Form **990**

Return of Organization Exempt From Income Tax

APR 1,

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

and ending

MAR

Department of the Internal Revenue		► The organizat
A For the 200	5 calen	year, or tax year beginning
B Check if	Please	lame of organization

▶ The organization may have to use a copy of this return to satisfy state reporting requirements. 2005

OMB No 1545-0047
2005
Open to Public Inspection
Inspection

_	В	Check if applicable	Please C Name of organization		D Employe	r identification number
-			use IRS			7040456
	닏	change Name	print or Animal Wellare Society, Inc.	Room/suite		7018176
લ્≟ે ઉત્તુ	늗	change	See Nulliber and Street (or F.O. DOX it main is not delivered to street address)	E Telephon		
3000 N	F	return Final	Specific P.O. Box 43			7) 985-3244
\approx	누	return Amende	City or town, state or country, and ZIP + 4		F Accounting in Other (specif	
\approx	늗	Ireturn	west kennebunk, ME 04094			···
٧	L_	Applicati pending	muct attach a completed Schedule & Learn UVII of UVII-E/1	· •		ection 527 organizations liates? Yes X No
AUG	٠,	Mahalta (H(a) Is this a group re H(b) If "Yes," enter nu		
\cap				H(c) Are all affiliates i		N/A Yes N
			o No. of the economication's group required are normally not more than \$25,000. The	(If "No," attach a	list.)	•
Z			on need not file a return with the IRS; but if the organization chooses to file a return, be	H(d) Is this a separate ganization cover	ed by a orou	by an or- Ip ruling? Yes X No
2			a complete return. Some states require a complete return.	I Group Exemption		
SCANNED						ation is not required to attack
(4)	L	Gross rece	eipts: Add lines 6b, 8b, 9b, and 10b to line 12 1,403,223.	Sch. B (Form 99		
•	$\overline{}$		Revenue, Expenses, and Changes in Net Assets or Fund Balar			
		1	Contributions, gifts, grants, and similar amounts received:	*		
			Direct public support 1a	575,68	80.	
		ł	Indirect public support 1b			
		1	Government contributions (grants)			
		d ·	Total (add lines 1a through 1c) (cash \$ 575,680 noncash \$) 1d	575,680.
		2	Program service revenue including government fees and contracts (from Part VII, line 93)		2	421,559.
		3	Membership dues and assessments		3	
		4	Interest on savings and temporary cash investments		4	876.
		5 1	Dividends and interest from securities		5	50,338.
		6 a	Gross rents 6a			
			Less; rental expenses 6b			
		t .	Net rental income or (loss) (subtract line 6b from line 6a)		6c	
	ė		Other investment income (describe) 7	
	Revenue	Į	Gross amount from sales of assets other (A) Securities	(B) Other		
	l g		han inventory 274,012. 8a	·		
			Less: cost or other basis and sales expenses 228,700 . 8b			
	ĺ		Gain or (loss) (attach schedule) Vet gain or (loss) (combine line 8c, columns (A) and (B)) Stmt 1			45,312.
			Net gain or (loss) (combine line 8c, columns (A) and (B)) Stmt 1 Special events and activities (attach schedule). If any amount is from gaming, check here		8d	45,314,
			Gross revenue (not including \$ O . of contributions			
			eported on line 1a)	65,33	2n	
	İ		ess: direct expenses other than fundraising expenses 9b	24,01		
			•	tatement 2		41,312.
			Gross sales of inventory, less returns and allowances			/
			ess: cost of goods sold		\neg	
			Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10)a)	100	
	l		Other revenue (from Part VII, line 103)		11	15,428.
_		12 T	otal revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)		12	1,150,505.
		13 P	Program services (from line 44, column (B))	RS-OS	13	924,935.
	Expenses	14 N	Anagement and general (from line 44, column (C))		14	154,326.
	bed	15 F	undraising (from line 44, column (D))	<u> </u>	15	125,251.
	ΔĬ	16 P	rayments to affiliates (attach schedule) OGDEN, U	7	16	
_			otal expenses (and lines to and 44, column (A))		17	1,204,512.
	Ø		xcess or (deficit) for the year (subtract line 17 from line 12)		18	-54,007.
	Assets		let assets or fund balances at beginning of year (from line 73, column (A))		19	3,022,723.
	As-			tatement 3		84,760.
7	2300 2-03-		et assets or fund balances at end of year (combine lines 18, 19, and 20)		21	3,053,476.
ř	2-03-	-06 LH	A For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.			Form 990 (2005)

Animal Welfare Society, Inc. Form 990 (2005) 23-7018176 Part II Statement of All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) **Functional Expenses** and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (C) Management Do not include amounts reported on line (B) Program (D) Fundraising (A) Total services and general 6b, 8b, 9b, 10b, or 16 of Part I. 22 Grants and allocations (attach schedule) (cash \$. 0 • noncash \$___ 22 If this amount includes foreign grants, check here 23 Specific assistance to individuals (attach 23 schedule) 24 Benefits paid to or for members (attach 0. 0 25 Compensation of officers, directors, etc. 25 409,519. 74,310. 557,852. 74,023. 26 Other salanes and wages 26 27 10,985. 8,088. **1,536.** <u>1,361.</u> 27 Pension plan contributions 28 28 Other employee benefits 34,083 6,471 5,735. 46,289. 29 29 30 Professional fundraising fees 30 11,605 31 11,605. 31 Accounting fees 32 32 Legal fees 33 33 Supplies 9,545. 6,681 1,432 1,432. 34 34 Telephone 6,548. 10,635. 17,669. 486. 35 Postage and shipping 35 41,912. 39,460. 2,452 36 36 Occupancy 37 37 Equipment rental and maintenance 17,750 1,317. 337. 16,096. 38 Printing and publications 38 39 39 Travel 40 Conferences, conventions, and meetings 40 41

2,194.

5,019.

g See Statement 4	43g	419,208.	360,817.	44,616.	13,775.
14 Total functional expenses. Add lines 22	1 1				
through 43. (Organizations completing					
columns (B)-(D), carry these totals to lines]				
13-15)	44	1,204,512.	924,935.	154,326.	125,251.
Joint Costs. Check 🕨 🔲 if you are following	SOP	98-2.		_	
Are any joint costs from a combined educational campa	gn and	l fundraising solicitation re	ported in (B) Program serv	ıces? ►	Yes X No
f "Yes," enter (i) the aggregate amount of these joint co	sts \$ _	<u>N/A</u> ;	(ii) the amount allocated to	Program services \$	N/A ;
iii) the amount allocated to Management and general \$	ı	N/A ; and	(iv) the amount allocated to	Fundraising \$	N/A
					Form 990 (2005)

71,697.

42

43a 43b 43c 43d 43e 43f

42 Depreciation, depletion, etc (attach schedule) 43 Other expenses not covered above (rtemize): 64,484.

23-7018176

Page 3

Part III | Statement of Program Service Accomplishments (See the instructions.)

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.

W	hat is the organization's pri	imary exempt purp	ose? ► <u>Se</u>	e Statement	6			Program Service Expenses
clı	l organizations must descri ents served, publications is ganizations and 4947(a)(1)	ssued, etc. Discuss	achievements	that are not measurab	le. (Section 501(c)(3)	and (4)		(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
а	See Statemer	nt 5						
						-		1
]
	(Grants and allocations	\$	· · · · · · · · · · · · · · · · · · ·	If this amount include	s foreign grants, chec	k here		924,935.
b		Ψ		ii tiis amount iiicidde	S loreign grants, chec	KTIETO		321,333.
		· · · · · · · · · · · · · · · · · · ·				 		
								-
_	(Grants and allocations	\$)	If this amount include	s foreign grants, chec	k here		
С								
		 						
d	(Grants and allocations	\$)	If this amount include:	s foreign grants, chec	k nere	· <u> </u>	
								
	(Grants and allocations	\$)	If this amount includes	s foreign grants, chec	k here		
е	Other program services (a	ttach schedule)						
	(Grants and allocations	\$)	If this amount includes		k here 🕨		
f	Total of Program Service	Expenses (should	d equal line 44,	, column (B), Program s	ervices) , , , ,			924,935.

Part IV Balance Sheets (See the instructions.) Note: Where required, attached schedules and amounts within the description column (A) Beginning of year (B) End of year should be for end-of-year amounts only. 125 1,328. 45 45 Cash - non-interest-bearing 327.484 237,277. 46 46 Savings and temporary cash investments 4,363. 47a 47 a Accounts receivable 7.399. 4,363. b Less: allowance for doubtful accounts 47b 48 a Pledges receivable 5,580 48a 16,370. 5,580. 48b 48c b Less: allowance for doubtful accounts 49 Grants receivable .. . 49 50 Receivables from officers, directors, trustees, 50 and key employees 51 a Other notes and loans receivable 51a 51b 51c **b** Less: allowance for doubtful accounts 13.456. 12,436. 52 52 Inventories for sale or use 3,847. 18,632. 53 53 Prepaid expenses and deferred charges FMV 54 Investments - securities 54 55 a Investments - land, buildings, and equipment: basis 55a b Less, accumulated depreciation 55b 1,547,538 626,778. See Statement 7 56 Investments - other ... 56 1.543.971 57 a Land, buildings, and equipment: basis 57a 661,169. 870,072 882,802. 57b 57c b Less: accumulated depreciation 339,517. 348,065. 58 Other assets (describe See Statement 8 58 3,125,808 59 3,137,261. 59 Total assets (must equal line 74) Add lines 45 through 58 70,203. 46,093. 60 60 Accounts payable and accrued expenses 61 Grants payable 61 62 62 Deferred revenue Liabilities Loans from officers, directors, trustees, and key employees 63 63 64a 64 a Tax-exempt bond liabilities 64b b Mortgages and other notes payable 32,882 37,692. See Statement 65 65 Other liabilities (describe 83,785. 103,085 Total liabilities. Add lines 60 through 65) Organizations that follow SFAS 117, check here X and complete lines 67 through 69 and lines 73 and 74. **Net Assets or Fund Balances** 2,539,292 2,573,831. 67 Unrestricted 67 91,841. 108,150. 68 68 Temporarily restricted 375,281. 387,804. 69 69 Permanently restricted Organizations that do not follow SFAS 117, check here
and complete lines 70 through 74. 70 70 Capital stock, trust principal, or current funds 71 71 Paid-in or capital surplus, or land, building, and equipment fund 72 72 Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; 73 3,053,476. 3,022,723 column (A) must equal line 19; column (B) must equal line 21) 3,137,261. Total liabilities and net assets/fund balances. Add lines 66 and 73 125.808

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Form 990 (2005)

	art V-A Current Officers, Directors, Trustees, and K	ov Employees (control		23-7018	31/6	Yes	No.
	Enter the total number of officers, directors, and trustees permitted		<u> </u>		Г	165	INC
,,,,	meetings	to vote on organization be	b	15			
		OOO Bart V.A. or highest	componented omr			i	
t	listed in Schedule A, Part I, or highest compensated professional ar				ļ		
	Part II-A or II-B, related to each other through family or business rela	itionships? If "Yes," attach	n a statement that	ıdentıfies	1		l
	the individuals and explains the relationship(s)				75b	-	X
C							
	listed in Schedule A, Part I, or highest compensated professional an Part II-A or II-B, receive compensation from any other organizations,	d other independent cont	ractors listed in Sc	thedule A,			
	organization through common supervision or common control?	whether tax exempt or ta	kable, mai are rela	tea to this	75c		х
	Note. Related organizations include section 509(a)(3) supporting organizations	anizations.		•• •	1.00		
	If "Yes," attach a statement that identifies the individuals, explains the relation		n and the other organ	nization(s), and			
	describes the compensation arrangements, including amounts paid to each in	ndividual by each related orga	nization.				
	Does the organization have a written conflict of interest policy?				75d	X	
Pa	Former Officers, Directors, Trustees, and Ke Benefits (If any former officer, director, trustee, or key er						rina.
	the year, list that person below and enter the amount of co						
		T	1	(D) Contributions	to (I	E) Expe	nse
	(A) Name and address None	(B) Loans and Advances	(C) Compensation	plans & deferred compensation pla	ا ا الاستارات	ccount er allow	
	Non_e			Compensation pia	115 0	<u> </u>	4,1000
	_						
_			<u> </u>			_	
				İ			
					1		
		<u> </u>			+		
					1		
		<u> </u>					
Pai	t VI Other Information (See the instructions)				٠ - ١	Yes	No
76	Did the organization engage in any activity not previously reported to	the IRS? If "Yes." attach	a detailed		$\neg \neg$	-	
-	description of each activity				76		X
77	Were any changes made in the organizing or governing documents b	out not reported to the IRS	?		77		X
	If "Yes," attach a conformed copy of the changes.						
78 a	Did the organization have unrelated business gross income of \$1,000	or more during the year o	covered by this ret		78a		<u>X</u>
	If "Yes," has it filed a tax return on Form 990-T for this year?			N/A	78b		
79	Was there a liquidation, dissolution, termination, or substantial contra			í	79		X
ви а	Is the organization related (other than by association with a statewide			on	900	- 1	х
h	membership, governing bodies, trustees, officers, etc., to any other elf "Yes," enter the name of the organization \(N/A \)	stempt or nonexempt orga	unzauonr	• • •	80a		<u> </u>
U	14/A	and check whether it is	exempt or	nonexempt			
81 a	Enter direct or indirect political expenditures (See line 81 instructions		81a	_0.	Ì		
b	Did the organization file Form 1120-POL for this year?	· ·			81b	لي	<u>X</u>
523161	/02-03-06				Form	990 (2	2005)

Form	990 (2005) Animal Welfare Society, Inc.	23-7018	<u> 3176</u>		age 7
Pa	rt VI Other Information (continued)			Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charg	e or at substantially			
	less than fair rental value?		82a		X
b	If "Yes," you may indicate the value of these items here. Do not include this				
	amount as revenue in Part I or as an expense in Part II.	/-	-		ĺ
	(See instructions in Part III.)	N/A	┨	4,5	1
	Did the organization comply with the public inspection requirements for returns and exemption application	ons?	83a	X	
	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?		83b	X	
	Did the organization solicit any contributions or gifts that were not tax deductible?	N/A	84a		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions		0.45		ĺ
0.5	tax deductible?	N/A N/A	84b 85a		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	N/A N/A	85b		
D	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	•	030		
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organiza waiver for proxy tax owed for the prior year.	don received a			
	Dues, assessments, and similar amounts from members	N/A			
C	Section 162(e) lobbying and political expenditures 85d	N/A	1		l
d	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e	N/A	1		l
e	Taxable amount of lobbying and political expenditures (line 85d less 85e)	N/A	1 .		l
1	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	N/A	85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85		00 8		
.,	to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the	•			}
	following tax year?	. N/A	85h	}	
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on				
00	line 12 86a	N/A		Ì	
b	Gross receipts, included on line 12, for public use of club facilities 86b	N/A	1		
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders	N/A	1		
ь.	Gross income from other sources. (Do not net amounts due or paid to other sources		1		
_	against amounts due or received from them)	N/A			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation of	r partnership,]		ı
	or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 30				
	If "Yes," complete Part IX		88		X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under:			İ	
	section 4911 ▶ 0 . ; section 4912 ▶ 0 . ; section 4955 ▶		,	İ	
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit				
	transaction during the year or did it become aware of an excess benefit transaction from a prior year?				
	If "Yes," attach a statement explaining each transaction		89b_		<u>X</u>
C	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under	r			_
	sections 4912, 4955, and 4958	. ▶			0.
đ	Enter: Amount of tax on line 89c, above, reimbursed by the organization	. ▶			0.
90 a	List the states with which a copy of this return is filed ► <u>ME</u>				
	Number of employees employed in the pay period that includes March 12, 2005	90b	005	2.2	28
91 a		ne no. ► <u>(207)</u>	985		44
	Located at ► P.O. BOX 43, WEST KENNEBUNK, ME	ZIP + 4 ▶ <u>C</u>	409	4	
b	At any time during the calendar year, did the organization have an interest in or a signature or other author		ſ	Yes	No
	over a financial account in a foreign country (such as a bank account, securities account, or other financial	31		. 03	
	account)?	•	91b		<u>X</u>
	If "Yes," enter the name of the foreign country N/A				
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Ban	ĸ			
	and Financial Accounts.	•	010		Х
C	At any time during the calendar year, did the organization maintain an office outside of the United States?		91c	i	<u>_v</u> _
00	If "Yes," enter the name of the foreign country N/A				7
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here	92	N/	- ∟ Δ	
	and enter the amount of tax-exempt interest received or accrued during the tax year	- 1 ** 1		990 (2005)

Fait	VII Alialysis of illcome-Floc	adding Activ	100 (See 1/	ie ilistractions.)			
Note: E	Enter gross amounts unless otherwise ed.		Unrelated bus	iness income (B)	(C)	ed by section 512, 513, or 514 (D)	(E) Related or exempt
	ogram service revenue:		siness ode	Amount	Exclu- sion code	Amount	function income
	doption fees				-		190,821
	ees - crematory						45,700
	ees - surrender						16,150
	ees - claimed dogs						9,907
	ees - other						45,840
	dicare/Medicaid payments						
	es and contracts from government age	encies					113,141
_	mbership dues and assessments						
	rest on savings and temporary cash investr	ments			14	876.	,
96 Div	idends and interest from securities				14	50,338.	
97 Net	t rental income or (loss) from real estate	e:					
	ot-financed property						
	debt-financed property		_				
98 Net	rental income or (loss) from personal i	property					
99 Oth	ner investment income					···	
100 Gai	n or (loss) from sales of assets						
	er than inventory	🖳			18	45,312.	
101 Net	income or (loss) from special events				01	41,312.	
102 Gro	ess profit or (loss) from sales of invento	ory .					
	ner revenue:						
a M	iscellaneous income				01	15,428.	
ь —							
d							
e							
_	ototal (add columns (B), (D), and (E))			0		153,266.	421,559
104 Sub	ototal (add columns (B), (D), and (E)) al (add line 104, columns (B), (D), and					153,266.	421,559 574,825
104 Sub 105 Tot Note: <i>Lir</i>	al (add line 104, columns (B), (D), and one 105 plus line 1d, Part I, should equa	(E))		<i>I.</i>		▶	574,825
104 Sub 105 Tot Note: <i>Lir</i>	al (add line 104, columns (B), (D), and (ne 105 plus line 1d, Part I, should equa /III Relationship of Activities	(E))	omplishm	ا. ent of Exem	pt Purp	OSes (See the instruct	574,825 .
104 Sub 105 Tot Note: Lir Part V	al (add line 104, columns (B), (D), and one 105 plus line 1d, Part I, should equal/III Relationship of Activities Explain how each activity for which income	(E))	omplishm column (E) of	ا. ent of Exem	pt Purp	OSes (See the instruct	574,825 .
104 Sub 105 Tot Note: Lir	al (add line 104, columns (B), (D), and (ine 105 plus line 1d, Part I, should equal [IIII] Relationship of Activities Explain how each activity for which income exempt purposes (other than by provided)	(E))	omplishm column (E) of	ا. ent of Exem	pt Purp	OSes (See the instruct	574,825 .
104 Sub 105 Tot Note: Lir Part V	al (add line 104, columns (B), (D), and one 105 plus line 1d, Part I, should equal/III Relationship of Activities Explain how each activity for which income	(E))	omplishm column (E) of	ا. ent of Exem	pt Purp	OSes (See the instruct	574,825 .
104 Sub 105 Tot Note: Lir Part V	al (add line 104, columns (B), (D), and (ine 105 plus line 1d, Part I, should equal [IIII] Relationship of Activities Explain how each activity for which income exempt purposes (other than by provided)	(E))	omplishm column (E) of	ا. ent of Exem	pt Purp	OSes (See the instruct	574,825 .
104 Sub 105 Tot Note: Lir Part V	al (add line 104, columns (B), (D), and (ine 105 plus line 1d, Part I, should equal [IIII] Relationship of Activities Explain how each activity for which income exempt purposes (other than by provided)	(E))	omplishm column (E) of	ا. ent of Exem	pt Purp	OSes (See the instruct	574,825 .
104 Sub 105 Tot Note: Lir Part V Line No.	al (add line 104, columns (B), (D), and one 105 plus line 1d, Part I, should equal/III Relationship of Activities Explain how each activity for which inconverge purposes (other than by providing See Statement 10	(E))	omplishm column (E) of n purposes).	I. ent of Exem Part VII contribut	p t Purp	oses (See the instructionally to the accomplishment	574,825 and some state of the organization's
104 Sub 105 Tot Note: Lin Part V Line No.	al (add line 104, columns (B), (D), and the 105 plus line 1d, Part I, should equal (IIII Relationship of Activities Explain how each activity for which inconsempt purposes (other than by providing See Statement 10 X Information Regarding Taylor	(E))	column (E) of n purposes).	I. ent of Exem Part VII contribute nd Disregar (C)	p t Purp	ities (See the instruction (D)	574,825
104 Sub 105 Tot Note: Lin Part V Line No.	al (add line 104, columns (B), (D), and the 105 plus line 1d, Part I, should equal/III Relationship of Activities Explain how each activity for which inconverted by providing See Statement 10 X Information Regarding Tales (A) address, and EIN of corporation, Perceivage 105 plus line 105 plus l	(E))	column (E) of n purposes).	I. ent of Exem Part VII contribut	p t Purp	oses (See the instruction to the accomplishment	574,825. rons.) of the organization's ons.) (E) End-of-year
104 Sub 105 Tot Note: Lin Part V Line No.	al (add line 104, columns (B), (D), and the 105 plus line 1d, Part I, should equal/III Relationship of Activities Explain how each activity for which inconverted by the statement 10 X Information Regarding Tale (A) address, and EIN of corporation, Percent	(E))	column (E) of n purposes).	I. ent of Exem Part VII contribute nd Disregar (C)	n pt Purp	ities (See the instruction (D)	574,825
104 Sub 105 Tot Note: Lin Part V Line No.	al (add line 104, columns (B), (D), and the 105 plus line 1d, Part I, should equal [III] Relationship of Activities Explain how each activity for which inconsistent purposes (other than by provided See Statement 10 X Information Regarding Taxon (A) address, and EIN of corporation, thership, or disregarded entity	(E))	column (E) of n purposes).	I. ent of Exem Part VII contribute nd Disregar (C)	n pt Purp	ities (See the instruction (D)	574,825
104 Sub 105 Tot Note: Lin Part V Line No.	al (add line 104, columns (B), (D), and the 105 plus line 1d, Part I, should equal/III Relationship of Activities Explain how each activity for which inconverted by providing See Statement 10 X Information Regarding Tales (A) address, and EIN of corporation, Perceivage 105 plus line 105 plus l	(E))	column (E) of n purposes).	I. ent of Exem Part VII contribute nd Disregar (C)	n pt Purp	ities (See the instruction (D)	574,825
104 Sub 105 Tot Note: Lin Part V Line No.	al (add line 104, columns (B), (D), and the 105 plus line 1d, Part I, should equal [III] Relationship of Activities Explain how each activity for which inconsistent purposes (other than by provided See Statement 10 X Information Regarding Taxon (A) address, and EIN of corporation, thership, or disregarded entity	(E))	column (E) of n purposes).	I. ent of Exem Part VII contribute nd Disregar (C)	n pt Purp	ities (See the instruction (D)	574,825
104 Sub 105 Tot Note: Lir Part V Line No.	al (add line 104, columns (B), (D), and the 105 plus line 1d, Part I, should equal [III] Relationship of Activities Explain how each activity for which incompared to exempt purposes (other than by providing See Statement 10 X Information Regarding Taxon (A) address, and EIN of corporation, thership, or disregarded entity N/A	axable Subs (B) centage of ship interest % %	omplishm column (E) of n purposes). sidiaries a Natur	nd Disregar (C) e of activities	npt Purp	ities (See the instruction (D) Total income	574,825. cons.) of the organization's cons.) (E) End-of-year assets
104 Sub 105 Tot Note: Lin Part V Line No.	al (add line 104, columns (B), (D), and the 105 plus line 1d, Part I, should equal IIII Relationship of Activities Explain how each activity for which incompared purposes (other than by providing See Statement 10 X Information Regarding Talendary, and EIN of corporation, their ship, or disregarded entity N/A Information Regarding Talendary, and EIN of corporation, their ship, or disregarded entity N/A Information Regarding Talendary, and EIN of corporation, their ship, or disregarded entity	(E)) If the amount on the total the According to the According to the According funds for such that the According funds funds for such that the According funds for such that the According funds for such that the According funds for such that the According funds for such that the According funds funds for such that the According funds for such that the According funds for such that the According funds for such that the According funds for such that the According funds for such that the According funds for such that the According funds for such that the According funds for such that the According funds for such that the According funds for such that the According funds for such that the According funds for such that the According funds for such that the According funds for such that the According funds for such that the According funds for such that the According funds for such that the According funds for such that the According funds for s	omplishm column (E) of n purposes). sidiaries a Natur	nd Disregar (C) e of activities	npt Purp	ities (See the Instruction (D) Total Income	574,825 fons.) of the organization's End-of-year assets e instructions)
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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 4947(a)(1) Nonexempt Charitable Trust

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

2005

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Supplementary Information-(See separate instructions.)

23 7018176 Animal Welfare Society, Inc. Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees Part I (See page 1 of the instructions. List each one. If there are none, enter "None.") (b) Title and average hours per week devoted to (e) Expense account and other (a) Name and address of each employee paid (c) Compensation employee benefit plans & deferred more than \$50,000 allowances position STEVEN JACOBSEN DIRECTOR 40.00 67,692 2,031 Total number of other employees paid 0 over \$50,000 Part II-A 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 MANN MEMORIAL VETERINARY CLINIC VETERINARY ROUTE 1, KENNEBUNK, ME 04043 SERVICES 76,165. Total number of others receiving over 0 \$50,000 for professional services Compensation of the Five Highest Paid Independent Contractors for Other Services (List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.) (c) Compensation (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service None Total number of other contractors receiving over 0 \$50,000 for other services

Pa	art III	Statements About Activities (See page 2 of the instructions.)		Yes	No
1	public of	ne year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence point on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the activities \$			
		Part VI-B.)	1		x
		tions that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations	<u> </u>		
	-	"Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.	ĺ	İ	
2	During the trustees, person is	ne year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such a affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," a detailed statement explaining the transactions)			
а		hange, or leasing of property?	2a		X
b	Lending	of money or other extension of credit?	2b	ļ	X
c	Furnishir	ng of goods, services, or facilities?	2c		х
d	Payment	of compensation (or payment or reimbursement of expenses if more than \$1,000)? See Statement 11	2d_	Х	
е	Transfer	of any part of its income or assets?	2e		X
3 a	Do you n	nake grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how			
	you dete	mine that recipients qualify to receive payments.)	3a		X
b	Do you h	ave a section 403(b) annuity plan for your employees?	3b	ļ	X
	-	e year, did the organization receive a contribution of qualified real property interest under section 170(h)?	3c		X
		naintain any separate account for participating donors where donors have the right to provide advice			
		e or distribution of funds?	4a		X
<u>b</u>	Do you p	rovide credit counseling, debt management, credit repair, or debt negotiation services?	4b	<u>.</u>	X
Pa	rt IV	Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)			
10 11a 11b 12		A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i). A school. Section 170(b)(1)(A)(ii). (Also complete Part V.) A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(ii). A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(ii). A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state 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.) 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)(iv). (Also complete the Support Schedule in Part IV-A.) A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) 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.) An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations descrit (1) lines 5 through 12 above; or (2) sections 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). Check the box that descrit the type of supporting organization: Provide the following information about the supported organizations. (See page 6 of the instructions.)			
		Provide the following information about the supported organizations. (See page 6 of the instructions.)	/h\l	0 000-	
		(a) Name(s) of supported organization(s)		e numl om abo	
			_		
	۲۰۰۰۰۰۰ -	20/2/4			
<u> 14</u>		An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)			

6.1163% **▶** 27h h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, 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 Schedule A (Form 990 or 990-EZ) 2005 523121 02-03-06

3,797,417

27g

93.6227%

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

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

Public support percentage (line 27e (numerator) divided by line 27f (denominator))

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

	Does the control between the control of the control		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	 	\vdash
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues,	23	-	\vdash
00	and other written communications with the public dealing with student admissions, programs, and scholarships?	30	ĺ	}
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of	1		
	solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known			
	to all parts of the general community it serves?	31		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
		_		,
32	Does the organization maintain the following:	- , ,		
а	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? Use of facilities?	33e 33f		
1		33g		
9	Athletic programs? Other extracurricular activities?	33h		
"	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)	0011		
	- Tyou answered Tes to any of the above, please explains (if you need more space, attach a separate statement)	-		
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?	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		

Schedule A (Form 990 or 990-EZ) 2005

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)

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v	•	~	

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

		(10 De completed ONET D)	y an engible organization that med rothi 37	00)				
Ch	eck ▶ a	If the organization belon	gs to an affiliated group. Chec	k 🕨	<u>ь</u> 🗀	ıf you ch	ecked "a" and "limited contro	l" provisions apply.
			Lobbying Expenditures tures' means amounts paid or incurred.)				(a) Affiliated group totals	(b) To be completed for ALL electing organizations
							N/A	
36	Total lobbying	expenditures to influence	public opinion (grassroots lobbying)			36	-	
37			a legislative body (direct lobbying)			37		<u> </u>
38		expenditures (add lines 3				38		
39	Other exempt	purpose expenditures	·			39		
40	Total exempt p	ourpose expenditures (add	lines 38 and 39)			40_		
41	Lobbying nont	axable amount. Enter the	amount from the following table -			j		
	If the amount	on line 40 is -	The lobbying nontaxable amount is	-				
	Not over \$500,00	0	20% of the amount on line 40			٦١		
	Over \$500,000 bu	ut 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 \$1,00	0,000		41		
	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			기		
42	Grassroots not	ntaxable amount (enter 25	% of line 41)			42		
43	Subtract line 4	2 from line 36. Enter -0- if	line 42 is more than line 36			43		
44	Subtract line 4	1 from line 38. Enter -0- if	line 41 is more than line 38			44		
	Caution: If the	ere is an amount on eit	her line 43 or line 44, you must file Fo	m 472	0			

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.)

		N/A			
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
45 Lobbying nontaxable amount					0
46 Lobbying ceiling amount (150% of line 45(e))	1				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-R	Lobbying	Activity by	Nonelectina	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:

- a Volunteers
- b Paid staff or management (Include compensation in expenses reported on lines c through h.)
- c Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- f Grants to other organizations for lobbying purposes
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i Total lobbying expenditures (Add lines c through h.)
- If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

	Yes	No	Amount
İ			

	VII Information Re	•	d Transactions and	d Relationships With Noncha	701817 ıritable	6	Page
	Exempt Organiz	zations (See page 12 of the inst	tructions.)				
51 D	id the reporting organization d	lirectly or indirectly engage in any of	f the following with any othe	r organization described in section			
5	01(c) of the Code (other than s	section 501(c)(3) organizations) or	in section 527, relating to po	olitical organizations?			
	• •	ganization to a noncharitable exemp				Yes	No
	(i) Cash	•	v		51a(i)		Х
	ii) Other assets	·	•		a(ii)		Х
•	ther transactions:						
		its with a noncharitable exempt orga	nuzation		b(i)		X
	• •	noncharitable exempt organization			b(ii)	\vdash	X
	•				b(iii)		X
•	ii) Rental of facilities, equipme	·			b(iv)	$\vdash \lnot$	X
•	v) Reimbursement arrangeme	ents			b(v)		X
	v) Loans or loan guarantees		.		b(vi)		X
•	•	membership or fundraising solicita			C		X
		mailing lists, other assets, or paid e			_ •	<u>i</u>	
g	oods, other assets, or services	e is "Yes," complete the following sc given by the reporting organization tent, show in column (d) the value o	. If the organization received			N/A	
						и/ п	'
(a) Line no.	(b) Amount involved	(c) Name of noncharitable ex	emot organization	(d) Description of transfers, transactions, ar	ıd sharıng ar	rangen	nents
	Tanidani involved	Hamo of Honorathable of					
					-		
			 				
-							
			· ·				
Co	the organization directly or inc ode (other than section 501(c) Yes,* complete the following s	(3)) or in section 527?	one or more tax-exempt orga	anizations described in section 501(c) of th	e Yes	x] No
	(a) Name of org		(b) Type of organization	(c) Description of relation	ıshıp		
	5. 618		2,				
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					<u> </u>		
523151				Cahadula A /Er	rm 000 ar 0	00_E71	2005

ANIMAL WELFARE SOCIETY BOARD OF DIRECTORS 2005-2006

	POSITION	NAME	ADDRESS
1	President	Francine Keating	c/o Animal Welfare Society, Inc. P.O. Box 43, West Kennebunk, ME 04094
2	Vice President	William Speed	c/o Animal Welfare Society, Inc. P.O. Box 43, West Kennebunk, ME 04094
3	Treasurer	Charles McNutt	c/o Animal Welfare Society, Inc. P.O. Box 43, West Kennebunk, ME 04094
4	Recording Secretary	Barbara Belik	c/o Animal Welfare Society, Inc. P.O. Box 43, West Kennebunk, ME 04094
5	Corresponding Secretary	Judith Fenlason	c/o Animal Welfare Society, Inc. P.O. Box 43, West Kennebunk, ME 04094
6		Christ Angelos	c/o Animal Welfare Society, Inc. P.O. Box 43, West Kennebunk, ME 04094
7		Jennifer Quimby-Berube	c/o Animal Welfare Society, Inc. P.O. Box 43, West Kennebunk, ME 04094
8		William Burrows	c/o Animal Welfare Society, Inc. P.O. Box 43, West Kennebunk, ME 04094
9		Janet Eastman	c/o Animal Welfare Society, Inc. P.O. Box 43, West Kennebunk, ME 04094
10		Martha Flynn	c/o Animal Welfare Society, Inc. P.O. Box 43, West Kennebunk, ME 04094
11		Susan Lothrop Higgins	c/o Animal Welfare Society, Inc. P.O. Box 43, West Kennebunk, ME 04094
12		Cynthia Morris	c/o Animal Welfare Society, Inc. P.O. Box 43, West Kennebunk, ME 04094
13		Cathy Roberts	c/o Animal Welfare Society, Inc. P.O. Box 43, West Kennebunk, ME 04094
14		Gail Rouse	c/o Animal Welfare Society, Inc. P.O. Box 43, West Kennebunk, ME 04094
15			c/o Animal Welfare Society, Inc. P.O. Box 43, West Kennebunk, ME 04094

Form 990 Gain (Loss) F	rom Pub	licly T	raded	Securiti	es S	tatement
Description		oss Price			Expense of Sale	Net Gain or (Loss
158 I SHARES TR RUSSELL 3000 INDEX FD 480 I SHARES MSCI EAFE INDEX		3,989.		8,519.	0.	470
FUND	34	1,308.	3	3,253.	0.	1,05
850.176 SH WASHINGTON MUTUAL INVSTRS CL F 71,000 U S TREASURY BILL CAP GAIN DIST - WASH MUT		5,487. L,000.		6,031. 9,765.	0. 0.	456 1,235
INVS FD CL F CAP GAIN DIST - VARIOUS VARIOUS - SEE SCHEDULE	3	327. 3,781.		0. 0.	0. 0.	327 3,783
ATTACHED OTHER CAPITAL GAINS/LOSSES	129	9,120. 0.	9	1,063. 69.	0. 0.	38,057 -69
To Form 990, Part I, line 8	274	1,012.	22	8,700.	0.	45,312
Form 990 Spec	ial Ever	nts and	Activ	ities	St	tatement
G	ross	Contril	out.	Gross	Direct	Net
Description of Event Re	ceipts	Inclu	ded —— –	Revenue	Expenses	Income
various events and activities	65,330.			65,330	. 24,018.	. 41,312
GCCTATCTE2				00,000	,	41,312
	65,330.			65,330		
		Assets	or Fu	65,330	24,018	
To Fm 990, Part I, line 9		Assets	or Fu	65,330	24,018	41,312
To Fm 990, Part I, line 9 Form 990 Other Changes	in Net	Assets	or Fu	65,330	24,018	41,312

HM Payson of Co.

Run Date: 04/10/2006

Schedule D - Capital Gains and Losses Tax Letter Page#:

1

Schedule D Page#:

Name:

ANIMAL WELFARE SOCIETY

INC ENDOWMENT TRUST FUND

FOR TAX YEAR ENDING: 03/31/2006 SOC SEC / TAX ID. 23-7018176

Part I - Short-Term Gains & Losses

Quantity	Description of Property	Date <u>Acquired</u>	Date <u>Sold</u>	Gross <u>Proceeds</u>	Tax Basis	Gain or Loss-
	MBNA CORP	02/10/2005 (01/03/2006	1,660.49	1,660.49	0.00
	•	Net Short-Te	erm Gain:	1,660 49	1,660.49	0.00

Part II - Long-Term Gains & Losses

		Date	Date	Gross		
Quantity	Description of Property	Acquired	<u>sold</u>	Proceeds	Tax Basis	Gain or Loss-
	GNMA I&II - SINGLE ISSUER	11/04/1998	04/15/2005	177.61	177 61	0.00
	POOL 374663 6% 01/15/2009	•	•			
	CONTRACTOR OF TAXABLE	11/04/1000	05/35/0005			
	GNMA I&II - SINGLE ISSUER		05/15/2005	154.52	154.52	0.00
	POOL 374663 6% 01/15/2009					
	GNMA I&II - SINGLE ISSUER	11/04/1998	06/15/2005	237.65	237 65	0 00
	POOL 374663 6% 01/15/2009	•	00, 23, 2003	237.03	23, 03	0 00
	GNMA I&II - SINGLE ISSUER	11/04/1998	07/15/2005	141.27	141.27	0 00
	POOL 374663 6% 01/15/2009	1			×	
						•
	GNMA I&II - SINGLE ISSUER	11/04/1998	08/15/2005	120 63	120.63	0.00
	POOL 374663 6% 01/15/2009					
	GNMA I&II - SINGLE ISSUER	11/04/1998	09/15/2005	109.71	109.71	0.00
	POOL 374663 6% 01/15/2009					
	GNMA I&II - SINGLE ISSUER		10/15/2005	90 37	90.37	0 00
	POOL 374663 6% 01/15/2009					
			4 4			
	GNMA I&II - SINGLE ISSUER		11/15/2005	126.56	126.56	0.00
	POOL 374663 6% 01/15/2009					
20000 000	GTE FLA INC DTD 95	11/17/1005	11/15/2005	20 000 22	10 074 00	105.00
20000.000	NC 6.25% 11/15/2005	11/1/1995	11/15/2005	20,000.00	19,874 20	125.80
	AC 0.23% 11/13/2003					



Schedule D - Capital Gains and Losses

Tax Letter Page#. 10

Schedule D Page#: 2

Name:

ANIMAL WELFARE SOCIETY
INC ENDOWMENT TRUST FUND

FOR TAX YEAR ENDING: 03/31/2006 SOC SEC / TAX ID: 23-7018176

Part II - Long-Term Gains & Losses - Continued...

		Date	Date	Gross		
Quantity	Description of Property	Acquired	Sold	Proceeds	Tax Basıs	Gain or Loss-
1300.000	SUPERVALU INC COM	10/01/2002	11/25/2005	43,810.00	20,685.84	23,124.16
2.000	TELEFLEX INC	04/16/1999	11/25/2005	134.08	82.19	51.89
148.000	TELEFLEX INC	04/19/1999	11/25/2005	9,921.94	6,316.62	3,605.32
230 000	TELEFLEX INC	11/04/1999	11/25/2005	15,419.23	8,149.81	7,269.42
170 000	TELEFLEX INC	06/13/2003	11/25/2005	11,396.82	7,531.03	3,865.79
	GNMA I&II - SINGLE ISSUER POOL 374663 6% 01/15/2009	11/04/1998	12/15/2005	135.72	135.72	0.00
170	BANK AMER CORP	12/05/2001	01/10/2006	7.89	5 64	2 25
	GNMA 1&II - SINGLE ISSUER POOL 374663 6% 01/15/2009	11/04/1998	01/15/2006	122.69	122.69	0.00
	GNMA I&II - SINGLE ISSUER POOL 374663 6% 01/15/2009	11/04/1998	02/15/2006	179.49	179.49	0.00
25000.000	HOUSEHOLD FIN CORP C-05 @ PAR 5.35% 08/15/2013	10/14/2003	02/15/2006	25,000.00	24,987.50	12.50
	GNMA 1&II - SINGLE ISSUER POOL 374663 6% 01/15/2009	11/04/1998	03/15/2006	173.20	173.20	0.00
		Net Long-7	Term Gain:	127,459.38	89,402 25	38,057 13
						
	Net Short-Term	& Long-Terr	n - Gain:	129,119.87	91,062 74	38,057 13

Form 990	Other	Statement	4		
-	(A)	(B) Program	(C) Management	(D)	
Description	Total	Services	and General	Fundraising	J
Auto expense	6,086.	6,086.			
Education	18,160.	18,160.			
Food-animal	2,892.	2,892.			
Insurance	45,512.	45,512.			
Miscellaneous					
	4,044.	4,044.			
Office supplies	2,665.	2,665.			
Repairs and					
maintenance	32,904.	32,904.			
Shelter operations	27,540.	27,540.			
Spay/neuter program	44,393.	44,393.			
Veterinary fees	98,752.	98,752.			
Veterinary supplies					
and other	27,903.	27,903.			
Volunteer expenses	3,105.	3,105.			
Internet connection	•	•			
and web site	6,422.	6,422.			
Dog park expense	13,458.	13,458.			
Paws Across America	_ ,	•			
expenses	3,960.	3,960.			
Gulf Rescue Expenses	2,476.	2,476.			
Gulf Disaster Relief	20,545.	20,545.			
Auto expense	410.	,	410.		
Computer consulting	1,331.		1,331.		
Insurance	9,893.		9,893.		
Broker fees	12,002.		12,002.		
Miscellaneous	14,853.		14,853.		
Office supplies	3,786.		3,786.		
Repairs and	5,700.		3,,000		
maintenance	2,228.		2,228.		
Internet connection	4,440.		2,220.		
and web site	113.		113.		
	126.		117.	126	
Auto expense	6,190.			6,190	
Insurance Miscellaneous	6,838.			6,838	
	508.			508	
Office supplies	300.			300	•
Internet connection	112			113	ł
and web site	113.				<u>. </u>
Total to Fm 990, 1n 43	419,208.	360,817.	44,616.	13,775	j .
<u> </u>					=

5

Statement of Program Service Accomplishments Form 990

Statement

Description of Program Service One

SEE ATTACHED "2005 in Review" FOR STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS FOR THE ANIMAL WELFARE SOCIETY.

	Grants	Expenses
To Form 990, Part III, line a		924,935.

Form 990 Statement of Organization's Primary Exempt Purpose Statement Part III

Explanation

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

Form 990 Other Investments	5	Statement	7
Description	Valuation Method	Amount	
Securities and other investments	Market Value	1,626,778	3.
Total to Form 990, Part IV, line 56, Column B		1,626,778	3.

Animal Welfare Society, Inc.

2005 in Review

The Animal Welfare Society (AWS) continued to build upon its 38 years of success throughout 2005. The latest program change was an expansion in our Humane Education department that focused on the AWS summer Youth Workshops. During the months of July and August the Humane Education Department now sees many more children, and now those children have the choice of either a one-day program or a three-day program.

Although AWS continues to host premier events like the Morris Insurance Strut Your Mutt and the Project Kitten Kitten Shower, an additional event was added this year in partnership with the York County Coast Star. "Best of the Best" is a summer long campaign that recognizes the best that York County has to offer. This summer campaign culminates in a gala evening event where the Animal Welfare Society becomes host to both the public and the awardees.

AWS was also instrumental in the creation of the Kennebunk Dog Park. Located at 36 Sea Road adjacent to the Town's recycling center, the Park is open to the public and is intended to provide a safe, fenced, natural environment where dogs can exercise and socialize off leash.

The Animal Welfare Society was involved in hurricane rescue during the last few months of 2005. Staff members were sent to Gulf States most affected by Hurricanes Katrina and Rita, and the Animal Welfare Society accepted and distributed local donations on behalf of smaller needy shelters in Louisiana, Mississippi and Texas.

The shelter also saw physical changes to the lobby and cat holding facilities. Titled "Improving the View", the changes to our facilities have made our adoption programs and the animals much more accessible. The creation of community cat rooms, the addition of multiple windows, and a remodel of our front lobby have made a real difference in the care of the animals and the number of animals we have found homes for.

As an open admission facility, the Animal Welfare Society is pleased to have a placement rate (animals going home) that is considered extraordinary by national standards. In 2005 the overall placement rate was 77%, 91% of our dogs, 70% of our cats, and 71% of our small animals all found homes.

In 2005 the Animal Welfare Society was recognized by the Maine Animal Control Association and the Maine State Legislature as Maine's Shelter of the Year. 2005 was also the year the AWS received its third four star rating from Charity navigator, indicating that AWS outperforms most charities in America in its efforts to operate in the most fiscally responsible way possible.

AND OTHER PROGRAMS

93g

		·	
Form	990	Other Assets	Statement 8
Descr	iption		Amount
Benef	348,065.		
Total	to Form 990, Pa	rt IV, line 58, Column B	348,065.
Form	990	Other Liabilities	Statement 9
Descr	iption		Amount
Wages Prepa:	8,788. 28,904.		
Total	37,692.		
Form !		III - Relationship of Activities to complishment of Exempt Purposes	Statement 10
Line	Explanation of	Relationship of Activities	
93a		ARE COLLECTED TO COVER THE COSTS OF HOUSI D TO FURTHER THE CAUSE OF RESPONSIBLE ANI	
93b	CREMATORY FEES	ARE COLLECTED TO COVER THE COSTS OF CREM ND TO FURTHER THE CAUSE OF RESPONSIBLE AN	MATIONS, CARE OF
93c	SURRENDER FEES	ARE COLLECTED TO COVER THE COSTS OF HOUS D TO FURTHER THE CAUSE OF RESPONSIBLE ANI	SING AND FEEDING
93d 93e	CLAIMED DOG FE	ES ARE COLLECTED TO COVER THE COSTS OF HO D TO FURTHER THE CAUSE OF RESPONSIBLE ANI COLLECTED TO COVER THE COSTS OF EDUCATION	OUSING & FEEDING MAL ADOPTION

MUNICIPAL FEES ARE COLLECTED TO COVER THE COSTS OF HOUSING AND FEEDING

THE ANIMALS AND TO FURTHER THE CAUSE OF RESPONSIBLE ANIMAL ADOPTION

Schedule A

Explanation of Transactions Part III, Line 2d Statement 11

A MEMBER OF THE BOARD OF DIRECTORS OWNS A CLINIC THAT PROVIDES VETERINARY SERVICES TO THE SOCIETY. FEES CHARGED FOR THESE SERVICES TOTALED \$76,165 FOR THE YEAR ENDED MARCH 31, 2006.

Schedule A	Other Income		Statement 12		
Description	2004 Amount	2003 Amount	2002 Amount	2001 Amount	
MISCELLANEOUS INCOME	2,075.	2,844.	2,303.	2,69	90.
Total to Schedule A, line 22	2,075.	2,844.	2,303.	2,69	90.