Form 990

SCHEDULE B IS NOT AVAILABLE FOR PUBLIC INSPECTION.

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

Do not enter social security numbers on this form as it may be made public.

2015 Open to Public Inspection

DMB No. 1541-0047

Department of the Trackury Internal Revenue Service

Information about Form 990 and its instructions is at www.irs.gov/form990

A I	For th	e 2015 calendar year, or tax year deginning	and	ending				
В	Check If applicab	C Name of organization			D Employ	er identifi	cation number	
	Addr	» ANIMAL DEFENSE LEAGUE OF T	EXAS					
	Name					74-6	002033	
	Initial Sturr Final	Number and street (or P.U. Box if mail is not delivered to	o street address)	Room/suite	E Telepho		r 655-1481	
Ļ	intern termi				0.0		5,921,	207
	sted TAmen	City or town, state or province, country, and ZIP or I SAN ANTONIO, TX 78217-231			G Gressrece			307.
H	taturr Appli	BAN ANTONIO, IA 10211-231			H(a) Is this			T&1
_	tion pendi	F Name and address of principal officer; JANICE		70217		pordinates		X No
	_	11300 NACOGDOCHES RD, SAN A		78217	H(b) Austa			No.
		empt status: X 501(c)(3) 501(c)() ◀ (ins	ert no.) 4947(a)(1) (or 527			list (see instructi	ons)
-		te: > WWW.ADLTEXAS.ORG		1			n number 🕨	
		organization: X Corporation Trust Association	n Other ►	L Year o	of tormation:	T 9 3 4 1 M	A State of legal dom	ncile: 'I'X
Pě	art I.	Summary						
Ф	1	Briefly describe the organization's mission or most signific					BANDONED	
Activities & Governance		ANIMALS, PROVIDING FOR THEIR						
FL	2	Check this box if the organization discontinued		ed of more	than 25% of	I	ets	1.0
ò	3	Number of voting members of the governing body (Part VI						12
4 5	4	Number of independent voting members of the governing	body (Part VI, line 1b)			4		12
90	5	Total number of individuals employed in calendar year 201		5		117		
THE I	6	Total number of volunteers (estimate if necessary)	******************************			. 6		1034
Act	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			7a		0.
	b	Net unrelated business taxable income from Form 990-T, li	ne 34					0.
					Prior Ye		Current Ye	
9					2,199		5,115,	
Revenue			**** ::::::::::::::::::::::::::::::::::			359.		045.
300		Investment income (Part VIII, column (A), lines 3, 4, and 7d			33			425.
-		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10d				678.		281.
		Total revenue - add lines 8 through 11 (must equal Part VIII			3,057		<u>5,902,</u>	<u>485.</u>
		Grants and similar amounts paid (Part IX, column (A), lines		100000		0.		0 *
		Benefits paid to or for members (Part IX, column (A), line 4)				0.		0.
SS.	15	Salaries, other compensation, employee benefits (Part IX, o		2,007		2,487,		
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	incorn.		0.		0.	
xpe	Ь	Total fundraising expenses (Part fX, column (D), line 25)	▶ 160,88		102 -	7113		
ш	''	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e			1,250		1,601,	
		Total expenses. Add lines 13-17 (must equal Part IX, colum			3,257		4,089,	
		Revenue less expenses. Subtract line 18 from line 12			-199		1,812,	966.
ŏă				Beg	Inning of Curr		End of Yes	
Sels	1		*** ***********************************		5,857		7,434,	
SE	F.	Total liabilities (Part X, line 26)				842.		912.
25 E	22	Net assets or fund balances. Subtract line 21 from line 20		11/20	5,364	011.	7,163,	<u> 258.</u>
		Signature Block						
		Ities of perjury, I declare that I have examined this return, including				-	knowledge and beli	el, it is
rue,	correc	t, and complete. Declaration of preparer (other than officer) is base	ed on all Information of whi	ch preparer h	as any knowle	idge.		
		D						
ilgr	n	Signature of officer			Date			
ler	8	JANICE DARLING, EXECUTIVE I	DIRECTOR					
_				10	140	I day of	T DT/N	
11.4			r's signature	100	ate	Died [PTIN	4.2
zid		JOSEPH A HERNANDEZ	c Duron n		1	Seil-gropinys:		
	ater	Firm s name AKIN, DOHERTY, KLEIN		٠.	Firm	's EIN 🛌	74-26065	שלב
:se	Only	Firm's address 8610 N. NEW BRAUNFEL:				/ 0 -	01 000 1	200
_		SAN ANTONIO, TX 7821			J Pho:	ne no. (21	10) 829-1	
Aay	/ the IF	IS discuss this return with the preparer shown above? (see	instructions)				X Yes	No.

	m 990 (2015) ANIMAL DEFENSE LEAGUE OF T	XXAS 74-600	2033 Page 2
Pa	art III Statement of Program Service Accomplishments		g-20000-amag
_	Check if Schedule O contains a response or note to any line in this Part I	DE LE LUMBE DATE UNE	region mine
1		ATTE TA 1 MINUTE NO 11-11 AT	
	CHARTERED IN 1934 THE ANIMAL DEFENSE LEA		
	FOR STRAY AND ABANDONED DOGS AND CATS. O		
	ANIMALS CARE, SHELTER, AND MEDICAL TREAT		IND THE
	BEST POSSIBLE PERMANENT HOME FOR EACH AM		
2	Did the organization undertake any significant program services during the year		C22
	the prior Form 990 or 990-EZ?	curre man ammunication of t	Yes X No
	If "Yes," describe these new services on Schedule O.		-
3	Did the organization cease conducting, or make significant changes in how it contains a second conducting of the conduct	enducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its th		•
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount	of grants and allocations to others, the total exp	enses and
_	revenue, if any, for each program service reported.		F.C.1 . 0.4.F
4a) (Revenue S	561,045.
	SHELTER, CARE, COMPASSION, MEDICAL TREAT		
	FOR THE DOGS AND CATS IN OUR CUSTODY. OU		
	PERMANENT LOVING HOMES FOR EACH ANIMAL I		
	BY INCREASING THE ADOPTION RATE, A GREAT BROUGHT INTO OUR SHELTER, THUS SPARING M		20.
	NEEDLESSLY EUTHANIZED BY OTHERS. IN SUPP		GOAL OF
	BECOMING A NO-KILL COMMUNITY AND REDUCIN		
	ANIMALS, WE OFFER LOW-COST PUBLIC SPAY A		
	ANIMALS AND FOR FERAL CATS.	ND NEUTER SERVICES FOR C	DANM
	ANTIMALO AND FOR PERAN CATS.		***************************************
4b	(Code) (Expenses \$ Including grants of \$) (Revenue S	. 1
TIU	/ (cabiumas s) / (cabiumas s)	/ (Hevenue s	
4c	(Code) (Expenses \$ Including grants of \$) (Revenue S	1
			· · · · · · · · · · · · · · · · · · ·
			100
		Maria Cara Cara Cara Cara Cara Cara Cara	
	2000 SCC01 400007		
4d	Other program services (Describe in Schedule O)		
	(Expenses 5 including grants of 5) (Revenue S)
40	Total program service expenses ➤ 3,316,785.		
			Form 990 (2015)

-			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	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	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? // "Yes," complete Schedule C, Part //	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-197 If *Yes, * complete Schedule C, Part III	5	1000	X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			7.
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	_	X
В	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X	34		
	as applicable.			
2	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	_
þ	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	145		х
Į*.	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	11b	- 0	Λ.
C	assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VIII	11c	х	
ď	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	116	-16	-
_	Part X, line 167 // "Yes," complete Schedule D, Part IX	110		Х
	Did the organization report an amount for other liabilities in Part X, line 257 If "Yes," complete Schedule D, Part X	11e		X
ī	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	1		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	111		Х
12a	Did the organization obtain separate_independent audited financial statements for the tax year? If *Yes, * complete			
	Schedule D, Parts XI and XII	12a	X	
ь	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), fine 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
4P	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII. lines	17		X
18		18	x	
19	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."	18	A	-
1.45	complete Schedule G. Part III	19		Х
		Form	990 (

Form 990 (2015)

Note. All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

Enter the number reported in Box 3 of Form 1036. Enter 0-if not applicable 10 9 9 15 Enter the number of Forms W2G included in fire 1a. Enter 0-if not applicable 15 10 0 9 15 Enter the number of Forms W2G included in fire 1a. Enter 0-if not applicable 15 10 0 10 10 10 10 10 10 10 10 10 10 10 1		Check If Schedule O contains a response or note to any line in this Part V	101 (550)	11111	
16 Enter the number of Porm W V3G included: In in at a Enter of Hir and applicable 15 10 0 0				Yes	Na
Enter the number of Forms W2G included in live 1a. Enter o-1 in oil applicable Did the organization comply with backup withholding fulse for reportable payments to vendors and reportable gaming (pambling) winnings to prize winnes? 2a. Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements. 2a	18	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
E Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W.3, Transmittal of Woge and Tax Statements. 2a 117 b II at least one is reported on line 2a, did the organization file all required fielderal employment tax returns? 2b II at least one is reported on line 2a, did the organization file all required fielderal employment tax returns? 2c X Note. If the sum of lines 1a and 2a is greater than 250, you may be required for explored from the sum of the 1a and 2a is greater than 250, you may be required to explored from the sum of the 1a and 2a is greater than 250, you may be required to explored from the 1a and 2a is greater than 250, you may be required to explored from the 1a and 2a is greater than 250, you may be required to explored from the 1a and 2a is greater than 250, you may be required to explored from the 1a and 2a is greater than 250, you may be required to explored from the 1a and 2a is greater than 250, you may be required to explored from the 1a and 2a is greater than 250, you may be required to explored from 1a and	b				
Gambing) winnings to pixe winners? Effect the number of employees reported on Form W3, Transmittal of Wage and Tax Statements. filed for the calendar year ending with or within the year covered by this roturn Note. If the aum of lines is an ard 2 is greater than 250, you may be required to de-nife (see instructions). B It all least one is reported on line 2 a, did the organization file all required selected employment as returns? 2b X Note. If the aum of lines is an ard 2 is greater than 250, you may be required to e-nife (see instructions). B It if was, a least the activity of the second of the second of the organization in the required to e-nife (see instructions). B It if was, a least the second of the second of the second of the organization in the second of the s	£		450	100	
28 Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statemens. Red for the calledary year ending with or within the year covered by this return. Red for the calledary year ending with or within the year covered by this return. As the call the same of t			1c	X	
field for the callendar year ending with or within the year covered by this nature. Section First Section S	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements.	1.0	free:	
b II at least one is reported on line 2a, did the organization file all required federal employment tax neturns? Note. If the sum of lines 1s and 2a is greater than 250, you may be required to _Finis (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b II "Ves," has it filled a Form 860-T for this year? If "No," to fine 3b, provide an explanation in Schedula O 3b II "Ves," and during the calendary ear, did the organization have an explanation in Schedula O 3c II "Ves," the fill of a foreign country (such as a bank account, securities account, or other financial account) in a foreign country. See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial account) or a foreign country is substituted to a prohibited tax shelter transaction at any time during the tax year? 5c II "Yes," to line 5a or 5b, did the organization file Form 888617 5c II "Yes," to line 5a or 5b, did the organization file Form 888617 5c II "Yes," to line 5a or 5b, did the organization file Form 888617 5d II "Yes," did the organization include with every solitation on express statement that such contributions or gifts were not tax deductible? 7c Organizations that may receive deductible contributions under section 170(c). 8d II "Yes," did the organization nettly the bonor of the value of the goods or services provided? 7b II "Yes," did the organization nettly the organization solit, and the organization solit, and the organization selective apayment in excess of S15 made party as a centification and party for goods and services provided in the payor? 7c II "Yes," did the organization selective and provided intellectual property of the organization file form 8282? 7c II "Yes," did the organization selective and provided intellectual property of the organization file form 8282? 8d II "Yes," did the organization wit					
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a X to "ir"es," has it filed a Form 990-T for this year? If "No," to fine 3b, provide an explanation in Schedule O 3b If "Yes," enter the name of the foreign country. If "No," to fine 3b, provide an explanation in Schedule O 3c If "Yes," enter the name of the foreign country. If "No," to fine 3b, provide an explanation in Schedule O 3c If "Yes," enter the name of the foreign country. If "No," to fine 3b, provide an explanation in Schedule O 3c If "Yes," enter the name of the foreign country. If "No," to fine 3b, provide an explanation in or other faunching vove, a financial accountry or the standard accountry. If "No," to fine 3b a park account, if "No," to fine 3b, provide an explanation in or other standard accountry. If "No," to fine 3b a park account, if "No," to fine 3b a park account, if "No," to fine 3b a park account, if "No," to fine 3b a park accountry	Ь			X	
3a X				HIBU	
b if "Yes," rise it field a Form 990-T for this year? If "Ne," to line 3p, provide an explanation in Schedule O A 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) B if "Yes," enter the name of the foreign country. See instructions for filing requirements for Finc EN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) See instructions for filing requirements for Finc EN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) So Was the organization a party to a prohibited tax shelfer transaction at any time during the tax year? 5a	За		3a		X
4a Alary time during the calendary 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, eordiner financial account)? b If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAFi) Sa Was the organization a party to a prohibited tax sheller transaction at any time during the tax year? 5a Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 5b If "Yes," clid the organization include with every solicitation and express statement that such contributions or gifts were not tax deductible? 7c Organizations that may receive deductible contributions under section 170(c). 8d If "Yes," did the organization include with every solicitation and express statement that such contributions or gifts were not tax deductible? 7c Organizations that may receive deductible contributions under section 170(c). 8d If "Yes," did the organization notify the donor of the value of the goods or services provided? 7d If "Yes," did the organization notify the donor of the value of the goods or services provided? 7d If "Yes," indicate the number of Forms 8282 filed during the year 8 Did the organization received a contribution of qualified intellectual property, did the organization or file and the property of the property for which it was required? 7d If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file organization secived a contribution of cars, boats, airplanes, or other vehicles, did the organization file organization make any taxible distributions under section 49667 9d Sponsoring organizations maintaining donor advised funds. Did a donor advised fund organization file form 1096 C7 9d Sponsoring organizations maintaini					
financial account in a foreign country (such as a bank account, securities account, or other financial account)? b if Yes,* enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAFi) Sa Was the organization a party to a prohibited tax sheller transaction at any time during the tax year? b Did any taxable party notify the organization that it was or is a party to a prohibited tax sheller transaction? 5b X c If Yes,* to line 5a or 5b, did the organization that it was or is a party to a prohibited tax sheller transaction? 5c S B Dest the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 5c S B If Yes,* did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Corpanizations that many receive deductible contributions under section 170(c). Did the organization set, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8892? di If Yes,* did the organization notify the donor of the value of the goods or services provided? Did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c X di If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If If the organization received a contribution of cars, boats, alphanes, or other vehicles, did the organization file a Form 1098 C? Spensoring organization manifolating donor advised funds. Did the sponsoring organization marks any taxable distributions under section 49667 By Sponsoring organization marks any taxable distributions under section 49667 By Section 501(c)(1)2) organizations. Enter: Gross income from members or shareholders In hitiation rese and capital contributions in	4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over a			
b If "Yes," relate the name of the foreign country: Page instructions for filing requirements for FrinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAF) 5a Was the organization a party to a prohibited tax shefter transaction at any time during the tax year? 5b X 5c If "Yes," to line Sa or 5b, old the organization that it was or is a party to a prohibited tax shefter transaction? 5c If "Yes," to line Sa or 5b, old the organization file Form 8886 177 5c If "Yes," to line 5a or 5b, old the organization file Form 8886 177 5c If "Yes," did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 5c If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6c If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6d If "Yes," did the organization that may receive deductible contributions under section 170(c). 6d If "Yes," did the organization neceive apyment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 6d If "Yes," did the organization receive a payment in excess of \$75 made party as a contribution of property for which it was required 7d If "Yes," did the organization seceive a contribution of rangible personal property for which it was required 7d If "Yes," did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1096 C? 7d Sconsoring organization make any taxible distributions under section 49687 9d Sponsoring organization make any taxible distributions under section 49687 9d Did the sponsoring organizations make any taxible distributions under section 49687 9d Section			40		x
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAF) 5 Was the organization a party to a prohibited tax sheler transaction at any time during the tax year? 5 Did any taxable party notify the organization that it was or is a party to a prohibited tax sheler transaction? 5 Did the vices, to line 5 a or 5 b, did the organization file Form 8886 T7 5 Does the organization she annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 5 D If "Yes," tidd the organization include with every solicitation an express statement that such contributions or grits were not tax deductible? 5 D If "Yes," did the organization include with every solicitation and express statement that such contributions or grits were not tax deductible? 6 D If If the organizations that may receive deductible contributions under section 170(c). 8 D If "Yes," did the organization receive a payment in excess of S75 made party as a contribution and party for goods and services provided to the payor? 7 D If the organization receive a payment in excess of S75 made party as a contribution and party for goods and services provided to the payor? 7 D If the organization receives a payment in excess of S75 made party as a contribution and party for goods and services provided to the payor? 7 D If the organization receives a pay the pay payment of the value of the goods or services provided? 7 D If the organization receives any transport of the value of the goods or services provided? 7 D If the organization receives any transport of the value of the goods or services provided? 8 D If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1090 C? 8 Sponsoring organization have excess business holdings at any time during	b		70		
5.3 X	_				
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 65	5a		En		x
c If "Yes," to line 5a or 5b, tid the organization file Form 886-T? Boes the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that twere not tax deductible as charitable contributions? By Tyes," did the organization include with every solicitation an express statement that such contributions or girls were not tax deductible? Organizations that may receive deductible contributions under section 170(e). If 'Yes," did the organization nettly the donor of the value of the goods or services provided? Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? If Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization receives, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? If Yes," did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? To bid the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098 C? If the organization received a contribution of pullified intellectual property, did the organization file a Form 1098 C? To Sponsoring organization make access business sholdings at any time during the year? Soponsoring organization make any taxable distributions under section 49667 Ball but sponsoring organization make any taxable distributions under section 49667 Ball but the sponsoring organization make any taxable distributions under section 49667 Social of 19(1) organization make any taxable distributions under section 49667 Social of 19(1) organization make a distribution to a donor, donor advisor, or related person? Social of 19(1) organizations. Enter: If Yes, "enter the amoun					
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ANIMAL DEFENSE LEAGUE OF TEXAS 74-6002033 Form 990 (2015) Page 6 Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI X Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 12 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent 12 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 X 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? X X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? X 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? X b. Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X a The governing body? X Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes " provide the names and addresses in Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) No 10a Did the organization have local chapters, branches, or affiliates? X 10a b. If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X 12a X b. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12h c. Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe Х in Schedule O how this was done 12c 13 Did the organization have a written whistleblower policy? X 13 14 Did the organization have a written document retention and destruction policy? X 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official X **15a** b Other officers or key employees of the organization X 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a bill "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in (oint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed TX 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection, Indicate how you made these available. Check all that apply, X Another's website X Upon request Dwn website Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records

Form 990 (2015)

ANIMAL DEFENSE LEAGUE OF TEXAS - 210-655-1481

11300 NACOGDOCHES RD, SAN ANTONIO, TX

Part VII Section A. Officers, Directors, Trus		aloy	985			ghes	t C		s (continued)	
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	organizations	177.5	Kana			apens		(W 2/1099-MISC)		organization and related
	below	Eshidial tracks or Great	estrictional truster		ey employee	14 E	=			organizations
	line)	ef.	12.0	ii Bkr	\$	Highest compensated Employee	E.			
					5776					
					_	\vdash				
				_						
					_					
					L					
						Н				1
						Щ	_	250,778.	0.	0.
1b Sub-total c Total from continuation sheets to Part VI								230,778.	0.	
d Total (add lines 1b and 1c)								250,778.	0,	
2 Total number of individuals (including but n							o re			
compensation from the organization								·	· · · · · · · · · · · · · · · · · · ·	0
1 1										Yes No
3 Did the organization list any former officer.	director, or tru	stes	, ke	у еп	nplo	yee,	or i	highest compensated en	iplayee on	
line 1a? If "Yes," complete Schedule J for s										3 X
4 For any individual listed on line 1a, is the su										4 X
and related organizations greater than \$150 5 Did any person listed on line 1a receive or a	J.UUU? [f 'Yes,	" COI entir	mple	ete S	anv	dule	J fi Inte	or such individual	ual for equippe	4 X
rendered to the organization? # 'Yes ' corr										5 X
Section B. Independent Contractors	10.1-1-1-1-1-1-1	11.11	1/		/t/_31	-			Hilliand Harrist Lands	
1 Complete this table for your five highest co									· ·	stion from
the organization. Report compensation for	the calendar ye	ar e	ndln	g wi	ilh o	r wit	hin T		ear.	(5)
(A) Name and business	address							(B) Description of se	ervices ((C) Compensation
JAMES A. RINDFUSS, 1901 N	W WILI	TA	RY	Н	WY	,	٦			
STE 104, SAN ANTONIO, TX	78213						_	LEGAL SERVICE	S	160,000.
							7			
							+			
							4			··· <u> </u>
				-	27					
2 Total number of independent contractors (ii \$100,000 of compensation from the organic	_	t lin	nited	to t	hos 1	e list	ed:	above) who received mo	re than	
d the form on management and an easy of the second of the									I.	Form 990 (2015)

Form 990 (2015) ANIMAL | Part VIII | Statement of Revenue

		Check if Schedule O contains	a response	or note to any li	ne in this Part VIII	***********************		
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - \$14
55	1 a	Federated campaigns	1a			200 100 100		
53	b	Membership dues	1b					
CA	C	Fundraising events	10					
# 2	d	Related organizations	10	828,524.				
Contributions, Gifts, Grants and Other Similar Amounts	8	Government grants (contributions)	1a		e di			
돌	f	All other contributions, gifts, grants, a						
至智		similar amounts not included above 🔝	11 4					
E음	9	Nonceah contributions included in lines te-th						A De las
<u>유</u>	<u>h</u>	Total. Add lines 1a-1f	ластарает.		5,115,734.			West Charles
- 1				Business Code				
8	2 a			900099	315,480.	315,480.		
Ž	b	MEDICAL SERVICES		900099	132,064.	132,064.		
Program Service Revenue	C							
	d							
ē.	8							
ű.	· · · · · · · ·	All other program service revenue		900099	113,501.	113,501.		
\rightarrow	9	Total, Add lines 2a 2f	mantar, partiage		561,045.			
	3	Investment income (including divid			05 405			
		other similar amounts)			25,425.	25,425.		
	4	Income from investment of tax-exe	*	-	12 002			
	5	Royatties			13,883.	13,883.		
		_	(i) Real	(ii) Personal				
		Gross rents						
ł		Less rental expenses						
		Rental income or (loss)			ASSESSMENT OF THE PROPERTY OF		district the same of	
-		Net rental income or (loss)			59830250350			
ı	7 B		Securities	(ii) Other				
		assets other than inventory Less: cost or other basis			March 1			
	D	and sales expenses						200-200
	_			-	Voca III			
		Gain or (loss) Net gain or (loss)			7-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2			
		Gross income from fundraising eve			No. of the last of	tion of the second		
옻	0.0	including \$						
Revenue		contributions reported on line 1c).						ACCESSION OF THE PERSON OF THE
표		Part IV, line 18		205.300.				
Other	h	Less direct expenses		18,902.				
δ		Net income or (loss) from fundraisi			186,398.			186,398.
		Gross income from gaming activities	-		XX			
		Part IV, line 19			10 1 10 3			
	b	Less direct expenses						
		Net income or (loss) from gaming a						
	10 a	Gross sales of inventory, less retur				was the state of	1979/	
		and allowances						
	b	Less cost of goods sold	b					
	C	Net income or (loss) from sales of i	nventory					
		Miscellaneous Revenue		Business Code				
	11 a							
	Ь							
	C							
	d	All other revenue						
		Total. Add lines 11a-11d			5 000 405	500 353		106 200
	12.	Total revenue. See instructions.			5,902,485.	600,353.	U.	186,398.

	Check if Schedule O contains a responsion to include amounts reported on lines 6b, 8b, 9b, and 10b of Part Vill.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	.			
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	450 550	453 664	10 555	
	trustees, and key employees	170,778.	153,884.	10,666.	6,228
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	2 004 210	1 005 056	125 160	73 004
	persons described in section 4958(c)(3)(B)	2,004,219.	1,805,956.	125,169.	73,094
7	Other salaries and wages		-		
В	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)	144 554	100,902.	43 653	
9	Other employee benefits	144,554.	149,131.	43,652. 11,730.	7,541.
10	Payroll taxes	100,402.	147,131.1	11,730.	7,341.
11	Fees for services (non-employees):			1	
	Management	257,800.		257,800.	w
	Legal	2,252.		2,252.	
	Accounting	2,2320		4,234.	
d	Lobbying Professional fundraising services. See Part IV, line 17				
-	Investment management fees		Committee of the Commit		
1					
Э	column (A) amount, list line 11g expenses on Sch O.)	7,535.		7,535.	
12	Advertising and promotion	23,616.		23,616.	
13	Office expenses	209,482.	32,483.	108,764.	68,235.
14	Information technology		02,1201,		
15	Royattles				
16	Occupancy	155,473.	155,473.		
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19		1,422.		1,422.	
20	Interest	3,331.		3,331.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	199,275.	199,275.		
23	Insurance	96,778.	96,778.		104 (U.S. 2104 - 146
24	Other expenses. Hemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				المادة بعدوا
я	HOSPITAL EXPENSES	389,293.	389,293.		
h	REPAIRS & MAINTENANCE	84,295.	84,295.		
5	KENNEL EXPENSE	75,962.	75,962.		
d	MISCELLANEOUS	59,020.	37,321.	15,913.	5,786.
_	All other expenses	36,032.	36,032.		
<u> 25</u>	Total functional expenses. Add lines 1 through 24e	4,089,519.	3,316,785.	611,850.	160,884.
26	Joint costs. Complete this line only if the organization		, , , , , , , , , , , , , , , , , , , ,		Laining
	reported in column (B) joint costs from a combined				
	educational campaign and fundralsing solicitation.				
	Check here following SOP 98-2 (ASC 958-72m)				

		Check if Schedule O contains a response or note to	I I	fat	1	22 mg
				(A) Beginning of year		(B) End of year
	1		minimum more more management and the second	140,741.	1	1,241,671
	2	Savings and temporary cash investments		52,658.	2	67,769
	3	Pledges and grants receivable, net		878,465.	3	828,524
	4	Accounts receivable, net		20,053.	4	504,689
	5	Loans and other receivables from current and forme			1000	
		trustees, key employees, and highest compensated	employees Complete			All controls
		Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified (persons (as defined under		(IIII)	
		section 4958(f)(1)), persons described in section 495	8(c)(3)(B) and contributing			
1		employers and sponsoring organizations of section 5	501(c)(9) voluntary			
2		employees' beneficiary organizations (see instr). Con	nplete Part II of Sch L		6	
2000	7	Notes and loans receivable, net			7	
₹	8	Inventories for sale or use		283,373.	8	143,273
	9	Prepaid expenses and deterred charges	1-		9	<
	10 a	Land, buildings, and equipment; cost or other			District T	
		basis Complete Part VI of Schedule D 10	a 5,745,023.		(SIA)	
	b	Less accumulated depreciation 10	ь 2,370,747.	3,273,671.	10c	3,374,276
J	11	Investments - publicly traded securities			11	
	12	Investments - other securities, See Part IV, line 11			12	
	13	Investments - program-related. See Part IV, line 11		1,208,892.	13	1,273,96
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11			15	· · · · · · · · · · · · · · · · · · ·
	16	Total assets. Add lines 1 through 15 (must equal line		5,857,853.	16	7,434,17
П	17	Accounts payable and accrued expenses		493,842.	17	270,912
	18	Grants payable		18		
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part i			21	
,	22	Loans and other payables to current and former offic	ers, directors, trustees,		Dean T	
		key employees, highest compensated employees, an	d disqualified persons		1888 F	
		Complete Part II of Schedule L			22	
i	23	Secured mortgages and notes payable to unrelated t			23	
Î	24	Unsecured notes and loans payable to unrelated thin	d parties		24	
	25	Other liabilities (including federal income tax, payable	es to related third			
1		parties, and other liabilities not included on lines 17-2	(4), Complete Part X of			
		Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		493,842.	26	270,912
		Organizations that follow SFAS 117 (ASC 958), chi	eck here 🕨 🐰 and			
		complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	A-1-A-1-1-A-1-1-A-1-1-A-1-1-A-1-1-A-1-1-A-1-1-A-1-1-A-1-1-A-1-A-1-A-1-A-1-A-1-A-1-A-1-A-1-A-1-A-1-A-1-A-1-A-1-A	4,375,546.	27	6,226,334
	28	Temporarily restricted net assets		988,465.	28	936,924
	29	Permanently restricted net assets			29	
i		Organizations that do not follow SFAS 117 (ASC 9	58), check here 🕨 🔙		things of	
		and complete lines 30 through 34.				
	30				30	
	31	Paid-in or capital surplus, or land, building, or equipm	ent fund		31	
	32	Retained earnings, endowment, accumulated income			32	
	33	Total net assets or fund balances		5,364,011.	33	7,163,258
- 1		Total liabilities and net assets/fund balances		5,857,853.	24	7,434,170

		6002	033	P;	1ge 12
18	rt XI Reconciliation of Net Assets				
_	Check If Schedule O contains a response or note to any line in this Part XI	000000			
1	Total revenue (must equal Part VIII, column (A), line 12)	5	,90	2,4	85.
2	Total expenses (must equal Part IX, column (A), line 25)				19.
3	Revenue less expenses Subtract line 2 from line 1	1	,81	2,9	66.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	. 5	, 36	4,0	11.
5	Net unrealized gains (losses) on investments		-1	3,7	19.
6	Donated services and use of facilities 6				
7	Investment expenses 7				
8	Prior period adjustments 8				
9	Other changes in net assets or fund balances (explain in Schedule O)				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
1000	column (B)	7	,16	3,2	58.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII			122	X
				Yes	No
1	Accounting method used to prepare the Form 990:				J.J.
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			613	6.0
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a				
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?	i moni	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis,				
	consolidated basis, or both		100		100
	X Separate basis Consolidated basis Both consolidated and separate basis		1116		
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,		2		
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.				100
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit	t [
	Act and OMB Circular A-133?		3а		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit		İ		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b]
			Form	990	(2015

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Tressury Internal Revenus Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2015

Open to Public Inspection

Name of the organization Employer identification number ANIMAL DEFENSE LEAGUE OF TEXAS 74-6002033 Reason for Public Charity Status (All organizations must complete this part.) See instructions Part The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(l). 2 A school described in section 170(b)(1)(A)(II). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in 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 described in section 170(b)(1)[A)(lv), (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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 exempt 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), (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4), An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally Integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II. Type III. Type III. functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations g. Provide the following information about the supported organization(s). (I) Name of supported (III) Type of organization (tv) is the organization (v) Amount of monalary (vi) Amount of listed in your (described on lines 1-9 organization other support (see support (see governing document? above (see Instructions)) instructions) instructions) Yes

LHA For Paperwork Reduction Act Notice, see the Instructions for

Form 990 or 990-EZ. 532021 09-23-15

Schedule A (Form 990 or 990-EZ) 2015 ANIMAL DEFENSE LEAGUE OF TEXAS 74-6002
| Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization falled to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
	Gifts, grants, contributions, and						
•	membership fees received. (Do not						
	include any "unusual grants.")	1470702.	1707168.	2438930.	2199852.	5115734.	12932386.
2	Tax revenues levied for the organ-						
_	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
Ç,	furnished by a governmental unit to						
	the organization without charge		-				
A	Total. Add lines 1 through 3	1470702.	1707168.	2438930.	2199852.	5115734.	12932386.
	The portion of total contributions				HERE SERVICES	Maria Carlos	
-	by each person (other than a						
	governmental unit or publicly		100			181711	
	supported organization) included		Send of the		TOTAL DES	THE STATE OF	
	on line 1 that exceeds 2% of the		Ē			Bullect VIII Collection	
	amount shown on line 11.	AT 112 11 3				53	
					IIIX R		2411698.
	Public support. Subtract line 5 from line 4		Fig. 1. Company				10520688.
	tion B. Total Support						H0320000:
		(4) 0011	(b) 2012	(=) 2012	CH ODY A	(-) 2015	(f) Total
	ndar year (or fiscal year beginning in)	(a) 2011 1470702.	1707168.	(c) 2013 24 38 9 3 0 •	(d) 2014 2199852.	(e) 2015 5115734.	12932386.
	Amounts from line 4	14/0/04.	1707100.	2430330.	21330JZ.	2112/24.	12332300.
В	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties	100 622	101 010	70 205	CA 151	151 617	E16 010
	and income from similar sources	109,622.	121,315.	70,205.	64,151.	151,617.	516,910.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain				i		
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. Add lines 7 through 10	Range and					13449296.
	Gross receipts from related activities,						,252,393.
	First five years. If the Form 990 is for						
Sec	organization, check this box and stop tion C. Computation of Public	here C Support Per	centage	.,,		endersoners of	
	Public support percentage for 2015 (li					14	78.22 %
45	Public support percentage from 2014	Schodulo A Part I	l line 14	Marrie (v)		15	63.75 %
10	33 1/3% support test - 2015. If the o	randration did no	t check the box of	line 13 and line 1	4 is 33 1/396 or m		
108	stop here. The organization qualifies:	-					▶[X]
_	33 1/3% support test - 2014. If the o		_		line 16 in 22 1/294		
- 0	and stop here. The organization quali	_					
47							
1/0	7a 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 15b, and line 14 is 10% or more						
	and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part VI how the organization						
	meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or						
ь		-					
	more, and if the organization meets th						
4	organization meets the "facts and-circ						
18	Private foundation. If the organization	п ою пот спеск а в	ox on line 13, 168	, 160, 1/a, of 17b.		· ·	
					Sche	dule A (Form 990	OF 99U-EZ) 2015

Schedule A (Form 990 or 990-EZ) 2015 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 or if the organization failed to qualify under Part II. If the organization fails to

Sei	ction A. Public Support	etow, prease comp	Hele Part It.)			*1	
Cale	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")		1				
2	Gross receipts from admissions,		_				
	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
-	are not an unrelated trade or bus-						
	in a series and a series series						
	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	and a second and the behalf			ļ			
F	The value of services or facilities						
3	furnished by a governmental unit to						
	ation and differentiate unital action of the con-						
	Total. Add lines 1 through 5						
/2	Amounts included on lines 1, 2, and 3 received from disqualified persons				į	1	
Į.	Amounts included on lines 2 and 3 received						
-	from other then disqustified persons that				-		
	exceed the greater of \$5 000 or 1% of the						
	amount on line 13 for the year		<u> </u>		<u> </u>		
	Add lines 7a and 7b						
	Public support: (Submoline (clion line 6) ::						
					T		
	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(a) 2015	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties			i			
	and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b.						
	whather 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 VI.)						
13	Total support. (Add lines 9, 10c. 11, and 12)						
14	First five years. If the Form 990 is for	the organization's	first, second, third	í, íourth, or fifth ta	x year as a sectio	n 501(c)(3) organiza	tion
	check this box and stop here						
Sec	tion C. Computation of Public	c Support Per	centage			·	
15	Public support percentage for 2015 (li	ne 6, column (f) di	vided by line 13, c	olumn (f))		15	56
16	Public support percentage from 2014	Schedule A, Part I	III, line 15		******************	16	96
Sec	tion D. Computation of Inves	tment Income	Percentage				
17	Investment income percentage for 20	15 (line 10c, colun	nn (1) divided by lin	e 13, column (f))		17	96
18	Investment income percentage from 2	2014 Schedule A,	Part III, line 17	lander trivel breek acciones		18	96
	33 1/3% support tests - 2015. If the					33 1/3%, and line 17	is not
	more than 33 1/3%, check this box an	_					>
b	33 1/3% support tests - 2014. If the	organization did n	ot check a box on	line 14 or line 19a	, and line 16 is me	ore than 33 1/3% ar	nd
	line 18 is not more than 33 1/3%, chec	k this box and st	lop here. The orga	nization qualifies a	as a publicly supp	orted organization	
20	Private foundation. If the organization	n did not check a t	box on line 14, 19a	or 19b, check the	is box and see in:	structions	<u> </u>

Part IV | Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(8) purposes? If *Yes,* explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? #
 "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If *Yes,* explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in Part VI, Including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c. Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?
 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
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2		
3a		
3b		
3c		
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4b		
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4c		
	ISI.	3000
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5a		
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5c		
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7		
8		
	115	
9a		
2,11.1	1-30	
9b	10/5/7011	11000
9c	1000	
921	175	ШП
10a		
10b		
990 or 990	D-EZ)	2015

Schedule A (Form 990 or 990-EZ) 2015

instructions).

Schedule A (Form 990 or 990-EZ) 2015

e Excess from 2015

Schedule A	(Form 990 or 990-E	Z) 2015 A	NIMAL	DEFENSE	LEAGUE	OF T	'EXAS		74-6002033	Page 6
Part Vi	Supplemental Part IV, Section A line 1: Part IV, Sec	Informa, lines 1, 2, tion D, line 6, and 8: a	tion. Pro 3b, 3c, 4b, s 2 and 3. I	vide the explant 4c, 5a, 6, 9a, 9 Part IV. Section	ations required b, 9c, 11a, 11i E. lines 1c. 2a	by Part b, and 11	II, line 10; Ic; Part IV, and 3b: Pa	Part II, line 17 Section B, lin Int V, line 1; Pa art for any add	a or 17b; Part III, fine 12; es 1 and 2; Part IV, Section irt V, Section B, line 1e; Par litional information	C, t V,
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SCHEDULE D

(Form 990)

Supplemental Financial Statements

➤ Complete if the organization enswered "Yes" on Form 990, Part IV, line 5, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990

Department of the Treesury Internal Revenue Service Employer identification number Name of the granization 74-6002033 ANIMAL DEFENSE LEAGUE OF TEXAS Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year ______ Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) 4 Aggregate value at end of year _____ 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization arswered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last Held at the End of the Tax Year day of the tax year. a Total number of conservation easements b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 tal (If the organization elected, as permitted under SFAS 115 (ASC 958), not to report in its revenue statement and balance sheet works of art historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII the text of the footnote to its financial statements that describes these items. b. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items. (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X Schedule D (Form 990) 2015 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

		DEFENSE LE				4-600203	
Pa	t III Organizations Maintaining C						
3	Using the organization's acquisition, accession	on, and other record	is, check any of the	following that are	a significant use	a of its collection	items
	(check all that apply):						
а	Public exhibition			change programs			
þ	Scholarly research		Other				
C	Preservation for future generations						
4	Provide a description of the organization's co					in Part XIII	
5	During the year, did the organization solicit or					*******	_
	to be sold to raise funds rather than to be ma						No
Pa	t IV Escrow and Custodiai Arrang		ete if the organizati	on answered "Yes"	on Form 990, I	Part IV, line 9, or	
	reported an amount on Form 990, Par	·					
1a	Is the organization an agent, trustee, custodia	an or other intermed	liary for contribution	ns or other assets r	not included		-
	on Form 990, Part X?					Yes	No
b	If "Yes," explain the arrangement in Part XIII a	and complete the fo	llowing table:				
						Amount	<u> </u>
	Beginning balance						
d	Additions during the year						
	Distributions during the year						
ſ	Ending balance						
	Did the organization include an amount on Fo					Yes	No No
The second second	If "Yes," explain the arrangement in Part XIII.						
Pai	t V Endowment Funds. Complete it			· · · ·	1		
	ļ	(a) Current year	(b) Prior year	(c) Two years bac	k (d) Three yea	irs back (e) Four	years back
1a	Beginning of year balance						
Ь	Contributions						
	Net investment earnings, gains, and losses						
	Grants or scholarships						
0	Other expenditures for facilities						
	and programs						
	Administrative expenses						
g	End of year balance			<u></u>			
2	Provide the estimated percentage of the curre		e (line 1g, column (a	a)) held as			
	Board designated or quasi-endowment		94				
	Permanent endowment >						
C	Temporarily restricted endowment						
	The percentages on lines 2a, 2b, and 2c shou						
За	Are there endowment funds not in the posses	ision of the organiza	ation that are held a	ınd administered fo	r the organization	on n	
	by:						Yes No
	(i) unrelated organizations ,						
	(ii) related organizations						
b	If "Yes" on line 3a(ii), are the related organization				- N. P. S.	3b	
4	Describe in Part XIII the intended uses of the		wment funds.				
Pal	t VI Land, Buildings, and Equipme						
	Complete if the organization answered						
	Description of property	(a) Cost or o) Accumulated	(d) Book	t value
		basis (investr		(other)	depreciation	201	753
	Land		35	91,752.		391	1,752.
	Buildings						
	Leasehold improvements	I .					
	Equipment		E 31	2 271 7	270 745	7 2 001	524
	Other				,370,747		2,524.
Total	, Add lines 1a through 1e. (Column (d) must ed	nual Form 990, Part.	X. column (8), line	10c.)		<u>▶ 3,3/9</u>	1,276.

Schedule D (Form 990) 2015

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organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

Schedule D (Form 990) 2015

Total. (Column (b) must equal Form 990. Part X. col. (8) line 25.)

SCHEDULE G

(Farm 990 or 990-EZ)

Supplemental Information Regarding Fundralsing or Gaming Activities Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047

Department of the Treasury N

Attach to Form 990 or Form 990-EZ.

Open to Public

Internal Revenue Service Information	about Schedule G (Form 990 or 990-EZ)	and its	lestru	ctions is at www.irs.	aav/fa	m990	Inspection
Name of the organization						Employer ide	entification number
ANIMAL	DEFENSE LEAGUE OF	TEX	AS			74-6002	2033
Part I Fundra) sing Activities required to complete this par	Complete if the organization answert.	red "Y	es" o	Form 990, Part IV,	line 17	. Form 990-E	Z filers are not
Indicate whether the organization rais Mail solicitations Internet and email solicitations Phone solicitations	e D Solicita	tion of tion of	gover non-g	overnment grants nment grants			
d In-person solicitations 2 a Did the organization have a written to key employees listed in Form 990, P b If "Yes," list the ten highest paid indicompensated at least \$5,000 by the	art VII) or entity in connection with pividuals or entities (fundraisers) pursu	rolessi	onal fi	undralsing services?		Ye:	
(i) Name and address of individual or entity (fundraiser)	(II) Activity	(iii) lundr have co or con contribu	roi of	(iv) Gross receipts from activity	to (o	Amount paid r retained by) undraiser ed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
						· · · · · · · · · · · · · · · · · · ·	
-						-:	
Total	milion standard distance						
 List all states in which the organization or licensing. 	n is registered or licensed to solicit o	ontribu	ıtions	or has been notified	it is e	xempt from re	gistration
			-		-		
					_		
			-				
							-
							4.49.77

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

Schedule G (Form 990 or 990-EZ) 2015

Schedule G (Form 990 or 990-EZ) 2015

532082 09-14-15

Schedule G (Form 990 or 990-EZ) 2015 ANIMAL DEFENSE LEAGUE OF TEXAS	74-6002033 Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes No
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed	
to administer charitable gaming?	Yes No
13 Indicate the percentage of gaming activity conducted in:	10000 00000 00
a The organization's facility	13a %
b An outside facility	13b %
14 Enter the name and address of the person who prepares the organization's gaming/special events books and record	5
Name >	
Address -	
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	
b If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount of gaming revenue received by the organization	unt
of gaming revenue retained by the third party 🕨 \$	
c If "Yes," enter name and address of the third party:	
Name	
Address >	and a sure of the
16 Gaming manager information:	
Name >	
Gaming manager compensation > \$	
Description of services provided 🕨	
Director/officer Employee Independent contractor	
17 Mandatory distributions	
a is the organization required under state law to make charitable distributions from the gaming proceeds to	
retain the state gaming license?	Yes No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	the
organization's own exempt activities during the tax year 🕨 \$	
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v): and Part I, line 2b, columns (iii) and (v): and Part I, line 2b, columns (iii) and (v): and Part IV. 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).	art III, lines 9, 9b, 10b, 15b,
W 1991 - 1992 - 1995 -	

Schedule G (Form 990 or 990 EZ)	ANIMAL DEFENSE	LEAGUE OF	TEXAS	74-6002033	Page 4
Schedule G (Form 990 or 990 EZ) Part IV Supplemental Info	rmation (continued)				
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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Tressury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

OMB No. 1545-0047 Open to Public

Name of the organization ANIMAL DEFENSE LEAGUE OF TEXAS

Inspection Information about Schedule O. (Form 990 or 990-EZI and its Instructions is at www.irs.onv/fprm990. Employer identification number

74-6002033

FORM 990, PART VI, SECTION B, LINE 11:
THE FORM 990 IS REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS.
FORM 990, PART VI, SECTION B, LINE 12C:
BOARD MEMBERS ARE REQUIRED TO COMPLETE A CONFLICT OF INTEREST STATEMENT
EACH YEAR. ALSO, ANY NEW BOARD MEMBER IS REQUIRED TO COMPLETE A STATEMENT.
FORM 990, PART VI, SECTION B, LINE 15A:
REQUIRES BOARD OF DIRECTORS APPROVAL.
FORM 990, PART VI, SECTION C, LINE 19:
THESE DOCUMENTS WILL BE PROVIDED BY THE ORGANIZATION UPON REQUEST.
FORM 990, PART XII, LINE 2C:
THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

SCHEDULE R (Form 990)

2015

(g) Section 512(b)(13) Open to Public Inspection Employer identification number 74-6002033 GMB No. 1545-0047 Direct controlling Yes entity Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Ves" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (f) Direct controlling entity End-of-year assets 0 status (if section Public charity 501(c)(3)) INE 11D, Related Organizations and Unrelated Partnerships Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 356, or 37. O-III ► Information about Schedule R (Form 990) and its instructions is at www.irs.cov/lorm990 Total income Exempt Code Ī 501(C)(3) Legal domicile (state or Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33 Legal domicile (state or foreign country) foreign country) ▶ Attach to Form 990. TEXAS PROVIDE SUPPORT FOR ANIMAL ANIMAL DEFENSE LEAGUE OF TEXAS Primary activity Primary activity DEPENSE LEAGUE 74-2679781, 615 NOTTINGHAM, SAN ANTONIO, TX Name, address, and EIN (if applicable) Name, address, and EIN ANIMAL DEPENSE LEAGUE POUNDATION of related organization of disregarded entity Name of the organization Department of the Treasury Internal Revenue Service Part ! Part II 28209

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

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Schedule R (Form 990) 2015

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74-6002033

Page 2

Schedule R (Form 990) 2015 ANIMAL DEFENSE LEAGUE OF TEXAS

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(c)	(g)	(2)	(p)		(6)	3		(6)	(h)	8	9	3
Name, address, and EiN of related organization	Primary activity	Legal domicels (state or foreign	Oirect controlling entity		Predominant income (related, unrelated, excluded from tax under	Share of total income		Share of end-of-year assets	Deproperate afocates?	Code V.UBI amount in box 20 of Schedule		General or Percentage
		COLMULTY)		sections	512-514}		+		Yes No	K-1 (Form 1065)	S) Yes No	
Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.	ganizations Taxable a rporation or trust durin	as a Corpo og the tax y	ration or Trust Co	omplete if the	e organization	answered	"Yes" on For	n 990, Part	IV, line 34	because it had	one or mo	e related
(e)		i	(q)	(0)	(p)		(a)	c)		(8)	3	8
Name, address, and EIN of related organization	N. S.	Pim	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity		Type of entity (C corp, S corp, or trust)	Share of total income		Share of end-of-year assets	Percentage	1.1
									-			201
												_

Section Section Section Cartifold entity?			
(h) Percentage ownership			
(g) Share of end-of-year assets			
(f) Share of total income	:		
(e) Type of entity (C corp., S corp., or trust)			
(d) Direct controlling entity			
(C) Legal demicile (state or Foreign country)			
(b) Primary activity			
(a) Name, address, and EIN of related organization			

Schedule R (Form 990) 2015

Schedule R (Form 990) 2015

Part V

Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, fine 34, 35b, or 36.

74-6002033

Yes Ε 10 # 9 무 0 100 = 14 유 10 <u>th</u> 1000 ž = 9 ÷ (d) Method of determining amount involved = If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? 828,524 (c) Amount involved (b) Transaction type (a-s) U Performance of services or membership or fundmising solicitations for related organization(s) Performance of services or membership or fundraising solicitations by related organization(s) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) Receipt of (i) interest, (ii) annuities, (iii) royallies, or (iv) rent from a controlled entity Leaso of facilities, equipment, or other assets from related organization(s) Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. Lease of facilities, equipment, or other assets to related organization(s) Gift, grant, or capital contribution from related organization(s) Other transfer of cash or property from related organization(s) DEFENSE LEAGUE FOUNDATION Reimbursement paid by retaled organization(s) for expenses Reimbursement paid to related organization(s) for expenses Gift, grant, or capital contribution to related organization(s) r Other transfer of cash or property to related organization(s) Loans or loan guarantees to or for related organization(s) Sharing of paid employees with related organization(s) (a) Name of related organization Loans or loan guarantees by related organization(s) Purchase of assets from related organization(s) Exchange of assets with related organization(s) Sale of assets to related organization(s) Dividends from related organization(s) (1) ANIMAL 70 E D. Q 힉 4 9 2 2

\$32,163,000,000-15

Schedule R (Form 990) 2015

Page 4

Schedule R (Form 990) 2015

Part VI Umelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

) ship				
	(k) Percent owners				
	anagero anagero arther				
-	(h) (ii) (g) (k) (c) (c) (c) (d) (d) (d) (e) (d) (d) (d) (d) (e) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d				
	(h) springer poorte an on se				
	Share of the end-of-year all assets				
	(f) Share of total income				
	(e)				
sument partnerships.	(d) Predominant income (related, unrelated, excluded from tax under sections 5 12-5 (4)				
NON FOR CERTAIN INVE	(c) Legal domicite (state or foreign country)				
Inocuons regarding excrus	(b) Primary activity				
urat was not a felated organization. See instructions regarding excusion for certain investment partnerships.	(a) Name, address, and EIN of entity				

Schedule R	(Form 990) 2015	ANIMAL	DEFENSE	LEAGUE	OF	TEXAS	74-60	02033	Page 5
Part VII	(Form 990) 2015 Supplemental Infor	mation							-
	Provide additional informa		ises to question	s on Schedule	R (se	e instructions)			
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	W-1011								

Oppartment of the Treestry Internal Revenue Service Name(s) shown on return

Depreciation and Amortization (Including Information on Listed Property)

990

Sequence No. 179

OMB No. 1545-0172

Attach to your tax return.

Information about Form 4562 and its separate instructions is at www.irs.cov/form4562
Business or activity to which this form relates

dentifying number

AN:	IMAL DEFENSE LEAGUE	OF TEXAS	FOI	RM 9	90 P.	AGE 10			74-6002033
Pa	rt I Election To Expense Certain Prope	rty Under Section 1	79 Note: If you have any I	isted p	roperty, i	complete Part	V be	fore y	ou complete Part I
			******					1	500,000.
2 1	otal cost of section 179 property plac							2	
	hreshold cost of section 179 property							3	2,000,000.
	Reduction in limitation. Subtract line 3		the second second second					4	
5 0	lotter fimitation for tax year. Subtract line 4 from line	T. If two or feen, enter -						5	
6	(a) Description of pr	operty	(b) Cost (busi	ness Lste	eanly)	(c) Electe	d coal		\$2011 THE 1170 M
		_							
	isted property. Enter the amount from				7				
	otal elected cost of section 179 prope							8	
9 T	entative deduction. Enter the smaller	of line 5 or line 8						9	
	Carryover of disallowed deduction from						9077	10	
	Business income limitation. Enter the s							11	
12 5	Section 179 expense deduction. Add li	nes 9 and 10, but	do not enter more than lir	ne 11				12	
	Carryover of disallowed deduction to 2				13	200			
	: Do not use Part II or Part III below fo	r listed property. I	nstead, use Part V.						
Par	† III Special Depreciation Allowa	nce and Other De	preciation (Do not incl.	de list	ed prope	rty:)			
14 5	pecial depreciation allowance for qua	lified property (oth	er than listed property) pl	aced in	service	during			
	ne tax year							14	
	roperty subject to section 168(f)(1) ele							15	
16 C	ther depreciation (including ACRS)	communication and the	manuel de la company de la com	пчнась	أربت ويتبين		المد	16	
Par	t III MACRS Depreciation (Do no	t include listed pr	operty.) (See instructions	.)					
			Section A						
17 N	AACRS deductions for assets placed in	service in tax ye	ars beginning before 2015			on eminences		17	
18 H	you are electing to group any assets placed in servi							5/2/1	W
	Section B - Assets		During 2015 Tax Year	Using 1	he Gene	ral Deprecia	tion !	Syste	m
	(a) Cleza fication of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use snly - see instructions)	(cl)	Recovery period	(ii) Convention	(0 M	ethod	(g) Depreciation deduction
19a	3-year property								
ь	5-year property	18 110 20 20							
ε	7-year property	en Elling							
d	10-year property								
6	15-year property	Six units							
f	20-year property	Keile line							
9	25-year property	S		2	5 yrs.		5.	/L	
		1		27	.5 yrs	MM	S	/L	
h	Residential rental property	1		27	5 yrs	MM	S	/L	
		7		3	9 yrs.	MM	S	Λ.	
ì	Nonresidential real property	/				MM	S.	/L	
	Section C - Assets P	taced in Service	During 2015 Tax Year Us	sing th	e Alterna	ative Depreci	ation	Syst	em
20a	Class life	38.4.9					S	1.	
b	12-year		_	1:	2 yrs.		S	1	
C	40-year	/		4	0 утѕ.	MM	S	/L	
Par	t IV Summary (See instructions)								
21 L	Isted property Enter amount from line	28	(**************************************		mman.			21	
	otal. Add amounts from line 12, lines								
	nter here and on the appropriate lines	-						22	0 +
	or assets shown above and placed in					2140.2000	100 (1)		
	ortion of the basis attributable to secti				23				

518251 12 26-15 LHA For Paperwork Reduction Act Notice, see separate instructions.

Part VI Amortization (a) (b) (c) (d) $\{f\}$ (e) Date americable Amortizable Code Americanian begins penad or parcentaçã 42 Amortization of costs that begins during your 2015 tax year 43 Amortization of costs that began before your 2015 tax year 43 44 Total. Add amounts in column (f). See the instructions for where to report 44

\$18252 12 26 15

Form **8868** (Rev. January 2014)

Department of the Treesury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

Information about Form 8868 and its instructions is at www.irs.gov/form8868 .

OMB No. 1545-1709

■ If you a	re filing for an Automatic 3-Month Extension, comple	te only Pa	rt 1 and check this box	000000		- X			
 If you a 	re filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of	this form					
Do not co.	mplete Part II unless you have already been granted a	an automa	tic 3-month extension on a previous	ly filed Fo	rm 8868.				
Electronia	c filling (e-file) . You can electronically file Form 8868 if	you need a	3 month automatic extension of tim	ne to file (6 months for a corpo	oration			
required to	o file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically fil	le Form 8	868 to request an ex	ctension			
of time to	file any of the forms listed in Part I or Part II with the ex	ception of	Form 8870, Information Return for T	ransfers /	Associated With Cer	tain			
Personal E	Benefit Contracts, which must be sent to the IRS in pap	er format (see instructions). For more details o	n the elec	tronic filing of this fo	orm			
visit www.	irs goviefile and click on e-file for Charities & Nonomits Automatic 3-Month Extension of Time		submit original (no conies per	rded)					
	tion required to file Form 990-T and requesting an autor								
Part I only						-			
All other c	orporations (including 1120-C filers), partnerships, REM	iCs, and tri	usts must use Form 7004 to request	an extens	ion of time				
to file inco	me tax returns.			Enter fil	er's identifying nun	nber			
Type or	Name of exempt organization or other filer, see instru	ctions.		Employe	ır identification numl	ber (EIN) or			
print									
F-1 - 14 - 1	ANIMAL DEFENSE LEAGUE OF TE	XAS			74-600203	33			
File by the due date for filing your	Number, street, and room or suite no. If a P.O. box, s 11300 NACOGDOCHES	ee instruct	ions.	Social se	ecurity number (SSN	1}			
City, town or post office, state, and ZIP code. For a foreign address, see instructions.									
	SAN ANTONIO, TX 78217-2318		and the second s						
Enter the I	Return code for the return that this application is for (file	a separat	e application for each return)			0 1			
Application	n .	Return	Application	· · · · · · · · · · · · · · · · · · ·		Return			
ls For		Code	is For			Code			
	or Form 990-EZ	01	Form 990-T (corporation)			07			
Form 990-		02	Form 1041-A			08			
	3 (individual)	03	Form 4720 (other than individual)			09			
Form 990-		04	Form 5227			10			
	T (sec. 401(a) or 408(a) trust)	05	Form 6069			11			
	T (trust other than above)	06	Form 8870			12			
						<u>. </u>			
• The bo	oks are in the care of ANIMAL DEFENSE	LEAGU	E OF TEXAS						
Telepho	one No. ➤ 210-655-1481		Fax No. >						
If the o	rganization does not have an office or place of business	in the Uni	ted States, check this box						
	s for a Group Return, enter the organization's four digit (heck this			
box 🕨 🛚	. If it is for part of the group, check this box								
1 I req	uest an automatic 3-month (8 months for a corporation	required to	o file Form 990-T) extension of time (intil					
	AUGUST 15, 2016 to file the exemp	t organizat	tion return for the organization name	d above	The extension				
	r the organization's return for:								
▶[X calendar year 2015 or								
►C	tax year beginning	and	d ending						
2 If the	e tax year entered in line 1 is for less than 12 months, cf	neck reaso	n: Initial return I	Final retur	n				
	Change in accounting period								
	is application is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069, e	mier the tentative tax, less any			0.			
	refundable credits. See instructions.	antes	anti-malable acceptor and	3a	\$	U.			
	s application is for Forms 990-PF, 990-T, 4720, or 6069,	_		ent.		Ω			
-	nated tax payments made, include any prior year overpa			3b	\$	0.			
	ince due. Subtract line 3b from line 3a, include your pa sing EFTPS (Electronic Federal Tax Payment System). S			3c	s	0.			
	f you are going to make an electronic funds withdrawal								
nstruction		(~~~~~ WUD	ing mar ting i with dood, acc i dilli be		2 , 5 , 11 , 60 / 5 / 10 / 10 /	payman			

Form 8868 (Rev. 1 2014)

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8879-EO

IRS e-file Signature Authorization for an Exempt Organization

ation		

OM3 No. 1545 1978

	For colendar year 2015 or fiscal year beginning	.0	2015
Department of the Treasury	Do not send to the IRS. Keep for your records.		2010
Internal Revenue Service	Information about Form 8879-EO and its instructions is at www.irs.gov/iorm88		Id-siff-si
Name of exempt organization		Employer	identification number
ANIMAL DEFENS	E LEAGUE OF TEXAS	74-6002033	
Name and title of officer			
JANICE DARLIN	G		
EXECUTIVE DIR			anomy and
Part I Type of	Return and Return Information (Whole Dollars Only)		
on fine 1a, 2a, 3a, 4a, or 5	rn for which you are using this Form 8879-EO and enter the applicable amount, if any, from a, below, and the amount on that line for the return being filed with this form was blank, the ank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable	nen leave l line below	ine 1b, 2b, 3b, 4b, or 5b, Do not complete more
1a Form 990 check here		1b	5,902,485.
2a Form 990 EZ check he	gament contest to the		
3a Form 1120-POL check		3b	
4a Form 990-PF check he			
5a Form 8868 check here	b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)	5b	
Part II Declarat	ion and Signature Authorization of Officer		
intermediate service provide (a) an acknowledgement of the date of any refund. If a debit) entry to the financial return, and the financial in: 1-888-353-4537 no later the processing of the electronic payment. I have selected a	count in Part I above is the amount shown on the copy of the organization's electronic returner, transmitter, or electronic return originator (ERO) to send the organization's return to the if receipt or reason for rejection of the transmission, (b) the reason for any delay in procest populately. I authorize the U.S. Treasury and its designated Financial Agent to initiate an election account indicated in the tax preparation software for payment of the organization stitution to debit the entry to this account. To revoke a payment, I must contact the U.S. The an 2 business days prior to the payment (settlement) date. I also authorize the financial inside payment of taxes to receive confidential information necessary to answer inquiries and responsibilities and inside the interest of the organization of the payment (PIN) as my signature for the organization's electronic returns electronic funds withdrawal.	e IRS and sing the re ectronic fu lon's feder reasury Fir stitutions fre esolve iss	to receive from the IRS sturn or refund and (c) nds withdrawal (direct rat taxes owed on this nancial Agent at hvolved in the ues related to the
Officer's PIN: check one	box only		
X authorize AK	IN, DOHERTY, KLEIN & FRUGE, P.C. ERO firm name	o enter m	y PIN 02033 Enter five numbers, bu do not enter all zeros
is being filed wit	on the organization's tax year 2015 electronically filed return. If I have indicated within this h a state agency(ies) regulating charities as part of the IRS Fed/State program, I also author the return's disclosure consent screen.		
indicated within	the organization, I will enter my PIN as my signature on the organization's tax year 2015 elethis return that a copy of the return is being filed with a state agency(ies) regulating chariting my PINLon the return's disclosure consent screen Date D	es as part	of the IRS Fed/State
Part III Certifica	tion and Authentication		
ERO's EFIN/PIN. Enter yo	our six-digit electronic filing Identification		
	24750050041		

number (EFIN) followed by your five-digit self-selected PIN...

74750950841 do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2015 electronically filed return for the organization indicated above 1 confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) information for Authorized IRS e-file Providers for Business Returns

ERO's signature

Date 📂

ERO Must Retain This Form - See instructions Do Not Submit This Form To the iRS Unless Requested To Do So

LHA For Paperwork Reduction Act Notice, see Instructions. 523051 10 19-15

Form 8879-EO (2015)