

**Return of Organization Exempt From Income Tax**

**2002**

Department of the Treasury  
Internal Revenue Service

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

Open to Public Inspection

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

**A** For the 2002 calendar year, or tax year period beginning and ending

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	<b>C</b> Name of organization <b>ANIMAL DEFENSE LEAGUE OF TEXAS</b>	<b>D</b> Employer identification number <b>74-6002033</b>
		Number and street (or P O box if mail is not delivered to street address) <b>11300 NACOGDOCHES ROAD</b>	Room/suite 
		City or town, state or country, and ZIP + 4 <b>SAN ANTONIO, TX 78217-2318</b>	<b>F</b> Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> 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 organization covered by a group ruling?  Yes  No

**G** Web site **WWW.ANIMALDEFENSELEAGUE.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

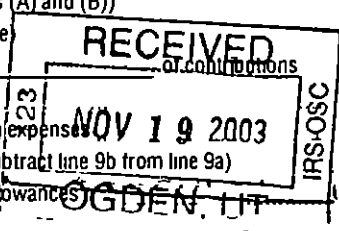
**I** Enter 4-digit GEN

**L** Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 **1,613,460.**

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

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

<b>Revenue</b>	1	Contributions, gifts, grants, and similar amounts received				
		a	Direct public support	1a	1,492,304.	
		b	Indirect public support	1b		
		c	Government contributions (grants)	1c		
		d	Total (add lines 1a through 1c) (cash \$ <u>1,492,304.</u> noncash \$ _____)	1d	1,492,304.	
		2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	76,263.	
		3	Membership dues and assessments	3		
		4	Interest on savings and temporary cash investments	4	665.	
		5	Dividends and interest from securities	5	12,061.	
		6a	Gross rents <b>SEE STATEMENT 1</b>	6a	10,637.	
		b	Less rental expenses <b>SEE STATEMENT 2</b>	6b	3,450.	
		c	Net rental income or (loss) (subtract line 6b from line 6a)	6c	7,187.	
	7	Other investment income (describe <b>ROYALTY INCOME</b> )	7	1,060.		
	8a	Gross amount from sale of assets other than inventory	(A) Securities	(B) Other		
			8a			
	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 \$ _____ reported on line 1a)	9a			
	b	Less direct expenses other than fundraising expenses	9b			
	c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c			
	10a	Gross sales of inventory, less returns and allowances	10a	13,768.		
	b	Less cost of goods sold	10b	11,389.		
	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a) <b>STMT 3</b>	10c	2,379.		
	11	Other revenue (from Part VII, line 103)	11	6,702.		
	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	1,598,621.		
<b>Expenses</b>	13	Program services (from line 44, column (B))	13	1,316,210.		
	14	Management and general (from line 44, column (C))	14	306,720.		
	15	Fundraising (from line 44, column (D))	15	27,879.		
	16	Payments to affiliates (attach schedule)	16			
	17	Total expenses (add lines 16 and 44, column (A))	17	1,650,809.		
<b>Net Assets</b>	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	-52,188.		
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	1,668,783.		
	20	Other changes in net assets or fund balances (attach explanation) <b>SEE STATEMENT 4</b>	20	9,457.		
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	1,626,052.		



FILMED  
 ucl 10 '03

**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 \$ _____	22			
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25 Compensation of officers, directors, etc.	25 50,000.	0.	50,000.	0.
26 Other salaries and wages	26 883,367.	732,299.	151,068.	
27 Pension plan contributions	27			
28 Other employee benefits	28 39,598.	31,142.	8,456.	
29 Payroll taxes	29 76,729.	60,955.	15,774.	
30 Professional fundraising fees	30			
31 Accounting fees	31 12,720.		12,720.	
32 Legal fees	32 6,992.		6,992.	
33 Supplies	33 7,348.		7,348.	
34 Telephone	34 8,646.	7,331.	1,315.	
35 Postage and shipping	35 10,496.		10,496.	
36 Occupancy	36 5,670.	5,670.		
37 Equipment rental and maintenance	37 6,433.	6,433.		
38 Printing and publications	38 26,429.		26,429.	
39 Travel	39 222.	222.		
40 Conferences, conventions, and meetings	40			
41 Interest	41			
42 Depreciation, depletion, etc (attach schedule)	42 64,535.	64,535.		
43 Other expenses not covered above (itemize)				
a _____	43a			
b _____	43b			
c _____	43c			
d _____	43d			
e <b>SEE STATEMENT 5</b>	43e	451,624.	407,623.	16,122.
44 <b>Total functional expenses (add lines 22 through 43)</b> <small>Organizations completing columns (B)-(D) carry these totals to lines 13-15</small>	44	1,650,809.	1,316,210.	306,720.
				27,879.

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**

What 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 <b>SHELTER FOR LOST AND ABANDONED ANIMALS, PROVIDING FOR THEIR CARE, TREATMENT, AND ADOPTION.</b>	(Grants and allocations \$ )	1,316,210.
b _____	(Grants and allocations \$ )	
c _____	(Grants and allocations \$ )	
d _____	(Grants and allocations \$ )	
e Other program services (attach schedule)	(Grants and allocations \$ )	
f <b>Total of Program Service Expenses (should equal line 44, column (B), Program services)</b>		1,316,210.

**Part IV Balance Sheets**

Note		(A)		(B)	
Where required, attached schedules and amounts within the description column should be for end-of-year amounts only		Beginning of year		End of year	
Assets	45	Cash - non-interest-bearing	57,331.	45	15,954.
	46	Savings and temporary cash investments	259,686.	46	255,463.
	47 a	Accounts receivable	47a		
	b	Less allowance for doubtful accounts	47b	47c	
	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		52	
	53	Prepaid expenses and deferred charges		53	
	54	Investments - securities <b>STMT 6</b> <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	96,238.	54	73,827.
	55 a	Investments - land, buildings, and equipment: basis	55a		
	b	Less accumulated depreciation	55b	55c	
56	Investments - other		56		
57 a	Land, buildings, and equipment, basis	57a	2,199,303.		
b	Less accumulated depreciation <b>STMT 7</b>	57b	916,463.	57c	
58	Other assets (describe <input type="checkbox"/> )		1,258,059.	58	
59	<b>Total assets</b> (add lines 45 through 58) (must equal line 74)		1,671,314.	59	1,628,084.
Liabilities	60	Accounts payable and accrued expenses	2,531.	60	2,032.
	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"/> )		65		
66	<b>Total liabilities</b> (add lines 60 through 65)		2,531.	66	2,032.
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	1,560,514.	67	1,384,646.
	68	Temporarily restricted	108,269.	68	241,406.
	69	Permanently restricted		69	
	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	<b>Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)		1,668,783.	73	1,626,052.
74	<b>Total liabilities and net assets / fund balances</b> (add lines 66 and 73)		1,671,314.	74	1,628,084.

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

76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity
77 Were any changes made in the organizing or governing documents but not reported to the IRS?
78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?
78 b If "Yes," has it filed a tax return on Form 990-T for this year?
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year?
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?
80 b If "Yes," enter the name of the organization ANIMAL DEFENSE LEAGUE FOUNDATION and check whether it is [X] exempt or [ ] nonexempt.
81 a Enter direct or indirect political expenditures See line 81 instructions 81a 0.
81 b Did the organization file Form 1120-POL for this year?
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?
82 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
83 a Did the organization comply with the public inspection requirements for returns and exemption applications?
83 b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?
84 a Did the organization solicit any contributions or gifts that were not tax deductible?
84 b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?
85 501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?
85 b Did the organization make only in-house lobbying expenditures of \$2,000 or less?
85 c Dues, assessments, and similar amounts from members
85 d Section 162(e) lobbying and political expenditures
85 e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices
85 f Taxable amount of lobbying and political expenditures (line 85d less 85e)
85 g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?
85 h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?
86 501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 12
86 b Gross receipts, included on line 12, for public use of club facilities
87 501(c)(12) organizations Enter a Gross income from members or shareholders
87 b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)
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?
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.
89 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?
89 c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958
89 d Enter Amount of tax on line 89c, above, reimbursed by the organization
90 a List the states with which a copy of this return is filed NONE
90 b Number of employees employed in the pay period that includes March 12, 2002 90b 48
91 The books are in care of ANIMAL DEFENSE LEAGUE OF TEXAS Telephone no (210) 655-1481
Located at 11300 NACOGDOCHES, SAN ANTONIO, TX ZIP + 4 78217-2318
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 page 31 of the instructions)

	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	
<b>93</b> Program service revenue					
<b>a</b> BOARDING KENNEL &	812900	76,263.			
<b>b</b> GROOMING					
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>f</b> Medicare/Medicaid payments					
<b>g</b> Fees and contracts from government agencies					
<b>94</b> Membership dues and assessments					
<b>95</b> Interest on savings and temporary cash investments			14	665.	
<b>96</b> Dividends and interest from securities			14	12,061.	
<b>97</b> Net rental income or (loss) from real estate					
<b>a</b> debt-financed property					
<b>b</b> not debt-financed property			16	7,187.	
<b>98</b> Net rental income or (loss) from personal property					
<b>99</b> Other investment income			15	1,060.	
<b>100</b> Gain or (loss) from sales of assets other than inventory					
<b>101</b> Net income or (loss) from special events					
<b>102</b> Gross profit or (loss) from sales of inventory			03	2,379.	
<b>103</b> Other revenue					
<b>a</b> MISCELLANEOUS			01	6,702.	
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>104</b> Subtotal (add columns (B), (D), and (E))		76,263.		30,054.	0.
<b>105</b> Total (add line 104, columns (B), (D), and (E))					106,317.

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 page 32 of the instructions)

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)
▼	

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See page 32 of the instructions)

(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 page 33 of the instructions)

- (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

completing schedules and statements, and to the best of my knowledge and belief, it is true,  
information of which preparer has any knowledge  
1/15/03 ▶ Mark Galbreath Business Director  
te Type or print name and title

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

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

OMB No 1545-0047

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

**2002**

Department of the Treasury  
Internal Revenue Service

**Supplementary Information-(See separate instructions.)**  
▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization **ANIMAL DEFENSE LEAGUE OF TEXAS** Employer identification number **74 6002033**

**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
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 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
NONE		
Total number of others receiving over \$50,000 for professional services ▶	0	

<b>Part III Statements About Activities</b> (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 <b>▶</b> \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line 1 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		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?		X
b	Lending of money or other extension of credit?		X
c	Furnishing of goods, services, or facilities?		X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? <b>SEE PART V, FORM 990</b>	X	
e	Transfer of any part of its income or assets?		X
3	Does the organization make grants for scholarships, fellowships, student loans, etc.? (See Note below )		X
4	Do you have a section 403(b) annuity plan for your employees?		X
<b>Note</b> 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 5 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)(ii) 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)(v) (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 5 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) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28)	1,426,457.	938,176.	1,201,516.	1,051,578.	4,617,727.
16 Membership fees received					
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	7,636.	6,065.	4,668.	4,722.	23,091.
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	101,133.	132,638.	141,913.	119,968.	495,652.
19 Net income from unrelated business activities not included in line 18	3,394.	3,396.	1,457.	11,720.	19,967.
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	6,191.	2,565.	1,782.	1,893.	12,431.
23 Total of lines 15 through 22	1,544,811.	1,082,840.	1,351,336.	1,189,881.	5,168,868.
24 Line 23 minus line 17	1,537,175.	1,076,775.	1,346,668.	1,185,159.	5,145,777.
25 Enter 1% of line 23	15,448.	10,828.	13,513.	11,899.	
26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24				26a 102,916.
	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 1998 through 2001 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the sum of all these excess amounts				26b 785,408.
	c Total support for section 509(a)(1) test: Enter line 24, column (e)				26c 5,145,777.
	d Add Amounts from column (e) for lines	18 495,652.	19 19,967.		
		22 12,431.	26b 785,408.		
	e Public support (line 26c minus line 26d total)				26e 3,832,319.
	f Public support percentage (line 26e (numerator) divided by line 26c (denominator))				26f 74.4750%
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
	(2001)	(2000)	(1999)	(1998)	
	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
	(2001)	(2000)	(1999)	(1998)	
	c Add Amounts from column (e) for lines	15 _____	16 _____		
		17 _____	20 _____	21 _____	
	d Add Line 27a total _____ and line 27b total _____				27c N/A
	e Public support (line 27c total minus line 27d total)				27d N/A
	f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)				27e N/A
	g Public support percentage (line 27e (numerator) divided by line 27f (denominator))				27g N/A %
	h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))				27h N/A %
28 Unusual Grants	For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, 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?		
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?		
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.)		
_____			
_____			
_____			
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	
_____			
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	
_____			
_____			
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 group Check  b if you checked "a" and "limited control" provisions apply

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for ALL electing organizations												
(The term "expenditures" means amounts paid or incurred )															
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	N/A													
37	Total lobbying expenditures to influence a legislative body (direct lobbying)														
38	Total lobbying expenditures (add lines 36 and 37)														
39	Other exempt purpose expenditures														
40	Total exempt purpose expenditures (add lines 38 and 39)														
41	Lobbying nontaxable amount. Enter the amount from the following table -														
	<table border="0"> <tr> <td><b>If the amount on line 40 is -</b></td> <td><b>The lobbying nontaxable amount is -</b></td> </tr> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 40</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </table>	<b>If the amount on line 40 is -</b>	<b>The lobbying nontaxable amount is -</b>	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		
<b>If the amount on line 40 is -</b>	<b>The lobbying nontaxable amount is -</b>														
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														
42	Grassroots nontaxable amount (enter 25% of line 41)														
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36														
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38														

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.)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(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 11 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:	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 )			0.

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



• If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II and check this box

Note Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)

<b>Part II Additional (not automatic) 3-Month Extension of Time - Must file Original and One Copy.</b>		
Type or print.	Name of Exempt Organization <b>ANIMAL DEFENSE LEAGUE OF TEXAS</b>	Employer identification number <b>74-6002033</b>
File by the extended due date for filing the return See instructions	Number, street, and room or suite no. If a P O box, see instructions <b>11300 NACOGDOCHES ROAD</b>	For IRS use only
	City, town or post office, state, and ZIP code For a foreign address, see instructions <b>SAN ANTONIO, TX 78217-2318</b>	

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

- Form 990     Form 990 EZ     Form 990 T (sec 401(a) or 408(a) trust)     Form 1041 A     Form 5227     Form 8870
- Form 990 BL     Form 990-PF     Form 990 T (trust other than above)     Form 4720     Form 6069

STOP Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- 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 is for

- 4 I request an additional 3 month extension of time until NOVEMBER 17, 2003
- 5 For calendar year 2002, or other tax year beginning \_\_\_\_\_ and ending \_\_\_\_\_
- 6 If this tax year is for less than 12 months, check reason  Initial return     Final return     Change in accounting period
- 7 State in detail why you need the extension

**ADDITIONAL TIME IS NEEDED TO GATHER INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.**

- 8a 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, 990 T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 \$ \_\_\_\_\_
- c **Balance Due** Subtract line 8b from line 8a 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 [Signature] Title CPA Date 8/12/03

**Notice to Applicant - To Be Completed by the IRS**

- We have approved this application Please attach this form to the organization's return
- We have not approved this application However, we have granted a 10-day grace period from the date shown below or the due date of the organization's return (including any prior extensions) This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return Please attach this form to the organization's return
- We have not approved this application After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file We are not granting the 10-day grace period
- We cannot consider this application because it was filed after the due date of the return for which an extension was requested
- Other \_\_\_\_\_

EXTENSION APPROVED  
AUG 21 2003  
LINDA WEISKOPF, FIELD DIRECTOR  
PROCESSING, OGDEN

Director \_\_\_\_\_ By \_\_\_\_\_ Date \_\_\_\_\_

Alternate Mailing Address - Enter the address if you want the copy of this application for an additional 3 month extension returned to an address different than the one entered above

Type or print	Name <b>CARNEIRO, CHUMNEY &amp; CO., L.C.</b>
	Number and street (include suite, room, or apt no) Or a P O box number <b>40 NE LOOP 410, SUITE 200</b>
	City or town, province or state, and country (including postal or ZIP code) <b>SAN ANTONIO, TX 78216-5876</b>

223832 05-22-02

# 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

<b>Type or print</b>	Name of Exempt Organization <b>ANIMAL DEFENSE LEAGUE OF TEXAS</b>	Employer identification number <b>74-6002033</b>
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P O box, see instructions <b>11300 NACOGDOCHES ROAD</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions <b>SAN ANTONIO, TX 78217-2318</b>	

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 **AUGUST 15, 2003** to file the exempt organization return for the organization named above. The extension is for the organization's return for  calendar year **2002** or  tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

**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 *Jay L Reinic* Title *CPA* Date *5/13/03*  
LHA For Paperwork Reduction Act Notice, see instruction Form 8868 (12-2000)

FORM 990 RENTAL INCOME STATEMENT 1

KIND AND LOCATION OF PROPERTY	ACTIVITY NUMBER	GROSS RENTAL INCOME
VETERINARY CLINIC 11215 IOTA, SAN ANTONIO	1	8,450.
OTHER RENTAL INCOME	2	2,187.
TOTAL TO FORM 990, PART I, LINE 6A		10,637.

FORM 990 RENTAL EXPENSES STATEMENT 2

DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
DEPRECIATION EXPENSE		3,450.	
- SUBTOTAL -	1		3,450.
TOTAL TO FORM 990, PART I, LINE 6B			3,450.

FORM 990

INCOME AND COST OF GOODS SOLD  
INCLUDED ON PART I, LINE 10

STATEMENT 3

INCOME		
1. GROSS RECEIPTS . . . . .	13,768	
2. RETURNS AND ALLOWANCES . . . . .		
3. LINE 1 LESS LINE 2 . . . . .		13,768
4. COST OF GOODS SOLD (LINE 13) . . . . .	11,389	
5. GROSS PROFIT (LINE 3 LESS LINE 4) . . . . .		2,379
COST OF GOODS SOLD		
6. INVENTORY AT BEGINNING OF YEAR . . . . .		
7. MERCHANDISE PURCHASED . . . . .	11,389	
8. COST OF LABOR . . . . .		
9. MATERIALS AND SUPPLIES . . . . .		
10. OTHER COSTS . . . . .		
11. ADD LINES 6 THROUGH 10 . . . . .		11,389
12. INVENTORY AT END OF YEAR . . . . .		
13. COST OF GOODS SOLD (LINE 11 LESS LINE 12) . . . . .		11,389

FORM 990	OTHER CHANGES IN NET ASSETS OR FUND BALANCES	STATEMENT	4
DESCRIPTION		AMOUNT	
UNREALIZED LOSS ON INVESTMENTS		-20,659.	
ADJUSTMENT FOR PRIOR PERIOD		30,116.	
TOTAL TO FORM 990, PART I, LINE 20		9,457.	

FORM 990	OTHER EXPENSES			STATEMENT	5
DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING	
ADVERTISING	21,962.	21,962.			
AUTO-GAS, OIL, REPAIRS	2,228.	2,228.			
CONTRACT LABOR	146.	146.			
CUSTODIAL EXPENSES	29,793.	29,793.			
DUES AND SUBSCRIPTIONS	1,308.	1,308.			
INSURANCE	93,289.	93,289.			
SECURITY	1,304.	1,304.			
OFFICE EXPENSE	7,163.		7,163.		
TAXES/LICENSES	11,419.	11,419.			
UTILITIES	36,680.	36,680.			
FUND RAISERS REPAIRS AND MAINTENANCE	27,879.			27,879.	
MISCELLANEOUS	8,065.	8,065.			
HOSPITAL EXPENSES	4,827.	3,757.	1,070.		
EMERGENCY VETERINARY & VETERINARY FEES	145,935.	145,935.			
KENNEL EXPENSE	18,461.	18,461.			
HOUSE EXPENSES	28,106.	28,106.			
PAYROLL SERVICE	3,177.	349.	2,828.		
EDUCATION AND SEMINARS	3,547.		3,547.		
INVESTMENT FEES	1,239.		1,239.		
RETURNED CHECKS	275.		275.		
PET CREMATION	979.	979.			
CAPITAL CAMPAIGN	1,842.	1,842.	0.		
TOTAL TO FM 990, LN 43	2,000.	2,000.			
	451,624.	407,623.	16,122.	27,879.	

---



---

**FORM 990** **NON-GOVERNMENT SECURITIES** **STATEMENT 6**


---

SECURITY DESCRIPTION	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	OTHER SECURITIES	TOTAL NON-GOV'T SECURITIES
PFIZER			73,827.		73,827.
TO 990, LN 54 COL B			73,827.		73,827.

---



---



---



---

**FORM 990** **DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT** **STATEMENT 7**


---

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
LAND	391,752.	0.	391,752.
AUTOS & TRUCKS	62,767.	51,403.	11,364.
BUILDINGS	572,897.	221,342.	351,555.
COMPUTER EQUIPMENT	20,535.	6,795.	13,740.
FURNITURE, FIXTURES & EQUIPMENT	349,759.	238,406.	111,353.
CAPITAL IMPROVEMENT - FENCE	13,350.	5,874.	7,476.
CAPITAL IMPROVEMENTS	688,234.	375,113.	313,121.
PET PARK	90,372.	13,286.	77,086.
ANIMAL MEDICAL CLINIC	9,638.	4,244.	5,394.
TOTAL TO FORM 990, PART IV, LN 57	2,199,304.	916,463.	1,282,841.

---



---



---



---

**FORM 990** **OTHER REVENUE NOT INCLUDED ON FORM 990** **STATEMENT 8**


---

DESCRIPTION	AMOUNT
RENTAL INCOME REPORTED NET OF EXPENSES	3,450.
CUMULATIVE EFFECT OF CHANGE IN ACCOUNTING PRINCIPLES - MOD.	
CASH TO ACCRUAL	752,375.
TOTAL TO FORM 990, PART IV-A	755,825.

---



---

FORM 990	OTHER EXPENSES NOT INCLUDED ON FORM 990	STATEMENT	9
----------	---	-----------	---

DESCRIPTION	AMOUNT
RENTAL INCOME REPORTED NET OF EXPENSES	3,450.
CUMULATIVE EFFECT OF CHANGE IN ACCOUNTING PRINCIPAL - MOD. CASH TO ACCRUAL	45,503.
TOTAL TO FORM 990, PART IV-B	48,953.

FORM 990	OTHER REVENUE INCLUDED ON FORM 990	STATEMENT	10
----------	------------------------------------	-----------	----

DESCRIPTION	AMOUNT
DIRECT MAIL EXPENSES	10,942.
FUND RAISING EXPENSES	25,529.
INSURANCE REFUND	536.
CASH SHORT/OVER	94.
TOTAL TO FORM 990, PART IV-A	37,101.

FORM 990	OTHER EXPENSES INCLUDED ON FORM 990	STATEMENT	11
----------	-------------------------------------	-----------	----

DESCRIPTION	AMOUNT
FUND RAISING EXPENSES	27,879.
TOTAL TO FORM 990, PART IV-B	27,879.

FORM 990

PART V - LIST OF OFFICERS, DIRECTORS,  
TRUSTEES AND KEY EMPLOYEES

STATEMENT 12

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
JOHN T. SEABERS	PRESIDENT 2.5	0.	0.	0.
LIONEL T. GREGORY, JR.	VICE-PRES 2.5	0.	0.	0.
ALEX SCHARLACK	CO-TREASURER 1	0.	0.	0.
MARGARET MAYBERRY	CO-SECRETARY 1.25	0.	0.	0.
JIM ODELL	CO-TREASURER 1.25	0.	0.	0.
B.K. WIESNER	DIRECTOR 1	0.	0.	0.
JAMES C. HECK	DIRECTOR 1	0.	0.	0.
KATHLEEN MCGOWAN	EXECUTIVE DIR 40+	50,000.	0.	0.
EDWARD L. PINA	DIRECTOR 1	0.	0.	0.
PAMELA STANTON	CO-SECRETARY 2.5	0.	0.	0.
DR. DAN KIRBY	DIRECTOR 1	0.	0.	0.

STEVEN ALLBRITTON

DIRECTOR  
1

0. 0. 0.

ALL OF THE ABOVE MAY BE REACHED  
C/O:  
ANIMAL DEFENSE LEAGUE OF TEXAS.

TOTALS INCLUDED ON FORM 990, PART V

50,000. 0. 0.

SCHEDULE A

OTHER INCOME

STATEMENT 13

DESCRIPTION	2001 AMOUNT	2000 AMOUNT	1999 AMOUNT	1998 AMOUNT
MISCELLANEOUS	6,191.	2,565.	1,782.	1,893.
TOTAL TO SCHEDULE A, LINE 22	6,191.	2,565.	1,782.	1,893.