** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

Form **990**

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2024

Open to Public Inspection

A For the 2024 calendar year, or tax year beginning JUL 1, 2024 **and ending** JUN 30, 2025

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/ terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
GREATER GOOD CHARITIES

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) 301 UNION STREET
Room/suite 21308

City or town, state or province, country, and ZIP or foreign postal code
SEATTLE, WA 98111

D Employer identification number
20-4846675

E Telephone number
520-441-9067

G Gross receipts $ 175,687,466.

F Name and address of principal officer: LIZ BAKER
SAME AS C ABOVE

H(a) Is this a group return for subordinates? ☐ Yes ☒ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. See instructions

H(c) Group exemption number

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: WWW.GREATERGOOD.ORG

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation: 2006

M State of legal domicile: WA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: GREATER GOOD CHARITIES RESPONDS TO NEED BY PROVIDING AID, EXPERTISE AND FUNDING ON A GLOBAL SCALE.

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	9
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	9
5	Total number of individuals employed in calendar year 2024 (Part V, line 2a)	5	94
6	Total number of volunteers (estimate if necessary)	6	1530
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.

Revenue

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	307,616,702.	168,775,548.
9	Program service revenue (Part VIII, line 2g)	3,423,341.	2,994,523.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	229,054.	286,807.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	640,187.	1,127,173.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	311,909,284.	173,184,051.

Expenses

13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	289,480,313.	136,519,175.
14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	7,464,246.	9,210,303.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
b	Total fundraising expenses (Part IX, column (D), line 25) 8,832,533.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	13,684,531.	18,645,604.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	310,629,090.	164,375,082.
19	Revenue less expenses. Subtract line 18 from line 12	1,280,194.	8,808,969.

Net Assets or Fund Balances

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	15,961,581.	24,447,292.
21	Total liabilities (Part X, line 26)	2,724,554.	2,336,330.
22	Net assets or fund balances. Subtract line 21 from line 20	13,237,027.	22,110,962.

Part II Signature Block

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

Sign Here

Signature of officer — Date

LIZ BAKER, CHIEF EXECUTIVE OFFICER
Type or print name and title

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	Check if self-employed	PTIN
CLAIRE E. KIDD	CLAIRE E. KIDD	05/15/26	☐	P01944808

Firm's name BAKER TILLY ADVISORY GROUP, LP — Firm's EIN 39-0859910

Firm's address 999 THIRD AVENUE, SUITE 2800
SEATTLE, WA 98104 — Phone no. 206-302-6500

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

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
GREATER GOOD CHARITIES WORKS TO HELP PEOPLE, ANIMALS AND THE ENVIRONMENT BY MOBILIZING IN RESPONSE TO NEED AND AMPLIFYING THE GOOD. GREATER GOOD CHARITIES LEVERAGES DONOR GENEROSITY AND THE RESULTING IMPACTS OF ITS WIDE-RANGING PROGRAM SUCCESSES BY STRATEGICALLY

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ..... Yes X No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 145,144,612. including grants of $ 134,953,090.) (Revenue $ 2,994,523.)
ANIMALS:
$134,933,555 WAS GRANTED TO ANIMAL WELFARE ORGANIZATIONS FOR ITEMS LIKE FOOD, VACCINATIONS, SHELTER RENOVATIONS, ENRICHMENT, SPAY/NEUTER, EDUCATION AND TRAINING, AND DISASTER PREPAREDNESS AND RESPONSE. GREATER GOOD CHARITIES' GOODS PROGRAM IS THE LOGISTICS SERVICES COMPONENT, RESPONSIBLE FOR SECURING, TRANSPORTING, STORING AND DISTRIBUTING IN-KIND DONATIONS TO APPROVED ANIMAL WELFARE NON-PROFIT RECIPIENTS. THE PROGRAM CONFORMS TO OUR INTERNAL GUIDELINES FOR EVALUATING AND RESPONDING TO GRANT APPLICATIONS, DELIVERING PRODUCTS SUCH AS ANIMAL FOOD, VACCINES, LITTER AND OTHER SUPPLIES INSTEAD OF FINANCIAL GRANTS.

4b (Code:) (Expenses $ 5,946,655. including grants of $ 1,266,488.) (Revenue $ 0.)
PEOPLE:
$1,266,488 WAS GRANTED TO CHARITIES ADDRESSING HUNGER, POVERTY, HEALTH AND EDUCATION IN THE U.S. AND INTERNATIONALLY. FUNDS SUPPORTED PROGRAMS TO PROVIDE BASIC HEALTH SERVICES, DISTRIBUTE NUTRITIOUS DENSE FOOD BOXES, AND BASIC SURVIVAL SUPPLIES IN AREAS AFFECTED BY DISASTERS.

4c (Code:) (Expenses $ 1,693,952. including grants of $ 299,596.) (Revenue $ 0.)
ENVIRONMENT:
$299,596 WAS GRANTED TO NON-PROFIT PARTNERS WHO WORK TO PROTECT ENDANGERED ANIMAL SPECIES, PLANT TREES IN DEFORESTED AREAS TO OFFSET CARBON EMISSIONS AND STUDY HABITAT FOR CONSERVATION AND RESTORATION PURPOSES.

4d Other program services (Describe on Schedule O.)
(Expenses $ including grants of $) (Revenue $)

4e Total program service expenses 152,785,219.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors*? See instructions	2	X	
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		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? *If "Yes," complete Schedule C, Part III*	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *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	X	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		X
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	X	
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		X
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	X	
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *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		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		X
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
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	X	

Part IV Checklist of Required Schedules *(continued)*

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

				Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	45		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		X	

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

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return **2a** 94			
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**		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation on Schedule O*	**3b**		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	**4a**		X
b	If "Yes," enter the name of the foreign country _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	**5a**		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	**5b**		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	**5c**		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	**6a**		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	**6b**		
7	**Organizations that may receive deductible contributions under section 170(c).**			
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	**7a**		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	**7b**		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	**7c**		X
d	If "Yes," indicate the number of Forms 8282 filed during the year **7d**			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	**7e**		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	**7f**		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	**7g**		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	**7h**		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	**8**		
9	**Sponsoring organizations maintaining donor advised funds.**			
a	Did the sponsoring organization make any taxable distributions under section 4966?	**9a**		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	**9b**		
10	**Section 501(c)(7) organizations.** Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12 **10a**			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities **10b**			
11	**Section 501(c)(12) organizations.** Enter:			
a	Gross income from members or shareholders **11a**			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) **11b**			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	**12a**		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year **12b**			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**			
a	Is the organization licensed to issue qualified health plans in more than one state? **Note:** See the instructions for additional information the organization must report on Schedule O.	**13a**		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans **13b**			
c	Enter the amount of reserves on hand **13c**			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	**14a**		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation on Schedule O*	**14b**		
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	**15**		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	**16**		X
17	**Section 501(c)(21) organizations.** Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	**17**		

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

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

Section A. Governing Body and Management

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

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

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

Section C. Disclosure

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

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

[X] Own website [X] Another's website [ ] Upon request [ ] Other *(explain on Schedule O)*

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records

JEMIMAH OKANTEY - 206-268-5417

301 UNION STREET #21308, SEATTLE, WA 98111

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) LIZ BAKER	50.00									
CHIEF EXECUTIVE OFFICER				X				303,238.	0.	22,437.
(2) NOAH HORTON	50.00									
CHIEF OPERATING OFFICER				X				222,460.	0.	14,210.
(3) JEMIMAH OKANTEY	50.00									
CHIEF FINANCIAL OFFICER				X				214,210.	0.	14,115.
(4) MELISSA RUBIN	50.00									
EXECUTIVE VP, FUNDRAISING						X		187,803.	0.	3,341.
(5) STEPHEN MINTER	50.00									
GENERAL COUNSEL (THRU 02/25)				X				178,398.	0.	10,424.
(6) SARA VARSA	50.00									
EXECUTIVE VP, PROGRAMS						X		164,118.	0.	13,785.
(7) NELSON MILLER	50.00									
EVP, PROGRAMS (THRU 05/25)						X		157,723.	0.	13,300.
(8) DENISE ST JEAN	50.00									
EXECUTIVE VP, COMMUNICATIONS						X		152,835.	0.	13,227.
(9) BRYNA DONNELLY	50.00									
EXECUTIVE VP, PROGRAMS						X		146,256.	0.	2,202.
(10) JAM STEWART	2.00									
BOARD CHAIR		X		X				0.	0.	0.
(11) JULIE RYAN	1.00									
BOARD VICE CHAIR		X		X				0.	0.	0.
(12) JOHN GEHRT	3.00									
BOARD TREASURER		X		X				0.	0.	0.
(13) JULIA CHRISTOPHERSEN	1.00									
BOARD SECRETARY		X		X				0.	0.	0.
(14) GREG HESTERBERG	1.00									
BOARD MEMBER		X						0.	0.	0.
(15) JACKSON GALAXY	1.00									
BOARD MEMBER		X						0.	0.	0.
(16) DAVID YASKULKA	1.00									
BOARD MEMBER		X						0.	0.	0.
(17) DAVID SAMUELSON	1.00									
BOARD MEMBER		X						0.	0.	0.

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) JEFF ZUBA	1.00									
BOARD MEMBER		X						0.	0.	0.
1b Subtotal								1,727,041.	0.	107,041.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								1,727,041.	0.	107,041.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization 20

		Yes	No
3 Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	4	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
CORLETT VENTURES, LLC 1105 PACIFIC AVENUE, ALAMEDA, CA 94501	CONSULTING SERVICES	227,975.
CAUSEMIC LLC PO BOX 11781, PORTLAND, OR 97211	CONSULTING SERVICES	209,286.
MISS SIMON LLC, 311 SOUTH POLK ST, SUITE 80, PMB 109, PINEVILLE, NC 28134	CONSULTING SERVICES	148,750.
SHAWN JENKINS, 2314 LITTLE COVE RD, OWENS CROSSROADS, AL 35763	CONSULTING SERVICES	108,286.
REVPARTNERS, 6595 ROSWELL ROAD SUITE G2744, ATLANTA, GA 30328	CONSULTING SERVICES	102,750.

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization 5

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	168,775,548.			
	g	Noncash contributions included in lines 1a-1f	1g	$ 140,604,059.			
	h	**Total.** Add lines 1a-1f		168,775,548.			
Program Service Revenue			Business Code				
	2a	FOOD & SUPPLIES STORAG	493000	2,228,807.	2,228,807.		
	b	VETERINARY CARE	541900	685,716.	685,716.		
	c	SAFE HOUSING & SHELTER	624200	80,000.	80,000.		
	d						
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a-2f		2,994,523.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		347,049.			347,049.
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties		1,127,173.			1,127,173.
			(i) Real / (ii) Personal				
	6a	Gross rents 6a					
	b	Less: rental expenses 6b					
	c	Rental income or (loss) 6c					
	d	Net rental income or (loss)					
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory 7a	2,442,414. / 759.				
	b	Less: cost or other basis and sales expenses 7b	2,442,414. / 61,001.				
	c	Gain or (loss) 7c	0. / -60,242.				
	d	Net gain or (loss)		-60,242.			-60,242.
	8a	Gross income from fundraising events (not including $ _____ of contributions reported on line 1c). See Part IV, line 18 8a					
	b	Less: direct expenses 8b					
	c	Net income or (loss) from fundraising events					
	9a	Gross income from gaming activities. See Part IV, line 19 9a					
	b	Less: direct expenses 9b					
	c	Net income or (loss) from gaming activities					
	10a	Gross sales of inventory, less returns and allowances 10a					
	b	Less: cost of goods sold 10b					
	c	Net income or (loss) from sales of inventory					
Miscellaneous Revenue			Business Code				
	11a						
	b						
	c						
	d	All other revenue					
	e	**Total.** Add lines 11a-11d					
	12	**Total revenue.** See instructions		173,184,051.	2,994,523.	0.	1,413,980.

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	123,890,234.	123,890,234.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	6,692,662.	6,692,662.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	5,936,279.	5,936,279.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,403,254.	421,985.	718,696.	262,573.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	6,365,872.	4,720,211.	633,884.	1,011,777.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	64,181.	47,079.	6,358.	10,744.
9 Other employee benefits	783,694.	545,225.	113,086.	125,383.
10 Payroll taxes	593,302.	394,835.	101,352.	97,115.
11 Fees for services (nonemployees):				
a Management				
b Legal	155,730.	51,546.	104,184.	
c Accounting	91,569.		91,569.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	1,858,978.	1,084,995.	156,163.	617,820.
12 Advertising and promotion	7,597,139.	1,228,218.	112,002.	6,256,919.
13 Office expenses	2,778,398.	2,695,226.		83,172.
14 Information technology	164,207.		34,881.	129,326.
15 Royalties				
16 Occupancy	255,936.	194,133.	45,770.	16,033.
17 Travel	1,354,413.	1,164,182.	115,168.	75,063.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	32,511.	28,890.	1,474.	2,147.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	151,112.	66,056.	76,107.	8,949.
23 Insurance	214,084.	4,556.	177,913.	31,615.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a LOGISTICS	3,323,289.	3,323,289.		
b DUES & SUBSCRIPTIONS	515,799.	275,721.	136,181.	103,897.
c BAD DEBT	100,000.		100,000.	
d TRAINING & EDUCATION	894.	866.	28.	
e All other expenses	51,545.	19,031.	32,514.	
25 **Total functional expenses.** Add lines 1 through 24e	164,375,082.	152,785,219.	2,757,330.	8,832,533.
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

				(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing		3,270,445.	1	324,141.
	2	Savings and temporary cash investments		6,123,364.	2	8,228,656.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		628,873.	4	1,010,460.
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use		2,515,224.	8	8,588,807.
	9	Prepaid expenses and deferred charges		794,898.	9	544,559.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,082,830.			
	b	Less: accumulated depreciation	10b 415,857.	408,070.	10c	666,973.
	11	Investments - publicly traded securities		1,682,418.	11	4,540,231.
	12	Investments - other securities. See Part IV, line 11			12	
	13	Investments - program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		538,289.	15	543,465.
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)		15,961,581.	16	24,447,292.
Liabilities	17	Accounts payable and accrued expenses		1,374,437.	17	1,501,216.
	18	Grants payable		96,196.	18	30,860.
	19	Deferred revenue		700,367.	19	396,638.
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		553,554.	25	407,616.
	26	**Total liabilities.** Add lines 17 through 25		2,724,554.	26	2,336,330.
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here** ☒ **and complete lines 27, 28, 32, and 33.**				
	27	Net assets without donor restrictions		8,870,789.	27	20,185,446.
	28	Net assets with donor restrictions		4,366,238.	28	1,925,516.
		Organizations that do not follow FASB ASC 958, check here ☐ **and complete lines 29 through 33.**				
	29	Capital stock or trust principal, or current funds			29	
	30	Paid-in or capital surplus, or land, building, or equipment fund			30	
	31	Retained earnings, endowment, accumulated income, or other funds			31	
	32	Total net assets or fund balances		13,237,027.	32	22,110,962.
	33	Total liabilities and net assets/fund balances		15,961,581.	33	24,447,292.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	173,184,051.
2	Total expenses (must equal Part IX, column (A), line 25)	2	164,375,082.
3	Revenue less expenses. Subtract line 2 from line 1	3	8,808,969.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	13,237,027.
5	Net unrealized gains (losses) on investments	5	64,966.
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, column (B))	10	22,110,962.

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2a		X
b	Were the organization's financial statements audited by an independent accountant? 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	2b	X	
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.	2c	X	
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?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization	Employer identification number
GREATER GOOD CHARITIES	20-4846675

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

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

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
10 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
f Enter the number of supported organizations .....
g Provide the following information about the supported organization(s).

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	75,529,973.	115,323,744.	151,274,822.	307,616,704.	168,775,548.	818,520,791.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	75,529,973.	115,323,744.	151,274,822.	307,616,704.	168,775,548.	818,520,791.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						388,521,599.
6 **Public support.** Subtract line 5 from line 4.						429,999,192.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4	75,529,973.	115,323,744.	151,274,822.	307,616,704.	168,775,548.	818,520,791.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	505,353.	823,215.	1,039,080.	947,179.	1,474,222.	4,789,049.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 **Total support.** Add lines 7 through 10						823,309,840.

12 Gross receipts from related activities, etc. (see instructions) 12 10,857,266.

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f)) 14 52.23 %

15 Public support percentage from 2023 Schedule A, Part II, line 14 15 49.03 %

16a **33 1/3% support test - 2024.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☒

b **33 1/3% support test - 2023.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

17a **10% -facts-and-circumstances test - 2024.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐

b **10% -facts-and-circumstances test - 2023.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐

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

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

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

Section A. Public Support

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

Section B. Total Support

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

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

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

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

19a **33 1/3% support tests - 2024.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

b **33 1/3% support tests - 2023.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations *(continued)*

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year* **(see instructions).**

- **a** ☐ The organization satisfied the Activities Test. *Complete* **line 2** *below.*
- **b** ☐ The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*
- **c** ☐ The organization supported a governmental entity. *Describe in* **Part VI** *how you supported a governmental entity (see instructions).*

			Yes	No
2	Activities Test. **Answer lines 2a and 2b below.**			
a	*Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in* **Part VI identify those supported organizations and explain** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	**2a**		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* **Part VI** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	**2b**		
3	Parent of Supported Organizations. **Answer lines 3a and 3b below.**			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in **Part VI**.	**3a**		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard.	**3b**		

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

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

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

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

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	**1**		
2 Enter 0.85 of line 1.	**2**		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	**3**		
4 Enter greater of line 2 or line 3.	**4**		
5 Income tax imposed in prior year	**5**		
6 **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	**6**		

7 ☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

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

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

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

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

Schedule B (Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Name of the organization	Employer identification number
GREATER GOOD CHARITIES	20-4846675

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	[X] 501(c)(3) (enter number) organization
	[ ] 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	[ ] 527 political organization
Form 990-PF	[ ] 501(c)(3) exempt private foundation
	[ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation
	[ ] 501(c)(3) taxable private foundation

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

General Rule

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

Special Rules

[X] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling $5,000 or more during the year ..... $ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization: GREATER GOOD CHARITIES

Employer identification number: 20-4846675

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		$ 7,633,790.	Person [X] Payroll [ ] Noncash [X] (Complete Part II for noncash contributions.)
2		$ 10,036,458.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II for noncash contributions.)
3		$ 33,381,395.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II for noncash contributions.)
4		$ 3,690,771.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II for noncash contributions.)
5		$ 5,433,858.	Person [X] Payroll [ ] Noncash [X] (Complete Part II for noncash contributions.)
6		$ 4,093,125.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II for noncash contributions.)

Name of organization: GREATER GOOD CHARITIES

Employer identification number: 20-4846675

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		$ 24,948,320.	Person [X] Payroll [ ] Noncash [X] (Complete Part II for noncash contributions.)
8		$ 7,019,997.	Person [X] Payroll [ ] Noncash [X] (Complete Part II for noncash contributions.)
9		$ 6,304,729.	Person [X] Payroll [ ] Noncash [X] (Complete Part II for noncash contributions.)
10		$ 3,423,825.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II for noncash contributions.)
11		$ 4,792,390.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II for noncash contributions.)
12		$ 6,361,082.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II for noncash contributions.)

Name of organization: GREATER GOOD CHARITIES

Employer identification number: 20-4846675

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	PET PHARMACEUTICALS	$ 7,561,790.	06/30/25
2	CAT FOOD	$ 10,036,458.	06/30/25
3	DOG AND CAT FOOD, TREATS, CAT LITTER AND SUPPLIES	$ 33,381,395.	06/30/25
4	DOG AND CAT FOOD	$ 3,690,771.	06/30/25
5	DOG AND CAT FOOD, TREATS, PET SUPPLEMENTS, EQUESTRIAN PRODUCTS	$ 5,373,858.	06/30/25
6	DOG AND CAT FOOD	$ 4,093,125.	06/30/25

Name of organization: GREATER GOOD CHARITIES

Employer identification number: 20-4846675

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
7	DOG AND CAT FOOD, TREATS, CAT LITTER AND PET SUPPLEMENTS	$ 24,578,320.	06/30/25
8	DOG AND CAT FOOD, TREATS AND SUPPLIES	$ 6,541,902.	06/30/25
9	DOG AND CAT FOOD, TREATS	$ 6,241,229.	06/30/25
10	DOG AND CAT FOOD, TREATS	$ 3,423,825.	06/30/25
11	DOG AND CAT FOOD	$ 4,792,390.	06/30/25
12	DOG AND CAT FOOD	$ 6,361,082.	06/30/25

Name of organization	Employer identification number
GREATER GOOD CHARITIES	20-4846675

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

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

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE D (Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
GREATER GOOD CHARITIES

Employer identification number
20-4846675

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	2	
2	Aggregate value of contributions to (during year)	150,000.	
3	Aggregate value of grants from (during year)	72,332.	
4	Aggregate value at end of year	108,427.	

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? [X] Yes [ ] No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? [X] Yes [ ] No

Part II Conservation Easements.

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
- [ ] Preservation of land for public use (for example, recreation or education)
- [ ] Preservation of a historically important land area
- [ ] Protection of natural habitat
- [ ] Preservation of a certified historic structure
- [ ] Preservation of open space

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

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

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

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

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

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

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

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

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

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

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

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

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

(i) Revenue included on Form 990, Part VIII, line 1 $ 0.

(ii) Assets included in Form 990, Part X $ 0.

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

a Revenue included on Form 990, Part VIII, line 1 $ 79,500.

b Assets included in Form 990, Part X $ 79,500.

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

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

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange program
e ☐ Other _____

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

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

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

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

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

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

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

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

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

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

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

a Board designated or quasi-endowment _____%
b Permanent endowment _____%
c Term endowment _____%

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

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

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

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

Part VI Land, Buildings, and Equipment

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	23,000.			23,000.
b Buildings				
c Leasehold improvements				
d Equipment	567,663.		379,967.	187,696.
e Other	492,167.		35,890.	456,277.
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, line 10c, column (B))*				666,973.

Part VII Investments - Other Securities

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets

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

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

Part X Other Liabilities

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) LEASE LIABILITY	407,616.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, line 25, col. (B))*	407,616.

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

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

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

1	Total revenue, gains, and other support per audited financial statements			1	173,977,042.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	64,966.		
b	Donated services and use of facilities	2b	728,025.		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines 2a through 2d			2e	792,991.
3	Subtract line 2e from line 1			3	173,184,051.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	173,184,051.

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

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

1	Total expenses and losses per audited financial statements			1	165,103,107.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a	728,025.		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines 2a through 2d			2e	728,025.
3	Subtract line 2e from line 1			3	164,375,082.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	164,375,082.

Part XIII Supplemental Information

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

PART III, LINE 4:

THE WORKS OF ART BEING HELD ARE 2 PAINTINGS, 5 SCULPTURES, AND 1 PASTEL WORK ON PAPER. THE ART IS BY A UKRAINIAN ARTIST AND WAS DONATED TO BE SOLD. THE PROCEED ARE RESTRICTED TO BENEFIT PROGRAM ACTIVITIES IN UKRAINE.

PART X, LINE 2:

THE INTERNAL REVENUE SERVICE HAS RECOGNIZED THE ORGANIZATION AS EXEMPT FROM FEDERAL INCOME TAXES UNDER PROVISIONS OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (IRC) EXCEPT TO THE EXTENT OF UNRELATED BUSINESS TAXABLE INCOME AS DEFINED UNDER IRC SECTIONS 511 THROUGH 515. ANY UNRELATED BUSINESS INCOME GENERATED IS NOT SIGNIFICANT; THEREFORE, NO PROVISION FOR INCOME TAXES HAS BEEN RECORDED. THE COMPANY FOLLOWS FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ACCOUNTING STANDARDS CODIFICATION (ASC) 740-10, INCOME TAXES, RELATING TO ACCOUNTING FOR UNCERTAIN TAX POSITIONS. ASC 740-10 PRESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT PROCESS FOR ACCOUNTING FOR UNCERTAIN TAX POSITIONS AND ALSO PROVIDES GUIDANCE ON VARIOUS RELATED MATTERS SUCH AS DERECOGNITION, INTEREST, PENALTIES AND DISCLOSURES REQUIRED. MANAGEMENT DOES NOT BELIEVE THE ORGANIZATION HAS AN UNCERTAIN TAX POSITION AS OF AND FOR THE YEARS ENDED JUNE 30, 2025 AND 2024.

Part XIII Supplemental Information *(continued)*

SCHEDULE F (Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.
Attach to Form 990.
Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

GREATER GOOD CHARITIES

Employer identification number

20-4846675

Part I General Information on Activities Outside the United States.

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ..... [X] **Yes** [ ] **No**

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	**(b)** Number of offices in the region	**(c)** Number of employees, agents, and independent contractors in the region	**(d)** Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	**(e)** If activity listed in (d) is a program service, describe specific type of service(s) in the region	**(f)** Total expenditures for and investments in the region
CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,	0	0	GRANTMAKING		59,927.
EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA,	0	0	GRANTMAKING	EXPLORATION, STUDY, AND PROTECTING BIODIVERSITY	488,666.
EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM	1	4	GRANTMAKING AND PROGRAM SERVICE	DISTRIBUTION OF PRODUCTS FOR ANIMAL AND HUMAN WELFARE	637,497.
NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	0	2	GRANTMAKING AND PROGRAM SERVICE	EXPLORATION, STUDY, AND PROTECTING BIODIVERSITY	4,678,208.
RUSSIA AND NEIGHBORING STATES - ARMENIA, AZERBIJAN, BELARUS,	0	0	GRANTMAKING AND PROGRAM SERVICE	DISTRIBUTION OF PRODUCTS FOR ANIMAL AND HUMAN WELFARE	330,644.
SOUTH AMERICA - ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA, ECUADOR,	0	0	GRANTMAKING		62,752.
SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	0	0	GRANTMAKING		51,878.
EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM	0	0	INVESTMENTS		51,839.
3 a Subtotal	1	6			6,361,411.
b Total from continuation sheets to Part I	0	0			0.
c **Totals** (add lines 3a and 3b)	1	6			6,361,411.

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA (CANADA AND MEXICO)	SUPPORT RESCUED ANIMALS	1,418.	WIRE	1594863.	ANIMAL PRODUCTS, ANIMAL FOOD	FMV
		SUB-SAHARAN AFRICA	SUPPORT RESCUED ANIMALS	44,948.	WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	SUPPORT RESCUED ANIMALS	6,356.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	SUPPORT FOR PEOPLE	15,000.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	SUPPORT FOR PEOPLE	30,832.	WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	SUPPORT FOR PEOPLE	46,840.	WIRE	6,000.	HUMAN PRODUCTS	FMV
		NORTH AMERICA (CANADA AND MEXICO)	SUPPORT RESCUED ANIMALS	0.		6,191.	ANIMAL PRODUCTS, ANIMAL FOOD	FMV
		EAST ASIA AND THE PACIFIC	SUPPORT FOR PEOPLE	10,000.	WIRE	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 25

3 Enter total number of other organizations or entities 0

Part II **Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.** (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	SUPPORT FOR PEOPLE	60,000.	CHECK	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	SUPPORT FOR PEOPLE, RESCUED ANIMALS	435,000.	WIRE	0.		
		NORTH AMERICA (CANADA AND MEXICO)	SUPPORT RESCUED ANIMALS	0.		2478514.	ANIMAL PRODUCTS, ANIMAL FOOD	FMV
		RUSSIA AND NEIGHBORING STATES	SUPPORT FOR PROTECTING/RESTORING ENVIRONMENT	46,303.	WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	SUPPORT FOR PEOPLE	25,000.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	SUPPORT FOR PEOPLE	349,810.	WIRE	0.		
		NORTH AMERICA (CANADA AND MEXICO)	SUPPORT RESCUED ANIMALS	0.		93,769.	ANIMAL FOOD	FMV
		SOUTH AMERICA	SUPPORT RESCUED ANIMALS	10,000.	WIRE	0.		
		NORTH AMERICA (CANADA AND MEXICO)	SUPPORT RESCUED ANIMALS	0.		61,603.	ANIMAL PRODUCTS, ANIMAL FOOD	FMV

Part II **Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.** (Schedule F (Form 990), Part II, line 1)

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	SUPPORT FOR PROTECTING/RESTORING ENVIRONMENT	27,005.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	SUPPORT FOR PEOPLE	31,500.	WIRE	0.		
		RUSSIA AND NEIGHBORING STATES	SUPPORT RESCUED ANIMALS	81,025.	WIRE	0.		
		EUROPE (INCLUDING ICELAND AND GREENLAND)	SUPPORT RESCUED ANIMALS	11,000.	WIRE	0.		
		SOUTH AMERICA	SUPPORT FOR PROTECTING/RESTORING ENVIRONMENT	18,700.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	SUPPORT FOR PROTECTING/RESTORING ENVIRONMENT	19,520.	WIRE	0.		
		SOUTH AMERICA	SUPPORT FOR PROTECTING/RESTORING ENVIRONMENT	15,000.	WIRE	0.		
		NORTH AMERICA (CANADA AND MEXICO)	SUPPORT RESCUED ANIMALS	0.		359,752.	ANIMAL FOOD	FMV

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	**(b)** Region	**(c)** Number of recipients	**(d)** Amount of cash grant	**(e)** Manner of cash disbursement	**(f)** Amount of noncash assistance	**(g)** Description of noncash assistance	**(h)** Method of valuation (book, FMV, appraisal, other)

Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)*	[X] Yes	[ ] No
2	Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)*	[ ] Yes	[X] No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see the Instructions for Form 5471)*	[X] Yes	[ ] No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see the Instructions for Form 8621)*	[ ] Yes	[X] No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see the Instructions for Form 8865)*	[ ] Yes	[X] No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)*	[ ] Yes	[X] No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2:
EACH NON-PROFIT THAT RECEIVES GRANTS FROM GREATER GOOD CHARITIES IS REQUIRED TO SUPPLY PROOF OF THEIR NON-PROFIT STATUS UNDER THE LAWS OF THE COUNTRY IN WHICH IT WAS FORMED PRIOR TO RECEIVING FUNDS. THEY MUST ALSO SIGN A MEMO OF UNDERSTANDING THAT OUTLINES OUR INTENTIONS FOR USE OF FUNDS AND THAT THEY AGREE TO USE THE FUNDS AS SPECIFIED. THROUGHOUT THE YEAR, WE REQUIRE REPORTS FROM EACH CHARITY THAT RECAPS HOW FUNDS WERE USED. IF FUNDS ARE NOT USED PROPERLY OR DOCUMENTATION FOR HOW FUNDS WERE USED IS NOT PROVIDED, FUTURE FUNDS CAN BE WITHHELD. WHEN POSSIBLE, ACTUAL SITE VISITS ARE CONDUCTED TO SEE ACTUAL EVIDENCE OF THE USE OF FUNDS.

PART I, LINE 3:
THE AMOUNT ON PART I, LINE 3, COLUMN (F) REPRESENTS ACTUAL EXPENDITURES IN THE REGION FOR A TAXPAYER ON THE ACCRUAL BASIS OF ACCOUNTING.

SCHEDULE I (Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
GREATER GOOD CHARITIES

Employer identification number
20-4846675

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ..... [X] Yes [ ] No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
4 PAWS ANIMAL RESCUE PO BOX 735 WILLIS, MI 48191	27-3741642	501(C)(3)	0.	3,998,543.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
A FOREVER HOME ANIMAL RESCUE 900 2ND ST CLERMONT, FL 34711	27-3435399	501(C)(3)	5,114.	0.			SUPPORT FOR RESCUED ANIMALS
A PATHWAY TO HOPE 148 LINDA VISTA AVE NORTH HALEDON, NJ 07508	27-4036880	501(C)(3)	0.	16,313.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
A PL FOR PEANUT, INC. 6681 BAYOU GLEN RD HOUSTON, TX 77057	81-1124579	501(C)(3)	0.	40,997.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
ACADIANA OUTREACH CENTER DBA THE OUTREACH CENTER - PO BOX 2747 - LAFAYETTE, LA 70502	58-1925867	501(C)(3)	0.	7,667.	FMV	APPAREL, HYGIENE PRODUCTS, ANIMAL FOOD	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS
AFTER THE RACES PO BOX 369 RISING SUN, MD 21911	30-0729968	501(C)(3)	0.	18,703.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..... 357.

3 Enter total number of other organizations listed in the line 1 table ..... 0.

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

SEE PART IV FOR COLUMN (G) DESCRIPTIONS

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

LHA 432101 01-02-25

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AGAPE LOVE FROM ABOVE TO OUR COMMUNITY - 19 EAST 7TH ST - BLOOMSBURG, PA 17815	61-1591692	501(C)(3)	0.	978,973.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
AIKEN EQUINE RESCUE 532 GLENWOOD DR AIKEN, SC 29803	20-5162723	501(C)(3)	0.	73,606.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
AKWESASNE ANIMAL SOCIETY 20 SWAMP RD AKWESASNE, NY 13655	47-4583980	501(C)(3)	0.	32,055.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
ALACHUA COUNTY HUMANE SOCIETY 4205 NW 6TH ST GAINESVILLE, FL 32609	59-1908492	501(C)(3)	6,980.	0.			SUPPORT FOR RESCUED ANIMALS
ALAQUA ANIMAL REFUGE, INC. 155 DUGAS WAY FREEPORT, FL 32439	02-0806313	501(C)(3)	0.	368,836.	FMV	ANIMAL PHARMACEUTICALS , ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
ALASKA NATIVE RURAL VETERINARY, INC. - 3875 GEIST RD, #301 - FAIRBANKS, AK 99709	45-5167681	501(C)(3)	0.	9,724.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
AMERICAN BELGIAN MALINOIS RESCUE TRUST - 10834 STANDING STONE RD - HUNTINGDON, PA 16652	81-6099454	501(C)(3)	5,500.	5,173.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
ANIMAL HUMANE NEW MEXICO 615 VIRGINIA ST SE ALBUQUERQUE, NM 87108	85-0207652	501(C)(3)	1,940.	6,763.	FMV	ANIMAL PHARMACEUTICALS , ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
ANIMAL RESCUE AID 11832 BIG CANOE JASPER, GA 30143	26-3500676	501(C)(3)	0.	418,794.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS

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ANIMAL RESCUE FUND OF MISSISSIPPI (ARF OF MS) - 395 WEST MAYES ST - JACKSON, MS 39213	20-3311517	501(C)(3)	0.	210,718.	FMV	ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
ANIMAL RESCUE LEAGUE OF IOWA 5452 NE 22ND ST DES MOINES, IA 50313	42-0680427	501(C)(3)	0.	142,864.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
ANIMAL WELFARE ASSOCIATION 509 CENTENNIAL BLVD VOORHEES, NJ 08043	22-1752792	501(C)(3)	8,132.	165,218.	FMV	ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
ANIMAL WELFARE LEAGUE OF ARLINGTON 2650 SOUTH ARLINGTON MILL DR ARLINGTON, VA 22206	54-0603502	501(C)(3)	0.	5,277.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
ARIZONA ANIMAL WELFARE LEAGUE 25 NORTH 40TH ST PHOENIX, AZ 85034	23-7149453	501(C)(3)	0.	239,252.	FMV	ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL	SUPPORT FOR RESCUED ANIMALS
ARIZONA HUMANE SOCIETY 1521 WEST DOBBINS RD PHOENIX, AZ 85041	86-0135567	501(C)(3)	0.	57,380.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
ARK CAT SANCTUARY PO BOX 30098 FLAGSTAFF, AZ 86003	20-5883650	501(C)(3)	1,000.	5,221.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
ASHEVILLE HUMANE SOCIETY 14 FOREVER FRIEND LN ASHEVILLE, NC 28806	56-1444098	501(C)(3)	600.	481,681.	FMV	APPAREL, HYGIENE PRODUCTS, ANIMAL	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS
ASSOCIATED HUMANE SOCIETIES 124 EVERGREEN AVE NEWARK, NJ 07114	22-1487122	501(C)(3)	0.	389,836.	FMV	ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL	SUPPORT FOR RESCUED ANIMALS

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ATLANTA HUMANE SOCIETY 1551 PERRY BLVD ATLANTA, GA 30318	58-0685900	501(C)(3)	0.	1,506,771.	FMV	ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL	SUPPORT FOR RESCUED ANIMALS
AUSTIN PETS ALIVE! 1156 W CESAR CHAVEZ ST AUSTIN, TX 78703	74-2893360	501(C)(3)	0.	10,575.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
BARK AVE RESCUE & SANCTUARY 2001 NORTH 23RD AVE PHOENIX, AZ 85009	99-1576795	501(C)(3)	0.	119,600.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
BAYOU BUDDIES 26178 GLENBROOKE DR DENHAM SPRINGS, LA 70726	88-3309159	501(C)(3)	9,200.	0.			SUPPORT FOR RESCUED ANIMALS
BEGIN AGAIN HORSE RESCUE 2828 PLANK RD LIMA, NY 14485	27-0234285	501(C)(3)	0.	54,270.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
BERKELEY EAST BAY HUMANE SOCIETY 2700 NINTH ST BERKELEY, CA 94710	94-1347069	501(C)(3)	22,000.	0.			SUPPORT FOR RESCUED ANIMALS
BERKELEY HUMANE 2700 9TH ST BERKELEY, CA 94710	94-1347069	501(C)(3)	0.	8,429.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
BEST FRIENDS ANIMAL SOCIETY 5001 ANGEL CANYON RD KANAB, UT 84741	23-7147797	501(C)(3)	0.	10,854.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
BLIND CAT RESCUE & SANCTUARY, INC. 3101 E. GREAT MARSH CHURCH RD ST. PAULS, NC 28384	20-3410498	501(C)(3)	13,500.	7,198.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS

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BLUE MOUNTAIN HUMANE SOCIETY 7 GEORGE ST WALLA WALLA, WA 99362	91-0828499	501(C)(3)	0.	40,724.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
BLUU S CLUU S TEXAS ST RESCUE 14207 ESTUARY PL SAN ANTONIO, TX 78223	93-2859852	501(C)(3)	0.	5,419.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
BOWLING GREEN/WARREN COUNTY HUMANE SOCIETY - 1924 LOUISVILLE RD - BOWLING GREEN, KY 42101	61-0653278	501(C)(3)	0.	15,167.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
BUBBLES DOG RESCUE 1223 WILSHIRE BLVD 337 SANTA MONICA, CA 90403	88-0886274	501(C)(3)	18,149.	0.			SUPPORT FOR RESCUED ANIMALS
BUCKS COUNTY HUMAN SERVICES HUB 55 E COURT ST 1ST FLOOR DOYLESTOWN, PA 18901	23-6003044	MUNICIPALITY	0.	6,746.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS, HOUSEHOLD	SUPPORT FOR RESCUED ANIMALS
BURGE BIRD RESCUE 13833 S. 71 HWY GRANDVIEW, MO 64030	56-2675750	501(C)(3)	3,000.	2,065.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
BURKE COUNTY ANIMAL SERVICES 485 GA HWY 24 SOUTH WAYNESBORO, GA 30830	58-6000790	MUNICIPALITY	0.	170,928.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
BUTTE HUMANE SOCIETY 13391 GARNER LN CHICO, CA 95973	94-1580621	501(C)(3)	0.	19,372.	FMV	APPAREL, HYGIENE PRODUCTS, ANIMAL	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS
CABOT ANIMAL SUPPORT SERVICES 2951 SOUTH 1ST ST CABOT, AR 72023	71-0334905	MUNICIPALITY	2,074.	169,050.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS

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CALIFORNIA LABRADORS RETRIEVERS AND MORE - 27745 N LAKE WOHLFORD RD - VALLEY CENTER, CA 92082	45-1589323	501(C)(3)	7,577.	0.			SUPPORT FOR RESCUED ANIMALS
CALIFORNIA WILDLIFE CENTER PO BOX 2022 MALIBU, CA 90265	95-4580790	501(C)(3)	6,800.	0.			SUPPORT FOR BIODIVERSITY & CONSERVATION
CANTER KENTUCKY 224 OWSLEY AVE. LEXINGTON, KY 40502	36-4677151	501(C)(3)	0.	9,352.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
CARA'S HOUSE (COMPANION ANIMAL RESCUE OF ASCENSION) - 9894 AIRLINE HWY - SORRENTO, LA 70778	90-0877497	501(C)(3)	3,154.	28,224.	FMV	ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
CARE - COMPANIONS AND ANIMALS FOR REFORM AND EQUITY - 420 DUNKIRK RD - BALTIMORE, MD 21212	85-0557068	501(C)(3)	0.	7,968.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
CARE STL 2700 WALNUT PL SAINT LOUIS, MO 63103	83-1080279	501(C)(3)	5,256.	0.			SUPPORT FOR RESCUED ANIMALS
CAT TALES, INC. PO BOX 165 WARMINSTER, PA 18974	35-2182828	501(C)(3)	7,885.	0.			SUPPORT FOR RESCUED ANIMALS
CAUSE4PAWS PET FOOD BANK 7208 E SOLANO DR SCOTTSDALE, AZ 85250	46-2714043	501(C)(3)	0.	877,215.	FMV	ANIMAL FOOD	SUPPORT FOR RESCUED ANIMALS
CC'S CUPBOARD PET FOOD PANTRY 26700 HIGHLAND RD RICHMOND HEIGHTS, OH 44143	84-4484018	501(C)(3)	0.	622,524.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS

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CENTER FOR BIOLOGICAL DIVERSITY PO BOX 710 TUCSON, AZ 85702	27-3943866	501(C)(3)	10,000.	0.			SUPPORT FOR BIODIVERSITY & CONSERVATION
CENTRAL KENTUCKY RIDING FOR HOPE 4185 WALT ROBERTSON RD - KY HORSE P KENTUCKY, KY 40511	31-1024505	501(C)(3)	0.	14,027.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
CHARITY HQ DBA FIRST NATIONS VETERINARY - 4301 NE LAURELHURST PL - PORTLAND, OR 97213	87-1402056	501(C)(3)	0.	39,497.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
CHARLOTTE-MECKLENBURG ANIMAL CARE AND CONTROL - 8315 BYRUM DR - CHARLOTTE, NC 28217	52-1333483	MUNICIPALITY	1,328.	322,262.	FMV	ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
CHAR-WILLS GERMAN SHEPHERD RESCUE 2 EAST RAILRD AVE NEW RINGGOLD, PA 17960	47-4295233	501(C)(3)	19,900.	48,717.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
CHEYENNE MOUNTAIN ZOO 4250 CHEYENNE MOUNTAIN ZOO RD COLORADO SPRINGS, CO 80906	84-0407039	501(C)(3)	0.	15,510.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
CIRCLE A HOME FOR HORSES INC 4345 CHARITY NECK RD VIRGINIA BEACH, VA 23457	46-4105488	501(C)(3)	5,000.	19,730.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
CITRUS COUNTY ANIMAL SERVICES 4030 S. AIRPORT RD INVERNESS, FL 34450	59-6000548	MUNICIPALITY	0.	33,141.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
CITY OF DOTHAN ANIMAL SERVICES 295 JERRY DR DOTHAN, AL 36303	63-6001243	CITY OF DOTHAN	0.	52,385.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS

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CITY OF LOS ANGELES DEPARTMENT OF ANIMAL SERVICES - 221 NORTH FIGUEROA ST - LOS ANGELES, CA 90012	95-6000735	CITY OF LOS ANGE	0.	3,907,604.	FMV	ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
CITY OF LYONS 572 VICTORY DR LYONS, GA 30436	58-6000611	MUNICIPALITY	0.	62,617.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
CITY OF NASHVILLE GA ANIMAL SHELTER - 1406 SADDLE CLUB LN - NASHVILLE, GA 31639	58-6000630	MUNICIPALITY	0.	81,077.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
CLEARWATER MARINE AQUARIUM INC 249 WINDWARD PASSAGE CLEARWATER, FL 33767	59-2086737	501(C)(3)	6,000.	0.			SUPPORT FOR BIODIVERSITY & CONSERVATION
COATESVILLE VETERANS AFFAIRS MEDICAL CENTER - 1400 BLACKHORSE HILL RD - COATESVILLE, PA 19320	74-1612229	MUNICIPALITY	0.	9,986.	FMV	APPAREL, HYGIENE PRODUCTS, ANIMAL FOOD	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS
CODY'S FRIENDS PO BOX 36502 TUCSON, AZ 85704	47-4052727	501(C)(3)	0.	935,130.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
COFFEE CAUSE FOR PAWS 716 WARD ST WEST DOUGLAS, GA 31533	58-1945686	501(C)(3)	0.	243,247.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
COLORADO HORSE RESCUE NETWORK 38705 BIG SPRINGS RD RUSH, CO 80833	47-2431562	501(C)(3)	0.	5,508.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
COLORADO PET PANTRY PO BOX 323, BOULDER BOULDER, CO 80306	45-4210185	501(C)(3)	0.	133,080.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS

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COLUMBUS HUMANE 3015 SCIOTO DARBY EXECUTIVE COURT HILLIARD , OH 43026	31-4379492	501(C)(3)	0.	2,705,852.	FMV	ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
COMPANION ANIMAL ALLIANCE 2550 GOURRIER AVE BATON ROUGE, LA 70820	27-1204719	501(C)(3)	0.	105,984.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
COMPANION PET RESCUE & TRANSPORT OF W. TN - 16 STARWOOD CV - JACKSON, TN 38305	20-3595457	501(C)(3)	1,960.	6,726.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
CONNECTICUT HUMANE SOCIETY 701 RUSSELL RD NEWINGTON, CT 06111	06-0667605	501(C)(3)	0.	274,273.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
COPE PREPAREDNESS 22287 MULHOLLAND HWY, STE 235 CALABASAS, CA 91302	75-3231197	501(C)(3)	12,500.	4,069,299.	FMV	APPAREL, HYGIENE PRODUCTS, HOUSEHOLD	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS
COUGAR PETS RESCUE 1105 KELLY DR SANFORD, NC 27330	56-1644218	501(C)(3)	0.	6,726.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
CRAVEN-PAMLICO ANIMAL SERVICES CENTER - 1639 OLD AIRPORT RD - NEW BERN, NC 28562	56-6000290	MUNICIPALITY	0.	36,178.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
CROSSING PATHS ANIMAL RESCUE 210 DEAVERS TOWN RD CLEVELAND, AL 35049	06-1803505	501(C)(3)	19,989.	0.			SUPPORT FOR RESCUED ANIMALS
DELTA ANIMAL SHELTER 6975 COUNTY 426 M.5 RD ESCANABA, MI 49829	45-2725668	501(C)(3)	0.	38,698.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS

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DOBERMAN PINSCHER RESCUE OF PA 237 HICKORY DR FLEETWOOD, PA 19522	23-2583446	501(C)(3)	1,400.	11,496.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
DUBUQUE HUMANE SOCIETY 4242 CHAVENELLE RD DUBUQUE, IA 52002	42-6039535	501(C)(3)	0.	6,342.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
DUMAS GERMAN SHEPHERD RESCUE 185 SALTLICK RD HUEYSVILLE, KY 41640	56-2436374	501(C)(3)	0.	187,781.	FMV	APPAREL, HYGIENE PRODUCTS, ANIMAL FOOD,	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS
EAST COAST BULLDOG RESCUE 1803 FALLOWFIELD AVE PITTSBURGH, PA 15216	84-2550189	501(C)(3)	1,200.	4,236.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
EL PASO COMMUNITY FOUNDATION 501 E MILLS EL PASO, TX 79901	74-1839536	501(C)(3)	0.	75,485.	FMV	APPAREL, HYGIENE PRODUCTS, ANIMAL FOOD,	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS
ELMBROOK HUMANE SOCIETY 20950 ENTERPRISE AVE BROOKFIELD, WI 53045	39-6091712	501(C)(3)	7,800.	0.			SUPPORT FOR RESCUED ANIMALS
EQUINE VOICES RESCUE & SANCTUARY PO BOX 1685 GREEN VALLEY, AZ 85622	74-3127794	501(C)(3)	0.	24,501.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
FAITH EQUINE RESCUE 5370 ROSENBERRY LN MULBERRY, FL 33860	27-2436772	501(C)(3)	0.	9,352.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
FANCY CATS & DOGS RESCUE TEAM 13110 PELFREY LN FAIRFAX, VA 22033	54-1859914	501(C)(3)	8,465.	0.			SUPPORT FOR RESCUED ANIMALS

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FEEDING FURRY FRIENDS 21233 LITHIUM ST NW NOWTHEN, MN 55303	83-2754250	501(C)(3)	0.	1,023,392.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
FEEDING TAMPA BAY 4702 TRANSPORT DR, BUILDING 6 TAMPA, FL 33605	59-2116576	501(C)(3)	0.	788,294.	FMV	APPAREL, HYGIENE PRODUCTS, HOUSEHOLD	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS
FEEDING THE CAROLINAS 6255 TOWNCENTER DR CLEMMONS, NC 27012	27-3181226	501(C)(3)	0.	14,160.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
FELINES & CANINES RESCUE CENTER 266 HAMER RD CROSS ROADS, AL 35763	36-2922975	501(C)(3)	2,000.	46,673.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
FENCES FOR FIDO PO BOX 80282 PORTLAND, OR 97280	30-0554675	501(C)(3)	0.	609,192.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
FERAL CAT CARETAKERS COALITION 11956 DOROTHY ST, #7 LOS ANGELES, CA 90049	95-4781600	501(C)(3)	0.	260,410.	FMV	ANIMAL FOOD	SUPPORT FOR RESCUED ANIMALS
FINGER LAKES THOROUGHBRED ADOPTION PROGRAM - 5757 STATE ROUTE 96 - FARMINGTON, NY 14425	16-1759140	501(C)(3)	0.	39,764.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
FIRST COAST NO MORE HOMELESS PETS DBA EVERYPET - 6817 NORWOOD AVE - JACKSONVILLE, FL 32208	01-0709158	501(C)(3)	0.	72,270.	FMV	ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
FIX WEST TEXAS 9507 WEST COUNTY RD 77 MIDLAND, TX 79707	84-4108520	501(C)(3)	0.	2,026,129.	FMV	ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL	SUPPORT FOR RESCUED ANIMALS

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FLEET OF ANGELS 3226 S NEWCOMBE ST NO.101 LAKEWOOD, CO 80227	46-3895690	501(C)(3)	7,500.	0.			SUPPORT FOR RESCUED ANIMALS
FLORENCE AREA HUMANE SOCIETY 1434 S MCCURDY RD FLORENCE, SC 29502	57-0573276	501(C)(3)	0.	5,042.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
FLORIDA KEYS WILD BIRD REHABILITATION CTR - 92080 OVERSEAS HWY - TAVERNIER, FL 33070	65-0020988	501(C)(3)	10,000.	0.			SUPPORT FOR BIODIVERSITY & CONSERVATION
FOOD BANK OF EL DORADO COUNTY 4550 BUSINESS DR CAMERON PARK, CA 95682	68-0457594	501(C)(3)	0.	20,428.	FMV	APPAREL, HYGIENE PRODUCTS	SUPPORT FOR HUNGER & POVERTY
FORT DEFIANCE HUMANE SOCIETY 7169 STATE ROUTE 15 DEFIANCE, OH 43512	34-1008989	501(C)(3)	0.	21,638.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
FRIENDLY FERALS INC. 90-06 71ST AVE FOREST HILLS, NY 11375	26-2249492	501(C)(3)	0.	2,437,925.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
FRIENDS OF CABOT ANIMAL SUPPORT SERVICES - PO BOX 5084 - CABOT, AR 72023	85-2249842	501(C)(3)	0.	316,441.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
FRIENDS OF PIMA ANIMAL CARE CENTER PO BOX 85370 TUCSON, AZ 85754	47-4160770	501(C)(3)	0.	1,053,087.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
GATEWAY PET GUARDIANS 725 N. 15TH ST EAST ST. LOUIS, IL 62205	26-0096240	501(C)(3)	3,000.	7,103,047.	FMV	ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL	SUPPORT FOR RESCUED ANIMALS

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GENESEE COUNTY ANIMAL CONTROL 4351 W. PASADENA AVE FLINT, MI 48504	38-6004849	MUNICIPALITY	7,700.	0.			SUPPORT FOR RESCUED ANIMALS
GENTLE GIANTS DRAFT HORSE RESCUE 17250 OLD FREDERICK RD MOUNT AIRY, MD 21771	59-3822764	501(C)(3)	0.	75,685.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
GEORGIA VETERINARY MEDICAL ASSOCIATION FOUNDATION, INC. - 6050 PEACHTREE PKWY, STE 240-381 - NORCROSS, GA 30092	58-1997048	501(C)(3)	0.	6,368.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
GIVE A DOG A HOME 187 DOWNS RD SEBEC, ME 04481	27-5241306	501(C)(3)	0.	248,326.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
GLEANING FOR THE WORLD PO BOX 645, 7539 STAGE RD CONCORD, VA 24538	54-1930105	501(C)(3)	0.	725,255.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
GOD'S DOGS RESCUE 12750 TRAWALTER LN VON ORMY, TX 78073	47-2023186	501(C)(3)	0.	715,222.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
GOOD SHEPHERD HUMANE SOCIETY 6486 HWY 62 W EUREKA SPRINGS, AR 72632	71-0458910	501(C)(3)	0.	156,330.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
GREAT LAKES BENGAL RESCUE 10720 HITE CREEK RD LOUISVILLE, KY 40241	26-1120616	501(C)(3)	0.	688,381.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
GREATER BIRMINGHAM HUMANE SOCIETY 300 SNOW DR BIRMINGHAM, AL 35209	63-0288810	501(C)(3)	9,200.	1,256,323.	FMV	ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL	SUPPORT FOR RESCUED ANIMALS

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GREATER NEW ORLEANS CARING COLLECTIVE - 2511 DRYADES - NEW ORLEANS, LA 70113	85-0686000	501(C)(3)	0.	21,647.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
GREENHILL HUMANE SOCIETY 88530 GREEN HILL RD EUGENE, OR 97402	93-0467412	501(C)(3)	1,056.	374,366.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
GREENVILLE COUNTY ANIMAL CARE 328 FURMAN HALL RD GREENVILLE, SC 29609	57-6000356	501(C)(3)	0.	118,593.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
GRG RANCH HORSE RESCUE & SANCTUARY 3380 233RD ST E PRIOR LAKE, MN 55372	88-1660703	501(C)(3)	0.	40,212.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
GUARDIANS OF FLORIDA ANIMAL RESCUE INC - 13931 SOPHOMORE LN - FORT MYERS, FL 33912	87-0921342	501(C)(3)	21,131.	0.			SUPPORT FOR RESCUED ANIMALS
GULF COAST HUMANE SOCIETY 2010 ARCADIA ST FORT MYERS, FL 39916	59-0806978	501(C)(3)	17,562.	441,960.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
GULF COAST HUMANE SOCIETY TX 3118 CABANISS RD CORPUS CHRISTI, TX 78415	74-1266245	501(C)(3)	50.	20,381.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
GYPSY HERITAGE HORSE RESCUE 10510 RIDER RD PERKINS, OK 74059	83-0871111	501(C)(3)	0.	40,182.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
HALIFAX HUMANE SOCIETY 2364 LPGA BLVD DAYTONA BEACH, FL 32124	59-0530990	501(C)(3)	0.	9,837.	FMV	ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS

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HARBOR HUMANE SOCIETY 14345 BAGLEY ST WEST OLIVE, MI 49460	38-1623660	501(C)(3)	1,757.	1,004,918.	FMV	ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL	SUPPORT FOR RESCUED ANIMALS
HAWAIIAN HUMANE SOCIETY 2700 WAIALAE AVE HONOLULU, HI 96826	99-0073490	501(C)(3)	172.	8,568.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
HEART OF PHOENIX EQUINE RESCUE PO BOX 81 SHOALS, WV 25562	45-4421742	501(C)(3)	0.	65,158.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
HEARTS ALIVE VILLAGE 1750 S RAINBOW BLVD #4 LAS VEGAS, NV 89146	46-3622732	501(C)(3)	0.	1,116,521.	FMV	ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL	SUPPORT FOR RESCUED ANIMALS
HEIDI'S HOPE FOR HOMELESS ANIMALS, INC. - 1121 MILITARY CUTOFF RD, STE C-214 - WILMINGTON, NC 28403	47-3734957	501(C)(3)	1,000.	148,792.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
HELPING PAWS ACROSS BORDERS 16 CHAMISA RD PLACITAS, NM 87043	46-4129178	501(C)(3)	2,000.	72,782.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
HENRY'S HOUSE FERAL COMMUNITY 3285 EARHART WAY BUFORD, GA 30519	81-2710918	501(C)(3)	0.	2,545,957.	FMV	APPAREL, HYGIENE PRODUCTS, HOUSEHOLD	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS
HOPE AFTER RACING THOROUGHBREDS 1 PRAIRIE MEADOWS DR ALTOONA, IA 50009	45-1595018	501(C)(3)	0.	28,055.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
HOPE EQUINE RESCUE, INC. 3805 HIGH ST NORTHEAST WINTER HAVEN, FL 33881	26-2647977	501(C)(3)	0.	44,442.	FMV	ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS

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HOPE FOR HOOVES RESCUE 45 VAN RD NORTH AUGUSTA, SC 29860	84-4317694	501(C)(3)	0.	9,352.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
HORSE AND HOUND RESCUE FOUNDATION 2350 S MIDWEST BLVD GUTHRIE, OK 73044	81-1465411	501(C)(3)	1,025.	11,323.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
HORSE FEATHERS EQUINE CENTER 6320 N HWY 74C GUTHRIE, OK 73044	20-5165544	501(C)(3)	0.	8,646.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
HORSE HAVEN OF TENNESSEE PO BOX 30393 KNOXVILLE, TN 37930	62-1791407	501(C)(3)	0.	64,970.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
HORSES' HAVEN 8257 NORTH LATSON RD HOWELL, MI 48855	38-3259872	501(C)(3)	0.	31,248.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
HOUNDHAVEN, INC. 10051 DOG PATCH LN MINNEOLA, FL 34715	59-3655448	501(C)(3)	7,472.	0.			SUPPORT FOR RESCUED ANIMALS
HOUSTON HUMANE SOCIETY 14700 ALMEDA RD HOUSTON, TX 77245	74-1340341	501(C)(3)	1,013.	1,711,774.	FMV	APPAREL, HYGIENE PRODUCTS, ANIMAL FOOD,	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS
HUMANE ANI. WELF. SOC. OF WAUKESHA COUNTY - PO BOX 834 - WAUKESHA, WI 53187	39-6108644	501(C)(3)	17,300.	0.			SUPPORT FOR RESCUED ANIMALS
HUMANE ANIMAL WELFARE SOCIETY OF WAUKESHA COUNTY - 701 NORTHVIEW RD - WAUKESHA, WI 53188	39-6108644	501(C)(3)	0.	16,538.	FMV	ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS

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HUMANE COLORADO (FKA DENVER DUMB FRIENDS LEAGUE) - 2080 S. QUEBEC ST - DENVER, CO 80231	84-0405254	501(C)(3)	0.	9,677.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
HUMANE PENNSYLVANIA 1729 N. 11TH ST READING, PA 19604	23-1384936	501(C)(3)	0.	2,078,038.	FMV	ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL	SUPPORT FOR RESCUED ANIMALS
HUMANE RESCUE ALLIANCE 71 OGLETHORPE ST NW WASHINGTON, DC 20011	53-0219724	501(C)(3)	0.	370,965.	FMV	ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
HUMANE SOCIETY OF EL PASO INC 4991 FRED WILSON AVE EL PASO, TX 79906	74-1156430	501(C)(3)	0.	16,705.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
HUMANE SOCIETY OF JEFFERSON COUNTY INC. - W6127 KIESLING RD - JEFFERSON, WI 53549	39-1022638	501(C)(3)	6,250.	73,786.	FMV	ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
HUMANE SOCIETY OF LACKAWANNA COUNTY/GRIFFIN POND ANIMAL SHELTER - 967 GRIFFIN POND RD - SOUTH ABINGTON TOWNSHIP, PA 18411	24-0831491	501(C)(3)	0.	70,280.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
HUMANE SOCIETY OF NORTH TEXAS 1840 E. LANCASTER AVE. FORT WORTH, TX 76103	75-1245911	501(C)(3)	12,010.	0.			SUPPORT FOR RESCUED ANIMALS
HUMANE SOCIETY OF NORTHWEST IOWA 607 28TH ST MILFORD, IA 51351	42-1280031	501(C)(3)	0.	97,680.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
HUMANE SOCIETY OF PIKES PEAK REGION - 610 ABBOT LN - COLORADO SPRINGS, CO 80905	84-0410111	501(C)(3)	8,100.	5,374.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS

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HUMANE SOCIETY OF PINELLAS 3040 FLORIDA 590 CLEARWATER, FL 33759	59-0781650	501(C)(3)	15,000.	0.			SUPPORT FOR RESCUED ANIMALS
HUMANE SOCIETY OF SARASOTA COUNTY 2331 15TH ST SARASOTA, FL 34237	59-6014943	501(C)(3)	5,494.	5,153.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
HUMANE SOCIETY OF SOMERSET COUNTY PO BOX 493 PRINCESS ANNE, MD 21853	52-2332574	501(C)(3)	0.	212,033.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
HUMANE SOCIETY OF SOUTH CAROLINA 405 GREENLAWN DR COLUMBIA, SC 29209	57-0407367	501(C)(3)	0.	7,659.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
HUMANE SOCIETY OF SOUTH MISSISSIPPI - 2615 25TH AVE - GULFPORT, MS 39501	64-6034439	501(C)(3)	0.	58,606.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
HUMANE SOCIETY OF SOUTHERN ARIZONA 635 WEST ROGER RD TUCSON, AZ 85705	86-0112798	501(C)(3)	0.	404,911.	FMV	ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL	SUPPORT FOR RESCUED ANIMALS
HUMANE SOCIETY OF TAMPA BAY 3607 NORTH ARMENIA AVE TAMPA, FL 33607	59-0799907	501(C)(3)	0.	47,280.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
HUMANE SOCIETY OF THE TREASURE COAST - 4100 SW LEIGHTON FARM AVE - PALM CITY, FL 34990	59-0774235	501(C)(3)	30.	30,932.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
HUMANE SOCIETY OF WESTERN MONTANA 5930 HWY 93 SOUTH MISSOULA, MT 59804	81-0290933	501(C)(3)	0.	99,649.	FMV	ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS

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HUMANE SOCIETY OF WILKES PO BOX 306 NORTH WILKESBORO, NC 28659	56-1983115	501(C)(3)	19,230.	0.			SUPPORT FOR RESCUED ANIMALS
HUMANE SOCIETY OF YUMA 4050 S. AVE 4 1/2 E YUMA, AZ 85365	86-6053617	501(C)(3)	0.	619,569.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
HUMANE WORLD FOR ANIMALS / FKA THE HUMANE SOCIETY OF THE UNITED STATES (HSUS) - 700 PROFESSIONAL DR - GAITHERSBURG, MD 20879	53-0225390	501(C)(3)	0.	14,000.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
HUMANITY HEROES 28470 WITHERSPOON PKWY VALENCIA, CA 91355	85-0503023	501(C)(3)	0.	1,001,032.	FMV	APPAREL, HYGIENE PRODUCTS, ANIMAL FOOD,	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS
HUMPHREYS COUNTY HUMANE SOCIETY 112 YOUNG RD WAVERLY, TN 37185	62-1651766	501(C)(3)	0.	11,239.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
IBERVILLE PARISH ANIMAL SHELTER & CONTROL - 59815 BAYOU RD - PLAQUEMINE, LA 70764	72-0636914	IBERVILLE PARISH	3,585.	36,645.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
IDAHO HUMANE SOCIETY 1300 S BIRD ST BOISE, ID 83709	82-0212536	501(C)(3)	1,000.	51,382.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
INTERNATIONAL BIRD RESCUE 4369 CORDELIA RD FAIRFIELD, CA 94534	94-1739027	501(C)(3)	5,600.	0.			SUPPORT FOR BIODIVERSITY & CONSERVATION
IOWA HUMANE ALLIANCE 6540 6TH ST SW CEDAR RAPIDS, IA 52404	26-1992986	501(C)(3)	0.	569,737.	FMV	ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL	SUPPORT FOR RESCUED ANIMALS

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IOWA STATE UNIVERSITY 1809 SOUTH RIVERSIDE DR AMES, IA 50011	42-6004224	501(C)(3)	0.	76,361.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
JEFFERSON PROTECTION AND ANIMAL WELFARE SERVICES (PAWS) - 2701 LAPALCO BLVD - HARVEY, LA 70058	72-6013920	JEFFERSON PARISH	4,640.	17,185.	FMV	ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
K-9 ANGELS RESCUE 9415 WINSOME LN HOUSTON, TX 77063	45-3710037	501(C)(3)	0.	23,568.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
KANAWHA-CHARLESTON HUMANE ASSOCIATION - 3906 VIRGINIA AVE - CHARLESTON, WV 25304	55-0435381	501(C)(3)	0.	186,959.	FMV	ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
KENTUCKY EQUINE HUMANE CENTER DBA KENTUCKY EQUINE ADOPTION CENTER - PO BOX 910124 - LEXINGTON, KY 40591	20-5883736	501(C)(3)	876.	11,222.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
KITSAP HUMANE SOCIETY 9167 DICKEY RD NW SILVERDALE, WA 98383	91-0728353	501(C)(3)	1,000.	1,227,655.	FMV	ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL	SUPPORT FOR RESCUED ANIMALS
LAFOURCHE PARISH ANIMAL SHELTER 934 HWY 3185 THIBODAUX, LA 70301	72-6000634	LAFOURCHE PARISH	2,170.	36,868.	FMV	ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
LAKE LOWELL ANIMAL RESCUE 12888 PHEASANT CIRCLE NAMPA, ID 83686	83-2356957	501(C)(3)	1,000.	61,190.	FMV	ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
LAKESHORE PAWS 4611 EVANS AVE VALPARAISO, IN 46383	45-1658156	501(C)(3)	5,486.	0.			SUPPORT FOR RESCUED ANIMALS

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LAST CHANCE ANIMAL RESCUE 8500 BENSVILLE RD WALDORF, MD 20603	52-2328626	501(C)(3)	0.	24,135.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
LEADER DOGS FOR THE BLIND 1039 S. ROCHESTER RD ROCHESTER HILLS, MI 48307	38-1366931	501(C)(3)	0.	124,549.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
LEAP OF FAITH EQUINE RESCUE AND SANCTUARY - 2805 MOUNT OLIVET CHURCH RD - FLEMING, GA 31309	82-2675957	501(C)(3)	0.	22,432.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
LIFELINE ANIMAL PROJECT 3180 PRESIDENTIAL DR ATLANTA, GA 30340	01-0599278	501(C)(3)	0.	23,419.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
LITTLE TRAVERSE BAY HUMANE SOCIETY 1300 W. CONWAY HARBOR SPRINGS, MI 49749	38-1384441	501(C)(3)	0.	11,439.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
LIVIN LIKE LARRY FARM SANCTUARY PO BOX 592 BRANFORD, FL 32008	92-2000694	501(C)(3)	0.	87,231.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
LONGMONT HUMANE SOCIETY 9595 NELSON RD LONGMONT, CO 80501	84-0645455	501(C)(3)	13,589.	0.			SUPPORT FOR RESCUED ANIMALS
LOS ANGELES COUNTY DEPARTMENT OF ANIMAL CARE AND CONTROL - 5898 CHERRY AVE - LONG BEACH, CA 90805	95-9000927	LOS ANGELES COUN	51.	380,797.	FMV	ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL	SUPPORT FOR RESCUED ANIMALS
LOUIE'S LEGACY ANIMAL RESCUE 4725 BOOMER RD CINCINNATI, OH 45247	27-0805279	501(C)(3)	8,261.	0.			SUPPORT FOR RESCUED ANIMALS

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LOUISIANA SPCA 1700 MARDI GRAS BLVD NEW ORLEANS, LA 70114	45-5167681	501(C)(3)	0.	254,857.	FMV	APPAREL, HYGIENE PRODUCTS, ANIMAL	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS
LUCKY DOG ANIMAL RESCUE 5159 LANGSTON BLVD ARLINGTON, VA 22207	30-0559037	501(C)(3)	42,370.	817,686.	FMV	ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL	SUPPORT FOR RESCUED ANIMALS
MADDIE'S SHELTER MEDICINE PROGRAM - CORNELL UNIVERSITY COLLEGE OF VETERINARY MED - 930 CAMPUS RD - ITHACA, NY 14853	15-0532082	501(C)(3)	0.	10,576.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
MAINE STATE SOCIETY FOR THE PROTECTION OF ANIMALS (MSSPA) - PO BOX 10 - SOUTH WINDHAM, ME 04082	01-0212545	501(C)(3)	10,000.	21,478.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
MANATEE COUNTY ANIMAL SERVICES 5718 21ST AVE. W BRADENTON, FL 34209	59-6000727	MUNICIPALITY	0.	8,286.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
MARINE MAMMAL CARE CENTER LOS ANGELES - 1536 W 25TH, STE 272 - SAN PEDRO, CA 90732	47-5249182	501(C)(3)	6,000.	0.			SUPPORT FOR BIODIVERSITY & CONSERVATION
MARTY'S PL SENIOR DOG SANCTUARY 118 ROUTE 526 ALLENTOWN, NJ 08501	45-2405702	501(C)(3)	7,409.	0.			SUPPORT FOR RESCUED ANIMALS
MARYLAND SPCA 3300 FALLS RD BALTIMORE, MD 21211	52-6001558	501(C)(3)	1,500.	251,646.	FMV	ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
MCKAMEY ANIMAL CENTER 4500 NORTH ACCESS RD CHATTANOOGA, TN 37415	01-0824858	501(C)(3)	0.	392,142.	FMV	ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL	SUPPORT FOR RESCUED ANIMALS

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METRO ANIMAL SHELTER 3140 INV DORNELL COUSETTE ST TUSCALOOSA, AL 35401	63-1120822	501(C)(3)	0.	31,240.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
METROWEST HUMANE SOCIETY PO BOX 1068 FRAMINGHAM, MA 01701	04-2600449	501(C)(3)	5,852.	0.			SUPPORT FOR RESCUED ANIMALS
MICHELSON FOUND ANIMALS FOUNDATION 3000 S ROBERTSON BLVD, STE 105 LOS ANGELES, CA 90034	20-3944602	501(C)(3)	0.	357,043.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
MICHIGAN HUMANE SOCIETY 2937 E. GRAND BLVD, STE 800 DETROIT, MI 48202	38-1358206	501(C)(3)	1,500.	7,373,951.	FMV	APPAREL, HYGIENE PRODUCTS, HOUSEHOLD	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS
MIDATLANTIC HORSE RESCUE INC PO BOX 407, CHESAPEAKE CITY CHESAPEAKE CITY, MD 21915	27-3543490	501(C)(3)	0.	32,721.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
MIDLANDS HUMANE SOCIETY 1020 RAILRD AVE COUNCIL BLUFFS, IA 51503	20-5105144	501(C)(3)	0.	38,965.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
MILITARY VETERAN MISSON 18501 NW 22 COURT MIAMI GARDENS, FL 33056	26-1295139	501(C)(3)	0.	22,879.	FMV	APPAREL, HYGIENE PRODUCTS	SUPPORT FOR HUNGER & POVERTY
MINN-KOTA PAWS 2125 1ST AVE S FARGO, ND 58103	30-0245020	501(C)(3)	0.	588,669.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
MOHAWK HUDSON HUMANE SOCIETY 3 OAKLAND AVE, MENANDS MENANDS, NY 12204	14-1338459	501(C)(3)	0.	24,389.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS

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MUNCIE ANIMAL CARE & SERVICES 901 W. RIGGIN RD MUNCIE, IN 47303	35-6001127	MUNICIPALITY	4,000.	6,304.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
MY PIT BULL IS FAMILY 4027 ALDRICH AVE N MINNEAPOLIS, MN 55412	47-2264053	501(C)(3)	2,000.	58,000.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
NAPERVILLE AREA HUMANE SOCIETY 1620 W DIEHL RD NAPERVILLE, IL 60563	36-3040480	501(C)(3)	0.	7,889.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
NASHVILLE HUMANE ASSOCIATION 213 OCEOLA AVE NASHVILLE, TN 37209	62-0672999	501(C)(3)	0.	160,868.	FMV	APPAREL, HYGIENE PRODUCTS, ANIMAL FOOD,	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS
NATIONAL AIREDALE RESCUE, INC. 8524 MAGGIE AVE. LAS VEGAS, NV 89143	27-0054363	501(C)(3)	2,000.	3,094.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
NATIONAL MILL DOG RESCUE 5335 J D JOHNSON RD PEYTON, CO 80831	26-0574783	501(C)(3)	7,108.	0.			SUPPORT FOR RESCUED ANIMALS
NETWORK FOR ENDANGERED SEA TURTLES, INC. - PO BOX 1073 - KITTY HAWK, NC 27949	56-1956901	501(C)(3)	5,740.	0.			SUPPORT FOR BIODIVERSITY & CONSERVATION
NEVADA SPCA 5375 PROCYON STE 108 LAS VEGAS, NV 89118	88-0187383	501(C)(3)	0.	1,058,873.	FMV	ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL	SUPPORT FOR RESCUED ANIMALS
NEW BEGINNINGS THOROUGHBREDS 309 WERTSVILLE RD RINGOES, NJ 08551	46-4909403	501(C)(3)	0.	8,416.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS

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NEW ENGLAND EQUINE RESCUE (NEER) NORTH, INC - 52 ASH ST - WEST NEWBURY, MA 01985	45-4007146	501(C)(3)	0.	5,254.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
NORTH CAROLINA VETERINARY MEDICAL ASSOCIATION - 1611 JONES FRANKLIN RD, STE 108 - RALEIGH, NC 27606	11-3779599	501(C)(3)	0.	18,447.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
OC ANIMAL CARE 1630 VICTORY RD TUSTIN, CA 92782	95-6000928	MUNICIPALITY	0.	15,578.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
OPERATION KINDNESS 3201 EARHART DR CARROLLTON, TX 75006	75-1553350	501(C)(3)	0.	13,816.	FMV	ANIMAL FOOD	SUPPORT FOR RESCUED ANIMALS
OUR BIG FAT CARIBBEAN RESCUE INC PO BOX 1377 VIEQUES, PR 00765	66-0871157	501(C)(3)	0.	67,013.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
OZZIE ALBIES FOUNDATION 2053 BRIGHTLEAF WAY MARIETTA, GA 30060	87-2692326	501(C)(3)	0.	52,816.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
PALM VALLEY ANIMAL SOCIETY PO BOX 1829 EDINBURG, TX 78540	74-1819910	501(C)(3)	450.	1,239,442.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
PASEDENA HUMANE SOCIETY 361 S. RAYMOND AVE. PASADENA, CA 91105	95-1643344	501(C)(3)	5,000.	302,870.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
PATH LOS ANGELES 340 N MADISON AVE LOS ANGELES, CA 90004	95-3950196	501(C)(3)	0.	36,900.	FMV	APPAREL, HYGIENE PRODUCTS, ANIMAL FOOD,	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS

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PATTY BAKER HUMANE SOCIETY NAPLES 370 AIRPORT-PULLING RD NAPLES, FL 34104	59-1033966	501(C)(3)	0.	24,484.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
PAWS ATLANTA 5287 COVINGTON HWY DECATUR, GA 30035	58-6074088	501(C)(3)	2,500.	26,230.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
PAWS HEARTS AND HANDS OF CANDLER COUNTY, INC. - PO BOX 573 - METTER, GA 30439	82-4680317	501(C)(3)	0.	56,136.	FMV	ANIMAL FOOD	SUPPORT FOR RESCUED ANIMALS
PAWS KANSAS CITY 7833 WORNALL RD KANSAS CITY, MO 64114	27-1087517	501(C)(3)	0.	1,155,563.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
PEARL RIVER COUNTY SPCA 1700 PALESTINE RD, PO BOX 191 PICAYUNE, MS 39466	64-0798887	501(C)(3)	537.	1,024,831.	FMV	ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL	SUPPORT FOR RESCUED ANIMALS
PENINSULA SPCA 523 J CLYDE MORRIS BLVD NEWPORT NEWS, VA 23601	54-0676370	501(C)(3)	5,903.	0.			SUPPORT FOR RESCUED ANIMALS
PENNSYLVANIA SPCA 350 EAST ERIE AVE PHILADELPHIA, PA 19134	23-1352269	501(C)(3)	14,000.	672,954.	FMV	ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL	SUPPORT FOR RESCUED ANIMALS
PEOPLE FOR PETS 2312 HWY BLVD SPENCER, IA 51301	42-1475298	501(C)(3)	5,750.	0.			SUPPORT FOR RESCUED ANIMALS
PEORIA COUNTY ANIMAL PROTECTION SERVICES - 2600 NORTHEAST PERRY AVE - PEORIA, IL 61603	37-6001763	MUNICIPALITY	0.	29,479.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS

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PET ANGEL FOUNDATION 3800 E STONEHILL WAY KINGMAN, AZ 86401	88-2632227	501(C)(3)	0.	39,947.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
PET ANIMAL WELFARE SOCIETY OF CT 504 MAIN AVE NORWALK, CT 06851	06-6067445	501(C)(3)	5,422.	0.			SUPPORT FOR RESCUED ANIMALS
PET FOOD PANTRY OF EASTERN NORTH CAROLINA - PO BOX 2492 - GREENVILLE, NC 27836	47-1475565	501(C)(3)	0.	69,994.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
PET ORPHANS MIAMI 17990 SW 248TH ST HOMESTEAD, FL 33031	47-5192895	501(C)(3)	10,000.	0.			SUPPORT FOR RESCUED ANIMALS
PETCONNECT RESCUE PO BOX 60714 POTOMAC, MD 20859	55-0857806	501(C)(3)	14,319.	0.			SUPPORT FOR RESCUED ANIMALS
PETS CLINIC 3001 CENTRAL FREEWAY WICHITA FALLS, TX 76306	68-0648159	501(C)(3)	0.	13,090.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
PETS LIFELINE 19686 EIGHTH ST EAST SONOMA, CA 95476	94-2851279	501(C)(3)	0.	6,726.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
PROJECT HEAL INC 10348 ELDERBERRY DR S JACKSONVILLE, FL 32257	46-4381099	501(C)(3)	0.	118,951.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
PUPPY KITTY NY CITY INC 6329 75TH ST MIDDLE VILLAGE, NY 11379	83-1059040	501(C)(3)	0.	1,001,712.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS

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PURRFECT PALS CAT SANCTUARY & ADOPTION CENTERS - 230 MCRAE RD NORTHEAST - ARLINGTON, WA 98223	94-3127488	501(C)(3)	3,500.	5,653.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
RAINBOW'S EDGE ANIMAL REFUGE 697 PINEHAVEN DR TILLMAN, SC 29943	30-0008001	501(C)(3)	0.	944,160.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
RAMAPO-BERGEN ANIMAL REFUGE, INC. 2 SHELTER LN OAKLAND, NJ 07436	22-6094179	501(C)(3)	2,337.	5,857.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
REAL DOG RESCUE 818 WYCKOFF AVE MAHWAH, NJ 07430	81-4743943	501(C)(3)	5,450.	66,942.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
RED FEATHER EQUINE SANCTUARY 5662 OLD RURAL HALL RD WINSTON-SALEM, NC 27105	85-3666789	501(C)(3)	0.	26,829.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
RERUN, INC. 236A WATERS RD EAST GREENBUSH, NY 12061	61-1336379	501(C)(3)	0.	26,894.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
RESCUE PACK CHICAGO 1306 W NORTHWEST HWY PALATINE, IL 60067	81-1738093	501(C)(3)	0.	5,686,801.	FMV	APPAREL, HYGIENE PRODUCTS, ANIMAL FOOD,	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS
RESCUE PETS OF FLORIDA 4220 WATERVILLE AVE WESLEY CHAPEL, FL 33543	46-2336168	501(C)(3)	0.	60,293.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
REZDAWG RESCUE, INC PO BOX 448 LAFAYETTE, CO 80026	46-1412023	501(C)(3)	2,963.	1,761,387.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS

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RHODE ISLAND SPCA 155 PLAN WAY WARWICK, RI 02886	05-0262716	501(C)(3)	0.	6,209.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
RICHMOND SPCA 2519 HERMITAGE RD RICHMOND, VA 23220	54-0506328	501(C)(3)	0.	7,903.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
RISING STARR HORSE RESCUE CORP 93 SILVER SPRING RD WILTON, CT 06987	47-4027991	501(C)(3)	0.	50,468.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
RUTH STEINERT MEMORIAL SPCA 18 WERTZ DR PINE GROVE, PA 17963	23-2834652	501(C)(3)	0.	50,444.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
RUTHLESS KINDNESS 10355 BURGANDY WAY SEBASTOPOL, CA 95472	84-2838142	501(C)(3)	0.	6,800.	FMV	ANIMAL FOOD, ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
RUTLAND COUNTY HUMANE SOCIETY 765 STEVENS RD PITTSFORD, VT 05763	03-6006930	501(C)(3)	7,500.	0.			SUPPORT FOR RESCUED ANIMALS
RVR HORSE RESCUE INC 6810 229TH ST E BRADENTON, FL 34211	45-1536701	501(C)(3)	0.	9,352.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
SAFE BERKS 255 CHESTNUT ST READING, PA 19602	23-2087191	501(C)(3)	22,832.	0.			SUPPORT FOR RESCUED ANIMALS
SAFE PET RESCUE 6101 A1A SOUTH ST. AUGUSTINE, FL 32080	26-3307436	501(C)(3)	0.	12,150.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS

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SAN DIEGO HUMANE SOCIETY 5500 GAINES ST SAN DIEGO, CA 92110	95-1661688	501(C)(3)	0.	1,761,365.	FMV	ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL	SUPPORT FOR RESCUED ANIMALS
SAN JUAN ANIMAL LEAGUE PO BOX 142 FARMINGTON, NM 87499	23-7448839	501(C)(3)	0.	59,475.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
SAN JUAN CAPISTRANO EQUESTRIAN COALITION - 28382 PASEO ESTABLO - SAN JUAN, CA 92675	65-1189119	501(C)(3)	0.	20,118.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
SANCTUARY AT MAPLE HILL FARMS, INC. - 464 MAPLE HILL RD - AUBURN, ME 04210	47-3302533	501(C)(3)	0.	9,352.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
SAVE A PET RESCUE ADOPTION AND TRANSPORT - PO BOX 9323 - DOTHAN, AL 36304	20-1285614	501(C)(3)	12,616.	7,880.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
SAVE RESCUE COALITION PO BOX 790 SANTA FE, TX 77517	45-4982602	501(C)(3)	0.	16,359.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
SAVE ROCKY THE GREAT DANE RESCUE & REHAB - PO BOX 975 - BULLARD, TX 75757	47-0980038	501(C)(3)	9,400.	0.			SUPPORT FOR RESCUED ANIMALS
SEATTLE HOMELESS OUTREACH 12345 LAKE CITY WAY NE, #177 SEATTLE, WA 98125	82-2035012	501(C)(3)	0.	17,677.	FMV	APPAREL, HYGIENE PRODUCTS, ANIMAL FOOD	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS
SECOND CHANCE ANIMAL SERVICES 111 YOUNG RD EAST BROOKFIELD, MA 01515	04-3490671	501(C)(3)	1,530.	4,887.		ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS

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SECOND CHANCE RESCUE, INC (NY) PO BOX 570701 WHITESTONE, NY 11357	26-4835303	501(C)(3)	29,380.	0.			SUPPORT FOR RESCUED ANIMALS
SECOND CHANCE THOROUGHBREDS, INC. 121 DAWSON HILL RD SPENCER, NY 14883	46-1182639	501(C)(3)	40.	9,352.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
SECOND CHANCES EQUINE RESCUE 7663 GA HWY 196 W HINESVILLE, GA 31313	46-3474088	501(C)(3)	0.	10,630.	FMV	ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
SECOND HARVEST FOOD BANK OF GREATER NEW ORLEANS AND ACADIANA - 700 EDWARDS AVE - NEW ORLEANS, LA 70123	72-0956468	501(C)(3)	0.	16,200.	FMV	APPAREL, HYGIENE PRODUCTS, ANIMAL FOOD,	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS
SECOND HARVEST OF SOUTH GEORGIA 1411 HARBIN CIRCLE VALDOSTA, GA 31601	58-2208545	501(C)(3)	0.	72,998.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
SECOND WIND THOROUGHBRED PROJECT 3762 BETHUNE HWY BISHOPVILLE, SC 29010	47-3445193	501(C)(3)	0.	50,316.	FMV	ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
SERENITY SAVIORS, INC. 7281 HWY 48 RUSSELLVILLE, AL 35654	81-1478827	501(C)(3)	0.	37,406.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
SHELTER OUTREACH SERVICES 78 DODGE RD ITHACA, NY 14850	06-1697719	501(C)(3)	0.	20,076.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
SHINE A LIGHT 2330 HIGHLAND DR, STE 205 LAS VEGAS, NV 89102	85-1777495	501(C)(3)	0.	98,190.	FMV	APPAREL, HYGIENE PRODUCTS, ANIMAL FOOD	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS

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SHUTT'ER DOWN RANCH 4455 COUNTY RD 702 FARMERSVILLE, TX 75442	81-4633428	501(C)(3)	0.	4,083,323.	FMV	ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL	SUPPORT FOR RESCUED ANIMALS
SIMPLY CATS 2833 S VICTORY VIEW WAY BOISE, ID 83709	82-0445263	501(C)(3)	27,158.	0.			SUPPORT FOR RESCUED ANIMALS
SKIP PROGRAM 243 RIDGEWOOD DR MILLERSBURG, PA 17061	27-1897051	501(C)(3)	0.	684,692.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
SNIP WV 1470 EARL L CORE RD MORGANTOWN, WV 26505	84-4347951	501(C)(3)	0.	10,490.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
SOJOURNER CENTER 2330 E FILLMORE ST PHOENIX, AZ 85006	94-2465081	501(C)(3)	0.	6,186.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
SOLES4SOULS, INC. PO BOX 429 OLD HICKORY, TN 37138	20-4023482	501(C)(3)	8,859.	0.			SUPPORT FOR HUNGER & POVERTY
SONOMA COUNTY CHANGE PROGRAM 3810 FOWLER RD WEST SACRAMENTO, CA 95691	26-2135318	501(C)(3)	0.	77,566.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
SOS RESCUE 2929 INGLESIDE AVE MACON , GA 31204	82-0989311	501(C)(3)	0.	1,183,533.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
SOUTH FLORIDA WILDLIFE CENTER INC 3200 SW 4TH AVE FORT LAUDEDALE, FL 33315	23-7086391	501(C)(3)	9,000.	0.			SUPPORT FOR BIODIVERSITY & CONSERVATION

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SOUTH GEORGIA EQUINE RESCUE INC 812 MINERAL SPRINGS RD WAYNESVILLE, GA 31566	83-4670651	501(C)(3)	0.	40,342.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
SOUTH JERSEY REGIONAL ANIMAL SHELTER - 1244 N DELSEA DR - VINELAND, NJ 08360	21-0677474	501(C)(3)	0.	19,609.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
SOUTHERN PINES ANIMAL SHELTER PO BOX 2021 HATTIESBURG, MS 39403	64-0514796	501(C)(3)	0.	25,622.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
SOUTHERN SOULS RESCUE, INC. 3902 ADAMS CHAPEL RD HARLEM, GA 30814	45-5465934	501(C)(3)	0.	145,631.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
SPCA FLORIDA 5850 BRANNEN RD S LAKELAND, FL 33813	59-1939655	501(C)(3)	0.	498,280.	FMV	ANIMAL FOOD, ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
SPCA OF BRAZORIA COUNTY 141 CANNA LN LAKE JACKSON, TX 77566	23-7404451	501(C)(3)	43.	132,228.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
SPCA OF WAKE COUNTY 200 PETFINDER LN RALEIGH, NC 27603	56-0891732	501(C)(3)	0.	40,079.	FMV	ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
SPCA OF WESTCHESTER 590 NORTH STATE RD BRIARCLIFF MANOR, NY 10510	13-1740069	501(C)(3)	55.	55,464.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
SPCA TAMPA BAY 9099 130TH AVE NORTH LARGO, FL 33773	59-0715928	501(C)(3)	0.	53,213.	FMV	ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SPERANZA ANIMAL RESCUE 1216 BRANDT RD MECHANICSBURG, PA 17055	45-5131283	501(C)(3)	4,000.	35,784.	FMV	ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
SPOKANIMAL CARE 710 N. NAPA ST SPOKANE, WA 99202	91-1223929	501(C)(3)	1,000.	7,883.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
ST CHARLES PARISH ANIMAL SHELTER PO BOX 302 HAHNVILLE, LA 70057	72-6001208	ST. CHARLES PARI	494.	86,283.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
ST HUBERT'S ANIMAL WELFARE CENTER 575 WOODLAND AVE MADISON, NJ 07940	53-0219724	501(C)(3)	90,950.	231,277.	FMV	ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
ST MARTIN PARISH ANIMAL SERVICES 1004 INDUSTRIAL PARK RD SAINT MARTINVILLE, LA 70582	72-6001273	ST. MARTIN PARIS	1,302.	55,402.	FMV	ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
ST TAMMANY PARISH DEPARTMENT OF ANIMAL SERVICES - 31078 HWY 36 - LACOMBE, LA 70445	72-6001304	ST. TAMMANY PARI	0.	25,999.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
STAFFORD ANIMAL SHELTER 3 BUSINESS PARK RD LIVINGSTON, MT 59047	36-3432468	501(C)(3)	0.	118,560.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
STRAY DOG RANCH 585 CARNEYS BRANCH TRL SE BOLIVIA, NC 28422	46-3532760	501(C)(3)	0.	719,426.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
STRAY RESCUE OF ST LOUIS 2320 PINE ST ST. LOUIS, MO 63103	43-1823801	501(C)(3)	8,500.	7,590.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STUDENTS FOR INTERNATIONAL VETERINARY OPPORTUNITIES (SIVO) - 2015 SW 16TH AVE - GAINESVILLE, FL 32608	47-5263165	501(C)(3)	0.	68,610.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
SUMMIT COUNTY ANIMAL CONTROL 250 OPPORTUNITY PKWY AKRON, OH 44307	34-6002767	MUNICIPALITY	0.	570,951.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
SUWANNEE PAWS, INC. PO DRAWER 409 O'BRIEN, FL 32071	46-4923115	501(C)(3)	0.	36,358.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
TAILS OF LOVE RESCUE 769 CLUB STRAIGHT LN SHOW LOW, AZ 85901	84-3701877	501(C)(3)	0.	38,875.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
TAKE PAWS RESCUE 2730 BANKS ST NEW ORLEANS, LA 70019	47-4269005	501(C)(3)	0.	96,679.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
TATTERED TAIL, INC.DBA ST PAWS THRIFT STORE - 2884 STONEWALL HEIGHTS - COLORADO SPRINGS, CO 80909	27-1133755	501(C)(3)	0.	508,039.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
TERREBONNE PARISH ANIMAL SHELTER 100 GOVERNMENT ST GRAY, LA 70359	72-6001390	TERREBONNE PARIS	1,188.	21,858.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
TEXAS A&M UNIVERSITY COLLEGE OF VETERINARY MEDICINE & BIOMEDICAL SCIENCES - 408 RAYMOND STOTZER PARKWAY - COLLEGE STATION, TX	74-2245072	501(C)(3)	0.	172,610.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
TEXAS VETERINARY MEDICAL FOUNDATION - 8104 EXCHANGE DR - AUSTIN, TX 78754	74-1983485	501(C)(3)	0.	133,096.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE ANIMAL DEFENSE LEAGUE OF TEXAS 11300 NACOGDOCHES RD SAN ANTONIO, TX 78217	74-6002033	501(C)(3)	0.	30,802.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
THE BRIDGE CLINIC 2600 SOUTH EAGLE RD NEWTOWN, PA 18940	46-1158857	501(C)(3)	0.	1,109,539.	FMV	ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL	SUPPORT FOR RESCUED ANIMALS
THE CAT HOUSE ON THE KINGS 7120 SOUTH KINGS RIVER RD PARLIER, CA 93648	27-0015288	501(C)(3)	74,321.	8,109.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
THE FOOD BANK OF CENTRAL AND EASTERN NORTH CAROLINA - 1924 CAPITAL BLVD - RALEIGH, NC 27604	56-1283426	501(C)(3)	0.	51,070.	FMV	APPAREL, HYGIENE PRODUCTS	SUPPORT FOR HUNGER & POVERTY
THE GOOD SHEPHERD HUMANE SOCIETY 6486 HWY 62 WEST EUREKA SPRINGS, AR 72632	71-0458910	501(C)(3)	0.	13,314.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
THE HUMANE SOCIETY OF GREATER KANSAS CITY - 5445 PARALLEL PARKWAY - KANSAS CITY, KS 66104	48-0581965	501(C)(3)	0.	58,977.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
THE HUMANE SOCIETY OF HOBART. INC. 2054 E. STATE RD 130 HOBART, IN 46342	35-0989082	501(C)(3)	11,954.	0.			SUPPORT FOR RESCUED ANIMALS
THE INNER PUP 465 LOWERLINE NEW ORLEANS, LA 70118	47-1728816	501(C)(3)	0.	27,109.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
THE LAST RESORT ANIMAL RESCUE 441 MORSETOWN RD WEST MILFORD, NJ 07480	26-2985185	501(C)(3)	3,500.	4,196.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE PET COMPASSION CENTERS 3780 HOMEWOOD RD MEMPHIS, TN 38118	45-3972342	501(C)(3)	0.	622,731.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
THE PET PROJECT FOR PETS INC 2200 NW 9TH AVE WILTON MANORS, FL 33311	37-1440098	501(C)(3)	0.	5,004,893.	FMV	ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL	SUPPORT FOR RESCUED ANIMALS
THE SALVATION ARMY 30840 HAWTHORNE BLVD RANCHO PALOS VERDES, CA 90275	94-1156347	501(C)(3)	0.	93,924.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
THE SANCTUARY AT RED BELL RUN 385 BLACKWOOD RD COLUMBUS, NC 28722	82-3733987	501(C)(3)	0.	34,263.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
THE SATO PROJECT 130 WATER ST BROOKLYN, NY 11201	45-3743534	501(C)(3)	0.	78,661.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
THE SECRETARIAT CENTER 4155 WALT ROBERTSON RD LEXINGTON, KY 40511	45-3536475	501(C)(3)	0.	28,929.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
THE SPARTANBURG HUMANE SOCIETY 150 DEXTER RD SPARTANBURG, SC 29303	57-0481019	501(C)(3)	0.	6,726.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
THE SPAYED CLUB 13 TALL TREE CIRCLE BROMALL, PA 19008	23-2822590	501(C)(3)	0.	44,199.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
THE ST DOG COALITION 305 W MAGNOLIA ST #277 FORT COLLINS, CO 80521	81-0793989	501(C)(3)	0.	58,361.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THIS OLD HORSE 19025 COATES BLVD HASTINGS, MN 55033	45-4234611	501(C)(3)	0.	15,943.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
THOROUGHBRED RETIREMENT FOUNDATION 112 SPRING ST, STE 109 SARATOGA SPRINGS, NY 12866	13-3132741	501(C)(3)	0.	75,431.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
TIFT ANIMAL RESCUE INC 2207 BELMONT AVE TIFTON, GA 31794	83-0771248	501(C)(3)	0.	42,009.	FMV	APPAREL, HYGIENE PRODUCTS, ANIMAL	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS
TIGGERTOWN 8430 EAST BRAINERD RD CHATTANOOGA, TN 37421	81-3743659	501(C)(3)	3,745.	1,980,140.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
TNR RIVERSIDE 8428 WILLIAMSBURG PL RIVERSIDE, CA 92504	30-0880247	501(C)(3)	0.	842,323.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
TULSA DAY CENTER, INC. 415 WEST ARCHER, TULSA74103 TULSA, OK 74103	73-1557819	501(C)(3)	0.	7,667.	FMV	APPAREL, HYGIENE PRODUCTS, ANIMAL FOOD	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS
TULSA SPCA PO BOX 581898 TULSA, OK 74158	73-0608144	501(C)(3)	12,121.	0.			SUPPORT FOR RESCUED ANIMALS
TWO LEGS FOUR PAWS, INC. 10901 S.W. 59TH ST MUSTANG, OK 73064	84-2345729	501(C)(3)	0.	2,756,868.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
UNBRIDLED THOROUGHBRED FOUNDATION (DBA UNBRIDLED SANCTUARY) - PO BOX 122, 11 WOOD LN - GREENVILLE, NY 12083	77-0664331	501(C)(3)	0.	11,222.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNDERDOG ANIMAL RESCUE & REHAB 4561 SUNNY ACRES LN MOAB, UT 84532	82-3156476	501(C)(3)	3,411.	65,125.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
UNITED ANIMAL FRIENDS PO BOX 11133 PRESCOTT, AZ 86304	20-0360727	501(C)(3)	0.	165,310.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
UNITED PET FUND 11336 TAMARCO DR BLUE ASH, OH 45242	27-2582105	501(C)(3)	0.	4,468,704.	FMV	APPAREL, HYGIENE PRODUCTS, HOUSEHOLD	SUPPORT FOR HUNGER & POVERTY, RESCUED ANIMALS
UNIVERSITY OF MINNESOTA COMMUNITY MEDICINE - 1352 BOYD AVE - SAINT PAUL, MN 55108	41-6007513	MUNICIPALITY	0.	15,381.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
UTAH VALLEY ANIMAL RESCUE 5182 W 6300 S SPANISH FORK, UT 84660	47-1264869	501(C)(3)	0.	462,219.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
VETERINARIANS FOR PUERTO RICO, CORP - CALLE PARANA 1575 - SAN JUAN, PR 00926	82-3040280	501(C)(3)	0.	140,431.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
WAGS AND WHISKERS PET RESCUE 2156 PILLSBURY RD #155 CHICO, CA 95926	47-4727620	501(C)(3)	0.	3,483,149.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
WALTON COUNTY ANIMAL SERVICES 365 TRIPLE G RD DEFUNIAK SPRINGS, FL 32433	59-6000897	MUNICIPALITY	0.	15,987.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
WARRIOR CANINE CONNECTION 14934 SCHAEFFER RD BOYDS, MD 20841	45-2981579	501(C)(3)	0.	61,773.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WASHINGTON COUNTY HUMANE SOCIETY 3650 STATE RD 60 SLINGER, WI 53086	23-7009054	501(C)(3)	8,300.	8,284.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
WASHINGTON COUNTY JOHNSON CITY ANIMAL SHELTER - 3411 NORTH ROAN ST - JOHNSON CITY, TN 37601	58-1661479	501(C)(3)	0.	71,546.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
WAYSIDE WAIFS 3901 MARTHA TRUMAN RD KANSAS CITY, MO 64137	44-0605374	501(C)(3)	15,000.	18,940.	FMV	ANIMAL PHARMACEUTICALS	SUPPORT FOR RESCUED ANIMALS
WEST PALM BEACH VA HEALTHCARE SYSTEM - 7305 N MILITARY TRAIL - WEST PALM BEACH, FL 33410	59-3275434	GOVT.	0.	5,015.	FMV	ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
WESTERN NORTH CAROLINA VA HEALTH CARE SYSTEM DBA CHARLES GEORGE VA MEDICAL CENTE - 1100 TUNNEL RD - ASHEVILLE, NC 28805	56-1853237	MUNICIPALITY	0.	36,770.	FMV	APPAREL, HYGIENE PRODUCTS	SUPPORT FOR HUNGER & POVERTY
WETLANDS AND WILDLIFE CARE CENTER 21900 PACIFIC COAST HWY HUNTINGTON BEACH, CA 92646	33-0969297	501(C)(3)	16,600.	0.			SUPPORT FOR BIODIVERSITY & CONSERVATION
WHITE KISSES GREAT DANE RESCUE 6013 FM 2378 LUBBOCK, TX 79407	47-2111892	501(C)(3)	0.	1,119,148.	FMV	ANIMAL FOOD, ANIMAL PRODUCTS	SUPPORT FOR RESCUED ANIMALS
WILD FOR LIFE CTR FOR REHAB. OF WILDLIFE - 33 POSSUM TROT - ASHEVILLE, NC 28806	56-2165782	501(C)(3)	7,250.	0.			SUPPORT FOR BIODIVERSITY & CONSERVATION
YMCA OF WESTERN NORTH CAROLINA 40 N. MERRIMON AVE, STE 309 ASHEVILLE, NC 28804	56-0530013	501(C)(3)	0.	94,286.	FMV	APPAREL, HYGIENE PRODUCTS	SUPPORT FOR HUNGER & POVERTY

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SUPPORT FOR PEOPLE AND RESCUED ANIMALS	15200	0.	6,692,662.	FMV	APPAREL, HYGIENE PRODUCTS, HOUSEHOLD PRODUCTS, ANIMAL FOOD, ANIMAL PRODUCTS

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

PART I, LINE 2:
EACH NON-PROFIT THAT RECEIVES GRANTS FROM GREATER GOOD CHARITIES IS REQUIRED TO SUPPLY PROOF OF THEIR NON-PROFIT STATUS PRIOR TO RECEIVING FUNDS. THEY MUST ALSO SIGN A MEMO OF UNDERSTANDING THAT OUTLINES OUR INTENTIONS FOR USE OF FUNDS AND THAT THEY AGREE TO USE THE FUNDS AS SPECIFIED. THROUGHOUT THE YEAR, WE REQUIRE REPORTS FROM EACH CHARITY THAT RECAPS HOW FUNDS WERE USED. IF FUNDS ARE NOT USED PROPERLY OR DOCUMENTATION FOR HOW FUNDS WERE USED IS NOT PROVIDED, FUTURE FUNDS CAN BE WITHHELD. WHEN POSSIBLE ACTUAL SITE VISITS ARE CONDUCTED TO SEE ACTUAL EVIDENCE OF THE USE OF FUNDS.

PART II, LINE 1, COLUMN (G):
NAME OF ORGANIZATION OR GOVERNMENT: ARIZONA ANIMAL WELFARE LEAGUE
(G) DESCRIPTION OF NON-CASH ASSISTANCE: ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: ASHEVILLE HUMANE SOCIETY
(G) DESCRIPTION OF NON-CASH ASSISTANCE: APPAREL, HYGIENE PRODUCTS,

Part IV Supplemental Information

ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: ASSOCIATED HUMANE SOCIETIES
(G) DESCRIPTION OF NON-CASH ASSISTANCE: ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: ATLANTA HUMANE SOCIETY
(G) DESCRIPTION OF NON-CASH ASSISTANCE: ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: BUCKS COUNTY HUMAN SERVICES HUB
(G) DESCRIPTION OF NON-CASH ASSISTANCE: ANIMAL FOOD, ANIMAL PRODUCTS, HOUSEHOLD PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: BUTTE HUMANE SOCIETY
(G) DESCRIPTION OF NON-CASH ASSISTANCE: APPAREL, HYGIENE PRODUCTS, ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: COPE PREPAREDNESS
(G) DESCRIPTION OF NON-CASH ASSISTANCE: APPAREL, HYGIENE PRODUCTS, HOUSEHOLD PRODUCTS, ANIMAL FOOD, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: DUMAS GERMAN SHEPHERD RESCUE
(G) DESCRIPTION OF NON-CASH ASSISTANCE: APPAREL, HYGIENE PRODUCTS, ANIMAL FOOD, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: EL PASO COMMUNITY FOUNDATION
(G) DESCRIPTION OF NON-CASH ASSISTANCE: APPAREL, HYGIENE PRODUCTS, ANIMAL FOOD, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: FEEDING TAMPA BAY
(G) DESCRIPTION OF NON-CASH ASSISTANCE: APPAREL, HYGIENE PRODUCTS, HOUSEHOLD PRODUCTS, ANIMAL FOOD, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: FIX WEST TEXAS
(G) DESCRIPTION OF NON-CASH ASSISTANCE: ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: GATEWAY PET GUARDIANS
(G) DESCRIPTION OF NON-CASH ASSISTANCE: ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: GREATER BIRMINGHAM HUMANE SOCIETY
(G) DESCRIPTION OF NON-CASH ASSISTANCE: ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: HARBOR HUMANE SOCIETY
(G) DESCRIPTION OF NON-CASH ASSISTANCE: ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: HEARTS ALIVE VILLAGE
(G) DESCRIPTION OF NON-CASH ASSISTANCE: ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: HENRY'S HOUSE FERAL COMMUNITY
(G) DESCRIPTION OF NON-CASH ASSISTANCE: APPAREL, HYGIENE PRODUCTS,

Part IV Supplemental Information

HOUSEHOLD PRODUCTS, ANIMAL FOOD, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: HOUSTON HUMANE SOCIETY
(G) DESCRIPTION OF NON-CASH ASSISTANCE: APPAREL, HYGIENE PRODUCTS,
ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: HUMANE PENNSYLVANIA
(G) DESCRIPTION OF NON-CASH ASSISTANCE: ANIMAL FOOD, ANIMAL
PHARMACEUTICALS, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: HUMANE SOCIETY OF SOUTHERN ARIZONA
(G) DESCRIPTION OF NON-CASH ASSISTANCE: ANIMAL FOOD, ANIMAL
PHARMACEUTICALS, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: HUMANITY HEROES
(G) DESCRIPTION OF NON-CASH ASSISTANCE: APPAREL, HYGIENE PRODUCTS,
ANIMAL FOOD, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: IOWA HUMANE ALLIANCE
(G) DESCRIPTION OF NON-CASH ASSISTANCE: ANIMAL FOOD, ANIMAL
PHARMACEUTICALS, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: KITSAP HUMANE SOCIETY
(G) DESCRIPTION OF NON-CASH ASSISTANCE: ANIMAL FOOD, ANIMAL
PHARMACEUTICALS, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT:
LOS ANGELES COUNTY DEPARTMENT OF ANIMAL CARE AND CONTROL
(G) DESCRIPTION OF NON-CASH ASSISTANCE: ANIMAL FOOD, ANIMAL
PHARMACEUTICALS, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: LOUISIANA SPCA
(G) DESCRIPTION OF NON-CASH ASSISTANCE: APPAREL, HYGIENE PRODUCTS,
ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: LUCKY DOG ANIMAL RESCUE
(G) DESCRIPTION OF NON-CASH ASSISTANCE: ANIMAL FOOD, ANIMAL
PHARMACEUTICALS, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: MCKAMEY ANIMAL CENTER
(G) DESCRIPTION OF NON-CASH ASSISTANCE: ANIMAL FOOD, ANIMAL
PHARMACEUTICALS, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: MICHIGAN HUMANE SOCIETY
(G) DESCRIPTION OF NON-CASH ASSISTANCE: APPAREL, HYGIENE PRODUCTS,
HOUSEHOLD PRODUCTS, ANIMAL FOOD, ANIMAL PHARMACEUTICA

NAME OF ORGANIZATION OR GOVERNMENT: NASHVILLE HUMANE ASSOCIATION
(G) DESCRIPTION OF NON-CASH ASSISTANCE: APPAREL, HYGIENE PRODUCTS,
ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: NEVADA SPCA
(G) DESCRIPTION OF NON-CASH ASSISTANCE: ANIMAL FOOD, ANIMAL
PHARMACEUTICALS, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: PATH LOS ANGELES

Part IV Supplemental Information

(G) DESCRIPTION OF NON-CASH ASSISTANCE: APPAREL, HYGIENE PRODUCTS, ANIMAL FOOD, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: PEARL RIVER COUNTY SPCA
(G) DESCRIPTION OF NON-CASH ASSISTANCE: ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: PENNSYLVANIA SPCA
(G) DESCRIPTION OF NON-CASH ASSISTANCE: ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: RESCUE PACK CHICAGO
(G) DESCRIPTION OF NON-CASH ASSISTANCE: APPAREL, HYGIENE PRODUCTS, ANIMAL FOOD, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: SAN DIEGO HUMANE SOCIETY
(G) DESCRIPTION OF NON-CASH ASSISTANCE: ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT:
SECOND HARVEST FOOD BANK OF GREATER NEW ORLEANS AND ACADIANA
(G) DESCRIPTION OF NON-CASH ASSISTANCE: APPAREL, HYGIENE PRODUCTS, ANIMAL FOOD, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: SHUTT'ER DOWN RANCH
(G) DESCRIPTION OF NON-CASH ASSISTANCE: ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: THE BRIDGE CLINIC
(G) DESCRIPTION OF NON-CASH ASSISTANCE: ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: THE PET PROJECT FOR PETS INC
(G) DESCRIPTION OF NON-CASH ASSISTANCE: ANIMAL FOOD, ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: TIFT ANIMAL RESCUE INC
(G) DESCRIPTION OF NON-CASH ASSISTANCE: APPAREL, HYGIENE PRODUCTS, ANIMAL PHARMACEUTICALS, ANIMAL PRODUCTS

NAME OF ORGANIZATION OR GOVERNMENT: UNITED PET FUND
(G) DESCRIPTION OF NON-CASH ASSISTANCE: APPAREL, HYGIENE PRODUCTS, HOUSEHOLD PRODUCTS, ANIMAL FOOD, ANIMAL PHARMACEUTICA

SCHEDULE J (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

GREATER GOOD CHARITIES

Employer identification number

20-4846675

Part I Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (such as maid, chauffeur, chef)		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain **1b**		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? **2**		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. ☒ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☒ Compensation survey or study ☐ Form 990 of other organizations ☒ Approval by the board or compensation committee		
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a	Receive a severance payment or change-of-control payment? **4a**		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan? **4b**		X
c	Participate in or receive payment from an equity-based compensation arrangement? **4c**		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a	The organization? **5a**		X
b	Any related organization? **5b**		X
	If "Yes" on line 5a or 5b, describe in Part III.		
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a	The organization? **6a**		X
b	Any related organization? **6b**		X
	If "Yes" on line 6a or 6b, describe in Part III.		
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III **7**		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III **8**		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? **9**		

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		**(B)** Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			**(C)** Retirement and other deferred compensation	**(D)** Nontaxable benefits	**(E)** Total of columns (B)(i)-(D)	**(F)** Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	**(ii)** Bonus & incentive compensation	**(iii)** Other reportable compensation				
(1) LIZ BAKER	(i)	303,238.	0.	0.	4,599.	17,838.	325,675.	0.
CHIEF EXECUTIVE OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) NOAH HORTON	(i)	222,460.	0.	0.	3,345.	10,865.	236,670.	0.
CHIEF OPERATING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JEMIMAH OKANTEY	(i)	214,210.	0.	0.	3,221.	10,894.	228,325.	0.
CHIEF FINANCIAL OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) MELISSA RUBIN	(i)	187,803.	0.	0.	2,817.	524.	191,144.	0.
EXECUTIVE VP, FUNDRAISING	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) STEPHEN MINTER	(i)	178,398.	0.	0.	0.	10,424.	188,822.	0.
GENERAL COUNSEL (THRU 02/25)	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) SARA VARSA	(i)	164,118.	0.	0.	2,516.	11,269.	177,903.	0.
EXECUTIVE VP, PROGRAMS	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) NELSON MILLER	(i)	157,723.	0.	0.	2,374.	10,926.	171,023.	0.
EVP, PROGRAMS (THRU 05/25)	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) DENISE ST JEAN	(i)	152,835.	0.	0.	2,301.	10,926.	166,062.	0.
EXECUTIVE VP, COMMUNICATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE L
(Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization: GREATER GOOD CHARITIES

Employer identification number: 20-4846675

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b; or Form 990-EZ, Part V, line 40b.

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

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

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

Part II Loans to and/or From Interested Persons

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

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

Part III Grants or Assistance Benefiting Interested Persons

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

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

Part IV Business Transactions Involving Interested Persons

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

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues? Yes	(e) Sharing of organization's revenues? No
(1)	CHARITYUSA.COM	CREATOR/FOUNDER	375.	REIMBURSEME		X
(2)	CHARITYUSA.COM	CREATOR/FOUNDER	50,011.	ROYALTIES F		X
(3)	CHARITYUSA.COM	CREATOR/FOUNDER	1,290,605.	ADVERTISING		X
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						

Part V Supplemental Information

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

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:
(A) NAME OF PERSON: CHARITYUSA.COM
(D) DESCRIPTION OF TRANSACTION: REIMBURSEMENT OF EMPLOYEE BENEFITS PAID
ON BEHALF OF GREATER GOOD CHARITIES.

(A) NAME OF PERSON: CHARITYUSA.COM
(D) DESCRIPTION OF TRANSACTION: ROYALTIES FROM CHARITYUSA FOR A
NONEXCLUSIVE LICENSE TO USE THE NAME AND/OR LOGO OF GREATER GOOD
CHARITIES ON WEBSITE ADVERTISING AND IN CONNECTION WITH THE SALE OF
CHARITYUSA.COM PRODUCTS.

(A) NAME OF PERSON: CHARITYUSA.COM
(D) DESCRIPTION OF TRANSACTION: ADVERTISING EXPENSE

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, line 29 or 30.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization: GREATER GOOD CHARITIES

Employer identification number: 20-4846675

Part I Types of Property

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art	X	1	79,500.	APPRAISAL
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods	X		3,874,959.	FAIR MARKET VALUE
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded	X	8	51,033.	FAIR MARKET VALUE
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory	X	12	99,380,665.	FAIR MARKET VALUE
20	Drugs and medical supplies	X	12	9,725,846.	FAIR MARKET VALUE
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other (PET PRODUCTS)	X	12	27,492,057.	FAIR MARKET VALUE
26	Other ( )				
27	Other ( )				
28	Other ( )				

			Yes	No
29	Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement	29	0	
30a	During the year, did the organization receive by contribution any property reported on Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?	30a		X
b	If "Yes," describe the arrangement in Part II.			
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	31	X	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		X
b	If "Yes," describe in Part II.			
33	If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

PART I COLUMN B

THE AMOUNT IN COLUMN (B) REPRESENTS THE NUMBER OF NONCASH CONTRIBUTIONS THROUGHOUT THE YEAR.

SCHEDULE O (Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
GREATER GOOD CHARITIES

Employer identification number
20-4846675

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THE ORGANIZATION ENGAGES IN PROGRAM ACTIVITIES AT THE POINTS OF
INTERSECTION OF PEOPLE, ANIMALS AND THE ENVIRONMENT.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
DEVELOPING THE SYNERGIES CREATED BY THE MULTIPLE INTERSECTIONS OF THESE
ACTIVITIES. THE OUTCOMES ACHIEVED THROUGH THIS UNIQUE APPROACH AMPLIFY
THE GOOD.

FORM 990, PART VI, SECTION A, LINE 1A:
THE CEO, AN EMPLOYEE, IS A VOTING MEMBER.

FORM 990, PART VI, SECTION A, LINE 2:
GREG HESTERBERG IS AN OWNER OF CHARITYUSA, A PRIMARY GREATER GOOD CHARITIES
PARTNER. GREG IS ON THE BOARD OF DIRECTORS BUT CANNOT BE AN OFFICER.
JULIA CHRISTOPHERSON IS AN EMPLOYEE OF CHARITYUSA.

FORM 990, PART VI, SECTION B, LINE 11B:
THE 990 DRAFT IS SENT TO THE ENTIRE BOARD. CHIEF EXECUTIVE OFFICER, CHIEF
FINANCIAL OFFICER, CHIEF GROWTH OFFICER, BOARD CHAIR AND THE FINANCE
COMMITTEE REVIEW THE 990 DRAFT PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:
THE ORGANIZATION'S CONFLICT OF INTEREST POLICY APPLIES TO ANY DIRECTOR,
PRINCIPAL OFFICER OR MEMBER OF A COMMITTEE WITH GOVERNING BOARD DELEGATED
POWERS, WHO HAS DIRECT OR INDIRECT FINANCIAL INTEREST. WE HAD 16 PEOPLE
WHO FELL UNDER THIS DEFINITION DURING THE FISCAL YEAR.

1. DUTY TO DISCLOSE - IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICTS
OF INTEREST, AN INTERESTED PERSON MUST DISCLOSE THE EXISTENCE AND NATURE OF
HIS OR HER FINANCIAL INTEREST TO THE BOARD OF DIRECTORS (BOARD) [OR SPECIAL
COMMITTEES WITH BOARD DELEGATED POWERS (E.G. CONFLICTS OR COMPENSATION
COMMITTEES)] CONSIDERING THE PROPOSED TRANSACTION OR ARRANGEMENT.

2. DETERMINING WHETHER A CONFLICT OF INTEREST EXISTS - AFTER DISCLOSURE OF
THE FINANCIAL INTEREST, THE INTERESTED PERSON SHALL LEAVE THE BOARD OR
COMMITTEE MEETING WHILE THE FINANCIAL INTEREST IS DISCUSSED AND VOTED UPON.
THE REMAINING BOARD OR COMMITTEE MEMBERS SHALL DECIDE IF A CONFLICT OF
INTEREST EXISTS.

3. PROCEDURES FOR ADDRESSING THE CONFLICT OF INTEREST -
A. THE CHAIRPERSON OF THE BOARD OR COMMITTEE SHALL, IF APPROPRIATE, APPOINT
A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE
PROPOSED TRANSACTION OR ARRANGEMENT.
B. AFTER EXERCISING DUE DILIGENCE, THE BOARD OR COMMITTEE SHALL DETERMINE
WHETHER THE CORPORATION CAN OBTAIN A MORE ADVANTAGEOUS TRANSACTION OR
ARRANGEMENT WITH REASONABLE EFFORTS FROM A PERSON OR ENTITY THAT WOULD NOT
GIVE RISE TO A CONFLICT OF INTEREST.
C. IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY
ATTAINABLE UNDER CIRCUMSTANCES THAT WOULD NOT GIVE RISE TO A CONFLICT OF
INTEREST, THE BOARD OR COMMITTEE SHALL DETERMINE BY A MAJORITY VOTE OF THE
DISINTERESTED DIRECTORS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE

Name of the organization: GREATER GOOD CHARITIES

Employer identification number: 20-4846675

CORPORATION'S BEST INTEREST AND FOR ITS OWN BENEFIT AND WHETHER THE TRANSACTION IS FAIR AND REASONABLE TO THE CORPORATION AND SHALL MAKE ITS DECISION AS TO WHETHER TO ENTER INTO THE TRANSACTION OR ARRANGEMENT IN CONFORMITY WITH SUCH DETERMINATION.

4. VIOLATIONS OF THE CONFLICT OF INTEREST POLICY -
A. IF THE BOARD OR COMMITTEE HAS REASONABLE CAUSE TO BELIEVE THAT A MEMBER HAS FAILED TO DISCLOSE ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, IT SHALL INFORM THE MEMBER OF THE BASIS FOR SUCH BELIEF AND AFFORD THE MEMBER AN OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE.
B. IF, AFTER HEARING THE RESPONSE OF THE MEMBER AND MAKING SUCH FURTHER INVESTIGATION AS MAY BE WARRANTED IN THE CIRCUMSTANCES, THE BOARD OR COMMITTEE DETERMINES THAT THE MEMBER IS AN INTERESTED PERSON AND HAS FAILED TO DISCLOSE AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST, IT SHALL TAKE APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION.

FORM 990, PART VI, SECTION B, LINE 15:
COMPENSATION COMMITTEE REVIEWS CEO SALARY BASED ON CURRENT DATA FOR SIMILAR SIZED ORGANIZATIONS. COMPENSATION COMMITTEE REVIEWS HIGHLY COMPENSATED EMPLOYEES AFTER EACH REVIEW CYCLE. THE LAST CEO COMPENSATION REVIEW OCCURRED IN JUNE 2025.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:
AK,AR,CA,CO,DC,FL,GA,GU,HI,IL,KS,KY,MA,MD,MI,MS,MT,NC,NH,NJ,NM,NY,OR,PA,PR RI,SC,TN,TX,UT,VA,WI,WV

FORM 990, PART VI, SECTION C, LINE 18:
ORGANIZATION PROVIDES FORMS TO GUIDESTAR AND CHARITY NAVIGATOR.

FORM 990, PART VI, SECTION C, LINE 19:
THE 990 IS POSTED ON OUR WEBSITE AT WWW.GREATERGOOD.ORG. GOVERNING DOCUMENTS ARE AVAILABLE ON REQUEST. THE FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC ON OUR WEBSITE AND THROUGH THE ANNUAL REPORT.

FORM 990 PART XII LINE 2C
THE AUDIT COMMITTEE OVERSEES THE AUDIT.

SCHEDULE R (Form 990)
(Rev. January 2025)
Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
GREATER GOOD CHARITIES

Employer identification number
20-4846675

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	(g) No

Part III **Identification of Related Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity? Yes	(i) No
FUNDACJA GREATER GOOD CHARITIES EUROPE RONDO IGNACEGO DASZYNSKIEGO 2B WARSAW, POLAND 00-843	CHARITABLE COMPANY	POLAND	GREATER GOOD CHARITIES	C CORP	10,971,874.	167,077.	100%	X	

Part V **Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

		Yes	No
Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.			
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity	1a		X
b Gift, grant, or capital contribution to related organization(s)	1b	X	
c Gift, grant, or capital contribution from related organization(s)	1c		X
d Loans or loan guarantees to or for related organization(s)	1d		X
e Loans or loan guarantees by related organization(s)	1e		X
f Dividends from related organization(s)	1f		X
g Sale of assets to related organization(s)	1g		X
h Purchase of assets from related organization(s)	1h		X
i Exchange of assets with related organization(s)	1i		X
j Lease of facilities, equipment, or other assets to related organization(s)	1j		X
k Lease of facilities, equipment, or other assets from related organization(s)	1k		X
l Performance of services or membership or fundraising solicitations for related organization(s)	1l		X
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		X
o Sharing of paid employees with related organization(s)	1o		X
p Reimbursement paid to related organization(s) for expenses	1p	X	
q Reimbursement paid by related organization(s) for expenses	1q		X
r Other transfer of cash or property to related organization(s)	1r		X
s Other transfer of cash or property from related organization(s)	1s		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)	FUNDACJA GREATER GOOD CHARITIES EUROPE	B	435,000.	FMV
(2)				
(3)				
(4)				
(5)				
(6)				

Part VI **Unrelated Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners sec. 501(c)(3) orgs.? Yes	(e) No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership