

Form **8868**
(Rev. January 2025)

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 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.

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

| | | |
|-----------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|
| Type or Print <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 | Form 990-T (governmental entities) | 15 |

- 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 15, 2025, 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 29, 2024, and ending FEB 2, 2025

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 Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. | 3c | \$ | 0. |

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8868** (Rev. 1-2025)

** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form 990

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 for instructions and the latest information.

2024
Open to Public Inspection

A For the 2024 calendar year, or tax year beginning JAN 29, 2024 and ending FEB 2, 2025

| | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|
| B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending | C Name of organization PETSMART CHARITIES, INC. | | D Employer identification number 93-1140967 |
| | Doing business as | | E Telephone number 800-423-7387 |
| | Number and street (or P.O. box if mail is not delivered to street address) | Room/suite | |
| | 19601 NORTH 27TH AVENUE | | |
| | City or town, state or province, country, and ZIP or foreign postal code PHOENIX, AZ 85027 | | G Gross receipts \$ 76,272,746. |
| F Name and address of principal officer: AIMEE GILBREATH SAME AS C ABOVE | | H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number | |
| I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527 | | | |
| J Website: WWW.PETSMARTCHARITIES.ORG | | | |
| K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other | | L Year of formation: 1994 | M State of legal domicile: AZ |

| | | | |
|--------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|--------------------------|
| Part I Summary | | | |
| Activities & Governance | 1 Briefly describe the organization's mission or most significant activities: PETSMART CHARITIES, INC. (PCI) IS A NONPROFIT ANIMAL WELFARE ORGANIZATION THAT ENVISIONS A WORLD | | |
| | 2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. | | |
| | 3 Number of voting members of the governing body (Part VI, line 1a) | 3 | 9 |
| | 4 Number of independent voting members of the governing body (Part VI, line 1b) | 4 | 7 |
| | 5 Total number of individuals employed in calendar year 2024 (Part V, line 2a) | 5 | 0 |
| | 6 Total number of volunteers (estimate if necessary) | 6 | 12 |
| | 7a Total unrelated business revenue from Part VIII, column (C), line 12 | 7a | 0. |
| | b Net unrelated business taxable income from Form 990-T, Part I, line 11 | 7b | 0. |
| Revenue | 8 Contributions and grants (Part VIII, line 1h) | Prior Year 55,060,070. | Current Year 62,253,444. |
| | 9 Program service revenue (Part VIII, line 2g) | 95,000. | 100,000. |
| | 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) | 1,517,956. | 2,418,906. |
| | 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 5,211,683. | 3,961,980. |
| | 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 61,884,709. | 68,734,330. |
| | Expenses | 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) | 44,241,185. |
| 14 Benefits paid to or for members (Part IX, column (A), line 4) | | 0. | 0. |
| 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | | 0. | 0. |
| 16a Professional fundraising fees (Part IX, column (A), line 11e) | | 0. | 0. |
| b Total fundraising expenses (Part IX, column (D), line 25) | | 2,113,036. | |
| 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | | 16,151,596. | 17,536,475. |
| 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | 60,392,781. | 65,314,935. | |
| 19 Revenue less expenses. Subtract line 18 from line 12 | 1,491,928. | 3,419,395. | |
| Net Assets or Fund Balances | 20 Total assets (Part X, line 16) | Beginning of Current Year 81,244,570. | End of Year 90,251,267. |
| | 21 Total liabilities (Part X, line 26) | 3,728,741. | 4,064,772. |
| | 22 Net assets or fund balances. Subtract line 21 from line 20 | 77,515,829. | 86,186,495. |

| | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|-------------------------------------------|-------------------------------------------------------------------|
| Part II Signature Block | | | |
| Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. | | | |
| Sign Here | Signature of officer <i>Aimee Gilbreath</i> | | Date 8/20/2025 |
| | AIMEE GILBREATH, PRESIDENT Type or print name and title | | Date |
| Paid Preparer Use Only | Preparer's name JACQUELINE ECKMAN | Preparer's signature JACQUELINE ECKMAN | Date 08/19/25 |
| | Firm's name CLIFTONLARSONALLEN LLP | Firm's EIN 41-0746749 | Check if self-employed <input type="checkbox"/> PTIN P01300648 |
| Firm's address 20 EAST THOMAS ROAD, SUITE 2300 PHOENIX, AZ 85012 | | Phone no. (602) 266-2248 | |

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 \$ 27,102,921. including grants of \$ 19,076,854.) (Revenue \$ 66,100.)
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 2024, WE PARTNERED WITH OVER
2,000 ANIMAL WELFARE GROUPS ACROSS THE UNITED STATES TO HELP 378,000
PETS FIND HOMES THROUGH OUR IN-STORE ADOPTION PROGRAM IN OVER 1,500
PETSMART STORES. WE ALSO SUPPORTED THE TRANSPORT OF OVER 40,000 PETS TO
AREAS WHERE THEY HAD A BETTER CHANCE OF BEING ADOPTED.

4b

(Code:) (Expenses \$ 34,065,626. including grants of \$ 28,701,606.) (Revenue \$ 33,900.)
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 2024, WE PARTNERED WITH HUMAN SERVICES
AGENCIES TO DONATE OVER \$11M IN PET FOOD (68 MILLION MEALS) TO SUPPORT
THOSE FACING PET FOOD INSECURITY. WE INVESTED \$15.3M IN GRANTS TO FUND
PROGRAMS THAT SUPPORT ACCESSIBLE VETERINARY MEDICINE MODELS THAT BRING
MORE AFFORDABLE VET CARE INTO COMMUNITIES. WE ALSO GRANTED OVER \$1M TO
SUPPORT DISASTER RESPONSE DURING 12 MAJOR NATURAL DISASTERS TO HELP AN
ESTIMATED 25,000 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 61,168,547.

Form 990 (2024)

432002 12-10-24

3

09520819 131839 A223876

2024.04010 PETSMART CHARITIES, INC. A2238761

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

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

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

| | Yes | No |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable | 1a | 20 |
| b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable | 1b | 0 |
| c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 1c | X |

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

| | | Yes | No |
|-----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return | 2a | 0 |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | X |
| b | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O | 3b | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | X |
| b | If "Yes," enter the name of the foreign country CANADA See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | X |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | X |
| c | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | 5c | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? | 6a | X |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | 6b | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | |
| a | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | 7a | X |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | |
| c | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | 7c | X |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | 7d | |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | X |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | X |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 7h | |
| 8 | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? | 8 | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | |
| a | Did the sponsoring organization make any taxable distributions under section 4966? | 9a | |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | |
| 10 | Section 501(c)(7) organizations. Enter: | | |
| a | Initiation fees and capital contributions included on Part VIII, line 12 | 10a | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | 10b | |
| 11 | Section 501(c)(12) organizations. Enter: | | |
| a | Gross income from members or shareholders | 11a | |
| b | Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) | 11b | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | 12b | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | |
| a | Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O. | 13a | |
| 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 | 13b | |
| c | Enter the amount of reserves on hand | 13c | |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | X |
| b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O | 14b | |
| 15 | Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N. | 15 | X |
| 16 | Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O. | 16 | X |
| 17 | Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069. | 17 | |

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

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

Section A. Governing Body and Management

| | | Yes | No |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-----|----|
| 1a Enter the number of voting members of the governing body at the end of the tax year | 1a 9 | | |
| If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. | | | |
| b Enter the number of voting members included on line 1a, above, who are independent | 1b 7 | | |
| 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? | 2 | X | |
| 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? | 3 | X | |
| 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | X |
| 5 Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | X |
| 6 Did the organization have members or stockholders? | 6 | | X |
| 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? | 7a | | X |
| b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? | 7b | | X |
| 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | |
| a The governing body? | 8a | X | |
| b Each committee with authority to act on behalf of the governing body? | 8b | | X |
| 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O | 9 | | X |

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

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

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 (LEFT 09/2024) | 2.00 0.00 | X | | X | | | | 0. | 0. | 0. |
| (2) NEAL LITVACK CHAIR | 2.00 0.00 | X | | X | | | | 0. | 0. | 0. |
| (3) BEN JACOBS DIRECTOR | 2.00 0.00 | X | | | | | | 0. | 0. | 0. |
| (4) CHERISE ORDLOCK DIRECTOR | 2.00 0.00 | X | | | | | | 0. | 0. | 0. |
| (5) DAWN WILLOUGHBY DIRECTOR | 2.00 0.00 | X | | | | | | 0. | 0. | 0. |
| (6) DEBO MUKHERJEE DIRECTOR | 2.00 0.00 | X | | | | | | 0. | 0. | 0. |
| (7) ELLIOTT FRANCIS DIRECTOR | 2.00 0.00 | X | | | | | | 0. | 0. | 0. |
| (8) LISA ROJAS BACUS DIRECTOR | 2.00 0.00 | X | | | | | | 0. | 0. | 0. |
| (9) MANJIT SINGH DIRECTOR | 2.00 0.00 | X | | | | | | 0. | 0. | 0. |
| (10) MARK STETTER DIRECTOR (LEFT 11/2024) | 2.00 0.00 | X | | | | | | 0. | 0. | 0. |
| (11) MIKE SCHULTHEIS DIRECTOR (LEFT 02/2024) | 2.00 0.00 | X | | | | | | 0. | 0. | 0. |
| (12) MONICA HUBBARD DIRECTOR | 2.00 0.00 | X | | | | | | 0. | 0. | 0. |
| (13) AIMEE GILBREATH PRESIDENT | 40.00 0.00 | | | X | | | | 0. | 0. | 0. |
| (14) STEPHANIE JENSEN TREASURER | 40.00 0.00 | | | X | | | | 0. | 0. | 0. |
| (15) JANET HENRY SECRETARY | 40.00 0.00 | | | 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) | (B) | (C) | (D) |
|---------------------------------------------------------------|-------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|---------------|------------------------------------|----------------------------|----------------------------------------------------|
| | | | | Total revenue | Related or exempt function revenue | Unrelated business revenue | Revenue excluded from tax under sections 512 - 514 |
| Contributions, Gifts, Grants and Other Similar Amounts | 1 a | Federated campaigns | 1a | 91,858. | | | |
| | b | Membership dues | 1b | | | | |
| | c | Fundraising events | 1c | | | | |
| | d | Related organizations | 1d | | | | |
| | e | Government grants (contributions) | 1e | | | | |
| | f | All other contributions, gifts, grants, and similar amounts not included above ... | 1f | 62,161,586. | | | |
| | g | Noncash contributions included in lines 1a-1f | 1g | \$ 8,106,864. | | | |
| | h | Total. Add lines 1a-1f | | 62,253,444. | | | |
| Program Service Revenue | 2 a | MANAGEMENT FEE INCOME | Business Code | 900099 | 100,000. | 100,000. | |
| | b | | | | | | |
| | c | | | | | | |
| | d | | | | | | |
| | e | | | | | | |
| | f | All other program service revenue | | | | | |
| | g | Total. Add lines 2a-2f | | 100,000. | | | |
| | Other Revenue | 3 | Investment income (including dividends, interest, and other similar amounts) | | 1,493,973. | | |
| 4 | | Income from investment of tax-exempt bond proceeds | | | | | |
| 5 | | Royalties | | 3,961,980. | | | 3,961,980. |
| 6 a | | Gross rents | (i) Real | (ii) Personal | | | |
| b | | Less: rental expenses ... | | | | | |
| c | | Rental income or (loss) | | | | | |
| d | | Net rental income or (loss) | | | | | |
| 7 a | | Gross amount from sales of assets other than inventory | (i) Securities | (ii) Other | | | |
| b | | Less: cost or other basis and sales expenses | | | | | |
| c | | Gain or (loss) | | | | | |
| d | | Net gain or (loss) | | | | | |
| 8 a | | Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 | | | | | |
| b | | Less: direct expenses | | | | | |
| c | | Net income or (loss) from fundraising events | | | | | |
| 9 a | | Gross income from gaming activities. See Part IV, line 19 | | | | | |
| b | Less: direct expenses | | | | | | |
| c | Net income or (loss) from gaming activities | | | | | | |
| 10 a | Gross sales of inventory, less returns and allowances | | | | | | |
| b | Less: cost of goods sold | | | | | | |
| c | Net income or (loss) from sales of inventory | | | | | | |
| Miscellaneous Revenue | 11 a | | Business Code | | | | |
| | b | | | | | | |
| | c | | | | | | |
| | d | All other revenue | | | | | |
| | e | Total. Add lines 11a-11d | | | | | |
| | 12 | Total revenue. See instructions | | 68,734,330. | 100,000. | 0. | 6,380,886. |

Form 990 (2024)

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 ☐

| | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------------------------|----------------------------------------|-----------------------------|
| <i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i> | | | | |
| 1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ... | 47,778,460. | 47,778,460. | | |
| 2 Grants and other assistance to domestic individuals. See Part IV, line 22 | | | | |
| 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 | | | | |
| 4 Benefits paid to or for members | | | | |
| 5 Compensation of current officers, directors, trustees, and key employees | | | | |
| 6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | | | | |
| 7 Other salaries and wages | | | | |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | | | | |
| 9 Other employee benefits | | | | |
| 10 Payroll taxes | | | | |
| 11 Fees for services (nonemployees): | | | | |
| a Management | 6,500,000. | 5,782,090. | 466,015. | 251,895. |
| b Legal | 19,284. | | 19,284. | |
| c Accounting | 51,614. | | 51,614. | |
| d Lobbying | | | | |
| e Professional fundraising services. See Part IV, line 17 | | | | |
| f Investment management fees | 234,703. | | 234,703. | |
| g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.) | 1,594,947. | 995,862. | 599,085. | |
| 12 Advertising and promotion | 2,029,601. | 739,430. | 363,069. | 927,102. |
| 13 Office expenses | 1,057,885. | 768,810. | 160,698. | 128,377. |
| 14 Information technology | 1,229,970. | 1,075,297. | 66,316. | 88,357. |
| 15 Royalties | | | | |
| 16 Occupancy | | | | |
| 17 Travel | 328,796. | 315,980. | 8,916. | 3,900. |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials ... | | | | |
| 19 Conferences, conventions, and meetings | 230,612. | 188,735. | 41,702. | 175. |
| 20 Interest | | | | |
| 21 Payments to affiliates | | | | |
| 22 Depreciation, depletion, and amortization | 111,390. | 89,440. | 21,950. | |
| 23 Insurance | | | | |
| 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) | | | | |
| a DONATED PET SUPPLIES | 3,388,301. | 3,388,301. | | |
| b BANK FEES | 713,230. | | | 713,230. |
| c EQUIPMENT RENTAL | 46,142. | 46,142. | | |
| d _____ | | | | |
| e All other expenses _____ | | | | |
| 25 Total functional expenses. Add lines 1 through 24e | 65,314,935. | 61,168,547. | 2,033,352. | 2,113,036. |
| 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) | | | | |

Part X Balance Sheet

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

| | | (A) Beginning of year | | (B) End of year |
|----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------|--------------------|
| Assets | 1 Cash - non-interest-bearing | 21,532,448. | 1 | 22,934,811. |
| | 2 Savings and temporary cash investments | 73,958. | 2 | 1,155,545. |
| | 3 Pledges and grants receivable, net | | 3 | |
| | 4 Accounts receivable, net | 7,348,714. | 4 | 7,839,423. |
| | 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons | | 5 | |
| | 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) | | 6 | |
| | 7 Notes and loans receivable, net | | 7 | |
| | 8 Inventories for sale or use | | 8 | |
| | 9 Prepaid expenses and deferred charges | 273,644. | 9 | 498,336. |
| | 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 10a 7,098,874. | | |
| | b Less: accumulated depreciation | 10b 6,813,036. | | |
| | | 391,224. | 10c | 285,838. |
| | 11 Investments - publicly traded securities | 51,624,582. | 11 | 57,537,314. |
| | 12 Investments - other securities. See Part IV, line 11 | | 12 | |
| | 13 Investments - program-related. See Part IV, line 11 | | 13 | |
| | 14 Intangible assets | | 14 | |
| 15 Other assets. See Part IV, line 11 | | 15 | | |
| 16 Total assets. Add lines 1 through 15 (must equal line 33) | 81,244,570. | 16 | 90,251,267. | |
| Liabilities | 17 Accounts payable and accrued expenses | 3,171,741. | 17 | 3,339,272. |
| | 18 Grants payable | 557,000. | 18 | 725,500. |
| | 19 Deferred revenue | | 19 | |
| | 20 Tax-exempt bond liabilities | | 20 | |
| | 21 Escrow or custodial account liability. Complete Part IV of Schedule D | | 21 | |
| | 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons | | 22 | |
| | 23 Secured mortgages and notes payable to unrelated third parties | | 23 | |
| | 24 Unsecured notes and loans payable to unrelated third parties | | 24 | |
| | 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D | | 25 | |
| | 26 Total liabilities. Add lines 17 through 25 | 3,728,741. | 26 | 4,064,772. |
| Net Assets or Fund Balances | Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> | | | |
| | and complete lines 27, 28, 32, and 33. | | | |
| | 27 Net assets without donor restrictions | 76,221,335. | 27 | 84,361,832. |
| | 28 Net assets with donor restrictions | 1,294,494. | 28 | 1,824,663. |
| | Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> | | | |
| | and complete lines 29 through 33. | | | |
| | 29 Capital stock or trust principal, or current funds | | 29 | |
| | 30 Paid-in or capital surplus, or land, building, or equipment fund | | 30 | |
| | 31 Retained earnings, endowment, accumulated income, or other funds | | 31 | |
| 32 Total net assets or fund balances | 77,515,829. | 32 | 86,186,495. | |
| 33 Total liabilities and net assets/fund balances | 81,244,570. | 33 | 90,251,267. | |

Form **990** (2024)

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 | 68,734,330. |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 65,314,935. |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | 3,419,395. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) | 4 | 77,515,829. |
| 5 | Net unrealized gains (losses) on investments | 5 | 4,607,594. |
| 6 | Donated services and use of facilities | 6 | |
| 7 | Investment expenses | 7 | |
| 8 | Prior period adjustments | 8 | |
| 9 | Other changes in net assets or fund balances (explain on Schedule O) | 9 | 643,677. |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) | 10 | 86,186,495. |

Part XII Financial Statements and Reporting

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

| | Yes | No |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other | | |
| If the organization changed its method of accounting from a prior year or checked "Other," explain 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: | | |
| <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | | |
| 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: | | |
| <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | | |
| c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? | 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 (2024)

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 for instructions and the latest information.

OMB No. 1545-0047

2024

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

432021 01-14-25

Schedule A (Form 990) 2024

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) 2020 | (b) 2021 | (c) 2022 | (d) 2023 | (e) 2024 | (f) Total |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------|-------------|-------------|-------------|--------------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | 59,396,223. | 65,207,466. | 59,943,482. | 55,060,070. | 62,253,444. | 301,860,685. |
| 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge ... | | | | | | |
| 4 Total. Add lines 1 through 3 | 59,396,223. | 65,207,466. | 59,943,482. | 55,060,070. | 62,253,444. | 301,860,685. |
| 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | 32,559,818. |
| 6 Public support. Subtract line 5 from line 4. | | | | | | 269,300,867. |

Section B. Total Support

| Calendar year (or fiscal year beginning in) | (a) 2020 | (b) 2021 | (c) 2022 | (d) 2023 | (e) 2024 | (f) Total |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------|-------------|-------------|-------------|--------------|
| 7 Amounts from line 4 | 59,396,223. | 65,207,466. | 59,943,482. | 55,060,070. | 62,253,444. | 301,860,685. |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ... | 2,740,817. | 4,946,966. | 6,697,980. | 6,498,280. | 5,455,953. | 26,339,996. |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on ... | | | | | | |
| 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | | | |
| 11 Total support. Add lines 7 through 10 | | | | | | 328,200,681. |
| 12 Gross receipts from related activities, etc. (see instructions) | | | | | 12 | 480,000. |
| 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

| | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------|-------------------------------------|
| 14 Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f)) | 14 | 82.05 | % |
| 15 Public support percentage from 2023 Schedule A, Part II, line 14 | 15 | 81.79 | % |
| 16a 33 1/3% support test - 2024. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization | | | |
| | | | <input checked="" type="checkbox"/> |
| b 33 1/3% support test - 2023. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization | | | |
| | | | <input type="checkbox"/> |
| 17a 10% -facts-and-circumstances test - 2024. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization | | | |
| | | | <input type="checkbox"/> |
| b 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization | | | |
| | | | <input type="checkbox"/> |
| 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions | | | |
| | | | <input type="checkbox"/> |

Schedule A (Form 990) 2024

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) 2020 | (b) 2021 | (c) 2022 | (d) 2023 | (e) 2024 | (f) Total |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------|----------|----------|----------|-----------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | | | | | | |
| 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 6 Total. Add lines 1 through 5 | | | | | | |
| 7a Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | |
| b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | | |
| c Add lines 7a and 7b | | | | | | |
| 8 Public support. (Subtract line 7c from line 6.) | | | | | | |

Section B. Total Support

| Calendar year (or fiscal year beginning in) | (a) 2020 | (b) 2021 | (c) 2022 | (d) 2023 | (e) 2024 | (f) Total |
|--------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------|----------|----------|----------|-----------|
| 9 Amounts from line 6 | | | | | | |
| 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | | | | | | |
| b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| c Add lines 10a and 10b | | | | | | |
| 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on | | | | | | |
| 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | | | |
| 13 Total support. (Add lines 9, 10c, 11, and 12.) | | | | | | |

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

Section C. Computation of Public Support Percentage

| | | |
|---------------------------------------------------------------------------------------------------------|-----------|---|
| 15 Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f)) | 15 | % |
| 16 Public support percentage from 2023 Schedule A, Part III, line 15 | 16 | % |

Section D. Computation of Investment Income Percentage

| | | |
|---------------------------------------------------------------------------------------------------------------------|-----------|---|
| 17 Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f)) | 17 | % |
| 18 Investment income percentage from 2023 Schedule A, Part III, line 17 | 18 | % |

19a 33 1/3% support tests - 2024. 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 - 2023. 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 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i> | | |
| 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i> | | |
| 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i> | | |
| b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i> | | |
| c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i> | | |
| 4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i> | | |
| b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i> | | |
| c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i> | | |
| 5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i> | | |
| b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? | | |
| c Substitutions only. Was the substitution the result of an event beyond the organization's control? | | |
| 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i> | | |
| 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i> | | |
| 8 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> | | |
| 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i> | | |
| b Did one or more disqualified persons (as defined 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> | | |
| c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i> | | |
| 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i> | | |
| b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i> | | |

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

| | Yes | No |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? 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. | | |
| 1 | | |
| 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization. | | |
| 2 | | |

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

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

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

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

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

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

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

Schedule A (Form 990) 2024

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

| Section D - Distributions | | Current Year |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|--------------|
| 1 Amounts paid to supported organizations to accomplish exempt purposes | 1 | |
| 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity | 2 | |
| 3 Administrative expenses paid to accomplish exempt purposes of supported organizations | 3 | |
| 4 Amounts paid to acquire exempt-use assets | 4 | |
| 5 Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>) | 5 | |
| 6 Other distributions (describe in Part VI). See instructions. | 6 | |
| 7 Total annual distributions. Add lines 1 through 6. | 7 | |
| 8 Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions. | 8 | |
| 9 Distributable amount for 2024 from Section C, line 6 | 9 | |
| 10 Line 8 amount divided by line 9 amount | 10 | |

| Section E - Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributions Pre-2024 | (iii) Distributable Amount for 2024 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|----------------------------------------|-------------------------------------------|
| 1 Distributable amount for 2024 from Section C, line 6 | | | |
| 2 Underdistributions, if any, for years prior to 2024 (reasonable cause required - <i>explain in Part VI</i>). See instructions. | | | |
| 3 Excess distributions carryover, if any, to 2024 | | | |
| a From 2019 | | | |
| b From 2020 | | | |
| c From 2021 | | | |
| d From 2022 | | | |
| e From 2023 | | | |
| f Total of lines 3a through 3e | | | |
| g Applied to under distributions of prior years | | | |
| h Applied to 2024 distributable amount | | | |
| i Carryover from 2019 not applied (see instructions) | | | |
| j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. | | | |
| 4 Distributions for 2024 from Section D, line 7: \$ | | | |
| a Applied to underdistributions of prior years | | | |
| b Applied to 2024 distributable amount | | | |
| c Remainder. Subtract lines 4a and 4b from line 4. | | | |
| 5 Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions. | | | |
| 6 Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions. | | | |
| 7 Excess distributions carryover to 2025. Add lines 3j and 4c. | | | |
| 8 Breakdown of line 7: | | | |
| a Excess from 2020 | | | |
| b Excess from 2021 | | | |
| c Excess from 2022 | | | |
| d Excess from 2023 | | | |
| e Excess from 2024 | | | |

Schedule A (Form 990) 2024

Schedule B
(Form 990)

(Rev. December 2024)
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 for the latest information.

OMB No. 1545-0047

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

Organization type (check one):

Filers of:

Section:

- Form 990 or 990-EZ

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

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

☐ 527 political organization
- Form 990-PF

☐ 501(c)(3) exempt private foundation

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

☐ 501(c)(3) taxable private foundation

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

General Rule

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

Special Rules

- ☒

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), 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 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 |
| | | | |
| | | | |
| | | | |

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

\$

Part III

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

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

b ☐ Scholarly research

c ☐ Preservation for future generations

d ☐ Loan or exchange program

e ☐ Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☒ No

Part IV

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

- 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☒ No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | |
|---------------------------------|--------|
| | Amount |
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☒ No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided 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 |
| 1a Beginning of year balance | | | | | |
| b Contributions | | | | | |
| c Net investment earnings, gains, and losses | | | | | |
| d Grants or scholarships | | | | | |
| e Other expenditures for facilities and programs | | | | | |
| f Administrative expenses | | | | | |
| g End of year balance | | | | | |
- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %

b Permanent endowment _____ %

c Term endowment _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- (i) Unrelated organizations?

| | | |
|-------|-----|----|
| | Yes | No |
| 3a(i) | | |

(ii) Related organizations?

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

| | | |
|----|-----|----|
| | Yes | No |
| 3b | | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI

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

| Description of property | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|------------------------------------------------------------------------------------------------|--------------------------------------|---------------------------------|------------------------------|----------------|
| 1a Land | | | | |
| b Buildings | | | | |
| c Leasehold improvements | | 6,032,794. | 5,976,009. | 56,785. |
| d Equipment | | 846,571. | 743,793. | 102,778. |
| e Other | | 219,509. | 93,234. | 126,275. |
| Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B)) | | | | 285,838. |

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.

| | | | |
|----------|-------------------------------------------------------------------------------------------------------------|-----------|-------------|
| 1 | Total revenue, gains, and other support per audited financial statements | 1 | 92,335,985. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | |
| a | Net unrealized gains (losses) on investments | 2a | 4,607,594. |
| b | Donated services and use of facilities | 2b | 18,685,087. |
| c | Recoveries of prior year grants | 2c | |
| d | Other (Describe in Part XIII.) | 2d | 643,677. |
| e | Add lines 2a through 2d | 2e | 23,936,358. |
| 3 | Subtract line 2e from line 1 | 3 | 68,399,627. |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | 234,703. |
| b | Other (Describe in Part XIII.) | 4b | 100,000. |
| c | Add lines 4a and 4b | 4c | 334,703. |
| 5 | Total revenue. Add lines 3 and 4c . <i>(This must equal Form 990, Part I, line 12.)</i> | 5 | 68,734,330. |

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

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

| | | | |
|----------|--------------------------------------------------------------------------------------------------------------|-----------|-------------|
| 1 | Total expenses and losses per audited financial statements | 1 | 83,665,319. |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | |
| a | Donated services and use of facilities | 2a | 18,685,087. |
| b | Prior year adjustments | 2b | |
| c | Other losses | 2c | |
| d | Other (Describe in Part XIII.) | 2d | |
| e | Add lines 2a through 2d | 2e | 18,685,087. |
| 3 | Subtract line 2e from line 1 | 3 | 64,980,232. |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | 234,703. |
| b | Other (Describe in Part XIII.) | 4b | 100,000. |
| c | Add lines 4a and 4b | 4c | 334,703. |
| 5 | Total expenses. Add lines 3 and 4c . <i>(This must equal Form 990, Part I, line 18.)</i> | 5 | 65,314,935. |

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 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 FEBRUARY 2, 2025 AND JANUARY 28, 2024, THERE WERE NO UNCERTAIN TAX POSITIONS, AND THE ORGANIZATION DOES NOT ANTICIPATE A CHANGE IN ITS TAX POSITION IN THE 12 MONTHS FOLLOWING FEBRUARY 2, 2025.

PART XI, LINE 2D - OTHER ADJUSTMENTS:
CHANGE IN VALUE OF BENEFICIAL INTEREST 643,677.

PART XI, LINE 4B - OTHER ADJUSTMENTS:
CANADA MANAGEMENT FEE 100,000.

**SCHEDULE I
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

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

Attach to Form 990.

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

OMB No. 1545-0047

**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.

| 1 (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 noncash assistance | (h) Purpose of grant or assistance |
|-------------------------------------------------------------------------------------------------------------------------|----------------|----------------------------------------|---------------------------------|-----------------------------------------|--------------------------------------------------------------|----------------------------------------------|-----------------------------------------------|
| GREATER GOOD CHARITIES 301 UNION ST UNIT 21308 SEATTLE, WA 98111-1614 | 20-4846675 | 501(C)3 | 205,000. | 4,528,681. | FMV | PET SUPPLIES | PET SUPPLIES, TRANSPORT, DISASTER RESPONSE |
| 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 |
| EMANCIPET 7010 EASY WIND DR STE 260 AUSTIN, TX 78752-2423 | 74-2913624 | 501(C)3 | 735,155. | 0. | | | ACCESS TO CARE |
| LOUISIANA SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS - 1700 MARDI GRAS BLVD - NEW ORLEANS, LA 70114-4621 | 72-0471368 | 501(C)3 | 485,000. | 0. | | | ACCESS TO CARE, ADOPTIONS |
| HOUSTON HUMANE SOCIETY 14700 ALMEDA RD HOUSTON, TX 77053-4930 | 74-1340341 | 501(C)3 | 457,500. | 0. | | | ACCESS TO CARE, DISASTER RESPONSE |

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

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

Schedule I (Form 990) (Rev. 12-2024)

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 FORT WAYNE INC 4914 HANNA ST FORT WAYNE, IN 46806-3127 | 35-6042135 | 501(C)3 | 455,000. | 0. | | | ACCESS TO CARE, ADOPTIONS |
| EAST BAY SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS - 8323 BALDWIN ST - OAKLAND, CA 94621-1925 | 94-1322202 | 501(C)3 | 450,000. | 0. | | | ACCESS TO CARE |
| ANIMAL WELFARE SOCIETY OF SOUTH FLORIDA INC - 2601 SW 27TH AVE - MIAMI, FL 33133-3004 | 59-1557645 | 501(C)3 | 450,000. | 0. | | | ACCESS TO CARE |
| COMMUNITY SPAY NEUTER INITIATIVE PARTNERSHIP C-SNIP - 1300 WALKER VILLAGE DR NW - GRAND RAPIDS, MI 49534-0000 | 38-3463298 | 501(C)3 | 450,000. | 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 | 450,000. | 0. | | | ACCESS TO CARE |
| CAPITAL HUMANE SOCIETY 2320 PARK BLVD LINCOLN, NE 68502-3327 | 47-0376622 | 501(C)3 | 450,000. | 0. | | | ACCESS TO CARE |
| COMMUNITY ANIMAL MEDICINE PROJECT 957 N GAFFEY ST SAN PEDRO, CA 90731-1421 | 20-8542566 | 501(C)3 | 400,000. | 0. | | | ACCESS TO CARE, DISASTER RESPONSE |
| PHILADELPHIA ANIMAL WELFARE SOCIETY - 100 N 2ND ST - PHILADELPHIA, PA 19106-1902 | 26-3862631 | 501(C)3 | 382,000. | 0. | | | ACCESS TO CARE, ADOPTIONS |
| ARIZONA HUMANE SOCIETY 1521 W DOBBINS RD PHOENIX, AZ 85041-8200 | 86-0135567 | 501(C)3 | 380,000. | 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 |
|----------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| SECOND CHANCE ANIMAL SERVICES INC 111 YOUNG RD E BROOKFIELD, MA 01515-1801 | 04-3490671 | 501(C)3 | 380,000. | 0. | | | ACCESS TO CARE, ADOPTIONS |
| MICHIGAN HUMANE SOCIETY 2937 E GRAND BLVD SUITE 800 DETROIT, MI 48202-3149 | 38-1358206 | 501(C)3 | 355,000. | 0. | | | ACCESS TO CARE, ADOPTIONS |
| ANIMAL HUMANE SOCIETY 845 MEADOW LN N MINNEAPOLIS, MN 55422-4831 | 41-0693842 | 501(C)3 | 350,000. | 0. | | | ACCESS TO CARE |
| BRIDGE CLINIC INC 1 DECLARATION DR UNIT 2 BENSALEM, PA 19020-1839 | 46-1158857 | 501(C)3 | 350,000. | 0. | | | ACCESS TO CARE |
| LOW COST ANIMAL MEDICAL CENTER 4300 WASHINGTON AVE NEW ORLEANS, LA 70125-1843 | 47-2883629 | 501(C)3 | 350,000. | 0. | | | ACCESS TO CARE |
| VIRGINIA BEACH SPCA 3040 HOLLAND RD VIRGINIA BCH, VA 23453-2610 | 54-6061532 | 501(C)3 | 350,000. | 0. | | | ACCESS TO CARE |
| PETS LOW COST SPAY AND NEUTER CLINIC - PO BOX 4669 - WICHITA FALLS, TX 76308-0669 | 68-0648159 | 501(C)3 | 350,000. | 0. | | | ACCESS TO CARE |
| IDAHO HUMANE SOCIETY INC 1300 S BIRD ST BOISE, ID 83709-1556 | 82-0212536 | 501(C)3 | 350,000. | 0. | | | ACCESS TO CARE |
| FIRST COAST NO MORE HOMELESS PETS INC - 6817 NORWOOD AVE - JACKSONVILLE, FL 32208-4481 | 01-0709158 | 501(C)3 | 350,000. | 0. | | | ACCESS TO CARE |

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 |
|--------------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|--------------------------------------------|
| KALAMAZOO COUNTY HUMANE SOCIETY 2272 RIVER ST KALAMAZOO, MI 49048-9581 | 38-1474932 | 501(C)3 | 350,000. | 0. | | | ACCESS TO CARE |
| LAST CHANCE ANIMAL RESCUE INC PO BOX 1670 WHITE PLAINS, MD 20695-1670 | 52-2328626 | 501(C)3 | 345,000. | 0. | | | ADOPTIONS, TRANSPORT |
| COLORADO STATE UNIVERSITY FOUNDATION - 300 UNIV SERVICES CTR - FORT COLLINS, CO 80523-0001 | 23-7098397 | 501(C)3 | 306,808. | 0. | | | ACCESS TO CARE |
| NATIVE AMERICA HUMANE SOCIETY 125 N LUCIA AVE REDONDO BEACH, CA 90277-3219 | 46-5445818 | 501(C)3 | 300,000. | 0. | | | ACCESS TO CARE |
| LUCKY DOG ANIMAL RESCUE 5159 LANGSTON BLVD ARLINGTON, VA 22207-1603 | 30-0559037 | 501(C)3 | 292,000. | 0. | | | ADOPTIONS, TRANSPORT, DISASTER RESPONSE |
| HUMANE SOCIETY OF GREATER KANSAS CITY - 5445 PARALLEL PKWY - KANSAS CITY, KS 66104-3047 | 48-0581965 | 501(C)3 | 278,000. | 0. | | | ACCESS TO CARE, ADOPTIONS |
| GATEWAY PET GUARDIANS 725 N 15TH ST E SAINT LOUIS, IL 62205-2557 | 26-0096240 | 501(C)3 | 270,000. | 0. | | | ACCESS TO CARE, DISASTER RESPONSE |
| HUMANE SOCIETY OF SOUTH MS 2615 25TH AVE GULFPORT, MS 39501-4832 | 64-6034439 | 501(C)3 | 255,000. | 0. | | | ACCESS TO CARE, ADOPTIONS |
| SOUTH SUBURBAN HUMANE SOCIETY 21800 CENTRAL AVE MATTESON, IL 60443-3043 | 23-7165004 | 501(C)3 | 250,000. | 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 |
|--------------------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------------------------------|
| KITSAP HUMANE SOCIETY 9167 DICKEY RD NW SILVERDALE, WA 98383-8860 | 91-0728353 | 501(C)3 | 250,000. | 0. | | | ACCESS TO CARE |
| PETS IN NEED OF GREATER CINCINNATI INC - 520 W WYOMING AVE - CINCINNATI, OH 45215-4525 | 45-5512473 | 501(C)3 | 250,000. | 0. | | | ACCESS TO CARE |
| THE PATTERSON FOUNDATION PO BOX 365 FLOWERY BRANCH, GA 30542-0007 | 84-4493094 | 501(C)3 PF | 250,000. | 0. | | | ACCESS TO CARE |
| ARIZONA ANIMAL WELFARE LEAGUE INC 25 N 40TH ST PHOENIX, AZ 85034-1701 | 23-7149453 | 501(C)3 | 240,000. | 0. | | | ACCESS TO CARE, ADOPTIONS, ACCESS TO CARE, ADOPTIONS |
| CITY OF FORT WORTH 200 TEXAS STREET FORT WORTH, TX 76102 | 75-6000528 | GOVERNMENT | 230,000. | 0. | | | ADOPTIONS |
| COLORADO STATE UNIVERSITY 555 SOUTH HOWES, 6003 CAMPUS DELIVERY - FORT COLLINS, CO 80523-6003 | 84-6000545 | GOVERNMENT | 226,244. | 0. | | | ACCESS TO CARE |
| ASHEVILLE HUMANE SOCIETY INC 14 FOREVER FRIEND LN ASHEVILLE, NC 28806-4570 | 56-1444098 | 501(C)3 | 225,000. | 0. | | | ACCESS TO CARE, DISASTER RESPONSE |
| OPERATION KINDNESS 3201 EARHART DR CARROLLTON, TX 75006-5025 | 75-1553350 | 501(C)3 | 220,000. | 0. | | | ADOPTIONS, CONFERENCES, TRANSPORT |
| THE LAREDO ANIMAL PROTECTIVE SOCIETY - 2500 GONZALEZ ST - LAREDO, TX 78040-4740 | 74-1359392 | 501(C)3 | 201,000. | 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 |
|---------------------------------------------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| HUMANE SOCIETY FOR SEATTLE-KING CO 13212 SE EASTGATE WAY BELLEVUE, WA 98005-4408 | 91-0282060 | 501(C)3 | 200,000. | 0. | | | ACCESS TO CARE |
| RUTHLESS KINDNESS 10355 BURGANDY WAY SEBASTOPOL, CA 95472-2914 | 84-2838142 | 501(C)3 | 200,000. | 0. | | | ACCESS TO CARE |
| SEATTLE VETERINARY OUTREACH PO BOX 33156 SEATTLE, WA 98133-0156 | 83-2653099 | 501(C)3 | 200,000. | 0. | | | ACCESS TO CARE |
| C A R E 4 PAWS INC PO BOX 60524 SANTA BARBARA, CA 93160-0524 | 27-0207473 | 501(C)3 | 200,000. | 0. | | | ACCESS TO CARE |
| HUMANE SOCIETY OF HALL COUNTY 845 W RIDGE RD GAINESVILLE, GA 30501-6965 | 58-0678817 | 501(C)3 | 200,000. | 0. | | | ACCESS TO CARE |
| BISSELL PET FOUNDATION 2345 WALKER AVE NW GRAND RAPIDS, MI 49544-2516 | 38-3853264 | 501(C)3 PF | 180,000. | 0. | | | TRANSPORT |
| BRANDYWINE VALLEY SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS - 1212 PHOENIXVILLE PIKE - WEST CHESTER, PA 19380-4045 | 23-1381030 | 501(C)3 | 170,000. | 0. | | | ADOPTIONS, TRANSPORT |
| ANIMAL PROTECTIVE ASSOCIATION OF MISSOURI - 1705 S HANLEY RD - SAINT LOUIS, MO 63144-2909 | 43-0699783 | 501(C)3 | 165,000. | 0. | | | ADOPTIONS, TRANSPORT |
| RESCUE PETS OF FLORIDA INC 4220 WATERVILLE AVE WESLEY CHAPEL, FL 33543-7003 | 46-2336168 | 501(C)3 | 155,000. | 0. | | | ADOPTIONS |

Schedule I (Form 990)

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|-----------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| PLANNED PETHOOD OF GEORGIA INC 2860 BUFORD HWY STE F2 DULUTH, GA 30096-5127 | 90-0516757 | 501(C)3 | 155,000. | 0. | | | ACCESS TO CARE, ADOPTIONS |
| FIX WEST TEXAS 9507 WEST COUNTY ROAD 77 MIDLAND, TX 79707-0000 | 84-4108520 | 501(C)3 | 155,000. | 0. | | | ADOPTIONS |
| HUMANE SOCIETY OF CARROLL CO INC 2517 LITTLESTOWN PIKE WESTMINSTER, MD 21158-2230 | 52-0689149 | 501(C)3 | 150,000. | 0. | | | ADOPTIONS |
| LONGMONT HUMANE SOCIETY INC 9595 NELSON RD STE G LONGMONT, CO 80501-6359 | 84-0645455 | 501(C)3 | 150,000. | 0. | | | ACCESS TO CARE |
| HUMANE NETWORK 7250 PEMBROKE DR RENO, NV 89502-9757 | 27-0487147 | 501(C)3 | 150,000. | 0. | | | ACCESS TO CARE |
| DAKIN PIONEER VALLEY HUMANE SOCIETY INC - 171 UNION ST - SPRINGFIELD, MA 01105-2020 | 20-5318898 | 501(C)3 | 150,000. | 0. | | | ACCESS TO CARE |
| OPERATION SPAY BAY INC 3520 E 15TH ST PANAMA CITY, FL 32404-5831 | 45-2931723 | 501(C)3 | 150,000. | 0. | | | ACCESS TO CARE |
| FLATBUSH CATS INC 263 E 23RD ST BROOKLYN, NY 11226-6109 | 82-4466710 | 501(C)3 | 150,000. | 0. | | | ACCESS TO CARE |
| HEARTS ALIVE VILLAGE 3250 N DECATUR BLVD LAS VEGAS, NV 89130-3207 | 46-3622732 | 501(C)3 | 140,000. | 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.)

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| SPOKANE HUMANE SOCIETY 6607 N HAVANA ST SPOKANE, WA 99217-7402 | 91-0565011 | 501(C)3 | 130,000. | 0. | | | ADOPTIONS |
| ANIMAL HUMANE ASSOCIATION OF NEW MEXICO INC - 615 VIRGINIA ST SE - ALBUQUERQUE, NM 87108-4228 | 85-0207652 | 501(C)3 | 128,000. | 0. | | | ADOPTIONS, CONFERENCES |
| ARROWS HEART PO BOX 7 ZIMMERMAN, MN 55398-0007 | 81-1983281 | 501(C)3 | 125,000. | 0. | | | ADOPTIONS |
| SFC VIRGINIA 9916 BROCK RD SPOTSYLVANIA, VA 22553-3906 | 84-2340045 | 501(C)3 | 125,000. | 0. | | | ADOPTIONS |
| UNIVERSITY OF ARIZONA FOUNDATION 1111 N CHERRY AVE TUCSON, AZ 85721-0111 | 86-6050388 | 501(C)3 | 120,000. | 0. | | | ACCESS TO CARE |
| AUSTIN PETS ALIVE 1156 W CESAR CHAVEZ ST AUSTIN, TX 78703-4603 | 74-2893360 | 501(C)3 | 117,000. | 0. | | | ADOPTIONS, TRANSPORT |
| HUMANE SOCIETY OF NORTH TEXAS 1840 E LANCASTER AVE FORT WORTH, TX 76103-2124 | 75-1245911 | 501(C)3 | 110,000. | 0. | | | ADOPTIONS |
| SPOKANIMAL C A R E 710 N NAPA ST SPOKANE, WA 99202-2867 | 91-1223929 | 501(C)3 | 110,000. | 0. | | | ADOPTIONS |
| RESCUED PETS MOVEMENT INC 2317 W 34TH ST HOUSTON, TX 77018-6006 | 46-3708327 | 501(C)3 | 106,450. | 0. | | | TRANSPORT, 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.)

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|------------------------------------------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|---------------------------------------------|
| WISCONSIN HUMANE SOCIETY 4500 W WISCONSIN AVE MILWAUKEE, WI 53208-3156 | 39-0810533 | 501(C)3 | 105,000. | 0. | | | ADOPTIONS |
| PET CENTRAL HELPS 360 WYLIE DR NORMAL, IL 61761-5500 | 81-4120839 | 501(C)3 | 105,000. | 0. | | | ADOPTIONS |
| PAW MISSION INC 13229 7TH PL YUCAIPA, CA 92399-2316 | 82-2187275 | 501(C)3 PF | 105,000. | 0. | | | ACCESS TO CARE, ADOPTIONS |
| SHELTER ANIMALS COUNT - A NATIONAL DATABASE INITIATIVE - 931 MONROE DR NE STE A102 PMB 109 - ATLANTA, GA 30308-2183 | 46-2215168 | 501(C)3 | 102,250. | 0. | | | ADOPTIONS RESEARCH |
| SOUTHERN PINES ANIMAL SHELTER 1901 N 31ST AVE HATTIESBURG, MS 39401-1221 | 64-0514796 | 501(C)3 | 101,000. | 0. | | | ADOPTIONS, TRANSPORT, ADOPTIONS RESEARCH |
| RENEGADE PAWS RESCUE 21 KEYSTONE DR SAVANNAH, GA 31406-5726 | 83-3915500 | 501(C)3 | 101,000. | 0. | | | ACCESS TO CARE, ADOPTIONS |
| HUMAN ANIMAL BOND RESEARCH FOUNDATION - 1310 L STREET NORTHWEST SUITE 860 - WASHINGTON, DC 20005-4383 | 27-4159453 | 501(C)3 | 100,000. | 0. | | | ACCESS TO CARE, ADOPTIONS |
| CAMP COMPANION INC PO BOX 7478 ROCHESTER, MN 55903-7478 | 32-0165702 | 501(C)3 | 100,000. | 0. | | | ADOPTIONS |
| FELINES INC 6379 N PAULINA ST CHICAGO, IL 60660-1125 | 36-2922975 | 501(C)3 | 100,000. | 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 |
|----------------------------------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| PARTNERS FOR PETS HUMANE SOCIETY PO BOX 445 TROY, IL 62294-0445 | 36-4521704 | 501(C)3 | 100,000. | 0. | | | ADOPTIONS |
| KANSAS CITY PET PROJECT 7077 ELMWOOD AVE KANSAS CITY, MO 64132-1614 | 45-3067615 | 501(C)3 | 100,000. | 0. | | | ACCESS TO CARE |
| LEXINGTON HUMANE SOCIETY 1600 OLD FRANKFORT PIKE LEXINGTON, KY 40504-1013 | 61-0444762 | 501(C)3 | 100,000. | 0. | | | ADOPTIONS |
| HUMANE SOCIETY OF THE PIKES PEAK REGION - 610 ABBOT LN - COLORADO SPGS, CO 80905-1800 | 84-0410111 | 501(C)3 | 100,000. | 0. | | | ACCESS TO CARE |
| P A A C PEOPLE ASSISTING ANIMAL CONTROL - 5804 AYERS ST - CORP CHRISTI, TX 78415-4007 | 38-3817365 | 501(C)3 | 100,000. | 0. | | | ACCESS TO CARE |
| PORTLAND ANIMAL WELFARE TEAM 1718 NE 82ND AVE PORTLAND, OR 97220-5602 | 73-1684628 | 501(C)3 | 100,000. | 0. | | | ACCESS TO CARE |
| ANIMAL WELFARE LEAGUE OF ALEXANDRIA VIRGINIA INCORPORATED - 4101 EISENHOWER AVE - ALEXANDRIA, VA 22304-6436 | 54-0796610 | 501(C)3 | 100,000. | 0. | | | ACCESS TO CARE |
| THE PET COMPASSION CENTERS PO BOX 25034 MEMPHIS, TN 38125-8001 | 45-3972342 | 501(C)3 | 100,000. | 0. | | | ACCESS TO CARE |
| SOUTHWEST OKLAHOMA COMMUNITY ACTION GROUP INC - PO BOX 1088 - ALTUS, OK 73522-1088 | 73-0744747 | 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.)

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|---------------------------------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| GLOBAL ADVOCATES AND ALLIES INC 16971 W WILTSHIRE DR WESTLAKE, FL 33470-4047 | 87-4292516 | 501(C)3 | 100,000. | 0. | | | ACCESS TO CARE |
| AMAZING DOGS 416W SAN YSIDRO BLVD UNIT 679 SAN YSIDRO, CA 92173-2443 | 87-2700229 | 501(C)3 | 95,000. | 0. | | | ADOPTIONS |
| H A L O 3227 E BELL RD STE D151 PHOENIX, AZ 85032-2723 | 86-0832160 | 501(C)3 | 92,500. | 0. | | | ADOPTIONS, ADOPTIONS RESEARCH |
| BRAZORIA COUNTY SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS - 141 CANNA LN - LAKE JACKSON, TX 77566-5677 | 23-7404451 | 501(C)3 | 92,000. | 0. | | | ADOPTIONS, DISASTER RESPONSE |
| MIDLANDS HUMANE SOCIETY 1020 RAILROAD HWY COUNCIL BLFS, IA 51503-6400 | 20-5105144 | 501(C)3 | 90,000. | 0. | | | ADOPTIONS |
| ASOCIACION PRO ALBERGUE DE ANIMALES INC - PO BOX 3557 - MAYAGUEZ, PR 00681-0000 | 66-0413650 | 501(C)3 | 90,000. | 0. | | | ADOPTIONS |
| ANTI-CRUELTY SOCIETY 157 W GRAND AVE CHICAGO, IL 60654-7105 | 36-2179814 | 501(C)3 | 85,000. | 0. | | | ADOPTIONS |
| HUMANE SOCIETY OF YUMA INC 4050 S AVENUE 4 1/2 E YUMA, AZ 85365-7991 | 86-6053617 | 501(C)3 | 85,000. | 0. | | | ADOPTIONS |
| BROKEN TAIL RESCUE INC 14 CRONIN BROOK WAY MILLBURY, MA 01527-3952 | 27-1865400 | 501(C)3 | 81,000. | 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.)

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|----------------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| ALL KIND ANIMAL INITIATIVE 834 N 3RD STREET SUITE B ABILENE, TX 79601-5921 | 86-3226661 | 501(C)3 | 80,000. | 0. | | | ADOPTIONS |
| FURLANTHROPY INC 1287 COLBY DR FOREST, VA 24551-1725 | 87-4346748 | 501(C)3 | 79,340. | 0. | | | ACCESS TO CARE |
| WILLIAMSON COUNTY 710 S MAIN ST GEORGETOWN, TX 78626-5703 | 74-6000978 | GOVERNMENT | 77,000. | 0. | | | ADOPTIONS |
| PASADENA HUMANE SOCIETY 361 S RAYMOND AVE PASADENA, CA 91105-2607 | 95-1643344 | 501(C)3 | 76,000. | 0. | | | ADOPTIONS |
| STRAY CAT BLUE INC PO BOX 18 COLMAR, PA 18915-0018 | 23-2943833 | 501(C)3 | 75,000. | 0. | | | ADOPTIONS |
| FURKIDS INC 5235 UNION HILL RD CUMMING, GA 30040-0000 | 01-0766844 | 501(C)3 | 75,000. | 0. | | | ADOPTIONS |
| TRI COUNTY HUMANE SOCIETY 21287 BOCA RIO RD BOCA RATON, FL 33433-2203 | 65-0719233 | 501(C)3 | 75,000. | 0. | | | ACCESS TO CARE |
| CINCINNATI ANIMAL CARE 3949 COLERAIN AVE CINCINNATI, OH 45223-2518 | 85-2177478 | 501(C)3 | 75,000. | 0. | | | ADOPTIONS |
| COMPANIONS AND ANIMALS FOR REFORM AND EQUITY INC - 420 DUNKIRK RD - BALTIMORE, MD 21212-1815 | 85-0557068 | 501(C)3 | 68,720. | 0. | | | CONFERENCES, 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.)

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|----------------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|--------------------------------------------------------|
| KOKOMO HUMANE SOCIETY 729 E HOFFER ST KOKOMO, IN 46902-5700 | 35-0989705 | 501(C)3 | 67,000. | 0. | | | ADOPTIONS |
| HUMANE WORLD FOR ANIMALS INC 700 PROFESSIONAL DR GAITHERSBURG, MD 20879-3418 | 53-0225390 | 501(C)3 | 67,000. | 0. | | | CONFERENCES |
| ANIMAL RESCUE LEAGUE OF IOWA INCORPORATED - 5452 NE 22ND ST - DES MOINES, IA 50313-2528 | 42-0680427 | 501(C)3 | 65,000. | 0. | | | ADOPTIONS |
| JACKSONVILLE HUMANE SOCIETY 8464 BEACH BLVD JACKSONVILLE, FL 32216-3131 | 59-0624410 | 501(C)3 | 65,000. | 0. | | | ADOPTIONS |
| SAVED BY ZADE PO BOX 27 EATON RAPIDS, MI 48827-0027 | 82-2682927 | 501(C)3 | 65,000. | 0. | | | ADOPTIONS |
| SANTA FE ANIMAL SHELTER INC 100 CAJA DEL RIO SANTA FE, NM 87507-3537 | 85-6000484 | 501(C)3 | 63,000. | 0. | | | ADOPTIONS |
| VIRGINIA POLYTECHNIC INSTITUTE & STATE UNIVERSITY - 300 TURNER ST. NW - BLACKSBURG, VA 24061 | 54-6001805 | GOVERNMENT | 62,541. | 0. | | | ADOPTIONS RESEARCH |
| VICTORIA COUNTY 115 N BRIDGE ST., STE. 241 VICTORIA, TX 77901 | 74-6002445 | GOVERNMENT | 62,000. | 0. | | | ADOPTIONS |
| CITY OF LOS ANGELES 221 NORTH FIGUEROA STREET 5TH FLOOR LOS ANGELES, CA 90012 | 95-6000735 | GOVERNMENT | 61,000. | 0. | | | ADOPTIONS, DISASTER RESPONSE, 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.)

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|---------------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| FORGOTTEN CATS INC 4023 KENNETT PIKE SUITE 422 GREENVILLE, DE 19807-2018 | 20-0691180 | 501(C)3 | 60,000. | 0. | | | ADOPTIONS |
| ANIMAL FRIENDS ALLIANCE 2321 E MULBERRY ST STE 1 FORT COLLINS, CO 80524-3691 | 20-4969731 | 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 |
| CITY OF CHARLOTTE 600 E FOURTH ST., 10TH FLOOR CHARLOTTE, NC 28202-2870 | 52-1333483 | GOVERNMENT | 60,000. | 0. | | | ADOPTIONS |
| THE ARK OF SAN JUAN COMPANION ANIMAL RESCUE - PO BOX 117 - SAN JUAN CAPO, CA 92693-0117 | 83-0493818 | 501(C)3 | 60,000. | 0. | | | ADOPTIONS |
| COUNTY OF MOHAVE PO BOX 7000 KINGMAN, AZ 86402-7000 | 86-6000539 | GOVERNMENT | 60,000. | 0. | | | ADOPTIONS |
| FERAL CAT WARRIORS INC 1308 STOCKTON HILL RD STE A PMB 505 KINGMAN, AZ 86401-5190 | 86-2186585 | 501(C)3 | 60,000. | 0. | | | ADOPTIONS, DISASTER RESPONSE |
| ANIMAL CARE TR 4500 N ACCESS RD CHATTANOOGA, TN 37415-3819 | 01-0824858 | 501(C)3 | 57,000. | 0. | | | ADOPTIONS |
| TEN LIVES CLUB INC 3741 LAKE SHORE RD NORTH BOSTON, NY 14110-0000 | 16-1611221 | 501(C)3 | 55,000. | 0. | | | ADOPTIONS |

Schedule I (Form 990)

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

93-1140967

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

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|------------------------------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| SAVING ONE LIFE PO BOX 6458 CHANDLER, AZ 85246-6458 | 27-1173539 | 501(C)3 | 55,000. | 0. | | | ADOPTIONS |
| LOST DOG RESCUE FOUNDATION 6801 WILSON BLVD FALLS CHURCH, VA 22044-3303 | 31-1789600 | 501(C)3 | 55,000. | 0. | | | ADOPTIONS |
| PARIS ANIMAL WELFARE SOCIETY INC 6 LEGION RD PARIS, KY 40361-2120 | 61-1224933 | 501(C)3 | 55,000. | 0. | | | ADOPTIONS |
| ARE ANIMAL RESCUE INC 101 E FLORIDA AVE HEMET, CA 92543-4105 | 83-0980475 | 501(C)3 | 55,000. | 0. | | | ADOPTIONS |
| FURRY FRIENDS HUMANE INC 100 CAPITAL ST JUPITER, FL 33458-6066 | 59-2111273 | 501(C)3 | 55,000. | 0. | | | ADOPTIONS, DISASTER RESPONSE |
| WASHINGTON COUNTY-JOHNSON CITY ANIMAL CONTROL CENTER INC - 3411 N ROAN ST - JOHNSON CITY, TN 37601-1217 | 58-1661479 | 501(C)3 | 52,000. | 0. | | | ADOPTIONS, DISASTER RESPONSE |
| KITTEN ANGELS 233 HOUSEMAN ST MAYFIELD, NY 12117-0000 | 27-1889799 | 501(C)3 | 50,000. | 0. | | | ADOPTIONS |
| ASSOCIATION FOR ANIMAL WELFARE ADVANCEMENT - 15508 W BELL RD STE 101 PMB 613 - SURPRISE, AZ 85374-2432 | 41-1618666 | 501(C)6 | 50,000. | 0. | | | CONFERENCES |
| FABULOUS FELINES NWA PO BOX 1283 BENTONVILLE, AR 72712-1283 | 46-1249080 | 501(C)3 | 50,000. | 0. | | | ADOPTIONS |

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

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|------------------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| FRIENDS OF THE ANIMAL SHELTER INC 5006 SERGEANT RD 181 SIOUX CITY, IA 51106-4708 | 47-4148599 | 501(C)3 | 50,000. | 0. | | | ADOPTIONS |
| HUMANE SOCIETY OF GREENWOOD 2820 AIRPORT RD GREENWOOD, SC 29649-9203 | 57-0384155 | 501(C)3 | 50,000. | 0. | | | ADOPTIONS |
| MIAMI-DADE COUNTY 111 NW 1ST ST., SUITE 2620 MIAMI, FL 33128-1995 | 59-6000573 | GOVERNMENT | 50,000. | 0. | | | ADOPTIONS |
| FRIENDS OF MADERA ANIMAL SHELTER PO BOX 923 MADERA, CA 93639-0923 | 77-0553194 | 501(C)3 | 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 |
| ONE TAIL AT A TIME NFP 2144 N WOOD ST CHICAGO, IL 60614-3923 | 26-2125306 | 501(C)3 | 50,000. | 0. | | | ADOPTIONS |
| PUERTO RICO ALLIANCE FOR COMPANION ANIMALS INC - 130 AVE WINSTON CHURCHILL - SAN JUAN, PR 00926-6065 | 66-0751044 | 501(C)3 | 50,000. | 0. | | | ADOPTIONS |
| ONE LOVE ARIZONA RESCUE ADVOCACY & STERILIZATION - 722 W JOHNSON DR - GILBERT, AZ 85233-8235 | 47-1365736 | 501(C)3 | 50,000. | 0. | | | ADOPTIONS |
| SAYV ANIMAL ORGANIZATION 1147 BROOK FOREST AVE UNIT 604 SHOREWOOD, IL 60404-8845 | 85-2502128 | 501(C)3 | 47,000. | 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 |
|---------------------------------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| KIRKLAND FOUNDATION 12950 N WILLOW AVE CLOVIS, CA 93619-9126 | 30-0958951 | 501(C)3 | 45,000. | 0. | | | ADOPTIONS |
| HUMANE SOCIETY OF INDIANAPOLIS INC 7929 NORTH MICHIGAN ROAD INDIANAPOLIS, IN 46268-1915 | 35-0876385 | 501(C)3 | 42,500. | 0. | | | ADOPTIONS |
| OPEN DOOR VETERINARY COLLECTIVE PO BOX 6 GRAND RAPIDS, OH 43522-0006 | 85-4259059 | 501(C)3 | 42,000. | 0. | | | ACCESS TO CARE |
| COUNTY OF KERN 1115 TRUXTON AVE BAKERSFIELD, CA 93301 | 95-6000925 | GOVERNMENT | 41,000. | 0. | | | ADOPTIONS |
| KATS ALLEY CATS PO BOX 16151 LUBBOCK, TX 79490-6151 | 83-1604771 | 501(C)3 | 41,000. | 0. | | | ADOPTIONS |
| ANIMAL RESCUE OF THE ROCKIES 13918 E MISSISSIPPI AVE 60188 AURORA, CO 80012-3603 | 20-1055815 | 501(C)3 | 40,000. | 0. | | | ADOPTIONS |
| ANIMAL PROTECTIVE LEAGUE OF SPRINGFIELD AND SANGAMON COUNTY - 1001 TAINTOR RD - SPRINGFIELD, IL 62702-1766 | 23-7095476 | 501(C)3 | 40,000. | 0. | | | ADOPTIONS |
| MUDDY PAWS RESCUE 821 9TH AVE FRNT 1 NEW YORK, NY 10019-4462 | 47-5496436 | 501(C)3 | 40,000. | 0. | | | ADOPTIONS |
| ANIMAL OUTREACH OF THE MOTHER LODE 6101 ENTERPRISE DRIVE SUITE BC PO DIAMOND SPRINGS, CA 95619-9487 | 68-0272499 | 501(C)3 | 40,000. | 0. | | | ADOPTIONS |

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PETSMART CHARITIES, INC.

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

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|----------------------------------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| AGGIELAND HUMANE SOCIETY 5359 LEONARD RD BRYAN, TX 77807-9571 | 74-2150288 | 501(C)3 | 40,000. | 0. | | | ADOPTIONS |
| BEAUMONT PETS ALIVE 46718 IH 10 EAST WINNIE TEXAS 776 WINNIE, TX 77665-8498 | 82-4798808 | 501(C)3 | 40,000. | 0. | | | ADOPTIONS |
| SEVIER COUNTY ANIMAL SHELTER 125 COURT AVE STE 201E SEVIERVILLE, TN 37862-3566 | 83-0857151 | 501(C)3 | 40,000. | 0. | | | ADOPTIONS |
| PET OVER POPULATION PREVENTION 1506 ROAD 40 PASCO, WA 99301-2615 | 91-1846733 | 501(C)3 | 40,000. | 0. | | | ADOPTIONS |
| RESCUE NETWORK INC PO BOX 511 BUFFALO, MN 55313-0511 | 84-3274038 | 501(C)3 | 40,000. | 0. | | | ADOPTIONS |
| FRIENDS OF RESCUE ANIMALS PO BOX 758 ROWLETT, TX 75030-0758 | 20-1606547 | 501(C)3 | 35,000. | 0. | | | ADOPTIONS |
| ARK CAT SANCTUARY PO BOX 30098 FLAGSTAFF, AZ 86003-0098 | 20-5883650 | 501(C)3 | 35,000. | 0. | | | ADOPTIONS |
| MORRIS ANIMAL REFUGE 1242 LOMBARD ST PHILADELPHIA, PA 19147-1118 | 23-1352237 | 501(C)3 | 35,000. | 0. | | | ADOPTIONS |
| LYCOMING COUNTY SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS - 2805 REACH RD - WILLIAMSPORT, PA 17701-4178 | 24-0857714 | 501(C)3 | 35,000. | 0. | | | ADOPTIONS |

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Schedule I (Form 990) **PETSMART CHARITIES, INC.**

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

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|-------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| PAW WORKS INC 79 E DAILY DRIVE 515 CAMARILLO, CA 93010-5807 | 46-4484336 | 501(C)3 | 35,000. | 0. | | | ADOPTIONS, DISASTER RESPONSE |
| PUPPY HILL FARM ANIMAL RESCUE INC 5630 LONE PINE TRL MELROSE, FL 32666-8801 | 59-3621194 | 501(C)3 | 35,000. | 0. | | | ADOPTIONS |
| PEARL RIVER COUNTY SPCA INC 1700 PALESTINE RD PICAYUNE, MS 39466-3602 | 64-0798887 | 501(C)3 | 35,000. | 0. | | | ADOPTIONS |
| CITY OF CABOT 101 N 2ND ST CABOT, AR 72023-2940 | 71-0334905 | GOVERNMENT | 35,000. | 0. | | | ADOPTIONS |
| HUMANE SOCIETY OF SKAGIT VALLEY 18841 KELLEHER RD BURLINGTON, WA 98233-9501 | 91-0903532 | 501(C)3 | 35,000. | 0. | | | ADOPTIONS |
| CENTRAL NEW YORK CAT COALITION INCORPORATED - PO BOX 6182 - SYRACUSE, NY 13217-6182 | 06-1688749 | 501(C)3 | 35,000. | 0. | | | ADOPTIONS |
| TIGGERTOWN INC 8430 E BRAINERD RD CHATTANOOGA, TN 37421-4307 | 81-3743659 | 501(C)3 | 35,000. | 0. | | | DISASTER RESPONSE |
| OKTIBBEHA COUNTY HUMANE SOCIETY INC - PO BOX 297 - STARKVILLE, MS 39760-0297 | 64-0618170 | 501(C)3 | 35,000. | 0. | | | ADOPTIONS, TRANSPORT |
| CITY OF INDEPENDENCE 111 EAST MAPLE INDEPENDENCE, MO 64051-0519 | 44-6000190 | GOVERNMENT | 35,000. | 0. | | | ADOPTIONS |

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

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|-----------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| ST FRANCIS SOCIETY INC PO BOX 261614 TAMPA, FL 33685-1614 | 59-3469332 | 501(C)3 | 34,500. | 0. | | | ADOPTIONS, DISASTER RESPONSE |
| FERAL FELINE FRIENDS OF EAST TENNESSEE - PO BOX 32121 - KNOXVILLE, TN 37930-2121 | 80-0254016 | 501(C)3 | 32,500. | 0. | | | ADOPTIONS, DISASTER RESPONSE |
| HOMEWARD BOUND PET ADOPTION CENTER INC - PO BOX 475 - BLACKWOOD, NJ 08012-0475 | 20-0549531 | 501(C)3 | 32,000. | 0. | | | ADOPTIONS |
| ANIMAL CARE AND CONTROL TEAM 111 W HUNTING PARK AVE PHILADELPHIA, PA 19140-2717 | 45-3985637 | 501(C)3 | 32,000. | 0. | | | ADOPTIONS |
| BALTIMORE ANIMAL RESCUE AND CARE SHELTER INC - 2490 GILES RD - BALTIMORE, MD 21225-1011 | 86-1130456 | 501(C)3 | 32,000. | 0. | | | ADOPTIONS |
| MUNICIPALITY OF SAN JUAN P.O. BOX 70179 SAN JUAN, PR 00936-8179 | 66-0427034 | GOVERNMENT | 32,000. | 0. | | | ADOPTIONS |
| CITY OF SACRAMENTO 2127 FRONT STREET SACRAMENTO, CA 95818-1106 | 94-6000410 | GOVERNMENT | 32,000. | 0. | | | ADOPTIONS |
| NEXUS EQUINE INC PO BOX 54572 OKLAHOMA CITY, OK 73154-1572 | 81-1990122 | 501(C)3 | 32,000. | 0. | | | ADOPTIONS |
| MARICOPA COUNTY ANIMAL CARE & CONTROL - 2500 S. 27TH AVENUE - PHOENIX, AZ 85009 | 86-6000472 | GOVERNMENT | 31,000. | 0. | | | ADOPTIONS |

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

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|--------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| SAVE A PET RESCUE ADOPTION AND TRANSPORT INC - PO BOX 9323 - DOTHAN, AL 36304-1323 | 20-1285614 | 501(C)3 | 30,000. | 0. | | | ADOPTIONS |
| CATS CRADLE OF THE SHENANDOAH VALLEY INC - PO BOX 2128 - HARRISONBURG, VA 22801-9505 | 20-3269224 | 501(C)3 | 30,000. | 0. | | | ADOPTIONS |
| CAT KIDS RESCUE INC 153 3RD ST W ST PETERSBURG, FL 33715-1716 | 46-3684314 | 501(C)3 | 30,000. | 0. | | | ADOPTIONS, DISASTER RESPONSE |
| WOLF TRAP ANIMAL RESCUE 8300 MERRIFIELD AVE STE C FAIRFAX, VA 22031-4413 | 47-5126237 | 501(C)3 | 30,000. | 0. | | | ADOPTIONS |
| AMERICAN HUMANE ASSOCIATION 1400 16TH ST NW STE 360 WASHINGTON, DC 20036-2226 | 84-0432950 | 501(C)3 | 30,000. | 0. | | | DISASTER RESPONSE |
| ASAR TRAINING AND RESPONSE INC 39016 W 295TH ST PAOLA, KS 66071-4323 | 84-1664555 | 501(C)3 | 30,000. | 0. | | | DISASTER RESPONSE |
| PUURRRFECT PAWS RESCUE 207 ROBIN HOOD DR CLARKSVILLE, TN 37042-3170 | 82-0858937 | 501(C)3 | 30,000. | 0. | | | ADOPTIONS |
| WILLOWS WAGS AND WHISKERS 806 AVENIDA PICO STE I PMB 311 SAN CLEMENTE, CA 92673-5693 | 47-4727620 | 501(C)3 | 30,000. | 0. | | | ADOPTIONS, DISASTER RESPONSE |
| ANGEL CITY PIT BULLS 1834 S GRAMERCY PL LOS ANGELES, CA 90019-6321 | 27-2348995 | 501(C)3 | 30,000. | 0. | | | DISASTER RESPONSE |

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

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|-----------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| LET LOVE LIVE 143 COUNTY ROAD 3445 COOKVILLE, TX 75558-2071 | 82-4248565 | 501(C)3 | 27,300. | 0. | | | ADOPTIONS, TRANSPORT |
| HUMANE SOCIETY OF SULLIVAN COUNTY 2425 N SECTION ST SULLIVAN, IN 47882-7522 | 26-0490753 | 501(C)3 | 27,000. | 0. | | | ADOPTIONS |
| LAFOURCHE PARISH 402 GREEN ST THIBODAU X, LA 70301-3133 | 72-6000634 | GOVERNMENT | 27,000. | 0. | | | ADOPTIONS |
| COUNTY OF RIVERSIDE PO BOX 1326 RIVERSIDE, CA 92502-1326 | 95-6000930 | GOVERNMENT | 27,000. | 0. | | | ADOPTIONS |
| LITTLE RESCUE ON THE PRAIRIE 133 MAINE ST LOG LANE VLG, CO 80705-4806 | 84-3477586 | 501(C)3 | 27,000. | 0. | | | ADOPTIONS |
| SANTA BARBARA COUNTY PO BOX 39 SANTA BARBARA, CA 93102-0039 | 95-6002833 | GOVERNMENT | 27,000. | 0. | | | ADOPTIONS |
| FURGET ME NOT INC 13 SCHOOL ST UNIT 223 BRYANTVILLE, MA 02327-2709 | 87-1079803 | 501(C)3 | 27,000. | 0. | | | ADOPTIONS |
| NORTH VALLEY ANIMAL DISASTER GROUP PO BOX 441 CHICO, CA 95927-0441 | 06-1672191 | 501(C)3 | 26,000. | 0. | | | DISASTER RESPONSE |
| THOMPSON RIVER ANIMAL CARE SHELTER PO BOX 1589 THOMPSON FLS, MT 59873-1589 | 20-5520480 | 501(C)3 | 25,000. | 0. | | | ADOPTIONS |

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| HEARTLAND SMALL ANIMAL RESCUE INC PO BOX 6033 SOUTH BEND, IN 46660-6033 | 20-5670962 | 501(C)3 | 25,000. | 0. | | | ADOPTIONS |
| MT PLEASANT ANIMAL SHELTER INC 194 STATE ROUTE 10 EAST HANOVER, NJ 07936-2107 | 23-7189562 | 501(C)3 | 25,000. | 0. | | | ADOPTIONS |
| LOUIES LEGACY ANIMAL RESCUE 4725 BOOMER RD CINCINNATI, OH 45247-7938 | 27-0805279 | 501(C)3 | 25,000. | 0. | | | ADOPTIONS |
| RUFF START RESCUE INC 12526 319TH AVE PRINCETON, MN 55371-3324 | 27-2545988 | 501(C)3 | 25,000. | 0. | | | ADOPTIONS |
| PET CONNECT RESCUE INC PO BOX 2173 BELTON, TX 76513-6973 | 32-0280836 | 501(C)3 | 25,000. | 0. | | | ADOPTIONS |
| STARK COUNTY HUMANE SOCIETY 5100 PEACH ST LOUISVILLE, OH 44641-9333 | 34-6003244 | 501(C)3 | 25,000. | 0. | | | ADOPTIONS |
| TREASURED FRIENDS INC PO BOX 9234 HIGHLAND, IN 46322-9234 | 35-1962828 | 501(C)3 | 25,000. | 0. | | | ADOPTIONS |
| ARF 531 W ROOSEVELT RD WHEATON, IL 60187-5057 | 36-4236669 | 501(C)3 | 25,000. | 0. | | | ADOPTIONS |
| WAG ANIMAL RESCUE PO BOX 222 WYANDOTTE, MI 48192-0222 | 38-2820050 | 501(C)3 | 25,000. | 0. | | | ADOPTIONS |

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|---------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| KITTY ANGEL RESCUE INC 4852 BRIANNA CT POWDER SPGS, GA 30127-2454 | 43-2003957 | 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 |
| OCONEE COUNTY HUMANE SOCIETY INC 1925 SANDIFER BLVD SENECA, SC 29678-0910 | 46-0485454 | 501(C)3 | 25,000. | 0. | | | ADOPTIONS |
| TILTED ACRES RESCUE AND ADOPTIONS 3045 N MCFARLAND BLUE RD RAEFORD, NC 28376-7562 | 46-0736492 | 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 |
| CASTAWAYS PET RESCUE INC 11659 GA HIGHWAY 99 DARIEN, GA 31305-3451 | 47-1838686 | 501(C)3 | 25,000. | 0. | | | ADOPTIONS |
| K911 2625 CARSON WAY ANTIOCH, CA 94531-8272 | 47-2974220 | 501(C)3 | 25,000. | 0. | | | ADOPTIONS |
| FOR THE LOVE OF CATS RESCUE AND ADOPTION - 1629 ANDOVER CIRCLE - COMMERCE, MI 48390-0000 | 47-3977463 | 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 |

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

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

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|---------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| LIONHEART INCORPORATED 452 TV DR FREDERICKSBURG, VA 22408-4158 | 54-1952672 | 501(C)3 | 25,000. | 0. | | | ADOPTIONS |
| PURRFECT PEACHES CAT RESCUE INC 3038 CHAPEL HILL RD DOUGLASVILLE, GA 30135-1701 | 56-2561199 | 501(C)3 | 25,000. | 0. | | | ADOPTIONS |
| FAYETTE HUMANE SOCIETY INC PO BOX 244 FAYETTEVILLE, GA 30214-0244 | 58-1592706 | 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 |
| SAVE A LIFE PET RESCUE INC PO BOX 623341 OVIEDO, FL 32762-3341 | 61-1511434 | 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 CAT ADOPTIONS OF TEXAS S C A PO BOX 700571 SAN ANTONIO, TX 78270-0571 | 74-2981156 | 501(C)3 | 25,000. | 0. | | | ADOPTIONS |
| SAFE HAVEN ANIMAL RESCUE INC PO BOX 76089 OKLAHOMA CITY, OK 73147-2089 | 74-3124122 | 501(C)3 | 25,000. | 0. | | | ADOPTIONS |
| SAN ANTONIO FERAL CAT COALITION PO BOX 692308 SAN ANTONIO, TX 78269-2308 | 76-0766948 | 501(C)3 | 25,000. | 0. | | | ADOPTIONS |

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| ANGEL OF HOPE ANIMAL RESCUE 13601 BALSAM LN UNIT 2 DAYTON, MN 55327-9616 | 81-0572205 | 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 |
| TRUE RESCUE 12110 LEBANON RD MOUNT JULIET, TN 37122-2520 | 84-5161581 | 501(C)3 | 25,000. | 0. | | | ADOPTIONS |
| SUNMART ANIMAL RESCUE TEAM INC 27511 CARADOC SPRINGS CT SPRING, TX 77386-3620 | 04-3695847 | 501(C)3 | 25,000. | 0. | | | ADOPTIONS |
| ANIMAL WELLNESS FOUNDATION PO BOX 9686 MARINA DL REY, CA 90295-2086 | 45-4361755 | 501(C)3 | 25,000. | 0. | | | ADOPTIONS, DISASTER RESPONSE |
| NORTH CAROLINA STATE UNIVERSITY CAMPUS BOX 7233 RALEIGH, NC 27695-0001 | 56-6000756 | GOVERNMENT | 25,000. | 0. | | | ACCESS TO CARE |
| TEXAS A&M UNIVERSITY 401 GEORGE BUSH DRIVE COLLEGE STATION, TX 77840 | 74-6000531 | GOVERNMENT | 25,000. | 0. | | | ACCESS TO CARE |
| MIDWESTERN UNIVERSITY 555 31ST ST DOWNERS GROVE, IL 60515-1235 | 36-3377698 | 501(C)3 | 25,000. | 0. | | | ACCESS TO CARE |
| OHIO STATE UNIVERSITY 901 WOODY HAYES DR COLUMBUS, OH 43210-4013 | 31-6025986 | GOVERNMENT | 25,000. | 0. | | | ACCESS TO CARE |

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|---------------------------------------------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|---------------------------------------------------------------|
| TRUSTEES OF PURDUE UNIVERSITY 2550 NORTHWESTERN AVENUE 1100 WEST LAFAYETTE, IN 47906-1332 | 35-6002041 | 501(C)3 | 25,000. | 0. | | | ACCESS TO CARE |
| COALITION OF ANIMAL RESCUE TRANSPORTERS - 1900 DORADO BEACH DR - LITTLE ROCK, AR 72212-2681 | 87-4064878 | 501(C)3 | 25,000. | 0. | | | TRANSPORT |
| ASSISI ANIMAL CLINICS OF VIRGINIA INC - 819 WALHALLA CT - ROANOKE, VA 24019-4964 | 54-2021941 | 501(C)3 | 24,500. | 0. | | | ADOPTIONS |
| HUMANE SOCIETY OF TAMPA BAY INC 3607 N ARMENIA AVE TAMPA, FL 33607-1322 | 59-0799907 | 501(C)3 | 22,000. | 0. | | | ADOPTIONS, DISASTER RESPONSE, ACCESS TO CARE, ADOPTIONS |
| HIGH FOREST HUMANE SOCIETY 173 PATTON RD HOHENWALD, TN 38462-2036 | 61-1459979 | 501(C)3 | 22,000. | 0. | | | ADOPTIONS |
| FRONT RANGE FREEDOM RESCUE INC PO BOX 19378 BOULDER, CO 80308-2378 | 83-3364318 | 501(C)3 | 22,000. | 0. | | | ADOPTIONS |
| ROCKINGHAM HARRISONBURG SOCIETY FOR PREVENTION OF CRUELTY TO ANIMALS - 2170 OLD FURNACE RD - ROCKINGHAM, VA 22802-2640 | 54-0935739 | 501(C)3 | 21,000. | 0. | | | ADOPTIONS |
| FORGOTTEN DOG LEAGUE OF AMARILLO INC - 4008 S ONG ST - AMARILLO, TX 79110-1341 | 87-2706261 | 501(C)3 | 21,000. | 0. | | | ADOPTIONS |
| CITY OF ELK GROVE 8380 LAGUNA PALMS WAY ELK GROVE, CA 95758-8045 | 94-3366854 | GOVERNMENT | 21,000. | 0. | | | ADOPTIONS |

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|-------------------------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| BEST FRIENDS ANIMAL SOCIETY 5001 ANGEL CANYON RD KANAB, UT 84741-5000 | 23-7147797 | 501(C)3 | 20,000. | 0. | | | CONFERENCES |
| POLK COUNTY HUMANE SOCIETY 4404 S 82ND RD BOLIVAR, MO 65613-8124 | 43-1590822 | 501(C)3 | 20,000. | 0. | | | ADOPTIONS |
| ANIMAL RESCUE ALLIANCE 10945 OLD SANTA SUSANA PASS RD CHATSWORTH, CA 91311-1205 | 45-4520205 | 501(C)3 | 20,000. | 0. | | | ADOPTIONS |
| PRINCE GEORGES COUNTY 3750 BROWN STATION ROAD UPPER MARLBORO, MD 20772 | 52-6000998 | GOVERNMENT | 20,000. | 0. | | | ADOPTIONS |
| HEROES FOR PAWS PO BOX 80191 COROZAL, PR 00783-8191 | 66-0875436 | 501(C)3 | 20,000. | 0. | | | ADOPTIONS |
| WEST COAST DOG AND CAT RESCUE PO BOX 72401 SPRINGFIELD, OR 97475-0297 | 68-0655056 | 501(C)3 | 20,000. | 0. | | | ADOPTIONS |
| HOUSTON SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS - 900 PORTWAY DR - HOUSTON, TX 77024-8022 | 74-1287171 | 501(C)3 | 20,000. | 0. | | | ADOPTIONS, DISASTER RESPONSE |
| GUARDIAN ANGEL PET RESCUE INC PO BOX 33 BEAUMONT, CA 92223-0033 | 81-1936868 | 501(C)3 | 20,000. | 0. | | | ADOPTIONS |
| CELESTIAL ZOO PET RESCUE 2062 E JUNIPER DR EAGLE MTN, UT 84005-4872 | 82-3827213 | 501(C)3 | 20,000. | 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 |
|-------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| LAS VEGAS VALLEY HUMANE SOCIETY 454 LAS VEGAS, NV 89146-0000 | 88-0277449 | 501(C)3 | 20,000. | 0. | | | ADOPTIONS |
| FRANK AND LUCY PROJECT 42265 MADRID WAY LANCASTER, CA 93536-1278 | 87-2565149 | 501(C)3 | 20,000. | 0. | | | ADOPTIONS |
| ALAUQA ANIMAL REFUGE INC 155 DUGAS WAY FREEPORT, FL 32439-3357 | 02-0806313 | 501(C)3 | 20,000. | 0. | | | DISASTER RESPONSE |
| ATLANTIC COUNTY 1333 ATLANTIC AVE ATLANTIC CITY, NJ 08401 | 21-6000049 | GOVERNMENT | 20,000. | 0. | | | ADOPTIONS |
| A RESCUE KINGDOM INC 200 BEACON DR BROOKSHIRE, TX 77423-9879 | 82-1999059 | 501(C)3 | 19,842. | 0. | | | ADOPTIONS, DISASTER RESPONSE |
| ANIMAL CARE FUND 353 SANCTUARY HILL LN E SMITHFIELD, PA 18817-7722 | 22-1837635 | 501(C)3 | 17,000. | 0. | | | ADOPTIONS |
| ANIMAL SHELTER OF SULLIVAN COUNTY 380 MASENGILL RD BLOUNTVILLE, TN 37617-4114 | 83-1482704 | 501(C)3 | 17,000. | 0. | | | ADOPTIONS, DISASTER RESPONSE |
| ONCE UPON A TAIL RESCUE 441 AUTUMN CREEK DR MADISONVILLE, LA 70447-3611 | 84-2739775 | 501(C)3 | 17,000. | 0. | | | ADOPTIONS |
| HANDS N PAWS ANIMAL ASSISTANCE PO BOX 981 EPHRATA, WA 98823-0981 | 84-3477538 | 501(C)3 | 17,000. | 0. | | | ADOPTIONS |

Schedule I (Form 990)

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| HUMANE SOCIETY OF THE OUACHITAS PO BOX 845 MENA, AR 71953-0845 | 71-0502540 | 501(C)3 | 17,000. | 0. | | | ADOPTIONS |
| BERNALILLO COUNTY COMMISSIONER 1 CIVIC PLAZA NW ALBUQUERQUE, NM 87102-2167 | 85-6000202 | GOVERNMENT | 17,000. | 0. | | | ADOPTIONS |
| OREGON PET PROJECT 514 E 1ST ST NEWBERG, OR 97132-2910 | 92-3827562 | 501(C)3 | 17,000. | 0. | | | ADOPTIONS |
| HEARTS TO HOMES HUMANE SOCIETY INC 1111 EXUM RD NASHVILLE, GA 31639-2752 | 58-2192681 | 501(C)3 | 16,000. | 0. | | | ADOPTIONS, DISASTER RESPONSE |
| BEARE GARDEN PLANTATION ANIMAL RESCUE - 1164 HWY 258 N - SNOW HILL, NC 28580-7305 | 85-1574125 | 501(C)3 | 16,000. | 0. | | | ADOPTIONS |
| COVENANT CAT RESCUE 1602 FREMONT AVE S PASADENA, CA 91030-4407 | 99-0718697 | 501(C)3 | 16,000. | 0. | | | ADOPTIONS |
| UNIVERSITY OF FLORIDA FOUNDATION INC - PO BOX 14425 - GAINESVILLE, FL 32604-2425 | 59-0974739 | 501(C)3 | 15,026. | 0. | | | ACCESS TO CARE |
| HART COUNTY HUMANE SOCIETY INC PO BOX 1062 HARTWELL, GA 30643-0000 | 20-8220374 | 501(C)3 | 15,000. | 0. | | | ADOPTIONS |
| BURLINGTON COUNTY ANIMAL ALLIANCE 668 SHADY LN TRENTON, NJ 08619-2758 | 22-3691757 | 501(C)3 | 15,000. | 0. | | | ADOPTIONS |

Schedule I (Form 990)

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| FERAL CAT PROGRAM OF GEORGIA INC 7250 BANNISTER RD CUMMING, GA 30028-3240 | 27-0694932 | 501(C)3 | 15,000. | 0. | | | ADOPTIONS |
| HELEN SANDERS CAT PROTECTION AND WELFARE SOCIETY - 1198 PACIFIC COAST HWY BOX 227 D - SEAL BEACH, CA 90740-6200 | 27-1400697 | 501(C)3 | 15,000. | 0. | | | ADOPTIONS |
| GOOD KARMA PET RESCUE INC 3601 W COMMERCIAL BLVD STE 19 FT LAUDERDALE, FL 33309-3320 | 27-4999491 | 501(C)3 | 15,000. | 0. | | | ADOPTIONS |
| SOUTHSIDE SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS - PO BOX 66 - MEHERRIN, VA 23954-0066 | 35-1341327 | 501(C)3 | 15,000. | 0. | | | ADOPTIONS |
| HEADING HOME ANIMAL RESCUE PO BOX 2862 APTOS, CA 95001-2862 | 45-1314568 | 501(C)3 | 15,000. | 0. | | | ADOPTIONS |
| MONTGOMERY COUNTY ANIMAL SOCIETY PO BOX 130448 THE WOODLANDS, TX 77393-0448 | 45-4042598 | 501(C)3 | 15,000. | 0. | | | ADOPTIONS |
| SOUL DOG RESCUE 1245 FACTORY DR FORT LUPTON, CO 80621-2810 | 45-4137227 | 501(C)3 | 15,000. | 0. | | | ADOPTIONS |
| ANIMAL HOUSE OF SOUTH EAST MICHIGAN - 2906 GUILFORD DR - ROYAL OAK, MI 48073-2931 | 46-0769240 | 501(C)3 | 15,000. | 0. | | | ADOPTIONS |
| HOUSTON PETS ALIVE 2854 ANTOINE DR HOUSTON, TX 77092-7055 | 46-5455638 | 501(C)6 | 15,000. | 0. | | | ADOPTIONS |

Schedule I (Form 990)

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

93-1140967

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

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|-----------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| JULIET S HOUSE ANIMAL RESCUE INC 1111 MONTICELLO ST GREENSBORO, NC 27410-3641 | 47-3620398 | 501(C)3 | 15,000. | 0. | | | ADOPTIONS |
| NO KILL GLYNN COUNTY INC 241 FLORIDA ST ST SIMONS IS, GA 31522-2646 | 47-3809648 | 501(C)3 | 15,000. | 0. | | | ADOPTIONS |
| PAWSITIVE DIFFERENCE 101 S RAINBOW BLVD STE 32 LAS VEGAS, NV 89145-5379 | 47-4492798 | 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 |
| HUMANE SOCIETY OF WILKES PO BOX 306 N WILKESBORO, NC 28659-0306 | 56-1983115 | 501(C)3 | 15,000. | 0. | | | ADOPTIONS |
| CHARLESTON ANIMAL SOCIETY 2455 REMOUNT RD N CHARLESTON, SC 29406-6138 | 57-6021863 | 501(C)3 | 15,000. | 0. | | | ADOPTIONS |
| PET ALLIANCE OF GREATER ORLANDO INC - 333 S GARLAND AVE STE 13 - ORLANDO, FL 32801-3356 | 59-0637883 | 501(C)3 | 15,000. | 0. | | | ADOPTIONS |
| DANTES HOPE 14427 BROWN RD BAKER, LA 70714-6521 | 81-2920129 | 501(C)3 | 15,000. | 0. | | | ADOPTIONS |
| LITTLE LION FOUNDATION 1179 E WARDLOW RD LONG BEACH, CA 90807-4734 | 81-3553796 | 501(C)3 | 15,000. | 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.)

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|-------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| SHOAL BAY ANIMAL HAVEN 393 N HIGHWAY 197 NEW BLAINE, AR 72851-8900 | 83-0969368 | 501(C)3 | 15,000. | 0. | | | ADOPTIONS |
| A TAIL IN NEED ANIMAL RESCUE 6408 KAWANEE AVE METAIRIE, LA 70003-3227 | 84-2443460 | 501(C)3 | 15,000. | 0. | | | ADOPTIONS |
| SAVE4PAWS RESCUE INC 2616 NW 112TH ST OKLAHOMA CITY, OK 73120-6405 | 84-2523058 | 501(C)3 | 15,000. | 0. | | | ADOPTIONS |
| AIDING 2 ADOPTION RESCUE 1871 SATTERFIELD DR POCATELLO, ID 83201-1983 | 86-1780474 | 501(C)3 | 15,000. | 0. | | | ADOPTIONS |
| PURRFECT PAWPRINTS INC PO BOX 412 GRANTSVILLE, UT 84029-0412 | 90-0353655 | 501(C)3 | 15,000. | 0. | | | ADOPTIONS |
| SUNCOAST ANIMAL LEAGUE 1030 PENNSYLVANIA AVE PALM HARBOR, FL 34683-4047 | 02-0787661 | 501(C)3 | 15,000. | 0. | | | ADOPTIONS |
| KITTEN CROSSING RESCUE INC 3745 BELL RD AUBURN, CA 95603-7828 | 86-2020730 | 501(C)3 | 15,000. | 0. | | | ADOPTIONS |
| WINKY CATS ASHTABULA 1014 W MAIN CT GENEVA, OH 44041-1222 | 87-4784396 | 501(C)3 | 15,000. | 0. | | | ADOPTIONS |
| PIEDMONT ANIMAL RESCUE 228 E WATERLYNN RD MOORESVILLE, NC 28117-8075 | 81-4541947 | 501(C)3 | 15,000. | 0. | | | ADOPTIONS |

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|--------------------------------------------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| NATIONAL FOSTER ALLIANCE INC HC 72 BOX 3455 NARANJITO, PR 00719-8711 | 66-0887932 | 501(C)3 | 15,000. | 0. | | | ADOPTIONS |
| HOME FOR GOOD DOG RESCUE INC 465 SPRINGFIELD AVE BERKLEY HGHTS, NJ 07922-1190 | 27-3373388 | 501(C)3 | 15,000. | 0. | | | DISASTER RESPONSE |
| COUNTY OF CARTER 801 E ELK AVE STE 203 ELIZABETHTON, TN 37643-4574 | 62-6000518 | GOVERNMENT | 15,000. | 0. | | | DISASTER RESPONSE |
| KAT NOYES HUMANE SOCIETY 310 LANDFILL RD JEFFERSON CTY, TN 37760-3436 | 82-4524253 | 501(C)3 | 15,000. | 0. | | | DISASTER RESPONSE |
| HUMANE SOCIETY OF NORTHWEST IOWA 607 28TH ST MILFORD, IA 51351-7401 | 42-1280031 | 501(C)3 | 13,370. | 0. | | | DISASTER RESPONSE |
| FREEDOM HEARTS ANIMAL RESCUE INC PO BOX 114 GERRARDSTOWN, WV 25420-0114 | 81-4767249 | 501(C)3 | 13,000. | 0. | | | ADOPTIONS |
| UTAH ANIMAL ADVOCACY FOUNDATION PO BOX 651097 SALT LAKE CTY, UT 84165-1097 | 42-1578128 | 501(C)3 | 12,000. | 0. | | | ADOPTIONS |
| ALACHUA COUNTY HUMANE SOCIETY INC 4205 NW 6TH STREET SUITE A-1 GAINESVILLE, FL 32609-1747 | 59-1908492 | 501(C)3 | 12,000. | 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 | 12,000. | 0. | | | ADOPTIONS, DISASTER RESPONSE |

Schedule I (Form 990)

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|--------------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| A PROMISED LAND ANIMAL RESCUE INC PO BOX 841 PORT RICHEY, FL 34673-0841 | 81-1658404 | 501(C)3 | 12,000. | 0. | | | ADOPTIONS, DISASTER RESPONSE |
| HORN CREEK RESCUE 8115 MOUNT TACOMA DR SW LAKEWOOD, WA 98498-5726 | 83-3748893 | 501(C)3 | 12,000. | 0. | | | ADOPTIONS, DISASTER RESPONSE |
| TELLER COUNTY REGIONAL ANIMAL SHELTER INC - PO BOX 904 - DIVIDE, CO 80814-0904 | 84-1584194 | 501(C)3 | 12,000. | 0. | | | ADOPTIONS |
| PAW PACT RESCUE 24287 PINE CIR PORTER, TX 77365-5233 | 86-2950216 | 501(C)3 | 12,000. | 0. | | | ADOPTIONS |
| TIP ME FREDERICK INC 10425 DAYSVILLE RD WALKERSVILLE, MD 21793-8908 | 46-2362602 | 501(C)3 | 12,000. | 0. | | | ADOPTIONS |
| NEBRASKA HUMANE SOCIETY 8929 FORT ST OMAHA, NE 68134-2842 | 47-0378997 | 501(C)3 | 11,500. | 0. | | | ADOPTIONS |
| THE HUMANE SOCIETY OF LINCOLN COUNTY - PO BOX 2832 - RUIDOSO, NM 88355-2832 | 85-0171020 | 501(C)3 | 11,500. | 0. | | | DISASTER RESPONSE |
| HUB CITY HUMANE SOCIETY 1381 JACKSON RD HATTIESBURG, MS 39402-3682 | 27-5160904 | 501(C)3 | 11,000. | 0. | | | ADOPTIONS, ADOPTIONS RESEARCH |
| OHIO ALLEYCAT RESOURCE & SPAY NEUTER CLINIC INC - 5619 ORLANDO PL - CINCINNATI, OH 45227-2201 | 31-1728182 | 501(C)3 | 11,000. | 0. | | | ADOPTIONS |

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|-----------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| ITSIE BITSIE RESCUE INC PO BOX 1989 ORANGEVALE, CA 95662-1989 | 20-5201701 | 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 |
| CIRCLE OF FRIENDS ANIMAL SOCIETY INC - PO BOX 1235 - GREENSBORO, GA 30642-0601 | 20-8346787 | 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 |
| SOCIETY FOR PRESERVATION OF ANIMAL PO BOX 855 CAMP HILL, PA 17001-0855 | 23-2099002 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| CAT ANGEL NETWORK INC PO BOX 3071 POTTSTOWN, PA 19464-0957 | 23-2957541 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| ACADIANA ANIMAL AID PO BOX 298 CARENCRO, LA 70520-0298 | 23-7414331 | 501(C)6 | 10,000. | 0. | | | ADOPTIONS |
| FYIMS INCORPORATED 107 E 22ND ST HOUSTON, TX 77008-2535 | 26-0020294 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| SONORA CAT RESCUE PO BOX 4363 SONORA, CA 95370-1363 | 26-0085978 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |

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|----------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| MUTTVILLE 255 ALABAMA ST SAN FRANCISCO, CA 94103-4217 | 26-0416747 | 501(C)3 | 10,000. | 0. | | | ACCESS TO CARE, ADOPTIONS |
| FELINE FIX PO BOX 2072 EVANSVILLE, IN 47728-0072 | 26-2203590 | 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 |
| HAVEN ON EARTH ANIMAL LEAGUE INC 12601 SHANNONDALE DR FORT MYERS, FL 33913-7909 | 26-3007751 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| PAWS OF MUSKINGUM COUNTY PO BOX 2364 ZANESVILLE, OH 43702-2364 | 26-4331355 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| MICHELES RESCUE 301 ALTEN AVE NE GRAND RAPIDS, MI 49503-3707 | 27-0915985 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| ROBINS NEST OF INDY INC 11715 FOX RD STE 400 PMB 185 INDIANAPOLIS, IN 46236-8431 | 27-2441316 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| CAT CRUSADERS PO BOX 46292 TAMPA, FL 33646-0103 | 27-3257614 | 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 |

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| A HOME 4 SPOT ANIMAL RESCUE 10310 HOMESTEAD RD LAS VEGAS, NV 89143-1016 | 27-3545831 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| INKY BLUE SEA COMPANION ANIMAL RESCUE - 158 E 126TH ST APT 711 - NEW YORK, NY 10035-1860 | 27-4725295 | 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 |
| FRIENDS OF SOUTHERN OCEAN COUNTY ANIMAL SHELTER INC - PO BOX 1162 - MANAHAWKIN, NJ 08050-8162 | 30-0445803 | 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 |
| ANIMAL RESCUE AND WELFARE SERVICES INC - PO BOX 2341 - PLATTSBURGH, NY 12901-0029 | 30-0950784 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| FAYETTE COUNTY HUMANE SOCIETY 4 COMMERCIAL AVE WASHINGTON CH, OH 43160-2197 | 31-1009520 | 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 |
| TAILS FROM THE CITY 4801 EICHORN AVE CLEVELAND, OH 44102-6025 | 32-0324676 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |

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|------------------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| NASHVILLE CAT RESCUE PO BOX 140898 NASHVILLE, TN 37214-0898 | 33-1125213 | 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 |
| NORTH CENTRAL INDIANA SPAY & NEUTER CLINIC - 7109 GOLDSBERRY RD - BATTLE GROUND, IN 47920-9744 | 35-2086410 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| CITY OF FORT WAYNE 200 E BERRY STREET FORT WAYNE, IN 46802-1804 | 35-6001029 | GOVERNMENT | 10,000. | 0. | | | ADOPTIONS |
| TRIAD INDEPENDENT CAT RESCUE INC 2405 COTTAGE PL GREENSBORO, NC 27455-2912 | 36-4804008 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| A FOREVER-HOME RESCUE FOUNDATION PO BOX 222801 CHANTILLY, VA 20153-2801 | 43-1977921 | 501(C)3 | 10,000. | 0. | | | ACCESS TO CARE, ADOPTIONS |
| TEXAS STAR RESCUE 749 ETHEREDGE RD LONGVIEW, TX 75602-7061 | 45-2799706 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| TRENTON CATS 1977 NORTH OLDEN AVE 327 TRENTON, NJ 08618-2113 | 45-3741630 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| COOL CATS RESCUE 11033 N 18TH DR PHOENIX, AZ 85029-3706 | 46-4123515 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |

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|-------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| 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 |
| 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 |
| WIGGLY TAILS DOG RESCUE 1355 RIVER RD EUGENE, OR 97404-2634 | 47-0991908 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| UTAH VALLEY ANIMAL RESCUE INC 5182 W 6300 S SPANISH FORK, UT 84660-4224 | 47-1264869 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| MIAMI ANIMAL RESCUE INC 14500 SW 88TH AVE APT 157 PALMETTO BAY, FL 33176-8073 | 47-2460585 | 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 |
| DONJAS DOGS 4085 N CENTRAL AVE BROWNSVILLE, TX 78526-9654 | 47-3052018 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| MCCRACKEN KITTY KAT RESCUE 257 PEACH TREE CIR NE CLEVELAND, TN 37323-5702 | 47-4138827 | 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 |
|------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| PAWSOME SOUTHERN RESCUE INC 163 DAVIDSON RD BONAIRE, GA 31005-3420 | 47-4270176 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| FURRY FRIENDS ROCKIN RESCUE INC 2500 14TH AVE SE MANDAN, ND 58554-5104 | 47-4976049 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| FELINE SOLUTIONS INC 1482 CLAYOMA AVE YORK, PA 17408-8889 | 47-5415673 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| RESCUE REHAB REHOME 4520 95TH ST URBANDALE, IA 50322-1456 | 47-5451558 | 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 |
| CAT RESCUE INC 1917 BENEFIT RD CHESAPEAKE, VA 23322-3025 | 54-1861487 | 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 |
| NOAHS ARK BAYOU SANCTUARY PO BOX 775 DANBURY, TX 77534-0775 | 56-2499143 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| COUNTY OF IREDELL PO BOX 788 STATESVILLE, NC 28687-0788 | 56-6000309 | GOVERNMENT | 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.)

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|------------------------------------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| LINCOLN COUNTY 115 W. MAIN STREET LINCOLNTON, NC 28092 | 56-6000315 | GOVERNMENT | 10,000. | 0. | | | ADOPTIONS |
| COLONIAL CAPITAL HUMANE SOCIETY PO BOX 326 NEW BERN, NC 28563-0326 | 58-1314712 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| CHEROKEE COUNTY HUMANE SOCIETY INC 12156 HIGHWAY 92 WOODSTOCK, GA 30188-4481 | 58-1588122 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| BARROW COUNTY BOARD OF COMMISSIONERS - 30 N BROAD STREET - WINDER, GA 30680-1962 | 58-6000783 | GOVERNMENT | 10,000. | 0. | | | ADOPTIONS |
| PEGGY ADAMS ANIMAL RESCUE LEAGUE OF THE PALM BEACHES INC - 3200 N MILITARY TRL - WEST PALM BCH, FL 33409-2733 | 59-0637811 | 501(C)3 | 10,000. | 0. | | | DISASTER RESPONSE |
| CAT TAIL CORNER INC 821 BUCKLES RD PIERSON, FL 32180-2678 | 59-3742470 | 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 |
| HUMANE SOCIETY OF MARION COUNTY INC - PO BOX 1542 - OCALA, FL 34478-1542 | 59-6196017 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| DAVIESS COUNTY 2620 HWY 81 OWENSBORO, KY 42301 | 61-6000155 | GOVERNMENT | 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.)

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|---------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| CITY OF DOTHAN, ALABAMA PO BOX 2128 DOTHAN, AL 36302 | 63-6001243 | GOVERNMENT | 10,000. | 0. | | | ADOPTIONS |
| R U 4 ME PET RESCUE INC 5307 PIPING ROCK DR BOYNTON BEACH, FL 33437-1605 | 65-0874746 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| SPAY-MART INC 732 ROSELAND PKWY HARAHAN, LA 70123-3859 | 72-1418016 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| HUMANE SOCIETY OF LAWTON COMANCHE COUNTY - PO BOX 3134 - LAWTON, OK 73502-3134 | 73-1288816 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| HUMANE SOCIETY OF EL PASO INC 4991 FRED WILSON AVE EL PASO, TX 79906-3106 | 74-1156430 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| HUMANE HEROES INC 10930 E CRYSTAL FALLS PKWY LEANDER, TX 78641-2248 | 74-2069592 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| ANIMAL RESCUE LEAGUE OF EL PASO PO BOX 13055 EL PASO, TX 79913-3055 | 74-2729189 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| BROWN COUNTY HUMANE SOCIETY 2393 MALLARD RD HIAWATHA, KS 66434-9670 | 74-2820034 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| SPCA OF TEXAS 2400 LONE STAR DR DALLAS, TX 75212-6309 | 75-1216660 | 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 |
|----------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| CREEKSIDE ANIMAL RESCUE INC 11791 N COUNTY ROAD 800 E ROACHDALE, IN 46172-9506 | 81-1086930 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| NEBRASKAS ANIMAL LOVING ADVOCATES INC - 1151 S 172ND ST - OMAHA, NE 68130-0000 | 81-4319001 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| TENDER LOVING CATS INC PO BOX 827 MELVILLE, NY 11747-0827 | 81-5228818 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| CATAPALOOZA INC 14325 WATERFORD CHASE PKWY ORLANDO, FL 32828-6612 | 82-1351830 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| SPAY & NEUTER NATION INC PO BOX 300184 FERN PARK, FL 32730-0184 | 82-1400636 | 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 |
| KITTEN & ANIMAL RESCUE ADVOCATES INC - 2791 N 148TH LN - GOODYEAR, AZ 85395-2057 | 82-1814987 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| NEW HOPE ANIMAL RESCUE NFP PO BOX 40443 AUSTIN, TX 78704-0008 | 82-1999291 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| LIVING THE DREAM RESCUE 2272 W VILLAGE DR PHOENIX, AZ 85023-2242 | 82-2485963 | 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 |
|---------------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| CATZ ANGELS CARE 113 E 12TH ST FREMONT, NE 68025-4121 | 82-2950146 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| FAITHFUL FRIENDS PET RESCUE AND REHOMING INC - 4750 NE 121ST AVE - WILLISTON, FL 32696-5550 | 82-4516345 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| DIXIE GIRL DOG RESCUE 3555 CAHABA BEACH RD BIRMINGHAM, AL 35242-5222 | 82-4876411 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| KNEADING KITTY S RESCUE 4633 W LANE AVE GLENDALE, AZ 85301-1642 | 82-5069525 | 501(C)3 PF | 10,000. | 0. | | | ADOPTIONS |
| LARAMIE PEAK HUMANE SOCIETY PO BOX 463 DOUGLAS, WY 82633-0463 | 83-0332538 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| CATS MEOW CAT RESCUE PO BOX 68222 PORTLAND, OR 97268-0222 | 83-2426815 | 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 |
| RESCUE ALLIANCE 13342 CRAWFORD RD GONZALES, LA 70737-7381 | 83-4560359 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| SOUTHERN ARIZONA CAT RESCUE 5319 E SPEEDWAY BLVD TUCSON, AZ 85712-4921 | 84-3384497 | 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.)

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|------------------------------------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| WATERMELON MOUNTAIN RANCH INC 3251 WESTPHALIA BLVD SE RIO RANCHO, NM 87144-0000 | 85-0480585 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| WHISKER TOWN CATS INC 2512 11TH ST SAINT CLOUD, FL 34769-3525 | 85-1080150 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| A LITTLE BIT OF HEAVEN RESCUE INC 2505 ZOYSIA DR DALTON, GA 30721-0708 | 86-1841992 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| HEAVENLY PAWS ANIMAL SHELTER INC 3678 ALDINGER RD SEVEN VALLEYS, PA 17360-8581 | 87-0728506 | 501(C)3 | 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 |
| 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 |
| ALMOST HOME FOUNDATION PO BOX 308 ELK GROVE VLG, IL 60009-0308 | 04-3805366 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| DESERT PAWS RESCUE PO BOX 1243 QUEEN CREEK, AZ 85142-1827 | 06-1721946 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| FEEDING AMERICA TAMPA BAY INC 3624 CAUSEWAY BLVD TAMPA, FL 33619-5194 | 59-2116576 | 501(C)3 | 10,000. | 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.)

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|-------------------------------------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| MUTTS & MEOWS RESCUE 938 ECHO CREEK DR MISSOURI CITY, TX 77489-1508 | 45-5491557 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| CATS CRADLE OF GREATER RICHMOND INCORPORATED - PO BOX 70040-0040 - RICHMOND, VA 23255-0000 | 20-3168106 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| ARISE ANIMAL RESCUE 202 BRICE CT HUBERT, NC 28539-1300 | 87-1287922 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| CLP ANIMAL RESCUE INC 2744 SEDGEFIELD AVE DELTONA, FL 32725-2253 | 87-3420909 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| SOCIETY FOR THE PREVENTION OF CRUEL TY TO ANIMALS TAMPA BAY FLORIDA IN - 9099 130TH AVE - LARGO, FL 33773-1403 | 59-0715928 | 501(C)3 | 10,000. | 0. | | | DISASTER RESPONSE |
| MOUNTAINEERS FOR MUTTS CORP PO BOX 1172 DELLSLOW, WV 26531-1172 | 36-4778907 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| CITIZENS FOR THE WELFARE OF ANIMALS IN CLAY COUNTY - 73066 HIGHWAY 49 - DELTA, AL 36258-5926 | 45-2923479 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| TREVORS ANIMAL RESCUE 10577 E PINWOOD DR PARKER, CO 80138-7827 | 86-2087474 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| HOMELESS PETS FOUNDATION INC 1343 GRESHAM RD MARIETTA, GA 30062-4071 | 58-2522510 | 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.)

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|-------------------------------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| SAINT FRANCIS ANIMAL WELFARE GROUP 2126 ABIFF RD BURNS, TN 37029-5410 | 20-3827037 | 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 |
| PURR-A-LOT CAT SHELTER CORP 12806 S MEMORIAL DR UNIT 111 BIXBY, OK 74008-2591 | 45-3828871 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| SEMPER FI LEGACY RESCUE INC 3176 COKERS CHAPEL RD BALL GROUND, GA 30107-4786 | 92-2637122 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| LUCKY PAWS RESCUE FRIENDS 4219 MAIN ST STE A SPRINGFIELD, OR 97478-6244 | 88-4214804 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS OF POLK CO TX - PO BOX 1403 - LIVINGSTON, TX 77351-0025 | 74-2119232 | 501(C)3 | 10,000. | 0. | | | DISASTER RESPONSE |
| A HEINZ57 PET RESCUE AND TRANSPORT INC - PO BOX 188 - DE SOTO, IA 50069-0188 | 80-0243678 | 501(C)3 | 10,000. | 0. | | | DISASTER RESPONSE |
| SAINT FRANCES ANIMAL CENTER 125 N RIDGE ST GEORGETOWN, SC 29440-2935 | 57-0785170 | 501(C)3 | 10,000. | 0. | | | DISASTER RESPONSE |
| WATAUGA HUMANE SOCIETY PO BOX 1835 BOONE, NC 28607-0687 | 23-7128331 | 501(C)3 | 10,000. | 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.)

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|------------------------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| SOUTH CAROLINA COMMUNITY CAT PROJECT - 500 MASON RD - INMAN, SC 29349-9487 | 88-0788889 | 501(C)3 | 10,000. | 0. | | | DISASTER RESPONSE |
| ANIMALLUVRS DREAM RESCUE PO BOX 522 RIVERVIEW, FL 33568-0522 | 46-2372235 | 501(C)3 | 10,000. | 0. | | | DISASTER RESPONSE |
| RESCUE CATS ROCK 40900 HORSESHOE RD PUNTA GORDA, FL 33982-7723 | 83-2184392 | 501(C)3 | 10,000. | 0. | | | DISASTER RESPONSE |
| MITCHELL COUNTY ANIMAL RESCUE INC PO BOX 308 SPRUCE PINE, NC 28777-0308 | 56-1432402 | 501(C)3 | 10,000. | 0. | | | DISASTER RESPONSE |
| PANHANDLE ANIMAL WELFARE SOCIETY INC AKA PAWS INC - 752 LOVEJOY RD NW - FT WALTON BCH, FL 32548-3845 | 59-0815515 | 501(C)3 | 10,000. | 0. | | | ADOPTIONS |
| THE U C DAVIS FOUNDATION 202 COUSTEAU PL STE 185 DAVIS, CA 95618-7761 | 94-6081352 | 501(C)3 | 10,000. | 0. | | | ACCESS TO CARE, ADOPTIONS |
| VILLAGE MEWS 550 BROWNING RD ENOREE, SC 29335-3618 | 93-4313978 | 501(C)3 | 8,500. | 0. | | | ADOPTIONS, DISASTER RESPONSE |
| SCRUFFY PAWS ANIMAL RESCUE 2944 POST RD WARWICK, RI 02886-3161 | 82-0908875 | 501(C)3 | 8,000. | 0. | | | ADOPTIONS |
| POLK COUNTY BULLY PROJECT 5840 BRANNEN RD W LAKELAND, FL 33813-0000 | 84-2316936 | 501(C)3 | 7,500. | 0. | | | DISASTER RESPONSE |

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|---------------------------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| HUMANE SOCIETY OF RAY COUNTY PO BOX 622 RICHMOND, MO 64085-0622 | 43-1644724 | 501(C)3 | 7,000. | 0. | | | ADOPTIONS |
| SEVIER COUNTY HUMANE SOCIETY PO BOX 976 PIGEON FORGE, TN 37868-0976 | 62-0938001 | 501(C)3 | 7,000. | 0. | | | ADOPTIONS, DISASTER RESPONSE |
| FRIENDS OF FOOTHILLS ANIMAL SHELTER - 580 MC INTYRE ST - GOLDEN, CO 80401-5026 | 46-2809962 | 501(C)3 | 7,000. | 0. | | | DISASTER RESPONSE |
| FRIENDS OF THE CARTER COUNTY TENNESSEE DISASTER ANIMAL RESPONSE - 118 DANNER RD - ELIZABETHTON, TN 37643-6283 | 99-2816416 | 501(C)3 | 7,000. | 0. | | | DISASTER RESPONSE |
| SIOUX EMPIRE TNR COALITION 1909 S 7TH AVE SIOUX FALLS, SD 57105-3133 | 92-1136883 | 501(C)3 | 7,000. | 0. | | | ADOPTIONS |
| FISHER VALLEY FELINES 5644 COUNTY ROAD M FITCHBURG, WI 53575-2023 | 45-3438705 | 501(C)3 | 6,000. | 0. | | | ADOPTIONS |
| HUMANE SOCIETY OF PUERTO RICO INC PO BOX 2387 GUAYNABO, PR 00970-2387 | 66-0329776 | 501(C)3 | 6,000. | 0. | | | ADOPTIONS |
| CATHEYS K-9 RESCUE PO BOX 622 LAKE ISABELLA, CA 93240-0622 | 91-2134340 | 501(C)3 | 5,500. | 0. | | | ADOPTIONS |
| FARM GALS ANIMAL MINISTRY INC 314 S GORDON ST ALVIN, TX 77511-2337 | 84-3331743 | 501(C)3 | 5,500. | 0. | | | DISASTER RESPONSE |

Schedule I (Form 990)

[illegible]

432241
04-01-24

SCHEDULE L
(Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

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 for instructions and the latest information.

OMB No. 1545-0047

Open to Public
Inspection

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

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 | 6,500,000. | MANAGEMENT | | X |
| (2)PETSMART LLC | SUBSTANTIAL CONTRIB | 2,918,168. | 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 \$6,500,000 OF EXPENSES UNDER THE MANAGEMENT SERVICES AGREEMENT
WITH PETSMART LLC FOR THE FISCAL YEAR ENDED FEBRUARY 2, 2025.

SCHEDULE M
(Form 990)

Noncash Contributions

OMB No. 1545-0047

2024

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Department of the Treasury
Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, line 29 or 30.
Attach to Form 990.
Go to 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 | 26 | 189,881. | 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 | 7,916,983. | 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 on 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? | | | | |
| 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? | | | | |
| 32a | Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? | | | | |
| 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)

(Rev. December 2024)

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 for instructions and the latest information.

OMB No. 1545-0047

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:
FIVE BOARD MEMBERS SERVING DURING THE FISCAL YEAR HAVE A BUSINESS
RELATIONSHIP WITH PETSMART CHARITIES. THOSE INDIVIDUALS INCLUDE J.K.
SYMANCYK, CHERISE ORDLOCK, MONICA HUBBARD, MIKE SHULTHEIS, AND GARY SHULLAW
(BOARD OBSERVER, NON-VOTING MEMBER).

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
WERE EMPLOYEES OF PETSMART LLC AND COMPENSATED BY PETSMART LLC FOR
PROVIDING SERVICES TO THE ORGANIZATION AS FOLLOWS:

| | REPORTABLE COMP | OTHER COMP |
|------------------|-----------------|------------|
| AIMEE GILBREATH | \$582,931 | \$18,617 |
| STEPHANIE JENSEN | \$217,696 | \$27,789 |
| JANET HENRY | \$104,731 | \$18,498 |

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

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

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 2024.

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 XI, LINE 9, CHANGES IN NET ASSETS:
CHANGE IN VALUE OF BENEFICIAL INTEREST 643,677.

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)

(Rev. January 2025)
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 for instructions and the latest information.

OMB No. 1545-0047

Open to Public
Inspection

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

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 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----|
| 1 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? | | |
| a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity | 1a | X |
| b Gift, grant, or capital contribution to related organization(s) | 1b | X |
| c Gift, grant, or capital contribution from related organization(s) | 1c | X |
| d Loans or loan guarantees to or for related organization(s) | 1d | X |
| e Loans or loan guarantees by related organization(s) | 1e | X |
| f Dividends from related organization(s) | 1f | X |
| g Sale of assets to related organization(s) | 1g | X |
| h Purchase of assets from related organization(s) | 1h | X |
| i Exchange of assets with related organization(s) | 1i | X |
| j Lease of facilities, equipment, or other assets to related organization(s) | 1j | X |
| k Lease of facilities, equipment, or other assets from related organization(s) | 1k | X |
| l Performance of services or membership or fundraising solicitations for related organization(s) | 1l | X |
| m Performance of services or membership or fundraising solicitations by related organization(s) | 1m | X |
| n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) | 1n | X |
| o Sharing of paid employees with related organization(s) | 1o | X |
| p Reimbursement paid to related organization(s) for expenses | 1p | X |
| q Reimbursement paid by related organization(s) for expenses | 1q | X |
| r Other transfer of cash or property to related organization(s) | 1r | X |
| s Other transfer of cash or property from related organization(s) | 1s | X |
| 2 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 | 100,000. | BOOK |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |

