Form 990

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

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

OMB No	1545-0047
20	04

Department of the Treasury Internal Revenue Service

Open to Public Inspection

A	For th	e 2004 calendar year, or tax year beginning $3/01/04$, and ending 2	/28/05					
В_	Check	f applicable Please C Name of organization			mployer identification no			
	Addre	ess change label or	use IRS change liabel or					
	Name	change print or HUMANE SOCIETY OF BAY COUNTY	INC		elephone number			
L	Initial	return type Number and street (or P O box if mail is not delivered to street address	ss) Room/suite		989-893-0451			
	Final	return See PO BOX 215		F A	.ccounting method 🗶 Cash			
	Amen	ded return Specific Instruc- City or town, state or country, and ZIP + 4		A	ccrual Other (specify)			
L	Applic	ation pending tions. BAY CITY MI 48707	-0215	>				
		Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable	H and I are not applicable to see	ction 527	organizations			
		trusts must attach a completed Schedule A (Form 990 or 990-EZ).	H(a) Is this a group return for	affiliates	? Yes X No			
G	Websi	te: > N/A	H(b) If "Yes," enter number of	faffiliates	s >			
J	Organ	ization type	H(c) Are all affiliates included	?	Yes No			
	(check	only one) ► X 501(c) (3) < (insert no) 4947(a)(1) or 527	(If "No," att a list See in	str)				
K	Check	here In the organization's gross receipts are normally not more than \$25,000	H(d) Is this a separate return	filed by a	an			
	The or	ganization need not file a return with the IRS, but if the organization received a	organization covered by	a group	ruling? Yes No			
	Form 9	90 Package in the mail, it should file a return without financial data. Some states	I Group Exemption Nu	mber 🕨	.			
	require	e a complete return.	M Check ▶ if the	organi	zation is not required			
Ļ	Gross	receipts: Add lines 6b, 8b, 9b, and 10b to line 12 145,804	to attach Sch. B (Form	m 990, 9	990-EZ, or 990-PF)			
P	art I	Revenue, Expenses, and Changes in Net Assets or Fund Ba	lances (See page 18 o	f the i	nstructions.)			
	1	Contributions, gifts, grants, and similar amounts received						
0*653	а	Direct public support	1a 117,86	3				
	b	Indirect public support	1b					
8	С	Government contributions (grants)	1c	7				
0	ď	Total (add lines 1a through 1c) (cash \$ 117,863 noncash \$		1d	117,863			
	2	Program service revenue including government fees and contracts (from Part VII, line	93)	2	442			
<u>⊆</u>	3	Membership dues and assessments See	3	3,495				
A	4	Interest on savings and temporary cash investments		4	321			
	5	Dividends and interest from securities	5					
SCANNED AIR 09 2003	6a	Gross rents						
4	ь	Less. rental expenses						
4	c	Net rental income or (loss) (subtract line 6b from line 6a)	a)					
rC)	7	Other investment income (describe		7				
\$4	8a	Gross amount from sales of assets other (A) Securities	(B) Other					
е			8a	7				
n	b	Less: cost or other basis and sales expenses	8b	7				
е	С	Gain or (loss) (attach schedule)	8c	7				
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))		8d				
ſ	9	Special events and activities (attach schedule). If any amount is from gaming, check h	here 🕨 🗍					
	a	Gross revenue (not including \$ of						
			9a 17,176	5				
	b	Less direct expenses other than fundraising expenses	9b 6,664	4				
	С	Net income or (loss) from special events (subtract line 9b from line 9a)		9c	10,512			
- {	10a	Gross sales of inventory, less returns and allowances	0a 2,953	3				
	b	Less cost of goods sold	0b					
	С	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from	line 10a) Stmt 2	10c	2,953			
	11	Other revenue (from Part VII, line 103)		11	3,554			
	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)		12	139,140			
E	13	Program services (from line 44, column (B))		13	56,195			
X	14	Management and general (from line 44, column (C))	- OFILIES	14				
p e n	15	Fundraising (from line 44, column (D))	ECEIVED	15				
s	16	Payments to affiliates (attach schedule)		16				
e s	17	Total expenses (add lines 16 and 44, column (A))	L 1 5 2005 S	17	56,195			
A	18	Excess or (deficit) for the year (subtract line 17 from line 12)	L 1 0 7000 (%)	18	82,945			
N S	19	Net assets or fund balances at beginning of year (from line 73, column (A))		19	26,244			
e e t t	20	Other changes in net assets or fund balances (attach explanation)	BDEN, UT	20				
S	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)		21	109,189			
For I	Privacy uction	Act and Paperwork Reduction Act Notice, see the separate			Form 990 (2004)			
DAA		-			,			

· · · · · · · · · · · · · · · · · · ·		piete column (A) Columns (=
Functional Expenses and section 4947(a)(1) non	exempt charitable trusts but	optional for others (See	page 22 of the instruction	s)
Do'not include amounts reported on line		(A) Total	(B) Program	(C) Management	(D) Fundraising
6b, 8b, 9b, 10b, or 16 of Part I.			services	and general	
22 Grants and allocations (attach schedule) non- (cash \$ cash \$)	22				
23 Specific assistance to individuals	23				
24 Benefits paid to or for members	24				
25 Compensation of officers, directors, etc	25				
26 Other salaries and wages	26				
27 Pension plan contributions	27				
28 Other employee benefits	28				
29 Payroll taxes	29				
30 Professional fundraising fees	30				
31 Accounting fees	31				
32 Legal fees	32				
33 Supplies	33				
34 Telephone	34				
35 Postage and shipping	35				
36 Occupancy	36		 		
37 Equipment rental and maintenance	37				
38 Printing and publications 39 Travel	38		 		
40 Conferences, conventions, and meetings	39 40				
41 Interest	41				
42 Depreciation, depletion, etc. (attach schedule)	42				
43 Other expenses not covered above (itemize) a	43a				
b See Statement 3	43b	56,195	56,195		
c	43c		•	ť	
d	43d				
е	43e				
44 Total functional expenses (add lines 22 - 43) Organizations					
completing columns (B)-(D), carry these totals to lines 13-15	44	56,195	56,195	0	<u> </u>
Joint Costs. Check ▶ ☐ If you are following SOP 98-2					
Are any joint costs from a combined educational campaign and for	undrais	· ·			Yes X N
			t allocated to Program se		·
(iii) the amount allocated to Management and general \$			t allocated to Fundraising		
Part III Statement of Program Service Acco	mpii	snments (See pag	e 25 of the instri	uctions.)	Program Service
What is the organization's primary exempt purpose? See Statement 4					Expenses
All organizations must describe their exempt purpose achieveme	nts ın a	clear and concise man	ner State the number		(Required for 501(c)(3) (4) orgs , & 4947(a)(1
of clients served, publications issued, etc. Discuss achievements organizations and 4947(a)(1) nonexempt charitable trusts must a	that ar	e not measurable (Sec	tion 501(c)(3) and (4)		trusts, but optional fo
a EDUCATIONAL PROGRAMS ON RESP					others
CARE. SERVICES OFFERED TO S			•		
		(Grants and allo	cations \$)	
b			•		
		(Grants and allo	cations \$		
c					
		(Grants and allo	cations \$		ļ
d					
		10 1 "	4		
a Other program convece (ettech cahadula)		(Grants and allo		· · · · · · · · · · · · · · · · · · ·	56,19
e Other program services (attach schedule) Total of Program Services Expenses (should equal line 44)	a alvere	(Grants and allo	cations \$		56,19
f Total of Program Service Expenses (should equal line 44,	column	(b), riogram services)	 -		50, 19

Form 990 (2004)

Part IV, Balance Sheets (See page 25 of the instructions.)

	Note:	Where required, attached schedules and amoun	its within the description	(A)		(B)
		column should be for end-of-year amounts only		Beginning of year		End of year
	45	Cash-non-interest-bearing	·	26,244	45	8,074
	46	Savings and temporary cash investments			46	101,115
	47a	Accounts receivable	47a			
	b	Less allowance for doubtful accounts	47b		47c	
	48a	Pledges receivable				
	ь	Less. allowance for doubtful accounts	48b		48c	
	49	Grants receivable		49	1	
	50	Receivables from officers, directors, trustees, an	d key employees			
Α	1	(attach schedule)	, , ,		50	
s	51a	Other notes and loans receivable (attach				
s		schedule)	51a			
е	b	Less: allowance for doubtful accounts	51b		51c	
t	52	Inventories for sale or use			52	
s	53	Prepaid expenses and deferred charges	. [53	
	54	Investments-securities	► Cost FMV		54	
	55a	Investments-land, buildings, and				
		equipment: basis	55a			
	ь	Less: accumulated depreciation (attach				
		schedule)	55b		55c	
	56	Investments-other (attach schedule)	, .		56	
	57a	Land, buildings, and equipment basis	57a			
	b	Less: accumulated depreciation (attach				
	ļ	schedule)	57b		57c	
	58	Other assets (describe)		58	
	59	Total assets (add lines 45 through 58) (must eq	ual line 74)	26,244	59	109,189
	60	Accounts payable and accrued expenses			60	
L	61	Grants payable			61	
a	62	Deferred revenue			62	
b i	63	Loans from officers, directors, trustees, and key	employees (attach			
i		schedule)	-	-	63	
i	64a	Tax-exempt bond liabilities (attach schedule)	-		64a	···
i	þ	Mortgages and other notes payable (attach sche	dule)		64b	
е	65	Other liabilities (describe			65	
s	_66	Total liabilities (add lines 60 through 65)		0	66	0
	Orga	inizations that follow SFAS 117, check here	X and complete lines			
		67 through 69 and lines 73 and 74				
NF	67	Unrestricted		26,244	67	109,189
e u t n	68	Temporarily restricted	<u> </u>		68	
ď	69	Permanently restricted			69	
A	Orga	nizations that do not follow SFAS 117, check h	nere 🕨 🔛 and			
s B		complete lines 70 through 74			į	
s a	70	Capital stock, trust principal, or current funds	ļ.		70	
e I t a	71	Paid-in or capital surplus, or land, building, and e		71		
s n	72	Retained earnings, endowment, accumulated inc		72		
c O e	73	Total net assets or fund balances (add lines 67	7 through 69 or lines			
rs		70 through 72,		06.044		100 100
		column (A) must equal line 19, column (B) must	· ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	26,244		109,189 109,189
	74	Total liabilities and net assets / fund balances	(add lines 66 and 73)	26,244	74	109,189

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.

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	1 990 (2004) HUMANE SUCTETY OF BAY COUNTY INC 38-2556864			age 5
	art VI Other Information (See page 28 of the instructions.)	Т	Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of	7.		x
	each activity	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77		
	If "Yes," attach a conformed copy of the changes	700		x
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a 78b		<u> </u>
_ b	If "Yes," has it filed a tax return on Form 990-T for this year?	780		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a	79		x
00-	statement	13		
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common	80a		x
_	membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	Juan		
b	If "Yes," enter the name of the organization and check whether it is exempt or nonexempt			
81a	Enter direct and indirect political expenditures. See line 81 instructions 81a			
b	Did the organization file Form 1120-POL for this year?	81b		x
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge	0.5		<u> </u>
QZ.U	or at substantially less than fair rental value?	82a		х
b	If "Yes," you may indicate the value of these items here. Do not include this amount as			l
	revenue in Part I or as an expense in Part II (See instructions in Part III) 82b			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	х	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions? N/A	83b		<u> </u>
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions			
	or gifts were not tax deductible?	84b]
85	501(c)(4), (5), or (6) organizations, a Were substantially all dues nondeductible by members?	85a		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A	85b		
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization			
	received a waiver for proxy tax owed for the prior year			
С	Dues, assessments, and similar amounts from members			
d	Section 162(e) lobbying and political expenditures 85d			
е	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A	85g		<u> </u>
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its			İ
	reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax			
	year?	85h		ļ
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	4		
b	Gross receipts, included on line 12, for public use of club facilities			Ì
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders	-		
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			x
	301.7701-2 and 301 7701-3? If "Yes," complete Part IX	88		├ ^
89a	501(c)(3) organizations. Enter Amount of tax imposed on the organization during the year under section 4911 O section 4912 O section 4955 O			
	366101 4511 P , 366101 4512 P , 366101 1666 P			
b	501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction			
	during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach	89b		x
	a statement explaining each transaction	030		
С	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under			0
	sections 4912, 4955, and 4958 Enter: Amount of toward land 900, above, reimburged by the organization.			$\frac{0}{0}$
d oos	Enter: Amount of tax on line 89c, above, reimbursed by the organization List the states with which a copy of this return is filed. None			_
90a	List the states with which a copy of this return is filed None Number of employees employeed in the pay period that includes March 12, 2004 (See instructions.)			0
b 04	Number of employees employed in the pay period that includes March 12, 2004 (See instructions) The books are in care of Telephone no			
91	Located at ZIP + 4			
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here			▶□
J2	and enter the amount of tax-exempt interest received or accrued during the tax year			٠ ـ
	and drive the amount of the overlap more overlap of decided during the ten jobs.	Form	990	(2004)

SBC 07/11/2005 8 40 AM orm 990 (2004) HUMANE SOCIET Part VII Analysis of Income-P	roducing Activities	c (See nage	33 of the inch	556864		Page
	Toducing Activities					
Note. Enter gross amounts unless otherwise indicated 3 Program service revenue	7	(A) Business code	(B) Amount	(C) Exclusion code	y sec 512, 513, or 514 (D) Amount	(E) Related or exempt function income
a OTHER MISCELLANEOUS	SINC			1	442	income_
				 		
b	1					
			 			
<u> </u>						
e						
f Medicare/Medicaid payments						
g Fees and contracts from government age	ncies					2 40
4 Membership dues and assessments						3,49
5 Interest on savings and temporary cash in	rvestments					32
6 Dividends and interest from securities	-					
7 Net rental income or (loss) from real estat	te					
a debt-financed property						
b not debt-financed property	_					
8 Net rental income or (loss) from personal	property					
9 Other investment income				i		
O Gain or (loss) from sales of assets other to	han inventory					
1 Net income or (loss) from special events	L			2	10,512	
2 Gross profit or (loss) from sales of inventor	ory			5	2,953	
3 Other revenue a						
b ANNUAL DINNER				3	3,554	
c						-
d						
е						
4 Subtotal (add columns (B), (D), and (E))				0	17,461	3,81
5 Total (add line 104, columns (B), (D), and	(E))					21,27
						21,21
ote: Line 105 plus line 1d. Part I, should equal		Part I				21,21
ote: Line 105 plus line 1d, Part I, should equal Part VIII Relationship of Activi	the amount on line 12, F		f Exempt Pur	poses (Se	e page 34 of the i	
Part VIII Relationship of Activi	the amount on line 12, F	plishment o				nstructions.)
Part VIII Relationship of Activi Line No. Explain how each activity for wh	the amount on line 12, Fities to the Accomplich income is reported in	plishment o n column (E) of	Part VII contribute			nstructions.)
Part VIII Relationship of Activi Line No. Explain how each activity for who f the organization's exempt pu	the amount on line 12, Fities to the Accomplich income is reported in	plishment o n column (E) of	Part VII contribute			nstructions.)
Part VIII Relationship of Activi Line No. Explain how each activity for who f the organization's exempt pu	the amount on line 12, Fities to the Accomplich income is reported in	plishment o n column (E) of	Part VII contribute			nstructions.)
Part VIII Relationship of Activi Line No. Explain how each activity for who f the organization's exempt pu	the amount on line 12, Fities to the Accomplich income is reported in	plishment o n column (E) of	Part VII contribute			nstructions.)
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Part VIII Relationship of Activi Line No. Explain how each activity for whof the organization's exempt pu N/A	the amount on line 12, Fities to the Accomplich income is reported in rposes (other than by present that the present the present that the present that the present that the present the present that the present that the present th	plishment on column (E) of oviding funds fo	Part VII contribute r such purposes)	ed importantly	to the accomplishment	nstructions.)
Part VIII Relationship of Activi Line No. Explain how each activity for whof the organization's exempt pu N/A	the amount on line 12, Fities to the Accomplication income is reported in reposes (other than by present the control of the co	plishment on column (E) of oviding funds fo	Part VII contribute r such purposes)	ed importantly	to the accomplishment	nstructions.)
Part VIII Relationship of Activi Line No. Explain how each activity for whof the organization's exempt pu N/A Part IX Information Regarding (A) Name, address, and EIN of corporation,	the amount on line 12, F ties to the Accomplication income is reported in proses (other than by pro- track that is the second of	plishment on a column (E) of coviding funds for coviding funds for cies and Dis	Part VII contribute r such purposes) regarded Ent	ities (See	to the accomplishment	nstructions.) structions.) (E) End-of-year
Part VIII Relationship of Activi Line No. Explain how each activity for whof the organization's exempt pu N/A Part IX Information Regarding (A) Name, address, and EIN of corporation, partnership, or disregarded entity	the amount on line 12, F ties to the Accomp hich income is reported in rposes (other than by pre	plishment on column (E) of coviding funds for column funds for coviding funds for covidin	Part VII contributer such purposes) regarded Ent	ities (See	page 34 of the ins	nstructions.)
Part VIII Relationship of Activi Line No. Explain how each activity for whof the organization's exempt pu N/A Part IX Information Regarding (A) Name, address, and EIN of corporation,	the amount on line 12, F ties to the Accomplication income is reported in proses (other than by pro- track that is the second of	plishment on column (E) of oviding funds for ovi	Part VII contributer such purposes) regarded Ent	ities (See	page 34 of the ins	nstructions.) structions.) (E) End-of-year
Part VIII Relationship of Activi Explain how each activity for whof the organization's exempt pu N/A Part IX Information Regarding (A) Name, address, and EIN of corporation, partnership, or disregarded entity	the amount on line 12, F ties to the Accomplication income is reported in proses (other than by pro- track that is the second of	plishment on column (E) of oviding funds for ovi	Part VII contributer such purposes) regarded Ent	ities (See	page 34 of the ins	nstructions.) structions.) (E) End-of-year
Part VIII Relationship of Activi Explain how each activity for whof the organization's exempt pu N/A Part IX Information Regarding (A) Name, address, and EIN of corporation, partnership, or disregarded entity	the amount on line 12, F ties to the Accomplication income is reported in proses (other than by pro- track that is the second of	plishment on a column (E) of oviding funds for o	Part VII contributer such purposes) regarded Ent	ities (See	page 34 of the ins	nstructions.) structions.) (E) End-of-year
Part VIII Relationship of Activi Explain how each activity for whof the organization's exempt pu N/A Part IX Information Regarding (A) Name, address, and EIN of corporation, partnership, or disregarded entity N/A	the amount on line 12, F ties to the Accomplication income is reported in proses (other than by pro- ties to the Accomplication income is reported in proses (other than by pro- ties to the Accomplication income is reported in proses (other than by pro- ties to the Accomplication income is reported in prosessing the Accomplication income is reported in the Accomplication i	plishment on column (E) of oviding funds for ovi	Part VII contributer such purposes) regarded Ent (C) ture of activities	ities (See	page 34 of the ins	nstructions.) structions.) (E) End-of-year assets
Part VIII Relationship of Activi Explain how each activity for whof the organization's exempt pu N/A Part IX Information Regarding (A) Name, address, and EIN of corporation, partnership, or disregarded entity N/A	the amount on line 12, F ties to the Accomplication income is reported in proses (other than by pro- ties to the Accomplication income is reported in proses (other than by pro- ties to the Accomplication income is reported in proses (other than by pro- ties to the Accomplication income is reported in prosessing the Accomplication income is reported in the Accomplication i	plishment on column (E) of oviding funds for ovi	Part VII contributer such purposes) regarded Ent (C) ture of activities	ities (See	page 34 of the ins	nstructions.) structions.) (E) End-of-year assets
Part VIII Relationship of Activi Explain how each activity for whof the organization's exempt pu N/A Part IX Information Regarding (A) Name, address, and EIN of corporation, partnership, or disregarded entity N/A	the amount on line 12, F ties to the Accomplication income is reported increases (other than by presentable Subsidiar (B) Percentage of ownership interest Transfers Associa	plishment on column (E) of overlands for column (E) of overlands for column (E) of overlands for column (E) of col	Part VII contributer such purposes) regarded Ent (C) ture of activities	ities (See	page 34 of the ins (D) Total income	nstructions.) structions.) (E) End-of-year assets
Part VIII Relationship of Activi Explain how each activity for whof the organization's exempt pu Part IX Information Regarding (A) Name, address, and EIN of corporation, partnership, or disregarded entity N/A Part X Information Regarding	the amount on line 12, Fities to the Accomplication income is reported increases (other than by professes (other than by	plishment on column (E) of coviding funds for column funds for coviding funds for covidin	Part VII contributer such purposes) regarded Ent (C) ture of activities rsonal Benef o pay premiums of	ities (See	page 34 of the ins (D) Total income	structions.) Structions.) (E) End-of-year assets Instructions) Yes X
Part VIII Relationship of Activi Explain how each activity for whof the organization's exempt pu N/A Part IX Information Regarding (A) Name, address, and EIN of corporation, partnership, or disregarded entity N/A Part X Information Regarding (a) Did the organization, during the year, in	Transfers Associareceive any funds, directly o	ries and Dis Nat % % % hated with Pe lly or indirectly, to indirectly, on a	Part VII contributer such purposes) regarded Ent (C) ture of activities rsonal Benef o pay premiums of	ities (See	page 34 of the ins (D) Total income	nstructions.) structions.) (E) End-of-year assets Instructions) Yes X N
Part VIII Relationship of Activi Explain how each activity for whof the organization's exempt put Part IX Information Regarding (A) Name, address, and EIN of corporation, partnership, or disregarded entity N/A Part X Information Regarding (a) Did the organization, during the year, in the organization is the organization in the organization in the organization is the organization in the organization in the organization is the organization in the organization in the organization is the organization in the organization in the organization is the organization in the organization in the organization is the organization in the organization is the organization in the organization in the organization is the organization in the organization in the organization is the organization in the organization in the organization is the organization in the organization in the organization is the organization in the organization in the organization is the organization in the organization in the organization is the organization in the organization in the organization is the organization in the organization in the organization is the organization in the organization in the organization is the organization in the organization in the organization is the organization in the organization in the organization in the organization is the organization in the organi	Transfers Associareceive any funds, directly orm 4720 (see instructions)	ries and Dis % % % % ated with Pe	Part VII contributer such purposes) regarded Ent (C) ture of activities rsonal Benefit o pay premiums of personal benefit	ities (See) it Contract on a personal to	page 34 of the ins (D) Total income (S (See page 34 of the penefit contract?	structions.) Structions.) (E) End-of-year assets Instructions) Yes X N Yes X N
Part VIII Relationship of Activi Explain how each activity for whof the organization's exempt put Part IX Information Regarding (A) Name, address, and EIN of corporation, partnership, or disregarded entity N/A Part X Information Regarding (a) Did the organization, during the year, in the organization in the organization in the organization in the organization, during the year, in the organization in the	Transfers Associareceive any funds, directly orm 4720 (see instructions that I have examined this rejorced in the Accompanion of the Accompanion o	ries and Dis Nat % % % ated with Pe lly or indirectly, to rindirectly, on ass) turn, including according to the color of t	Part VII contributer such purposes) regarded Ent (C) ture of activities rsonal Benefico pay premiums of personal benefit	ities (See) it Contract on a personal to contract?	page 34 of the ins (D) Total income S (See page 34 of the penefit contract?	nstructions.) structions.) (E) End-of-year assets Instructions) Yes X N Prowledge
Part VIII Relationship of Activity Line No. Explain how each activity for whof the organization's exempt put N/A Part IX Information Regarding (A) Name, address, and EIN of corporation, partnership, or disregarded entity N/A Part X Information Regarding (a) Did the organization, during the year, in the organization, during the year, in the organization, during the year, in the organization of penury, it declare and belief, it is true, correct, and contains the correct of the organization of the organization of the organization of the organization of penury, it declare and belief, it is true, correct, and contains the organization of the	Transfers Associareceive any funds, directly of m 4720 (see instructions that I have examined this reported in the time of preparation of preparations are considered in the time of time of time of the time of time	ries and Dis Nat % % % the stand with Pe lly or indirectly, the rindirectly, on a sign turn, including accer (other than office	Part VII contributer such purposes) regarded Ent (C) ture of activities rsonal Benefico pay premiums of personal benefit	ities (See) it Contract on a personal to contract?	page 34 of the ins (D) Total income S (See page 34 of the penefit contract?	nstructions.) structions.) (E) End-of-year assets Instructions) Yes X N Prowledge
Part VIII Relationship of Activition No. Explain how each activity for who of the organization's exempt pure N/A Part IX Information Regarding (A) Name, address, and EIN of corporation, partnership, or disregarded entity N/A Part X Information Regarding (a) Did the organization, during the year, in the organization in the org	Transfers Associareceive any funds, directly orm 4720 (see instructions that I have examined this rejorced in the Accompanion of the Accompanion o	ries and Dis Nat % % % the stand with Pe lly or indirectly, the rindirectly, on a sign turn, including accer (other than office	Part VII contributer such purposes) regarded Ent (C) ture of activities rsonal Benefico pay premiums of personal benefit	ities (See) it Contract on a personal to contract?	page 34 of the ins (D) Total income (S (See page 34 of the penefit contract?	structions.) Structions.) (E) End-of-year assets Instructions) Yes X N Prowledge
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SCHEDULE A (Form 990 or 990-EZ) 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

OMB No 1545-0047

2004

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 Employer identification number

HUMANE SOCIETY OF BAY COUNTY INC 38-2556864 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.") (d) Contributions to (e) Expense account and other (a) Name and address of each employee paid more (b) Title and average hours empl ben plans & (c) Compensation than \$50,000 per week devoted to position deferred comp allowances NONE Total number of other employees paid over \$50,000 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.") (b) Type of service (a) Name and address of each independent contractor paid more than \$50,000 (c) Compensation NONE Total number of others receiving over \$50,000 for professional services

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

Schedule A (Form 990 or 990-EZ) 2004

Sche	iedule A (Form 990 or 990-EZ) 2004 HUMANE SOCIETY OF BAY COUNTY INC 38-255686	4		age :
P	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,	ì		ļ
	Part VI-A, or line i 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)			
а	Sale, exchange, or leasing of property?	2a		х
b	Lending of money or other extension of credit?	2b		Х
С	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
			ĺ	
е	,,	<u>2e</u>	. .	X
3a	, 5			
	you determine that recipients qualify to receive payments)	3a	 -	X
b	,	_3b	-	X
4a				.
	on the use or distribution of funds?	4a_	╅┈	X
<u>b</u>		4b_		
— —	Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)			
	e 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 nar	ne, city,		
	and state ▶			
10	An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(t	o)(1)(A)(ıv).		
	(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 gro	ss		
	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 a	cquired		
	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 organization			
	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). (Se	e		
	section 509(a)(3))			
	Provide the following information about the supported organizations. (See page 5 of the instruction			
	(a) Name(s) of supported organization(s)	(b) Line from a		ı
		nom a	DOVE.	
				_
14	An organization organized and engested to test fee within sefety. Seeken FOO(2)(1)			
14	An organization organized and operated to test for public safety Section 509(a)(4) (See page 5 of the instructions)	A /Far- 000 - 0	00 57	2001
	Schedule A	A (Form 990 or 9	JU-EZ	∠∪∪4

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 inst	trucți	ons for converting f	rom the accrual to	the cash meth	nod of accountin	9			
Cale	ndar year (or fiscal year beginning in)	>	(a) 2003	(b) 2002		(c) 2001	(d) 2000		(e) Total	
15	Gifts, grants, and contributions received (De	0								
	not include unusual grants See line 28)								· <u> </u>	
16	Membership fees received									
17	Gross receipts from admissions, merchandis	se								
	sold or services performed, or furnishing of									
	facilities in any activity that is related to the	ĺ								
	organization's charitable, etc., purpose									
18	Gross income from interest, dividends,									
	amounts received from payments on securit	ies								
	loans (section 512(a)(5)), rents, royalties, ar	nd								
	unrelated business taxable income (less section 511 taxes) from businesses acquired	,						Ì		
	by the organization after June 30, 1975	´								
19	Net income from unrelated business	T				-				
	activities not included in line 18									
20	Tax revenues levied for the organization's									
	benefit and either paid to it or expended on							,		
	ıts behalf									
21	The value of services or facilities furnished t		-							
	the organization by a governmental unit									
	without charge. Do not include the value of	_						İ		
	services or facilities generally furnished to the public without charge	e		ŀ						
22	Other income Attach a schedule Do not									
	include gain or (loss) from sale of capital assets									
23	Total of lines 15 through 22									
24	Line 23 minus line 17						ļ			
25	Enter 1% of line 23						<u></u>	,		
26	Organizations described on lines 10	or	11: a Enter 2%	of amount in colum	nn (e), line 24		•	26a		
b	Prepare a list for your records to show	the	name of and amou	nt contributed by e	ach person (ot	ther than a			•	
	governmental unit or publicly supporte	d org	ganization) whose to	otal gifts for 2000 t	hrough 2003 e	exceeded the		i		
	amount shown in line 26a Do not file	this	list with your retu	rn. Enter the total	of all these ex	cess amounts	>	26b	·	
С	Total support for section 509(a)(1) test	t En	ter line 24, column	(e)			•	26c		
d	Add Amounts from column (e) for line	s	18	19						
			22				•	26d		
e	Public support (line 26c minus line 26c	l tota	il)				•	26e	<u>.</u>	
f	Public support percentage (line 26e	(nu	merator) divided b	y line 26c (denon	ninator))		<u> </u>	26f		%
27	Organizations described on line 12:		a For amounts in	cluded in lines 15,	16, and 17 tha	it were received	from a "disqualifi	ed		
	person," prepare a list for your records	to s	how the name of, a	nd total amounts r	eceived in eac	ch year from, ea	ch "disqualified p	erson "		
	Do not file this list with your return.	Ente	er the sum of such a	amounts for each y	ear.				N	I/A
	(2003)	(20	02)		(2001)		(2000)		
b	For any amount included in line 17 tha	t was	s received from eac	th person (other th	an "disqualified	d persons"), pre	pare a list for you	ır recor	ds to	
	show the name of, and amount receive	ed fo	r each year, that wa	as more than the la	irger of (1) the	e amount on line	25 for the year o	or (2) \$5	5,000	
	(Include in the list organizations descri	bed	in lines 5 through 1	1, as well as individ	duals) Do not	t file this list wi	th your return. A	After co	mputing	
	the difference between the amount rec	eive	d and the larger am	ount described in	(1) or (2), ente	er the sum of the	ese differences (t	пе ехсе	ess	
	amounts) for each year								N	I/A
	(2003)	(20	02)		(2001)		(2000)		
С	Add Amounts from column (e) for line	s	15	16						
	17			21			>	27c		
d	Add Line 27a total		and line 2	7b total			>	27d		
е	Public support (line 27c total minus line	e 270	total)			, ,	•	27e		
f	Total support for section 509(a)(2) test	Ent	ter amount from line	e 23, column (e)	•	27f]]		
g	Public support percentage (line 27e				inator))		•	27g		%
<u>h</u>	Investment income percentage (line					ominator))		27h		%
28	Unusual Grants: For an organization						000 through 2003	3,		
	prepare a list for your records to show,									
	description of the nature of the grant [<u>00 n</u>	ot file this list with	your return Do	not include the	se grants in line	15			

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

	(To be completed ONLY by schools that checked the box on line 6 in Part IV)			
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, N/A		Yes	No
	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,	1		
	programs, and scholarships?	30		<u> </u>
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			1
	that makes the policy known to all parts of the general community it serves?	31		<u> </u>
	If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)			
32	Does the organization maintain the following			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		<u> </u>
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory			
	basis?	32b		
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
			71177717	
	If you answered "No" to any of the above, please explain (if you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to.			
а	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
				1
С	Employment of faculty or administrative staff?	33c		ļ
d	Scholarships or other financial assistance?	33d		
		ļ ·		
е	Educational policies?	33e		<u> </u>
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		ļ
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement.)			
				1
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		<u> </u>
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
	If you answered "Yes" to either 34a or b, please explain using an attached statement			
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05			
	of Rev. Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35		<u> </u>

Sch		ANE SUCTETT							
. P		ditures by Electing							
Che		ONLY by an eligibings to an affiliated group		F-1			N/A		ol" provisions apply
One	Limits o	n Lobbying Expen	ditures	<u> </u>	you an	(a) ed group als	Su contre	(b) To be completed for ALL electing organizations
26		tures" means amounts p			36				
	Total lobbying expenditures to influence Total lobbying expenditures to influence				37				
	Total lobbying expenditures (add lines 3	-	(loobying)		38				
	Other exempt purpose expenditures	o and Sr j			39				
	Total exempt purpose expenditures (ad	d lines 38 and 39)			40				
	Lobbying nontaxable amount Enter the	•	on table-		1				
71	If the amount on line 40 is-		ntaxable amount is-						
	Not over \$500,000	20% of the amount o							
	Over \$500,000 but not over \$1,000,000		of the excess over \$500,0	00					
	Over \$1,000,000 but not over \$1,500,000	• • •	of the excess over \$1,000		41				
	Over \$1,500,000 but not over \$17,000,000	•	the excess over \$1,500,0	f		***************************************			
	Over \$17,000,000	\$1,000,000		-					
42	Grassroots nontaxable amount (enter 2	5% of line 41)		_	42	L			
43	Subtract line 42 from line 36. Enter -0- ii	fline 42 is more than line	36		43				
44	Subtract line 41 from line 38. Enter -0- ii	fline 41 is more than line	: 38		44				
	Caution: If there is an amount on either				<u></u>				
			ging Period Und						
	(Some organization	ons that made a section					columns	below	
		See the instructions for	lines 45 through 50 or	n page 11 of	f the ins	tructions.)			
			Lobbying Expe	nditures D	uring 4	-Year Averaç	jing Pe	riod	
	Calendar year (or	(a)	(b)	(0	;)		(d)		(e)
	fiscal year beginning in)	2004	2003	20	02		2001		Total
AE	Labburg partayable amount								
	Lobbying nontaxable amount		,						
	Lobbying ceiling amount (150% of								
	line 45(e))		<u> </u>						
<u>47</u>	Total lobbying expenditures								
40	Consequents and the consequent							1	
	Grassroots nontaxable amount								
	Grassroots ceiling amount (150% of line 48(e))								
	iiie 40(e))								
50	Grassroots lobbying expenditures								
******		by Nonelecting P	ublic Charities						
		y by organizations		olete Part	VI-A) (See pag	e 11 d	of the i	nstructions.) N/2
Duri	ing the year, did the organization attemp								
	mpt to influence public opinion on a legis				-		Yes	No	Amount
а	Volunteers		, 0						
b	Paid staff or management (Include co	mpensation in expenses	reported on lines c th	rough h.)					
С	Media advertisements		•						
d	Mailings to members, legislators, or th	e public							
е	Publications, or published or broadcast	•							
f	Grants to other organizations for lobby								
g	Direct contact with legislators, their sta		, or a legislative body						
h	Rallies, demonstrations, seminars, co	nventions, speeches, led	tures, or any other m	eans					
i	Total lobbying expenditures (Add lines	c through h.)							
	If "Yes" to any of the above, also attac	h a statement giving a d	etailed description of	the lobbying	activitie	es			
								In A /E-	rm 990 or 990-E71 200

HSB	C 07/11/2005 8	40 AM					
				SOCIETY OF BAY COL			Page (
Pa		_	_	ansfers To and Transactio 11 of the instructions.)	ns and Relationships With Nonch	ıaritable Exen	npt
 51					th any other organization described in section		
		-	-) organizations) or in section 527, re	-	•	
а				oncharitable exempt organization of		ſ	Yes No
	(i) Cash					51a(i)	Х
	(ii) Other	assets				a(II)	Х
b	Other transa	actions					
	(i) Sales	or exchanges of assets	s with a none	charitable exempt organization		b(i)	X
		ases of assets from a r		, •		b(II)	X
		I of facilities, equipmen		ssets		b(iii)	<u> </u>
		oursement arrangemen	ts			p(in)	X
		or loan guarantees		E d		b(v)	X
С			•	or fundraising solicitations ner assets, or paid employees		b(vi)	X
d					n (b) should always show the fair market valu	c c	
•					tion received less than fair market value in a		
				lumn (d) the value of the goods, oth		•,	
	(a)	(b)		(c)	(d)	-	
	Line no	Amount involved	Name o	f nonchantable exempt organization	Description of transfers, transactions, an	d sharing arrangeme	nts
N.	/A			·			
			-				
			 	······			
						.	
							
				** .			
	-						
_				· · · · · · · · · · · · · · · · · · ·			
						-	
2a	Is the organiz	zation directly or indire	ctly affiliated	with, or related to, one or more tax-	exempt organizations		
		, ,	•	nan section 501(c)(3)) or in section	527?	► ∐ Yes	s X No
b	If "Yes," com	plete the following sch	edule.	 	T		
	N	(a) lame of organization		(b) Type of organization	(c) Description of relation	sehin	
_	N/A			Type or organization	bescription of relation		
	M/ A						
	· .						
		<u> </u>	<u>.</u>				
				-			
		 					
					1		

'HSBC HUMANE SOCIETY OF BAY COUNTY INC

Federal Statements

38-2556864 FYE: 2/28/2005

Statement 1 - Form 990, Part I, Line 3 - Membership Dues and Assessments

Description	 Amount		
MEMBERSHIPS	\$ 3,495		
Total	\$ 3,495		

Statement 2 - Form 990, Line 10c - Sales of Inventory

Description	Gross Sales	cogs	Gross Profit	
SALE OF ANIMAL TOYS	\$ 2,953	\$	\$ 2,953	
Total	\$ 2,953	3 \$ 0	\$ 2,953	

7/11/2005 8:40 AM

HSBC HUMANE SOCIETY OF BAY COUNTY INC

FYE: 2/28/2005

38-2556864

Federal Statements

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

Description	Total Expenses_	Program Service	Mgt & General	Fund- Raising
	\$ \$	\$	\$	\$
Expenses				
OPERATIONAL	13,227	13,227		
EDUCATION	173	173		
DESIRABLE DOG WORKSHOP EXP	1,002	1,002		
MEMBERSHIP EXPENSE	3,401	3,401		
ANIMAL CONTROL	4,436	4,436		
ADVERTISING	1,359	1,359		
SPAY/NEUTER PROGRAMS	9,343	9,343		
KIND NEWS	2,583	2,583		
GIVE ME SHELTER	1,015	1,015		
ANNUAL DINNER EXPENSE	2,836	2,836		
MISCELLANEOUS EXPENSE	384	384		
COMMUNITY OUTREACH	16,436	16,436		
Total	\$ 56,195	56,195	\$ 0	\$ 0

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

THE PURPOSE OF THE SOCIETY IS THE PREVENTION OF CRUELTY TO ANIMALS. EDUCATE HUMAN EDUCATION, AND RELIEF THE SUFFERING OF ANIMALS. 7/11/2005 8:40 AM