(Rev. January 2020)

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

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury

For Paperwork Reduction Act Notice, see the separate instructions. BAA

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

Return of Organization Exempt From Income Tax

Internal Revenue Service ▶ Go to www.irs.gov/Form990 for instructions and the latest information. , 2019, and ending For the 2019 calendar year, or tax year beginning , 20 C Name of organization Alliance for Contraception in Cats & Dogs Check if applicable: D Employer identification number Doing business as ACC&D 41-2185841 Address change Number and street (or P.O. box if mail is not delivered to street address) Name change Room/suite E Telephone number 11145 NW Old Cornelius Pass Road (503)358-1438Initial return Final return/terminated City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ 198,959. PORTLAND, OR 97231 Amended return **H(a)** Is this a group return for subordinates? ☐ **Yes X No** Application pending F Name and address of principal officer: Joyce Briggs, 11145 NW Old Cornelius Pass Road, Portland, OR 97231 H(b) Are all subordinates included? 🗌 Yes 🗌 No Tax-exempt status: X 501(c)(3) 4947(a)(1) or 527 501(c) () ◀ (insert no.) If "No," attach a list. (see instructions) Website: ▶ www.acc-d.org **H(c)** Group exemption number ▶ Form of organization: X Corporation Trust Association L Year of formation: 2005 M State of legal domicile: OR Part I **Summary** Briefly describe the organization's mission or most significant activities: The mission of the Alliance for Contraception 1 in Cats & Dogs (ACC&D)is to advance non-surgical fertility control so as Activities & Governance to effectively and humanely reduce the number of unwanted cats and dogs. 2 Check this box ▶ ☐ 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) 10 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 9 5 Total number of individuals employed in calendar year 2019 (Part V, line 2a) 5 4 6 6 25 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. Net unrelated business taxable income from Form 990-T, line 39 7b 0. **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) 325,166. 188,106. Revenue 9 Program service revenue (Part VIII, line 2g) 17,796. 0. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 4,836. 10,853. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 347,798. 198,959. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 1,000. Benefits paid to or for members (Part IX, column (A), line 4) 14 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 248,514. 232,655. 16a Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) ► 27,536. b 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 169,656. 52,780. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 418,170. 286,435. Revenue less expenses. Subtract line 18 from line 12 19 -70,372.-87,476. Assets or designation of designation of the designa **Beginning of Current Year** End of Year 20 Total assets (Part X, line 16) 775,872. 691,864. 18,596. 14,880. 21 Total liabilities (Part X, line 26) . 22 Net assets or fund balances. Subtract line 21 from line 20 757,276. 676,984. 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. Form 8879-E0 authorization given for preparer to enter pin as signature 08/11/2020 Sign Signature of officer Here Kevin Morris, Treasurer Type or print name and title Print/Type preparer's name Preparer's signature **Paid** Christy Niezgodzki CPA Christy Niezgodzki CPA **Preparer** Firm's name ► CHRISTY A NIEZGODZKI, CPA Use Only Firm's address ▶ 7510 N 14th Ave, Phoenix, AZ 85021-8012 May the IRS discuss this return with the preparer shown above? (see instructions)

Form 990 (2019) Page **2**

Part		
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission:	
	The mission of the Alliance for Contraception in Cats & Dogs (ACC&D)	
	is to advance non-surgical fertility control so as to effectively	
	and humanely reduce the number of unwanted cats and dogs.	
	See Part III, Ln 1 statement	
2	Did the organization undertake any significant program services during the year which were not listed on the	- V N-
	· —	s 🗵 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?	s 🗵 No
	If "Yes," describe these changes on Schedule O.	S A NO
4	Describe the organization's program service accomplishments for each of its three largest program services, as me expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations	
	the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 71,120. including grants of \$ 0.) (Revenue \$	0.)
	Ethical Decision-Making:	
	2019 focused on developing and publishing online in November the free resource	
	"Ethical decision-making: practical guidance & toolkits on ethical decision-ma	king
	and considerations for field projects targeting dogs and cats." This was	
	created/written by staff with significant contributions from outside experts in the	field.
	In 2020 we are striving to extend the reach of this open-source resource	
	through collaborations in the field. ACC&D also formed and made use of our	
	own Ethical Review Board in 2019 for the project in the next section.	
4b	(Code:) (Expenses \$ 100,069. including grants of \$ 1,000.) (Revenue \$	
	Three key projects including:	
	Free-Roaming Cat Population Modeling:	
	Our free-roaming cat population modeling project continues with support from cons	<u>ultant</u>
	Dr. Phil Miller, Board member Dr. John Boone, and several other volunteers	
	on the modeling team. Our second study "A Long-Term Lens: Cumulative Impacts o	
	Free-Roaming Cat Management Strategy and Intensity on Preventable Cat Mortalit	ıes"
	was published open-access in the July 2019 Frontiers in Veterinary Sciences'	
	special issue "Sustaining Innovation in Compassionate Free-Roaming Cat	
	Management Across the Globe: A Decadal Reappraisal of the Practice and	
	Promise of TNVR" Findings suggest that "preventable deaths" are comprised most	та от
	See Part III, Ln 4b statement	
4c	(Code:) (Expenses \$ 40,056. including grants of \$ 0.) (Revenue \$	0.)
	Marking Non-Surgically Contracepted/Sterilized Animals:	
	Our project exploring the use of microneedle patches to tattoo an animal's ear	
	progressed substantially in 2019. Microneedle patches are being developed	
	to administer the flu vaccine to humans, among other uses. Application is	
	reported to be painless by both adults and children.	
	We've been working closely with Dr. Mark Prausnitz of the Georgia Institute	
	of Technology to explore using these patches to tattoo the inside of a dog or	
	a cat's ear to indicate that it has been non-surgically sterilized and/or	
	vaccinated. After prework on cadaver ears (animals not euthanized for the stud	 v)
	we conducted a first pilot in owned dogs and cats which demonstrated that	⊥
	See Part III, In 4c statement	
	DOG TALL TILLY BIN 40 SCALEMENC	
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
40	Total program convice expenses 211 245	

Part I	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	×	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	×	
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</i> "Yes," <i>complete Schedule C, Part I</i>	3		×
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</i> "Yes," <i>complete Schedule C, Part II</i>	4		×
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		×
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		×
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>	7		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		×
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a 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>	9		×
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>	10		×
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		×
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>	11b		×
С	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>	11c		×
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? If "Yes," complete Schedule D, Part IX	11d		×
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		×
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</i> "Yes," <i>complete Schedule D, Part X</i>	11f		×
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		×
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		×
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		×
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		×
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		×
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>	15		×
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		×
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)	17		×
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		×
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		×
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		×
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		×

Part	Checklist of Required Schedules (continued)			
rart	Checkist of ricquired concudes (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		×
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		×
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		×
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		×
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		×
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		×
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		×
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		×
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		×
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		×
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		×
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30		×
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		×
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		×
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		×
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		×
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		×
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		×
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		×
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		×
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38	×	
Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
	Oncok it obliedule o contains a response of flote to any line lift tills Falt V	• •	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	10		

Part '	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			
		1		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	×	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		×
	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		×
b	If "Yes," enter the name of the foreign country ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		×
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		×
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
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		×
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		×
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		×
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		×
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		×
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			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]			
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	_		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
a	Note: See the instructions for additional information the organization must report on Schedule O.	104		
b	Enter the amount of reserves the organization is required to maintain by the states in which			
D	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		×
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> .	14b	<u> </u>	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	1.40	<u> </u>	
10	excess parachute payment(s) during the year?	15		
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		
-	If "Yes." complete Form 4720. Schedule O.	_		

Part VI

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. 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 10 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. Enter the number of voting members included on line 1a, above, who are independent . 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 × Did the organization delegate control over management duties customarily performed by or under the direct 3 3 supervision of officers, directors, trustees, or key employees to a management company or other person? . × Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 × Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a X Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b × R Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X 8b × 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 × Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a × **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 Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a × **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? *If "No," go to line 13* 12a × Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b × Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c X 13 13 × 14 14 Did the organization have a written document retention and destruction policy? × Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a × 15b X If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a × If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ See Part VI, Line 17 stmt 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website X Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶ The Organization, 11145 NW Old Cornelius Pass Road, Portland, OR 97231 (503)358-1438

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No"

Form 990 (2019) Page **7**

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

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

Check this box if fletther the organization flor		u 0.g.	αι <u>_</u>		C)	ompo	71.00			
(A) Name and title	(B) Average hours per week	box, office	unles er and	neck ss pe	erson	e than o is both or/trust	n an tee)	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations
(1) Joyce Briggs, MS	40.00									
Secretary		×		×		×		116,278.	0.	0.
(2) Linda Rhodes, VMD, PhD	2.00									_
Director		×						0.	0.	0.
(3) G. Robert Weedon, DVM, MPH Director	2.00	×						0.	0.	0.
(4) Elly Hiby, PhD	2.00									
Chair, Director		×		×				0.	0.	0.
(5) John Boone, PhD	2.00									
Vice Chair		×		×				0.	0.	0.
(6) Betsy Banks Saul, MS Director	2.00	×						0.	0.	0.
(7) Camille DeClementi, VMD, DABT, DABVT	2.00	×						0.	0.	0.
(8) Amy Nichols	2.00									
Director		×						0.	0.	0.
(9) Kevin Morris, PhD Treasurer, Director	2.00	×		×				0.	0.	0.
(10) Gregory Castle, MPhil	2.00							0.	0.	0.
Director	2.00	×						0.	0.	0.
(11)										
(12)										
(13)										
(14)										

Part	VII Section A. Officers, Directors, 7	Γrustees,	Key I	Em	plo	yee	s, an	d F	lighest Compe	nsated E	mplo	yees (continu	ed)
					(0	C)							
	(A)	(B) Position (D) (E)								(E)		(F)	
	Name and title	Average	`				e than d is both		Reportable	Reportal	ble	Estimated amou	ınt
		hours					or/trust		compensation	compensa		of other	
		per week (list any	악	Я	Q	<u>~</u>	en H	Fc	from the organization	from rela organizati		compensation from the	1
		hours for	Individual trustee or director	Institutional trustee	Officer	Key employee	ghe	Former	(W-2/1099-MISC)	(W-2/1099-I		organization an	ıd
		related	dual	tior	٦	삘	st c	4			•	related organizati	ons
		organizations below	ี้ <u>รี</u>	lal t		oye) mg						
		dotted line)	stee	ıtsı.		Φ	ens						
				ee			Highest compensated employee						
(15)													
(10)													
(16)													
(10)			-										
(17)													
(17)													
(4.0)													
(18)			-										
(4.0)													
(19)													
(00)													
(20)													
(a, t)													
(21)													
(22)													
(23)													
(24)													
(25)													
1b	Subtotal							>	116,278.		0.		0.
С	Total from continuation sheets to Part	VII, Sectio	n A					>					
d	Total (add lines 1b and 1c)							<u> </u>	116,278.		0.		0.
2	Total number of individuals (including but	t not limited	d to th	ose	e list	ted	above	e) w	ho received more	e than \$10	0,000	of	
	reportable compensation from the organi	ization ►					1						
												Yes	No
3	Did the organization list any former of	officer, dire	ector,	tru	ste	e, k	cey e	mpl	loyee, or highes	t compen	sated		
	employee on line 1a? If "Yes," complete	Schedule J	for s	uch	indi	ivid	ual					3	×
4	For any individual listed on line 1a, is the	sum of re	portal	ble	con	npei	nsatio	n a	nd other compe	nsation fro	m the		
	organization and related organizations												
	individual											4	×
5	Did any person listed on line 1a receive of	or accrue co	ompe	nsa	tion	fro	m any	un un	related organizat	ion or indi	vidual		
	for services rendered to the organization	? If "Yes," c	ompl	lete	Sch	hedu	ule J f	or s	such person .			5	X
Secti	on B. Independent Contractors												
1	Complete this table for your five high	nest comp	ensate	ed	inde	epei	ndent	СО	ontractors that r	eceived n	nore 1	han \$100,000	of
	compensation from the organization. Rep	ort compen	satio	n fo	r the	ca	lenda	r ye	ar ending with or	within the	organ	ization's tax ye	ear.
	(A)								(B)			(C)	
	Name and business add	Iress							Description of serv	rices	(Compensation	
											_		
2	Total number of independent contractor	rs (includir	ng bu	ıt n	ot I	limit	ted to	th	ose listed abov	e) who			
_	received more than \$100,000 of compens									, ·			

Part VIII Statement of Revenue

		Check if Schedule	Осо	ntains a re	spon	ise or note to ar	ny line in this Pa	ırt VIII		
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
S S	1a	Federated campaig	ns .		1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues			1b					
اع ق	С	Fundraising events			1c					
£ ₹	d	Related organization			1d					
<u>a</u> g	е	Government grants			1e					
ns,	f	All other contribution		-						
er S	•	and similar amounts no			1f	188,106.				
혈취	а	Noncash contribution								
d d	9	lines 1a–1f			1g	\$				
a Co	h	Total. Add lines 1a-					188,106.			
						Business Code				
e e	2a	Symposium Reg	istr	ation F	ees	541990	0.	0.	0.	0.
ا کے	b									
gram Ser Revenue	c									
E B	d									
gra Re	٠ ۵									
Program Service Revenue	f	All other program se								
ъ	g g	Total. Add lines 2a-				•	0.			
-	_	Investment income					•			
	3	other similar amoun					10,853.	0.	0.	10,853.
	4	Income from investr	-				10,033.	•	•	10,033.
	5	Royalties			•	•				
	Ū	rioyanios	· ·	(i) Rea		(ii) Personal				
	6a	Gross rents	6a	(7)	-	(1) 1 2 2 1 1 1 1				
	b	Less: rental expenses	6b							
	C	Rental income or (loss)								
	d	Net rental income o		c)		•				
	_		(103	(i) Securit	ies	(ii) Other				
	7a	Gross amount from		(i) Securi	.103	(ii) Other				
		sales of assets other than inventory	7a							
		•	/a							
Revenue	b	Less: cost or other basis	71-							
Ver	_	and sales expenses .	7b							
Re		Gain or (loss)	7c							
ē	d	Net gain or (loss)				-				
Other	8a	Gross income from		ndraising						
		events (not including of contributions re		d on line						
		1c). See Part IV, line			0-					
		•			8a					
		Less: direct expens			8b	nto N				
	C	Net income or (loss)			y eve	ents ▶				
	9a	Gross income f			0-					
		activities. See Part I			9a					
		Less: direct expens			9b					
		Net income or (loss)			CTIVITIE	es ▶				
	10a	Gross sales of in		•	4.0					
		returns and allowan			10a					
		Less: cost of goods			10b	\				
\longrightarrow	С	Net income or (loss)	irom	i sales of in	ivento	1				
Sn						Business Code				
ne ne	11a									
scellaneo Revenue	b									
e Se	C	A.IIII								
Miscellaneous Revenue	d	All other revenue								
		Total. Add lines 11a				<u> ▶</u>	100 050			10.055
	12	Total revenue. See	instr	uctions		🕨	198,959.	0.	0.	10,853.

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 (**D**) Fundraising expenses (B) Program service expenses Do not include amounts reported on lines 6b. 7b. (A) Total expenses Management and general expenses 8b. 9b. and 10b of Part VIII. Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 1,000. 1,000. Benefits paid to or for members Compensation of current officers, directors, 5 trustees, and key employees 123,929. 101,622. 12,393. 9,914. 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 84,709. 63,022. 12,063. 9,624. Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 3,098. 2,347. 424. 327. Other employee benefits 5,679. 9 4,343. 758. 578. 10 Payroll taxes 15,240. 12,034. 1,785. 1,421. Fees for services (nonemployees): 11 Management 703. 60. 643. 0. Legal Accounting 12,739. 0. 12,739. 0. Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) 462. 133. 253. 76. 12 Advertising and promotion 13 5,152. 5,029. 55. Office expenses 68. Information technology 14 15 Occupancy 16 12,867. 7,583. 339. 4,945. 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 880. 880. 0. 0. 20 21 Payments to affiliates 22 Depreciation, depletion, and amortization . 23 2,746. 0. 2,746. 0. 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.) 0. 10,736. Research 10,736. 0. 3,375. 0. Payroll processing 3,375. 0. Public Relations 2,537. 2,456. 81. 0. Fundraising 583. 0. 583. All other expenses Total functional expenses. Add lines 1 through 24e 25 286,435. 211,245. 47,654. 27,536. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720) . . .

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Par	1X		<u> U</u>
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	26,931.	1	74,476.
	2	Savings and temporary cash investments	574 , 547.	2	401,062.
	3	Pledges and grants receivable, net	170,000.	3	107,000.
	4	Accounts receivable, net	4,394.	4	
	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	
šets	8	Inventories for sale or use		8	
Assets	9	Prepaid expenses and deferred charges		9	
•	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a		J	
	b	Less: accumulated depreciation		10c	
	11	Investments—publicly traded securities		11	109,326.
	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)	775,872.	16	691,864.
	17	Accounts payable and accrued expenses	18,596.	17	14,880.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	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 parents.		00	
iak	00	controlled entity or family member of any of these persons		22	
_	23 24	Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties		23 24	
		· · · · · · · · · · · · · · · · · · ·		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	18,596.		14,880.
Seor		Organizations that follow FASB ASC 958, check here ► ⊠ and complete lines 27, 28, 32, and 33.	20,0300		2270000
alar	27	Net assets without donor restrictions	587,276.	27	601,984.
ĕ	28	Net assets with donor restrictions	170,000.	28	75,000.
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 29 through 33.			
ō	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
188	31	Retained earnings, endowment, accumulated income, or other funds		31	
et/	32	Total net assets or fund balances	757,276.	32	676,984.
Ž	33	Total liabilities and net assets/fund balances	775,872.	33	691,864.

Form 990 (2019) Page **12**

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	98,9	59.
2	Total expenses (must equal Part IX, column (A), line 25)	2	86,4	35.
3	Revenue less expenses. Subtract line 2 from line 1	_	87,4	76.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4	7.	57,2	76.
5	Net unrealized gains (losses) on investments		7,1	84.
6	Donated services and use of facilities			
7	Investment expenses			
8	Prior period adjustments			
9	Other changes in net assets or fund balances (explain on Schedule O)			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	32, column (B))	6	76 , 9	84.
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: Cash Accrual Other	-		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.	ו		
2a		2a		×
Za	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			
	reviewed on a separate basis, consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b		×
	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:	²		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
•	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight o	f		
C	the audit, review, or compilation of its financial statements and selection of an independent accountant? .	່		
	If the organization changed either its oversight process or selection process during the tax year, explain or	_		
	Schedule O.	•		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the	•		
	Single Audit Act and OMB Circular A-133?	3a		×
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.	3b		
	PEV 06/02/20 PPO	Eorn	agn.	(2010)

REV 06/02/20 PRO Form **990** (2019)

Additional information from your Form 990: Return of Organization Exempt from Income Tax

Form 990: Return of Organization Exempt from Income Tax Form 990, Page 2, Part III, Line 1 (continued)

Continuation Statement

Description To achieve this mission, ACC&D provides scientifically sound and animal welfare-oriented resources to stakeholders, supports the appropriate distribution of available products suitable for the humane control of cat and dog populations, and facilitates research on topics relevant to the application, acceptance, and use of non-surgical fertility control methods. ACC&D is a not-for-profit organization formed in 2000. It grew out of a pivotal meeting at Virginia Tech and in early years operated as a program of Auburn University. The Organization was incorporated in 2005 as a stand-alone 501(c)(3). It has held six international symposia to convene researchers, academics, veterinarians, animal welfare professionals, and other stakeholders in advancing cat and dog fertility control with the most recent held in 2018. In 2019, the Organization was guided by a 10-member Board of Directors and a 14-member Science Advisory Board. Both Boards have international representation and reflect significant volunteer support from senior leaders, veterinarians, scientists and academics. Several of these volunteers also contribute as the Scientific Advisory Board of the Michelson Prize and Grants program of the Found Animals Foundation, which has provided over \$15 million in grants since 2009 to nearly 40 projects toward development of a non-surgical sterilant(s) for dogs and cats. ACC&D's Council of Stakeholders comprises leading organizations which provide key strategic and networking support as well as key financial resources to help ensure sustainability. Council members in 2019 include Alley Cat Allies, the American Society for the Prevention of Cruelty to Animals (ASPCA), Best Friends Animal Society, The Humane Society of the United States (HSUS), International Cat Care, International Fund for Animal Welfare, Maddie's Fund, Petco Foundation, PetSmart Charities, and the Regina Bauer Frankenberg Foundation. Based in Portland, Oregon, ACC&D relies on grants from other not-for-profit organizations, private foundations, and individual major donors for its

Form 990: Return of Organization Exempt from Income Tax Form 990, Page 2, Part III, Line 4b (continued)

primary support.

Continuation Statement

Description kitten mortality, rather than adults, for all management scenarios. High-intensity TNR reduces cumulative preventable deaths over 10 years more so than other tested scenarios (including lethal management). However, low-intensity TNR results in more preventable deaths, a reminder of the importance of being strategic when

Form 990: Return of Organization Exempt from Income Tax Form 990, Page 2, Part III, Line 4b (continued)

Continuation Statement

Description conducting TNR campaigns. By 12/19 this article was most viewed in this Frontiers special issue and read more than 90% of Frontier's articles. Our team worked on a very 3rd and major study manuscript, submitted for publication in mid-2020. Progress Toward a Non-Surgical Sterilant and the 6th International Symposium on Non-surgical Methods of Pet Population Control: ACC&Ds 6th International Symposium in mid-2018 highlighted the promising new approach of gene transfer. Researchers presented two studies underway in cats using viral vectors to deliver genes to suppress fertility. Dr. David Pepin of Harvard University's Michelson-funded research involves a single injection to sterilize female cats by delivering a gene whose expression prevents the development of eggs in the ovaries. The treatment has been shown to suppress fertility in female mice for over a year - their reproductive lifetime. Subsequent studies continued in 2019 in cats and are showing much promise. We also continue to monitor several other research initiatives, providing guidance as appropriate and when helpful. Outreach and Education: In 2019 ACC&D presented remotely at the 3rd International Conference on Dog Population Management, and prepared online webinars for training use at the ASPCA Spay Neuter Alliance's national training center and the University of Florida Online Shelter Medicine Curriculum.

Form 990: Return of Organization Exempt from Income Tax Form 990, Page 2, Part III, Line 4c (continued)

Continuation Statement

Description
that the treatment did not appear to cause pain or distress in dogs and cats,
and gave guidance for improving the visibility of the tattoo. Work continues into 2020.
Facial recognition is also being explored as an alternative or to be used
in conjunction.

Form 990: Return of Organization Exempt from Income Tax Part VI, Line 17 (continued)

Continuation Statement

	States Where Copy of Return is Required
СО	
OR	
CA	
NY	

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

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.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(E)
Total

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

Employer identification number Name of the organization Alliance for Contraception in Cats & Dogs 41-2185841 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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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.) ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X 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.) ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.) 8 ☐ 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: An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross 10 receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving a 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. 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. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d 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. 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. Enter the number of supported organizations . . . Provide the following information about the supported organization(s). (iii) Type of organization (i) Name of supported organization (ii) EIN (iv) Is the organization (vi) Amount of (v) Amount of monetary (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D)

18

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) 2015 **(b)** 2016 (c) 2017 (d) 2018 **(e)** 2019 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . 188,106. 1,680,584. 339,363. 336,034. 474,119. 342,962. Tax revenues levied for the 2 organization's benefit and either paid to or expended on its behalf . . . The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3. . . . 339,363. 336,034. 474,119. 342,962. 188,106. 1,680,584. 4 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) 247,473. Public support. Subtract line 5 from line 4 1,433,111. Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2015 **(b)** 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total 339,363. 336,034. 474,119. 188,106. 1,680,584. 7 342,962. Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 535. 447. 10,659. 448. 4,836. 16,925. Net income from unrelated business 9 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.) **Total support.** Add lines 7 through 10 11 1,697,509. 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f) 84.42 % 14 Public support percentage from 2018 Schedule A, Part II, line 14 15 331/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization 331/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 10%-facts-and-circumstances test - 2019. 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 10%-facts-and-circumstances test - 2018. 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

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.)

Secti	on A. Public Support				<u> </u>		
	dar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees	(,	(,	(-)	(1)	(-)	()
	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						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
Secti	line 6.)						
	dar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6	(a) 2010	(3) 2010	(6) 2011	(a) 2010	(6) 2010	(i) Total
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						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or						
12	loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
4.4	and 12.)		'a fivot	d thind facet	ou fifth tour	201 00 5 22211	n F01(a)(0)
14	organization, check this box and stop he	re				ear as a sectio	(
	on C. Computation of Public Suppor					T T	
15	Public support percentage for 2019 (line 8						%
16	Public support percentage from 2018 Sch					16	%
	on D. Computation of Investment Inc			ny lina 40 - a - la	(f)	47	0/
17	Investment income percentage for 2019 (•			<u>%</u>
18	Investment income percentage from 2018 331/3% support tests—2019. If the organi						% and line
19a	17 is not more than 33 ¹ / ₃ %, check this box						
h	33 ¹ / ₃ % support tests—2018. If the organiz		_			_	_
b	line 18 is not more than 331/3%, check this b						
20	Private foundation. If the organization di		_				_

Supporting Organizations Part IV

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

Se

Secti	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.			
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3a		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3b 3c		
4a		4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a		5a		
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?	5b		
6	Substitutions only. Was the substitution the result of an event beyond the organization's control? 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>	5c		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a		

10a

10b

b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to

determine whether the organization had excess business holdings.)

Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
	organizations and what socialitions of resultations, if any, applied to saon 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		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).			
C1:		1		
Secu	on D. All Type III Supporting Organizations		Vaa	NIa
1	Did the expenientian provide to each of its supported expenientians, by the last day of the fifth month of the		Yes	No
'	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	•		
_	organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No,"</i> 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 in (2), did the organization's supported organizations have a	_		
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	nstru	ctions	s).
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			
b	☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	struct	ions).
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	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		

instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(b) Supporting Organical Part V Type III Non-Functional Part V Type III Non-Function Part V Type III Non	gani	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying	tru:	st on Nov. 20, 1970 (expla	nin in Part VI). See
instructions. All other Type III non-functionally integrated supporting organ	nizat	ions must complete Section	ons 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.			
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B-Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C-Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionall	y int	egrated Type III supportin	ng organization (see

Schedule A (Form 990 or 990-EZ) 2019

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Organi	zations (continued)	
Secti	on D-Distributions			Current Year
1	Amounts paid to supported organizations to accomplish e			
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which (provide details in Part VI). See instructions.	h the organization is res	ponsive	
9				
10	Line 8 amount divided by line 9 amount			
	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reasonable cause required—explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
a	From 2014			
b	From 2015			
С	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j_	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2015			
b	Excess from 2016			
С	Excess from 2017			
d	Excess from 2018			
6	Excess from 2019			

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

SCHEDULE O (Form 990 or 990-EZ)

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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

Employer identification number

Alliance for Contraception in Cats & Dogs	41-2185841				
Pt VI, Line 11b: The 990 is reviewed in detail by ACC&D's President and Treasurer.					
Once the 990 is approved by these officers, copies of the 990 are distributed					
to the Board.					
Pt VI, Line 12c: ACC&D reviewed and updated its Conflict of Interest Policy					
in 2013, and a Conflict of Interest Questionnaire was completed by Directors					
in 2013-14, and 2016 -19. ACC&D monitors and enforces its Conflict of Interest					
policy on a regular and consistent basis by reviewing all ACC&D business relationships					
with the Board members and by means of discussions at Board meeti	ngs.				
Pt VI, Line 19: ACC&D's annual financial statements and 990's are	available				
another website, www.GuideStar.org, which is an independent non-p	rofit research				
provider. Governing documents and conflict of interest policies a	re available				
upon written request to ACC&D.					
Pt VI, Line 15a: ACC&D reviews benchmark salary data when hiring	and adjusting				
salaries. The Board of Directors approves all salary adjustments	and new hire				
salaries. ACC&D believes that ACC&D's pay scale is in line with o	ther non-profit				
salaries for this size of organization.					
Pt VI, Line 15b: Same as above.					
Pt VI, Section C, Line 17:					
State: OR					
State: CA					
State: NY					