

Form **990-EZ**

Department of the Treasury
Internal Revenue Service

Short Form 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)

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form.
▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-1150

2008

Open to Public Inspection

A For the **2008** calendar year, or tax year beginning **and ending**

<p>B Check if applicable:</p> <p><input type="checkbox"/> Address change</p> <p><input type="checkbox"/> Name change</p> <p><input type="checkbox"/> Initial return</p> <p><input type="checkbox"/> Termination</p> <p><input type="checkbox"/> Amended return</p> <p><input type="checkbox"/> Application pending</p>	<p>Please use IRS label or print or type See Specific Instructions</p>	<p>C Name of organization HART FOR ANIMALS, INC.</p> <p>Number and street (or P.O. box, if mail is not delivered to street address) Room/suite PO BOX 67</p> <p>City or town, state or country, and ZIP + 4 OAKLAND, MD 21550</p>	<p>D Employer identification number 82-0584608</p> <p>E Telephone number (301) 334-4278</p> <p>F Group Exemption Number ▶</p>
<p>• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)</p>		<p>G Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual Other (specify) ▶</p>	
<p>I Website: ▶ WWW.HARTFORANIMALS.ORG</p>		<p>H Check <input type="checkbox"/> if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)</p>	
<p>J Organization type (check only one) — <input checked="" type="checkbox"/> 501(c) (3) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527</p>		<p>K Check <input type="checkbox"/> if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.</p>	
<p>L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$1,000,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ 122265.</p>			

Part I		Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)	
Revenue	1	Contributions, gifts, grants, and similar amounts received	73004.
	2	Program service revenue including government fees and contracts	
	3	Membership dues and assessments	
	4	Investment income	
	5a	Gross amount from sale of assets other than inventory	
	5b	Less: cost or other basis and sales expenses	
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach schedule)	
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/>	
	6a	Gross revenue not including \$ reported on line 1) of contributions	48676.
Expenses	6b	Less: direct expenses other than fundraising expenses	21617.
	6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	27059.
	7a	Gross sales of inventory, less returns and allowances	
	7b	Less: cost of goods sold	
	7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	
	8	Other revenue (describe ▶ See Statement 2)	585.
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	100648.
	10	Grants and similar amounts paid (attach schedule)	
	11	Benefits paid to or for members	
Net Assets	12	Salaries, other compensation, and employee benefits	
	13	Professional fees and other payments to independent contractors	12973.
	14	Occupancy, rent, utilities, and maintenance	
	15	Printing, publications, postage, and shipping	3799.
	16	Other expenses (describe ▶ See Statement 1)	6584.
	17	Total expenses. Add lines 10 through 16	23356.
	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	77292.
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19589.	
20	Other changes in net assets or fund balances (attach explanation)		
21	Net assets or fund balances at end of year. Combine lines 18 through 20	96881.	

Part II		Balance Sheets (See the instructions for Part II.)	
		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	19589.	96881.
23	Land and buildings		
24	Other assets (describe ▶)		
25	Total assets	19589.	96881.
26	Total liabilities (describe ▶)	0.	0.
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	19589.	96881.

SCANNED 11/10/2009

Part V Other Information (Note the statement requirements in the instructions for Part VI.)

		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.		
a	Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Sch. N		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a 0.		
b	Did the organization file Form 1120-POL for this year?		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b N/A		
39	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on line 9 39a N/A		
b	Gross receipts, included on line 9, for public use of club facilities 39b N/A		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0. ; section 4912 ▶ 0. ; section 4955 ▶ 0.		
b	Section 501(c)(3) and (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," complete Schedule L, Part I		X
c	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0.		
d	Enter amount of tax on line 40c reimbursed by the organization ▶ 0.		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		X
41	List the states with which a copy of this return is filed. ▶ MD		
42a	The books are in care of ▶ CAROLINE ROBISON Telephone no. ▶ (301) 334-4278 Located at ▶ 1094 EAGLE ROCK ROAD, OAKLAND, MD ZIP + 4 ▶ 21550		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	Yes	No
42b			X
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: ▶		X
42c			X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43 N/A		
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
44			X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
45			X

Part VI Section 501(c)(3) organizations only. All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51.

- 46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II
48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
49a Did the organization make any transfers to an exempt non-charitable related organization?
b If "Yes," was the related organization(s) a section 527 organization?
50 Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

Table with 2 columns: Yes, No. Rows 46-49b.

Table for line 50: Highest compensated employees. Columns: (a) Name and address of each employee paid more than \$100,000, (b) Title and average hours per week devoted to position, (c) Compensation, (D) Contributions to employee benefit plans & deferred compensation, (E) Expense account and other allowances.

51 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

Table for line 51: Highest compensated independent contractors. Columns: (a) Name and address of each independent contractor paid more than \$100,000, (b) Type of service, (c) Compensation.

Total number of other independent contractors each receiving over \$100,000

Sign Here: Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer: MICHAEL R. PELLET, PRESIDENT. Date: 5/13/09.

Paid Preparer's Use Only: Preparer's signature, Date: 5/11/09, Check if self-employed: [X], Preparer's Identifying Number (See instr): BOAL & ASSOCIATES, PC, 317 E. OAK STREET - SUITE 1, OAKLAND, MD 21550. EIN, Phone no. (301) 334-4007.

May the IRS discuss this return with the preparer shown above? See instructions. [X] Yes [] No

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	6581.	2183.	1758.	23469.	73004.	106995.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	4782.	3768.	2365.	2286.	48676.	61877.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 - 5	11363.	5951.	4123.	25755.	121680.	168872.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons				11500.	10000.	21500.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b				11500.	10000.	21500.
8 Public support (Subtract line 7c from line 6)						147372.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6	11363.	5951.	4123.	25755.	121680.	168872.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources				80.	535.	615.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b				80.	535.	615.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)					50.	50.
13 Total support (Add lines 9, 10c, 11, and 12)						169537.

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	86.93 %
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	100.00 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	.36 %
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%

19a 33 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Form 990-EZ	Other Expenses	Statement	1
Description		Amount	
ADVERTISING AND PROMOTIONAL EXPENSE		3311.	
BANK FEES		79.	
INSURANCE EXPENSE (LIABILITY)		275.	
DUES AND SUBSCRIPTIONS		150.	
MISCELLANEOUS EXPENSE		41.	
OFFICE EXPENSE		21.	
OPERATING SUPPLIES		512.	
PROGRAM EXPENSES - (ANIMAL CARE, VET FEES)		1347.	
TELEPHONE EXPENSE		537.	
TRAVEL AND ENTERTAINMENT		50.	
MISCELLANEOUS EXPENSE RECAP		261.	
Total to Form 990-EZ, line 16		6584.	

Form 990-EZ	Other Revenue	Statement	2
Description		Amount	
BANK INTEREST - FIRST UNITED BANK & TRUST		299.	
BANK INTEREST - EDWARD JONES		63.	
DIVIDENDS - EDWARD JONES		173.	
MISCELLANEOUS INCOME		50.	
Total to Form 990-EZ, line 8		585.	

FORM 990-EZ

Information Regarding Transfers
Associated with Personal Benefit Contracts

Statement 3

- A) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? [] Yes [X] No

- B) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . [] Yes [X] No

TO RESCUE ANIMALS FROM THE GARRETT COUNTY ANIMAL SHELTER AND PRIVATE OWNERS
IN WESTERN MARYLAND AND PROVIDE THEM WITH A PERMANENT HOME.