Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2001

Open to Public Inspection

A For the 2001 calendar year, or tax year beginning , and ending

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

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
WILLIAMSON COUNTY HUMANE SOCIETY
INC

Number and street (or P O box if mail is not delivered to street address) | Room/suite
3737 CR 272

City or town state or country, and ZIP + 4
LEANDER TX 78641

D Employer ID number
74-2069592

E Telephone number
512-260-3602

F Accounting method ☐ Cash ☒ Accrual ☐ Other (specify) ▶

● **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)**

H and I are not applicable to section 527 organizations

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

H(b) If "Yes" enter no of affiliates ▶ ☒ N/A

H(c) Are all affiliates included? ☒ N/A ☐ Yes ☐ No
(If "No" att a list See instr)

H(d) Is this a separate return filed by an organization covered by a group ruling? ☒ N/A ☐ Yes ☐ No

G Web site ▶ WWW HSWC.NET

I Enter 4-digit GEN ▶

J Organization type (check only one) ▶ ☒ 501(c) (3) ◂ (insert no) ☐ 4947(a)(1) or ☐ 527

K Check here ▶ ☐ if the organization's gross receipts are normally not more than $25 000 The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data **Some states require a complete return**

M Check ▶ ☒ if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)

L Gross receipts Add lines 6b, 8b, 9b and 10b to line 12 ▶ 518,892

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 16)

Revenue	1	Contributions gifts grants and similar amounts received				
	a	Direct public support	1a	183,559		
	b	Indirect public support	1b			
	c	Government contributions (grants)	1c			
	d	Total (add lines 1a through 1c) (cash $ 183,559 noncash $)			1d	183,559
	2	Program service revenue including government fees and contracts (from Part VII, line 93)			2	287,588
	3	Membership dues and assessments			3	
	4	Interest on savings and temporary cash investments			4	
	5	Dividends and interest from securities			5	
	6a	Gross rents	6a			
	b	Less rental expenses	6b			
	c	Net rental income or (loss) (subtract line 6b from line 6a)			6c	
	7	Other investment income (describe ▶)			7	
	8a	Gross amount from sales of assets other than inventory	(A) Securities 8a	(B) Other		
	b	Less cost or other basis and sales expenses	8b			
	c	Gain or (loss) (attach schedule)	8c			
	d	Net gain or (loss) (combine line 8c columns (A) and (B))			8d	
	9	Special events and activities (attach schedule)				
	a	Gross revenue (not including $ ______ of contributions reported on line 1a)	9a	38,639		
	b	Less direct expenses other than fundraising expenses	9b	19,787		
	c	Net income or (loss) from special events (subtract line 9b from line 9a)			9c	18,852
	10a	Gross sales of inventory less returns and allowances	10a			
	b	Less cost of goods sold	10b			
	c	Gross profit or (loss) from sales of inventory (att sch) (subtract line 10b from line 10a)			10c	
	11	Other revenue (from Part VII line 103)			11	9,106
	12	**Total revenue** (add lines 1d 2 3 4, 5, 6c 7 8d 9c 10c and 11)			12	499,105
Expenses	13	Program services (from line 44 column (B))			13	476,273
	14	Management and general (from line 44 column (C))			14	29,599
	15	Fundraising (from line 44 column (D))			15	
	16	Payments to affiliates (attach schedule)			16	
	17	**Total expenses** (add lines 16 and 44 column (A))			17	505,872
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)			18	-6,767
	19	Net assets or fund balances at beginning of year (from line 73 column (A))			19	225,557
	20	Other changes in net assets or fund balances (attach explanation) See Stmt 1			20	725
	21	Net assets or fund balances at end of year (combine lines 18 19 and 20)			21	219,515

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For Paperwork Reduction Act Notice, see the separate instructions

DAA

Form **990** (2001)

24

Part II Statement of Functional Expenses

All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See Specific Instructions on page 21)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash $ ______ non-cash $ ______)	22				
23 Specific assistance to individuals	23				
24 Benefits paid to or for members	24				
25 Compensation of officers directors, etc	25				
26 Other salaries and wages	26	72,408	66,615	5,793	
27 Pension plan contributions	27				
28 Other employee benefits	28	6,100	5,612	488	
29 Payroll taxes	29	5,712	5,255	457	
30 Professional fundraising fees	30				
31 Accounting fees	31				
32 Legal fees	32				
33 Supplies	33				
34 Telephone	34				
35 Postage and shipping	35				
36 Occupancy	36	16,551	15,227	1,324	
37 Equipment rental and maintenance	37	1,221	1,221		
38 Printing and publications	38	1,278	1,278		
39 Travel	39				
40 Conferences, conventions and meetings	40				
41 Interest	41	29,812	29,812		
42 Depreciation depletion, etc (att sch)	42	33,729	33,729		
43 Other expenses not covered above (itemize) a	43a				
b See Statement 2	43b	339,061	317,524	21,537	
c	43c				
d	43d				
e	43e				
44 Total functional expenses (add lines 22 - 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	505,872	476,273	29,599	0

Joint Costs Check ▶ ☐ if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ▶ ☐ Yes ☒ No

If "Yes " enter (i) the aggregate amount of these joint costs $ ______ (ii) the amount allocated to Program services $ ______

(iii) the amount allocated to Management and general $ ______ and (iv) the amount allocated to Fundraising $ ______

Part III Statement of Program Service Accomplishments (See Specific Instructions on page 24)

What is the organization's primary exempt purpose? ▶ PREVENTION OF CRUELTY TO ANIMALS All organizations must describe their exempt purpose achievements in a clear and concise manner State the number of clients served, publications issued, etc Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others)	Program Service Expenses (Required for 501(c)(3) and (4) orgs and 4947(a)(1) trusts but optional for others)
a See Statement 3 (Grants and allocations $)	476,273
b (Grants and allocations $)	
c (Grants and allocations $)	
d (Grants and allocations $)	
e Other program services (attach schedule) (Grants and allocations $)	
f Total of Program Service Expenses (should equal line 44 column (B) Program services) ▶	476,273

Part IV Balance Sheets (See Specific Instructions on page 24)

	Note	Where required, attached schedules and amounts within the description column should be for end-of-year amounts only			(A) Beginning of year		(B) End of year
Assets	45	Cash-non-interest-bearing			-260	45	2,050
	46	Savings and temporary cash investments				46	
	47a	Accounts receivable	47a	14,041			
	b	Less allowance for doubtful accounts	47b		11,734	47c	14,041
	48a	Pledges receivable	48a				
	b	Less allowance for doubtful accounts	48b			48c	
	49	Grants receivable				49	
	50	Receivables from officers directors, trustees, and key employees (attach schedule)				50	
	51a	Other notes and loans receivable (attach schedule)	51a				
	b	Less allowance for doubtful accounts	51b			51c	
	52	Inventories for sale or use				52	
	53	Prepaid expenses and deferred charges			30	53	30
	54	Investments-securities ▶ ☐ Cost ☐ FMV				54	
	55a	Investments-land, buildings, and equipment basis	55a				
	b	Less accumulated depreciation (attach schedule)	55b			55c	
	56	Investments-other (attach schedule)				56	
	57a	Land, buildings and equipment basis	57a	702,420			
	b	Less accumulated depreciation (attach schedule) See Stmt 4	57b	96,338	622,007	57c	606,082
	58	Other assets (describe ▶ See Stmt 5)			16,800	58	14,516
	59	**Total assets** (add lines 45 through 58) (must equal line 74)			650,311	59	636,719
Liabilities	60	Accounts payable and accrued expenses			30,108	60	28,677
	61	Grants payable				61	
	62	Deferred revenue				62	
	63	Loans from officers, directors trustees, and key employees (attach schedule)				63	
	64a	Tax-exempt bond liabilities (attach schedule)				64a	
	b	Mortgages and other notes payable (attach schedule) See Worksheet			387,167	64b	376,513
	65	Other liabilities (describe ▶ See Stmt 6)			7,479	65	12,014
	66	**Total liabilities** (add lines 60 through 65)			424,754	66	417,204
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here** ▶ ☒ and complete lines 67 through 69 and lines 73 and 74					
	67	Unrestricted			225,557	67	219,515
	68	Temporarily restricted				68	
	69	Permanently restricted				69	
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 70 through 74					
	70	Capital stock trust principal, or current funds				70	
	71	Paid-in or capital surplus or land, building, and equipment fund				71	
	72	Retained earnings, endowment, accumulated income, or other funds				72	
	73	**Total net assets or fund balances** (add lines 67 through 69 OR lines 70 through 72 column (A) **must** equal line 19, column (B) **must** equal line 21)			225,557	73	219,515
	74	**Total liabilities and net assets / fund balances** (add lines 66 and 73)			650,311	74	636,719

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

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See Specific Instructions, page 26.)

a	Total revenue, gains, and other support per audited financial statements ▶	a	499,105
b	Amounts included on line a but not on line 12, Form 990		
(1)	Net unrealized gains on investments $		
(2)	Donated services and use of facilities $		
(3)	Recoveries of prior year grants $		
(4)	Other (specify) $		
	Add amounts on lines (1) through (4) ▶	b	
c	Line a minus line b ▶	c	499,105
d	Amounts included on line 12, Form 990 but not on line a		
(1)	Investment expenses not included on line 6b Form 990 $		
(2)	Other (specify) $		
	Add amounts on lines (1) and (2) ▶	d	
e	Total revenue per line 12, Form 990 (line c plus line d) ▶	e	499,105

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total expenses and losses per audited financial statements ▶	a	505,872
b	Amounts included on line a but not on line 17, Form 990		
(1)	Donated services and use of facilities $		
(2)	Prior year adjustments reported on line 20, Form 990 $		
(3)	Losses reported on line 20, Form 990 $		
(4)	Other (specify) $		
	Add amounts on lines (1) through (4) ▶	b	
c	Line a minus line b ▶	c	505,872
d	Amounts included on line 17, Form 990 but not on line a		
(1)	Investment expenses not included on line 6b, Form 990 $		
(2)	Other (specify) $		
	Add amounts on lines (1) and (2) ▶	d	
e	Total expenses per line 17, Form 990 (line c plus line d) ▶	e	505,872

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated see Specific Instructions on page 26.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contrib to employee benefit plans & deferred compensation	(E) Expense account and other allowances
GUY S BILYEU 12601 EUROPA LN, AUSTIN, TX 78727	EXEC. DIRECT 45	42,239	0	0
DOUG CORNWELL 106 FANIN AVE , ROUND ROCK, TX 78664	PRESIDENT AS NEEDED	0	0	0
TINA WALLEN 13322 BROADMEADE, AUSTIN, TX 78729	VICE-PRES AS NEEDED	0	0	0
H.R. STRICKLAND PO BOX 5999, ROUND ROCK, TEXAS 78681	TREASURER AS NEEDED	0	0	0
JONI CLARKE PO BOX 415, HUTTO, TX 78634	SECRETARY AS NEEDED	0	0	0
MIKE WALLEN 13322 BROADMEADE, AUSTIN, TX 78729	BOARD MEMBER AS NEEDED	0	0	0
MAHLON ARNETT II 1620 CR 130, HUTTO, TX 78634	BOARD MEMBER AS NEEDED	0	0	0
TODD RIGGAN, DVM 2700 W PECAN ST, PFLUGERVILLE,78660	BOARD MEMBER AS NEEDED	0	0	0
JOHN E. LEVEE 304 W. MAIN, ROUND ROCK, TX 78664	BOARD MEMBER AS NEEDED	0	0	0
RON HYDEN RT 3 BOX 109-B, GEORGETOWN, TX 78626	BOARD MEMBER AS NEEDED	0	0	0

75 Did any officer, director trustee, or key employee receive aggregate compensation of more than $100,000 from your organization and all related organizations, of which more than $10,000 was provided by the related organizations? If "Yes," attach schedule-see Specific Instructions on page 27 ▶ ☐ Yes ☒ No

Part VI Other Information (See Specific Instructions on page 27)

				Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		77		X
78a	Did the organization have unrelated business gross inc of $1,000 or more during the year covered by this return?		78a		X
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	N/A	78b		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		79		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc , to any other exempt or nonexempt organization?		80a		X
b	If "Yes," enter the name of the organization ▶ and check whether it is ☐ exempt OR ☐ nonexempt				
81a	Enter direct or indirect political expenditures See line 81 instr	81a			
b	Did the organization file **Form 1120-POL** for this year?		81b		X
82a	Did the organization receive donated services or the use of materials, equipment or facilities at no charge or at substantially less than fair rental value?		82a	X	
b	If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)	82b			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?		83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	N/A	83b		
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		84a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	N/A	84b		
85	501(c)(4), (5), or (6) organizations **a** Were substantially all dues nondeductible by members?	N/A	85a		
b	Did the organization make only in-house lobbying expenditures of $2 000 or less?	N/A	85b		
	If "Yes" was answered to either 85a or 85b **do not** complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year				
c	Dues, assessments, and similar amounts from members	85c			
d	Section 162(e) lobbying and political expenditures	85d			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f			
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f?	N/A	85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	N/A	85h		
86	501(c)(7) orgs Enter **a** Initiation fees and capital contributions included on line 12	86a			
b	Gross receipts, included on line 12, for public use of club facilities	86b			
87	501(c)(12) orgs Enter **a** Gross income from members or shareholders	87a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes " complete Part IX		88		X
89a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 ▶ 0 section 4912 ▶ 0 , section 4955 ▶ 0				
b	501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		89b		X
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	▶ 0			
d	Enter Amount of tax on line 89c, above, reimbursed by the organization	▶ 0			

90a List the states with which a copy of this return is filed ▶ None

b Number of employees employed in the pay period that includes March 12, 2001 (See instructions) 90b 18

91 The books are in care of ▶ H R. STRICKLAND Telephone no ▶ 512-260-3602

Located at ▶ 3737 CR 272, LEANDER, TEXAS ZIP + 4 ▶ 78641

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of **Form 1041**- Check here ▶ ☐

and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92

Part VII Analysis of Income-Producing Activities (See Specific Instructions on page 32.)

Note: Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by sec. 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a See Statement 7					156,543
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					131,045
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					18,852
102 Gross profit or (loss) from sales of inventory					
103 Other revenue a					
b GAIN ON THE DISPOSITION OF VA			1	7,418	
c MISCELLANEOUS			1	1,688	
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0		9,106	306,440

105 **Total** (add line 104, columns (B), (D), and (E)) ▶ 315,546

Note Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See Specific Instructions on page 32.)

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93a	ADOPTION FEES HELP DEFRAY THE COSTS OF PROVIDING SERVICES
	FOR HOMELESS ANIMALS AND ACCOMPLISH THE ORGANIZATION'S
	PRIMARY GOAL, PLACING COMPANION ANIMALS INTO LIFETIME
	See Statement 8

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See Specific Instructions on page 33.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See Specific Instructions on pg. 33.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge

[redacted] officer) is based on all information of which preparer has any knowledge

x 7/11/02

Date

PRESIDENT

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information-(See separate instructions)

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

OMB No 1545-0047

2001

Name of the organization
WILLIAMSON COUNTY HUMANE SOCIETY
INC

Employer identification number
74-2069592

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 1 of the instructions List each one If there are none, enter "None ")

(a) Name and address of each employee paid more than $50 000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee ben plans & deferred compensation	(e) Expense account and other allowances
None				
Total number of other employees paid over $50,000 ▶	0			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instr List each one (whether individuals or firms) If there are none, enter "None ")

(a) Name and address of each independent contractor paid more than $ 50 000	(b) Type of service	(c) Compensation
None		
Total number of others receiving over $50,000 for professional services ▶ 0		

For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ

Part III Statements About Activities (See page 2 of the instructions)

		Line	Yes	No
1	During the year, has the organization attempted to influence national state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶$ ____________ **(Must equal amount on line 38,** Part VI-A, or line i of Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities	1		X
2	During the year, has the organization either directly or indirectly, engaged in any of the following acts with any substantial contributors trustees, directors officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)			
a	Sale, exchange, or leasing of property?	2a		X
b	Lending of money or other extension of credit?	2b		X
c	Furnishing of goods, services, or facilities?	2c		X
d	Payment of compensation (or payment or reimbursement of exp if more than $1 000)?	2d		X
e	Transfer of any part of its income or assets?	2e		X
3	Does the organization make grants for scholarships, fellowships student loans, etc ? (See **Note** below)	3		X
4	Do you have a section 403(b) annuity plan for your employees?	4		X

Note Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions)

The organization is not a private foundation because it is (Please check only **ONE** applicable box)

5 ☐ A church convention of churches, or association of churches Section 170(b)(1)(A)(i)

6 ☐ A school Section 170(b)(1)(A)(ii) (Also complete Part V)

7 ☐ A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)

8 ☐ A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)

9 ☐ *A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii)* **Enter the hospital's name, city, and state** ▶

10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A)

11a ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)

11b ☒ A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)

12 ☐ 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 charitable, etc 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) (Also complete the **Support Schedule** in Part IV-A)

13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in **(1)** lines 5 through 12 above or **(2)** section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

Provide the following information about the supported organizations (See page 5 of the instructions)

(a) Name(s) of supported organization(s)	(b) Line number from above

14 ☐ An organization organized and operated to test for public safety Section 509(a)(4) (See page 6 of the instructions)

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

Note You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

	Calendar year (or fiscal year beginning in) ▶	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
15	Gifts, grants and contributions received (Do not include unusual grants See line 28)	316,237	203,308	168,150	162,831	850,526
16	Membership fees received		1,085	6,220		7,305
17	Gross receipts from admissions merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization s charitable etc purpose	133,688	319,906	265,973	251,398	970,965
18	Gross inc from int dividends amounts received from pymt on securities loans (section 512(a)(5)) rents, royalties & unrelated busn taxable inc (less sec 511 taxes) from businesses acquired by the organization after June 30 1975			174	462	636
19	Net income from unrelated business activities not included in line 18					
20	Tax revn levied for the organization's ben & either paid to it or expended on its behalf					
21	The value of serv or facl furnished to the org by a governmental unit without charge Do not incl the value of serv or fac generally furnished to the public without charge					
22	Other income Attach a schedule Do not include gain or (loss) from sale of cap assets Stmt 9	59,864	9,530	9,582		78,976
23	Total of lines 15 through 22	509,789	533,829	450,099	414,691	1,908,408
24	Line 23 minus line 17	376,101	213,923	184,126	163,293	937,443
25	Enter 1% of line 23	5,098	5,338	4,501	4,147	

26 **Organizations described on lines 10 or 11** a Enter 2% of amount in column (e), line 24 ▶ 26a 18,749

b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1997 through 2000 exceeded the amount shown in line 26a **Do not file this list with your return** Enter the total of all these excess amounts ▶ 26b

c Total support for section 509(a)(1) test Enter line 24, column (e) ▶ 26c 937,443

d Add Amounts from column (e) for lines 18 636 19 ______ 22 78,976 26b ______ ▶ 26d 79,612

e Public support (line 26c minus line 26d total) ▶ 26e 857,831

f **Public support percentage (line 26e (numerator) divided by line 26c (denominator))** ▶ 26f 91 5075%

27 **Organizations described on line 12** a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from each "disqualified person " **Do not file this list with your return** Enter the sum of such amounts for each year N/A

(2000) (1999) (1998) (1997)

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year that was more than the **larger** of **(1)** the amount on line 25 for the year or **(2)** $5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals) **Do not file this list with your return** After computing the difference between the amount received and the larger amount described in **(1)** or **(2)**, enter the sum of these differences (the excess amounts) for each year N/A

(2000) (1999) (1998) (1997)

c Add Amounts from column (e) for lines 15 ______ 16 ______ 17 ______ 20 ______ 21 ______ ▶ 27c

d Add Line 27a total ______ and line 27b total ______ ▶ 27d

e Public support (line 27c total minus line 27d total) ▶ 27e

f Total support for section 509(a)(2) test Enter amount on line 23, column (e) ▶ 27f

g **Public support percentage (line 27e (numerator) divided by line 27f (denominator))** ▶ 27g %

h **Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))** ▶ 27h %

28 **Unusual Grants** For an organization described in line 10, 11, or 12 that received any unusual grants during 1997 through 2000, prepare a list for your records to show, for each year, the name of the contributor the date and amount of the grant, and a brief description of the nature of the grant **Do not file this list with your return** Do not include these grants in line 15

Part V Private School Questionnaire (See page 7 of the instructions)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		N/A	Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures catalogues and other written communications with the public dealing with student admissions, programs and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		

If "Yes " please describe if "No," please explain (If you need more space, attach a separate statement)

			Yes	No
32	Does the organization maintain the following			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		

If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)

			Yes	No
33	Does the organization discriminate by race in any way with respect to			
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		

If you answered "Yes" to any of the above, please explain (If you need more space attach a separate statement)

			Yes	No
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended?	34b		

If you answered "Yes" to either 34a or b, please explain using an attached statement

			Yes	No
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50 1975-2 C B 587 covering racial nondiscrimination? If "No," attach an explanation	35		

Part VI-A **Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions)
(To be completed **ONLY** by an eligible organization that filed Form 5768) N/A

Check ▶ a ☐ if the organization belongs to an affiliated group Check ▶ b ☐ if you checked "a" and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount Enter the amount from the following table-	▶ 41		
42 Grassroots nontaxable amount (enter 25% of line 41)	42		
43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44		

If the amount on line 40 is-	**The lobbying nontaxable amount is-**
Not over $500,000	20% of the amount on line 40
Over $500,000 but not over $1 000,000	$100 000 plus 15% of the excess over $500 000
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500 000 but not over $17,000 000	$225 000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

Caution If there is an amount on either line 43 or line 44, you must file Form 4720

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below
See the instructions for lines 45 through 50 on page 11 of the instructions)

	Lobbying Expenditures During 4-Year Averaging Period				
Calendar year (or fiscal year beginning in) ▶	**(a)** 2001	**(b)** 2000	**(c)** 1999	**(d)** 1998	**(e)** Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B **Lobbying Activity by Nonelecting Public Charities**
(For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instr) N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
a Volunteers			
b Paid staff or management (include compensation in expenses reported on lines c through **h**)			
c Media advertisements			
d Mailings to members legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (add lines c through **h**)			

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

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

		Yes	No
a Transfers from the reporting organization to a noncharitable exempt organization of			
(i) Cash	51a(i)		X
(ii) Other assets	a(ii)		X
b Other transactions			
(i) Sales or exchanges of assets with a noncharitable exempt organization	b(i)		X
(ii) Purchases of assets from a noncharitable exempt organization	b(ii)		X
(iii) Rental of facilities, equipment, or other assets	b(iii)		X
(iv) Reimbursement arrangements	b(iv)		X
(v) Loans or loan guarantees	b(v)		X
(vi) Performance of services or membership or fundraising solicitations	b(vi)		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	c		X

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
N/A			

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ▶ ☐ Yes ☒ No

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

WILLIAMSON COUNTY HUMANE SOCIETY INC **74-2069592**

STATEMENT 10- PART I LINE I, SCHEDULE OF CONTRIBUTIONS > $5000

DATE	NAME	ITEM	VALUE
			$6,775 00
			8,865 00
			$15,640 00

Form 990	Special Events Schedule For calendar year 2001 or tax year beginning and ending	2001

Name
WILLIAMSON COUNTY HUMANE SOCIETY
INC

Employer Identification Number
74-2069592

	(A)	(B)	(C)	Others	Total
Gross receipts	38,639	0	0	0	38,639
Less contributions	0	0	0	0	0
Gross revenue	38,639	0	0	0	38,639
Less direct expenses	19,787	0	0	0	19,787
Net income (loss)	18,852	0	0	0	18,852

Descriptions

A) GALA

B)

C)

Others

Form
990/990-PF

Mortgages and Other Notes Payable

For calendar year 2001 or tax year beginning and ending

2001

Name
WILLIAMSON COUNTY HUMANE SOCIETY
INC

Employer Identification Number
74-2069592

Form 990, Part IV, Line 64b - Additional Information

	Name of lender	Relationship to disqualified person
(1)	BANK OF TEXAS CREDIT LINE	
(2)	TEXAS HERTIGAGE BANK CREDIT LINE	
(3)	FIRST SIERRA INTERNATIONAL- FIXTURE	
(4)	INSURANCE NOTES	
(5)	BELL FAMILY TRUST	
(6)		
(7)		
(8)		
(9)		
(10)		

	Original amount borrowed	Date of loan	Maturity date	Repayment terms	Interest rate
(1)	20,000	10/28/98	5/05/05	INTEREST DUE MONTHLY	9 500
(2)	40,000	10/29/01	1/29/02	INTEREST PAID MONTHLY	6 500
(3)	18,862	2/25/00	2/25/01	12 MONTHS; $1,571 86	
(4)					
(5)	320,732	11/01/00	12/01/19	$1,473/MO, INTEREST MO	8.000
(6)					
(7)					
(8)					
(9)					
(10)					

	Security provided by borrower	Purpose of loan
(1)		FUNDS FOR OPERATIONS
(2)		FUNDS FOR OPERATIONS
(3)		
(4)		
(5)	LAND AND BUILDING	FINANCE CURRENT BUILDING AND LAND
(6)		
(7)		
(8)		
(9)		
(10)		

	Consideration furnished by lender	Balance due at beginning of year	Balance due at end of year
(1)		20,000	20,000
(2)		39,886	39,886
(3)		4,717	
(4)		636	
(5)		321,928	316,627
(6)			
(7)			
(8)			
(9)			
(10)			
Totals		387,167	376,513

Statement 1 - Form 990, Line 20 - Other Changes in Net Assets or Fund Balances

Description	Amount
BEGINNING BALANCE PER TAX RETURN IS OFF PER BEGINNING BALANCE PER BOOKS ADJUSTMENT NEEDED TO CORRECT	$ 725
Total	$ 725

Statement 2 - Form 990, Part II, Line 43 - Other Functional Expenses

Description	Total Expenses	Program Service	Mgt & General	Fund-Raising
	$	$	$	$
Expenses				
STAFF LEASING	248,534	228,651	19,883	
ADVERTISING	65	65		
ANIMAL CARE	62,057	62,057		
AUTOMOBILE EXPENSE	1,952	1,952		
BANK FEES	1,343	1,343		
DISPOSAL FEES	2,625	2,625		
DUES AND SUBSCRIPTIONS	785	785		
INSURANCE	8,962	8,245	717	
MAINTENANCE AND REPAIRS	892	821	71	
MISCELLANEOUS	1,030	1,030		
OFFICE EXPENSES	3,808	3,503	305	
PROFESSIONAL FEES	7,008	6,447	561	
Total	$ 339,061	$ 317,524	$ 21,537	$ 0

Statement 3 - Form 990, Part III, Line a - Statement of Program Service Accomplishments

THE ORGANIZATION PERFORMS THE TRADITIONAL FUNCTIONS OF A HUMANE SOCIETY, CONCERNING THE CARE AND TREATMENT OF LOST AND UNWANTED ANIMALS, PREVENTION OF NEGLECT AND ABUSE THROUGH HUMANE EDUCATION AND RESCUE OF THE ANIMALS THE ORGANIZATION ALSO PROVIDES INSTRUCTION IN RESPONSIBLE PET OWNERSHIP AND SPAY/NEUTER OF PETS THROUGHOUT THE COUNTY AND COOPERATES WITH THE CITY AND COUNTY ANIMAL CONTROL OFFICERS TO REDUCE THE NUMBER OF ANIMALS REPRODUCING AT LARGE

Federal Statements

Statement 4 - Form 990, Part IV, Line 57 - Land, Buildings, and Equipment

Description	Beginning of Year	Accum Deprec	End of Year	Accum Deprec
EQUIPMENT	$ 113,926	$	$ 117,917	$
VEHICLES	20,327		15,887	
LAND, BUILDING & IMPROVEMENTS	563,087		568,616	
ACCUMULATED DEPERCIATION (IN TOTAL)		75,333		96,338
Total	$ 697,340	$ 75,333	$ 702,420	$ 96,338

Statement 5 - Form 990, Part IV, Line 58 - Other Assets

Description	Beginning of Year	End of Year
DONATED PROPERTY INVENTORY	$ 16,800	$ 14,516
Total	$ 16,800	$ 14,516

Statement 6 - Form 990, Part IV, Line 65 - Other Liabilities

Description	Beginning of Year	End of Year
ACCRUED SALARIES	$	$ 7,265
OTHER PAYABLES	463	486
RELATED PARTY PAYABLE	7,016	4,263
Total	$ 7,479	$ 12,014

Statement 7 - Form 990, Part VII, Line 93 - Program Service Revenue

Description	Business Code	Unrelated Amount	Exclusion Code	Exclusion Amount	Related Income
RENTAL INCOME		$		$	$ 2,982
ADOPTION FEES					62,077
BOARDING FEES					17,992
CLINIC FEES					23,146
IMPOUND FEES					11,989
LICENSE FEES					27,241
RABIES FEES					11,116
Total		$ 0		$ 0	$ 156,543

Statement 8 - Form 990, Part VIII - Relationship of Activities

Line No	Description
	LOVING HOMES
93b	FEES RECEIVED FOR PROVIDING SERVICES TO ANIMALS RETURNED TO SUITABLE HOMES.
93c	VACCANATION OF HEALTHY ANIMALS AGAINST RABIES, LOW-COST SPAY & NEUTER SERVICES
93d	FEES RECEIVED FOR PROVIDING SERVICES TO ANIMALS RETURNED TO SUITABLE HOMES
93e	LICENSING PROTECTS AND IDENTIFIES COMPANION ANIMALS
93e	VACCINATION OF HEALTHY ANIMALS AGAINST RABIES
93g	THESE CONTRACTS ENABLE THE ORGANIZATION TO PROVIDE A SAFE ENVIRONMENT FOR ANIMALS IMPOUNDED BY ANIMAL CONTROL, UNTIL ANIMALS ARE RECLAIMED, ADOPTED, OR HUMANELY EUTHANIZED
93a	RENTAL OF A PORTION OF FACILITY TOTRAVIS AGILITY GROUP, A NON-PROFIT ORGANIZATION PROVIDING OBEDIENCE TRAINING FOR COMPANION DOGS AND THEIR HUMAN COMPANIONS

Statement 9 - Schedule A, Part IV-A, Line 22 - Other Income

Description	2000	1999	1998	1997
MISCELLANEOUS	$ 14,864	$ 9,530	$ 9,582	$
FUNDRAISING	13,826			
GAIN ON THE DISPOSAL OF ASSETS	31,174			
Total	$ 59,864	$ 9,530	$ 9,582	$ 0