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

- a** Board designated or quasi-endowment \_\_\_\_\_ %  
**b** Permanent endowment \_\_\_\_\_ %  
**c** Term endowment \_\_\_\_\_ %

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

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

- (i)** Unrelated organizations? \_\_\_\_\_  
**(ii)** Related organizations? \_\_\_\_\_

**b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? \_\_\_\_\_

	Yes	No
<b>3a(i)</b>		
<b>3a(ii)</b>		
<b>3b</b>		

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

**Part VI Land, Buildings, and Equipment**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land				
<b>b</b> Buildings				
<b>c</b> Leasehold improvements		6,242,461.	6,143,975.	98,486.
<b>d</b> Equipment		1,597,918.	1,453,406.	144,512.
<b>e</b> Other		219,509.	71,283.	148,226.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				391,224.

**Part VII** Investments - Other Securities

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives .....		
(2) Closely held equity interests .....		
(3) Other .....		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))		

**Part VIII** Investments - Program Related.

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

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

**Part IX** Other Assets

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

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

**Part X** Other Liabilities

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

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

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ... ☒

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

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements .....	<b>1</b>	85,660,685.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains (losses) on investments .....	<b>2a</b>	3,472,606.
<b>b</b>	Donated services and use of facilities .....	<b>2b</b>	20,611,494.
<b>c</b>	Recoveries of prior year grants .....	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.) .....	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> .....	<b>2e</b>	24,084,100.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> .....	<b>3</b>	61,576,585.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b .....	<b>4a</b>	213,124.
<b>b</b>	Other (Describe in Part XIII.) .....	<b>4b</b>	95,000.
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> .....	<b>4c</b>	308,124.
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.) .....	<b>5</b>	61,884,709.

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

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

<b>1</b>	Total expenses and losses per audited financial statements .....	<b>1</b>	80,696,151.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities .....	<b>2a</b>	20,611,494.
<b>b</b>	Prior year adjustments .....	<b>2b</b>	
<b>c</b>	Other losses .....	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.) .....	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> .....	<b>2e</b>	20,611,494.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> .....	<b>3</b>	60,084,657.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b .....	<b>4a</b>	213,124.
<b>b</b>	Other (Describe in Part XIII.) .....	<b>4b</b>	95,000.
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> .....	<b>4c</b>	308,124.
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.) .....	<b>5</b>	60,392,781.

**Part XIII Supplemental Information**

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

PART X, LINE 2:

PETSMART CHARITIES HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICE

(IRS) AS A NONPROFIT CORPORATION AS DESCRIBED IN SECTION 501(C)(3) OF THE

INTERNAL REVENUE CODE (THE CODE) AND IS EXEMPT FROM FEDERAL AND STATE

INCOME TAXES. IN ADDITION, THE ORGANIZATION QUALIFIES FOR THE CHARITABLE

CONTRIBUTION DEDUCTION UNDER SECTION 170 OF THE CODE AND HAS BEEN

RECOGNIZED BY THE IRS AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION.

INCOME DETERMINED TO BE UNRELATED BUSINESS INCOME (UBI) WOULD BE TAXABLE.

THE ORGANIZATION EVALUATES ITS UNCERTAIN TAX POSITIONS, IF ANY, ON A

CONTINUAL BASIS THROUGH REVIEW OF ITS POLICIES AND PROCEDURES, REVIEW OF

ITS REGULAR TAX FILINGS, AND DISCUSSIONS WITH OUTSIDE EXPERTS. MANAGEMENT

Part XIII

Supplemental Information

(continued)

MUST ALSO ASSESS WHETHER UNCERTAIN TAX POSITIONS COULD RESULT IN THE  
RECOGNITION OF A LIABILITY FOR POSSIBLE INTEREST AND PENALTIES IF ANY. THE  
ORGANIZATION'S POLICY IS TO INCLUDE INTEREST AND PENALTIES RELATED TO  
UNCERTAIN TAX POSITIONS IN MANAGEMENT AND GENERAL EXPENSE. AS OF JANUARY  
28, 2024 AND JANUARY 29, 2023, THERE WERE NO UNCERTAIN TAX POSITIONS, AND  
THE ORGANIZATION DOES NOT ANTICIPATE A CHANGE IN ITS TAX POSITION IN THE  
12 MONTHS FOLLOWING JANUARY 28, 2024.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

CANADA MANAGEMENT FEE	95,000.
-----------------------	---------

PART XII, LINE 4B - OTHER ADJUSTMENTS:

CANADA MANAGEMENT FEE	95,000.
-----------------------	---------



**SCHEDULE I**  
**(Form 990)**Department of the Treasury  
Internal Revenue Service**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**

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

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2023****Open to Public  
Inspection**

Name of the organization

PETSMART CHARITIES, INC.

Employer identification number

93-1140967

**Part I** General Information on Grants and Assistance**1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .....☒ **Yes**☐ **No****2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**Part II** Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section (if applicable)	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of noncash assistance	<b>(h)</b> Purpose of grant or assistance
FEEDING AMERICA 161 N CLARK ST STE 700 CHICAGO, IL 60601-3389	01-1017264	501(C)3	901,012.	9,638,952.	FMV	PET FOOD	PET FOOD
GREATER GOOD CHARITIES 301 UNION ST UNIT 21308 SEATTLE, WA 98111-1614	20-4846675	501(C)3	135,000.	5,056,135.	FMV	SUPPLIES	PET SUPPLIES, TRANSPORT, DISASTER RESPONSE
EMANCIPET 7010 EASY WIND DR STE 260 AUSTIN, TX 78752-2423	74-2913624	501(C)3	1,463,367.	0.			ACCESS TO CARE
MEALS ON WHEELS AMERICA 1550 CRYSTAL DR STE 1004 ARLINGTON, VA 22202-4142	23-7447812	501(C)3	1,000,000.	0.			ACCESS TO CARE, PET FOOD INSECURITY
UNITED ANIMAL NATIONS 1419 21ST ST SACRAMENTO, CA 95811-5208	68-0124097	501(C)3	750,000.	0.			PRESERVING FAMILIES
ARIZONA HUMANE SOCIETY 1521 W DOBBINS RD PHOENIX, AZ 85041-8200	86-0135567	501(C)3	640,500.	0.			ACCESS TO CARE, ADOPTIONS

**2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..... 373.**3** Enter total number of other organizations listed in the line 1 table ..... 27.

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

Schedule I (Form 990) 2023

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COLORADO STATE UNIVERSITY 555 SOUTH HOWES, 6003 CAMPUS DELIVERY - FORT COLLINS, CO 80523-6003	84-6000545	GOVERNMENT	547,872.	0.			ACCESS TO CARE
SECOND CHANCE ANIMAL SERVICES INC 111 YOUNG RD E BROOKFIELD, MA 01515-1801	04-3490671	501(C)3	531,250.	0.			ACCESS TO CARE, ADOPTIONS
VIRGINIA BEACH SPCA 3040 HOLLAND RD VIRGINIA BCH, VA 23453-2610	54-6061532	501(C)3	502,000.	0.			ACCESS TO CARE, ADOPTIONS
PHILADELPHIA ANIMAL WELFARE SOCIETY - 100 N 2ND ST - PHILADELPHIA, PA 19106-1902	26-3862631	501(C)3	502,000.	0.			ACCESS TO CARE, ADOPTIONS
FIRST COAST NO MORE HOMELESS PETS INC - 6817 NORWOOD AVE - JACKSONVILLE, FL 32208-4481	01-0709158	501(C)3	500,000.	0.			ACCESS TO CARE
KALAMAZOO COUNTY HUMANE SOCIETY 2272 RIVER ST KALAMAZOO, MI 49048-9581	38-1474932	501(C)3	500,000.	0.			ACCESS TO CARE
IDAHO HUMANE SOCIETY INC 1300 S BIRD ST BOISE, ID 83709-1556	82-0212536	501(C)3	500,000.	0.			ACCESS TO CARE
PETS LOW COST SPAY AND NEUTER CLINIC - PO BOX 4669 - WICHITA FALLS, TX 76308-0669	68-0648159	501(C)3	500,000.	0.			ACCESS TO CARE
AMERICAN NATIONAL RED CROSS 431 18TH ST NW WASHINGTON, DC 20006-5310	53-0196605	501(C)3	500,000.	0.			DISASTER RESPONSE

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOW COST ANIMAL MEDICAL CENTER 4300 WASHINGTON AVE NEW ORLEANS, LA 70125-1843	47-2883629	501(C)3	500,000.	0.			ACCESS TO CARE
ANIMAL HUMANE SOCIETY 845 MEADOW LN N GOLDEN VALLEY, MN 55422-4831	41-0693842	501(C)3	500,000.	0.			ACCESS TO CARE
BRIDGE CLINIC INC 1 DECLARATION DR UNIT 2 BENSALEM, PA 19020-1839	46-1158857	501(C)3	500,000.	0.			ACCESS TO CARE
COMMUNITY ANIMAL MEDICINE PROJECT 957 N GAFFEY ST SAN PEDRO, CA 90731-1421	20-8542566	501(C)3	500,000.	0.			ACCESS TO CARE
COLORADO STATE UNIVERSITY FOUNDATION - 300 UNIV SERVICES CTR - FORT COLLINS, CO 80523-0001	23-7098397	501(C)3	401,489.	0.			ACCESS TO CARE
LUCKY DOG ANIMAL RESCUE 5159 LANGSTON BLVD ARLINGTON, VA 22207-1603	30-0559037	501(C)3	381,500.	0.			ACCESS TO CARE, ADOPTIONS, TRANSPORT
LAST CHANCE ANIMAL RESCUE INC 8500 BENSVILLE RD WALDORF, MD 20603-4053	52-2328626	501(C)3	355,000.	0.			ADOPTIONS, TRANSPORT
SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS OF NORTHERN NV - 4950 SPECTRUM BLVD - RENO, NV 89512-3902	88-0386601	501(C)3	345,000.	0.			ACCESS TO CARE, ADOPTIONS
HUMANE SOCIETY OF SOUTH MS 2615 25TH AVE GULFPORT, MS 39501-4832	64-6034439	501(C)3	279,500.	0.			ACCESS TO CARE, ADOPTIONS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOUISIANA SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS - 1700 MARDI GRAS BLVD - NEW ORLEANS, LA 70114-4621	72-0471368	501(C)3	272,000.	0.			ACCESS TO CARE, ADOPTIONS
TOLEDO AREA HUMANE SOCIETY 827 ILLINOIS AVE MAUMEE, OH 43537-1713	34-4429093	501(C)3	250,000.	0.			ACCESS TO CARE
AUSTIN PETS ALIVE 1156 W CESAR CHAVEZ ST AUSTIN, TX 78703-4603	74-2893360	501(C)3	247,440.	0.			ADOPTIONS, ACCESS TO CARE/ADOPTIONS, ADOPTIONS RESEARCH
COMPANIONS AND ANIMALS FOR REFORM AND EQUITY INC - 420 DUNKIRK RD - BALTIMORE, MD 21212-1815	85-0557068	501(C)3	230,000.	0.			CONFERENCES, RESEARCH
BISSELL PET FOUNDATION 2345 WALKER AVE GRAND RAPIDS, MI 49544-0000	38-3853264	501(C)3	210,000.	0.			TRANSPORT
OPERATION KINDNESS 3201 EARHART DR CARROLLTON, TX 75006-5025	75-1553350	501(C)3	208,750.	0.			ADOPTIONS, TRANSPORT
EAST BAY SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS - 8323 BALDWIN ST - OAKLAND, CA 94621-1925	94-1322202	501(C)3	200,000.	0.			ACCESS TO CARE
HOUSTON HUMANE SOCIETY 14700 ALMEDA RD HOUSTON, TX 77053-4930	74-1340341	501(C)3	200,000.	0.			ACCESS TO CARE
SAN FRANCISCO SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS - 201 ALABAMA ST - SAN FRANCISCO, CA 94103-4217	94-0836580	501(C)3	200,000.	0.			ACCESS TO CARE

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASSOCIATION FOR ANIMAL WELFARE ADVANCEMENT - 15508 W BELL ROAD STE 101613 - SURPRISE, AZ 85374-2432	41-1618666	501(C) (6)	200,000.	0.			CONFERENCES, ADOPTIONS RESEARCH
ANTI-CRUELTY SOCIETY 157 W GRAND AVE CHICAGO, IL 60654-7105	36-2179814	501(C)3	185,000.	0.			ADOPTIONS, TRANSPORT
BRANDYWINE VALLEY SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS - 1212 PHOENIXVILLE PIKE - WEST CHESTER, PA 19380-4045	23-1381030	501(C)3	183,535.	0.			ADOPTIONS, TRANSPORT, DISASTER RESPONSE
SHELTER ANIMALS COUNT - A NATIONAL DATABASE INITIATIVE - 931 MONROE DR NE STE A102 PMB 109 - ATLANTA, GA 30308-2183	46-2215168	501(C)3	172,250.	0.			ADOPTIONS RESEARCH
PETS ARE WONDERFUL SUPPORT INC 134 W 29TH ST RM 802 NEW YORK, NY 10001-0157	80-0233785	501(C)3	160,000.	0.			PRESERVING FAMILIES
HUMANE FORT WAYNE INC 4914 HANNA ST FORT WAYNE, IN 46806-3127	35-6042135	501(C)3	155,000.	0.			ACCESS TO CARE, ADOPTIONS
RESCUE PETS OF FLORIDA INC 4220 WATERVILLE AVE WESLEY CHAPEL, FL 33543-7003	46-2336168	501(C)3	153,000.	0.			ADOPTIONS
SPOKANIMAL C A R E 710 N NAPA ST SPOKANE, WA 99202-2867	91-1223929	501(C)3	152,000.	0.			ADOPTIONS
COMMUNITY SPAY NEUTER INITIATIVE PARTNERSHIP C-SNIP - 1675 VIEWPOND DR SE - KENTWOOD, MI 49508-0000	38-3463298	501(C)3	150,000.	0.			ACCESS TO CARE

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANIMAL WELFARE SOCIETY OF SOUTH FLORIDA INC - 2601 SW 27TH AVE - MIAMI, FL 33133-3004	59-1557645	501(C)3	150,000.	0.			ACCESS TO CARE
CAPITAL HUMANE SOCIETY 2320 PARK BLVD LINCOLN, NE 68502-3327	47-0376622	501(C)3	150,000.	0.			ACCESS TO CARE
FELINES INC 6379 N PAULINA ST CHICAGO, IL 60660-1125	36-2922975	501(C)3	150,000.	0.			TRANSPORT
HEARTS ALIVE VILLAGE 3250 N DECATUR BLVD LAS VEGAS, NV 89130-3207	46-3622732	501(C)3	137,500.	0.			ADOPTIONS
VIRGINIA POLYTECHNIC INSTITUTE & STATE UNIVERSITY - 300 TURNER ST. NW - BLACKSBURG, VA 24061	54-6001805	GOVERNMENT	136,120.	0.			ADOPTIONS RESEARCH
ANIMAL PROTECTIVE ASSOCIATION OF MISSOURI - 1705 S HANLEY RD - SAINT LOUIS, MO 63144-2909	43-0699783	501(C)3	135,750.	0.			ADOPTIONS, TRANSPORT
CITY OF FORT WORTH 200 TEXAS STREET FORT WORTH, TX 76102	75-6000528	GOVERNMENT	135,500.	0.			ADOPTIONS
PUERTO RICO ALLIANCE FOR COMPANION ANIMALS INC - 130 AVE WINSTON CHURCHILL - SAN JUAN, PR 00926-6018	66-0751044	501(C)3	130,500.	0.			ADOPTIONS, ADOPTIONS RESEARCH
RESCUED PETS MOVEMENT INC 2317 W 34TH ST HOUSTON, TX 77018-6006	46-3708327	501(C)3	125,000.	0.			TRANSPORT

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GATEWAY PET GUARDIANS 725 N 15TH ST E SAINT LOUIS, IL 62205-2557	26-0096240	501(C)3	125,000.	0.			ACCESS TO CARE
COMPANION ANIMAL ALLIANCE 100 NORTH ST STE 900 BATON ROUGE, LA 70802-5264	27-1204719	501(C)3	122,000.	0.			ACCESS TO CARE, ADOPTIONS
OPEN DOOR VETERINARY COLLECTIVE 23246 LONG JUDSON RD GRAND RAPIDS, OH 43522-9474	85-4259059	501(C)3	121,500.	0.			ACCESS TO CARE
UNIVERSITY OF ARIZONA FOUNDATION 1111 N CHERRY AVE TUCSON, AZ 85721-0111	86-6050388	501(C)3	120,000.	0.			ACCESS TO CARE
ERIE COUNTY SPCA 300 HARLEM RD WEST SENECA, NY 14224-1826	16-0425315	501(C)3	115,000.	0.			ACCESS TO CARE, ADOPTIONS, DISASTER RESPONSE
HUMANE SOCIETY OF NORTH TEXAS 1840 E LANCASTER AVE FORT WORTH, TX 76103-2124	75-1245911	501(C)3	114,000.	0.			ADOPTIONS
WASHINGTON HUMANE SOCIETY THE SOCIETY FOR THE PREVENTION OF - 71 OGLETHORPE ST NW - WASHINGTON, DC 20011-2346	53-0219724	501(C)3	110,000.	0.			ADOPTIONS, TRANSPORT
HAWAIIAN HUMANE SOCIETY 2700 WAIALAE AVE HONOLULU, HI 96826-1806	99-0073490	501(C)3	105,000.	0.			ACCESS TO CARE, DISASTER RESPONSE
ARROWS HEART PO BOX 7 ZIMMERMAN, MN 55398-0007	81-1983281	501(C)3	104,000.	0.			ADOPTIONS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COUNTY OF ONSLOW 234 NW CORRIDOR BLVD JACKSONVILLE, NC 28540-5309	56-6000326	GOVERNMENT	103,000.	0.			ADOPTIONS
HUMANE SOCIETY OF GREATER KANSAS CITY - 5445 PARALLEL PKWY - KANSAS CITY, KS 66104-3047	48-0581965	501(C)3	102,750.	0.			ACCESS TO CARE, ADOPTIONS
PALM VALLEY ANIMAL CENTER 2501 W TRENTON RD EDINBURG, TX 78539-5070	74-1819910	501(C)3	100,100.	0.			ADOPTIONS, ADOPTIONS RESEARCH
VETS IN VANS INC 4200 FRUITVALE AVE OAKLAND, CA 94602-2520	37-2029710	501(C)3	100,000.	0.			ACCESS TO CARE
CHESAPEAKE HUMANE SOCIETY INC 312 BATTLEFIELD BLVD N CHESAPEAKE, VA 23320-3916	23-7202196	501(C)3	100,000.	0.			ACCESS TO CARE
THE INNER PUP 465 LOWERLINE ST NEW ORLEANS, LA 70118-3760	47-1728816	501(C)3	100,000.	0.			ACCESS TO CARE
MYPITBULLISFAMILYCOM INC 1401 44TH AVE N MINNEAPOLIS, MN 55412-1343	47-2264053	501(C)3	100,000.	0.			ACCESS TO CARE
UNIVERSITY OF GEORGIA RESEARCH FOUNDATION INC - 324 BUSINESS SRVCS 456 E BROAD ST - ATHENS, GA 30602-0001	58-1353149	501(C)3	100,000.	0.			ACCESS TO CARE
ONE TAIL AT A TIME NFP 2144 N WOOD ST CHICAGO, IL 60614-3923	26-2125306	501(C)3	100,000.	0.			ACCESS TO CARE

Schedule I (Form 990)



**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE CLEVELAND ANIMAL PROTECTIVE LEAGUE - 1729 WILLEY AVE - CLEVELAND, OH 44113-4302	34-0714644	501(C)3	100,000.	0.			ACCESS TO CARE
HOUSING EQUALITY & ADVOCACY RESOURCE TEAM - 3612 11TH AVE - LOS ANGELES, CA 90018-3601	82-5280771	501(C)3	100,000.	0.			ADOPTIONS RESEARCH
HUMAN ANIMAL BOND RESEARCH FOUNDATION - 1310 L STREET NW SUITE 860 - WASHINGTON, DC 20005-0000	27-4159453	501(C)3	100,000.	0.			ACCESS TO CARE/ADOPTIONS
LOUIES LEGACY ANIMAL RESCUE 4725 BOOMER RD CINCINNATI, OH 45247-7938	27-0805279	501(C)3	100,000.	0.			ADOPTIONS
SAVED BY ZADE PO BOX 27 EATON RAPIDS, MI 48827-0000	82-2682927	501(C)3	95,000.	0.			ADOPTIONS
PET CENTRAL HELPS 360 WYLIE DR NORMAL, IL 61761-5500	81-4120839	501(C)3	93,000.	0.			ADOPTIONS
HUMANE SOCIETY OF CARROLL CO INC 2517 LITTLESTOWN PIKE WESTMINSTER, MD 21158-2230	52-0689149	501(C)3	90,000.	0.			ADOPTIONS
H A L O 3227 E BELL RD STE D151 PHOENIX, AZ 85032-2723	86-0832160	501(C)3	79,500.	0.			ADOPTIONS, ADOPTIONS RESEARCH
WILLIAMSON COUNTY 710 S MAIN ST GEORGETOWN, TX 78626-5703	74-6000978	GOVERNMENT	77,000.	0.			ADOPTIONS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTH SUBURBAN HUMANE SOCIETY 21800 CENTRAL AVE MATTESON, IL 60443-3043	23-7165004	501(C)3	76,250.	0.			ADOPTIONS
KITSAP HUMANE SOCIETY 9167 DICKEY RD NW SILVERDALE, WA 98383-8860	91-0728353	501(C)3	75,000.	0.			ACCESS TO CARE, ADOPTIONS
PETS IN NEED OF GREATER CINCINNATI INC - 520 W WYOMING AVE - CINCINNATI, OH 45215-4525	45-5512473	501(C)3	75,000.	0.			ACCESS TO CARE
COMPASSION WITHOUT BORDERS 1130 BUTLER AVE SANTA ROSA, CA 95407-8071	20-4698227	501(C)3	75,000.	0.			ACCESS TO CARE
PEARL RIVER COUNTY SPCA INC PO BOX 191 PICAYUNE, MS 39466-0191	64-0798887	501(C)3	75,000.	0.			ADOPTIONS
UNIVERSITY OF MINNESOTA FOUNDATION 200 OAK ST SE STE 500 MINNEAPOLIS, MN 55455-2010	41-6042488	501(C)3	74,922.	0.			ACCESS TO CARE
HUMANE SOCIETY OF YUMA INC 4050 S AVENUE 4 1/2 E YUMA, AZ 85365-7991	86-6053617	501(C)3	73,750.	0.			ADOPTIONS
MCCRACKEN KITTY KAT RESCUE PO BOX 4654 CLEVELAND, TN 37320-0000	47-4138827	501(C)3	72,500.	0.			ADOPTIONS
LEXINGTON HUMANE SOCIETY 1600 OLD FRANKFORT PIKE BLDG B LEXINGTON, KY 40504-1013	61-0444762	501(C)3	71,500.	0.			ADOPTIONS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SFC VIRGINIA 9916 BROCK RD SPOTSYLVANIA, VA 22553-3906	84-2340045	501(C)3	71,250.	0.			ADOPTIONS
MIDLANDS HUMANE SOCIETY 1020 RAILROAD HWY COUNCIL BLFS, IA 51503-6400	20-5105144	501(C)3	70,000.	0.			ADOPTIONS
FORGOTTEN CATS INC 4023 KENNETT PIKE SUITE 422 GREENVILLE, DE 19807-0000	20-0691180	501(C)3	70,000.	0.			ADOPTIONS
WOLF TRAP ANIMAL RESCUE 8300 MERRIFIELD AVE STE C FAIRFAX, VA 22031-4413	47-5126237	501(C)3	66,250.	0.			ADOPTIONS
AMAZING DOGS 416W SAN YSIDRO BLVD UNIT 679 SAN YSIDRO, CA 92173-0000	87-2700229	501(C)3	65,000.	0.			ADOPTIONS
STRAY CAT BLUE INC PO BOX 18 COLMAR, PA 18915-0018	23-2943833	501(C)3	65,000.	0.			ADOPTIONS
KITTY ANGEL RESCUE INC 4852 BRIANNA CT POWDER SPGS, GA 30127-2454	43-2003957	501(C)3	63,000.	0.			ADOPTIONS
HUB CITY HUMANE SOCIETY 1381 JACKSON RD HATTIESBURG, MS 39402-3682	27-5160904	501(C)3	63,000.	0.			ADOPTIONS
PET ALLIANCE OF GREATER ORLANDO INC - 333 S GARLAND AVE STE 13 - ORLANDO, FL 32801-3356	59-0637883	501(C)3	62,000.	0.			ADOPTIONS

Schedule I (Form 990)

Schedule I (Form 990) PETSMA RT CHARITIES, INC.

93-1140967

Page 1

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SUNCOAST ANIMAL LEAGUE 1030 PENNSYLVANIA AVE PALM HARBOR, FL 34683-4047	02-0787661	501(C)3	60,000.	0.			ADOPTIONS
SPAY-MART INC 732 ROSELAND PKWY HARAHAN, LA 70123-3859	72-1418016	501(C)3	60,000.	0.			ADOPTIONS
ST FRANCIS SOCIETY INC PO BOX 261614 TAMPA, FL 33685-1614	59-3469332	501(C)3	60,000.	0.			ADOPTIONS
ALLIANCE FOR CONTRACEPTION IN CATS AND DOGS - 3442 BENT TRAIL DR - ANN ARBOR, MI 48108-9302	41-2185841	501(C)3	60,000.	0.			RESEARCH
ARIZONA ANIMAL WELFARE LEAGUE INC 25 N 40TH ST PHOENIX, AZ 85034-1701	23-7149453	501(C)3	60,000.	0.			ADOPTIONS, ACCESS TO CARE/ADOPTIONS
WISCONSIN HUMANE SOCIETY 4500 W WISCONSIN AVE MILWAUKEE, WI 53208-3156	39-0810533	501(C)3	58,250.	0.			ADOPTIONS
SAVING ONE LIFE PO BOX 6458 CHANDLER, AZ 85246-0000	27-1173539	501(C)3	58,000.	0.			ADOPTIONS
TEXAS LITTER CONTROL 586 SAWDUST RD SPRING, TX 77380-2215	46-0920592	501(C)3	56,250.	0.			ADOPTIONS
FRIENDS OF THE ANIMAL SHELTER INC 840 SPRINGBROOK DR HINTON, IA 51024-8846	47-4148599	501(C)3	55,000.	0.			ADOPTIONS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PARIS ANIMAL WELFARE SOCIETY INC 6 LEGION RD PARIS, KY 40361-2120	61-1224933	501(C)3	55,000.	0.			ADOPTIONS
FABULOUS FELINES NWA PO BOX 1283 BENTONVILLE, AR 72712-1283	46-1249080	501(C)3	55,000.	0.			ADOPTIONS
SOUL DOG RESCUE 1245 FACTORY CIRCLE FORT LUPTON, CO 80621-0000	45-4137227	501(C)3	55,000.	0.			ADOPTIONS
POI DOGS & POPOKI PO BOX 75345 KAPOLEI, HI 96707-0345	27-1370208	501(C)3	55,000.	0.			ADOPTIONS, DISASTER RESPONSE
JACKSONVILLE HUMANE SOCIETY 8464 BEACH BLVD JACKSONVILLE, FL 32216-3131	59-0624410	501(C)3	54,000.	0.			ADOPTIONS
MUDDY PAWS RESCUE 821 9TH AVE FRNT 1 NEW YORK, NY 10019-4462	47-5496436	501(C)3	53,250.	0.			ADOPTIONS, ADOPTIONS RESEARCH
SPOKANE HUMANE SOCIETY 6607 N HAVANA ST SPOKANE, WA 99217-7402	91-0565011	501(C)3	52,500.	0.			ADOPTIONS
ANIMAL RESCUE LEAGUE OF IOWA INCORPORATED - 5452 NE 22ND ST - DES MOINES, IA 50313-2528	42-0680427	501(C)3	52,500.	0.			ADOPTIONS
FIX WEST TEXAS 5023 PRINCETON AVE STE 17 MIDLAND, TX 79703-4514	84-4108520	501(C)3	52,000.	0.			ADOPTIONS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TAILS FROM THE CITY 4801 EICHORN AVE CLEVELAND, OH 44102-6025	32-0324676	501(C)3	51,250.	0.			ADOPTIONS
VICTORIA COUNTY 115 N BRIDGE ST., STE. 241 VICTORIA, TX 77901	74-6002445	GOVERNMENT	51,000.	0.			ADOPTIONS
CITY OF BROWNSVILLE P.O. BOX 911 BROWNSVILLE, TX 78522	74-6000422	GOVERNMENT	50,000.	0.			ADOPTIONS
REGENTS OF THE UNIVERSITY OF MINNESOTA - 450 MCNAMARA ALUMNI CENTER - MINNEAPOLIS, MN 55455-2070	41-6007513	GOVERNMENT	50,000.	0.			ACCESS TO CARE
CONNECTICUT COALITION TO END HOMELESSNESS INC - 257 LAWRENCE ST - HARTFORD, CT 06106-1430	06-1126880	501(C)3	50,000.	0.			PRESERVING FAMILIES
TUCSON MEDICAL CENTER FOUNDATION 5301 E GRANT ROAD TUCSON, AZ 85712-0000	86-0504015	501(C)3	50,000.	0.			PRESERVING FAMILIES
PETS4LIFE LOUISVILLE INC 291 N HUBBARDS LN STE 172 PMB 105 LOUISVILLE, KY 40207-8220	46-3728022	501(C)3	50,000.	0.			ACCESS TO CARE
NORTH CAROLINA STATE UNIVERSITY CAMPUS BOX 7233 RALEIGH, NC 27695-0001	56-6000756	GOVERNMENT	50,000.	0.			ACCESS TO CARE
CITY OF CHICAGO 33 N LASALLE 7TH FLR CHICAGO, IL 60602-2603	36-6005820	GOVERNMENT	50,000.	0.			PRESERVING FAMILIES

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WICHITA ANIMAL ACTION LEAGUE 816 N BAEHR ST WICHITA, KS 67212-2617	46-5635359	501(C)3	50,000.	0.			ACCESS TO CARE
TRUSTEES OF TUFTS COLLEGE 80 GEORGE ST MEDFORD, MA 02155-5519	04-2103634	501(C)3	50,000.	0.			ACCESS TO CARE
FURKIDS INC 5235 UNION HILL RD CUMMING, GA 30040-0000	01-0766844	501(C)3	50,000.	0.			ADOPTIONS
COUNTY OF MOHAVE PO BOX 7000 KINGMAN, AZ 86402-7000	86-6000539	GOVERNMENT	50,000.	0.			ADOPTIONS
VETERINARY INNOVATION COUNCIL 5144 S ORANGE AVE ORLANDO, FL 32809-3020	47-5403026	501(C) (6)	50,000.	0.			ACCESS TO CARE
PAW MISSION INC 13229 7TH PL YUCAIPA, CA 92399-2316	82-2187275	501(C)3	50,000.	0.			ADOPTIONS, RESEARCH
THE ARK OF SAN JUAN COMPANION ANIMAL RESCUE - PO BOX 117 - SAN JUAN CAPISTRANO, CA 92693-0000	83-0493818	501(C)3	50,000.	0.			ADOPTIONS
ASOCIACION PRO ALBERGUE DE ANIMALES INC - PO BOX 3537 - MAYAGUEZ, PR 00681-3537	66-0413650	501(C)3	50,000.	0.			ADOPTIONS
DORCHESTER PAWS 136 FOUR PAWS LN SUMMERVILLE, SC 29483-3811	57-0620182	501(C)3	47,500.	0.			ADOPTIONS, DISASTER RESPONSE

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HUMANE SOCIETY OF EL PASO INC 4991 FRED WILSON AVE EL PASO, TX 79906-3106	74-1156430	501(C)3	47,000.	0.			ADOPTIONS
ANIMAL OUTREACH OF THE MOTHER LODE 6101 ENTERPRISE DRIVE SUITE BC PO DIAMOND SPRINGS, CA 95619-9487	68-0272499	501(C)3	46,250.	0.			ADOPTIONS
STRAY CAT ADOPTIONS OF TEXAS S C A PO BOX 700571 SAN ANTONIO, TX 78270-0571	74-2981156	501(C)3	45,750.	0.			ADOPTIONS
CHARLESTON ANIMAL SOCIETY 2455 REMOUNT RD N CHARLESTON, SC 29406-6138	57-6021863	501(C)3	45,000.	0.			ADOPTIONS
ANIMAL CARE AND CONTROL TEAM 111 W HUNTING PARK AVE PHILADELPHIA, PA 19140-2717	45-3985637	501(C)3	44,500.	0.			ADOPTIONS
HUMANE HEROES INC 10930 E CRYSTAL FALLS PKWY LEANDER, TX 78641-2248	74-2069592	501(C)3	42,500.	0.			ADOPTIONS
ANIMAL CARE TR 4500 N ACCESS RD CHATTANOOGA, TN 37415-3819	01-0824858	501(C)3	41,750.	0.			ADOPTIONS
SANTA FE ANIMAL SHELTER INC 100 CAJA DEL RIO SANTA FE, NM 87507-3537	85-6000484	501(C)3	40,000.	0.			ADOPTIONS
ARE ANIMAL RESCUE INC 101 E FLORIDA AVE HEMET, CA 92543-0000	83-0980475	501(C)3	40,000.	0.			ADOPTIONS

Schedule I (Form 990)



**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UTAH VALLEY ANIMAL RESCUE INC 5182 W 6300 S SPANISH FORK, UT 84660-4224	47-1264869	501(C)3	40,000.	0.			ADOPTIONS
PAW WORKS INC 79 E DAILY DRIVE 515 CAMARILLO, CA 93010-5807	46-4484336	501(C)3	40,000.	0.			ADOPTIONS
CITY OF CHARLOTTE 600 E FOURTH ST., 10TH FLOOR CHARLOTTE, NC 28202-2870	52-1333483	GOVERNMENT	40,000.	0.			ADOPTIONS
CAT KIDS RESCUE INC 153 3RD ST W TIERRA VERDE, FL 33715-1716	46-3684314	501(C)3	39,000.	0.			ADOPTIONS, DISASTER RESPONSE
SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS OF MONTEREY CTY - PO BOX 3058 - MONTEREY, CA 93942-3058	94-1167409	501(C)3	38,547.	0.			DISASTER RESPONSE
NEW HOPE ANIMAL RESCUE NFP PO BOX 40443 AUSTIN, TX 78704-0008	82-1999291	501(C)3	38,000.	0.			ADOPTIONS
FERAL FELINE FRIENDS OF EAST TENNESSEE - PO BOX 32121 - KNOXVILLE, TN 37930-0000	80-0254016	501(C)3	38,000.	0.			ADOPTIONS
ANIMAL FRIENDS ALLIANCE 2321 E MULBERRY ST STE 1 FORT COLLINS, CO 80524-3691	20-4969731	501(C)3	35,750.	0.			ADOPTIONS
LIFELINE ANIMAL PROJECT INC 3180 PRESIDENTIAL DR ATLANTA, GA 30340-3908	01-0599278	501(C)3	35,000.	0.			ADOPTIONS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EMERGENCY SHELTER NETWORK OF FAITH-BASED AND COMMUNITY ORGANIZA - 4 WEST 43RD STREET 407 - NEW YORK, NY 10036-0000	46-1657874	501(C)3	35,000.	0.			PRESERVING FAMILIES
TINY MIRACLES KITTEN RESCUE 1098 CHEROKEE RD JOHNSON CITY, TN 37604-7351	87-3799923	501(C)3	35,000.	0.			ADOPTIONS
ACADIANA ANIMAL AID PO BOX 298 CARENCRO, LA 70520-0298	23-7414331	501(C)3	35,000.	0.			ADOPTIONS
SAVE A PET RESCUE ADOPTION AND TRANSPORT INC - PO BOX 9323 - DOTHAN, AL 36304-1323	20-1285614	501(C)3	32,000.	0.			ADOPTIONS
CITY OF WESLACO 255 S. KANSAS WESLACO, TX 78596	74-6002544	GOVERNMENT	31,000.	0.			ADOPTIONS
HUMANE SOCIETY OF THE UNITED STATES - 700 PROFESSIONAL DR - GAITHERSBURG, MD 20879-3418	53-0225390	501(C)3	31,000.	0.			CONFERENCES
MAUI HUMANE SOCIETY INC PO BOX 1047 PUUNENE, HI 96784-1047	99-6000953	501(C)3	30,000.	0.			DISASTER RESPONSE
MOBILE SOCIETY FOR PREVENTION OF CRUELTY TO ANIMALS - 620 ZEIGLER CIR W - MOBILE, AL 36608-4812	63-0500374	501(C)3	30,000.	0.			ADOPTIONS
TILTED ACRES RESCUE AND ADOPTIONS 3045 N MCFARLAND BLUE RD RAEFORD, NC 28376-7562	46-0736492	501(C)3	30,000.	0.			ADOPTIONS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HUMANE ANIMAL WELFARE SOCIETY OF WAUKESHA COUNTY INC - 701 NORTHVIEW RD - WAUKESHA, WI 53188-6902	39-6108644	501(C)3	30,000.	0.			ADOPTIONS
ARK CAT SANCTUARY PO BOX 30098 FLAGSTAFF, AZ 86003-0098	20-5883650	501(C)3	30,000.	0.			ADOPTIONS
K911 2625 CARSON WAY ANTIOCH, CA 94531-8272	47-2974220	501(C)3	29,000.	0.			ADOPTIONS
FERAL CAT WARRIORS INC 1308 STOCKTON HILL RD STE A PMB 505 KINGMAN, AZ 86401-5190	86-2186585	501(C)3	28,000.	0.			ADOPTIONS
KITTEN ANGELS 233 HOUSEMAN ST MAYFIELD, NY 12117-0000	27-1889799	501(C)3	28,000.	0.			ADOPTIONS
BALTIMORE ANIMAL RESCUE AND CARE SHELTER INC - 2490 GILES RD - BALTIMORE, MD 21225-1011	86-1130456	501(C)3	27,500.	0.			ADOPTIONS
PAWSITIVE DIFFERENCE 101 S RAINBOW BLVD STE 32 LAS VEGAS, NV 89145-5379	47-4492798	501(C)3	27,000.	0.			ADOPTIONS
HEARTLAND SMALL ANIMAL RESCUE INC PO BOX 6033 SOUTH BEND, IN 46660-6033	20-5670962	501(C)3	27,000.	0.			ADOPTIONS
BEST FRIENDS ANIMAL SOCIETY 5001 ANGEL CANYON RD KANAB, UT 84741-5000	23-7147797	501(C)3	27,000.	0.			ADOPTIONS, CONFERENCES

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HUMANE SOCIETY OF SCOTT COUNTY 2802 W CENTRAL PARK AVE DAVENPORT, IA 52804-2574	42-0801836	501(C)3	26,500.	0.			ADOPTIONS
ESPANOLA VALLEY HUMANE SOCIETY 108 HAMM PKWY ESPANOLA, NM 87532-9655	85-0406234	501(C)3	26,000.	0.			ADOPTIONS
PURRFECT PAWPRINTS INC PO BOX 412 GRANTSVILLE, UT 84029-0412	90-0353655	501(C)3	25,000.	0.			ADOPTIONS
YAVAPAI HUMANE SOCIETY 1625 SUND OG RANCH ROAD PRESCOTT, AZ 86301-0000	86-0327745	501(C)3	25,000.	0.			ADOPTIONS
SUNMART ANIMAL RESCUE TEAM INC 27511 CARADOC SPRINGS COURT SPRING, TX 77386-0000	04-3695847	501(C)3	25,000.	0.			ADOPTIONS
HUMANE SOCIETY OF POMONA VALLEY INC - 500 S HUMANE WAY - POMONA, CA 91766-1062	95-1660842	501(C)3	25,000.	0.			ADOPTIONS
C A T S-CAN INC 572 SEMINOLE WOODS BLVD GENEVA, FL 32732-9313	68-0539788	501(C)3	25,000.	0.			ADOPTIONS
STRAY HAVEN INC 5541 COUNTRY HILLS DR AURORA, IN 47001-1771	82-2250712	501(C)3	25,000.	0.			ADOPTIONS
FRIENDS OF MADERA ANIMAL SHELTER PO BOX 923 MADERA, CA 93639-0923	77-0553194	501(C)3	25,000.	0.			ADOPTIONS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAFE HAVEN ANIMAL RESCUE INC PO BOX 76089 OKLAHOMA CITY, OK 73147-2089	74-3124122	501(C)3	25,000.	0.			ADOPTIONS
SAVE A LIFE PET RESCUE INC PO BOX 623341 OVIEDO, FL 32762-3341	61-1511434	501(C)3	25,000.	0.			ADOPTIONS
CASTAWAYS PET RESCUE INC 11659 GA HIGHWAY 99 DARIEN, GA 31305-3451	47-1838686	501(C)3	25,000.	0.			ADOPTIONS
STRAY ANIMAL ADOPTION PROGRAM INC PO BOX 72040 NEWPORT, KY 41072-0040	61-1333938	501(C)3	25,000.	0.			ADOPTIONS
FANCY CATS RESCUE TEAM 13110 PELFREY LN FAIRFAX, VA 22033-3028	54-1859914	501(C)3	25,000.	0.			ADOPTIONS
LIONHEART INCORPORATED 452 TV DRIVE FREDERICKSBURG, VA 22408-0000	54-1952672	501(C)3	25,000.	0.			ADOPTIONS
STARK COUNTY HUMANE SOCIETY 5100 PEACH STREET LOUISVILLE, OH 44641-0000	34-6003244	501(C)3	25,000.	0.			ADOPTIONS
FRIENDS FOR ANIMALS OF METRO DETROIT - 16121 RECKINGER ST - DEARBORN, MI 48126-2754	38-3171570	501(C)3	25,000.	0.			ADOPTIONS
LOST DOG RESCUE FOUNDATION 6801 WILSON BLVD FALLS CHURCH, VA 22044-0000	31-1789600	501(C)3	25,000.	0.			ADOPTIONS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARF 531 W ROOSEVELT RD WHEATON, IL 60187-5057	36-4236669	501(C)3	25,000.	0.			ADOPTIONS
PACK LEADERS RESCUE OF CT INC 280 DENNISON RDG MANCHESTER, CT 06040-6838	46-2143229	501(C)3	25,000.	0.			ADOPTIONS
HELPING OVERPOPULATION OF PETS END INC - 1465 CYPRESS AVE - MELBOURNE, FL 32935-5926	45-4023836	501(C)3	25,000.	0.			ADOPTIONS
GOOD KARMA PET RESCUE INC 3601 W COMMERCIAL BLVD STE 19 FT LAUDERDALE, FL 33309-3320	27-4999491	501(C)3	25,000.	0.			ADOPTIONS
HOUSTON PETS ALIVE 2854 ANTOINE DR HOUSTON, TX 77092-7055	46-5455638	501(C)3	22,260.	0.			ADOPTIONS, DISASTER RESPONSE
WASHINGTON COUNTY SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS I - 16620 STATE 123 HWY - BARTLESVILLE, OK 74006-0000	73-6107239	501(C)3	22,000.	0.			ADOPTIONS
HIGH FOREST HUMANE SOCIETY 173 PATTON RD HOHENWALD, TN 38462-2036	61-1459979	501(C)3	22,000.	0.			ADOPTIONS
SUWANNEE PAWS INC PO BOX 409 O BRIEN, FL 32071-0409	46-4923115	501(C)3	22,000.	0.			ADOPTIONS, DISASTER RESPONSE
HOMEWARD BOUND PET ADOPTION CENTER INC - PO BOX 475 125 BARNSBORO ROAD - BLACKWOOD, NJ 08012-0000	20-0549531	501(C)3	22,000.	0.			ADOPTIONS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAT CRUSADERS PO BOX 46292 TAMPA, FL 33646-0103	27-3257614	501(C)3	21,750.	0.			ADOPTIONS
EASTERN STATES VETERINARY ASSOCIATION INC - 5144 S ORANGE AVE - ORLANDO, FL 32809-3020	59-2243237	501(C)3	20,000.	0.			CONFERENCES
WEST COAST DOG AND CAT RESCUE PO BOX 72401 SPRINGFIELD, OR 97475-0297	68-0655056	501(C)3	20,000.	0.			ADOPTIONS
OCONEE COUNTY PO BOX 145 WATKINSVILLE, GA 30677	58-6000871	GOVERNMENT	20,000.	0.			ADOPTIONS
COUNTY OF IREDELL PO BOX 788 STATESVILLE, NC 28687-0788	56-6000309	GOVERNMENT	20,000.	0.			ADOPTIONS
PURRFECT PEACHES CAT RESCUE INC 3038 CHAPEL HILL RD DOUGLASVILLE, GA 30135-1701	56-2561199	501(C)3	20,000.	0.			ADOPTIONS
MANKIND ADVOCATES NO-KILL EXCELLENCE - PO BOX 45 - LYMAN, SC 29365-0045	45-5505283	501(C)3	20,000.	0.			ADOPTIONS
CATS CRADLE OF THE SHENANDOAH VALLEY INC - PO BOX 2128 - HARRISONBURG, VA 22801-9505	20-3269224	501(C)3	20,000.	0.			ADOPTIONS
CAT TAIL CORNER INC 821 BUCKLES RD PIERSON, FL 32180-2678	59-3742470	501(C)3	19,000.	0.			ADOPTIONS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SCOTT COUNTY HUMANE SOCIETY INC PO BOX 821 GEORGETOWN, KY 40324-0821	31-1090052	501(C)3	19,000.	0.			ADOPTIONS
MOUNTAINEERS FOR MUTTS CORP PO BOX 1172 DELLSLOW, WV 26531-1172	36-4778907	501(C)3	18,750.	0.			ADOPTIONS
SPCA OF TEXAS 2400 LONE STAR DR DALLAS, TX 75212-6309	75-1216660	501(C)3	18,000.	0.			ADOPTIONS
NO KILL GLYNN COUNTY INC 241 FLORIDA ST ST SIMONS IS, GA 31522-2646	47-3809648	501(C)3	18,000.	0.			ADOPTIONS
PAWSOME SOUTHERN RESCUE INC 163 DAVIDSON RD BONAIRE, GA 31005-3420	47-4270176	501(C)3	18,000.	0.			ADOPTIONS
HAPPY TAILS RESCUE FOUNDATION 7331 BAKER ST NE MINNEAPOLIS, MN 55432-3420	20-2388312	501(C)3	18,000.	0.			ADOPTIONS
CITY OF SACRAMENTO 2127 FRONT STREET SACRAMENTO, CA 95818-1106	94-6000410	GOVERNMENT	17,500.	0.			ADOPTIONS
JULIET S HOUSE ANIMAL RESCUE INC 1111 MONTICELLO ST GREENSBORO, NC 27410-3641	47-3620398	501(C)3	17,500.	0.			ADOPTIONS
A TAIL IN NEED ANIMAL RESCUE 6408 KAWANEE AVE METAIRIE, LA 70003-3227	84-2443460	501(C)3	17,000.	0.			ADOPTIONS

Schedule I (Form 990)



Schedule I (Form 990)

PETSMART CHARITIES, INC.

93-1140967

Page 1

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BARSTOW HUMANE SOCIETY 2480 E MAIN ST BARSTOW, CA 92311-5887	95-2125105	501(C)3	17,000.	0.			ADOPTIONS
FRONT RANGE FREEDOM RESCUE INC PO BOX 19378 BOULDER, CO 80308-2378	83-3364318	501(C)3	17,000.	0.			ADOPTIONS
LAWRENCE COUNTY HUMANE SOCIETY INC PO BOX 1331 LOUISA, KY 41230-4331	61-1208526	501(C)3	17,000.	0.			ADOPTIONS
TREASURED FRIENDS INC PO BOX 9234 HIGHLAND, IN 46322-9234	35-1962828	501(C)3	17,000.	0.			ADOPTIONS
PARTNERS FOR PETS HUMANE SOCIETY PO BOX 445 TROY, IL 62294-0445	36-4521704	501(C)3	17,000.	0.			ADOPTIONS
THOMPSON RIVER ANIMAL CARE SHELTER PO BOX 1589 THOMPSON FLS, MT 59873-1589	20-5520480	501(C)3	17,000.	0.			ADOPTIONS
MORRIS ANIMAL REFUGE 1242 LOMBARD ST PHILADELPHIA, PA 19147-1118	23-1352237	501(C)3	17,000.	0.			ADOPTIONS
ANIMAL CARE FUND 353 SANCTUARY HILL LN E SMITHFIELD, PA 18817-7722	22-1837635	501(C)3	17,000.	0.			ADOPTIONS
DANTES HOPE 14427 BROWN RD BAKER, LA 70714-6521	81-2920129	501(C)3	16,250.	0.			ADOPTIONS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WAG ANIMAL RESCUE PO BOX 222 WYANDOTTE, MI 48192-0222	38-2820050	501(C)3	16,250.	0.			ADOPTIONS
BURLINGTON COUNTY ANIMAL ALLIANCE 668 SHADY LN TRENTON, NJ 08619-2758	22-3691757	501(C)3	16,250.	0.			ADOPTIONS
AIKEN COUNTY 1930 UNIVERSITY PARKWAY AIKEN, SC 29801	57-6000299	GOVERNMENT	16,000.	0.			ADOPTIONS
INKY BLUE SEA COMPANION ANIMAL RESCUE - 158 E 126TH STREET SUITE 711 - NEW YORK, NY 10035-0000	27-4725295	501(C)3	16,000.	0.			ADOPTIONS
SAN ANTONIO FERAL CAT COALITION PO BOX 692308 SAN ANTONIO, TX 78269-2308	76-0766948	501(C)3	15,750.	0.			ADOPTIONS
RUFF START RESCUE INC 12526 319TH AVE PRINCETON, MN 55371-3324	27-2545988	501(C)3	15,750.	0.			ADOPTIONS
AMORY HUMANE SOCIETY PO BOX 218 AMORY, MS 38821-0218	64-0753915	501(C)3	15,500.	0.			DISASTER RESPONSE
TRUE RESCUE 12110 LEBANON RD MOUNT JULIET, TN 37122-0000	84-5161581	501(C)3	15,000.	0.			ADOPTIONS
PUURRRFECT PAWS RESCUE 207 ROBIN HOOD DR CLARKSVILLE, TN 37042-3170	82-0858937	501(C)3	15,000.	0.			ADOPTIONS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN HUMANE ASSOCIATION 1400 16TH NW ST STE 360 WASHINGTON, DC 20036-0000	84-0432950	501(C)3	15,000.	0.			DISASTER RESPONSE
DESERT PAWS RESCUE PO BOX 1243 QUEEN CREEK, AZ 85142-1827	06-1721946	501(C)3	15,000.	0.			ADOPTIONS
A LITTLE BIT OF HEAVEN RESCUE INC 2505 ZOYSIA DR DALTON, GA 30721-0708	86-1841992	501(C)3	15,000.	0.			ADOPTIONS
FAITHFUL FRIENDS PET RESCUE AND REHOMING INC - 4750 NE 121ST AVE - WILLISTON, FL 32696-5550	82-4516345	501(C)3	15,000.	0.			ADOPTIONS
ANGEL OF HOPE ANIMAL RESCUE 13601 BALSAM LN UNIT 2 DAYTON, MN 55327-9616	81-0572205	501(C)3	15,000.	0.			ADOPTIONS
FLAGLER HUMANE SOCIETY INC 1 SHELTER DR PALM COAST, FL 32137-3615	59-2247034	501(C)3	15,000.	0.			ADOPTIONS
FOR THE LOVE OF CATS RESCUE AND ADOPTION - 1629 ANDOVER CIRCLE - COMMERCE, MI 48390-0000	47-3977463	501(C)3	15,000.	0.			ADOPTIONS
HANDS HELPING PAWS RESCUE 453 PALOMA DR DAVENPORT, FL 33837-0000	47-4703775	501(C)3	15,000.	0.			ADOPTIONS
FAYETTE HUMANE SOCIETY INC PO BOX 244 FAYETTEVILLE, GA 30214-0000	58-1592706	501(C)3	15,000.	0.			ADOPTIONS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PET CONNECT RESCUE INC PO BOX 2173 BELTON, TX 76513-6973	32-0280836	501(C)3	15,000.	0.			ADOPTIONS
KIRKLAND FOUNDATION 12950 N WILLOW AVE CLOVIS, CA 93619-9126	30-0958951	501(C)3	15,000.	0.			ADOPTIONS
TEN LIVES CLUB INC 3741 LAKE SHORE RD NORTH BOSTON, NY 14110-0000	16-1611221	501(C)3	15,000.	0.			ADOPTIONS
FERAL CAT PROGRAM OF GEORGIA INC 7250 BANNISTER RD CUMMING, GA 30028-3240	27-0694932	501(C)3	15,000.	0.			ADOPTIONS
BEARE GARDEN PLANTATION ANIMAL RESCUE - 1164 HWY 258 N - SNOW HILL, NC 28580-7305	85-1574125	501(C)3	14,000.	0.			ADOPTIONS
HORN CREEK RESCUE 8115 MOUNT TACOMA DR SW LAKEWOOD, WA 98498-5726	83-3748893	501(C)3	14,000.	0.			ADOPTIONS
SUFFOLK HUMANE SOCIETY 412 KINGS FORK RD SUFFOLK, VA 23434-7149	68-0658196	501(C)3	14,000.	0.			ADOPTIONS
FULTON COUNTY ANIMAL ADOPTION AND EDUCATION CENTER INC - 1540 WENTZEL ST - ROCHESTER, IN 46975-7297	45-1601406	501(C)3	14,000.	0.			ADOPTIONS
ANIMAL DEFENSE LEAGUE 11300 NACOGDOCHES RD SAN ANTONIO, TX 78217-2318	74-6002033	501(C)3	13,750.	0.			ADOPTIONS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RESCUE ALLIANCE 12484 HIGHWAY 44 GONZALES, LA 70737-2253	83-4560359	501(C)3	13,000.	0.			ADOPTIONS
OCONEE COUNTY HUMANE SOCIETY INC 1925 SANDIFER BLVD SENECA, SC 29678-0000	46-0485454	501(C)3	12,750.	0.			ADOPTIONS
HART COUNTY HUMANE SOCIETY INC PO BOX 1062 HARTWELL, GA 30643-0000	20-8220374	501(C)3	12,500.	0.			ADOPTIONS
MEOW STORIES - THE CENTRAL VIRGINIA CAT RESCUE AND ADOPTION NETWORK - 67 HAYES ST - STAFFORD, VA 22556-8603	26-4796916	501(C)3	12,500.	0.			ADOPTIONS
PLANNED PETHOOD OF GEORGIA INC 2860 BUFORD HWY BLDG F STE 2 DULUTH, GA 30096-5127	90-0516757	501(C)3	12,000.	0.			ADOPTIONS
ASAR TRAINING AND RESPONSE INC 39016 W 295TH ST PAOLA, KS 66071-4323	84-1664555	501(C)3	12,000.	0.			DISASTER RESPONSE
AGGIELAND HUMANE SOCIETY 5359 LEONARD RD BRYAN, TX 77807-9571	74-2150288	501(C)3	12,000.	0.			ADOPTIONS
LUCKYS LEGACY INC 47 WESTSIDE AVE HAGERSTOWN, MD 21740-5322	83-4260346	501(C)3	12,000.	0.			ADOPTIONS
COLUMBUS PURRS N PAWS 8113 UPATOI RDG UPATOI, GA 31829-2160	47-4475103	501(C)3	12,000.	0.			ADOPTIONS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RESCUE REHAB REHOME 4520 95TH ST URBANDALE, IA 50322-1456	47-5451558	501(C)3	12,000.	0.			ADOPTIONS
ALMOST HOME FOUNDATION PO BOX 308 ELK GROVE VLG, IL 60009-0308	04-3805366	501(C)3	11,250.	0.			ADOPTIONS
FELINE URBAN RESCUE & REHAB INC C/O R GOULD 600 AVENUE A PHILLIPSBURG, NJ 08865-0000	04-3753676	501(C)3	11,250.	0.			ADOPTIONS
KITTEN CROSSING RESCUE INC 540 PATINA CT ROSEVILLE, CA 95747-5063	86-2020730	501(C)3	11,250.	0.			ADOPTIONS
SOUTHERN ARIZONA CAT RESCUE PO BOX 65791 TUCSON, AZ 85728-5791	84-3384497	501(C)3	11,250.	0.			ADOPTIONS
LIFE IS BETTER RESCUE PO BOX 19159 DENVER, CO 80219-0159	27-4360086	501(C)3	11,250.	0.			ADOPTIONS
MT PLEASANT ANIMAL SHELTER INC 194 STATE ROUTE 10 EAST HANOVER, NJ 07936-2107	23-7189562	501(C)3	11,250.	0.			ADOPTIONS
ROBINS NEST OF INDY INC 11715 FOX RD STE 400 # 185 INDIANAPOLIS, IN 46236-8431	27-2441316	501(C)3	11,250.	0.			ADOPTIONS
DONJAS DOGS 4085 N CENTRAL AVE BROWNSVILLE, TX 78526-9654	47-3052018	501(C)3	11,030.	0.			ADOPTIONS, ADOPTIONS RESEARCH

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HUMANE SOCIETY OF RALEIGH COUNTY INC - 325 GREY FLATS RD - BECKLEY, WV 25801-5878	55-0597146	501(C)3	11,000.	0.			ADOPTIONS
LIVING THE DREAM RESCUE 2272 W VILLAGE DR PHOENIX, AZ 85023-2242	82-2485963	501(C)3	10,750.	0.			ADOPTIONS
SOUTHSIDE SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS - PO BOX 66 - MEHERRIN, VA 23954-0066	35-1341327	501(C)3	10,750.	0.			ADOPTIONS
KEYSTONE SERVICE SYSTEMS INC 4391 STURBRIDGE DR HARRISBURG, PA 17110-3673	23-1915567	501(C)3	10,101.	0.			FIELD INITIATIVES
GOOD CAT NETWORK 835 N WOOD ST APT 205 CHICAGO, IL 60622-5033	86-3587969	501(C)3	10,000.	0.			DISASTER RESPONSE
GULF COAST HUMANE SOCIETY 3118 CABANISS RD CORP CHRISTI, TX 78415-5906	74-1266245	501(C)3	10,000.	0.			ADOPTIONS
FRIENDS ALL UNITED FOR NATCHITOCHES ANIMALS - PO BOX 2552 - NATCHITOCHES, LA 71457-2552	27-1004712	501(C)3	10,000.	0.			ADOPTIONS
GREATER BIRMINGHAM HUMANE SOCIETY 300 SNOW DR BIRMINGHAM, AL 35209-6301	63-0288810	501(C)3	10,000.	0.			ADOPTIONS
WILLOWS WAGS AND WHISKERS 806 AVENIDA PICO STE I PMB 311 SAN CLEMENTE, CA 92673-5693	47-4727620	501(C)3	10,000.	0.			ADOPTIONS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VERMONT DISASTER ANIMAL RESPONSE TEAM INC - PO BOX 1423 - WHITE RIV JCT, VT 05001-1423	80-0443426	501(C)3	10,000.	0.			DISASTER RESPONSE
HAVEN FOR CATS INC 2512 11TH ST SAINT CLOUD, FL 34769-3525	85-1080150	501(C)3	10,000.	0.			ADOPTIONS
KENNEBEC VALLEY HUMANE SOCIETY 10 PETHAVEN LN AUGUSTA, ME 04330-6119	01-0266549	501(C)3	10,000.	0.			ADOPTIONS
MASSACHUSETTS SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS - 350 S HUNTINGTON AVE - BOSTON, MA 02130-4803	04-2103597	501(C)3	10,000.	0.			ACCESS TO CARE/ADOPTIONS
PET OVER POPULATION PREVENTION 1506 ROAD 40 PASCO, WA 99301-2615	91-1846733	501(C)3	10,000.	0.			ADOPTIONS
WATERMELON MOUNTAIN RANCH INC 3251 WESTPHALIA LOOP NE RIO RANCHO, NM 87144-5771	85-0480585	501(C)3	10,000.	0.			ADOPTIONS
REGENTS OF THE UNIVERSITY OF CALIFORNIA - 1 SHIELDS AVE - DAVIS, CA 95616-5270	94-6036494	501(C)3	10,000.	0.			ACCESS TO CARE/ADOPTIONS
MUTTS & MEOWS RESCUE 938 ECHO CREEK DR MISSOURI CITY, TX 77489-1508	45-5491557	501(C)3	10,000.	0.			ADOPTIONS
SECOND CHANCE ANIMAL RESCUE 3205 PORTLAND AVE AMARILLO, TX 79118-9119	84-4661430	501(C)3	10,000.	0.			ADOPTIONS

Schedule I (Form 990)



**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HEAVENLY PAWS ANIMAL SHELTER INC 3678 ALDINGER RD SEVEN VALLEYS, PA 17360-8581	87-0728506	501(C)3	10,000.	0.			ADOPTIONS
COMMUNITY CATS COALITION OF ASHTABULA COUNTY - 1014 W MAIN CT - GENEVA, OH 44041-1222	87-4784396	501(C)3	10,000.	0.			ADOPTIONS
SAVE4PAWS RESCUE INC 2616 NW 112TH ST OKLAHOMA CITY, OK 73120-6405	84-2523058	501(C)3	10,000.	0.			ADOPTIONS
CENTRAL NEW YORK CAT COALITION INCORPORATED - PO BOX 6182 - SYRACUSE, NY 13217-6182	06-1688749	501(C)3	10,000.	0.			ADOPTIONS
COUNTY OF VENTURA 600 AVIATION DRIVE CAMARILLO, CA 93010	95-6000944	GOVERNMENT	10,000.	0.			ADOPTIONS
CATS IN NEED OF HUMAN CARE PO BOX 2204 ORANGE, CA 92859-0204	95-4302262	501(C)3	10,000.	0.			ADOPTIONS
R U 4 ME PET RESCUE INC PO BOX 6221 LAKE WORTH, FL 33466-6221	65-0874746	501(C)3	10,000.	0.			ADOPTIONS
HOFFMEYER ANIMAL RESCUE INC 16214 COUNTY ROAD 448 MOUNT DORA, FL 32757-9600	83-0681345	501(C)3	10,000.	0.			ADOPTIONS
MOUNTAIN PET RESCUE ASHEVILLE 130 WILLAS HILL DR CANDLER, NC 28715-0286	82-3039637	501(C)3	10,000.	0.			ADOPTIONS

Schedule I (Form 990)

Schedule I (Form 990)

PETSMART CHARITIES, INC.

93-1140967

Page 1

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CREEKSIDE ANIMAL RESCUE INC 11791 N COUNTY ROAD 800 E ROACHDALE, IN 46172-9506	81-1086930	501(C)3	10,000.	0.			ADOPTIONS
HOUSTON SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS - 900 PORTWAY DR - HOUSTON, TX 77024-8022	74-1287171	501(C)3	10,000.	0.			ADOPTIONS
NEBRASKAS ANIMAL LOVING ADVOCATES INC - 1511 S 172ND ST - OMAHA, NE 68130-1111	81-4319001	501(C)3	10,000.	0.			ADOPTIONS
CITY OF COOKEVILLE 45 E BROAD ST COOKEVILLE, TN 38501-3209	62-6000271	GOVERNMENT	10,000.	0.			ADOPTIONS
CITY OF DOTHAN, ALABAMA PO BOX 2128 DOTHAN, AL 36302	63-6001243	GOVERNMENT	10,000.	0.			ADOPTIONS
CATAPALOOZA INC 14325 WATERFORD CHASE PKWY ORLANDO, FL 32828-0000	82-1351830	501(C)3	10,000.	0.			ADOPTIONS
CELESTIAL ZOO PET RESCUE 2062 E JUNIPER DR EAGLE MTN, UT 84005-4872	82-3827213	501(C)3	10,000.	0.			ADOPTIONS
LIFELINE CAT RESCUE AND NETWORK 4000 TERRE LINDA DR DAYTON, OH 45424-4521	82-1734097	501(C)3	10,000.	0.			ADOPTIONS
NOCOKITTIES 3415 W EISENHOWER BLVD LOVELAND, CO 80537-9100	83-3733057	501(C)3	10,000.	0.			ADOPTIONS

Schedule I (Form 990)

Schedule I (Form 990)

PETSMART CHARITIES, INC.

93-1140967

Page 1

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KITTEN & ANIMAL RESCUE ADVOCATES INC - 2791 N 148TH LN - GOODYEAR, AZ 85395-2057	82-1814987	501(C)3	10,000.	0.			ADOPTIONS
PURR NATION CAT ALLIANCE INC 1350 WOOTEN LAKE RD NW STE 103 KENNESAW, GA 30144-1346	46-4758346	501(C)3	10,000.	0.			ADOPTIONS
DAVIESS COUNTY 2620 HWY 81 OWENSBORO, KY 42301	61-6000155	GOVERNMENT	10,000.	0.			ADOPTIONS
LINCOLN COUNTY 115 W. MAIN STREET LINCOLNTON, NC 28092	56-6000315	GOVERNMENT	10,000.	0.			ADOPTIONS
WIGGLY TAILS DOG RESCUE PO BOX 23152 EUGENE, OR 97402-0425	47-0991908	501(C)3	10,000.	0.			ADOPTIONS
NOAHS ARK BAYOU SANCTUARY PO BOX 775 DANBURY, TX 77534-0775	56-2499143	501(C)3	10,000.	0.			ADOPTIONS
TRI-COUNTY ANIMAL RESCUE INC PO BOX 176 ALEXIS, NC 28006-0176	56-2101756	501(C)3	10,000.	0.			ADOPTIONS
HUMANE SOCIETY OF SARASOTA COUNTY INC - 2331 15TH ST - SARASOTA, FL 34237-2909	59-6014943	501(C)3	10,000.	0.			ACCESS TO CARE/ADOPTIONS
FURRY FRIENDS ROCKIN RESCUE INC 2500 14TH AVE SE MANDAN, ND 58554-5104	47-4976049	501(C)3	10,000.	0.			ADOPTIONS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COOL CATS RESCUE 11033 N 18TH DR PHOENIX, AZ 85029-3706	46-4123515	501(C)3	10,000.	0.			ADOPTIONS
POUND PUPPIES N KITTENS INC 295 PAINE CROSSING RD SOCIAL CIRCLE, GA 30025-4801	58-2608242	501(C)3	10,000.	0.			ADOPTIONS
HUMANE SOCIETY OF WILKES PO BOX 306 N WILKESBORO, NC 28659-0306	56-1983115	501(C)3	10,000.	0.			ADOPTIONS
NEEDY PAWS RESCUE 814 HI CREST DR SAINT LOUIS, MO 63125-4655	46-5424557	501(C)3	10,000.	0.			ADOPTIONS
BEATRICE HUMANE SOCIETY INC PO BOX 646 BEATRICE, NE 68310-0646	47-0820810	501(C)3	10,000.	0.			ADOPTIONS
KRAZY KATS CAT RESCUE INC 3307 BONIFACE PKWY SPC 176 ANCHORAGE, AK 99504-3767	47-2811363	501(C)3	10,000.	0.			ADOPTIONS
KAUFMAN COUNTY CATS PO BOX 337 SCURRY, TX 75158-0337	47-2829308	501(C)3	10,000.	0.			ADOPTIONS
CHEROKEE COUNTY HUMANE SOCIETY INC 5900 BELLS FERRY RD ACWORTH, GA 30102-1411	58-1588122	501(C)3	10,000.	0.			ADOPTIONS
HOMELESS ANIMALS RESCUE TEAM INC PO BOX 7261 FX STATION, VA 22039-7261	54-1564904	501(C)3	10,000.	0.			ADOPTIONS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HEADING HOME ANIMAL RESCUE PO BOX 2852 APTOS, CA 95001-2852	45-1314568	501(C)3	10,000.	0.			ADOPTIONS
ROSIES SOUTHSIDE ANIMAL SHELTER INC - 1614 W EDGEWOOD AVE - INDIANAPOLIS, IN 46217-9670	35-1917438	501(C)3	10,000.	0.			ADOPTIONS
CAT TAILS CAT ADOPTION SERVICES INC - 6622 BEACH DR SW - OCEAN ISL BCH, NC 28469-4710	32-0116520	501(C)3	10,000.	0.			ADOPTIONS, FIELD INITIATIVES
TEXAS STAR RESCUE 749 ETHEREDGE RD LONGVIEW, TX 75602-7061	45-2799706	501(C)3	10,000.	0.			ADOPTIONS
NORTH CENTRAL INDIANA SPAY & NEUTER CLINIC - 7109 GOLDSBERRY RD - BATTLE GROUND, IN 47920-9744	35-2086410	501(C)3	10,000.	0.			ADOPTIONS
NASHVILLE CAT RESCUE PB BOX 140898 NASHVILLE, TN 37214-0000	33-1125213	501(C)3	10,000.	0.			ADOPTIONS
PET RESCUE SERVICES INC 206 HUMMINGBIRD LN LONEDELL, MO 63060-1952	30-0201213	501(C)3	10,000.	0.			ADOPTIONS
FAYETTE COUNTY HUMANE SOCIETY 153 S MAIN ST STE 3 WASHINGTON CH, OH 43160-2290	31-1009520	501(C)3	10,000.	0.			ADOPTIONS
MEDINA COUNTY SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS I - 8790 GUILFORD RD - SEVILLE, OH 44273-9341	34-1507786	501(C)3	10,000.	0.			ADOPTIONS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRIAD INDEPENDENT CAT RESCUE INC 2405 COTTAGE PL GREENSBORO, NC 27455-2912	36-4804008	501(C)3	10,000.	0.			ADOPTIONS
PURR PARTNERS PO BOX 905 YOUNGSVILLE, NC 27596-0905	30-0534889	501(C)3	10,000.	0.			ADOPTIONS
SAVE RESCUE COALITION 4247 FM 1764 SANTA FE, TX 77517-4436	45-4982602	501(C)3	10,000.	0.			ADOPTIONS
TRENTON CATS 1977 NORTH OLDEN AVE 327 TRENTON, NJ 08618-0000	45-3741630	501(C)3	10,000.	0.			ADOPTIONS
ANIMALS FIRST RESCUE OF THE CAROLINAS INC - 5618 DE VERA DRIVE STE 2 - FORT MILL, SC 29707-0000	46-1527620	501(C)3	10,000.	0.			ADOPTIONS
ANIMAL RESCUE AND WELFARE SERVICES INC - PO BOX 2341 - PLATTSBURGH, NY 12901-0029	30-0950784	501(C)3	10,000.	0.			ADOPTIONS
COUNTY OF WINNEBAGO 4517 NORTH MAIN ST ROCKFORD, IL 61103	36-6006681	GOVERNMENT	10,000.	0.			ADOPTIONS
FOLLOW YOUR HEART FOUNDATION INC 446 N HIGLEY RD STE 102 MESA, AZ 85205-7309	46-1991182	501(C)3	10,000.	0.			ADOPTIONS
CAMP COMPANION INC PO BOX 7478 ROCHESTER, MN 55903-0000	32-0165702	501(C)3	10,000.	0.			ADOPTIONS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANIMAL GRANTMAKERS INC 1706 LOWER ELWHA RD PORT ANGELES, WA 98363-9534	26-0688246	501(C)3	10,000.	0.			CONFERENCES
CENTRAL NEW YORK SPAY NEUTER ASSISTANCE PROGRAM CNY SNAP - 17 SALISBURY ST - CORTLAND, NY 13045-2312	20-3322730	501(C)3	10,000.	0.			ADOPTIONS
ANIMAL RESCUE OF THE ROCKIES 13918 E MISSISSIPPI AVE 60188 AURORA, CO 80012-3603	20-1055815	501(C)3	10,000.	0.			ADOPTIONS
MIDLAND HUMANE COALITION INC PO BOX 53213 MIDLAND, TX 79710-3213	27-3102777	501(C)3	10,000.	0.			ADOPTIONS
HAVEN ON EARTH ANIMAL LEAGUE INC PO BOX 61088 FORT MYERS, FL 33906-1088	26-3007751	501(C)3	10,000.	0.			ADOPTIONS
A REJOYCEFUL ANIMAL RESCUE PO BOX 46354 MOUNT CLEMENS, MI 48046-6354	26-2963082	501(C)3	10,000.	0.			ADOPTIONS
VOORHEES ANIMAL ORPHANAGE INC 419 COOPER RD VOORHEES, NJ 08043-9520	22-2914004	501(C)3	10,000.	0.			ADOPTIONS
CIRCLE OF FRIENDS ANIMAL SOCIETY INC - PO BOX 1235 - GREENSBORO, GA 30642-0000	20-8346787	501(C)3	10,000.	0.			ADOPTIONS
PEACEABLE KINGDOM INC PO BOX 424 WHITEHALL, PA 18052-0424	23-2958207	501(C)3	10,000.	0.			ADOPTIONS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MICHELES RESCUE 301 ALTEN AVE NE GRAND RAPIDS, MI 49503-3707	27-0915985	501(C)3	10,000.	0.			ADOPTIONS
ANIMAL PROTECTIVE LEAGUE OF SPRINGFIELD AND SANGAMON COUNTY - 1001 TAINTOR RD - SPRINGFIELD, IL 62702-1766	23-7095476	501(C)3	10,000.	0.			ADOPTIONS
KITTY CAT CONNECTION INC 12923 COBLE LN SMITHVILLE, MO 64089-8989	20-8008870	501(C)3	10,000.	0.			ADOPTIONS
BRAZOS RIVER RESCUE RANCH PO BOX 93 KOPPERL, TX 76652-0000	27-3175101	501(C)3	10,000.	0.			ADOPTIONS
WAGS TO WHISKERS OF TEXAS INC 23043 E MARTIN DR PORTER, TX 77365-5719	27-3525492	501(C)3	10,000.	0.			ADOPTIONS
ITSIE BITSIE RESCUE INC PO BOX 1989 ORANGEVALE, CA 95662-1989	20-5201701	501(C)3	10,000.	0.			ADOPTIONS
STARVED ROCK COUNTRY COMMUNITY FOUNDATION - 718 COLUMBUS ST - OTTAWA, IL 61350-5002	47-4762762	501(C)3	8,302.	0.			FIELD INITIATIVES
THE ANIMAL FOUNDATION 655 N MOJAVE RD LAS VEGAS, NV 89101-2801	88-0144253	501(C)3	8,000.	0.			ADOPTIONS
SOUTHERN HEARTS RESCUE LLC 13616 MARS HILL RD BAUXITE, AR 72011-9320	83-3684981	501(C)3	8,000.	0.			ADOPTIONS, DISASTER RESPONSE

Schedule I (Form 990)



Schedule I (Form 990) PETSMA RT CHARITIES, INC.

93-1140967

Page 1

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ZAZZY CATS KITTY RESCUE INC 776 S PRESIDIO DR PUEBLO, CO 81007-7085	46-4993472	501(C)3	8,000.	0.			ADOPTIONS
ALASKA RESCUE KITTIES CORPORATION PO BOX 672427 CHUGIAK, AK 99567-2427	45-1618812	501(C)3	8,000.	0.			ADOPTIONS
GUARDIAN ANGEL PET RESCUE INC PO BOX 33 BEAUMONT, CA 92223-0000	81-1936868	501(C)3	7,500.	0.			ADOPTIONS
FREEDOM HEARTS ANIMAL RESCUE INC PO BOX 114 GERRARDSTOWN, WV 25420-0114	81-4767249	501(C)3	7,500.	0.			ADOPTIONS
BEAUMONT PETS ALIVE 46718 IH 10 EAST WINNIE TEXAS 776 WINNIE, TX 77665-8498	82-4798808	501(C)3	7,500.	0.			ADOPTIONS
ASSISI ANIMAL CLINICS OF VIRGINIA INC - 819 WALHALLA CT - ROANOKE, VA 24019-4964	54-2021941	501(C)3	7,500.	0.			ADOPTIONS
MCCRACKEN CO HUMANE SOCIETY 4000 COLEMAN ROAD PADUCAH, KY 42001-0000	61-0542151	501(C)3	7,500.	0.			ADOPTIONS
COUNTY OF RIVERSIDE PO BOX 1326 RIVERSIDE, CA 92502-1326	95-6000930	GOVERNMENT	7,000.	0.			ADOPTIONS, DISASTER RESPONSE
CLARK COUNTY SPCA INC 21 WALTER ST SPRINGFIELD, OH 45506-1146	81-4542927	501(C)3	7,000.	0.			ADOPTIONS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANIMAL RESCUE CONNECTIONS PO BOX 239 BULVERDE, TX 78163-0000	71-0967730	501(C)3	7,000.	0.			ADOPTIONS
MIAMI ANIMAL RESCUE INC 13313 SW 124TH ST MIAMI, FL 33186-6418	47-2460585	501(C)3	7,000.	0.			ADOPTIONS
COLONIAL CAPITAL HUMANE SOCIETY PO BOX 326 NEW BERN, NC 28563-0326	58-1314712	501(C)3	7,000.	0.			ADOPTIONS
HUMANE SOCIETY OF TAMPA BAY INC 3607 N ARMENIA AVE TAMPA, FL 33607-1322	59-0799907	501(C)3	7,000.	0.			ADOPTIONS, ACCESS TO CARE/ADOPTIONS
PARKE-VERMILLION COUNTY HUMANE SOCIETY INC - PO BOX 293 - NEWPORT, IN 47966-0293	35-1857062	501(C)3	7,000.	0.			ADOPTIONS
CRITTER SHACK HUMANE SOCIETY OF MENARD - PO BOX 192 - WALL, TX 76957-0192	41-2090330	501(C)3	7,000.	0.			ADOPTIONS
PAWSITIVE CONNECTIONS INC 6083 NORTH FIGARDEN DRIVE 384 FRESNO, CA 93722-0000	27-2172715	501(C)3	7,000.	0.			ADOPTIONS, DISASTER RESPONSE
AIDING 2 ADOPTION RESCUE 1871 SATTERFIELD DR POCATELLO, ID 83201-1983	86-1780474	501(C)3	6,250.	0.			ADOPTIONS
A VOICE FOR ALL PAWS INC 8034 FOREST TRL DALLAS, TX 75238-4127	83-1160142	501(C)3	6,250.	0.			ADOPTIONS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MY NEW HOPE FOUNDATION 28715 CLOUD WAY MURRIETA, CA 92563-8447	82-4800324	501(C)3	6,250.	0.			ADOPTIONS
BUCKEYE PET PARTNERS 1776 KINGS CT APT D COLUMBUS, OH 43212-1543	82-5086921	501(C)3	6,250.	0.			ADOPTIONS
A RESCUE KINGDOM INC PO BOX 690765 HOUSTON, TX 77269-0000	82-1999059	501(C)3	6,250.	0.			ADOPTIONS
REBECCAS PAWS AND CLAWS PO BOX 229 REMLAP, AL 35133-0229	61-1626305	501(C)3	6,250.	0.			ADOPTIONS
VALLEY ANIMAL HAVEN & ADOPTION CENTER - 990 E D ST - LEMOORE, CA 93245-9488	46-5080982	501(C)3	6,250.	0.			ADOPTIONS
ADOPTION FIRST ANIMAL RESCUE 114 ENTERPRISE RD JACKSONVILLE, NC 28546-5711	46-3689436	501(C)3	6,250.	0.			ADOPTIONS
JOHNSTON COUNTY ANIMAL PROTECTION LEAGUE INC - PO BOX 607 - SMITHFIELD, NC 27577-0607	56-2278255	501(C)3	6,250.	0.			ADOPTIONS
FRIENDS OF SOUTHERN OCEAN COUNTY ANIMAL SHELTER INC - PO BOX 1162 - MANAHAWKIN, NJ 08050-8162	30-0445803	501(C)3	6,250.	0.			ADOPTIONS
COLUMBUS PET RESCUE PO BOX 34 COLUMBUS, OH 43216-0034	46-1549971	501(C)3	6,250.	0.			ADOPTIONS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LUCAS COUNTY PIT CREW 855 N MCCORD RD TOLEDO, OH 43615-4117	27-4596269	501(C)3	6,250.	0.			ADOPTIONS
RESCUING ANIMALS IN NEED INC 1332 W PAMPA AVE MESA, AZ 85202-8146	26-2738822	501(C)3	6,250.	0.			ADOPTIONS
TEXAS PAWPRINTS PO BOX 600644 DALLAS, TX 75360-0000	20-1146965	501(C)3	6,250.	0.			ADOPTIONS
MIDCOAST HUMANE 190 PLEASANT ST BRUNSWICK, ME 04011-2213	01-6021200	501(C)3	6,000.	0.			ADOPTIONS
COUNTY OF COLLETON PO BOX 157 WALTERBORO, SC 29488-0002	57-6000339	GOVERNMENT	5,750.	0.			ADOPTIONS
WESTERN ARIZONA HUMANE SOCIETY INC 2610 SWEETWATER AVE LAKE HAVASU CITY, AZ 86406-8506	86-0366837	501(C)3	5,750.	0.			ADOPTIONS
SECOND CHANCE COMPANIONS PO BOX 2343 BATTLE GROUND, WA 98604-0000	91-1639509	501(C)3	5,750.	0.			ADOPTIONS
SUN CITIES 4 PAWS RESCUE PO BOX 426 YOUNGTOWN, AZ 85363-0426	86-0822208	501(C)3	5,750.	0.			ADOPTIONS
K9 ROUGE RESCUE 4061 DRUSILLA DR BATON ROUGE, LA 70809-2393	86-2060763	501(C)3	5,750.	0.			ADOPTIONS

Schedule I (Form 990)

Schedule I (Form 990)

PETSMART CHARITIES, INC.

93-1140967

Page 1

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CLP ANIMAL RESCUE INC 2744 SEDGEFIELD AVE DELTONA, FL 32725-2253	87-3420909	501(C)3	5,750.	0.			ADOPTIONS
BARKER RESCUE PROJECT 207 BEATTIE ST SIMPSONVILLE, SC 29681-2503	81-1672278	501(C)3	5,750.	0.			ADOPTIONS
HUMANE SOCIETY OF LAWTON COMANCHE COUNTY - PO BOX 3134 - LAWTON, OK 73502-3134	73-1288816	501(C)3	5,750.	0.			ADOPTIONS
GIVE ME SHELTER PROJECT 47-48 196TH STREET FLUSHING, NY 11358-0000	45-3207025	501(C)3	5,750.	0.			ADOPTIONS
HUMANE SOCIETY OF GREATER DAYTON 1661 NICHOLAS RD DAYTON, OH 45417-6714	31-0537073	501(C)3	5,750.	0.			ADOPTIONS
FOCUS ON FERALS INC PO BOX 274 BRAINARDSVLE, NY 12915-0274	45-1713063	501(C)3	5,750.	0.			ADOPTIONS
HERPHAVEN REPTILE RESCUE AND SANCTUARY - 41 HENNESSEY AVE - BRUNSWICK, ME 04011-2840	82-1770839	501(C)3	5,250.	0.			ADOPTIONS

Schedule I (Form 990)

Part III

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

Part IV

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

PART I, LINE 2:

ORGANIZATIONS RECEIVING GRANTS ARE REQUIRED TO SUBMIT WRITTEN FOLLOW-UP

REPORTS DETAILING HOW THE FUNDS WERE USED AND DOCUMENTING RESULTS AND

IMPACT OF THE PROJECT. ORGANIZATIONS RECEIVING ADOPTION SUPPORT ARE

MONITORED FOR ADOPTION ACTIVITIES CONSISTENT WITH OUR POLICIES AND

PROCEDURES.

SCHEDULE L  
(Form 990)

Transactions With Interested Persons

OMB No. 1545-0047

2023

Open to Public  
Inspection

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c; or Form 990-EZ, Part V, line 38a or 40b.  
Attach to Form 990 or Form 990-EZ.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

Name of the organization <div>PETSMART CHARITIES, INC.</div>	Employer identification number 93-1140967
---	--

**Part I Excess Benefit Transactions** (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only)  
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b; or Form 990-EZ, Part V, line 40b.

1 (a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
			Yes	No
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization \$

**Part II Loans to and/or From Interested Persons**

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
Total						\$						

**Part III Grants or Assistance Benefiting Interested Persons**

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

Part IV

Business Transactions Involving Interested Persons

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1)PETSMART LLC	SUBSTANTIAL CONTRIB	5,863,431.	MANAGEMENT		X
(2)PETSMART LLC	SUBSTANTIAL CONTRIB	4,897,513.	ROYALTY INC		X
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V

Supplemental Information

Provide additional information for responses to questions on Schedule L. See instructions.

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

(A) NAME OF PERSON: PETSMART LLC

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

SUBSTANTIAL CONTRIBUTOR

(D) DESCRIPTION OF TRANSACTION: MANAGEMENT FEE

(A) NAME OF PERSON: PETSMART LLC

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

SUBSTANTIAL CONTRIBUTOR

(D) DESCRIPTION OF TRANSACTION: ROYALTY INCOME

PART IV

THE FEE PAID TO PETSMART LLC IS CAPPED ANNUALLY AND THE VALUE OF THE

USE OF REAL PROPERTY, MANAGEMENT AND ADMINISTRATIVE SERVICES, PRODUCTS

AND SUPPLIES RECEIVED BY PCI UNDER THE AGREEMENT OVERWHELMINGLY EXCEEDS

THE PAYMENTS MADE TO PETSMART LLC, BY A RATIO GREATER THAN 4:1. PCI

INCURRED \$5,863,431 OF EXPENSES UNDER THE MANAGEMENT SERVICES AGREEMENT

WITH PETSMART LLC FOR THE FISCAL YEAR ENDED JANUARY 28, 2024.



SCHEDULE M  
(Form 990)

Noncash Contributions

OMB No. 1545-0047

2023

Open to Public  
Inspection

Department of the Treasury  
Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.  
Attach to Form 990.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization <div>PETSMART CHARITIES, INC.</div>	Employer identification number <div>93-1140967</div>
---	---

Part I	Types of Property	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art .....				
2	Art - Historical treasures .....				
3	Art - Fractional interests .....				
4	Books and publications .....				
5	Clothing and household goods .....				
6	Cars and other vehicles .....				
7	Boats and planes .....				
8	Intellectual property .....				
9	Securities - Publicly traded .....	X	10	578,701.	MARKET VALUE
10	Securities - Closely held stock .....				
11	Securities - Partnership, LLC, or trust interests .....				
12	Securities - Miscellaneous .....				
13	Qualified conservation contribution - Historic structures .....				
14	Qualified conservation contribution - Other ...				
15	Real estate - Residential .....				
16	Real estate - Commercial .....				
17	Real estate - Other .....				
18	Collectibles .....				
19	Food inventory .....				
20	Drugs and medical supplies .....				
21	Taxidermy .....				
22	Historical artifacts .....				
23	Scientific specimens .....				
24	Archeological artifacts .....				
25	Other ( PET SUPPLIES )	X	1	7,753,147.	FAIR VALUE
26	Other ( )				
27	Other ( )				
28	Other ( )				

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

30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? .....	Yes	No
30a			X
b	If "Yes," describe the arrangement in Part II.		
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? .....	X	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? .....		X
b	If "Yes," describe in Part II.		
33	If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		



SCHEDULE O  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.  
Attach to Form 990 or Form 990-EZ.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

2023

Open to Public  
Inspection

Name of the organization	Employer identification number
PETSMART CHARITIES, INC.	93-1140967

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

WHERE COMMUNITIES UNITE IN SUPPORT OF PETS TOGETHER WITH THEIR

FAMILIES. FOUNDED IN 1994, THE ORGANIZATION'S MISSION IS TO MAKE THE

WORLD A BETTER PLACE BY INVESTING IN COMMUNITY PARTNERS THAT ADVOCATE

AND CARE FOR THE WELL-BEING OF PETS AND ALL WHO LOVE THEM. PETSMART

CHARITIES GRANTS MORE MONEY TO DIRECTLY HELP PETS IN NEED THAN ANY

OTHER ANIMAL WELFARE GROUP IN NORTH AMERICA.

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

PETSMART CHARITIES GRANTS MORE MONEY TO DIRECTLY HELP PETS IN NEED THAN

ANY OTHER ANIMAL WELFARE GROUP IN NORTH AMERICA.

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

THREE BOARD MEMBERS SERVING DURING THE FISCAL YEAR, J.K. SYMANCYK, CHERISE

ORDLOCK, AND MIKE SHULTHEIS HAVE A BUSINESS RELATIONSHIP.

FORM 990, PART VI, SECTION A, LINE 3:

PCI HAS A MANAGEMENT SERVICES AGREEMENT WITH PETSMART LLC, ACTING AS A

MANAGEMENT COMPANY, TO COST-EFFECTIVELY OUTSOURCE CERTAIN MANAGEMENT AND

ADMINISTRATIVE FUNCTIONS. PETSMART LLC IS AN UNRELATED ORGANIZATION AS

DEFINED IN THE INSTRUCTIONS OF THE FORM 990. PCI'S BOARD OF DIRECTORS

RETAINS CONTROL OF THE ORGANIZATION'S GOVERNANCE, POLICIES, BUDGETS,

CONTRACT APPROVAL, PROGRAM DIRECTION, AND ALL OTHER MATTERS NECESSARY TO

ACCOMPLISH PCI'S CHARITABLE MISSION AND TO PRESERVE THE TAX-EXEMPT,

INDEPENDENT NATURE OF THE ORGANIZATION. CERTAIN OFFICERS LISTED ON PART VII

Schedule O (Form 990) 2023

Page 2

Name of the organization	Employer identification number
PETSMART CHARITIES, INC.	93-1140967

PROVIDING SERVICES TO THE ORGANIZATION AS FOLLOWS:

	REPORTABLE COMP	OTHER COMP
AIMEE GILBREATH	\$685,182	\$15,143
STEPHANIE JENSEN	\$207,818	\$16,706
JANET HENRY	\$97,222	\$19,479

FORM 990, PART VI, SECTION A, LINE 8B:

THE ORGANIZATION DOES NOT HAVE ANY COMMITTEES THAT HAVE THE AUTHORITY TO  
ACT ON BEHALF OF THE GOVERNING BODY.

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

A DRAFT OF THE FORM 990 IS REVIEWED BY THE AUDIT COMMITTEE OF THE BOARD.  
COMMENTS ARE SOLICITED BEFORE FINALIZING THE DOCUMENT. A COPY OF THE FINAL  
FORM 990 IS DISTRIBUTED TO THE ENTIRE BOARD OF DIRECTORS FOR REVIEW BEFORE  
THE FINAL VERSION IS SUBMITTED TO THE IRS.

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

ALL MEMBERS OF THE BOARD OF DIRECTORS, OFFICERS AND ASSOCIATES WORKING ON  
BEHALF OF THE ORGANIZATION ANNUALLY COMPLETE A CONFLICT OF INTEREST  
DISCLOSURE FORM TO ACKNOWLEDGE RECEIPT OF THE POLICY AND REPORT ANY  
POTENTIAL CONFLICTS OF INTEREST. THE SECRETARY COMPILES A LIST OF POTENTIAL  
CONFLICTS OF INTEREST. THE LIST IS REVIEWED WITH THE GOVERNANCE COMMITTEE  
OF THE BOARD OF DIRECTORS AND APPROPRIATE ACTION IS TAKEN TO MITIGATE RISKS  
OF POTENTIAL CONFLICTS.

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

PCI ENTERED INTO A MANAGEMENT SERVICES AGREEMENT, TO COST-EFFECTIVELY

OUTSOURCE CERTAIN MANAGEMENT AND ADMINISTRATIVE FUNCTIONS, WITH PETSMART LLC, IN WHICH PETSMART LLC ACTED AS A MANAGEMENT COMPANY. ALTHOUGH PCI'S PRESIDENT IS COMPENSATED BY PETSMART LLC, PCI'S BOARD OF DIRECTORS ANNUALLY REVIEWS AND DETERMINES AN APPROPRIATE AMOUNT OF COMPENSATION FOR THE PRESIDENT BASED ON COMPARABILITY DATA, INCLUDING A COMPARISON TO MARKET DATA FOR PEER ORGANIZATIONS, AND CONTEMPORANEOUSLY SUBSTANTIATES THE DELIBERATION AND DECISION. THE APPROVED AMOUNT IS NOT PAID BY PCI TO THE PRESIDENT, BUT IS USED IN COMPUTING THE FEE PAID BY PCI TO PETSMART LLC. THE REVIEW AND APPROVAL PROCESS OCCURS IN ADVANCE OF THE SERVICES PERFORMED BY PETSMART LLC. UNDER THE MANAGEMENT SERVICES AGREEMENT AND IN ADVANCE OF ANY PAYMENT RELATED TO SUCH ARRANGEMENT FOR THE PERIOD IN QUESTION. PROCESS WAS LAST COMPLETED IN FISCAL 2022.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:  
AL,AK,AR,CA,CO,CT,FL,GA,HI,IL,KS,KY,ME,MD,MA,MI,MN,MS,NH,NJ,NM,NY,NC,ND,OH  
OK,OR,PA,RI,SC,TN,UT,VA,WA,WV,DC,NV

FORM 990, PART VI, SECTION C, LINE 19:  
COPIES OF THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST IN EITHER HARD COPY OR ELECTRONIC FORM.

FORM 990, PART XII, LINE 2C:  
THE ORGANIZATION DID NOT CHANGE ITS OVERSIGHT OR SELECTION PROCESS FOR AN INDEPENDENT ACCOUNTANT DURING THE TAX YEAR.

SCHEDULE R  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Related Organizations and Unrelated Partnerships  
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.  
Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public  
Inspection

Name of the organization	PETSMART CHARITIES, INC.	Employer identification number	93-1140967
--------------------------	--------------------------	--------------------------------	------------

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
PETSMART CHARITIES OF CANADA 200-1100 BURLOAK DR. BURLINGTON, ONTARIO, CANADA	CHARITABLE	CANADA	501(C)(3)	LINE 7	PETSMART CHARITIES, INC.	X	



**Part V Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
<b>1</b> During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
<b>a</b> Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity .....	<b>1a</b>	X
<b>b</b> Gift, grant, or capital contribution to related organization(s) .....	<b>1b</b>	X
<b>c</b> Gift, grant, or capital contribution from related organization(s) .....	<b>1c</b>	X
<b>d</b> Loans or loan guarantees to or for related organization(s) .....	<b>1d</b>	X
<b>e</b> Loans or loan guarantees by related organization(s) .....	<b>1e</b>	X
<b>f</b> Dividends from related organization(s) .....	<b>1f</b>	X
<b>g</b> Sale of assets to related organization(s) .....	<b>1g</b>	X
<b>h</b> Purchase of assets from related organization(s) .....	<b>1h</b>	X
<b>i</b> Exchange of assets with related organization(s) .....	<b>1i</b>	X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....	<b>1j</b>	X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....	<b>1k</b>	X
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....	<b>1l</b>	X
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....	<b>1m</b>	X
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....	<b>1n</b>	X
<b>o</b> Sharing of paid employees with related organization(s) .....	<b>1o</b>	X
<b>p</b> Reimbursement paid to related organization(s) for expenses .....	<b>1p</b>	X
<b>q</b> Reimbursement paid by related organization(s) for expenses .....	<b>1q</b>	X
<b>r</b> Other transfer of cash or property to related organization(s) .....	<b>1r</b>	X
<b>s</b> Other transfer of cash or property from related organization(s) .....	<b>1s</b>	X
<b>2</b> If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.		

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) PETSMART CHARITIES OF CANADA	L	95,000.	BOOK
(2) PETSMART CHARITIES OF CANADA	Q	126,975.	BOOK
(3)			
(4)			
(5)			
(6)			



## Schedule R (Form 990) 2023



**2023 DEPRECIATION AND AMORTIZATION REPORT**

FORM 990 PAGE 10

990

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
1	BUILDINGS & BUILDING IMPROVEMENTS	01/30/23		.000	HY	16	6,242,461.				6,242,461.	6,143,975.		0.	6,143,975.
2	MACHINERY & EQUIPMENT			.000	HY	16	1,597,918.				1,597,918.	1,453,406.		0.	1,453,406.
3	FURNITURE & FIXTURES			.000	HY	16	219,509.				219,509.	71,283.		0.	71,283.
	* TOTAL 990 PAGE 10 DEPR						8,059,888.				8,059,888.	7,668,664.		0.	7,668,664.
	CURRENT YEAR ACTIVITY														
	BEGINNING BALANCE						0.			0.	0.	0.			0.
	ACQUISITIONS						8,059,888.			0.	8,059,888.	7,668,664.			7,668,664.
	DISPOSITIONS/RETIRED						0.			0.	0.	0.			0.
	ENDING BALANCE						8,059,888.			0.	8,059,888.	7,668,664.			7,668,664.
	ENDING ACCUM DEPR											7,668,664.			
	ENDING BOOK VALUE											391,224.			

2023 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL -PETSMART CHARITIES, INC.

Asset No.	Description	Date Acquired			Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
1	BUILDINGS & BUILDING IMPROVEMENTS	01	13	23		.000	16	6,242,461.			6,242,461.	6,143,975.		0.
2	MACHINERY & EQUIPMENT					.000	16	1,597,918.			1,597,918.	1,453,406.		0.
3	FURNITURE & FIXTURES					.000	16	219,509.			219,509.	71,283.		0.
	* TOTAL 990 PAGE 10 DEPR							8,059,888.		0.	8,059,888.	7,668,664.		0.
	CURRENT YEAR ACTIVITY													
	BEGINNING BALANCE							0.		0.	0.	0.		
	ACQUISITIONS							8,059,888.		0.	8,059,888.	7,668,664.		
	DISPOSITIONS							0.		0.	0.	0.		
	ENDING BALANCE							8,059,888.		0.	8,059,888.	7,668,664.		

## 2024 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL -

PETSMART CHARITIES, INC.

[illegible]



## 2024 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR STATE -

PETSMART CHARITIES, INC.

[illegible]

Form **8868**  
(Rev. January 2024)

Department of the Treasury  
Internal Revenue Service

**Application for Extension of Time To File an Exempt Organization  
Return or Excise Taxes Related to Employee Benefit Plans**

**File a separate application for each return.**  
**Go to [www.irs.gov/Form8868](http://www.irs.gov/Form8868) for the latest information.**

OMB No. 1545-0047

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

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

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

**Part I - Identification**

<b>Type or Print</b>  <small>File by the due date for filing your return. See instructions.</small>	Name of exempt organization, employer, or other filer, see instructions.  PETSMART CHARITIES, INC.	Taxpayer identification number (TIN)  93-1140967
	Number, street, and room or suite no. If a P.O. box, see instructions. 19601 NORTH 27TH AVENUE	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. PHOENIX, AZ 85027	

Enter the Return Code for the return that this application is for (file a separate application for each return) 01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 4720 (other than individual)	09
Form 4720 (individual)	03	Form 5227	10
Form 990-PF	04	Form 6069	11
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 8870	12
Form 990-T (trust other than above)	06	Form 5330 (individual)	13
Form 990-T (corporation)	07	Form 5330 (other than individual)	14
Form 1041-A	08		

- After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330.
- If this application is for an extension of time to file Form 5330, you must enter the following information.  
Plan Name \_\_\_\_\_  
Plan Number \_\_\_\_\_  
Plan Year Ending (MM/DD/YYYY) \_\_\_\_\_

**Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions)**

The books are in the care of STEPHANIE JENSEN  
19601 NORTH 27TH AVENUE - PHOENIX, AZ 85027

Telephone No. 800-423-7387 Fax No. \_\_\_\_\_

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until DECEMBER 16, 2024, to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
☐ calendar year 20 \_\_\_\_ or  
☒ tax year beginning JAN 30, 2023, and ending JAN 28, 2024

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

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

**For Privacy Act and Paperwork Reduction Act Notice, see instructions.** Form **8868** (Rev. 1-2024)