			EXTENDED TO MAY 16, 202	22							
	00	חו	Return of Organization Exempt Fro	om Income Tax	OMB No. 1545-0047						
For	9 9	JU	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Coc	de (except private foundatio	ns) ZUZU						
			Do not enter social security numbers on this form as it	may be made public.	Open to Public						
Depa Interr	rtment of t nal Revenu	the Treasury le Service	► Go to www.irs.gov/Form990 for instructions and the	latest information.	Inspection						
AF	or the	2020 calend	lar year, or tax year beginning JUL 1,2020 and endir	ng JUN 30, 2021							
Bc	Check if pplicable:	C Name o	forganization	D Employer identific	ation number						
a	pplicable:		AL CARE AND CONTROL OF NEW YORK CITY								
	Address change	INC.									
	Name change	Doina b	usiness as ANIMAL CARE CENTERS OF NYC	13-37889	86						
Initial Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number											
Final 11 PARK PLACE 212-442-2076											
termin- ated City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ 21											
	Amende		YORK, NY 10007	H(a) Is this a group re							
	Applica-		nd address of principal officer:RISA WEINSTOCK	for subordinates							
	pending		RK PLACE, NEW YORK, NY 10007	H(b) Are all subordinates in							
1 1	ax-exer		X 501(c)(3) 501(c) ()		list. See instructions						
<u></u>	Nehsite	WWW.	NYCACC.ORG	H(c) Group exemption							
				L Year of formation: 1995 N							
		Summary			otato or logar dormono, = - =						
			be the organization's mission or most significant activities: ANIMAL	CARE CENTERS O	F NYC'S						
Governance	I и	TSSTON	IS TO END ANIMAL HOMELESSNESS IN NY	<u> </u>							
nar			x F is the organization discontinued its operations or disposed o		sots						
ver				1 1	11						
ဗိ			lependent voting members of the governing body (Part VI, line Ta)		11						
Š					269						
Activities &			of individuals employed in calendar year 2020 (Part V, line 2a)		249						
ži			of volunteers (estimate if necessary)		0.						
Ă			d business revenue from Part VIII, column (C), line 12		0.						
		let unrelated	business taxable income from Form 990-T, Part I, line 11	Prior Year	Current Year						
		antributiona	and grants (Dart) (III line 1b)		19,983,791.						
Revenue			and grants (Part VIII, line 1h)		429,155.						
ver		•	ce revenue (Part VIII, line 2g)		681,849.						
Re			come (Part VIII, column (A), lines 3, 4, and 7d)		246,891.						
			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		21,341,686.						
			- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		0.						
			milar amounts paid (Part IX, column (A), lines 1-3)		0.						
			to or for members (Part IX, column (A), line 4)		15,338,592.						
ses	15 5	alaries, othe	r compensation, employee benefits (Part IX, column (A), lines 5-10)		15,550,592.						
Expenses	16a P	rotessional f	r compensation, employee benefits (Part IX, column (A), lines 5-10) undraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25) 280,637.		0.						
Ä	b 10	otal fundrais	ing expenses (Part IX, column (D), line 25) \blacktriangleright 200,057.	5,584,534.	4,414,805.						
_			es (Part IX, column (A), lines 11a-11d, 11f-24e)		19,753,397.						
		-	es. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,588,289.						
<u> </u>		levenue less	expenses. Subtract line 18 from line 12								
Net Assets or Fund Balances				Beginning of Current Year 83,699,525.	End of Year 86,764,105.						
Sse Bala	20 T		Part X, line 16)								
et A nd	21 T		(Part X, line 26)		80,178,954.						
_			fund balances. Subtract line 21 from line 20	4,814,878.	6,585,151.						
		Signature									
	-		I declare that I have examined this return, including accompanying schedules and		/ knowledge and belief, it is						
true,	, correct,	and complete	Declaration of preparer (other than officer) is based on all information of which p								
			Munt	Date May 10), 2022						
Sig	n	·		Date							
Her	e		WEINSTOCK, PRESIDENT & CEO								
		,	print name and title								
		Print/Type pre		Date Check							
Paic			SENBERG	05/09/22 ^{if} self-employe	d ₽00221232						
			► ROSENBERG & MANENTE, PLLC	Firm's EIN 🕨	20-4153538						
Use	Only F	Firm's address	12 W 32ND STREET, 10TH FL								
			NEW YORK, NY 10001	Phone no.21	2-563-2525						
May	/ the IRS	S discuss thi	s return with the preparer shown above? See instructions		X Yes No						
0320	01 12-23-	20 LHA F	For Paperwork Reduction Act Notice, see the separate instructions.		Form 990 (2020)						

	ANIMAL CARE AND CONTROL OF NEW YORK CITY 1 990 (2020) INC. 13-3788 rt III Statement of Program Service Accomplishments	3986 _{Page} 2
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission: ANIMAL CARE CENTERS OF NYC'S (ACC) MISSION IS TO END ANIMAL HOMELESSNESS IN NYC.	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	Yes X No
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O.	Yes X No
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total ex revenue, if any, for each program service reported.	
4a	(Code:)(Expenses \$ 16,848,286. including grants of \$) (Revenue \$)(Revenue \$) (Revenue \$)	C)(3) VIMALS THE CITY IT NEVER NEED OF SIRDS, S ON PET VUNITIES FOR
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$))
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$))
4d	Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)
4e	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses ▶ 16,848,286.)
		Form 990 (2020)

SEE SCHEDULE O FOR CONTINUATION(S)

Form	990 (2020) INC. 13-3788	986	Р	age 3
	t IV Checklist of Required Schedules			
			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	Х	
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? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	· ·		
Ŭ	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
U	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7		0		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		x
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	1		<u></u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	8		х
9	Schedule D, Part III	-		
9				
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			х
40	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			v
	or in 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, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		v	
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			37
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	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			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	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	Х	
b	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		Х
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		Х
	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		х
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		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			<u> </u>
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
.,	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
10	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			- 23
18		40	х	
40	1c and 8a? If "Yes," complete Schedule G, Part II	18	17	<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
	complete Schedule G, Part III	19		X X
	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a		
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			v
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

Form	990 (2020) INC. 13-3788	986	Р	age 4
Pa	t IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
214	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
		24a		x
h	Schedule K. If "No," go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		
		240		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	21		
20				
-	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			x
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?If			37
	"Yes," complete Schedule L, Part IV	28c	37	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		x
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	000		
U U	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
20		350		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			x
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 51			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	

ANIMAL	CARE	AND	CONTROL	OF	NEW	YORK	CITY
INC.							

Form	990 (2020) INC. 13-3788	986	Р	age 5						
Pa	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)									
		_	Yes	No						
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,									
	filed for the calendar year ending with or within the year covered by this return 2a 265)								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X							
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)									
3a	a Did the organization have unrelated business gross income of \$1,000 or more during the year?									
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b								
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a									
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X						
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 (FBAR).									
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X						
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х						
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c								
	Does 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?	6a		X						
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts									
	were not tax deductible?	6b								
7	Organizations that may receive deductible contributions under section 170(c).									
а	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?	7a	Х							
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х							
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required									
	to file Form 8282?									
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d									
е	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?									
f	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?									
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?									
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?									
8	8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the									
	sponsoring organization have excess business holdings at any time during the year?									
9	Sponsoring organizations maintaining donor advised funds.									
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a								
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b								
10	Section 501(c)(7) organizations. Enter:									
а	Initiation fees and capital contributions included on Part VIII, line 12 10a									
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b									
11	Section 501(c)(12) organizations. Enter:									
а	Gross income from members or shareholders 11a	_								
b	Gross income from other sources (Do not net amounts due or paid to other sources against									
	amounts due or received from them.)									
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a								
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	4								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.									
а	Is the organization licensed to issue qualified health plans in more than one state?	13a								
	Note: See the instructions for additional information the organization must report on Schedule O.									
b	b Enter the amount of reserves the organization is required to maintain by the states in which the									
	organization is licensed to issue qualified health plans	-								
	Enter the amount of reserves on hand			v						
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X						
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b								
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or									
	excess parachute payment(s) during the year?	15		X						
	If "Yes," see instructions and file Form 4720, Schedule N.			v						
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X						
	If "Yes," complete Form 4720, Schedule O.									

Form **990** (2020)

ANIMAL	CARE	AND	CONTROL	OF	NEW	YORK	CITY
INC.							

Form	· ()	78898		Page 6							
Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and	for a "No'	respor	ise							
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.										
	Check if Schedule O contains a response or note to any line in this Part VI			Х							
Sec	tion 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 1a	11									
	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 on Schedule O.										
b	Enter the number of voting members included on line 1a, above, who are independent 1b	11									
2	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, trustees, or key employees to a management company or other person?										
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X							
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X							
6	Did the organization have members or stockholders?	6		X							
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?	7a		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		X							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:										
а	The governing body?	8a	Х								
b			Х								
9	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 on Schedule O	9		X							
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)										
			Yes	No							
10a	Did the organization have local chapters, branches, or affiliates?	10a	1	X							
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?	10k									
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form	m? 11 a	X								
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	12a									
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X								
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe										
	in Schedule O how this was done	120									
13	Did the organization have a written whistleblower policy?	13	X								
14	Did the organization have a written document retention and destruction policy?		Х								
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?										
	The organization's CEO, Executive Director, or top management official										
b	Other officers or key employees of the organization	15k	, X								
	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	ı	X							
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation										
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's										
	exempt status with respect to such arrangements?	16b)								
Sec	tion C. Disclosure										
17	List the states with which a copy of this Form 990 is required to be filed $\blacktriangleright NY$										
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 50	1(c)(3)s or	ly) avai	lable							
	for public inspection. Indicate how you made these available. Check all that apply.										
	X Own website X Another's website X Upon request Other (explain on Schedule O)										
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest police	cy, and fin	ancial								
	statements available to the public during the tax year.										
20	State the name, address, and telephone number of the person who possesses the organization's books and records										
	KIWI PARTNERS INC - (212) 532-7171										
	237 W. 35TH STREET, SUITE 101, NEW YORK, NY 10001										

Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated
	Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

INC.

Form 990 (2020)

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	, unle	ss pe	rson i	is bot	h an	compensation	compensation	amount of
	week		cer an	a a a	Irecto	or/trus	tee)	from	from related	other
	(list any	Individual trustee or director						the	organizations	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	rustee	l trus		ee	npen		(00-2/1099-00130)		and related
	below	d ual t	itiona	_	nploy	st co i vyee	ar			organizations
	line)	ndivid	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) RISA WEINSTOCK	40.00			_						
CEO & PRESIDENT				Х				216,923.	Ο.	26,163.
(2) ROBIN STUPACK	40.00									
VICE PRESIDENT, ANIMAL HEALTH & WELF				Х				152,046.	0.	8,016.
(3) ELLEN CURTIS	40.00									
VICE PRESIDENT, CHIEF PROGRAMS OFFIC						Х		129,904.	0.	11,847.
(4) MICHAEL WELTZ	45.00									
VETERINARIAN						Х		107,580.	0.	24,867.
(5) PHILLIP REID	40.00									
SR. DIRECTOR, CHIEF INFORMATION OFFI				Х				109,254.	0.	22,597.
(6) SANDRA REINA	40.00									
DIRECTOR OF FINANCE	1 - 00					Х		108,029.	0.	23,505.
(7) ALICIA BRUCK	45.00							100 100	0	10 510
VETERINARIAN	45 00					X		109,109.	0.	10,719.
(8) RACHEL M WARNES	45.00							100 000	0	
FORMER VETERINARIAN	45 00						Х	108,206.	0.	7,427.
(9) SASHA NELSON	45.00							114 655	0	ГСГ
VETERINARIAN	10 00					X		114,655.	0.	565.
(10) JENNIFER PIIBE	40.00						37	100 000	0	2 241
FORMER GENERAL CONSEL	45 00						Х	109,039.	0.	3,341.
(11) HILLARY BRAVERMAN	45.00						37	102 104	0	7 226
FORMER VETERINARIAN	1 00						Х	103,184.	0.	7,336.
(12) PATRICK NOLAN	1.00	37						0	0	0
CHAIR	1 00	Х						0.	0.	0.
(13) DENISE INCANDELA	1.00	v						0	0	0
VICE CHAIR	1 00	Х						0.	0.	0.
(14) DR. JAY KUHLMAN	1.00	v						0	0	0
SECRETARY	1.00	Х						0.	0.	0.
(15) NEIL ABRAMSON	1.00	v						0.	0.	0
BOARD MEMBER	1.00	X						0.	υ.	0.
(16) YONATON ARONOFF	U	x						0.	0.	0.
BOARD MEMBER	1.00	^	-					0.	0.	0.
(17) SARAH AUCOIN BOARD MEMBER	<u> </u>	x						0.	0.	0.
BOARD MEMBER	1	л						0.	0.	Eorm 990 (2020)

ANIMAL CARE AND CONTROL OF NEW YORK CIT	ANIMAL	CARE	AND	CONTROL	OF	NEW	YORK	CITY
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INC.

Form 990 (2020)

13-3788986 Page 8

Par	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
	(A)	(B)			(0	C)			(D)	(E)			(F)	
	Name and title	Average Position (do not check more than one							Reportable	Reportable		E	stimate	ed
		hours per	box	, unle	ss pe	erson	is bot	h an	compensation	compensatio	n	ar	nount	of
		week		cer an			or/trus	lee)	from	from related			other	
		(list any hours for	irecto						the	organization			ipensa	
		related	e or di	ee			sated		organization (W-2/1099-MISC)	(W-2/1099-MIS	5C)		rom th	
		organizations	rustee	l trust		ee	npen		(00-2/1099-00130)				anizat d relat	
		below	d ual t	Institutional trustee		nploy	st co I	л.					anizati	
		line)	Individual trustee or director	Institu	Officer	Key employee	Highest compensated employee	Former				0		
(18)	18) CAREN FLEIT 1.00													
BOAR	D MEMBER		X						0.		0.			0.
(19)	DR. DENNIS GROSS	1.00												
BOAR	D MEMBER		Х						0.		0.			0.
(20)	ELAINE KEANE	1.00									-			-
	D MEMBER		X						0.		0.			0.
	CORINNE SCHIFF	1.00									~			~
BOAR	D MEMBER		X						0.		0.			0.
													<u> </u>	<u></u>
	Subtotal								1,367,929.		0.	14	6,3	
	Total from continuation sheets to Part V								0.		0.	1 /	<u> </u>	$\frac{0}{0}$
	Total (add lines 1b and 1c)								1,367,929.		0.	14	6,3	83.
2	Total number of individuals (including but r	not limited to th	lose	liste	ed a	bove	e) wr	io r	eceived more than \$100	,000 of reportab	le			12
	compensation from the organization												Yes	No
3	Did the organization list any former officer,	director trust	مم ا		mn	love		hic	hest compensated emr	lovee on	I			
•	line 1a? If "Yes," complete Schedule J for s								jnoot oomponoatoa omp			3	х	
4	For any individual listed on line 1a, is the su													
	and related organizations greater than \$15											4	Х	
5	Did any person listed on line 1a receive or									dual for services	;			
	rendered to the organization? If "Yes," con	nplete Schedul	eJ1	for su	uch	pers	son .					5		Х
Sec	tion B. Independent Contractors													
1	Complete this table for your five highest co	-									npens	ation	from	
	the organization. Report compensation for	the calendar y	ear	endi	ng v	vith	or w	ithir		/ear.				
	(A) Name and business	address							(B) Description of s	ervices	С		C) nsatio	n
KIV	VI PARTNERS INC, 237 W		STI	REF	ст	_		_	•					
	TE 101, NEW YORK, NY					,			FINANCE CONS	ULTANT		38	3,7	47.
ZBS	S LEFFERTS ANIMAL HOSP	ITAL LLO	Ξ,	86	5-3	37							-	
LEE	FERTS BLVD, RICHMOND	HILL, NY	2 3	114	118	B			OUTSIDE VET	SERVICES		25	0,5	52.
2	Total number of independent contractors (includina but n	ot li	mite	d to	tho	se lis	stec	d above) who received m	ore than				
	\$100,000 of compensation from the organ						2		, .					

ANIMAL	CARE	AND	CONTROL	OF	NEW	YORK	CITY
INC.							

		(2020) INC .				13-3788	986 Page 9
Pa	rt V	III Statement of Revenue					
		Check if Schedule O contains a response o	r note to any lin				
				(A) Total revenue	(B) Related or exempt function revenue		(D) Revenue excluded from tax under sections 512 - 514
ts t	1 :	a Federated campaigns 1a					
ran		b Membership dues 1b					
Contributions, Gifts, Grants and Other Similar Amounts		c Fundraising events 1c	239,790.				
ar /		d Related organizations 1d					
s, 0			17,077,444.				
tion r Si		All other contributions, gifts, grants, and					
the		similar amounts not included above 1f	2,666,557.				
d O	9	g Noncash contributions included in lines 1a-1f	28,203.				
an		h Total. Add lines 1a-1f	►	19,983,791.			
			Business Code				
e	2 8	a FACILITY REVENUE	900099	429,155.	429,155.		
ervi Je	I	b					
n S ent	(c					
Program Service Revenue	(d					
		e					
а.	1	All other program service revenue					
		g Total. Add lines 2a-2f		429,155.			
	3	Investment income (including dividends, interes		691 940			601 040
		other similar amounts)		681,849.			681,849.
	4	Income from investment of tax-exempt bond pr	· · ·				
	5	Royalties	(ii) Personal				
	6		(1) 1 01301121				
		b Less: rental expenses					
		c Rental income or (loss) 6c					
		d Net rental income or (loss)					
		a Gross amount from sales of (i) Securities	(ii) Other				
	, ,	assets other than inventory 7a	(1)				
	1	b Less: cost or other basis					
en		and sales expenses 7b					
evenue		c Gain or (loss) 7c					
Rev		d Net gain or (loss)	>				
Other		a Gross income from fundraising events (not					
₹		including \$ 239,790. of					
		contributions reported on line 1c). See					
		Part IV, line 18	Ο.				
	I	b Less: direct expenses 8b	23,350.				
	(Net income or (loss) from fundraising events	►	-23,350.			-23,350.
	9 8	a Gross income from gaming activities. See					
		Part IV, line 19 9a					
		b Less: direct expenses9b					
			····· ►				
	10 :	a Gross sales of inventory, less returns					
	_	and allowances 10a					
		b Less: cost of goods sold 10b					
		c Net income or (loss) from sales of inventory	Business Code				
sno	44	a OTHER MISC INCOME	900099	173,491.			173,491.
nec		UNREALIZED GAIN	900099	96,750.			96,750.
ella »ver			200001	55,750.			50,750.
Miscellaneous Revenue		d All other revenue					
Σ		e Total. Add lines 11a-11d		270,241.			
	12	Total revenue. See instructions		21,341,686.	429,155.	0.	928,740.
	_		····· 🕨	, ,	, ,		, , ,

Form 990 (2020)

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

INC.

D ^	Check if Schedule O contains a respon	ise or note to any line in (A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	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,				
	trustees, and key employees	680,119.		680,119.	
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	10,676,765.	9,825,843.	695,307.	155,615
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	3,022,751.	2,685,970.	301,327.	35,454
10	Payroll taxes	958,957.	827,993.	110,766.	20,198
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
с	Accounting	38,925.		38,925.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0.)	549,097.	26,021.	523,076.	
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties	0.60 081	0.01 0.1 0	00.005	
16	Occupancy	263,871.	231,818.	28,665.	3,388
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	101 510	166 EE6	22 210	2 6 2 0
22	Depreciation, depletion, and amortization	191,512. 553,997.	166,556. 478,489.	22,318.	2,638 9,028
23		555,997.	4/0,409.	66,480.	9,020
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	MEDICAL SUPPLIES & SERV	1,407,161.	1,407,161.	0.	0
b	SUPPLIES	328,629.	302,116.	26,473.	40
с	TECHNOLOGY AND EQUIPMEN	240,079.	208,794.	27,978.	3,307
d	FACILITY EXPENSES	197,909.	172,119.	23,064.	2,726
е	All other expenses	643,625.	515,406.	79,976.	48,243
25	Total functional expenses. Add lines 1 through 24e	19,753,397.	16,848,286.	2,624,474.	280,637
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2020)

INC.

Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B)
	<u> </u>				End of year
	1	Cash - non-interest-bearing			1,520,878.
	2	Savings and temporary cash investments	100 001	2	41,588,194.
	3	Pledges and grants receivable, net			5,378.
	4	Accounts receivable, net	3,704,799.	4	3,538,160.
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%		_	
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
Assets	7	Notes and loans receivable, net		7	
Ass	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	168,919.	9	231,714.
	10a	Land, buildings, and equipment: cost or other	0		
		basis. Complete Part VI of Schedule D 11, 703, 97	$\frac{9}{2}$ 12 EQC 402		12 422 226
		Less: accumulated depreciation 10b 1,270,64	3. 13,596,402.	10c	13,433,336.
	11	Investments - publicly traded securities		11	267,884.
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	26,178,561.
	16	Total assets. Add lines 1 through 15 (must equal line 33)			86,764,105. 155,932.
	17	Accounts payable and accrued expenses		17	133,332.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20 21	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to any current or former officer, director,			
ilid		trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
Lia	23	Secured mortgages and notes payable to unrelated third parties		22	
	23	Unsecured notes and loans payable to unrelated third parties		23	
	25	Other liabilities (including federal income tax, payables to related third		27	
	20	parties, and other liabilities not included on lines 17-24). Complete Part X			
			78,675,822.	25	80,023,022.
	26	Total liabilities. Add lines 17 through 25			80,178,954.
		Organizations that follow FASB ASC 958, check here ▶ X			
Ses		and complete lines 27, 28, 32, and 33.			
anc	27	Net assets without donor restrictions	3,094,268.	27	4,646,110.
Bal	28	Net assets with donor restrictions		28	1,939,041.
pu		Organizations that do not follow FASB ASC 958, check here			
ЪЧ		and complete lines 29 through 33.			
sor	29	Capital stock or trust principal, or current funds		29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
As	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net Assets or Fund Balances	32	Total net assets or fund balances		32	6,585,151.
<u>-</u>	33	Total liabilities and net assets/fund balances		33	86,764,105.
					Eorm 990 (2020)

Form **990** (2020)

ANIMAL	CARE	AND	CONTROL	OF	NEW	YORK	CITY
TNC							

Form	1990 (2020) INC.	13	3788986	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				_
	Check if Schedule O contains a response or note to any line in this Part XI				X
			01 04		~ ~
1	Total revenue (must equal Part VIII, column (A), line 12)	1	21,34		
2	Total expenses (must equal Part IX, column (A), line 25)	2	19,75		
3	Revenue less expenses. Subtract line 2 from line 1	3	1,58	-	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	4,81	4,8	78.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			<u> </u>
8	Prior period adjustments	8	18	1,9	84.
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	6,58	5,1	51.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule				
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	d 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?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	te basis,			
	consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?			Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sc				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Aud	it		
	Act and OMB Circular A-133?		За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	iired audi	t		1
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2020)

SCHEDULE A											OMB No. 1545-0047
(Form 990 or 990-EZ)			Public C								2020
		C.	omplete if the o		ization is a sec 7(a)(1) nonexer				or a section		2020
	t of the Treasury venue Service			► A	ttach to Form	990 or I	Form 990-	-EZ.			Open to Public
			Go to www.irs	-							Inspection
Name o	f the organizati	on ANIM	IAL CARE	ANI	J CONTRO	LOF	' NEW	YORK	CITY		identification number .3-3788986
Part I	Reason		Charity Stat		All organizations	must	complete t	his nart) S	See instruction		5-5700900
										115.	
1 1			dation because i nurches, or asso								
2	- · ·								·)(A)(I)-		
3											
4		-	-	-					-	(iii). Enter	the hospital's name,
	city, and stat	e:			-						-
5	An organizati	on operated f	or the benefit of	a coll	lege or universit	y owne	d or opera	ited by a g	overnmental	unit descrit	oed in
	_ section 170	(b)(1)(A)(iv). ((Complete Part II.	.)							
6	¬ `		overnment or gov								
7 X	5		•		ntial part of its s	upport	from a gov	/ernmenta	l unit or from	the general	public described in
a 🗆	7		Complete Part II.)								
8 9			ed in section 17					ad in aani	upotion with a	land grant	
9 🗆	-		ganization desci grant college of		-					-	-
	university:		grant college of	ayricc		ictions)		marine, cit	y, and state c		
10	- · -	on that norma	ally receives (1) r	nore t	han 33 1/3% of	its sup	port from	contributio	ons. members	ship fees, a	nd gross receipts from
											from gross investment
	income and u	Inrelated busi	iness taxable inc	ome ((less section 51	1 tax) fi	rom busine	esses acqu	uired by the o	rganization	after June 30, 1975.
	See section	509(a)(2). (Co	mplete Part III.)								
11 📙	An organizati	on organized	and operated ex	kclusiv	vely to test for p	ublic s	afety. See	section 5	09(a)(4).		
12											e purposes of one or
											Check the box in
a [-	describes the ty	-				-		-	
a∟			anization operat on(s) the power				• •	-			
		•	complete Part I				amajonty				supporting
ь	~		ganization super	-			ction with i	ts support	ed organizati	on(s), by ha	aving
			of the supporting								
_			st complete Par								
с	Type III fui	nctionally inte	egrated. A supp	orting	organization o	perated	l in connec	tion with,	and functiona	ally integrat	ed with,
_		•	on(s) (see instruc			•			-		
d∟			y integrated. A	•••	0 0	•				0	
			tegrated. The or	•	• •				•	id an attent	iveness
a [·	,	tions). You must		• •			•			
e∟		•	anization receive or Type III non-fu						атурет, туре	еп, туре п	
f Fr			organizations								
			n about the sup								·
	(i) Name of supp		(ii) EIN		(iii) Type of organ	ization	(iv) Is the org in your govern	anization listed ing document?	(v) Amount o	-	(vi) Amount of other
	organizatior	1			(described on line above (see instru		Yes	No	support (see i	nstructions)	support (see instructions)
				-+							
Total											

Schedule A (Form 990 or 990 EZ) 2020 INC.

13-378898<u>6 Page</u>2

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 failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

See	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	17,760,554.	19,043,815.	20,930,463.	22,661,520.	19,800,823.	100,197,175.
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						
	furnished by a governmental unit to						
	the organization without charge	1,324,176.	1,437,345.	1,479,986.	1,409,408.	1,454,973.	7,105,888.
4	Total. Add lines 1 through 3	19,084,730.	20,481,160.	22,410,449.	24,070,928.	21,255,796.	107,303,063.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						107,303,063.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7	Amounts from line 4	19,084,730.	20,481,160.	22,410,449.	24,070,928.	21,255,796.	107,303,063.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	313.	326.	18,817.	806,382.	688,175.	1,514,013.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	14,814.	55,809.	40,776.	77,950.	263,915.	453,264.
11	Total support. Add lines 7 through 10						109,270,340.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12 3	,398,580.
13	First 5 years. If the Form 990 is for th	e organization's fi	rst, second, third, ^r	fourth, or fifth tax y	year as a section 5	501(c)(3)	
	organization, check this box and stop						▶∟
See	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2020 (I					14	98.20 %
15	Public support percentage from 2019	Schedule A, Part	II, line 14			15	98.97 %
16 a	1 33 1/3% support test - 2020. If the c	organization did no	t check the box or	n line 13, and line ⁻	14 is 33 1/3% or n	nore, check this bo	
	stop here. The organization qualifies	as a publicly supp	orted organization				X
b	33 1/3% support test - 2019. If the c	•					
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			
17a	10% -facts-and-circumstances test	t - 2020. If the org	anization did not c	heck a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the fact	s-and-circumstanc	es test, check this	box and stop he r	e. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	est. The organization	on qualifies as a pu	ublicly supported o	organization		
b	10% -facts-and-circumstances test	t - 2019. If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or ⁻	17a, and line 15 is	10% or
	more, and if the organization meets th	ne facts-and-circun	nstances test, che	ck this box and st	op here. Explain ir	n Part VI how the	
	organization meets the facts and circumstances test. The organization qualifies as a publicly supported organization						
18	Private foundation. If the organizatio	n did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	o, check this box a	nd see instruction	s 🕨 🗌
					Coho	dule A (Form 990	ar 000 EZ) 0000

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020 INC .

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. F	Public Support						
Calendar year (o	r fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020) (f) Total
1 Gifts, gran	ts, contributions, and						
membersh	ip fees received. (Do not						
include an	y "unusual grants.")						
	eipts from admissions,						
	se sold or services per-						
	facilities furnished in						
	y that is related to the on's tax-exempt purpose						
-	eipts from activities that						
	unrelated trade or bus-						
	er section 513						
	ues levied for the organ-						
	enefit and either paid to						
	ed on its behalf						
•							
	of services or facilities						
	by a governmental unit to						
	zation without charge						
	lines 1 through 5						
	ncluded on lines 1, 2, and						
	from disqualified persons						
	Ided on lines 2 and 3 received n disqualified persons that						
exceed the gr	eater of \$5,000 or 1% of the						
	e 13 for the year						
c Add lines	7a and 7b						
	port. (Subtract line 7c from line 6.)						
	Total Support				1		
	r fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	D (f) Total
	rom line 6						
	ome from interest,						
	payments received on oans, rents, royalties,						
	e from similar sources						
b Unrelated b	usiness taxable income						
(less section	n 511 taxes) from businesses						
acquired aft	er June 30, 1975						
c Add lines ⁻	10a and 10b						
	e from unrelated business						
	ot included in line 10b,						
regularly c	r not the business is arried on						
• •	me. Do not include gain						
	n the sale of capital						
	plain in Part VI.)						
	ars. If the Form 990 is for the	organization's fi	ret second third	fourth or fifth tax	vear as a section	1 501(c)(3) orga	
-	have an electron to any	-			-		
	Computation of Public						
	port percentage for 2020 (lin		-	column (f))		15	%
	port percentage from 2019 S					16	%
	Computation of Invest						/0
	t income percentage for 202		•			17	%
	t income percentage from 202		- · · · · · · · · · · ·			18	%
	upport tests - 2020. If the o			on line 14 and lin			
		-					
	33 1/3%, check this box and						/3% and
	upport tests - 2019. If the o	•					
	ot more than 33 1/3%, chec			•		•	
20 Private fo	undation. If the organization	uid not check a	box on line 14, 19	a, or 190, check t	mis box and see in	structions	▶∟

Yes No

Schedule A (Form 990 or 990-EZ) 2020 INC. Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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 lines 3b and 3c 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)(B) 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")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c 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 (as 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 line 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.)

1		165	
	1		
	2		
	3a		
	3b		
	0-		
	3c		
	4a		
	lu		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	9b		
	0-		
	9c		
	10a		
	104		

10b

	ANIMAL CARE AND CONTROL OF NEW YORK CITY			
Sche	edule A (Form 990 or 990-EZ) 2020 INC . 13-37	8898	6 Pa	age 5
Pa	rt IV Supporting Organizations (continued)		_	
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		
	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations	1		
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported	<u> </u>		
2				
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	0		
<u> </u>	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations	2		
Sec	auon C. Type ii Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		

3 By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If* "Yes," *describe in* **Part VI** *the role the organization*'s *supported organizations played in this regard.*

Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).
- a ____ The organization satisfied the Activities Test. Complete line 2 below.
- **b** L The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*
- c L The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).
- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If* "Yes," *explain in* Part VI *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "*No*" provide details in **Part VI.**
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If* "Yes," *describe in* **Part VI** *the role played by the organization in this regard.*

3

2a

2b

За

3b

Yes No

Sche	edule A (Form 990 or 990-EZ) 2020 INC.			13-3788986 Page 6
	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Orga		
1	Check here if the organization satisfied the Integral Part Test as a qualifying			Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus	st complete	e Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
_1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
-				

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2020

_	dule A (Form 990 or 990 EZ) 2020 INC .			1	.3-3788986 Page 7
Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations _{(continu}	<u>ied)</u>	i
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemption				
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	าร	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	he organization is responsive	e		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2020	าร	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2020				
а	From 2015				
b	From 2016				
с	From 2017				
d	From 2018				
e	From 2019				
f	Total of lines 3a through 3e				
	Applied to underdistributions of prior years				
	Applied to 2020 distributable amount				
i	Carryover from 2015 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
	Applied to 2020 distributable amount				
с	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2016				
	Excess from 2017				
	Excess from 2018				
	Excess from 2019				
-	Excess from 2020				

Schedule A (Form 990 or 990-EZ) 2020

		ANIMAL	CARE	AND	CONTRO	OL OF	' NEW	YORK	CITY		
Schedule A	(Form 990 or 990-EZ) 2020	INC.									986 Page 8
Part VI	Supplemental Inform Part IV, Section A, lines 1, line 1; Part IV, Section D, li Section D, lines 5, 6, and 8 (See instructions.)	nation. Prov 2, 3b, 3c, 4b, nes 2 and 3; I	4c, 5a, 6, Part IV, Se	9a, 9b, 9 ction E,	9c, 11a, 11b lines 1c, 2a,	, and 110 2b, 3a, a	c; Part IV, S and 3b; Par	Section B, t V, line 1;	lines 1 and Part V, Se	d 2; Part IV, action B, line	Section C,

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

1

2020	
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Employer identification number

Name of the organizatio	on							
	ANIMAL	CARE	AND	CONTROL	OF	NEW	YORK	CITY

13-3788986

	±1(0)
Organization	type (check one):

TNC

Filers of:	Section:
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
 - For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year $\dots \longrightarrow$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

	rganization L CARE AND CONTROL OF NEW YORK CITY			3788986
Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	ns	(d) Type of contribution
1	ASPCA 520 EIGHTH AVENUE NEW YORK, NY 10018	\$1,200,0	(Person X Payroll Noncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	ns	(d) Type of contribution
2	NEW YORK CITY DEPARTMENT OF HEALTH 125 WORTH STREET NEW YORK, NY 10013	\$ <u>17,077,4</u>	(Person X Payroll Noncash Complete Part II for torncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	ns	(d) Type of contribution
		\$		Person Payroll Noncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	ns	(d) Type of contribution
		\$		Person Payroll Noncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	ns	(d) Type of contribution
		\$		Person Payroll Noncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	ns	(d) Type of contribution
		\$		Person Payroll Noncash Complete Part II for

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

			Employer identification number
ANIMA INC.	L CARE AND CONTROL OF NEW YORK CITY		13-3788986
Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	additional space is neede	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	e) (d)
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
		\$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Page 3

	rganization			Employer identification number
ANIMA INC.	L CARE AND CONTROL OF N	EW YORK CITY		13-3788986
Part III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional) through (e) and the following line e charitable, etc., contributions of \$1,000 c	ntry For organizations	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
	Transferee's name, address, a	(e) Transfer of g		ansferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
-	Transferee's name, address, a	(e) Transfer of g		ansferor to transferee
-				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
-		(e) Transfer of g	 ift	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	ansferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
		(e) Transfer of g	 ift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	ansferor to transferee

SC	HEDULE D		Suppleme	nta	al Financial Statements			⊢	OMB No. 15	45-0047
	n 990)		Complete if the	org	anization answered "Yes" on Form 990,				202	20
Depart	ment of the Treasury		Part IV, line 6, 7, 8, 9		, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.				Open to	Public
	Revenue Service			<u>m9</u>	90 for instructions and the latest informati	on.			Inspecti	on
Nam	e of the organizati	••••	ANIMAL CARE AND	CO	NTROL OF NEW YORK CITY		Emp		lentification -37889	
Pa	tl Organiza	ation	s Maintaining Donor Adv	/ise	ed Funds or Other Similar Funds o	r A	ccou	ints.Co	mplete if th	е
	organizatio	n ansv	vered "Yes" on Form 990, Part IV	V, lir				<u> </u>		
					(a) Donor advised funds	(b) Fun	ds and o	other accou	nts
1			ear							
2			ibutions to (during year)							
3			s from (during year)							
4			of year							
5	-				writing that the assets held in donor advised			Г		
6					exclusive legal control?			L	Yes	└── No
6					advisors in writing that grant funds can be us or donor advisor, or for any other purpose co					
	impermissible priv						-	Г	Yes	🗌 No
Pa					ganization answered "Yes" on Form 990, Par					
1			on easements held by the organ		-	,		•		
•			d for public use (for example, re		· · · · · · · · · · · · · · · · · · ·	isto	rically	importa	nt land area	l
	Protection of				Preservation of a c		-	•		
	Preservation	n of op	en space							
2	Complete lines 2a	throug	h 2d if the organization held a q	Jual	fied conservation contribution in the form of a	a co	nserva	ation eas	sement on t	he last
	day of the tax yea			•					the End of th	
а	Total number of co	onserv	ation easements				2a			
b							2b			
с	Number of conser	vation	easements on a certified historie	c st	ructure included in (a)		2c			
d	Number of conser	vation	easements included in (c) acqui	red	after 7/25/06, and not on a historic structure					
	listed in the Nation	nal Reg	jister				2d			
3	Number of conser	vation	easements modified, transferred	d, re	leased, extinguished, or terminated by the or	gan	izatior	n during	the tax	
	year 🕨		_							
4			property subject to conservation							
5	-			-	riodic monitoring, inspection, handling of			Г		
6			ent of the conservation easement							
6		er nour	s devoted to monitoring, inspect	ing	handling of violations, and enforcing conser	vatio	on eas	ements	auring the y	rear
7		os inc	urred in monitoring inspecting l		dling of violations, and enforcing conservatio		somor	ate durin	a tha year	
'	► \$	563 110	area in monitoring, inspecting, i	an		i ca	Semer		y the year	
8	· · ·	vation	easement reported on line 2(d) ;	aho	ve satisfy the requirements of section 170(h)(4)(F	(i)			
Ū								Г	Yes	No No
9					ion easements in its revenue and expense st			nd		
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the									
			g for conservation easements.		-					
Pai	t III Organiza	ation	s Maintaining Collection	s c	f Art, Historical Treasures, or Oth	er (Simil	ar Ass	ets.	
	Complete i	f the o	rganization answered "Yes" on F	orn	1 990, Part IV, line 8.					
1a	If the organization	electe	d, as permitted under FASB AS	C 9	58, not to report in its revenue statement and	bal	ance s	sheet wo	orks	
	of art, historical tre	easure	s, or other similar assets held for	r pu	blic exhibition, education, or research in furth	era	nce of	public		
	service, provide in	Part >	(III the text of the footnote to its	fina	ncial statements that describes these items.					
b	-				58, to report in its revenue statement and bal					
				ubli	c exhibition, education, or research in further	ance	e of pu	Iblic serv	/ice,	
	-	-	ounts relating to these items:				•	•		
								\$`		
~	(ii) Assets include							\$ <u> </u>		
2					easures, or other similar assets for financial ga	ain,	provid	е		
	-				ASC 958 relating to these items:		•	۴		
<u>d</u>			990, Part X		- (lo D (Eorm	

LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990
032051	12-01-20

	ANIMAL	CARE	AND	CONTROL	\mathbf{OF}	NEW	YORK	CITY
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Sche	dule D (Form 990) 2020 INC .	CARE AND C			NEW IO	KK CI		3788986 Page 2
	t III Organizations Maintaining O	Collections of A	rt. His	torical Tr	easures.	or Othe		<u> </u>
3	Using the organization's acquisition, accessi							, ,
	collection items (check all that apply):		,	·····, ····	·····j ···		5	
а	Public exhibition	d		Loan or exc	hange progra	am		
b	Scholarly research	e						
c	Preservation for future generations							
4	Provide a description of the organization's c	ollections and explai	n how t	hev further t	he organizat	ion's exer	not ouroose in	Part XIII
5	During the year, did the organization solicit of							
Ū	to be sold to raise funds rather than to be m							Yes No
Par	t IV Escrow and Custodial Arran							
	reported an amount on Form 990, Pa			5			,,	
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for	contribution	ns or other as	ssets not i	ncluded	
	on Form 990, Part X?							Yes No
b	If "Yes," explain the arrangement in Part XIII							
			-					Amount
с	Beginning balance						1c	
	Additions during the year							
	Distributions during the year							
f	Ending balance						1f	
2a	Did the organization include an amount on F						ty?	Yes No
b	If "Yes," explain the arrangement in Part XIII.	. Check here if the ex	xplanati	on has been	provided on	Part XIII		
Par	t V Endowment Funds. Complete i	f the organization ar	swered	"Yes" on Fo	orm 990, Par	t IV, line 10	0.	
		(a) Current year	(b) F	Prior year	(c) Two yea	rs back 🛛 🌔	d) Three years b	ack (e) Four years back
1a	Beginning of year balance							
b	Contributions							
с	Net investment earnings, gains, and losses							
d	Grants or scholarships							
	Other expenditures for facilities							
	and programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the cur		e (line 1	lg, column (a	a)) held as:			
а	Board designated or quasi-endowment		%					
b	Permanent endowment	%						
с	Term endowment	%						
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.						
3a	Are there endowment funds not in the posse	ession of the organiz	ation th	at are held a	nd administe	ered for th	e organization	
	by:							Yes No
	(i) Unrelated organizations							3a(i)
	(ii) Related organizations							3a(ii)
b	If "Yes" on line 3a(ii), are the related organization							
4	Describe in Part XIII the intended uses of the	e organization's endo	owment	funds.				
Par	t VI Land, Buildings, and Equipm	nent.						
	Complete if the organization answere	d "Yes" on Form 990	0, Part l'	V, line 11a. S	See Form 990	0, Part X, I	ine 10.	
	Description of property	(a) Cost or o	ther	(b) Cost	or other	(c) Ac	cumulated	(d) Book value
		basis (investr	ment)		(other)	depi	reciation	
1a	Land			13,02	6,750.			13,026,750.
b	Buildings							0.
с	Leasehold improvements			38	2,554.	1	52,343.	230,211.
d	Equipment						10 000	
	Other				4,675.	1,1	18,300.	176,375.
Total	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, colui	mn (B), line 1	0c.)		►	13,433,336.

Schedule D (Form 990) 2020

ANIMAL CARE AND CONTROL OF NEW YORK CITY
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Schedule D (Form 990) 2020 INC . Part VII Investments - Other Securities.		13	8-3788986 Page 3
Complete if the organization answered "Yes"	on Form 990, Part IV, line		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	id-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	id-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets.			
	an Fauna 000 Davit IV/ line	11d Cas Fairs 000 Dart V line 15	
Complete if the organization answered "Yes"	Description	e 11d. See Form 990, Part X, line 15.	(b) Book value
(1) DEPOSITS ON LEASED AND OT	•		78,758.
(1) CONSTRUCTION IN PROGRESS			23,172,758.
	ET		2,927,045.
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 15.)		26,178,561.
Part X Other Liabilities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11e or 11f. See Form 990, Part X, line 2	
1.(a) Description of liability			(b) Book value
(1) Federal income taxes			0.10.051
	S PAYABLE		840,271.
(3) BENEFIT DAYS ACCRUAL			362,411.
(4) ACCRUED EXPENSES			3,550,041.
(5) CUSTOMER DEPOSITS			5,680.
(6) INTEREST PAYABLE			138,438.
(7) MORTGAGE PAYABLE			75,000,000.
(8) DEFERRED RENT PAYABLE			126,181.
(9) Total (Calumn (b) must actual Farm 000, Part X, act, (D) line	25)		80,023,022.
Total. (Column (b) must equal Form 990, Part X, col. (B) line			
2. Liability for uncertain tax positions. In Part XIII, provide		o the organization's financial statements	that reports the

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

	edule D (Form 990) 2020 INC •				3788986 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Stateme	ents Wi	ith Revenue per R	etur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	22,876,831.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b	1,511,795.		
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	23,350.		
е	Add lines 2a through 2d			2e	1,535,145.
3	Subtract line 2e from line 1			3	21,341,686.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	21,341,686.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem				
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	ents W	/ith Expenses per		ırn.
Pa 1	Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements	ents W	/ith Expenses per		
_	rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	ents W	/ith Expenses per	Retu 1	ırn.
1	Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	ents W	/ith Expenses per	Retu 1	ırn.
1 2	Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	ents W	/ith Expenses per	Retu 1	ırn.
1 2 a	Image: style="text-align: center;">rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	ents W	/ith Expenses per 1,511,795.	Retu	ırn.
1 2 a b	Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	ents W 2a 2b 2c	/ith Expenses per	Retu	ırn. 21,288,542.
1 2 a b c	Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	ents W	/ith Expenses per 1,511,795. 23,350.	Retu	ırn. 21,288,542. 1,535,145.
1 2 b c d	Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	ents W 2a 2b 2c 2d	/ith Expenses per 1,511,795. 23,350.	Retu	ırn. 21,288,542.
1 2 b c d e	Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	ents W 2a 2b 2c 2d	/ith Expenses per 1,511,795. 23,350.	Retu 1 2e	ırn. 21,288,542. 1,535,145.
1 2 b c d e 3	Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	ents W	/ith Expenses per 1,511,795. 23,350.	Retu 1 2e	ırn. 21,288,542. 1,535,145.
1 2 b c d 3 4	Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	ents W	/ith Expenses per 1,511,795. 23,350.	Retu 1 2e	ırn. 21,288,542. 1,535,145. 19,753,397.
1 2 3 4 3 4	Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b	ents W 2a 2b 2c 2d 4a 4b	/ith Expenses per 1,511,795. 23,350.	2e 3 4c 4c	rn. 21,288,542. 1,535,145. 19,753,397. 0.
1 2 d e 3 4 b c 5	Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	ents W 2a 2b 2c 2d 4a 4b	/ith Expenses per 1,511,795. 23,350.	Retu 1 2e 3	ırn. 21,288,542. 1,535,145. 19,753,397.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

THE ORGANIZATION ADOPTED THE PROVISIONS OF FASB ASC 740 ON JANUARY 1,
2009. FASB ASC 740 PRESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT
PROCESS FOR FINANCIAL STATEMENT RECOGNITION OF UNCERTAIN TAX POSITIONS
TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. THE INTERPRETATION ALSO
PROVIDES GUIDANCE ON RECOGNITION, DERECOGNITION, CLASSIFICATION, INTEREST
AND PENALTIES, ACCOUNTING IN INTERIM PERIODS, DISCLOSURE AND TRANSITION.
THERE WAS NO IMPACT ON THE TOTAL NET ASSETS AS A RESULT OF THE ADOPTION OF
FASB ASC 740.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

FUNDRAISING EXPENSES PRESENTED NET OF BENEFITS AND SPECIAL

PART XII, L	TNE 2D -	OTHER ADJIL	STMENT	5:			
						apparat	
FUNDRAISING	EXPENSES	PRESENTED	NET O	. RENELTA	AND	SPECIAL	
EVENTS							23,350.

INC.

Part XIII Supplemental Information (continued)

Schedule D (Form 990) 2020

EVENTS

13-3788986 Page 5

23,350.

SCHEDULE G	Suppleme	ntal Information Regard	ding Fun	drais	ing or Gaming	Activities	OMB No. 1545-0047		
(Form 990 or 990-EZ)	2020								
Department of the Treasury		Attach to Form				_	Open to Public Inspection		
Internal Revenue Service Name of the organization		to www.irs.gov/Form990 for i CARE AND CONTROI					identification number		
Name of the organization	INC.	CARE AND CONTROL	J OF N	сw	IORK CIII		88986		
Part I Fundraisi		Complete if the organization a	nswered "Y	es" or	n Form 990, Part IV.				
	complete this par			00 01					
a Mail solicitation b Internet and c c Phone solicitation d In-person solicitation	1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Mail solicitations e Solicitation of non-government grants b Internet and email solicitations f Solicitation of government grants c Phone solicitations g Special fundraising events								
		or oral agreement with any indivi art VII) or entity in connection w					Yes 🗌 No		
• • •		viduals or entities (fundraisers) p	-		-				
compensated at lea	ast \$5,000 by the	organization.		U					
(i) Name and address or entity (fund		(ii) Activity	(iii) fundr have c or con contrib	aiser ustody trol of	(iv) Gross receipts from activity	(v) Amount pa to (or retained fundraiser listed in col. (by) to (or retained by)		
			Yes	No					
Total									
3 List all states in which or licensing.	on the organizatio	n is registered or licensed to sc	DIICIT CONTRIB	outions	s or has been notified	a it is exempt fro	om registration		

ANIMAL CARE AND CONTROL OF NEW YORK CI
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Schedule G (Form 990 or 990-EZ) 2020 INC.

13-3788986 Page 2 Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. \$5,000

		of fundraising event contributions and g	(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
			GALA			col. (c)
ne			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	239,790.			239,790.
	2	Less: Contributions	239,790.			239,790.
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
s	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
irect E	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses				23,350.
	10	Direct expense summary. Add lines 4 throug			►	23,350.
		Net income summary. Subtract line 10 from				-23,350.
Pa	rt I		answered "Yes" on Form	n 990, Part IV, line 19, or	reported more than	
		\$15,000 on Form 990-EZ, line 6a.		(b) Pull tabs/instant		(d) Total gaming (add
anı			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Revenue						
ñ	1	Gross revenue				
es	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes %	Yes%	└── Yes % └── No	
	7	Direct expense summary. Add lines 2 throug	h 5 in column (d)		▶	
	8	Net gaming income summary. Subtract line	7 from line 1, column (d)		►	
	ls t	ter the state(s) in which the organization cond the organization licensed to conduct gaming a	activities in each of these	states?		Yes No
b	lf "	No," explain:				
10a	We	ere any of the organization's gaming licenses r	evoked, suspended, or to	erminated during the tax	year?	Yes No
		Yes," explain:				

032082 11-25-20

Schedule G (Form 990 or 990-EZ) 2020

ANIMAL	CARE	AND	CONTROL	OF	NEW	YORK	CITY
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Sch	nedule G (Form 990 or 990-EZ) 2020 INC . 13-	3788	3986	Page 3
	Does the organization conduct gaming activities with nonmembers?		Yes	No
	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?	. Ш	Yes	L No
	Indicate the percentage of gaming activity conducted in:	١	ı	
	a The organization's facility		-	<u>%</u>
	o An outside facility Enter the name and address of the person who prepares the organization's gaming/special events books and records:	13b		%
14	Name			
15a	Address a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	No
	 If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amount of gaming revenue retained by the third party ▶\$ If "Yes," enter name and address of the third party: 			
	Name			
	Address ►			
16	Gaming manager information:			
	Name			
	Gaming manager compensation 🕨 \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
a	 Mandatory distributions: a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? 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 ▶ \$ 		Yes	No No
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and F 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	art III, I	ines 9,	9b, 10b,

Schedule G (Form 990 or 990-EZ)			AND	CONTROL	OF	NEW	YORK	CITY 13-3788986 Page 4
Schedule G (Form 990 or 990-EZ) Part IV Supplemental Info	rmation (cont	inued)						

SC	HEDULE J Compensation Information	1	OMB No. 1	545-004	17	
(Fo	rm 990) For certain Officers, Directors, Trustees, Key Employees, and Highest		2020			
	Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.					
Depa	rtment of the Treasury Attach to Form 990.		Open to		c	
Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.			Inspection			
Nan	ne of the organization ANIMAL CARE AND CONTROL OF NEW YORK CITY	Employer ide			nber	
De	INC. Int I Questions Regarding Compensation	13-37	0090	0		
Pa	art I Questions Regarding Compensation			<u></u>	<u> </u>	
4-	Obselvites ensuremented bev/ce) if the even institute available and of the following to avfew a new contributed on Form	- 000		Yes	No	
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form	1990,				
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.					
	Travel for companions Payments for business use of personal re					
	Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as maid, chauffeur, cheeter)					
		ur, cher)				
h	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or					
			1b			
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,					
_	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?		2			
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization'	s				
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organizat					
	establish compensation of the CEO/Executive Director, but explain in Part III.					
	Compensation committee Written employment contract					
	Independent compensation consultant					
	Form 990 of other organizations	committee				
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing					
	organization or a related organization:					
а	Receive a severance payment or change-of-control payment?		. 4a		Х	
b	Participate in or receive payment from a supplemental nonqualified retirement plan?		. 4b		Х	
с	Participate in or receive payment from an equity-based compensation arrangement?		. 4c		Х	
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.					
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.					
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation					
	contingent on the revenues of:					
а	The organization?		. 5 a		X	
b	Any related organization?		. 5b		Х	
	If "Yes" on line 5a or 5b, describe in Part III.					
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati	on				
	contingent on the net earnings of:				v	
	The organization?				X	
b	Any related organization?		. 6b		Х	
_	If "Yes" on line 6a or 6b, describe in Part III.					
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payment		_		v	
~	not described on lines 5 and 6? If "Yes," describe in Part III		. 7		X	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the				v	
~	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	. 8		X		
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in					
	Regulations section 53.4958-6(c)?		. 9			
.HA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Schedul	e J (Forn	n 990)	2020	

Schedule J (Form 990) 2020

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and		(E) Total of columns	(F) Compensation in column (B)
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	reported as deferred on prior Form 990
(1) RISA WEINSTOCK (i)	216,923.	0.	0.	0.	26,163.	243,086.	0.
CEO & PRESIDENT (ii	0.	0.	0.	0.	0.	0.	0.
(2) ROBIN STUPACK (i)	152,046.	0.	0.	0.	8,016.	160,062.	0.
VICE PRESIDENT, ANIMAL HEALTH & WELF (ii	0.	0.	0.	0.	0.	0.	0.
(3) RACHEL M WARNES (i)	108,206.	0.	0.	0.	7,427.	115,633.	0.
FORMER VETERINARIAN (ii	0.	0.	0.	0.	0.	0.	0.
(4) JENNIFER PIIBE (i)	109,039.	0.	0.	0.	3,341.	112,380.	0.
FORMER GENERAL CONSEL (ii	0.	0.	0.	0.	0.	0.	0.
(5) HILLARY BRAVERMAN (i)	103,184.	0.	0.	0.	7,336.	110,520.	0.
FORMER VETERINARIAN (ii	0.	0.	0.	0.	0.	0.	0.
(i)							
(ii							
(i)							
(ii							
(i)							
(ii							
(i)							
(ii							
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(ii							
(i)							
(ii							
(i)							

13-3788986

ANIMAL	CARE	AND	CONTROL	OF	NEW	YORK	CITY
INC.							

Schedule J (Form 990) 2020

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Schedule J (Form 990) 2020

SCHEDULE M (Form 990)		Nonc	ash Contr	ibutions	;	ŀ	OMB No. 1545-0047	
- Depar	ment of the Treasury Revenue Service	 Complete if the org Attach to Form 99 Go to www.irs.gov 	D.	29 or 30.	2020 Open to Public Inspection			
Nam	e of the organizatio	n ANIMAL CARE INC.	AND CC	NTROL OF	Employer identification number 13-3788986			
Pa	rt I Types of	f Property						
			(a) Check if applicable	(b) Number of contributions or items contributed	(c Noncash co amounts re	ontribution ported on		(d) of determining ntribution amounts
1	Art - Works of art				10111000,1 4	t viii, iirio rg		
2		asures						
3		erests						
4		ations						
5		sehold goods						
6		hicles						
7								
8		ty						
9		ly traded						
10		y held stock						
11	Securities - Partne							
	trust interests							
12	Securities - Misce							
13	Qualified conserva	ation contribution -						
	Historic structures	3						
14		ation contribution - Other						
15	Real estate - Resid	dential						
16		mercial						
17		r						
18								
19								
20		al supplies						
21	Taxidermy							
22	Historical artifacts							
23	Scientific specime	ens						
24	Archeological artif	acts						
25	Other 🕨 (S	HELTER DONAT)	Х	439		28,203.	RETAIL VA	LUE
26	Other 🕨 ()						
27	Other ► ()						
28	Other 🕨 ()						
29	Number of Forms	8283 received by the orgar	nization durin	g the tax year for c	contributions			
	for which the orga	inization completed Form 8	283, Part V, [Donee Acknowledg	jement			
	C C			·		· · · · ·		Yes No

			165	
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that must hold for at least three years from the date of the initial contribution, and which isn't required to be used for	tit		
	exempt purposes for the entire holding period?			X
b	If "Yes," describe the arrangement in Part II.			
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?			Х
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?			x
b	If "Yes," describe in Part II.			
33	If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			
ΙНΔ	For Paperwork Reduction Act Notice, see the Instructions for Form 990	Schedule M (For	m 990	1 2020

uction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2020

Schedule M (Form 990) 2020 INC .

13-3788986 Page 2

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, LINE 33:

ACC RECEIVES VARIOUS DONATED ANIMAL CARE SUPPLIES, INCLUDING FOOD, BLANKETS, LEASHES, ETC. AS PART OF ITS ONGOING OPERATIONS. THERE ARE MANY SOURCES OF THESE DONATIONS. THE ESTIMATED AMOUNTS INCLUDED IN THE AUDITED FINANCIAL STATEMENTS ARE AN ESTIMATE OF THE FMV OF THE SUPPLIES RECEIVED FOR THE YEAR AND HAVE BEEN INCLUDED IN IN-KIND DONATIONS IN REVENUE REPORTED ON FORM 990. IN ADDITION, ACC RECEIVED DONATED GIFTS THAT WERE SUPPLIED FOR FUNDRAISING EVENTS FROM VARIOUS SOURCES. THE ESTIMATED AMOUNTS INCLUDED IN THE AUDITED FINANCIAL STATEMENTS ARE AN ESTIMATE OF THE FMV OF THE GIFTS RECEIVED FOR THE YEAR AND HAVE BEEN INCLUDED IN REVENUE REPORTED ON FORM 990. SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization 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. Go to www.irs.gov/Form990 for the latest information.

ANIMAL CARE AND CONTROL OF NEW YORK CITY



13-3788986

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

THROUGH ITS CONTRACT FOR SERVICES WITH THE NYC DEPARTMENT OF HEALTH AND

MENTAL HYGIENE, ACC DOES NOT RELY ON DONOR CONTRIBUTIONS AS A PRIMARY

SOURCE FOR STAFF SALARIES OR OTHER ADMINISTRATIVE EXPENSES ASSOCIATED

WITH CONTRACT SERVICES. UNDER THIS PUBLIC/PRIVATE FUNDING APPROACH, ACC

USES FUNDING FROM ITS DONORS PRIMARILY FOR PROGRAMS AND SERVICES THAT

ARE NOT FUNDED BY THE CONTRACT WITH THE CITY TO ENHANCE ANIMAL CARE AND

OTHER SERVICES THAT ACC PROVIDES THROUGHOUT THE FIVE BOROUGHS OF NEW

YORK CITY.

FORM 990, PART VI, SECTION B, LINE 11B:

INC.

A COPY OF FORM 990 IS PROVIDED TO EACH OF THE TRUSTEES PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

BOARD MEMBERS AND SENIOR LEVEL MANAGEMENT ARE REQUESTED TO UPDATE THEIR

INTERESTS THAT COULD GIVE RISE TO CONFLICTS OF INTEREST ON AN ANNUAL BASIS.

FORM 990, PART VI, SECTION B, LINE 15:

THE PROCESS FOR THE PRESIDENT AND CEO COMPENSATION INVOLVES A REVIEW OF THE MARKET FOR COMPARABLE POSITIONS; A BUDGET ANALYSIS AND DISCUSSION AMONG BOARD MEMBERS, AND FINALLY IS APPROVED BY THE BOARD.

 THE BOARD HAS A GENERAL UNDERSTANDING OF SALARIES PAID TO KEY EMPLOYEES.

 THE PRESIDENT AND CEO WOULD NEED TO REVIEW ANY INCREASES IN COMPENSATION

 FOR KEY EMPLOYEES THAT SIGNIFICANTLY EXCEED CURRENT SALARY RANGES WITH THE

 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990 or 990-EZ) 2020

Name of the organization	ANIMAL CAL	RE AND CO	NTROL OF	F NEW YOP	RK CITY	ζ	Page 2 Employer identification number 13-3788986			
BOARD CHAIR.	COMPARABL	E POSITIC	ONS AND S	SALARIES	WOULD	BE	INCLUI	DED I	IN THE	
REVIEW AS WEI	L REVIEWED	BY ACC'S	5 FINANC	IAL CONSU	JLTANT	IN	TERMS	OF I	IMPACT	то

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC WITHIN 30 DAYS OF WRITTEN REQUESTS.

FORM 990, PART XI, LINE 8

THE ORGANIZATION HAS RESTATED ITS PREVIOUSLY ISSUED FINANCIAL STATEMENTS FOR JUNE 30, 2020. BASED ON INFORMATION DEVELOPED AS A RESULT OF THE CURRENT PERIOD'S INQUIRY INTO THE ACCOUNTING FOR CERTAIN ACCOUNTS, MANAGEMENT HAS DETERMINED THAT A RESTATEMENT OF THE JUNE 30, 2020 FINANCIAL STATEMENTS IS APPROPRIATE TO CORRECT ACCOUNTING ERRORS IN THE PRIOR YEARS. THE CHANGES WERE A RESULT OF INCORRECT RECOGNITION OF CONTRIBUTIONS REVENUE FROM DONORS AND INCORRECT RECOGNITION OF INVESTMENTS AND RELATED ACTIVITY.

EFFECT ON THE OPENING BALANCE WITHOUT DONOR RESTRICTIONS NET ASSETS:

 JUNE 30, 2020 INCREASE IN CASH
 \$ 5,905

JUNE 30, 2020 INCREASE IN MARKETABLE SECURITIES 176,079

THE OPENING BALANCE NET ASSET ADJUSTMENT TOTAL INCREASE \$181,984.

990 PART XII, LINE 2C

Schedule O (Form 990 or 9				Page 2
Name of the organization	ANIMAL CARE	AND CONTROL OF N	NEW YORK CITY	Employer identification number
	INC.			13-3788986
THERE WAS NO	CHANGE IN TH	E PRIOR PROCESS R	REGARDING OVERSIO	GHT OF THE

FINANCIAL STATEMENT AUDIT AND SELECTION OF INDEPENDENT AUDITOR.

SCHEDULE A, PART II, LINE 3

ACC RECEIVES BOTH UTILITIES AND THE USE OF ITS ADMISSION CENTERS AND ANIMAL SHELTER FACILITIES FROM THE CITY OF NEW YORK FREE OF CHARGE. THE AMOUNT INCLUDED ON LINE 3 REPRESENTS THE VALUE OF THE UTILITIES AND USE OF FACILITIES PAID ON BEHALF OF ACC BY THE CITY OF NEW YORK. THE THREE ANIMAL CARE CENTERS USED BY THE ORGANIZATION ARE OWNED BY THE CITY. PRIOR TO 2015, THE ESTIMATED FAIR MARKET VALUE OF RENTING THESE FACILITIES WAS NOT SHOWN ON LINE 3 DUE TO THE SPECIFIC USE AND DESIGN OF THE FACILITIES MAKING IT EXTREMELY DIFFICULT TO ESTABLISH A REASONABLE VALUE.

SCHEDULE R	
(Form 990)	

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Department of the Treasury Internal Revenue Service	► Go to www.irs.gov/Form990 for instructions and the latest information.	Inspection
Name of the organization	ANIMAL CARE AND CONTROL OF NEW YORK CITY	Employer identification number 13-3788986

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a)	(b)	(c)	(d)	(e)	(f)
Name, address, and EIN (if applicable)	Primary activity	Legal domicile (state or	Total income	End-of-year assets	Direct controlling
of disregarded entity		foreign country)			entity
1906 FLUSHING LLC - 83-4684368					
11 PARK PLACE SUITE 805					
NEW YORK, NY 10007	REAL ESTATE ENTITY	NEW YORK	711,842.	80,717,076.	
]				
	1				

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	contr	3) 512(b)(13) rolled ity?
				501(c)(3))		Yes	No
NYC DEPARTMENT OF HEALTH	NYC DOH'S MISSION IS TO						
330 WEST 42ND STREET	PROTECT AND PROMOTE THE						
NEW YORK, NY 10036	HEALTH OF ALL NEW YORKERS	NEW YORK					Х
	-						

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

Schedule R (Form 990) 2020

OMB No. 1545-0047

2020

ANIMAL CARE AND CONTROL OF NEW YORK CITY

Schedule R (Form 990) 2020 INC.

13-3788986 Page 2

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.

(a)	(b)	(c)	(d)	(e	e)	(f)		(g)	(h)	(i)		(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	(related, ı excluded fro	unrelated, om tax under	Share of to income	er	hare of d-of-year assets	amount in box 20 of Schedule		ox ⁿ ule ^f	nanaging partner?	Percenta ownersh	
		country)		sections	512-514)				Yes	No	K-1 (Form 10	65) Y	/es No	
	_													
	_													
	_													
										ļ				
	4													
	4													
	_													
	-													
	-													
	-													
	-													
	-													
	-													
IV Identification of Related O organizations treated as a c	I Organizations Taxable corporation or trust dur	as a Corpo ing the tax	I pration or Trust. C year.	omplete if th	e organizat	ion answered	"Yes" on	Form 990, F	l Part IV,	line 34	I 4, because it h	nad on	ne or m	I ore relat
(a)			(b)	(c)	(d)		(e)	(1	f)		(g)	((h)	(i) Sectio
Name address and	FIN	Prim		l egal domicile	Direct cont		e of entity	Share	of total	.	Share of	Perce	entage	Sectio

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i	i)	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership	(i Sect 512(b contr enti	olled ity?	
		country)						Yes	No	

ANIMAL CARE AND CONTROL OF NEW YORK CITY

Schedule R (Form 990) 2020 INC.

Not	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
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?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		X
	Gift, grant, or capital contribution to related organization(s)	1b		Х
	Gift, grant, or capital contribution from related organization(s)	1c	X	
	Loans or loan guarantees to or for related organization(s)	1d		X
	Loans or loan guarantees by related organization(s)	1e		X
f	Dividends from related organization(s)	1f		Х
g	Sale of assets to related organization(s)	1g		X
h	Purchase of assets from related organization(s)	1h		X
i	Exchange of assets with related organization(s)	1i		X
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		Х
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		X
- 1	Performance of services or membership or fundraising solicitations for related organization(s)	11		X
n	Performance of services or membership or fundraising solicitations by related organization(s)	1m		X
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		X
	Sharing of paid employees with related organization(s)	10		Х
р	Reimbursement paid to related organization(s) for expenses	1p		X
q	Reimbursement paid by related organization(s) for expenses	1q		Х
r	Other transfer of cash or property to related organization(s)	1r		Х
s	Other transfer of cash or property from related organization(s)	1s		Х
2	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.			

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) NYC DEPARTMENT OF HEALTH	С	18,532,417.	FAIR MARKET VALUE
_(2)			
(3)			
<u>(</u> 4)			
<u>(</u> 5)			
(6)			

ANIMAL CARE AND CONTROL OF NEW YORK CITY

Schedule R (Form 990) 2020 INC.

Part VI Unrelated 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.

(a)	(b)	(c)	(d)	(6))	(f)	(g)	(h)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are partnei 501/	all rs sec. c)(3)	Share of	Share of		opor- nate tions?		General o managin	^{or} Percentage ownership
of entity		(state or foreign country)	excluded from tax under sections 512-514)		s.?	total income	end-of-year assets	alloca Voc	tions?	of Schedule K-1 (Form 1065)	partner? Yes NC	
			,	103	NO					,		<u>'</u>
											\vdash	
											\square	
											\vdash	

Schedule R (Form 990) 2020

Schedule R	{ (Form 990) 2020	ANIMAL INC.	CARE A	ND COI	NTROL (OF NEW	YORK	CITY 13-	3788986	Page 5
Part VII	Supplemental Infor	mation								
	Provide additional informa		nses to quest	ions on Scl	hedule R. Se	ee instructio	ns.			

4560	1	Denrec	iation and Am	ortizatio	n		OMB No. 1545-0172				
Form 4562			g Information on Lis	ted Property			2020				
Department of the Treasury Internal Revenue Service (99			Attach to your tax re form4562 for instruction				Attachment Sequence No. 179				
Internal Revenue Service (99 Name(s) shown on return	s	Identifying number									
ANIMAL CARE											
INC.	13-3788986										
Part I Election To E	xpense Certain Proper	ty Under Section 1	79 Note: If you have any li	sted property, c	omplete Part						
1 Maximum amount	, , ,						1,040,000.				
			e instructions)				2,590,000.				
4 Reduction in limitat											
5 Dollar limitation for tax ye	ar. Subtract line 4 from line	1. If zero or less, enter	r -0 If married filing separately, se	e instructions		5					
6	(a) Description of pro	perty	(b) Cost (busi	ness use only)	(c) Elected of	ost					
7 Listed property. En	ter the amount from	line 29	·····	7							
			s in column (c), lines 6 and			8					
			019 Form 4562								
			s income (not less than ze								
			t don't enter more than lin								
			and 10, less line 12			12					
13 Carryover of disallo Note: Don't use Part II				🕨 13							
		,		la listad property	()						
op colui 2	-		Depreciation (Don't includ		-						
	-		her than listed property) p		-						
15 Property subject to	section 168(f)(1) ele	ction				15	101 601				
16 Other depreciation						16	121,601.				
Part III MACRS D	epreciation (Don't	include listed pro	operty. See instructions.)								
			Section A								
17 MACRS deduction	s for assets placed ir	n service in tax ye	ears beginning before 202			<u>.</u> 17	69,912.				
18 If you are electing to grou	o any assets placed in serv	ice during the tax year	into one or more general asset ac	counts, check here	> L						
	Section B - Assets	Placed in Servic	e During 2020 Tax Year	Using the Gene	eral Deprecia	tion Syste	em				
(a) Classificatio	n of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction				
19a 3-year property											
b 5-year property											
c 7-year property											
d 10-year proper											
e 15-year proper											
f 20-year proper	•										
				25 yrs.		S/L					
g 25-year proper	.y	1			N 4 N 4	S/L S/L					
h Residential ren	tal property	/		27.5 yrs.	MM						
	-	/		27.5 yrs.	MM	S/L					
i Nonresidential	real property	/		39 yrs.	MM	S/L					
	,	/			MM	S/L					
S	ection C - Assets P	laced in Service	During 2020 Tax Year U	Ising the Altern	ative Depred	iation Sys	stem				
20a Class life						S/L					
b 12-year				12 yrs.		S/L					
c 30-year		/		30 yrs.	MM	S/L					
d 40-year		/		40 yrs.	MM	S/L					
Part IV Summary	(See instructions.)										
21 Listed property. En		28				21					
			nes 19 and 20 in column (
Enter here and on t	he appropriate lines	of your return. P	artnerships and S corpora			22	191,513.				
	-	-	e current year, enter the	23							

_			MAL CAR	EAN	ID CC	NTRO	OL OF	NE	W YOR	K CI	ГҮ	1 2	2700	000	_
_	m 4562 (2020)			ortain at	horvobi		tain aira	oft or	nd proport	vuood fo	~	13-	-3788	980	Page 2
Pa	Listed Proper entertainment				ner venic	cies, cer	tain airci	rant, ar	ia propert	y used to	pr				
	Note: For any									se expens	se, com	plete o i	nly 24a,		
	24b, columns		/							mito for r		or outo	mahilaa		
			on and Other					_			-				
24a	Do you have evidence to		1 / 2 3		ainieur		<u>′es </u>		24b If "Y					∐ Yes L	<u>No</u>
	(a) Type of property	(b) Date	(c) Business/		(d) Cost or	Bas	(e) sis for depre	eciation	(f) Recovery		g) hod/		(h) eciation		(i) cted
	(list vehicles first)	placed in service	investment use percenta		ther basis	(bu	isiness/inve use only		period		ention		luction		on 179
	<u> </u>			-		<u> </u>		,		<u> </u>				C	ost
	Special depreciation all														
	used more than 50% in					<u></u>					25				
26	Property used more that	in 50% in a c	i			<u> </u>			I	I		i			
		1 1 1		%											
		: :		%											
				%											
27	Property used 50% or I	ess in a qual													
		: :		%						S/L -					
		: :		%						S/L -					
		: :		%						S/L -					
	Add amounts in columr														
29	Add amounts in columr	n (i), line 26. E											29		
							on Use								
Con	nplete this section for ve	ehicles used	by a sole prop	prietor, p	oartner, c	or other	"more th	an 5%	owner,"	or related	l persor	ı. If you	provideo	l vehicle	S
to y	our employees, first ans	wer the que	stions in Secti	on C to	see if yo	u meet	an excep	otion to	o completi	ng this s	ection f	or those	e vehicles	6.	
				((a)	((b)		(c)	(c	I)		(e)	(†	F)
	Total business/investment		0	Ve	hicle	Ve	hicle	\ ا	/ehicle	Veh	icle	Ve	hicle	Veh	icle
	year (don't include commu														
	Total commuting miles														
32	Total other personal (no	oncommuting) miles												
	driven														
33	Total miles driven durin	g the year.													
	Add lines 30 through 32	<u>2</u>													
34	Was the vehicle availab	le for person	ial use	Yes	No	Yes	No	Yes	s No	Yes	No	Yes	No	Yes	No
	during off-duty hours?														
35	Was the vehicle used p	rimarily by a	more												
	than 5% owner or relat	ed person?													
36	Is another vehicle availa	able for perso	onal												
	use?														
		Section C	- Questions	for Emp	loyers V	Vho Pro	vide Veł	nicles	for Use b	y Their E	mploye	es			
Ans	wer these questions to	determine if	you meet an e	xceptio	n to com	pleting	Section	B for v	vehicles us	ed by en	nployee	s who a	aren't		
mor	e than 5% owners or re	lated person	S.											_	_
37	Do you maintain a writte	en policy sta	tement that pr	ohibits a	all perso	nal use	of vehicl	es, inc	luding cor	nmuting,	by you	r		Yes	No
	employees?														
	Do you maintain a writte														
	employees? See the ins	structions for	vehicles used	d by cor	porate of	fficers, o	directors	, or 1%	6 or more	owners					
39	Do you treat all use of v	ehicles by er	mployees as p	ersonal	use?										
	Do you provide more th														
	the use of the vehicles,	and retain th	ne information	receive	d?										
	Do you meet the require														
	Note: If your answer to														
	art VI Amortization														
-	(a) Description of	4 t		(b)		(c)	h la		(d)		(e)			(f)	
	Description of	or costs	Date	amortization begins		Amortiza amoun			Code section	, I	Amortiza eriod or per		Ar fo	nortization r this year	
42	Amortization of costs th	nat begins du	ring your 202	-	ar:							-9-1			
		U		: :											
				: :	1										
43	Amortization of costs th	nat began be	fore your 2020	· ·	ar					I		43			
	Total. Add amounts in											44			



ANIMAL CARE AND CONTROL OF NEW YORK CITY, INC.

DBA ANIMAL CARE CENTERS OF NYC AND AFFILIATE

CONSOLIDATED FINANCIAL STATEMENTS YEARS ENDED JUNE 30, 2021 AND 2020

ANIMAL CARE AND CONTROL OF NEW YORK CITY, INC. DBA ANIMAL CARE CENTERS OF NYC AND AFFILIATE

CONSOLIDATED FINANCIAL STATEMENTS YEARS ENDED JUNE 30, 2021 AND 2020

CONTENTS

INDEPENDENT AUDITOR'S REPORT		
	1	

FINANCIAL STATEMENTS:

CONSOLIDATED STATEMENTS OF FINAN	CIAL POSITION 2
CONSOLIDATED STATEMENT OF ACTIVIT	ΓIES 3
CONSOLIDATED STATEMENT OF FUNCTION	ONAL EXPENSES 4
CONSOLIDATED STATEMENTS OF CASH I	FLOWS 5
NOTES TO CONSOLIDATED FINANCIAL S	TATEMENTS 6-20
SUPPLEMENTARY SCHEDULES:	
INDEPENDENT AUDITOR'S REPORT ON SU	UPPLEMENTARY INFORMATION21
SCHEDULE I: CONSOLIDATING STATEM AT JUNE 30, 2021	IENT OF FINANCIAL POSITION
SCHEDULE II: CONSOLIDATING STATEM FOR THE YEAR ENDED JUI	IENT OF ACTIVITIES NE 30, 202123
SCHEDULE III: CONSOLIDATING STATEM AT JUNE 30, 2020	IENT OF FINANCIAL POSITION
SCHEDULE IV: CONSOLIDATING STATEM FOR THE YEAR ENDED JU	IENT OF ACTIVITIES NE 30, 202025



12 West 32nd Street, 10th Floor New York, NY 10001 (212) 563-2525 Fax: 212 563-3549 www.randmcpa.com

INDEPENDENT AUDITOR'S REPORT

Board of Directors Animal Care and Control of New York City, Inc. DBA Animal Care Centers of NYC and Affiliate New York, New York

We have audited the accompanying consolidated financial statements of Animal Care and Control of New York City, Inc., DBA Animal Care Centers of NYC (a nonprofit organization) and Affiliate, which comprises the consolidated statements of financial position as of June 30, 2021, and the related consolidated statements of activities, functional expenses and cash flows for the year then ended, and the related notes to the consolidated financial statements.

Management's Responsibility for the Consolidated Financial Statements

Management is responsible for the preparation and fair presentation of these consolidated financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of consolidated financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these consolidated financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the consolidated financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the consolidated financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the consolidated financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the consolidated financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the consolidated financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the consolidated financial position of Animal Care and Control of New York City, Inc., DBA Animal Care Centers of NYC and affiliate as of June 30, 2021, and the changes in its consolidated net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Report on Summarized Comparative Information

We have previously audited the Animal Care and Control of New York City, Inc.'s, DBA Animal Care Centers of NYC and affiliate June 30, 2020 financial statements, and we expressed an unmodified audit opinion on those audited financial statements in our report dated June 9, 2020. In our opinion, the summarized comparative information presented herein as of and for the year ended June 30, 2020 is consistent, in all material respects, with the audited financial statements from which it has been derived.

Rosenberg + Manente PLLC

Rosenberg and Manente, PLLC Certified Public Accountants New York, New York

April 18, 2022

ANIMAL CARE AND CONTROL OF NEW YORK CITY, INC. DBA ANIMAL CARE CENTERS OF NYC AND AFFILIATE CONSOLIDATED STATEMENTS OF FINANCIAL POSITION JUNE 30, 2021 AND 2020

2020
8 \$ 959,5
4 50,593,4
4 176,0
2 3,672,1
8 1,2
- 108,6
4 168,9
8 32,6
8 55,712,6
6 13,596,4
6 13,596,4
8 11,565,6
5 2,927,0
8 79,7
1 14,572,4
5 \$ 83,881,5
61 0:

LIABILITIES, NET ASSETS AND MEMBER'S EQUITY

,	•	
CURRENT LIABILITIES		
Accounts Payable	\$ 111,100	\$ 164,203
Accrued Expenses	3,430,769	1,574,757
Credit Cards Payable	119,272	55,039
Accounts Payable - The City of New York	44,832	44,622
Salaries, Payroll Taxes and Benefits Payable	840,271	625,523
Vacation and Sick Time Accrual	362,411	206,331
Interest Payable	138,438	138,438
Deferred Rent Payable	126,181	56,301
Line of Credit	-	976,014
Customer Deposits Payable	5,680	43,174
Other Liabilities	 -	 245
TOTAL CURRENT LIABILITIES	 5,178,954	 3,884,647
LONG-TERM LIABILITIES		
Mortgage Payable	 75,000,000	 75,000,000
TOTAL LONG-TERM LIABILITIES	 75,000,000	 75,000,000
TOTAL LIABILITIES	 80,178,954	 78,884,647
NET ASSETS AND MEMBER'S EQUITY		
Without Donor Restrictions	4,646,110	3,276,252
With Donor Restrictions	 1,939,041	 1,720,610
TOTAL NET ASSETS AND MEMBER'S EQUITY	 6,585,151	 4,996,862
TOTAL LIABILITIES, NET ASSETS AND MEMBER'S EQUITY	\$ 86,764,105	\$ 83,881,509
TOTAL LIABILITIES, NET ASSETS AND MEMBER'S EQUITY	\$ 86,764,105	\$ 83,881

ANIMAL CARE AND CONTROL OF NEW YORK CITY, INC. DBA ANIMAL CARE CENTERS OF NYC AND AFFILIATE CONSOLIDATED STATEMENT OF ACTIVITIES FOR THE YEAR ENDED JUNE 30, 2021 (With Comparative Summarized Totals for the Year Ended June 30, 2020)

	JUNE 30, 2021						JUNE 30, 2020		
		OUT DONOR TRICTIONS		TH DONOR FRICTIONS		TOTAL		TOTAL	
REVENUES, GAINS, AND OTHER SUPPORT									
Support from Operations:									
Revenue - The City of New York	\$	15,921,423	\$	-	\$	15,921,423	\$	18,400,953	
Shelter Revenue		429,155		-		429,155		725,865	
Contributions		1,134,095		1,504,259		2,638,354		3,140,786	
In-Kind Contributions		85,025		-		85,025		115,341	
Benefit Plan Contributions		1,433,160		-		1,433,160		1,316,080	
Donated Use of Facilities		1,177,834		-		1,177,834		1,139,105	
Benefits and Special Events		239,790		-		239,790		450,679	
Other Miscellaneous Income		173,491		-		173,491		77,950	
Interest Income		681,849		-		681,849		806,382	
Investment Income/(Loss)		6,326		-		6,326		4,536	
Unrealized Gain/(Loss)		90,424		-		90,424		(6,646)	
Total Revenues, Gains and Other Support Before the Release of Restricted Net Assets		21 272 572		1 504 250		22 976 921		26 171 021	
		21,372,572		1,504,259		22,876,831		26,171,031	
Net Assets Released From Restrictions:									
Satisfaction of Time and Program Restrictions		1,285,828		(1,285,828)				-	
TOTAL REVENUES, GAINS, AND OTHER SUPPORT	. <u> </u>	22,658,400		218,431		22,876,831		26,171,031	
EXPENSES									
Program Services:									
Health and Welfare of Animals		18,303,259		-		18,303,259		20,999,875	
Total Program Service Expenses		18,303,259				18,303,259		20,999,875	
Supporting Services:									
Management and General		2,681,296		-		2,681,296		2,540,377	
Fundraising		303,987		-		303,987		530,011	
Total Supporting Services		2,985,283		-		2,985,283		3,070,388	
TOTAL EXPENSES		21,288,542		-		21,288,542		24,070,263	
CHANGE IN NET ASSETS		1,369,858		218,431		1,588,289		2,100,768	
NET ASSETS AND MEMBERS' EQUITY,									
BEGINNING OF YEAR		3,094,268		1,720,610		4,814,878		2,753,337	
Prior Year Net Asset Adjustment		181,984				181,984		142,757	
ADJUSTED NET ASSETS AND MEMBER'S EQUITY,									
BEGINNING OF YEAR		3,276,252		1,720,610		4,996,862	_	2,896,094	
NET ASSETS AND MEMBER'S EQUITY, END OF YEAR	\$	4,646,110	\$	1,939,041	\$	6,585,151	\$	4,996,862	
		, , -		, ,	<u> </u>	, , -		, , -	

ANIMAL CARE AND CONTROL OF NEW YORK CITY, INC. DBA ANIMAL CARE CENTERS OF NYC AND AFFILIATE CONSOLIDATED STATEMENT OF FUNCTIONAL EXPENSES FOR THE YEAR ENDED JUNE 30, 2021 (With Comparative Summarized Totals for the Year Ended June 30, 2020)

		JUNE	30, 2021		JUNE 30, 2020
	Health and Welfare of Animals	Management and General	Fundraising	Total	Total
Salaries	\$ 9,825,843	\$ 1,316,652	\$ 155,615	\$ 11,298,110	\$ 12,749,444
Payroll Taxes and Fringe Benefits	3,513,963	470,867	55,652	4,040,482	4,118,291
Total Personnel Service Expenses	13,339,806	1,787,519	211,267	15,338,592	16,867,735
Vehicle Expenses	139,974	5,588	-	145,562	299,311
Communications	17,202	3,264	44,929	65,395	158,503
Depreciation	166,556	22,318	2,638	191,512	167,528
Facility Expenses	172,119	23,064	2,726	197,909	317,355
Human Resource	38,690	5,184	612	44,486	54,058
Insurance	478,489	66,480	9,028	553,997	516,256
Interest and Bank Charges	-	48,706	-	48,706	94,599
Supplies and Services, Medical	1,407,161	-	-	1,407,161	1,725,969
Occupancy	1,686,791	28,665	3,388	1,718,844	1,772,761
Other Expenses	9,493	7,209	1,160	17,862	66,339
Professional Fees	26,021	618,823	-	644,844	514,720
Special Events	-	-	23,350	23,350	115,129
Supplies and Services, Operations	302,116	26,473	40	328,629	636,594
Telecommunications	134,944	10,025	1,542	146,511	157,783
Technology and Equipment	208,794	27,978	3,307	240,079	348,518
First Alert Stipends	175,103	-	-	175,103	184,838
Discount and Subsidized	-	-	-	-	69,269
Bad Debt					2,998
Total Expenses	\$ 18,303,259	\$ 2,681,296	\$ 303,987	\$ 21,288,542	\$ 24,070,263

CASH ELOWS EDOM ODED ATING ACTIVITIES		2021	2020		
CASH FLOWS FROM OPERATING ACTIVITIES Changes in Net Assets	\$	1,588,289	\$	2,100,768	
Adjustments to Reconcile Changes in Net Assets to Net Cash Provided by Operating Activities	Ŷ	1,000,207	Ŷ	_,,	
Depreciation and Amortization		191,512		167,528	
Decrease (Increase) in: Accounts Receivable - The City of New York Unconditional Promises to Give Grant Receivables Prepaid Expenses Other Accounts Receivables Deposits on Leased and Other Property		204,505 (4,133) 108,639 (62,795) (37,866) 1,017		(1,489,435) 4,149 78,259 78,045 (29,955) (160)	
Increase (Decrease) in: Accounts Payable Accrued Expenses Credit Cards Payable Accounts Payable - The City of New York Salaries, Payroll Taxes and Benefits Payable Vacation and Sick Time Accrual Interest Payable Deferred Rent Payable Customer Deposits Payable Other Liabilities		(53,103) 1,856,012 64,233 210 214,748 156,080 - - 69,880 (37,494) (245)		(260,963) 1,049,833 - 886 19,510 (46,155) 49,123 (2,235) 35,900 (2,280)	
NET CASH PROVIDED BY OPERATING ACTIVITIES		4,259,489		1,752,818	
CASH FLOWS FROM INVESTING ACTIVITIES Purchase of Fixed Assets Construction in Progress Loan Acquisition Costs, Net		(28,446) (11,607,085) -		(8,425,032) (17,638)	
NET CASH USED IN INVESTING ACTIVITIES		(11,635,531)		(8,442,670)	
CASH FLOWS FROM FINANCING ACTIVITIES (Gain)/Loss on Investments (Payments)/Advances from Line of Credit		(91,805) (976,014)		(27,417) 402,613	
NET CASH (USED IN) PROVIDED BY FINANCING ACTIVITIES		(1,067,819)		375,196	
NET DECREASE IN CASH, CASH EQUIVALENTS AND RESTRICTED CASH		(8,443,861)		(6,314,656)	
CASH, CASH EQUIVALENTS AND RESTRICTED CASH, BEGINNING OF YEAR		51,552,933		57,867,589	
CASH, CASH EQUIVALENTS AND RESTRICTED CASH, END OF YEAR	\$	43,109,072	\$	51,552,933	
SUPPLEMENTAL DISCLOSURE:					
Interest Paid Taxes Paid	\$ \$	6,589,625	\$ \$	3,267,125	

See Accompanying Notes to Consolidated Financial Statements

NOTE 1 - NATURE AND PURPOSE OF ORGANIZATION

Founded in 1995, Animal Care and Control of New York City, Inc., DBA Animal Care Centers of NYC ("ACC"), is a non-profit organization with a mission to end animal homelessness in New York City. ACC is a model of a public/private partnership and receives support from the private sector to complement the services it provides pursuant to its 34 year contract with the NYC Department of Health and Mental Hygiene. Under this contract, ACC provides animal related services to over 9 million residents within the five boroughs of New York City. ACC's services to the community include pet adoption, animal rescue, veterinary care including spay/neuter, lost and found pet assistance and surrender prevention programs. With full-service care centers in Brooklyn, Manhattan and Staten Island ACC provides shelter and care for approximately 25,000 animals every year, and an additional 5,000 animals that are supported throughout the city as part of our community outreach programs. By 2025, ACC will also open two new, state of the art animal care centers in the boroughs of Queens and the Bronx. ACC believes that community engagement and collaboration are the key to solving animal homelessness. Through a network of hundreds of animal rescue partners, volunteers, animal fosters, support from local and national businesses and foundations, and a robust community outreach program (including wellness clinics, humane education, pet food pantries and free vaccine clinics), ACC has become a national leader in animal welfare. ACC is exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code.

Through its contract for services with the city of New York, ACC does not rely on donor contributions as a primary source for staff salaries or other administrative expenses associated with contract services. Under this public/private funding approach, ACC uses donor contributions primarily for programs and services that are not funded by the city contract in an effort to enhance animal care and further ACC's mission to end animal homelessness in NYC.

1906 Flushing LLC ("1906 Flushing") is a limited liability company that owns property in Queens, New York. In 2019, property development for the new Queens Full Service Shelter began at the Queens site and is expected to be completed in 2022. Upon completion and appropriate approvals of the building, ACC will rent the full facility as outlined in the terms of the lease agreement between 1906 Flushing and ACC dated June 21, 2019.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Financial Statement Presentation and Basis of Accounting

ACC's policy is to prepare its consolidated financial statements on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America (GAAP). Under this method, revenues are recognized in the period in which they are earned. Expenses are recognized in the period in which the related liability is incurred. The statements of financial position and of activities focus on the Organization as a whole and report total assets, liabilities, net assets and changes in net assets in accordance with the FASB ASC 958-205, *Financial Statements of Not-for-Profit Organizations*.

Principles of Consolidation

The accompanying consolidated financial statements include the accounts of ACC, and its wholly owned subsidiary, 1906 Flushing. Collectively, the aforementioned are referred to as the "Organization" hereafter. All significant intercompany transactions and balances have been eliminated in consolidation.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Use of Estimates

The preparation of the consolidated financial statements in conformity with U.S. generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures of contingencies at the date of the consolidated financial statements and revenues and expenses recognized during the reporting period. Significant estimates made in the preparation of the consolidated financial statements include the net realizable value of contributions and grants receivable, donated use of facilities, accrued expenses, prepaid expenses and functional expense allocations. Actual results could differ from those estimates.

Financial Instruments

The Organization's financial instruments are cash and cash equivalents, municipal bonds, stock and contributions receivable. The recorded values of cash and cash equivalents and contributions receivable approximate fair values based on their short-term nature.

Reclassifications

It is the Organization's policy to reclassify, where appropriate, prior year financial statements to conform to the current year presentation.

Measure of Operations

The consolidated statements of activities reports all changes in net assets, including changes in net assets from operating and nonoperating activities. Operating activities consist of those items attributable to the Organization's ongoing program services. Nonoperating activities are limited to resources that generate return from investments and other activities considered to be of a more unusual or nonrecurring nature. As of June 30, 2021 and 2020, the Organization did not have nonoperating activities.

Comparative Information

The consolidated financial statements include certain 2020 comparative information. With respect to the consolidated statement of activities, such prior year information is not presented by net asset class and, in the consolidated statement of functional expenses, 2020 expenses by natural classification are presented in total rather than by functional category. Accordingly, such information should be read in conjunction with the Organization's 2020 financial statements from which the summarized information was derived.

Cash and Cash Equivalents

For purposes of the statement of cash flows, the Organization considers all highly liquid investments available for current use with an initial maturity of three months or less and time deposit accounts with no withdrawal restrictions other than loss of end of term interest to be cash equivalents. At June 30, 2021 and 2020, there was \$41,588,194 and \$50,593,401, respectively, in restricted cash for the property development of the new Queens Full Service Shelter.

Medical Supplies, Medications and Products

Medical supplies, medications and products are purchased on an as needed basis and are expensed upon purchase. The dollar value of the supplies on hand at any given time is not material. It is the Organization's decision not to maintain inventory on its Consolidated Statements of Financial Position.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Contributions Receivable

Unconditional promises to give that are expected to be collected within one year are recorded at their net realizable value. Unconditional promises to give that are expected to be collected in future years are recorded at fair value, which is measured as the present value of their future cash flows. The discounts on these amounts are computed using risk-adjusted interest rates applicable to the years in which the promises are received. Amortization of the discounts is included in contribution revenue. Conditional promises to give are not included as support until conditions are substantially met.

Allowance for Doubtful Accounts

Management determines whether an allowance for doubtful accounts should be provided for accounts receivable. Such estimates are based on management's assessment of the aged basis of its sources, current economic conditions, subsequent receipts and historical information. Accounts receivable are written off against the allowance for doubtful accounts when all reasonable collection efforts have been exhausted. At June 30, 2021 and 2020, management has determined no allowance for doubtful accounts to be necessary.

Property and Equipment

It is the Organization's policy to capitalize property and equipment over \$1,000; lesser amounts are expensed. Fixed assets are recorded at cost. Maintenance and repairs are charged to expenses as incurred; major betterments are capitalized. When items or property and equipment are sold or retired, the related cost and accumulated depreciation is removed from the accounts and any gain or loss is included in the results of operations. Management reviews property and equipment for impairment when events or changes in circumstances indicate that the carrying amounts may not be recoverable. Property and equipment are written off to operations when considered impaired.

Depreciation is provided on the straight-line method over the estimated useful lives of the assets. Amortization of leasehold improvements is provided on the straight-line method over the remaining term of the lease or the useful life of the improvements, whichever is shorter.

Leasehold Improvements	39 years
Furniture and Fixtures	7 years
Machinery and Equipment	3 to 7 years
Vehicles	7 years
Software	3 to 5 years
- ·	

Donations of property and equipment are recorded as contributions at their estimated fair value. Such donations are reported as without donor restriction contributions unless the donor has restricted the donated asset to a specific purpose. Assets donated with explicit restrictions regarding their use and contributions of cash that must be used to acquire property and equipment are reported as restricted contributions. Absent of donor stipulations regarding how long those donated assets must be maintained, the Organization reports expirations of donor restrictions when the donated or acquired assets are placed in service as instructed by the donor. The Organization reclasses with donor restricted net assets to without donor restricted net assets at that time.

Certain property and equipment used by the Organization is owned by New York City under a funding agreement. The Organization is responsible for acquiring items needed in order to run the facility; however, title will not pass to the Organization upon termination of the funding agreement. Therefore, most capital items are expensed within the year that the City funds the purchase.

ANIMAL CARE AND CONTROL OF NEW YORK CITY, INC. DBA ANIMAL CARE CENTERS OF NYC AND AFFILIATE

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS FOR THE YEARS ENDED JUNE 30, 2021 AND 2020

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Basis of Presentation

Net assets, revenues, gains and losses are classified on the absence or the existence and nature of donor imposed restrictions as follows:

(1) Net Assets Without Donor Restrictions:

Net assets that are not subject to donor-imposed restrictions and may be expended for any purpose in performing the primary objectives of the Organization. These net assets are available for use at the discretion of the Board of Directors and management. The Board can designate a portion of these net assets for specific purposes, which makes them unavailable for use at management's discretion.

(2) Net Assets With Donor Restrictions:

Net assets subject to stipulations imposed by donors, and grantors. The Organization reports gifts of cash and other assets as revenue with donor restrictions if they are received with donor stipulations that limit the use of the donated assets. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, the net assets are reclassified as net assets without donor restriction and reported in the statements of activities as net assets released from restrictions. Other donor restrictions are perpetual in nature, where by the donor has stipulated the funds be maintained in perpetuity. As of June 30, 2021 and 2020, the Organization did not have any donor-restricted contributions that were perpetual in nature.

Advertising Costs

Advertising costs, including donated advertising, are generally charged to operations in the year incurred. For the years ended June 30, 2021 and 2020, total advertising costs were \$8,011 and \$52,046, respectively. For the years ended June 30, 2021 and 2020, donated advertising was valued at \$0 and \$5,378, respectively. Advertising costs are reflected in communications on the Consolidated Statement of Functional Expenses.

Loan Acquisition Costs

Loan acquisition costs are amortized on a straight-line method over the life of the underlying debt, which will begin when the asset is put in service.

Donated Services

Donated services are recognized as contributions if the services (a) create or enhance non-financial assets or (b) require special skills, and are performed by people with those skills and would otherwise be purchased by the Organization.

A number of volunteers have made a contribution of their time to the Organization to perform a variety of tasks that assist the Organization at the shelter facilities and at fundraising events. The value of this contributed time is not reflected in these consolidated financial statements since it does not meet the criteria for recognition under Financial Accounting Standards Board (FASB) ASC 958. The Organization received approximately 15,000 and 29,000 volunteer hours for the fiscal year ending June 30, 2021 and 2020, respectively.

<u>Rent Expense</u>

The Organization records rent expense associated with its office lease on a straight-line basis over the life of the lease. The difference between the straight-line amount and the amount actually paid during the year is recorded as a liability and an expense in the accompanying consolidated financial statements.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Revenue Recognition

The Organization recognizes revenue from contributions in accordance with Accounting Standards Update ("ASU") 2018-08, Not-For-Profit Entities (Topic 958): Clarifying the Scope and the Accounting Guidance for Contributions Received and Contributions Made. In accordance with ASU 2018-08, the Organization evaluates whether a transfer of assets is (1) an exchange transaction in which a resource provider is receiving commensurate value in return for the resources transferred or (2) a contribution. If the transfer of assets is determined to be an exchange transaction, the Organization records the transactions as allowable costs are incurred in accordance with ASC 958-605. If the transfer of assets is determined to be a contribution evaluates whether the contribution is conditional based upon whether the agreement includes both (1) one or more barriers that must be overcome before the Organization is entitled to the assets transferred and promised and (2) a right of return of assets transferred or a right of release of a promisor's obligation to transfer assets.

The Organization recognizes contributions received and made, including unconditional promises to give, as revenue in the period received or made. Contributions received are reported as either revenues without donor restrictions or revenues with donor restrictions. Contributions with donor restrictions that are used for the purpose specified by the donor in the same year as the contribution is received are recognized as revenues with donor restrictions and are reclassified as net assets released from restrictions in the same year. Promises to give that stipulate conditions to be met before the contributions is made are not recorded until the conditions are met. For the years ended June 30, 2021 and 2020, there were no conditional promises to give.

Functional Allocation of Expenses

Expenses that can be directly identified with the program or supporting service to which they relate are charged accordingly. Other expenses by function have been allocated among program and supporting services classifications based upon benefits received.

The expenses that are allocated include the following:

Expense	Method of Allocation
Salaries, Payroll Taxes and Benefits	Time and Effort
Vehicle Expenses	Direct
Communications	Direct and Head Count
Depreciation and Amortization	Direct
Facility Expenses	Direct and Head Count
Human Resources	Direct and Head Count
Insurance	Direct and Head Count
Interest and Bank Charges	Direct and Head Count
Occupancy	Direct and Head Count
Professional Services	Direct
Supplies and Services, Operations	Direct
Telecommunications	Direct and Head Count
Technology and Equipment	Direct and Head Count

ANIMAL CARE AND CONTROL OF NEW YORK CITY, INC. DBA ANIMAL CARE CENTERS OF NYC AND AFFILIATE NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

FOR THE YEARS ENDED JUNE 30, 2021 AND 2020

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Income Taxes

The Organization is a not-for-profit organization that is exempt from income taxes under Section 501(c)(3) of the Internal Revenue Code and classified by the Internal Revenue Service as other than a private foundation. 1906 Flushing is a single member limited liability company that has elected to be treated as a disregarded entity. As such, 1906 Flushing is not subject to Federal and State income tax, but rather, its income or loss inures to the Organization.

The Organization is subject to routine audits by various federal, state and local taxing authorities; however, there are currently no audits for any tax periods in progress. The Organization believes it is no longer subject to income tax examinations for years prior to 2018.

The consolidated financial statements effect of a tax position taken or expected to be taken are recognized in the consolidated financial statements when it is more likely than not, based on the technical merits, that the position will be sustained upon examination. Interest and penalties, if any, are included in expenses in the Statement of Activities. Management does not believe its consolidated financial statements include any uncertain tax positions.

Pensions and Benefits

The Organization provides a range of benefits to eligible employees, including pensions, 401(k) Savings, and Group Life and Welfare Benefits. The Organization records annual amounts relating to these plans based on calculations, which include various actuarial assumptions such as discount rates, expected rates of return on plan assets, compensation increases, and turnover rates.

NOTE 3 - FAIR VALUE MEASUREMENT

Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC") 820, Fair Value Measurements and Disclosures, establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and lowest priority to measurements involving significant unobservable inputs (Level 3 measurements). The Organization held no financial instruments that were valued using Level 3 measurements as of June 30, 2021 and 2020. The Levels 1 and 2 of fair value hierarchy are as follows:

Level 1 Inputs: Valuation based on quoted prices in active markets for identical assets or liabilities that a reporting entity has the ability to access at the measurement date, and where transactions occur with sufficient frequency and volume to provide pricing information on an ongoing basis.

Level 2 Inputs: Valuation based on inputs other than quoted prices included within Level 1 that are observable for the asset or liability, either directly or indirectly. Inputs include quoted prices for similar assets or liabilities in active markets, quoted prices for identical or similar assets or liabilities in markets that are not active, that is, markets in which there are few transactions, prices are not current, or prices vary substantially over time.

The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

ANIMAL CARE AND CONTROL OF NEW YORK CITY, INC. DBA ANIMAL CARE CENTERS OF NYC AND AFFILIATE

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS FOR THE YEARS ENDED JUNE 30, 2021 AND 2020

NOTE 3 - FAIR VALUE MEASUREMENT (CONTINUED)

The following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodology used at June 30, 2021.

Mutual Funds: Valued at the net asset value ("NAV") of shares held by the Company at year-end.

<u>Common Stock, Exchange-Traded Funds, and U.S. Government Securities</u>: Valued at the closing price reported on the active market on which the individual securities are traded.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Company believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following table sets forth by level, within the fair value hierarchy, the Company's securities at fair value as of June 30, 2021:

					To	otal		
	Level 1		Level 2		Level 3		Investment	
Municipal Bonds	\$		\$	53,281	\$		\$	53,281
Common Stocks	2	14,603						214,603
Total	<u>\$ 2</u>	14,603	\$	53,281	\$		<u>\$</u>	267,884

The following table sets forth by level, within the fair value hierarchy, the Company's securities at fair value as of June 30, 2020:

Total

	L	evel 1	Level 2		Level 3		Investment	
Municipal Bonds	\$		\$	32,859	\$		\$	32,859
Common Stocks		143,220						143,220
Total	<u>\$</u>	143,220	<u>\$</u>	32,859	\$		<u>\$</u>	176,079

The total cost of the securities listed in the above fair value hierarchy is \$171,898. For the period ended June 30, 2021, the Company reported \$90,424 in unrealized gains.

NOTE 4 - DONATIONS IN-KIND

The Organization receives donations in-kind from various individuals and organizations. These donations are comprised predominantly of services and supplies, such as food, blankets, leashes, and toys, used in shelter operations, legal and media. For the years ended June 30, 2021 and 2020, management estimated the value of these items received to be \$85,025 and \$115,341, respectively.

NOTE 5 - CONCENTRATION OF CREDIT RISK

Financial instruments that potentially subject the Organization to concentrations of credit risk consist principally of cash and cash equivalents in financial institutions, which from time to time may exceed the Federal Depository Insurance Coverage limit. In assessing their risk, the Organization's policy is to maintain funds only with reputable financial institutions and management believes the risk of loss is minimal. At June 30, 2021 and 2020, cash and cash equivalents exceeding federally insured limits totaled approximately \$43,110,000 and \$50,343,000, respectively.

NOTE 5 - CONCENTRATION OF CREDIT RISK (CONTINUED)

The Company maintains investment accounts with licensed brokers valued at \$267,884, plus \$12,230 in cash, as of June 30, 2021. The cash and the securities in the account are insured by the Securities Investor Protection Corporation ("SIPC") up to \$250,000 and \$500,000, respectively. The broker also carries excess SIPC insurance that insures the net equity of investor accounts. The coverage covers losses of cash or securities from customer accounts if the broker were to fail and be unable to meet its obligations to its customers. The coverage does not cover any losses from changes in the market value of investments. Although created by Congress, SIPC is not a government agency. It is a non-profit membership corporation, which receives its revenue from those brokers and dealers that are required by law to be SIPC members and from its own investments.

For the years ended June 30, 2021 and 2020, the contract with the City of New York accounted for more than 74% of the Organization revenues.

NOTE 6 - RELATED PARTY

During the years ended June 30, 2021 and 2020, various members of the board of directors pledged donations totaling approximately \$54,900 and \$79,000, respectively.

On July 21, 2019, a lease agreement between ACC and 1906 Flushing was executed for what will be the new Queens Full Service Shelter. The commencement date is anticipated to be July 15, 2022, which is the projected project completion date. The lease is due to expire no earlier than July 1, 2052. Under the lease agreement, the lease payments are tied directly to the monthly loan amortization payments of \$376,901 a month (See Note 13 – Property Loans). Any differences from the lease agreement payments and the lease's fair market value will be adjusted accordingly. Lease payments will be paid directly by the City, in accordance with their agreement with ACC (See Note 11 – New York City Funding). In addition, for years ended June 30, 2021 and 2020, ACC made investments of approximately \$805,000 in 1906 Flushing. The balance was eliminated during consolidation.

NOTE 7 - COMMITMENTS AND CONTINGENCIES

The contract with the City of New York is subject to audit by the City (See Note 11).

Certain grants and contracts may be subject to audit by funding sources. Such audits may result in disallowance of costs submitted for reimbursement. Management is of the opinion that such cost disallowances, if any, will not have a material effect on the accompanying consolidated financial statements. Accordingly, no amounts have been provided in the accompanying consolidated financial financial statements for such potential claims.

The COVID-19 pandemic, whose effects first became known in January 2020, is having a broad and negative impact on commerce and financial markets around the world. The United States and global markets experienced significant declines in value resulting from uncertainty caused by the pandemic. The Organization is closely monitoring its business operations and is working to minimize the impact on its operations. The extent of the impact of COVID-19 on the Organization's operational and financial performance will depend on certain developments, including the duration and spread of the outbreak and its impacts on the Organization's donors, employees, and vendors, all of which at present, cannot be determined. Accordingly, the extent to which COVID-19 may

ANIMAL CARE AND CONTROL OF NEW YORK CITY, INC. DBA ANIMAL CARE CENTERS OF NYC AND AFFILIATE NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

FOR THE YEARS ENDED JUNE 30, 2021 AND 2020

NOTE 7 - COMMITMENTS AND CONTINGENCIES (CONTINUED)

impact the Organization's financial position and results of its operations and cash flows is uncertain and the accompanying financial statements include no adjustments relating to the effects of this pandemic.

The Organization may be involved in legal actions arising in the ordinary course of its business. It is the opinion of management that such actions will be resolved without material effect on the Organization's financial position.

NOTE 8 - BAD DEBT

At June 30, 2021 and 2020, there was \$0 and \$2,998 bad debt expense, respectively.

NOTE 9 - PROPERTY AND EQUIPMENT, NET

Property and equipment at June 30th by major classification is summarized as follows:

	2021	2020
Land	\$ 13,026,750	\$ 13,026,750
Leasehold Improvements	382,554	382,554
Furniture and Fixtures	112,034	112,034
Machinery and Equipment	740,717	735,292
Vehicles	363,597	340,577
Software	78,327	78,327
	14,703,979	14,675,534
Accumulated Depreciation and Amortization	1,270,643	1,079,132
Property and Equipment, Net	<u>\$ 13,433,336</u>	<u>\$ 13,596,402</u>

Depreciation and amortization expense for the years ended June 30, 2021 and 2020 was \$191,512 and \$167,528, respectively.

The cost of certain equipment and facilities, which are used by the Organization in connection with its Shelter Operations, are not reflected in the consolidated statements of financial position because the assets' titles remain with the City of New York.

Land, included in the above schedule, is the site for the new Queens Full Service Shelter. The costs incurred in association with constructing the new Queens Full Service Shelter are included in the consolidated statements of financial position as a non-current asset, Construction in Progress. Upon completion of the facility, and when the facility is operational and in service, these costs will be reclassified to the appropriate asset class. As of June 30, 2021 and 2020, construction in progress totaled approximately \$23,173,000 and \$11,566,000, respectively.

NOTE 10 - LINE OF CREDIT

Pursuant to an agreement with their Financial Institution, the Organization may borrow up to \$3,000,000 under a renewable line of credit. The interest on such borrowings is payable monthly at an annual rate equal to the LIBOR rate plus 3.00%. The line is secured by substantially all of the Organization's assets. As of June 30, 2021 and 2020, the Organization had drawn down on its available line of credit approximately \$0 and \$976,000, respectively. This credit facility is due to mature in September 2022.

NOTE 11 - NEW YORK CITY FUNDING

The Organization has a cost reimbursement contract with the City of New York (the "City"), which runs through June 30, 2052, which engages the Organization to assist the City in carrying out its animal and care control responsibilities. The total maximum amount for all payments shall not exceed \$1,487,966,471 for the entire term of the agreement. Under the agreement, the Organization has a license to use and occupy three City owned buildings as animal care facilities: Manhattan Animal Care Facility, Brooklyn Animal Care Facility and Staten Island Animal Care Facility and two receiving centers: Queens Animal Receiving Facility and the Bronx Animal Receiving Center.

In addition, the City provided funds to allow the Organization to acquire land, build, develop and operate a new full service Queens Animal Care Center, financed and equipped as provided for under the agreement (See Note 13 - Property Loans). The City can terminate the contract with or without cause with no less than ten days from the date of notice personally delivered or fifteen days from the date of the notice via mail. Upon the opening of the new Queens Animal Care Center, the Organization will cease to utilize the Queens Animal Resource Center that is currently provided by the City of New York.

For the years ended June 30, 2021 and 2020, the value of the donated use of facilities by the City on behalf of the Organization has been included in the Consolidated Statement of Activities in Donated Use of Facilities in the amounts of approximately \$1,178,000 and \$1,139,000, respectively. To the extent funding is provided for in the agreement, the Organization is responsible for general repairs, insurance and maintenance of the premises.

Effective July 1, 2006, the City assumed responsibility for the payment of the Organization's utilities, for locations owned or leased by the City. Accordingly, for the years ended June 30, 2021 and 2020 the value of the utilities paid by the City on behalf of the Organization has been included in the accompanying consolidated financial statements in both Revenue from the City of New York and Occupancy Expense in the amounts of approximately \$277,000 and \$270,000, respectively.

At June 30, 2021 and 2020, the Organization was due from the City approximately \$3,468,000 and \$3,672,000, respectively. For the years ended June 30, 2021 and 2020, benefit plan contributions and expenses made on behalf of the Organization totaled approximately \$1,433,000 and \$1,316,000, respectively. In addition to the above, for the years ended June 30, 2021 and 2020, revenue recognized under the City contract was approximately \$15,921,000 and \$18,401,000, respectively. At June 30, 2021 and 2020, the Organization owes the City under the current contract approximately \$45,000 in interest for both years.

NOTE 12 - LEASE COMMITMENTS AND RENTAL EXPENSE

On November 1, 2020, the Organization re-negotiated their office space lease in Manhattan. The term of the lease was extended through August 31, 2023.

Minimum future rental payments under this lease are as follows:

Year ending June 30,

2022	\$	263,026
2023		314,670
2024		52,686
	<u>\$</u>	630,382

Rent included in occupancy expense for years ended June 30, 2021 and 2020 was \$234,773 and \$275,389, respectively.

ANIMAL CARE AND CONTROL OF NEW YORK CITY, INC. DBA ANIMAL CARE CENTERS OF NYC AND AFFILIATE

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS FOR THE YEARS ENDED JUNE 30, 2021 AND 2020

NOTE 13 - PROPERTY LOANS

On June 21, 2019, 1906 Flushing acquired property located in Queens, New York, which is being developed for the new Queens Full Service Shelter (the "Project"). On that same date, the following notes were executed:

Lender	Loan <u>Amount</u>	Interest Payments	Interest Rate
Acquisition Loan	\$ 12,233,503	\$ 45,162	4.43%
Building Loan	33,882,687	125,084	4.43%
Project Loan	28,883,810	106,629	4.43%
Total Property Loans	<u>\$ 75,000,000</u>	<u>\$ 276,875</u>	

Interest on all three loans are due monthly at a rate 4.43% until the completion of the project, which is anticipated to be July 15, 2022. At such time, the amortization start date, principal and interest of \$376,901 will be payable monthly. The interest rate of 4.43% is in effect throughout the life of the loan, and all three property loans mature July 15, 2052. The loans are secured by, among other things, (i) a Mortgage, Security Agreement, Assignment of Leases and Rents and Fixture Filing from Company for the benefit of Purchaser, creating a valid and perfected first mortgage lien on the Mortgaged Property, including, without limitation, the buildings, structures and improvements now or hereafter located thereon, and assigning Company's right, title and interest in and to the Lease therein described, (ii) an Assignment of Leases and Rents dated as of the date hereof from Company to Purchaser assigning Company's right, title and interest in and to the Lease and any other leases and rents, (iii) a lien on all funds held pursuant to the Cash Management Agreement and the Construction

Escrow Agreement, (iv) the Collateral Assignment of Contracts, and (v) the Surety Bond.

Aggregate maturities of long-term debt are summarized as follows:

June 30, 2023	\$ 1,224,985
June 30, 2024	1,280,367
June 30, 2025	1,338,253
June 30, 2026	1,398,757
June 30, 2027	1,461,995
June 30, 2028 and Thereafter	68,295,643
Total Long-Term Debt	<u>\$ 75,000,000</u>

As of June 30, 2021 and 2020, interest of \$6,728,063 and \$3,405,563 was capitalized to construction in progress.

NOTE 14 - EMPLOYEE BENEFIT PLANS

All eligible employees of the Organization are members of the Cultural Institutions Retirement System's (CIRS) Pension, Savings Plan and Group Life and Welfare Benefits plans. The CIRS Pension Plan is a multiemployer defined benefit plan. Pension and Group Life and Welfare Benefit contributions are funded by the City of New York in accordance with their contract with the Organization. The employer match to the Savings Plan, in accordance with the Collective Bargaining Agreement, remains suspended.

The risk of participating in these multiemployer plans is different from single-employer plans in the following aspects:

NOTE 14 - EMPLOYEE BENEFIT PLANS (CONTINUED)

- a) Assets contributed to the multiemployer plan by one employer may be used to provide benefits to employees of other participating employers.
- b) If a participating employer stops contributing to the plan, the unfunded obligations of the plan may be borne by the remaining participating employers.
- c) If the Organization chooses to stop participating in some of its multiemployer plans, the Organization may be required to pay those plans an amount based on the underfunded status of the plan, referred to as a withdrawal liability.

The Organization's participation in this plan for the fiscal year ended June 30, 2021 and 2020 is outlined in the table below. The "EIN/Pension Plan number" column provides the Employer Identification Number (EIN) and the three-digit plan number, if applicable. The zone status is based on information that the Company received from the plan and is certified by the plan's actuary. Among other factors, plans in the red zone are generally less than 65 percent funded, plans in the yellow zone are less than 80 percent funded. A plan is in the green zone if it has a current funded percentage greater than 80 percent. Unless otherwise noted, the most recent PPA zone status available in 2021 and 2020 is for the plan's year-end at June 30, 2020 and 2019, respectively. The "FIP/RP Status Pending/Implemented" column indicates plans for which a financial improvement plan (FIP) or a rehabilitation plan (RP) is either pending or has been implemented. The last column lists the expiration dates(s) of the collective bargaining agreements(s) to which the plans are subject. The period-to-period comparability fluctuates based upon the Organization's growth. The Company was not identified in its plan's 2020 Forms 5500 as providing more than 5% of total plan contributions.

The Organization currently has no intention of withdrawing from the multiemployer pension plan in

		Pension Pr Act Zone				tributions Company			Expiration Date of Collective-
Pension	EIN/Pension			FIP/RP				Surcharge	Bargaining
Fund	Plan Number	2019	2018	Status	2021	2020	2019	Imposed	Agreement
(1) CIRS	11-2001170	Green	Green	NA	\$1.25m	\$1.14k	\$904k	No	NA*
	which is particip	pates.							

(1) Cultural Institutions Retirement System

The Collective Bargaining Agreement is currently on extension.

Group Life and Welfare Benefits plans and administrative fees for the years ended June 30, 2021 and 2020 were as follows:

	 2021	 2020
Group Life and Welfare Benefits	\$ 24,787	\$ 25,625
Administration Fees	 157,738	 152,723
	\$ 182,525	\$ 178,348

For the years ending June 30, 2021 and 2020, the Organization made no contributions to the 401(k) Savings Plan.

ANIMAL CARE AND CONTROL OF NEW YORK CITY, INC. DBA ANIMAL CARE CENTERS OF NYC AND AFFILIATE

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS FOR THE YEARS ENDED JUNE 30, 2021 AND 2020

NOTE 15 - NET ASSETS WITHOUT DONOR RESTRICTIONS

The Organization's net assets without donor restrictions is comprised of undesignated and board designated amounts for the following purposes for the years ending June 30, 2021 and 2020.

	2021	2020
Undesignated	<u>\$ 4,646,110</u>	<u>\$ 3,276,252</u>

For the years ending June 30, 2021 and 2020, the undesignated amounts above include \$1,387,976 and \$717,996 in member equity from 1906 Flushing Avenue LLC, respectively.

NOTE 16 - NET ASSETS WITH DONOR RESTRICTIONS

Net assets with donor restrictions are restricted for the following as of June 30, 2021:

Restriction Type	Beginning of Fiscal Year	Co	ontributions	Rele	ased	F	End of iscal Year
Time Restricted: Within a One Year Time Period	\$	\$		(\$)	\$	
Purpose Restricted: Program Services	1,720,610		1,504,259	(<u>35,828)</u>		1,939,041
Total	<u>\$ 1,720,610</u>	<u>\$</u>	1,504,259	<u>(\$ 1,28</u>	85,828)	\$	1,939,041

Net assets with donor restrictions are restricted for the following as of June 30, 2020:

Restriction Type	eginning of iscal Year	Co	<u>ntributions</u>	Rele	eased	F	End of iscal Year
Time Restricted: Within a One Year Time Period	\$ 	\$		(\$)	\$	
Purpose Restricted: Program Services	 986,830		2,346,882	(13,102)		1,720,610
Total	\$ 986,830	\$	2,346,882	<u>(\$ 1,6</u>	13,102)	\$	1,720,610

Purpose restrictions are expected to be released from restrictions within one year.

NOTE 17 - RECEIVABLES

Receivables consist of grants and contributions from the government, foundations, institutions, corporations and individuals. For the years ended June 30, 2021 and 2020, receivables consisted of the following:

	2021	2020
Amount Due In:		
Less Than One Year	<u>\$ 3,543,538</u>	<u>\$ 3,814,683</u>

NOTE 18 - CREDIT ACCOUNTS

As of June 30, 2021 and 2020, the Organization had drawn down \$119,272 and \$55,039 on various open unsecured credit accounts.

ANIMAL CARE AND CONTROL OF NEW YORK CITY, INC. DBA ANIMAL CARE CENTERS OF NYC AND AFFILIATE

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS FOR THE YEARS ENDED JUNE 30, 2021 AND 2020

NOTE 19 - LIQUIDITY AND AVAILABILITY OF RESOURCES

The Organization's financial assets available within one year of the consolidated statements of financial position date for general expenditure for the years ending June 30, 2021 and 2020 are as follows:

	2021	2020
Cash and Cash Equivalents	\$ 1,520,878	\$ 959,532
Marketable Securities	267,884	176,079
Receivables	3,543,538	3,814,683
Total Financial Assets Available	5,332,300	4,950,294
Less:		
Amounts Unavailable for General Expenditures Within		
One Year, at Net Present Value, Due To:		
Restricted by Donors with Purpose Restrictions	1,939,041	1,720,610
Restricted by Donors with Timing Restrictions		
Total Amounts Unavailable for General Expenditures		
Within One Year	1,939,041	1,720,610
Total Financial Assets Available to Management for		
General Expenditure Within One Year	<u>\$ 3,393,259</u>	<u>\$ 3,229,684</u>

The Organization's goal is generally to maintain financial assets to meet four to six months of supporting service expenses (approximately \$1.5 million) and one to two months of total expenses (approximately \$4 million). As part of its liquidity plan, the Organization has a line of credit for \$3,000,000 and has the ability to scale-back and reduce non-essential support services.

NOTE 20 - NET ASSETS ADJUSTMENT

The Organization has restated its previously issued financial statements for June 30, 2020. Based on information developed as a result of the current period's inquiry into the accounting for certain accounts, management has determined that a restatement of the June 30, 2020 financial statements is appropriate to correct accounting errors in the prior years. The changes were a result of (1) incorrect recognition of contributions revenue from donors and (2) incorrect recognition of investments and related activity.

June 30, 2020	As	Previously Stated	 As Restated	Wit Re	Effect on thout Donor estrictions <u>Net Assets</u>	W R	Effect on 'ith Donor estrictions let Assets
Cash Marketable Securities	\$	953,627	\$ 959,532 176,079	\$	5,905 176,079		
Net Adjustment from Restatement Net Assets, as Previously Stated					181,984 3,094,268		 1,720,610
Net Assets, as Restated				<u>\$</u>	<u>3,276,252</u>	<u>\$</u>	<u>1,720,610</u>

The opening balance net asset adjustment prior to June 30, 2020 totaled \$142,757.

NOTE 21 - SUBSEQUENT EVENTS

Management has evaluated subsequent events through April 18, 2022, which is the date the consolidated financial statements were available to be issued and determined no adjustments to the financial statements or additional disclosures are necessary.

ANIMAL CARE AND CONTROL OF NEW YORK CITY, INC. DBA ANIMAL CARE CENTERS OF NYC AND AFFILIATE

SUPPLEMENARTY SCHEDULES YEARS ENDED JUNE 30, 2021AND 2020



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INDEPENDENT AUDITOR'S REPORT ON SUPPLEMENTARY INFORMATION

Animal Care and Control of New York City, Inc. DBA Animal Care Centers of NYC New York, New York

We have audited the consolidated financial statements of Animal Care and Control of New York City, Inc., DBA Animal Care Centers of NYC and Affiliate, (the "Organization") as of and for the year ended June 30, 2021, and have issued our report thereon dated April 18, 2022 which expressed an unmodified opinion on those consolidated financial statements. Our audit was performed for the purpose of forming an opinion on the consolidated financial statements as a whole. The consolidating statement of financial position and consolidating statement of activities are presented for the purposes of additional analysis and are not a required part of the consolidated financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the consolidated financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the consolidated financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the consolidated financial statements or to the consolidated financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the consolidated financial statements as a whole.

Kosenberg + Manente PLLC

Rosenberg and Manente, PLLC Certified Public Accountants New York, NY

April 18, 2022

ANIMAL CARE AND CONTROL OF NEW YORK CITY, INC. DBA ANIMAL CARE CENTERS OF NYC SCHEDULE I: CONSOLIDATING STATEMENT OF FINANCIAL POSITION AT JUNE 30, 2021

Restricted - Cash and Cash Equivalents - 41,588,194 - 41,588 Marketable Securities 267,884 - - 267 Accounts Receivable - The City of New York 3,467,642 - - 3,467 Unconditional Promises to Give 5,378 - - 231 Prepaid Expenses 231,714 - - 231 Other Accounts Receivable 76,904 1,476 (7,862) 77 TOTAL CURRENT ASSETS 5,569,547 41,590,523 (7,862) 47,155 Property and Equipment, Net 406,586 13,026,750 - 13,433 OTHER ASSETS 406,586 13,026,750 - 13,433 OTHER ASSETS 20,172,758 - 2,927 Low Acquisition Costs, Net - 2,927,045 - 2,927 Investment in Subsidiary 805,251 - (805,251) 26,099,803 (805,251) 26,177 TOTAL OTHER ASSETS \$ 6,860,142 \$ 80,717,076 \$ (813,113) \$ 86,764 LiAbelLITIES \$ 5,680,142 \$ 80,717,076 \$ (813,113) \$ 86,76	520,878 588,194 267,884 467,642 5,378 231,714 70,518 152,208 433,336
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Cash and Cash Equivalents \$ 1,520,025 \$ 853 \$ - \$ 1,520,025 Restricted - Cash and Cash Equivalents - 41,588,194 - 41,588,194 Marketable Securities 267,884 - - 266 Accounts Receivable - The City of New York 3,467,642 - - 236 Prepaid Expenses 231,714 - - 231 Other Accounts Receivable 76,904 1,476 (7,862) 77 TOTAL CURRENT ASSETS 5,569,547 41,590,523 (7,862) 47,155 FIXED ASSETS 5,569,547 41,590,523 (7,862) 47,155 Property and Equipment, Net 406,586 13,026,750 - 13,433 OTHER ASSETS 406,586 13,026,750 - 13,433 OTHER ASSETS 23,172,758 - 29,927 14,435 - 29,927 Investment in Subsidiary 805,251 - (805,251) 26,079,803 (805,251) 26,177 TOTAL ASSETS \$ 84,009 26,099,803 (805,251) 26,177 - 77 TOTAL ASSETS <td>588,194 267,884 467,642 5,378 231,714 70,518 152,208</td>	588,194 267,884 467,642 5,378 231,714 70,518 152,208
Restricted - Cash and Cash Equivalents - 41,588,194 - 41,588 Marketable Securities 267,884 - - 267 Accounts Receivable - The City of New York 3,467,642 - - 3,467 Unconditional Promises to Give 5,378 - - 231 Other Accounts Receivable 76,904 1,476 (7,862) 77 TOTAL CURRENT ASSETS 5,569,547 41,590,523 (7,862) 47,155 FIXED ASSETS 5,569,547 41,590,523 (7,862) 47,155 Property and Equipment, Net 406,586 13,026,750 - 13,432 OTHER ASSETS 406,586 13,026,750 - 13,432 Construction in Progress - 2,927,045 - 2,927 Investment in Subsidiary 805,251 - (805,251) 26,099,803 (805,251) 26,077 TOTAL OTHER ASSETS \$ 84,009 26,099,803 (805,251) 26,177 77 TOTAL ASSETS \$ 84,009 26,099,803 (805,251) 26,177 TOTAL ASSETS \$ 84,009 26,099,80	588,194 267,884 467,642 5,378 231,714 70,518 152,208
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TOTAL FIXED ASSETS 406,586 13,026,750 - 13,433 OTHER ASSETS Construction in Progress - 23,172,758 - 23,172 Loan Acquisition Costs, Net - 2,927,045 - 2,927 Investment in Subsidiary 805,251 - (805,251) - 26,099,803 (805,251) 26,178 TOTAL OTHER ASSETS 884,009 26,099,803 (805,251) 26,178 - - 78 TOTAL OTHER ASSETS 884,009 26,099,803 (805,251) 26,178 - - 78 TOTAL ASSETS 86,660,142 \$ 80,717,076 \$ (813,113) \$ 86,764 LIABILITIES, NET ASSETS AND MEMBER'S EQUITY - - \$ 5,220 3,385,411 (7,862) 3,430 Credit Cards 119,272 - - 116 Accounts Payable - The City of New York 44,832 - - 446 Salaries, Payroll Taxes and Benefits Payable 840,271 - - 846 Vacation and Sick Time Accrual 362,411 - - 366 Interest Payable -	
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TOTAL OTHER ASSETS 884,009 26,099,803 (805,251) 26,178 TOTAL ASSETS \$ 6,860,142 8 80,717,076 (813,113) 8 86,764 LIABILITIES, NET ASSETS AND MEMBER'S EQUITY CURRENT LIABILITIES 5 - \$ 111,100 - - \$ 111,100 Accounts Payable \$ 111,100 \$ - \$ - \$ 111,100 \$ - \$ - \$ 111,100 Accounts Payable \$ 111,100 \$ - \$ - \$ 111,100 \$ - \$ - \$ 111,100 Accounts Payable \$ 111,100 \$ - \$ - \$ 111,100 \$ - \$ - \$ 111,100 Accounts Payable \$ 111,272 - - 110,200 3,385,411 (7,862) 3,430 Credit Cards 119,272 - - 110,200 3,430 - 110,200 Accounts Payable - The City of New York 44,832 - - 440,271 - - 840,271 - - 840,271 - - 840,271 - - 138,438 - 138,438 - 138,438 - 138,438 -	-
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CURRENT LIABILITIES Accounts Payable \$ 111,100 \$ - \$ - \$ 111 Accrued Expenses 53,220 3,385,411 (7,862) 3,430 Credit Cards 119,272 119 Accounts Payable - The City of New York 44,832 44 Salaries, Payroll Taxes and Benefits Payable 840,271 840 Vacation and Sick Time Accrual 362,411 362 Interest Payable - 138,438 - 138 Deferred Rent Payable 126,181 120 Customer Deposits Payable 5,680 5	
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Accrued Expenses 53,220 3,385,411 (7,862) 3,430 Credit Cards 119,272 - - 119 Accounts Payable - The City of New York 44,832 - - 44 Salaries, Payroll Taxes and Benefits Payable 840,271 - - 840 Vacation and Sick Time Accrual 362,411 - - 362 Interest Payable - 138,438 - 138 Deferred Rent Payable 126,181 - - 126 Customer Deposits Payable 5,680 - - 5	111,100
Credit Cards119,272119Accounts Payable - The City of New York44,83244Salaries, Payroll Taxes and Benefits Payable840,271840Vacation and Sick Time Accrual362,411362Interest Payable-138,438-138Deferred Rent Payable126,181126Customer Deposits Payable5,6805	430,769
Accounts Payable - The City of New York44,83244Salaries, Payroll Taxes and Benefits Payable840,271840Vacation and Sick Time Accrual362,411362Interest Payable-138,438-138Deferred Rent Payable126,181126Customer Deposits Payable5,6805	119,272
Salaries, Payroll Taxes and Benefits Payable840,271840Vacation and Sick Time Accrual362,411362Interest Payable-138,438-138Deferred Rent Payable126,181126Customer Deposits Payable5,6805	44,832
Interest Payable - 138,438 - 138 Deferred Rent Payable 126,181 - - 126 Customer Deposits Payable 5,680 - - - -	840,271
Deferred Rent Payable126,181126Customer Deposits Payable5,6802	362,411
Customer Deposits Payable 5,680	138,438
	126,181
TOTAL CURRENT LIABILITIES 1,662.967 3,523,849 (7,862) 5,178	5,680
	178,954
LONG-TERM LIABILITIES	
Mortgage Payable 75,000,000 75,000	000,000
TOTAL LONG-TERM LIABILITIES 75,000,000 75,000	000,000
TOTAL LIABILITIES 1,662,967 78,523,849 (7,862) 80,178	178,954
NET ASSETS AND MEMBER'S EQUITY	
	258,134
With Donor Restrictions 1,939,041 - 1,939	-
	737,041
	939,041 387,976
TOTAL LIABILITIES, NET ASSETS \$ 6,860,142 \$ 80,717,076 \$ (813,113) \$ 86,764 AND MEMBER'S EQUITY \$ 6,860,142 \$ 80,717,076 \$ (813,113) \$ 86,764	-

ANIMAL CARE AND CONTROL OF NEW YORK CITY, INC. DBA ANIMAL CARE CENTERS OF NYC SCHEDULE II: CONSOLIDATING STATEMENT OF ACTIVITIES FOR THE YEAR ENDED JUNE 30, 2021

	ANIMAL CARE AND CONTROL OF NEW YORK CITY, INC.	1906 FLUSHING AVE LLC	ELIMINATIONS	TOTAL
REVENUES, GAINS, AND OTHER SUPPORT				
Support from Operations:				
Revenue - The City of New York	\$ 15,921,423	\$ -	\$ -	\$ 15,921,423
Shelter Revenue	429,155	-	-	429,155
Contributions	2,638,354	-	-	2,638,354
In-Kind Contributions	85,025	-	-	85,025
Benefit Plan Contributions	1,433,160	-	-	1,433,160
Donated Use of Facilities	1,177,834	-	-	1,177,834
Benefits and Special Events	239,790	-	-	239,790
Other Miscellaneous Income	143,498	29,993	-	173,491
Interest Income	-	681,849	-	681,849
Investment Income/(Loss)	6,326	-	-	6,326
Unrealized Gain/(Loss)	90,424	-		90,424
TOTAL REVENUES, GAINS, AND OTHER SUPPORT	22,164,989	711,842		22,876,831
EXPENSES				
Salaries	11,298,110	-	-	11,298,110
Payroll Taxes and Fringe Benefits	4,040,482	-	-	4,040,482
Vehicle Expenses	145,562	-	-	145,562
Communications	65,395	-	-	65,395
Depreciation	191,512	-	-	191,512
Facility Expenses	197,909	-	-	197,909
Human Resource	44,486	-	-	44,486
Insurance	553,997	-	-	553,997
Interest and Bank Charges	41,923	6,783	-	48,706
Supplies and Services, Medical	1,407,161	-	-	1,407,161
Occupancy	1,718,844	-	-	1,718,844
Other Expenses	17,783	79	-	17,862
Professional Fees	609,844	35,000	-	644,844
Special Events	23,350	-	-	23,350
Supplies and Services, Operations	328,629	-	-	328,629
Telecommunications	146,511	-	-	146,511
Technology and Equipment	240,079	-	-	240,079
First Alert Stipends	175,103			175,103
TOTAL EXPENSES	21,246,680	41,862		21,288,542
CHANGE IN NET ASSETS	918,309	669,980	-	1,588,289
NET ASSETS AND MEMBER'S EQUITY,				
BEGINNING OF YEAR	4,096,882	1,523,247	(805,251)	4,814,878
Prior Year Net Asset Adjustment	181,984			181,984
ADJUSTED NET ASSETS AND MEMBER'S EQUITY, BEGINNING OF YEAR	1 770 022	1 522 247	(205 251)	1 006 862
	4,278,866	1,523,247	(805,251)	4,996,862
NET ASSETS AND MEMBER'S EQUITY, END OF YEAR	\$ 5,197,175	\$ 2,193,227	\$ (805,251)	\$ 6,585,151

ANIMAL CARE AND CONTROL OF NEW YORK CITY, INC. DBA ANIMAL CARE CENTERS OF NYC SCHEDULE III: CONSOLIDATING STATEMENT OF FINANCIAL POSITION AT JUNE 30, 2020

	CON	MAL CARE & FROL OF NEW RK CITY, INC.	19(06 FLUSHING AVE LLC	ELI	MINATIONS		TOTAL
ASSETS								
CURRENT ASSETS								
Cash and Cash Equivalents	\$	959,287	\$	245	\$	-	\$	959,532
Restricted - Cash and Cash Equivalents	+	-	*	50,593,401	*	-	*	50,593,401
Marketable Securities		176,079		-		-		176,079
Accounts Receivable - The City of New York		3,672,147		-		-		3,672,147
Unconditional Promises to Give		1,245		-		-		1,245
Grants Receivable		108,639		-		-		108,639
Prepaid Expenses		168,919		-		-		168,919
Other Accounts Receivable		32,652		-		-		32,652
TOTAL CURRENT ASSETS		5,118,968		50,593,646		-		55,712,614
FIXED ASSETS								
Property and Equipment, Net		569,652		13,026,750		-		13,596,402
TOTAL FIXED ASSETS		569,652		13,026,750		-		13,596,402
OTHER ASSETS)		-))				-)) -
Construction in Progress				11,565,673				11,565,673
Loan Acquisition Costs, Net		-		2,927,045		-		2,927,045
Investment in Subsidiary		805,251		2,927,045		(805,251)		2,927,045
Deposits on Leased and Other Property		79,775		-		(805,251)		- 79,775
TOTAL OTHER ASSETS		885,026		14,492,718		(805,251)		14,572,493
TOTAL ASSETS	\$	6,573,646	\$	78,113,114	\$	(805,251)	\$	83,881,509
LIABILITIES, NET ASSETS AND MEMBER'S EQUI	TY							
CURRENT LIABILITIES								
Accounts Payable	\$	164,203	\$	-	\$	-	\$	164,203
Accrued Expenses		123,328		1,451,429		-		1,574,757
Credit Cards Payable		55,039		-		-		55,039
Accounts Payable - The City of New York		44,622		-		-		44,622
Salaries, Payroll Taxes and Benefits Payable		625,523		-		-		625,523
Vacation and Sick Time Accrual		206,331		-		-		206,331
Interest Payable		-		138,438		-		138,438
Deferred Rent Payable		56,301		-		-		56,301
Line of Credit		976,014		-		-		976,014
Customer Deposits Payable		43,174		-		-		43,174
Other Liabilities		245		-		-		245
TOTAL CURRENT LIABILITIES		2,294,780		1,589,867		-		3,884,647
LONG-TERM LIABILITIES								
Mortgage Payable		-		75,000,000		-		75,000,000
TOTAL LONG-TERM LIABILITIES		-	·	75,000,000		-		75,000,000
TOTAL LIABILITIES		2,294,780		76,589,867		-		78,884,647
NET ASSETS AND MEMBER'S EQUITY								
Without Donor Restrictions		2,558,256		-		-		2,558,256
With Donor Restrictions		1,720,610		-		-		1,720,610
Member's Equity		-		1,523,247		(805,251)		717,996
TOTAL NET ASSETS AND MEMBER'S EQUITY		4,278,866		1,523,247		(805,251)		4,996,862
TOTAL LIABILITIES, NET ASSETS AND MEMBER'S EQUITY	\$	6,573,646	\$	78,113,114	\$	(805,251)	\$	83,881,509
	Ψ	0,070,070	Ψ	/0,110,114	φ	(003,231)	φ	30,001,307

ANIMAL CARE AND CONTROL OF NEW YORK CITY, INC. DBA ANIMAL CARE CENTERS OF NYC SCHEDULE IV: CONSOLIDATING STATEMENT OF ACTIVITIES FOR THE YEAR ENDED JUNE 30, 2020

	ANIMAL CARE AND CONTROL OF NEW YORK CITY, INC.	1906 FLUSHING AVE LLC	ELIMINATIONS	TOTAL
REVENUES, GAINS, AND OTHER SUPPORT				
Support from Operations:				
Revenue - The City of New York	\$ 18,400,953	\$ -	\$ -	\$ 18,400,953
Shelter Revenue	725,865	-	-	725,865
Contributions	3,140,786	-	-	3,140,786
In-Kind Contributions	115,341	-	-	115,341
Benefit Plan Contributions	1,316,080	-	-	1,316,080
Donated Use of Facilities	1,139,105	-	-	1,139,105
Benefits and Special Events	450,679	-	-	450,679
Other Miscellaneous Income	77,950	-	-	77,950
Investment Income	259	806,123	-	806,382
Investment Income/(Loss)	4,536	-	-	4,536
Unrealized Gain/(Loss)	(6,646)			(6,646)
TOTAL REVENUES, GAINS, AND OTHER SUPPORT	25,364,908	806,123		26,171,031
EXPENSES				
Salaries	12,749,444	-	-	12,749,444
Payroll Taxes and Fringe Benefits	4,118,291	-	-	4,118,291
Vehicle Expenses	299,311	-	-	299,311
Communications	158,503	-	-	158,503
Depreciation	167,528	-	-	167,528
Facility Expenses	317,355	-	-	317,355
Human Resource	54,058	-	-	54,058
Insurance	516,256	-	-	516,256
Interest and Bank Charges	70,994	23,605	-	94,599
Supplies and Services, Medical	1,725,969	-	-	1,725,969
Occupancy	1,700,212	72,549	-	1,772,761
Other Expenses	66,339	-	-	66,339
Professional Fees	514,720	-	-	514,720
Special Events	115,129	-	-	115,129
Supplies and Services, Operations	636,594	-	-	636,594
Telecommunications	157,783	-	-	157,783
Technology and Equipment	348,518	-	-	348,518
First Alert Stipends	184,838	-	-	184,838
Discount and Subsidized	69,269	-	-	69,269
Bad Debt	2,998			2,998
TOTAL EXPENSES	23,974,109	96,154		24,070,263
CHANGE IN NET ASSETS	1,390,799	709,969	-	2,100,768
NET ASSETS AND MEMBER'S EQUITY,				
BEGINNING OF YEAR	2,888,067	813,278	(805,251)	2,896,094
NET ASSETS AND MEMBER'S EQUITY, END OF YEAR	\$ 4,278,866	\$ 1,523,247	\$ (805,251)	\$ 4,996,862