

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 period beginning **APR 1, 2001** and ending **MAR 31, 2002**

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

ANIMAL WELFARE SOCIETY, INC.

Number and street (or P O box if mail is not delivered to street address)

P.O. BOX 43

City or town, state or country, and ZIP + 4

WEST KENNEBUNK, ME 04094

D Employer identification number

23-7018176

E Telephone number

(207) 985-3244

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 number of affiliates

H(c) Are all affiliates included? **N/A** ☐ Yes ☐ No (If "No," attach a list.)

H(d) Is this a separate return filed by an or-

ganization covered by a group ruling? ☐ Yes ☒ No

I Enter 4-digit GEN

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

G Web site **WWW.ANIMALWELFARESOCIETY.ORG**

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

L Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 **1,052,387.**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

Revenue	1	Contributions, gifts, grants, and similar amounts received	1a	415,301.	1d	415,301.
	a	Direct public support	1b		2	64,690.
	b	Indirect public support	1c		3	28,290.
	c	Government contributions (grants)			4	10,415.
	d	Total (add lines 1a through 1c)			5	49,290.
		(cash \$ 415,301. noncash \$)				
	2	Program service revenue including government fees and contracts (from Part VII, line 93)				
	3	Membership dues and assessments				
	4	Interest on savings and temporary cash investments				
	5	Dividends and interest from securities				
Expenses	6a	Gross rents	6a		6c	
	b	Less rental expenses	6b		7	
	c	Net rental income or (loss) (subtract line 6b from line 6a)				
	7	Other investment income (describe)				
	8a	Gross amount from sale of assets other than inventory	(A) Securities	(B) Other	8d	-37,102.
		392,226.	8a			
	b	Less cost or other basis and sales expenses	429,328.	8b		
	c	Gain or (loss) (attach schedule)	-37,102.	8c		
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))	STMT 1			
	9	Special events and activities (attach schedule)				
Net Assets	a	Gross revenue (not including \$ 0. of contributions reported on line 1a)	9a	89,485.	9c	70,802.
	b	Less direct expenses other than fundraising expenses	9b	18,683.		
	c	Net income or (loss) from special events (subtract line 9b from line 9a)	SEE STATEMENT 2			
	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 (attach schedule) (subtract line 10b from line 10a)				
	11	Other revenue (from Part VII, line 103)			11	2,690.
	12	Total revenue (add lines 1, 2, 3, 4, 5, 6c, 7, 8c, 9c, 10c, and 11)			12	604,376.
	13	Program services (from line 44, column (B))			13	556,813.
	14	Management and general (from line 44, column (C))			14	173,229.
Net Assets	15	Fundraising (from line 44, column (D))			15	34,198.
	16	Payments to affiliates (attach schedule)			16	
	17	Total expenses (add lines 13 and 14, column (A))			17	764,240.
	18	Excess or (deficit) for the year (subtract line 17 from line 12)			18	-159,864.
	19	Net assets or fund balances at beginning of year (from line 73, column (A))			19	3,007,677.
	20	Other changes in net assets or fund balances (attach explanation)	SEE STATEMENT 3		20	76,773.
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)			21	2,924,586.

SCANNED SEP 18 '02

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.

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 \$ _____ noncash \$ _____				
23 Specific assistance to individuals (attach schedule)				
24 Benefits paid to or for members (attach schedule)				
25 Compensation of officers, directors, etc	0.	0.	0.	0.
26 Other salaries and wages	353,374.	242,273.	99,475.	11,626.
27 Pension plan contributions	6,781.	4,649.	1,909.	223.
28 Other employee benefits				
29 Payroll taxes	31,798.	21,801.	8,951.	1,046.
30 Professional fundraising fees				
31 Accounting fees	8,545.		8,545.	
32 Legal fees	2,090.		2,090.	
33 Supplies				
34 Telephone	6,608.	4,626.	991.	991.
35 Postage and shipping	10,840.	2,168.	2,168.	6,504.
36 Occupancy	26,689.	25,765.	924.	
37 Equipment rental and maintenance				
38 Printing and publications	15,077.	2,830.	2,830.	9,417.
39 Travel				
40 Conferences, conventions, and meetings				
41 Interest				
42 Depreciation, depletion, etc (attach schedule)	41,877.	36,656.	3,312.	1,909.
43 Other expenses not covered above (itemize)				
a _____	43a			
b _____	43b			
c _____	43c			
d _____	43d			
e SEE STATEMENT 4	43e	260,561.	42,034.	2,482.
44 Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15.	44	764,240.	173,229.	34,198.

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 AccomplishmentsWhat is the organization's primary exempt purpose? **SEE BELOW**

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 5	
(Grants and allocations \$ _____)	556,813.
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)	556,813.

Part IV Balance Sheets

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	50.	45	50.	
	46 Savings and temporary cash investments	387,544.	46	215,613.	
	47 a Accounts receivable	47a 1,942.			
	b Less allowance for doubtful accounts	47b	47c	1,942.	
	48 a Pledges receivable	48a			
	b Less allowance for doubtful accounts	48b	48c		
	49 Grants receivable		49		
	50 Receivables from officers, directors, trustees, and key employees		50		
	51 a Other notes and loans receivable	51a			
	b Less allowance for doubtful accounts	51b	51c		
	52 Inventories for sale or use	3,475.	52	3,479.	
	53 Prepaid expenses and deferred charges		53		
	54 Investments - securities	<input type="checkbox"/> Cost <input type="checkbox"/> FMV	54		
	55 a Investments - land, buildings, and equipment: basis	55a			
	b Less accumulated depreciation	55b	55c		
56 Investments - other	SEE STATEMENT 6	1,598,841.	56	1,672,185.	
57 a Land, buildings, and equipment: basis	57a 1,170,829.				
b Less accumulated depreciation	57b 468,756.	701,451.	57c	702,073.	
58 Other assets (describe <input type="checkbox"/> SEE STATEMENT 7)		376,609.	58	383,722.	
59 Total assets (add lines 45 through 58) (must equal line 74)		3,070,768.	59	2,979,064.	
Liabilities	60 Accounts payable and accrued expenses	35,286.	60	24,996.	
	61 Grants payable		61		
	62 Deferred revenue		62		
	63 Loans from officers, directors, trustees, and key employees		63		
	64 a Tax-exempt bond liabilities		64a		
	b Mortgages and other notes payable		64b		
	65 Other liabilities (describe <input type="checkbox"/> SEE STATEMENT 8)		27,805.	65	29,482.
66 Total liabilities (add lines 60 through 65)		63,091.	66	54,478.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74				
	67 Unrestricted	2,428,455.	67	2,354,929.	
	68 Temporarily restricted	157,473.	68	148,666.	
	69 Permanently restricted	421,749.	69	420,991.	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> 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)		3,007,677.	73	2,924,586.
	74 Total liabilities and net assets / fund balances (add lines 66 and 73)		3,070,768.	74	2,979,064.

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 VI Other Information		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
78 a	Did the organization have unrelated business gross income 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
80 a	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 <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt.		
81 a	Enter direct or indirect political expenditures. See line 81 instructions. 81a 0.	81b	X
b	Did the organization file Form 1120-POL for this year?	81b	X
82 a	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 N/A	82a	X
83 a	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	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible? N/A	84a	
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 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	85b	
c	Dues, assessments, and similar amounts from members 85c N/A		
d	Section 162(e) lobbying and political expenditures 85d N/A		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A		
g	Does the organization elect to pay the section 6033(e) tax on the amount 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) organizations Enter: a Initiation fees and capital contributions included on line 12 86a N/A		
b	Gross receipts, included on line 12, for public use of club facilities 86b N/A		
87	501(c)(12) organizations Enter: a Gross income from members or shareholders 87a N/A		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 87b N/A		
88	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
89 a	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) organizations 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.		
90 a	List the states with which a copy of this return is filed MAINE		
b	Number of employees employed in the pay period that includes March 12, 2001 90b 17		

91 The books are in care of STEVEN JACOBSEN Telephone no (207) 985-3244

Located at P.O. BOX 43, WEST KENNEBUNK, ME ZIP + 4 04094

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 N/A

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 section 512-513 or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue					
a					
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					64,690.
94 Membership dues and assessments			02	28,290.	
95 Interest on savings and temporary cash investments			14	10,415.	
96 Dividends and interest from securities			14	49,290.	
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			18	-37,102.	
101 Net income or (loss) from special events			01	70,802.	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a MISCELLANEOUS INCOME			01	2,690.	
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		124,385.	64,690.
105 Total (add line 104, columns (B), (D), and (E))					189,075.

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)
93G	CONTRACTS WITH AREA TOWNS TO PROVIDE KENNEL SERVICES ALLOW THE SOCIETY TO PROVIDE HUMANE SHELTER AND CARE TO ANIMALS IN NEED OF HOUSING, AND TO FURTHER THE CAUSE OF RESPONSIBLE ANIMAL ADOPTION.

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 page 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

Accompanying schedules and statements, and to the best of my knowledge and belief, it is true information of which preparer has any knowledge

8/27/02

Steven M. Jacobson, Executive Director

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

ANIMAL WELFARE SOCIETY, INC.

Employer identification number

23 7018176

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 benefit plans & deferred compensation	(e) Expense account and other allowances
<u>NONE</u> -----				

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 instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
<u>NONE</u> -----		

Total number of others receiving over \$50,000 for professional services ▶	0	

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

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 amounts on line 38, Part VI-A, or line 1 of Part VI-B)

1

X

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

- 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 expenses 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.)	455,958.	647,319.	811,381.	311,637.	2,226,295.
16 Membership fees received	21,518.	22,170.	17,344.	26,515.	87,547.
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					
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	67,802.	58,023.	48,187.	44,057.	218,069.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets.	73,064.	55,248.	SEE STATEMENT 10 57,818.	55,752.	241,882.
23 Total of lines 15 through 22	618,342.	782,760.	934,730.	437,961.	2,773,793.
24 Line 23 minus line 17	618,342.	782,760.	934,730.	437,961.	2,773,793.
25 Enter 1% of line 23	6,183.	7,828.	9,347.	4,380.	
26 Organizations described on lines 10 or 11 a Enter 2% of amount in column (e), line 24					26a N/A
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 N/A
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c N/A
d Add: Amounts from column (e) for lines 18 _____ 19 _____ 22 _____ 26b _____					26d N/A
e Public support (line 26c minus line 26d total)					26e N/A
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f N/A %
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: (2000) 0. (1999) 0. (1998) 0. (1997) 0.					
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: (2000) 0. (1999) 0. (1998) 0. (1997) 0.					
c Add: Amounts from column (e) for lines 15 2,226,295. 16 87,547. 17 _____ 20 _____ 21 _____					27c 2,313,842.
d Add: Line 27a total 0. and line 27b total 0.					27d 0.
e Public support (line 27c total minus line 27d total)					27e 2,313,842.
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)			27f 2,773,793.		
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g 83.4180%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h 7.8618%

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.

NONE

Part V Private School Questionnaire (See page 7 of the instructions)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

	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? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement.)	31	
<hr/>		
<hr/>		
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? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement.)	32d	
<hr/>		
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? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement.)	33h	
<hr/>		
<hr/>		
34 a Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b	
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)

N/A

(To be completed ONLY by an eligible organization that filed Form 5768)

Check ☒ **a** ☐ if the organization belongs to an affiliated groupCheck ☐ **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

N/A

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 -

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

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

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

N/A

Calendar year (or fiscal year beginning in) ▶	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
45 Lobbying nontaxable amount					0.
46 Lobbying ceiling amount (150% of line 45(e))					0.
47 Total lobbying expenditures					0.
48 Grassroots nontaxable amount					0.
49 Grassroots ceiling amount (150% of line 48(e))					0.
50 Grassroots lobbying expenditures					0.

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 instructions)

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:

- 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.)

Yes	No	Amount
		0.

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

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2001

Name of organization

ANIMAL WELFARE SOCIETY, INC.

Employer identification number

23-7018176

Organization type (check one)

Filers of

Section:

Form 990 or 990-EZ



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 box(es) for both the General rule and a Special rule-see instructions)

General Rule-

- ☒ For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor (Complete Parts I and II)

Special Rules-

- ☐ For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms (Complete Parts I and II)
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals (Complete Parts I, II, and III)
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the Parts unless the General rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year) ▶ \$ _____

Caution Organizations that are not covered by the General rule and/or the Special rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they must check the box in the heading of their Form 990, Form 990-EZ, or on line 1 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule B (Form 990, 990-EZ, or 990-PF) (2001)

Name of organization

Employer identification number

ANIMAL WELFARE SOCIETY, INC.

23-7018176

Part I Contributors (See Specific Instructions)

(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>1</u>		\$ <u>6,715.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>2</u>		\$ <u>60,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>3</u>		\$ <u>15,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>4</u>		\$ <u>10,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>5</u>		\$ <u>11,237.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>6</u>		\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization

Employer identification number

ANIMAL WELFARE SOCIETY, INC.

23-7018176

Part I Contributors (See Specific Instructions)

(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7		\$ 36,995.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution)
8		\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
9		\$ 5,587.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
10		\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization

Employer identification number

ANIMAL WELFARE SOCIETY, INC.

23-7018176

Part II Noncash Property (See Specific Instructions)

(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
5	STOCK (10,237) AND CASH (1,000)	\$ 10,237.	01/29/02
7	STOCK (OCEAN NATIONAL BANK)	\$ 36,995.	03/08/02
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

**ANIMAL WELFARE SOCIETY
BOARD OF DIRECTORS 2001-2002
(as of December 19, 2001)**

POSITION	NAME	TEL / E-Mail	TERM
1 President	John Sylvester 142 Waterboro Road Alfred, Maine 04002	324-7321	1999-2002 2nd
2 Vice President	Stan Barwise 6 Sea Lane Road Kennebunkport, Maine 04046	967-5253 teedog@cybertours.com	1999-2002 1st
3 Treasurer	Stephen Canders Suite 1 11 Main Street Kennebunk, Maine, 04043	985-1194 HM 985-1199 WK 985-3644 FX mainelegal@int-usa.net	2000-2003 1st
4 Recording Secretary	Sandra Bisson P O Box 567 Sanford, Maine 04073	324-8956 HM 985-3305 WK 967-9794 FX sbisson@oceannationalbank.com	2001-2004 2nd
5 Corresponding Secretary	Claudia Richards 35 Forest Hill Lane Kennebunk Maine 04043	967-2799 HM 967-5212 WK Claudia@kbunktv.com	2000-2003 1st
6	Ron Mullenau 34 Bittersweet Arundel, Maine 04046	985-1536 HM 985-0215 WK 985-4620 FX rmullenau@gwi.net	1999-2002 2nd
7	Joe Maynard RR 2, Box 247 Kennebunkport, Maine 04046	967-2517	2000-2003 2nd
8	Emilie Spas-Faul 2 White Oak Lane Alfred, Maine 04002	490-5901 HM 842-6721 WK 791-5311 FX emilie_spas@wrightexpress.com	2001-2004 2nd
9	Lloyd P. LaFountain III 27 Sokokis Road Biddeford, Maine 04005	283-8529 HM 282-6131 WK 282-6132 FX (call office first) 287-1515 Me Senate Office gohuskers@cybertours.com	1999-2002 1st
10	Christ Angelos P O Box 919 Kennebunk, Maine 04043	967-2913 HM 985-4774 WK cta@mypowerlink.net	2000-2003 1st
11	Barry Hazen 389 Cat Mousam Road Kennebunk, Maine 04043	985-3870 WK 985-7772 HM bhx2@adelphia.net	2001-2002 Partial

12	Cathy Roberts P O Box 1113 Kennebunkport, Maine 04046	67-4574 HM 856-8124 WK croberts@idexx.com	2001-2004 1st
13	Vern Moore P O Box 3052 Kennebunkport, Maine 04046	207-967-0648 vmoore@mailbox.unc.edu	2001-2004 1st
14	Marian Reagan 3 Winter Harbor Rd Kennebunkport, Maine 04046	967-4210 Hm 967-8830 Fx mareagan@winterharbor.com	partial term ends in 2002
15	Barbara I Belik 8 Woodlawn Avenue Kennebunkport, Maine 04046	967-4851 HM 985-7000 WK 985-7707 Fx bbelik@lexmaine.com	partial term ends in 2004

Executive Director	Steven M Jacobsen 56 Woodside Drive Kennebunk, Maine 04043	985-4107 HM 985-3244 WK 229-2620 Cell awssheller@cybertours.com (Home Office) awsedr@cybertours.com (Shelter Office)
Shelter Manager	Denise Springer 11 Prescott Street Sanford, Maine 04073	324-3182 HM 985-3244 X103 WK awsmgr@cybertours.com

Trustees of The Animal Welfare Society Endowment Trust Fund

Boyd Long P O Box 542A Kennebunkport, Maine 04046	967-5389
O P Jackson P O Box 560A Kennebunkport, Maine 04046	
John Hughes III 12 Chase Hill Rd Kennebunk, Maine 04043	967-3313 WK 985-7568 HM jphughes@biddeford.com
George Stewart 12 Fairfield Drive Kennebunk, Maine 04043	
Steven M Jacobsen as above	

FORM 990	GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES			STATEMENT	1
DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)	
1021.570 SH VANGUARD INTER-TERM TREAS FUND	11,319.	10,964.	0.	355.	
251.994 SH VANGUARD INTER-TERM TREAS FUND	2,742.	2,705.	0.	37.	
1531.532 SH VANGUARD INTER-TERM TREAS FUND	17,000.	16,441.	0.	559.	
912.409 SH VANGUARD INTER-TERM TREAS FUND	10,000.	9,827.	0.	173.	
VARIOUS - SEE SCHEDULE ATTACHED	351,165.	389,391.	0.	-38,226.	
TO FORM 990, PART I, LINE 8	392,226.	429,328.	0.	-37,102.	

FORM 990	SPECIAL EVENTS AND ACTIVITIES				STATEMENT	2
DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME	
VARIOUS EVENTS AND ACTIVITIES	89,485.		89,485.	18,683.	70,802.	
TO FM 990, PART I, LINE 9	89,485.		89,485.	18,683.	70,802.	

FORM 990	OTHER CHANGES IN NET ASSETS OR FUND BALANCES			STATEMENT	3
DESCRIPTION	AMOUNT				
GAINS (LOSSES) ON CHARITABLE TRUSTS	20,608.				
NET UNREALIZED GAINS ON INVESTMENTS	56,165.				
TOTAL TO FORM 990, PART I, LINE 20	76,773.				

FORM 990

OTHER EXPENSES

STATEMENT

4

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
AUTO EXPENSE	3,547.	3,086.	143.	318.
COMPUTER CONSULTING	2,117.	847.	423.	847.
EDUCATION	7,464.	7,464.		
FOOD-ANIMAL	4,166.	4,166.		
MISCELLANEOUS	9,749.	5,229.	4,960.	-440.
OFFICE SUPPLIES	6,804.	732.	5,342.	730.
REPAIRS AND MAINTENANCE	26,061.	23,762.	2,299.	
SHELTER OPERATIONS	13,799.	13,799.		
SPAY/NEUTER PROGRAM	45,647.	45,647.		
VETERINARY FEES	72,532.	72,532.		
VETERINARY SUPPLIES AND OTHER	12,103.	12,103.		
PROFESSIONAL FEES	3,099.		3,099.	
BROKER FEES	9,722.		9,722.	
ANNUITY EXPENSE	5,500.		5,500.	
INSURANCE	38,251.	26,678.	10,546.	1,027.
TOTAL TO FM 990, LN 43	260,561.	216,045.	42,034.	2,482.

FORM 990	STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS	STATEMENT	5
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DESCRIPTION OF PROGRAM SERVICE ONE

THE SOCIETY EXISTS TO PROVIDE HUMANE SHELTER AND CARE TO ANIMALS TEMPORARILY IN NEED OF HOUSING, AND TO FURTHER THE CAUSE OF RESPONSIBLE ANIMAL ADOPTION AND OWNERSHIP THROUGH EDUCATION AND PUBLIC AWARENESS. THE SOCIETY ACTIVELY PROMOTES KINDNESS, THE ELIMINATION OF CREULTY AND NEGLECT TO ALL ANIMALS, AND THE LIFELONG COMMITMENT OF PEOPLE TO THEIR PETS.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE A		556,813.

FORM 990	OTHER INVESTMENTS	STATEMENT	6
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DESCRIPTION	VALUATION METHOD	AMOUNT
SECURITIES AND OTHER INVESTMENTS	MARKET VALUE	1,672,185.
TOTAL TO FORM 990, PART IV, LINE 56, COLUMN B		1,672,185.

FORM 990	OTHER ASSETS	STATEMENT	7
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DESCRIPTION	AMOUNT
BENEFICIAL INTEREST IN CHARITABLE TRUSTS	383,722.
TOTAL TO FORM 990, PART IV, LINE 58, COLUMN B	383,722.

FORM 990	OTHER LIABILITIES	STATEMENT	8
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DESCRIPTION	AMOUNT
WAGES PAYABLE	12,812.
PREPAID SHELTER CONTRACTS	16,670.
TOTAL TO FORM 990, PART IV, LINE 65, COLUMN B	29,482.

FORM 990	OTHER REVENUE NOT INCLUDED ON FORM 990	STATEMENT	9
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DESCRIPTION	AMOUNT
GAINS ON CHARITABLE TRUSTS	20,608.
TOTAL TO FORM 990, PART IV-A	20,608.

SCHEDULE A	OTHER INCOME	STATEMENT	10
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DESCRIPTION	2000 AMOUNT	1999 AMOUNT	1998 AMOUNT	1997 AMOUNT
SPECIAL EVENTS REVENUE	71,744.	55,248.	57,818.	55,752.
MISCELLANEOUS INCOME	1,320.	0.	0.	0.
TOTAL TO SCHEDULE A, LINE 22	73,064.	55,248.	57,818.	55,752.

H. M. Payson & Co

Print Date 04/05/2002

Account Number 050-02105

YEAR-END SUMMARY

Page 1

ANIMAL WELFARE SOCIETY
INC ENDOWMENT TRUST FUNDFOR TAX YEAR ENDING 03/31/2002
SOC SEC / TAX ID 23-7018176**DETAIL OF SALES & MATURITIES**

<u>Transaction Description</u>	<u>Gross Proceeds</u>	<u>Expense Of Sale</u>	<u>Date* Acquired</u>	<u>Units By Lot</u>	<u>Tax Cost* By Lot</u>
04/12/2001 TENDER @80 00 91.028 LITTON INDS INC	7282 24		03/24/1999 10/28/1997	27 204 63 824	1506 55 3213 54
SLD 04/19/2001 500 000 WILLAMETTE INDS INC	23585 00	50 79	10/05/2000	500 000	14133 75
04/27/01 CASH IN LIEU OF FRACTIONAL SHARE 412 NORTHROP GRUMMAN CORP	35 61		10/28/1997	0 412	22 34
SLD 05/22/2001 359 000 NORTHROP GRUMMAN CORP	32514 63	36 99	10/28/1997 03/24/1999 05/20/1999	223 544 95 456 40 000	12120.87 5692 83 2794 00
SLD 06/06/2001 500 000 WILLAMETTE INDS INC	24385 00	50 82	10/05/2000	500 000	14133 75
07/09/01 CASH IN LIEU OF FRACTIONAL SHARE .700 AT&T WIRELESS SVCS INC	11 51		08/18/1997	0 700	12 75
SLD 07/26/2001 64 000 WORLD COM INC MCI GROUP	972 80	3 04	02/01/2000 03/22/2000 06/23/2000 10/05/2000 12/26/2000	20 000 8 000 8 000 8 000 20 000	867 47 349 13 298 56 207 63 274 25
MATURED 20,000 000 ONTARIO PROV CDA 8% 10/17/2001	20000 00		04/20/1992	20000 000	20081 60
SLD 10/18/2001 400 000 GPU INC	16108 00	40 54	11/17/1995	400 000	12590 00

Account Number 050-02105

YEAR-END SUMMARY

Page 2

ANIMAL WELFARE SOCIETY
INC ENDOWMENT TRUST FUNDFOR TAX YEAR ENDING 03/31/2002
SOC SEC / TAX ID 23-7018176DETAIL OF SALES & MATURITIES

<u>Transaction Description</u>	<u>Gross Proceeds</u>	<u>Expense Of Sale</u>	<u>Date* Acquired</u>	<u>Units By Lot</u>	<u>Tax Cost* By Lot</u>
SLD 10/18/2001 80 000 ZIMMER HOLDINGS INC	2303 40	3 08	04/19/1991 09/01/1995	60 000 20 000	579 60 165 83
SLD 10/30/2001 300 000 NORTHROP GRUMMAN CORP	30561 00	31 02	05/20/1999	300 000	20955 00
SLD 10/30/2001 100 000 NORTHROP GRUMMAN CORP	10180 00	10 34	05/20/1999	100 000	6985 00
SLD 10/30/2001 482.000 AT&T WIRELESS SVCS INC	6868 50	48 43	08/18/1997 06/23/2000 10/05/2000 12/13/2000	184 335 64 360 72 405 160 900	3357 05 1566.59 1469 55 2433 66
SLD 12/05/2001 575 000 PEPSICO INC	27841 50	58 43	01/20/2000	575 000	15540 62
SLD 12/05/2001 700 000 ALLSTATE CORP	23072 00	70 77	11/20/1998 06/16/1999	500 000 200 000	22050 00 7787 50
SLD 01/04/2002 600 000 APPLE COMPUTER INC	13992 00	60.21	04/22/1999	600 000	10680 00
SLD 01/18/2002 920 000 DANA CORP	12199 20	50.19	05/11/1998 03/22/2000	520 000 400 000	28319 98 10290 00
SLD 01/18/2002 1,620 000 FLEETWOOD ENTERPRISES INC	16540 20	50 25	08/27/1998 09/02/1998 10/30/1998 08/24/1999	470 000 150 000 290 000 710 000	16231.64 4961 32 9164 00 15037 94
SLD 01/22/2002 230 000 ABBOTT LABS	13197 40	25 20	08/09/1999	230 000	9675 18
SLD 01/22/2002 740 000 UNITED STS STL CORP NEW	13031 40	50 20	10/02/1998	740 000	17849 84

Account Number 050-02105

YEAR-END SUMMARY

Page 3

ANIMAL WELFARE SOCIETY
INC ENDOWMENT TRUST FUNDFOR TAX YEAR ENDING 03/31/2002
SOC SEC / TAX ID 23-7018176DETAIL OF SALES & MATURITIES

<u>Transaction Description</u>	<u>Gross Proceeds</u>	<u>Expense Of Sale</u>	<u>Date* Acquired</u>	<u>Units By Lot</u>	<u>Tax Cost* By Lot</u>
SLD 03/05/2002 640 000 HEWLETT PACKARD CO	13363 20	50 21	10/15/1999	640 000	20302.62
SLD 03/05/2002 1,500 000 COMPAQ COMPUTER CORP	15585 00	50 24	11/30/1998 03/22/2000 12/26/2000	830 000 170 000 500 000	27213 63 5380 00 7740 00
SLD 03/18/2002 1,500 000 AT&T CORP	23700 00	50 36	08/18/1997 06/23/2000 10/05/2000 12/13/2000	575 000 200 000 225 000 500 000	11714 37 5445 91 5108 58 8460 09
04/15/01 PRINCIPAL DISTRIBUTION ON GNMA I&II - SINGLE ISSUER POOL 374663 6% 01/15/2009	452 92		11/04/1998		452 92
05/15/01 PRINCIPAL DISTRIBUTION ON GNMA I&II - SINGLE ISSUER POOL 374663 6% 01/15/2009	405 88		11/04/1998		405 88
06/15/01 PRINCIPAL DISTRIBUTION ON GNMA I&II - SINGLE ISSUER POOL 374663 6% 01/15/2009	234 45		11/04/1998		234 45
07/15/01 PRINCIPAL DISTRIBUTION ON GNMA I&II - SINGLE ISSUER POOL 374663 6% 01/15/2009	393 28		11/04/1998		393 28
08/15/01 PRINCIPAL DISTRIBUTION ON GNMA I&II - SINGLE ISSUER POOL 374663 6% 01/15/2009	261 08		11/04/1998		261 08

H. M. Payson & Co

Print Date 04/05/2002

Account Number 050-02105

YEAR-END SUMMARY

Page 4

ANIMAL WELFARE SOCIETY
INC ENDOWMENT TRUST FUND

FOR TAX YEAR ENDING 03/31/2002
SOC SEC / TAX ID 23-7018176

DETAIL OF SALES & MATURITIES

<u>Transaction Description</u>	<u>Gross Proceeds</u>	<u>Expense Of Sale</u>	<u>Date* Acquired</u>	<u>Units By Lot</u>	<u>Tax Cost* By Lot</u>
09/15/01 PRINCIPAL DISTRIBUTION ON GNMA I&II - SINGLE ISSUER POOL 374663 6% 01/15/2009	481 85		11/04/1998		481 85
10/15/01 PRINCIPAL DISTRIBUTION ON GNMA I&II - SINGLE ISSUER POOL 374663 6% 01/15/2009	215 57		11/04/1998		215 57
11/15/01 PRINCIPAL DISTRIBUTION ON GNMA I&II - SINGLE ISSUER POOL 374663 6% 01/15/2009	308 08		11/04/1998		308 08
12/15/01 PRINCIPAL DISTRIBUTION ON GNMA I&II - SINGLE ISSUER POOL 374663 6% 01/15/2009	145 49		11/04/1998		145 49
01/15/02 PRINCIPAL DISTRIBUTION ON GNMA I&II - SINGLE ISSUER POOL 374663 6% 01/15/2009	403 13		11/04/1998		403 13
02/15/02 PRINCIPAL DISTRIBUTION ON GNMA I&II - SINGLE ISSUER POOL 374663 6% 01/15/2009	319 21		11/04/1998		319 21
03/15/02 PRINCIPAL DISTRIBUTION ON GNMA I&II - SINGLE ISSUER POOL 374663 6% 01/15/2009	214 30		11/04/1998		214 30
	<u>351,164.83</u>	<u>791.11</u>			<u>388,599.76</u>

Summary 0.c

(*) For federal income tax purposes, tax cost is gain or loss, and date acquired is generally the period. There are special rules for securities acquired by gift. Since tax cost and furnished to us from outside sources, we can not tax advisor about special rules that may apply.

Proceeds 351,164.83 + calculating
Exp of Sale 791.11 - ie holding
Cost 388,599.76 - h and for
003 on may be
Realized 38,226.04-T consult your
Gain

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

► File a separate application for each return

- If you are filing for an **Automatic 3-Month Extension**, complete only Part I and check this box ☒
- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only Part II (on page 2 of this form)

Note Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time - Only submit original (no copies needed)

Note Form 990-T corporations requesting an automatic 6-month extension - check this box and complete Part I only
All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041

Type or print	Name of Exempt Organization	Employer identification number
	ANIMAL WELFARE SOCIETY, INC.	23-7018176
	Number, street, and room or suite no. If a P.O. box, see instructions	
	P.O. BOX 43	
File by the due date for filing your return. See instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
	WEST KENNEBUNK, ME 04094	

Check type of return to be filed (file a separate application for each return)

- | | | |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041 A | <input type="checkbox"/> Form 8870 |

- If the organization does **not** have an office or place of business in the United States, check this box ☐
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension will cover

- 1 I request an automatic 3 month (6-month, for 990-T corporation) extension of time until **NOVEMBER 15, 2002** to file the exempt organization return for the organization named above. The extension is for the organization's return for:
► ☐ calendar year _____ or
► ☒ tax year beginning **APR 1, 2001**, and ending **MAR 31, 2002**

- 2 If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

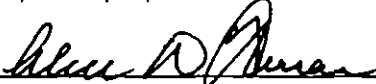
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ _____

b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit \$ _____

c **Balance Due** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ **N/A**

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ►  Title ► **CPA** Date ► **8.6.02**

LHA For Paperwork Reduction Act Notice, see instruction

Form **8868** (12-2000)