Form 990

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 2022

Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection Go to www.irs.gov/Form990 for instructions and the latest information. For the 2022 calendar year, or tax year beginning , 2022, and ending D Employer identification number Check if applicable: PATRIOT ASSISTANCE DOGS 45-2486498 Address change 1478 MALLARD ST Telephone number Name change DETROIT LAKES, MN 56501 Initial return (218) 850-2425 Final return/terminated G Gross receipts \$ 278,621. Amended return F Name and address of principal officer: CATHY HANSEN H(a) Is this a group return for subordinates? Yes Application pending H(b) Are all subordinates included?

If "No," attach a list. See instructions. No Yes Same As C Above 501(c) (4947(a)(1) or Tax-exempt status: X 501(c)(3) (insert no.) Website: PATRIOTASSISTANCEDOGS.ORG H(c) Group exemption number K 2011 X Corporation L Year of formation: M State of legal domicile: MN Form of organization: Trust Association Other Part I Briefly describe the organization's mission or most significant activities: PROVIDE TRAINING OF SERVICE DOGS TO BE MATCHED WITH VETERANS IN NEED. Governance if the organization discontinued its operations or disposed of more than 25% of its net assets. Check this box Number of voting members of the governing body (Part VI, line 1a)..... 3 10 Activities & Number of independent voting members of the governing body (Part VI, line 1b)..... 10 Total number of individuals employed in calendar year 2022 (Part V, line 2a)..... 5 5 Total number of volunteers (estimate if necessary)..... 6 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 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h)..... 159,840 216,477. Revenue Program service revenue (Part VIII, line 2g)..... Investment income (Part VIII, column (A), lines 3, 4, and 7d)..... 16,482 12,884. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)..... 63,249. 38,468. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)..... 239,571 267,829. Grants and similar amounts paid (Part IX, column (A), lines 1-3). Benefits paid to or for members (Part IX, column (A), line 4)..... Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)..... 86,689 83,308. 16a Professional fundraising fees (Part IX, column (A), line 11e).... b Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e).... 188,393. 160,727. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)..... 275,082. 244,035. Revenue less expenses. Subtract line 18 from line 12..... -35,511.23,794 Beginning of Current Year End of Year 20 265,490. 276,062. 21 Total liabilities (Part X, line 26)..... 13,373. 151. 22 Net assets or fund balances. Subtract line 21 from line 20..... 252,117 275,911. 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. Signature of officer Date Sign Here CATHY HANSEN President Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN Check Paid SHERI LYNN D. LEITHEISER SHERI LYNN D. LEITHEISER self-employed P00069954 Preparer Firm's name BENSON, LEITHEISER & SOBERG Use Only Firm's address PO BOX 667 Firm's EIN 41-1384039 DETROIT LAKES, MN 56502 218-847-3114 May the IRS discuss this return with the preparer shown above? See instructions..... X Yes No

Form 990 (2022) PATRIOT ASSISTANCE DOGS Part V Checklist of Required Schedules

A SALL			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	X	110
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
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		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		х
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? If "Yes," complete Schedule D, Part IV.	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
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.	1		
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		х
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? If "Yes," complete Schedule D, Part VII.	11b		Х
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? If "Yes," complete Schedule D, Part VIII.	11c		Х
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		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
	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)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII.	12a		Х
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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b	-	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		
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		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? If "Yes," complete Schedule G, Part 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	х	
	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? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
ΑΛ				

Far	Checklist of Required Schedules (Continued)			
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	Yes	No X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23		х
	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 a "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
	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		ļ
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		х
b	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? 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)
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV.	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		х
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		х
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 L	33		х
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		
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		х
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		х
	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	х	
Par	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	18.44	Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X	
DAA	755 600041 - 60-60-60			

45-2486498 PATRIOT ASSISTANCE DOGS Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V No Yes 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..... X b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?..... 2b X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year?..... 3a **b** If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule Q... 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Χ 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). X 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?...... X 5b **b** Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?..... 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 X 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? 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 7a X services provided to the payor?.... 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 X Form 8282?.... 7c d If "Yes," indicate the number of Forms 8282 filed during the year..... e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?.. X 7e f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . X 7f g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 7g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a 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..... b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders . . b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?..... 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year..... 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state?..... 13a Note: See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand..... 14a Did the organization receive any payments for indoor tanning services during the tax year?..... X 14a b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule Q... 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? X 15 If "Yes," see the 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?... X 16 If "Yes," complete Form 4720, Schedule O.

If "Yes," complete Form 6069.

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?...

17

Pai	rt VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through	7b belo	ow, a	nd for						
	a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, o Schedule O. See instructions.	r change	es on							
	Check if Schedule O contains a response or note to any line in this Part VI			X						
Sec	ction A. Governing Body and Management									
			Ye	s No						
1a	a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad	10								
	authority to an executive committee or similar committee, explain on Schedule O.	10								
	b Enter the number of voting members included on line 1a, above, who are independent									
	officer, director, trustee, or key employee?									
3	of officers, directors, trustees, or key employees to a management company or other person?									
4	,									
_	since the prior Form 990 was filed?		-	X						
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5	X						
6 7a	Did the organization have members or stockholders? a 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?		70	X						
			7a							
D	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?		Ba	X						
Ь	Each committee with authority to act on behalf of the governing body?		3b	X						
9	organization's mailing address? If "Yes," provide the names and addresses on Schedule Q		3 1	Х						
Sec	ction B. Policies (This Section B requests information about policies not required by the Intern	nal Reve								
			Ye							
	a Did the organization have local chapters, branches, or affiliates?)a	X						
	o 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?	10	2600							
11a	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11	la X							
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990. See Schedule	e 0								
	Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?			X						
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done			\top						
13	Did the organization have a written whistleblower policy?			X						
14	Did the organization have a written document retention and destruction policy?			X						
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
а	The organization's CEO, Executive Director, or top management official	15	ia	X						
b	Other officers or key employees of the organization.	15	ib	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?	16	ia	X						
b	of "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									
Sec	organization's exempt status with respect to such arrangements?	16	b							
18	List the states with which a copy of this Form 990 is required to be filed None Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (sec available for public inspection. Indicate how you made these available. Check all that apply.	tion 501(c)(3)s c	nly)						
10	Own website	0)								
	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statement the public during the tax year. See Schedule O		to							
20	State the name, address, and telephone number of the person who possesses the organization's books and record PATRIOT ASSISTANCE DOGS 1478 MALLARD ST DETROIT LAKES MN 56501 (218) 84									
	2000 11:0 Indiana of Deliver Day 50001 (210) 04	4100								

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.

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

				(C)	<u>)</u>					
(A) Name and title	(B) Average hours per	is	both dir	(do n box, an o ector	ot ch unles officer /truste			(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099- MISC/1099-NEC)	related organizations (W-2/1099- MISC/1099-NEC)	compensation from the organization and related organizations
(1) MELISSA KRABBE	1								_	_
MEMBER	0	Х						0.	0.	0.
(2) CATHY HANSEN	2									
President	0	Х			<u> </u>			0.	0.	0.
(3) RHONDA RUHOFF	1									
Secretary	0	Х			L.,			0.	0.	0.
(4) JIM SINCLAIR	4									
Treasurer	0	X						0.	0.	0.
(5) NANCY ZEHNACKER	1									
MEMBER	0	Х						0.	0.	0.
(6) LINDA WIEDEWITSCH	2									
Director	0	X						0.	0.	0.
7 CHUCK RUHOFF	1									
President	0	Х						0.	0.	0.
(10)										
(11)										
(12)										
(13)										
(14)										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
	(B)			(0						
(A) Name and title	Average hours per	hours box, unless person is both an officer and a director/trustee)			h an tee)	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other		
	week (list any hours for related organiza tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099- MISC/1099-NEC)	related organizations (W-2/1099- MISC/1099-NEC)	compensation from the organization and related organizations
(15)										
(16)										
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1b Subtotal								0.	0.	0.
c Total from continuation sheets to Part VII, Secti								0.	0.	0.
d Total (add lines 1b and 1c)								0.	0.	0.
Total number of individuals (including but not limited from the organization	to those I	isted	abo	ve) v	who	recei	ved	more than \$100,00	0 of reportable com	pensation
3 Did the organization list any former officer, direction line 1a? If "Yes,"complete Schedule J for suc	tor, truste h individu	e, ke	y e	mplo	oyee	e, or	high	nest compensated	l employee	Yes No
4 For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual	reportab er than \$1	le co 50,00	mpe 00?	ensa If "	ition Yes,	and " cor	oth nple	er compensation ete Schedule J for	from	4 X
5 Did any person listed on line 1a receive or accrument for services rendered to the organization? If "Yes	e comper	satio	n fr	٥m	any J fo	unre	late	ed organization or	individual	1986 S. St. 1967
Section B. Independent Contractors										
Complete this table for your five highest compen compensation from the organization. Report compen	sation for	epen the ca	den alen	t cor dar y	ntra year	ctors endi	tha ng w	vith or within the or	ganization's tax year	
(A) Name and business address								Description of		(C) Compensation
Total number of independent contractors (including b \$100,000 of compensation from the organization)		ted to	tho	se li	isted	abo	ve) v	Who received more	than	
RAA	00									THE RESERVE OF THE PARTY.

Lai		ESSE			a respo	onse or note to an	y line in this Part VI	II	CORTA ATRIBURANTANIA ATRIB ATRIBURA	
		S. SSR II SCHOOL		20.114113			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants, and Other Similar Amounts	1a b c	Federated campaign Membership dues Fundraising events.			1a 1b 1c					
	d e f	Related organizatio Government grants (contributions, gi All other contributions, gi similar amounts not inclu	ributio ifts, g	ons) rants, and	1d 1e	3,530.				
Contribu	g h	Noncash contributions in lines 1a-1f	clude	d in	1f 1g	212,947.	216,477.			
enne	2a					Business Code				
Program Service Revenue	b c d		 							
Program	f g	All other program s Total. Add lines 2a-								
	3	Investment income (i other similar amour Income from investi	nts).				12,884.	12,884.		
	5	Royalties	6a	(i) R		(ii) Personal				
	b c	Less: rental expenses Rental income or (loss)	6b 6c							
		Net rental income or (loss) Gross amount from sales of assets			(ii) Other					
		other than inventory Less: cost or other basis and sales expenses	7a 7b							
	d	Net gain or (loss).								TARRES OF THE STATE OF THE STAT
Other Revenue	8a	Gross income from fundr (not including \$ of contributions reported See Part IV, line 18	on lir	ne 1c).	 8a	38,807.				
Other		Less: direct expens Net income or (loss	es		8b	9,128.	29,679.			29,679
Ū		Gross income from gamin See Part IV, line 19	ng act	ivities.	9a		23,073.			23,013.
		Less: direct expension Net income or (loss			9b g activi	1,664.	8,789.			8,789.
	1	Gross sales of inventory, returns and allowances. Less: cost of goods			10a					
		Net income or (loss								
aneous	11a b									
Miscellaneous Revenue	-	All other revenue								
2	e 12	Total. Add lines 11a Total revenue. See					267,829.	12,884.	0.	38,468.

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) X Check if Schedule O contains a response or note to any line in this Part IX (D) (B) Do not include amounts reported on lines Total expenses Program service Management and Fundraising 6b, 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21..... 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 Benefits paid to or for members..... Compensation of current officers, directors, trustees, and key employees.... 0 0 0 0. Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)..... 0 0 0 0. 73,478 73,478 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)..... 9 Other employee benefits..... Payroll taxes..... 9,830 9,830 11 Fees for services (nonemployees): a Management..... 4,941 4,941 **b** Legal..... c Accounting..... 2,063 2,063 d Lobbying..... e Professional fundraising services. See Part IV, line 17. . . f Investment management fees..... Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule 0.) Advertising and promotion 12 1,307 1,307. Office expenses..... 4,469. 4,469 14 Information technology..... 15 Royalties.... Occupancy..... 17 Payments of travel or entertainment expenses for any federal, state, or local public officials.... 19 Conferences, conventions, and meetings.... 283 283. Interest Payments to affiliates..... Depreciation, depletion, and amortization . . . 23 Insurance..... 815 815 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 DOG BOARDING 72,737 72,737 b VETERINARIAN 37,283 37,283 DOG FOOD 5,321 5,321 d BACKPACK ITEMS 5,000 5,000 e All other expenses. . See . Sch . . . O. 26,508 16,939 9,569. 25 Total functional expenses. Add lines 1 through 24e . . . 244,035. 137,563. 106,472. 0. 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 Part X..... (A) Beginning of year (B) End of year 72,761. Cash - non-interest-bearing.... 50,026. 2 196,155. 2 Savings and temporary cash investments 208,472. 3 4 Accounts receivable, net 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 Loans and other receivables from other disqualified persons (as defined under 6 section 4958(f)(1)), and persons described in section 4958(c)(3)(B)..... 7 7 Notes and loans receivable, net 8 4,439. 6,992 9 Prepaid expenses and deferred charges..... Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D..... 10a 10a 10c 11 Investments - publicly traded securities..... 12 12 Investments – other securities. See Part IV, line 11..... 13 Investments - program-related. See Part IV, line 11..... 14 14 Other assets. See Part IV, line 11..... 15 2,707. 15 276,062 16 Total assets. Add lines 1 through 15 (must equal line 33)...... 265,490. 17 Accounts payable and accrued expenses. 13,373 150 18 Grants payable..... 18 19 Deferred revenue..... 19 Tax-exempt bond liabilities..... 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D...... 21 Liabilitie 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 Secured mortgages and notes payable to unrelated third parties..... 23 Unsecured notes and loans payable to unrelated third parties..... 24 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 Total liabilities. Add lines 17 through 25..... 13,373 26 151 Organizations that follow FASB ASC 958, check here Fund Balances and complete lines 27, 28, 32, and 33. Net assets without donor restrictions..... 27 Net assets with donor restrictions..... 28 X Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 9 Capital stock or trust principal, or current funds..... 29 Net Assets Paid-in or capital surplus, or land, building, or equipment fund..... 30 Retained earnings, endowment, accumulated income, or other funds..... 31 252,117. 275,911. 32 Total net assets or fund balances. 252,117. 32 275,911.

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33

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Total liabilities and net assets/fund balances

276,062. Form 990 (2022)

265,490.

33

TOTT	1990 (2022) FAIRIUI ASSISIANCE DOGS	2100130						
Par	t 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			329.			
2	Total expenses (must equal Part IX, column (A), line 25)	2	2	44,0)35.			
3	Revenue less expenses. Subtract line 2 from line 1	3		23,7	794.			
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2	52,1	117.			
5	Net unrealized gains (losses) on investments	5						
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain on Schedule O).	9			0.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,	10	0	75 6				
-	column (B))	10		75,9	<u> ,11.</u>			
Par	t XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII				<u> </u>			
			Participants.	Yes	No			
1	Accounting method used to prepare the Form 990: X Cash Accrual Other							
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		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: Separate basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?		2b		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: Separate basis Consolidated basis Both consolidated and separate basis							
С	c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?							
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.							
3a	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?							
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					
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