### Form **990**

**Return of Organization Exempt From Income Tax** 

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service(77)

► The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

A	For the 2007 calen	dar year, or tax year beginning	, 2007, and	ending		,	
В	heck if applicable: C D Emp					ntification Number	
	Address change	Please use RS label HOUSTON SOCIETY FOR	74-128	74-1287171			
	Name change	or print OF CRUELTY TO ANIM	OF CRUELTY TO ANIMALS 900 PORTWAY DRIVE 71				
	Initial return	See 900 PORTWAY DRIVE					
	Termination	specific Instructions. HOUSTON, TX 77024			F Accounting method:	Cash X Accrual	
	Amended return					pecify)	
	Application pending	Section 501(c)(3) organizations and	1 /19/7/2\/1\ nonovomnt	H and I are not applic			
		charitable trusts must attach a con	ipleted Schedule A	H (a) Is this a grou			
		(Form 990 or 990-EZ).		H (b) If 'Yes,' enter	number of affiliate		
G	Web site: ► WWW.	HOUSTONSPCA.ORG		H (c) Are all affilia	tes included?	Yes No	
J	Organization type			(If 'No,' attac	h a list. See instru	ctions.)	
		► X 501(c) 3 ◄ (insert n		H (d) Is this a sepa			
K		the organization is not a 509(a)(3) supp		organization	covered by a group	ruling? Yes X No	
	gross receipts are	normally <b>not</b> more than \$25,000. A retuses to file a return, be sure to file a com-	rn is not required, but if the		emption Numb		
-		THE PARTY OF THE P	Control of the Contro			zation is not required	
	***************************************	lines 6b, 8b, 9b, and 10b to line 12	- i			0, 990-EZ, or 990-PF).	
Pa		e, Expenses, and Changes in Ne		nces (See the	instruction	s.)	
	10 10 10 10 10 10 10 10 10 10 10 10 10 1	s, gifts, grants, and similar amounts rece	1	ī			
		to donor advised funds					
	<b>b</b> Direct public	support (not included on line 1a)		9,710,	396.		
	c Indirect publi	c support (not included on line 1a)					
	d Government	contributions (grants) (not included on l	ne 1a)	d			
		ash \$ 9,710,396. noncash				9,710,396.	
		vice revenue including government fees	the state of the s			1,082,104.	
		g , , , , , , , , , , , , , , , , , ,					
	The State of the S						
		<b>6a</b> Gross rents					
	b Less: rental expenses						
		come or (loss). Subtract line 6b from line			6c		
R	7 Other investr	ment income (describe			) 7		
REVENUE	8a Gross amoun	nt from sales of assets other	(A) Securities	(B) Other			
N		у					
Ē		other basis and sales expenses					
		ttach schedule)Statement.1					
		loss). Combine line 8c, columns (A) and				622,366.	
		ts and activities (attach schedule). If any		eck here ►			
	a Gross revenu	ie (not including \$	of contributions	.1			
		ine 1b)					
		or (loss) from special events. Subtract lin	Committee of the commit	-	9c		
	endocate and so	of inventory, less returns and allowance:	I seem	1	90		
	The same of the sa	goods sold					
	100 00 00	oss) from sales of inventory (attach schedule). Sul			100		
	1000 000000000000000000000000000000000	e (from Part VII, line 103)				17,666.	
	I .	e. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c,				11,983,466.	
-		vices (from line 44, column (B))				5,932,442.	
E		and general (from line 44, column (C)).				399,806.	
P	and the second s	from line 44, column (D))				895,683.	
EXPENSES	100 mg (100 mg	affiliates (attach schedule)				0,50,005.	
E	A CONTRACTOR OF THE CONTRACTOR	es. Add lines 16 and 44, column (A)				7,227,931.	
-		eficit) for the year. Subtract line 17 from				4,755,535.	
N S		fund balances at beginning of year (fro				21,809,640.	
NETT		es in net assets or fund balances (attach				-31,779.	
	Controller Controller on the State	fund balances at end of year. Combine	The second second second		21	26,533,396.	

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Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See instruct.)

	not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 2	Grants paid from donor advised					
	funds (attach sch) (cash \$					
	non-cash \$ )					
	If this amount includes foreign grants, check here.	22 a				
22 t	Other grants and allocations (att sch)					
	(cash \$)					
	If this amount includes foreign grants, check here ▶ □	22 b				
23	Specific assistance to individuals (attach schedule)	23				
24	Benefits paid to or for members (attach schedule)	24				
25 a	a Compensation of current officers, directors, key employees, etc. listed in Part V-A	25 a	179,615.	89,808.	89,807.	0.
ł	Compensation of former officers, directors, key employees, etc. listed in Part V-B.	25 b	0.	0.	0.	0.
C	Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons			3.		
	described in section 4958(c)(3)(B)	25 c	0.	0.	0.	0.
26	Salaries and wages of employees not included on lines 25a, b, and c	26	2,770,204.	2,499,846.	135,245.	135,113.
27	Pension plan contributions not included on lines 25a, b, and c	27	31,225.	11,680.	19,545.	
28	Employee benefits not included on lines 25a - 27	28				
29	Payroll taxes	29	218,298.	194,111.	14,469.	9,718.
30	Professional fundraising fees	30				
31	Accounting fees	31	47,181.		47,181.	
32	Legal fees	32	101 050	05 147	4 000	11 000
33	Supplies	33	101,056. 105,718.	85,147. 104,238.	4,000. 866.	11,909. 614.
34 35	Telephone  Postage and shipping	35	103,710.	104,230.	000.	014.
36	Occupancy	36				
37	Equipment rental and maintenance	37	16,393.	16,229.		164.
38	Printing and publications	38	20,000			
39	Travel	39				1
40	Conferences, conventions, and meetings	40				
41	Interest	41	273,152.	250,701.	22,451.	
42 43	Depreciation, depletion, etc (attach schedule) Other expenses not covered above (itemize):	42	323,412.	323,412.		
	See Statement 3	43 a	3,161,677.	2,357,270.	66,242.	738,165.
ŀ		43 b			,	•
(		43 c				
(		43 d				
6		43 e				
f		43 f				
ç	]	43 g				
44	Total functional expenses Add lines 22a					
	through 43g. (Organizations completing columns (B) - (D), carry these totals to lines 13 - 15)	44	7,227,931.	5,932,442.	399,806.	895,683.
	t Costs. Check   if you are following			11-11-11-	D) D	► \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	any joint costs from a combined education es,' enter (i) the aggregate amount of thes				B) Program services? mount allocated to Prog	
\$			to Management and ge		and (iv) th	

to Fundraising

Page 3

#### Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's prim	ary exempt purpose? Se	e Statement 4	Program Service Expenses (Required for 501(c)(3) and
lients served, publications issued zations and 4947(a)(1) nonexe	d, etc. Discuss achievements the empt charitable trusts must als	ements in a clear and concise manner. State the number of at are not measurable. (Section 501(c)(3) and (4) organ- so enter the amount of grants and allocations to others.)	(4) organizations and 4947(a)(1) trusts; but optional for others.)
a See Statement 5			
1.		) If this amount includes foreign grants, check here	5,932,442.
b			
(Grants and allocations	s	) If this amount includes foreign grants, check here	
c			
	\$	) If this amount includes foreign grants, check here	
d			
(Create and allegations		) If this amount includes foreign grants, check here	
(Grants and allocations e Other program services			
(Grants and allocations	\$	) If this amount includes foreign grants, check here	
f Total of Program Service	Expenses (should equal line	44, column (B), Program services)	5,932,442.

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Form 990 (2007)

Form 990 (2007) HOUSTON SOCIETY FOR THE PREVENTION 74-1287171 Page 4 Part IV | Balance Sheets (See the instructions.) (B) End of year Where required, attached schedules and amounts within the description (A) column should be for end-of-year amounts only. Beginning of year 915,821. 1,753,049. 45 Savings and temporary cash investments..... 46 47a 599,861. b Less: allowance for doubtful accounts..... 47b 194,729. 47 c 599,861. 48a 48 c Grants receivable. 49 50 a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)..... 50 a b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)..... 50b 51 a Other notes and loans receivable 51a (attach schedule)..... 51 c 108,888 52 Inventories for sale or use..... 52 88,824. 176,561 169,041. 53 Prepaid expenses and deferred charges..... 53 54a Investments – publicly-traded securities . . . Stmt . 6. . . . ▶ 10,864,869. 15,980,637. 54a **b** Investments – other securities (attach sch)...... ▶ Cost 54b 55a Investments - land, buildings, & equipment: basis .. 55a b Less: accumulated depreciation 55b (attach schedule)..... 55 c Investments - other (attach schedule)..... 56 57a 15, 244, 381. 1,951,721 13,232,258. 13,292,660. 57 c Other assets, including program-related investments See Statement 8 (describe ► 58 Total assets (must equal line 74). Add lines 45 through 58..... 26,330,356. 046,845 59 59 Accounts payable and accrued expenses..... 343,816. 336,549 60 60 61 Grants payable..... 61 62 Deferred revenue..... 62 Loans from officers, directors, trustees, and key employees (attach schedule)..... 63 64a Tax-exempt bond liabilities (attach schedule)..... 64a **b** Mortgages and other notes payable (attach schedule)..... 4,176,900 64b 4,176,900. Other liabilities (describe •..\_\_\_\_\_)... 65 4,520,716. 66 4,513,449. Organizations that follow SFAS 117, check here > X and complete lines 67 through 69 and lines 73 and 74. Unrestricted..... 21,470,112. 67 26,208,268. Temporarily restricted ..... 339,528. 68 325,128. Permanently restricted..... 69 Organizations that do not follow SFAS 117, check here ► and complete lines O R 70 through 74. 70 71 Paid-in or capital surplus, or land, building, and equipment fund..... 71 BALANCES Retained earnings, endowment, accumulated income, or other funds..... 72

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74

26,533,396.

21,809,640.

26,330,356.

73

74

Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21).....

Total liabilities and net assets/fund balances. Add lines 66 and 73.....

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue	per Return	(See the
instructions.)		

	instructions.)					
а	Total revenue, gains, and other support	per audited financial statemer	nts		a 12,015	,245.
b	Amounts included on line a but not on P	art I, line 12:				
	1Net unrealized gains on investments		b1	31,779.		
	2Donated services and use of facilities					
	3Recoveries of prior year grants					
	4Other (specify):					
			64			
	Add lines b1 through b4				b 31	,779.
С	Subtract line <b>b</b> from line <b>a</b>				c 11,983	
d	Amounts included on Part I, line 12, but					
	1 Investment expenses not included on Pa		d1			
	2Other (specify):					
	Add lines <b>d1</b> and <b>d2</b>			****	d	
е	Total revenue (Part I, line 12). Add lines			_	e 11,983	. 466.
	art IV-B Reconciliation of Expense					, 2001
	are 17-15 Reconcination of Expense	cs per Addited i manoit	ar otatements with	Expenses per it.		
а	Total expenses and losses per audited fi	inancial statements			a 7,227	931
b	Amounts included on line <b>a</b> but not on P				7,7227	, , , , , ,
D	1Donated services and use of facilities		b1	ķ.		
	2Prior year adjustments reported on Part					
	3Losses reported on Part I, line 20					
			The state of the s			
	4Other (specify):		L /			
				The state of the s	b	
100	Add lines <b>b1</b> through <b>b4</b>				c 7,227	031
C	Subtract line <b>b</b> from line <b>a</b>				1,221	, 331.
d	Amounts included on Part I, line 17, but		ا ما			
	1 Investment expenses not included on Pa					
	2Other (specify):		1 40			
				i i	-1	
1000	Add lines d1 and d2			_	d 7 227	021
e	Total expenses (Part I, line 17). Add line					
F	art V-A Current Officers, Director or key employee at any time du	rs, Trustees, and Key E	mployees (List each	person who was an	officer, director,	trustee,
_	of key employee at any time da					
	(A) Name and address	(B) Title and average hours per week devoted to position	(if not paid,	employee benefit	account and	l other
	(A) Name and address	to position	enter -0-)	plans and deferred compensation plan	allowand	es
-				compensation plan	5	
_ :		-	170 615	15 000		0
56	ee Statement 9		179,615.	15,000	•	0.
_						
_						
			_		-	
		1				

75a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings ▶ 19  b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule. A Part L or highest compensated professional and other independent contractors listed in Schedule.	No X
b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees	X
listed in Schedule A. Part I. or highest compensated professional and other independent contractors listed in Schedule	X
A. Part II-A or II-B. related to each other through family or business relationships? If 'Yes,' attach a statement that	SECURIORS.
c Do any officers, directors, trustees, or key employees listed in form 990, Part V-A, or highest compensated employees listed in Schedule A, Part II, or highest compensated professional and other independent contractors listed in Schedule A, Part II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related	X
If 'Yes,' attach a statement that includes the information described in the instructions.	
a boos the organization have a written commet or interest pency that the contract of interest pency that the contract pency that the contr	X_
Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other  Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)	
(A) Name and address  (B) Loans and Advances  (C) Compensation (if not paid, enter -0-)  (I) Contributions to employee benefit plans and deferred compensation plans  (E) Expense account and othe allowances	er
None	
Part VI Other Information (See the instructions.)	No
76 Did the organization make a change in its activities or methods of conducting activities?	X
	X
If 'Yes,' attach a conformed copy of the changes.	
3	X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?	A
	Χ
80a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc, to any other exempt or nonexempt organization?	X
b If 'Yes,' enter the name of the organization ► N/A and check whether it is exempt or nonexempt.	
and check whether it is exempt or nonexempt.	
81 a Enter direct and indirect political expenditures. (See line 81 instructions.)	X

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Form 990 (2007)

Form 990 (2007) HOUSTON SOCIETY FOR THE PREVENTION	74-1287173	L	Yes	age 7
Part VI Other Information (continued)			res	No
82 a Did the organization receive donated services or the use of materials, equipment, or facilities substantially less than fair rental value?		82a		X
<b>b</b> If 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b N/A			
83a Did the organization comply with the public inspection requirements for returns and exemption		83a	X	
<b>b</b> Did the organization comply with the disclosure requirements relating to quid pro quo contril		83b	X	
84a Did the organization solicit any contributions or gifts that were not tax deductible?		84a		X
<b>b</b> If 'Yes,' did the organization include with every solicitation an express statement that such c not tax deductible?		84b	N,	/A
85 a 501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?				/A
<b>b</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?		85 b	N,	/A
If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless waiver for proxy tax owed for the prior year.	the organization received a			
c Dues, assessments, and similar amounts from members	85c N/A			
d Section 162(e) lobbying and political expenditures				
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e N/A			
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f N/A			
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		85 g	N.	/A
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reason dues allocable to nondeductible lobbying and political expenditures for the following tax year?	onable estimate of	85 h	N	/A
86 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on				
line 12	86a N/A			
<b>b</b> Gross receipts, included on line 12, for public use of club facilities	86b N/A			
87 501(c)(12) organizations. Enter: a Gross income from members or shareholders	87a N/A			
<b>b</b> Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b N/A			
88 a At any time during the year, did the organization own a 50% or greater interest in a taxable or an entity disregarded as separate from the organization under Regulations sections 301.7	corporation or partnership, 701-2 and 301.7701-3?	88a		X
If 'Yes,' complete Part IX		00 a	-	Λ
<b>b</b> At any time during the year, did the organization, directly or indirectly, own a controlled enti section 512(b)(13)? If 'Yes,' complete Part XI		88b		Х
89a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year used to section 4911 ► 0.; section 4912 ► 0.; section 4912 ► 0.				
<b>b</b> 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 exce				
during the year or did it become aware of an excess benefit transaction from a prior year? I explaining each transaction	f 'Yes,' attach a statement	89b		X
c Enter: Amount of tax imposed on the organization managers or disqualified persons during year under sections 4912, 4955, and 4958	the ► 0.			
year under sections 4912, 4955, and 4958	0.			
e All organizations. At any time during the tax year, was the organization a party to a prohibit		89e		Х
f All organizations. Did the organization acquire a direct or indirect interest in any applicable		89f		X
g For supporting organizations and sponsoring organizations maintaining donor advised funds	. Did the supporting			
organization, or a fund maintained by a sponsoring organization, have excess business hold the year?		89g		Х
90 a List the states with which a copy of this return is filed ► None				
<b>b</b> Number of employees employed in the pay period that includes March 12, 2007		اممه	Ĵ	101
(See instructions.).  91a The books are in care of ► HOUSTON SPCA Telephone n	umber ► (713) 969-	7722	)	101
Located at ► 900 PORTWAY DRIVE HOUSTON TX	ZIP + 4 > 7702	4		
<b>b</b> At any time during the calendar year, did the organization have an interest in or a signature	or other authority over a		Yes	
financial account in a foreign country (such as a bank account, securities account, or other If 'Yes,' enter the name of the foreign country	financial account)?	91 b		X
		THE DESIGNATION	PARTICIPAL DE LA CONTRACTOR DE LA CONTRA	HOUSE

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See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.

Form 990 (2007) HOUSTON SOCIETY I	OR THE PREV	<b>VENTION</b>		74-1287	171	Page 8
Part VI Other Information (contin	ued)				Yes	s No
c At any time during the calendar year,	did the organization	on maintain an off	ice outside of the Un	ited States?	91 c	X
If 'Yes,' enter the name of the foreign cou						
92 Section 4947(a)(1) nonexempt charita	where the second property is a second			here		-
and enter the amount of tax-exempt in				▶ 92		N/A
Part VII Analysis of Income-Prod						
	Unrelated	business income	Excluded by sec	tion 512, 513, or 514	(E)	
<b>Note:</b> Enter gross amounts unless otherwise indicated.	(A) Business code	(B) Amount	(C) Exclusion code	<b>(D)</b> Amount	(E) Related or ex function inco	empt ome
93 Program service revenue:						
a DONATIONS-ADOPTIONS						464.
b DONATIONS-GENERAL	-					488.
c DONATIONS-NEW ANIMALS					196,	,152.
d						
e						
f Medicare/Medicaid payments						
g Fees & contracts from government agencies						
94 Membership dues and assessments			1.1	12 052		
95 Interest on savings & temporary cash invmnts			14	12,852. 538,082.		
96 Dividends & interest from securities.			14	338,082.		
97 Net rental income or (loss) from real estate:						
a debt-financed property	-					
<ul><li>b not debt-financed property</li><li>98 Net rental income or (loss) from pers prop</li></ul>						
98 Net rental income or (loss) from pers prop						
100 Gain or (loss) from sales of assets other than inventory	•				622,	,366.
101 Net income or (loss) from special events						
102 Gross profit or (loss) from sales of inventory						
103 Other revenue: a						
b RETAIL STORE			3	17,666.		
С						
d						
e						
104 Subtotal (add columns (B), (D), and (E))				568,600.	1,704,	
105 Total (add line 104, columns (B), (D			.,	· · · · · · · · · · · · · · · · · · ·	2,273,	,070.
Note: Line 105 plus line 1e, Part I, should e				<i>(</i> 0 <i>(</i> 1 : 1		
Part VIII Relationship of Activities		-				
Line No. ▼ Explain how each activity for who f the organization's exempt pu	nich income is rep rposes (other than	orted in column (En by providing fund	E) of Part VII contrib ds for such purposes	uted importantly to the s).	accomplishme	nt
See Statement 10						
Part IX Information Regarding Ta	axable Subsid	iaries and Disi	regarded Entities	s (See the instruct	tions.)	
(A)	(B)		(C)	(D)	(E)	
Name, address, and EIN of corporation,	2.5	of Nilahama	- F 1' - 21'	Total	End-of-ye	ar
partnership, or disregarded entity	ownership inte		of activities	income	assets	
N/A		ે				
		%				
		%				
		%				
Part X Information Regarding T	ransfers Asso	ciated with Pe	rsonal Benefit C	ontracts (See the		
<ul> <li>a Did the organization, during the year, receive any</li> <li>b Did the organization, during the year,</li> </ul>					_	No No
Note: If 'Yes' to (b), file Form 8870 and			, on a personal bene	ant contract?	res/	7 140
BAA	1 0/11/1 4/20 (500 /	nanuchons).		TEEA0108L 12/27/	07 Form <b>990</b>	(2007)

Par	t XI Information Regarding Transfers To an organization is a controlling organization	<b>d From Controlled En</b> n as defined in sectior	i <b>tities.</b> Complete only if the n 512(b)(13).	9
-	organization is a controlling organization			Yes No
106	Did the reporting organization <b>make</b> any transfers <b>to</b> a 'Yes,' complete the schedule below for each controlled	controlled entity as defined	d in section 512(b)(13) of the Co	ode? If X
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
С				
	Totals			
				Yes No
107	Did the reporting organization <b>receive</b> any transfers <b>fr</b> 'Yes,' complete the schedule below for each controlled	om a controlled entity as d I entity	efined in section 512(b)(13) of th	ne Code? If
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
С				
	Totals			
-				Yes No
108	Did the organization have a binding written contract in annuities described in question 107 above?	effect on August 17, 2006	, covering the interest, rents, roy	valties, and X
	Under penalties of perjury, I declare that I have examined this returne, correct, and complete. Declaration of preparer (other than of	urn, including accompanying schedul ficer) is based on all information of v	les and statements, and to the best of my k which preparer has any knowledge.	nowledge and belief, it is
Plea	se ►			
Sign Here	Signature of officer	41	Date	
	Type or print name and title.	ANI		
Paid Pre-	signature QUENTIN RILEY	Date	sell- employed ►	Preparer's SSN or PTIN (See General Instruction X) N/A
pare Use	vours if self-		LC EIN ► N/A	
Only			Phone no. ► (71	
BAA				Form <b>990</b> (2007

#### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

MUST be completed by the above organizations and attached to their Form 990 or 990-EZ.

Supplementary Information — (See separate instructions.)

2007

OMB No. 1545-0047

Name of the organization Employer identification number HOUSTON SOCIETY FOR THE PREVENTION 74-1287171 OF CRUELTY TO ANIMALS Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees Part I (See instructions. List each one. If there are none, enter 'None.') (a) Name and address of each (b) Title and average (c) Compensation (d) Contributions (e) Expense to employee benefit employee paid more than \$50,000 hours per week devoted to position account and other allowances compensation See Statement 11 310,614. 0. 0. Total number of other employees paid over \$50,000. Part II — A Compensation of the Five Highest Paid Independent Contractors for Professional Services (See instructions. List each one (whether individuals or firms). If there are none, enter 'None.') (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation NEWPORT CREATIVE COMMUNICATIONS 441 WASHINGTON STREET DUXBURY, MA 02331 DIRECT MAIL 281,178. Total number of others receiving over \$50,000 for professional services.... Compensation of the Five Highest Paid Independent Contractors for Other Services (List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter 'None.' See instructions.) (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation Total number of other contractors receiving

over \$50,000 for other services.....

Sche	dule A (Form 990 or 990-EZ) 2007	HOUSTON	SOCIETY	FOR THE	PREVENTION	74-	1287171		Pa	age 2
Par		<b>vities</b> (See i	nstruction	s.)					Yes	No
1	During the year, has the organization to influence public opinion on a legisl or incurred in connection with the lob (Must equal amounts on line 38, Part	ative matter or bving activities	referendum ► \$	? If 'Yes,' er	iter the total expe	enses paid		1		X
	Organizations that made an election organizations checking 'Yes' must co lobbying activities.	under section 5 mplete Part VI	501(h) by filin B AND attac	ng Form 576 th a stateme	8 must complete nt giving a detail	Part VI-A. Other ed description of t	he			
2	During the year, has the organization substantial contributors, trustees, dire taxable organization with which any sbeneficiary? (If the answer to any que	ectors, officers,	creators, ke	y employee: an officer, di	s, or members of rector, trustee, n	their families, or v	with anv			
ā	Sale, exchange, or leasing of propert	y?			************			2a		<u>X</u>
ŀ	Lending of money or other extension	of credit?						2b		<u>X</u>
(	Furnishing of goods, services, or faci	lities?						2c		_X
(	Payment of compensation (or payme	nt or reimburse	ement of exp	enses if mo	re than \$1,000)?			2d		<u>X</u>
	Transfer of any part of its income or							2e		X_
38	Did the organization make grants for explanation of how the organization of	scholarships, t determines tha	ellowships, s t recipients o	student loan jualify to rec	s, etc? (If 'Yes,' a eive payments.)	attach an		3a	1	X
1	Did the organization have a section 4	103(b) annuity	plan for its e	mployees?				3b	X	
•	Did the organization receive or hold a to preserve open space, the environ 'Yes,' attach a detailed statement	an easement fo ment, historic la	or conservation and areas or	on purposes historic stru	, including easer ctures? If	nents		3с		X
	Did the organization provide credit co						1	3d		X
4:	Did the organization maintain any do 4f and 4g	nor advised fu	nds? If 'Yes,	complete li	nes 4b through 4	g. If 'No,' complete	e lines	4a		X
į	Did the organization make any taxab	le distributions	under section	on 4966?	is contra tora torativo t			4b	N,	/A
,	Did the organization make a distribut	ion to a donor,	donor advis	or, or relate	d person?			4c	N,	/A
1 g	I Enter the total number of donor advi	sed funds own	ed at the end	l of the tax y	⁄ear		▶			N/A
,	Enter the aggregate value of assets	held in all dond	or advised fu	nds owned a	at the end of the	tax year	►			N/A
0.00	Enter the total number of separate for funds included on line 4d) where dor amounts in such funds or accounts.	nors have the r	iaht to provid	le advice on	the distribution of	or investment of				0
	g Enter the aggregate value of assets	held in all fund	s or account	s included o	n line 4f at the e	nd of the tax year	►			0.
BAA	1		TEEA0	402L 12/27/07		Schedule A (Forr	m 990 or Fo	orm 99	90-EZ	2007

14 An organization organized and operated to test for public safety. Section 509(a)(4). (See instructions.)

BAA

Total

Schedule A (Form 990 or 990-EZ) 2007

0.

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.

HOLE	: You may use the worksheet in th	e instructions for con	verting from the accr	ual to the cash metho	d of accounting.	
begii	ndar year (or fiscal year nning in)	<b>(a)</b> 2006	<b>(b)</b> 2005	<b>(c)</b> 2004	<b>(d)</b> 2003	<b>(e)</b> Total
15	Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	3,442,457.	8,751,039.	4,349,996.	3,121,074.	19,664,566.
	Membership fees received			2/0 20/0001	0,111,011	0.
	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc, purpose.	1,110,532.	3,564,116.	962,480.	962,130.	6,599,258.
18	Gross income from interest, dividends, amts rec'd from payments on securities loans (sec. 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less sec. 511 taxes) from businesses acquired by the organzation after June 30, 1975.	685,238.	393,936.	995,500.	55,639.	2,130,313.
19	Net income from unrelated business activities not included in line 18					0.
	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0.
	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					0.
22	Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					0.
23	Total of lines 15 through 22	5,238,227.	12,709,091.	6,307,976.	4,138,843.	28,394,137.
24	Line 23 minus line 17	4,127,695.	9,144,975.	5,345,496.	3,176,713.	21,794,879.
25	Enter 1% of line 23	52,382.	127,091.		41,388.	
	Organizations described on lines			olumn (e), line 24		
	Prepare a list for your records to show the supported organization) whose total gifts f return. Enter the total of all these excess	amounts			▶ 26b	
	Total support for section 509(a)(1	) test: Enter line 24,	column (e)		▶ 26c	
d	Add: Amounts from column (e) for	or lines: 18		19 26b		
	Dublic connect dina 26a minus lin	ZZ		26b	26d	
f	Public support (line 26c minus lin Public support percentage (line 2	26e (numerator) divid	lad by line 26c (dana	minator)\	≥ 26e	00
	Organizations described on line		ica by fine 200 (defic	minator))		6
	For amounts included in lines 15, name of, and total amounts receisuch amounts for each year: (2006)1,079,028.	.16, and 17 that were ved in each year fron	n, each 'disqualified p	erson.' Do not file th	is list with your retur	n. Enter the sum of
	For any amount included in line 1 to show the name of, and amoun \$5,000. (Include in the list organi After computing the difference be differences (the excess amounts)	t received for each ye zations described in I tween the amount rec	ear, that was more that ines 5 through 11b, a ceived and the larger	an the larger of (1) the swell as individuals.) amount described in	ne amount on line 25  Do not file this list ( (1) or (2), enter the s	for the year or (2) with your return. sum of these
_	(2006) 0.	(2005)	19 664 566	<u>-</u> <u>0</u>	. (2003)	0.
C	17 6	599.258 20	19,004,300.	21	276	26.263 824
d	Add: Line 27a total 6,	291,858. ar	nd line 27b total		0. 27d	6,291,858.
е	Public support (line 27c total min	us line 27d total)			▶ 27e	19,971,966.
f	Total support for section 509(a)(2	2) test: Enter amount	from line 23, column	(e) ► 27f 28	, 394, 137.	
g	(2006) 0 .  Add: Amounts from column (e) for	27e (numerator) divid	led by line 27f (denor	minator))	▶ 27g	70.34 %
	investment income percentage (	inie 18, column (e) (n	umerator) divided by	mie 271 (denominate	or))   27 n	7.50 %
28	<b>Unusual Grants:</b> For an organiza list for your records to show, for enature of the grant. <b>Do not file th</b>	each year, the name	of the contributor, the	date and amount of	ants during 2003 thro the grant, and a brief	ough 2006, prepare a description of the

Par	(To be completed ONLY by schools that checked the box on line 6 in Part IV)	N/A		
			Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If 'Yes,' please describe; if 'No,' please explain. (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following:			
i	a Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
1	b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
1	c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32 c		
	d Copies of all material used by the organization or on its behalf to solicit contributions?			
	If you answered 'No' to any of the above, please explain. (If you need more space, attach a separate statement.)			
33				
	a Students' rights or privileges?	33a		
1	b Admissions policies?	33b		
	c Employment of faculty or administrative staff?	33c		
,	d Scholarships or other financial assistance?	33d		
	e Educational policies?	33e		
1	f Use of facilities?	33f		
	g Athletic programs?	33g		
ı	h Other extracurricular activities?	33h		
	If you answered 'Yes' to any of the above, please explain. (If you need more space, attach a separate statement.)			
34	a Does the organization receive any financial aid or assistance from a governmental agency?	34a		
	b Has the organization's right to such aid ever been revoked or suspended?	34b		
	If you answered 'Yes' to either 34a or b, please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If 'No,' attach an explanation	35		Sec. 22.00

Sche	dule A (Form 990 or 990	-EZ) 2007 HOUSTO	N SOCIETY	FOR THE	PREVENT	CION		74-1	.287	171	Page 6
_	Part VI-A Lobbying Expenditures by Electing Public Charities (See instructions.) (To be completed ONLY by an eligible organization that filed Form 5768)  N/A										
Chec	:k ► a if the organiz	ation belongs to an aff	iliated group.	Check ► b	if you	checke			contr	ol' provision	
		imits on Lobbying					Affiliate	a <b>)</b> d grou als	р	To be con for <b>all</b> e organiz	mpleted lecting
36	Total lobbying expenditu	ures to influence public	opinion (grass	roots lobbying)		36		72-11			
37	Total lobbying expenditu	ures to influence a legis	lative body (di	irect lobbying) .		37					
38	38 Total lobbying expenditures (add lines 36 and 37)										
39	Other exempt purpose e					39					
40	Total exempt purpose e					40					
41	Lobbying nontaxable am  If the amount on line 40			owing table — t <b>axable amoun</b>	ic _						
	Not over \$500,000										
	Over \$500,000 but not over \$1,										
	Over \$1,000,000 but not over \$				25	41					
	Over \$1,500,000 but not over \$	17,000,000 \$225,	000 plus 5% of th	e excess over \$1,50	0,000						
	Over \$17,000,000										
42	Grassroots nontaxable a	10.7				42					
43	Subtract line 42 from lin					43					
44	Subtract line 41 from lin Caution: If there is an a					44					
	Caution: Il there is all a					F01	<i></i>				
_	4-Year Averaging Period Under Section 501(h)  (Some organizations that made a section 501(h) election do not have to complete all of the five columns below.  See the instructions for lines 45 through 50.)										
	Lobbying Expenditures During 4 -Year Averaging Period										
	Calendar year (or fiscal year beginning in) ►	<b>(a)</b> 2007	<b>(b)</b> 2006		<b>(c)</b> 2005			( <b>d)</b> 004		<b>(€</b> To	
45	Lobbying nontaxable amount										
46	Lobbying ceiling amount (150% of line 45(e))										
47	Total lobbying expenditures										
48	Grassroots non- taxable amount								AND PROSESSO		
49	Grassroots ceiling amount (150% of line 48(e))										
50	Grassroots lobbying expenditures										
Par	Part VI-B Lobbying Activity by Nonelecting Public Charities  (For reporting only by organizations that did not complete Part VI-A) (See instructions.)										
Duri	ng the year, did the organ	nization attempt to influ	ence national.	state or local	egislation	includ		Yes	No	N/A Amo	ount
	The state of								1/28/2007		
	Nolunteers Paid staff or manageme							-			
	Media advertisements.	1.50		0.50							
	Mailings to members, le										
	Publications, or publish	OF PARTIES AND ADDRESS OF THE PARTIES AND ADDRESS OF									
	Grants to other organiza										
	Direct contact with legis										
	n Rallies, demonstrations Total lobbying expenditi										
	rotal lobbying expenditi	ures (aud illies C tilloug	ун н <i>ъ)</i>					200 to 200 to 200			

If 'Yes' to any of the above, also attach a statement giving a detailed description of the lobbying activities.

## Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See instructions)

51 Did the	e reporting organization of Code (other than section	directly or in	ndirectly engage in any of the follow organizations) or in section 527, rel	ing with any other organization describe ating to political organizations?	ed in section	on 501	(c)
			to a noncharitable exempt organiza		-	Yes	No
					51a (i)	103	X
					a (ii)		X
	transactions:				u (11)		- 11
		ets with a n	oncharitable exempt organization		b (i)		Х
					b (ii)		X
					b (iii)		X
							X
							X
							X
				·	-		X
d If the a	answer to any of the about ods, other assets, or services	ve is 'Yes,' vices given	complete the following schedule. C by the reporting organization. If the	olumn (b) should always show the fair no organization received less than fair ma goods, other assets, or services receive	narket value	ie of	
(a) Line no.	(b) Amount involved		(c) noncharitable exempt organization	Description of transfers, transactions, and			ts
N/A						.5	
IV/A							
				-			
-							
-							
-							
	organization directly or in sed in section 501(c) of t complete the following		filiated with, or related to, one or mo ther than section 501(c)(3)) or in se	re tax-exempt organizations ction 527?	► ☐ Ye	s X	No
211 100,	(a)	soricadio.	(b)	(c)			
N/A	Name of organization		Type of organization	Description of relation	nship		
70.							
×							

#### Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

#### Schedule of Contributors

Supplementary Information for line 1 of Form 990, 990-EZ and 990-PF (see instructions)

OMB No. 1545-0047

2007

Employer identification number

Name of organization HOUSTON SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS 74-1287171 Organization type (check one): Filers of: Section: 501(c)( 3 ) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the **General Rule** or a **Special Rule**. (**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule — see instructions.) General Rule -X For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.) Special Rules -For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33-1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.) For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III.) For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, charitable, etc. purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc, purpose. Do not complete any of the Parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc, contributions of \$5,000 or more during the year.)..... Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF) but they must check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF). BAA For Paperwork Reduction Act Notice, see the Instructions Schedule B (Form 990, 990-EZ, or 990-PF) (2007) for Form 990, Form 990-EZ, and Form 990-PF.

#### **Federal Statements** HOUSTON SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS

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74-1287171

Statement 1 Form 990, Part I, Line 8 Net Gain (Loss) from Noninventory Sales

Publicly Traded Securities

Gross Sales Price: Cost or Other Basis: 5,322,184. 4,699,818.

Total Gain (Loss) Publicly Traded Securities \$

Total Net Gain (Loss) From Noninventory Sales \$ 622,366.

Statement 2 Form 990, Part I, Line 20 Other Changes in Net Assets or Fund Balances

Statement 3 Form 990, Part II, Line 43 Other Expenses

		(A)	(B) Program	(C) Management	(D)
		Total	<u>Services</u>	<u>&amp; General</u>	<u>Fundraising</u>
ADMIN SUPPORT-OTHER ADOPTION PROMOTION		64,310. 24,855.	18,899. 24,855.	45,411.	
ANNUITY PAYMENTS		14,400.		14,400.	
AUTO FUEL		60,301.	60,301.	/	
AUTO REGISTRATIONS		15,031.	14,967.	64.	
BUILDING/GROUNDS MAINT		206,732.	206,732.		
BURIAL EXPENSES		31,777.	31,777.		
DEVELOPMENT PROGRAM		723,378.	PAGESTON FIRST NO CONTROL		723,378.
DRUGS AND BILOGICS		453,606.	453,606.		,
EDUCATION		26,843.	24,902.	1,494.	447.
FOOD AND SUPPLIES		179,715.	179,715.		
GARBAGE DISPOSAL		27,871.	27,871.		
GAS, ELECTRIC, WATER		274,232.	263,623.	2,599.	8,010.
GENERAL EXPENSES		-16,678.	-18,636.	463.	1,495.
INSURANCE		311,775.	308,696.	-1,728.	4,807.
NEWSLETTER/EDUCATIONAL		25,908.	25,908.		
PEST CONTROL		3,275.	3,275.		
PROPERTY INSURANCE		72,672.	69,522.	3,150.	
PROPERTY TAXES		32,649.	32,649.		
PUBLIC RELATIONS		14,038.	14,038.		
RESCUE EXPENSE		331,424.	331,424.		
SAFETY		1,075.	1,075.		
SECURITY		80,420.	80,420.		
SPAY NEUTER PROGRAM		40,428.	40,011.	389.	28.
SUPPLIES		33,829.	33,829.		
UNIFORMS		7,199.	7,199.		
VEHICLE INSURANCE		49,163.	49,163.		
VEHICLE MAINT	m - + - 3	71,449.	71,449.	A CC 040	A 720 165
	Total	\$ 3,161,677.	\$ 2,357,270.	\$ 66,242.	\$ 738,165.

### Federal Statements

## HOUSTON SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS

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74-1287171

Statement 4
Form 990 , Part III
Organization's Primary Exempt Purpose

THE HOUSTON SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS (HSPCA) PROVIDES A TOTAL SERVICES PROGRAM WHICH ENCOMPASSES ALL ASPECTS OF ANIMAL WELFARE. THIS INCLUDES OPERATING AS A DEPOSITORY FOR UNWANTED PETS AND AS A DISTRIBUTION POINT FOR PERSONS DESIRING PETS. OPERATION ACTIVITIES ARE PROVIDED ON A DAILY BASIS AND ARE DIVIDED INTO THREE SEPARATE PROGRAMS OR DIVISIONS.

THE ACTUAL OPERATIONS OF THE DIVISIONS ARE SO INTERMINGLED THAT AN ALLOCATION OF EXPENSES IN THE FORMAL ACCOUNTING SYSTEM IS NOT CONSIDERED PRACTICAL. AN EFFORT HAS BEEN MADE TO ALLOCATE EXPENDITURES FOR THE PURPOSES OF THIS REPORT.

Includes Foreign Grants: No

Statement 5
Form 990, Part III, Line a
Statement of Program Service Accomplishments

Description

Grants and Service
Allocations Expenses

#### ANIMAL SHELTER DIVISION:

THIS DIVISION IS THE LARGEST OF THE PROGRAM DIVISIONS. APPROXIMATELY SIXTY PERCENT (60%) OF SALARIED PERSONNEL ARE ASSIGNED AND APPROXIMATELY FIFTY PERCENT (50%) OF PROGRAM EXPENDITURES ARE ALLOCABLE TO THIS FUNCTION. ALL SERVICES CONCERNED WITH ANIMAL HOUSING AND CARE ARE ATTRIBUTABLE TO THIS DIVISION. THIS INCLUDES ANIMAL ADMISSIONS, ADOPTION COUNSELING, ADOPTIONS, HOUSING, INJURED ANIMAL RESCUE, LOST AND FOUND PROGRAM, KENNEL SANITATION, SECURITY, ANIMAL NUTRITION, BUILDING AND EQUIPMENT MAINTENANCE, SUPPLIES AND LOGISTICS, MOTOR VEHICLE POOL AND MAINTENANCE, PET CARE COUNSELING AND RENDERING, GROUNDS MAINTENANCE, AND SPECIAL PROJECTS.

5,012,467.

#### HUMANE SERVICES DIVISION:

A SERVICE ORIENTED PROGRAM, THE MAJORITY OF THESE SERVICES ARE RENDERED AWAY FROM THE HSPCA SHELTER. APPROXIMATELY TWENTY PERCENT (20%) OF SALARIED PERSONNEL ARE ASSIGNED AND APPROXIMATELY TWENTY FIVE PERCENT (25%) OF PROGRAM EXPENDITURES ARE ALLOCABLE TO THIS DIVISION. THE SERVICES WHICH ARE PROVIDED INCLUDE HUMANE EDUCATION, ANIMAL CRUELTY INVESTIGATIONS, PUBLIC RELATIONS, CONTINUING EDUCATION, VOLUNTEER PROGRAMS, PET-FACILITATED THERAPY, SPECIAL PROJECTS, AND COMMUNITY SERVICE OPTION PROGRAMS.

Includes Foreign Grants: No

673,332.

#### ANIMAL HEALTH DIVISION:

THIS DIVISION IS AN IMPORTANT ASPECT OF ANY SUCCESSFUL ANIMAL WELFARE AGENCY. THE MAJORITY OF THE ANIMALS HANDLED WERE CLASSIFIED AS RANDOM SOURCE AND REPRESENT PRACTICALLY EVERY FACET OF OUR SOCIOECONOMIC ENVIRONMENT. THE ANIMALS COME FROM ALL AREAS OF THE GULF COAST. DISEASE CONTROL IS CRITICAL TO THE ANIMALS AS WELL AS TO THE IMAGE OF THE HSPCA. APPROXIMATELY TWENTY PERCENT (20%) OF SALARIED

## Federal Statements

### HOUSTON SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS

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Statement 5 (continued)
Form 990, Part III, Line a
Statement of Program Service Accomplishments

Description

Program nts and Service

Grants and Service
Allocations Expenses

PERSONNEL ARE ASSIGNED AND APPROXIMATELY TWENTY FIVE PERCENT (25%) OF EXPENDITURES ARE ALLOCABLE TO THIS DIVISION. THE SERVICES INCLUDE EXAMINATIONS, IMMUNIZATIONS, LABORATORY DIAGNOSTICS, GROOMING, THERAPY, EXTOPARASITE CONTROL. SPAY/NEUTER PROGRAM, INTERNAL PARASITE CONTROL, EUTHANASIA, PERSONNEL TRAINING, CONSULTATIONS, EPIDEMIOLOGY, LIAISON WITH THE VETERINARY PROFESSION, AND ASSIGNED SPECIAL PROJECTS. ANIMAL HEALTH SERVICES ARE PROVIDED ONLY TO ANIMALS BELONGING TO THE HSPCA.

Includes Foreign Grants: No

246,643.

\$ 0. \$5,932,442.

Statement 6 Form 990, Part IV, Line 54a Investments - Publicly Traded Securities

Corporate StocksValuation<br/>MethodAmountSTOCKS AND MUTUAL FUNDSMarket Value\$ 12,718,897.

Total \$ 12,718,897.

U.S. Government Obligations Valuation Method Amount
GOVERNMENT SECURITIES Market Value 3,261,740.

Total \$ 3,261,740.

Publicly Traded Securities \$ 15,980,637.

Statement 7 Form 990, Part IV, Line 57 Land, Buildings, and Equipment

Category	 10	Basis	_	Accum. Deprec.	_	Book Value
Automobiles / Transportation Eq Furniture and Fixtures Machinery and Equipment Buildings Improvements Land Miscellaneous	\$ 1	588,046. 148,261. 498,719. 3,556,561. 1,180,721. 9,258,033. 14,040.		242,859. 63,121. 272,396. 1,098,275. 275,070. 0. 1,951,721.		345,187. 85,140. 226,323. 2,458,286. 905,651. 9,258,033. 14,040. 13,292,660.

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Statement 8 Form 990, Part IV, Line 58 Other Assets

Rounding	1.
Total	\$ 1.

Statement 9 Form 990, Part V-A List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours Per Week Devoted	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
ROGER BARE 900 PORTWAY DRIVE HOUSTON, TX 77024	BOARD MEMBER 1.00	\$ 0.	\$ 0.	\$ 0.
CONNIE BERGEN 900 PORTWAY DRIVE HOUSTON, TX 77024	Secretary 2.00	0.	0.	0.
DOUGLAS CLARKE 900 PORTWAY DRIVE HOUSTON, TX 77024	BOARD MEMBER 1.00	0.	0.	0.
JESSE COUCH 900 PORTWAY DRIVE HOUSTON, TX 77024	HONORARY BOARD 0	0.	0.	0.
DR. L.D. ECKERMANN 900 PORTWAY DRIVE HOUSTON, TX 77024	BOARD MEMBER 0	0.	0.	0.
JIM GODWIN 900 PORTWAY DRIVE HOUSTON, TX 77024	BOARD MEMBER 0	0.	0.	0.
KANDACE LONGORIA 900 PORTWAY DRIVE HOUSTON, TX 77024	Treasurer 1.00	0.	0.	0.
BETTY LYNN MCHAM 900 PORTWAY DRIVE HOUSTON, TX 77024	BOARD MEMBER 1.00	0.	0.	0.
PATRICIA MERCER 900 PORTWAY DRIVE HOUSTON, TX 77024	President 40.00	179,615.	15,000.	0.
LINDA MURPHY 900 PORTWAY DRIVE HOUSTON, TX 77024	BOARD MEMBER 1.00	0.	0.	0.

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Statement 9 (continued) Form 990, Part V-A List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours Per Week Devoted	Compen- sation	Contri- bution to EBP & DC	
MARTHA SENG 900 PORTWAY DRIVE HOUSTON, TX 77024	BOARD MEMBER 2.00	\$ 0.	\$ 0.	\$ 0.
DR. ROBERT O. SHANNON 900 PORTWAY DRIVE HOUSTON, TX 777024	HONORARY BOARD 0	0.	0.	0.
L. DAVID SMYTH 900 PORTWAY DRIVE HOUSTON, TX 77024	BOARD MEMBER 1.00	0.	0.	0.
LUCIE WRAY TODD 900 PORTWAY DRIVE HOUSTON, TX 77024	HONORARY BOARD 0	0.	0.	0.
DAVID WELSH 900 PORTWAY DRIVE HOUSTON, TX 77024	Chairman 4.00	0.	0.	0.
MILTON WEST 900 PORTWAY DRIVE HOUSTON, TX 77024	BOARD MEMBER 1.00	0.	0.	0.
BRUCE GARRISON 900 PORTWAY DRIVE HOUSTON, TX 77024	BOARD MEMBER 1.00	0.	0.	0.
CHARLES HERDER 900 PORTWAY DRIVE HOUSTON, TX 77024	BOARD MEMBER 1.00	0.	0.	0.
KATHRYN SMYTH 900 PORTWAY DRIVE HOUSTON, TX 77024	BOARD MEMBER 1.00	0.	0.	0.
	Total	\$ 179,615.	\$ 15,000.	\$ 0.

Statement 10 Form 990, Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes

Line #	Explanation of Activities
93C	CONTRIBUTIONS FROM PARTICIPANTS IN THE PET ADOPTION PROGRAMS. THIS FURTHERS OUR EXEMPT PURPOSE OF PLACING ANIMALS WITH CARING AND DESERVING PERSONS AND FAMILIES.
93A	CONTRIBUTIONS RELATED TO UNWANTED ANIMALS PLACED IN THE SHELTER. THIS FURTHERS OUR EXEMPT PURPOSE OF PROVIDING FOR UNWANTED PETS.

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Statement 10 (continued)
Form 990, Part VIII
Relationship of Activities to the Accomplishment of Exempt Purposes

Line # Explanation of Activities

ONTRIBUTIONS WHICH ARE GENERAL IN NATURE, RECEIVED AT THE FACILITY. THIS ALLOWS THE HSPCA TO PROVIDE ALL OF THE SERVICES FOR WHICH THE ORGANIZATION WAS FOUNDED.

#### Statement 11 Schedule A, Part I Compensation of Five Highest Paid Employees

Name and Address	Title & Average <u>Hours Worked</u>	Compen- sation	Contribut. _EBP & DC	Expense Account
HEIDI BRASHER 900 PORTWAY DR HOUSTON, TX 77024	DIR COM OUTREAC 40.00	52,679.	0.	0.
DAVID W. DUBEC 900 PORTWAY DR HOUSTON, TX 77024	VP FIN/ADMIN 40.00	80,445.	0.	0.
JULIE KNAPP 900 PORTWAY DR HOUSTON, TX 77024	VP STAFF/VOL 40.00	61,403.	0.	0.
ALICE E. SARMEINTO 900 PORTWAY DR HOUSTON, TX 77024	VP DEVELOPMENT 40.00	54,329.	0.	0.
JORGE ORTEGA 900 PORTWAY DR HOUSTON, 77024 77024	VP ANIMAL SVS 40.00	61,758.	0.	0.
	Total §	\$ 310,614.	\$ 0.\$	0.