

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form **990**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

Go to www.irs.gov/Form990 for instructions and the latest information.

2023

Open to Public Inspection

A For the **2023** calendar year, or tax year beginning **JUL 1, 2023** and ending **JUN 30, 2024**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization AMERICAN HUMANE ASSOCIATION Doing business as AMERICAN HUMANE - FIRST TO SERVE Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1400 16TH STREET, NW 360 City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20036	D Employer identification number 84-0432950 E Telephone number (202) 677-4227
	F Name and address of principal officer: ROBIN R. GANZERT, PHD SAME AS C ABOVE	G Gross receipts \$ 31,852,982. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: WWW.AMERICANHUMANE.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation: 1877 M State of legal domicile: DC

Part I Summary

	1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O		
Activities & Governance	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	15
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	15
	5 Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	117
	6 Total number of volunteers (estimate if necessary)	6	500
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 17,800,533.	Current Year 19,888,615.
	9 Program service revenue (Part VIII, line 2g)	3,425,219.	3,267,205.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,041,353.	1,681,135.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,631,140.	3,246,412.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	25,898,245.	28,083,367.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	125,620.
14 Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		10,197,903.	11,971,186.
16a Professional fundraising fees (Part IX, column (A), line 11e)		126,000.	180,000.
b Total fundraising expenses (Part IX, column (D), line 25)		4,628,868.	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		13,772,893.	14,165,928.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	24,222,416.	26,496,250.	
19 Revenue less expenses. Subtract line 18 from line 12	1,675,829.	1,587,117.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 36,216,465.	End of Year 45,465,536.
	21 Total liabilities (Part X, line 26)	8,860,803.	14,953,088.
	22 Net assets or fund balances. Subtract line 21 from line 20	27,355,662.	30,512,448.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer 	Date February 14, 2025
	ROBIN R. GANZERT, PHD, PRESIDENT & CEO Type or print name and title	
Paid Preparer Use Only	Print/Type preparer's name ERIN CRANMER	Preparer's signature ERIN CRANMER
	Date 02/14/25	Check if self-employed <input type="checkbox"/> PTIN P01712644
	Firm's name CALIBRE CPA GROUP, PLLC	Firm's EIN 47-0900880
	Firm's address 7501 WISCONSIN AVENUE, SUITE 1200 WEST BETHESDA, MD 20814	Phone no. 202-331-9880

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission:

SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [X] Yes [] No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 6,221,406. including grants of \$ 2,500.) (Revenue \$ 276,633.) AMERICAN HUMANE HOLLYWOOD

AMERICAN HUMANE'S "NO ANIMALS WERE HARMED" CERTIFICATION PROGRAM WAS AND IS THE FIRST TO SERVE IN THE PROTECTION OF ANIMALS IN FILM AND TELEVISION, SAFEGUARDING MILLIONS OF ANIMALS ON TENS OF THOUSANDS OF PRODUCTIONS WORLDWIDE FOR MORE THAN 80 YEARS. SINCE 1940, OUR PROGRAM HAS BEEN AT THE FOREFRONT OF ANIMAL WELFARE IN FILMED ENTERTAINMENT. WE ARE THE LEADING INDUSTRY-SANCTIONED ORGANIZATION WITH OVERSIGHT OF ANIMALS IN FILMED PRODUCTION AND THE SOLE ENTITY TO AWARD THE INTERNATIONALLY RECOGNIZED NO ANIMALS WERE HARMED END-CREDIT CERTIFICATION TO PRODUCTIONS THAT MEET OUR RIGOROUS STANDARD OF CARE.

4b (Code:) (Expenses \$ 2,530,942. including grants of \$ 1,250.) (Revenue \$ 1,287,500.) AMERICAN HUMANE FARM ANIMAL PROGRAM

AMERICAN HUMANE BELIEVES PEOPLE SHOULD BE ABLE TO FOLLOW THEIR FOOD PREFERENCE AND FIND HUMANELY RAISED DAIRY, MEAT, AND EGG PRODUCTS.

THE AMERICAN HUMANE FARM ANIMAL PROGRAM WAS - AND IS THE FIRST TO SERVE IN THE PROTECTION OF FARM ANIMALS. OUR AMERICAN HUMANE CERTIFIED FARM ANIMAL WELFARE CERTIFICATION PROGRAM IS THE OLDEST, LARGEST, AND FASTEST-GROWING AUDITING AND CERTIFICATION EFFORT IN THE COUNTRY. THE PURPOSE OF THIS VITAL PROGRAM IS TO HELP IMPROVE AND VERIFY THE TREATMENT OF ANIMALS ON FARMS AND RANCHES UTILIZING EVIDENCE AND SCIENCE-BASED WELFARE STANDARDS, AND TO EDUCATE CONSUMERS AND PEOPLE

4c (Code:) (Expenses \$ 2,736,952. including grants of \$ 127,096.) (Revenue \$ 550,625.) AMERICAN HUMANE CONSERVATION

IN THE FACE OF WHAT SCIENTISTS ARE CALLING A "SIXTH MASS EXTINCTION" WITH SPECIES DISAPPEARING AT AN UNPRECEDENTED RATE, ZOOS AND AQUARIUMS ARE PLAYING AN OUTSIZED ROLE IN PRESERVING THE VITAL WEB OF LIFE ON EARTH. TO ELEVATE STANDARDS AND SHINE A SPOTLIGHT ON THOSE WHO TAKE GOOD CARE OF THEIR ANIMALS, AMERICAN HUMANE DEVELOPED THE FIRST-EVER INDEPENDENT, GLOBAL, AND SCIENCE-BASED HUMANE CERTIFICATION DEDICATED SOLELY TO HELPING ENSURE THE WELFARE AND HUMANE TREATMENT OF THE ANIMALS IN THE WORLD'S ZOOS, AQUARIUMS, AND CONSERVATION CENTERS. ANIMAL WELFARE STANDARDS ARE REGULARLY REVIEWED BY THE PROGRAM'S SCIENTIFIC ADVISORY COMMITTEE, AN INTERNATIONAL GROUP OF ANIMAL SCIENCE

4d Other program services (Describe on Schedule O.)

(Expenses \$ 8,125,809. including grants of \$ 48,290.) (Revenue \$ 1,152,447.)

4e Total program service expenses 19,615,109.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21, with sub-questions a-f for questions 11, 12, and 14. 'X' marks indicate 'Yes' responses.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question, Yes, No. Rows 22-38 detailing various organizational requirements and compliance checks.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question, Yes, No. Rows 1a-1c regarding Form 1096, Forms W-2G, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No columns. Includes questions 2a through 17 regarding employee counts, tax returns, gross income, foreign accounts, prohibited transactions, and various organizational requirements.

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 15; 1b Enter the number of voting members included on line 1a... 15; 2 Did any officer, director, trustee, or key employee have a family relationship... X; 3 Did the organization delegate control over management duties... X; 4 Did the organization make any significant changes to its governing documents... X; 5 Did the organization become aware during the year of a significant diversion of the organization's assets... X; 6 Did the organization have members or stockholders... 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... X; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body... X; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? X; b Each committee with authority to act on behalf of the governing body? X; 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... X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates... X; 10b 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?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X; 11b Describe on Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13... X; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done... X; 13 Did the organization have a written whistleblower policy? X; 14 Did the organization have a written document retention and destruction policy? X; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official... X; b Other officers or key employees of the organization... X; 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? X; 16b 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?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed AL, AK, AZ, CA, CO, CT, FL, GA, HI, IL, KS, KY
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [] 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 policy, and financial 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
MELISSA SANOFF - 202-677-4253
1400 16TH STREET, NW, SUITE 360, WASHINGTON, DC 20036

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.
 - List all of the organization's **current** key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 the 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) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ROBIN GANZERT, PH.D PRESIDENT & CEO	40.00			X				713,193.	0.	32,159.
(2) STEPHANIE CARMODY, ESQ SVP & GENERAL COUNSEL	40.00					X		403,315.	0.	25,215.
(3) MELISSA SANOFF CHIEF FINANCIAL OFFICER	40.00			X				303,394.	0.	28,409.
(4) CHERYL LESKO CHIEF DEVELOPMENT OFFICER	40.00					X		264,056.	0.	30,814.
(5) THOMAS M EDLING, DVM, MSPVM, MP CHIEF VETERINARY OFFICER	40.00					X		231,458.	0.	29,432.
(6) KASHYAP CHOKSI SVP & CHIEF OPERATING OFFICER	40.00					X		230,821.	0.	19,102.
(7) KIRSTEN PETERSON CHIEF TALENT OFFICER	40.00					X		222,621.	0.	21,572.
(8) DAWN ASSENZIO DIRECTOR	1.00	X						0.	0.	0.
(9) J. MICHAEL MCFARLAND SECRETARY	2.00	X		X				0.	0.	0.
(10) SCOTT CAMPBELL, COL., USMC (RET) DIRECTOR	1.00	X						0.	0.	0.
(11) SHARON JABLIN DIRECTOR	1.00	X						0.	0.	0.
(12) TOM KEARNEY, REAR ADMIRAL USN () DIRECTOR	1.00	X						0.	0.	0.
(13) LEIGH-ANNE KAZMA DIRECTOR	1.00	X						0.	0.	0.
(14) LOUISE LANE DIRECTOR	1.00	X						0.	0.	0.
(15) JOHN PAYNE CHAIR	2.00	X		X				0.	0.	0.
(16) MARILYN PELSTRING DIRECTOR	1.00	X						0.	0.	0.
(17) CANDY SPELLING VICE CHAIR	2.00	X		X				0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) LARRY STRICKLAND DIRECTOR	1.00	X						0.	0.	0.
(19) ABIGAIL TRENK DIRECTOR	1.00	X						0.	0.	0.
(20) NELVA BRYANT, DVM, MPH DIRECTOR	1.00	X						0.	0.	0.
(21) CYBELL KIESSLING DIRECTOR	1.00	X						0.	0.	0.
(22) DAVID WEBB DIRECTOR	1.00	X						0.	0.	0.
1b Subtotal								2,368,858.	0.	186,703.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								2,368,858.	0.	186,703.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 19

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
MRB PRODUCTIONS, 8875B CYNTHIA STREET, WEST HOLLYWOOD, CA 90069	FILM PRODUCTION	1,281,508.
LYONS PUBLIC RELATIONS, INC., 10410 N KENSINGTON PKWY SUITE 305, KENSINGTON, MD	PUBLIC RELATIONS	385,011.
RKD GROUP LLC, 2701 N DALLAS PARKWAY SUITE 650, PLANO, TX 75093	FUNDRAISING COUNSEL	335,193.
FUSE FUNDRAISING, 12355 SUNRISE VALLEY DRIVE SUITE 240, RESTON, VA 20191	FUNDRAISING COUNSEL & DIRECT MAIL	330,513.
INTACT US, 250 NORTHWEST BLVD SUITE 208, COEUR D' ALENE, ID 83814	TECHNOLOGY	266,341.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 7

Part VIII Statement of Revenue

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

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a	36,308.				
	b	Membership dues	1b					
	c	Fundraising events	1c	11,866.				
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above ...	1f	19,840,441.				
	g	Noncash contributions included in lines 1a-1f	1g	\$ 338,939.				
	h	Total. Add lines 1a-1f			19,888,615.			
Program Service Revenue	2 a	SERVICE FEES	Business Code	900099	3,150,205.	3,150,205.		
	b	TICKET SALES AND OTHER	Business Code	900099	117,000.	117,000.		
	c							
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f			3,267,205.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)			596,162.		596,162.	
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties			3,193,833.		3193833.	
	6 a	Gross rents	6a	(i) Real				
				(ii) Personal				
	b	Less: rental expenses ...	6b					
	c	Rental income or (loss)	6c					
	d	Net rental income or (loss)						
	7 a	Gross amount from sales of assets other than inventory	7a	(i) Securities				
				(ii) Other				
					4,721,273.			
	b	Less: cost or other basis and sales expenses	7b	3,636,300.				
	c	Gain or (loss)	7c	1,084,973.				
d	Net gain or (loss)			1,084,973.		1084973.		
8 a	Gross income from fundraising events (not including \$ 11,866. of contributions reported on line 1c). See Part IV, line 18	8a		170,058.				
				133,315.				
b	Less: direct expenses	8b						
c	Net income or (loss) from fundraising events			36,743.		36,743.		
9 a	Gross income from gaming activities. See Part IV, line 19	9a						
b	Less: direct expenses	9b						
c	Net income or (loss) from gaming activities							
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							
Miscellaneous Revenue	11 a		Business Code					
	b							
	c							
	d	All other revenue		900099	15,836.		15,836.	
	e	Total. Add lines 11a-11d			15,836.			
12	Total revenue. See instructions			28,083,367.	3,267,205.	0.	4927547.	

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).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	56,540.	56,540.		
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	122,596.	122,596.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,246,911.	684,900.	425,032.	136,979.
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	8,794,265.	6,127,371.	779,944.	1,886,950.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	252,594.	170,476.	22,159.	59,959.
9 Other employee benefits	977,995.	659,578.	105,432.	212,985.
10 Payroll taxes	699,421.	464,603.	85,886.	148,932.
11 Fees for services (nonemployees):				
a Management				
b Legal	43,832.	31,718.	3,314.	8,800.
c Accounting	45,000.		45,000.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	180,000.			180,000.
f Investment management fees	80,089.	12,755.	62,020.	5,314.
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	5,937,897.	4,963,948.	283,024.	690,925.
12 Advertising and promotion	1,050,450.	958,897.	6,048.	85,505.
13 Office expenses	990,585.	444,788.	18,003.	527,794.
14 Information technology	123,727.	89,533.	9,355.	24,839.
15 Royalties				
16 Occupancy	792,039.	626,889.	95,976.	69,174.
17 Travel	2,358,292.	2,115,604.	89,553.	153,135.
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				
22 Depreciation, depletion, and amortization	530,422.	473,997.	7,675.	48,750.
23 Insurance	284,835.	225,564.	34,445.	24,826.
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 O.)				
a TRADESHOWS AND EVENTS	871,167.	778,695.	27,302.	65,170.
b TAXES, LICENSES AND FEE	381,112.	205,377.	115,359.	60,376.
c _____				
d _____				
e All other expenses _____	676,481.	401,280.	36,746.	238,455.
25 Total functional expenses. Add lines 1 through 24e	26,496,250.	19,615,109.	2,252,273.	4,628,868.
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	1,230,105.	1	2,508,390.
	2 Savings and temporary cash investments	667,866.	2	375,994.
	3 Pledges and grants receivable, net	3,104,278.	3	4,510,740.
	4 Accounts receivable, net	2,234,568.	4	2,425,710.
	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	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	834,288.	9	766,463.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 10,718,894.		
	b Less: accumulated depreciation	10b 3,215,098.	10c	7,503,796.
	11 Investments - publicly traded securities	15,994,333.	11	18,884,205.
	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	8,374,053.	15	8,490,238.
16 Total assets. Add lines 1 through 15 (must equal line 33)	36,216,465.	16	45,465,536.	
Liabilities	17 Accounts payable and accrued expenses	1,970,058.	17	4,002,292.
	18 Grants payable		18	
	19 Deferred revenue	592,462.	19	736,727.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other 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		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties	1,000,000.	24	5,255,269.
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	5,298,283.	25	4,958,800.
	26 Total liabilities. Add lines 17 through 25	8,860,803.	26	14,953,088.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	16,152,158.	27	14,546,760.
	28 Net assets with donor restrictions	11,203,504.	28	15,965,688.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	27,355,662.	32	30,512,448.
	33 Total liabilities and net assets/fund balances	36,216,465.	33	45,465,536.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	28,083,367.
2	Total expenses (must equal Part IX, column (A), line 25)	2	26,496,250.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,587,117.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	27,355,662.
5	Net unrealized gains (losses) on investments	5	1,272,301.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	297,368.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	30,512,448.

Part XII Financial Statements and Reporting

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

- 1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2023)

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	15396030.	8920303.	13822948.	17800533.	19977133.	75916947.
2 Tax revenues levied for the organization'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						
4 Total. Add lines 1 through 3	15396030.	8920303.	13822948.	17800533.	19977133.	75916947.
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)						18133155.
6 Public support. Subtract line 5 from line 4.						57783792.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4	15396030.	8920303.	13822948.	17800533.	19977133.	75916947.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	2757018.	2747377.	3097228.	3363538.	3789995.	15755156.
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.)	6,434.	17,750.	6,393.	4,209.	15,836.	50,622.
11 Total support. Add lines 7 through 10						91722725.
12 Gross receipts from related activities, etc. (see instructions)					12	19,541,855.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))	14	63.00	%
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	64.37	%
16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input checked="" type="checkbox"/>
b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			<input type="checkbox"/>

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. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2022 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2022 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2023. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2022. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of 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

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
b A family member of a person described on line 11a above?		
c A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
11a		
11b		
11c		

Section B. Type I Supporting Organizations

	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? <i>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.</i>		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		
1		
2		

Section 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)? <i>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).</i>		
1		

Section 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?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 By reason of the relationship described on 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
1		
2		
3		

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 year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> 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? <i>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.</i>	Yes	No	
b Did the activities described on 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? <i>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.</i>			
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? <i>If "Yes" or "No" provide details in Part VI.</i>			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>			
2a			
2b			
3a			
3b			

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). See instructions.
 All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section 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	

Section 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):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
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	

Section 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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2023 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required - <i>explain in Part VI</i>). See instructions.		
3	Excess distributions carryover, if any, to 2023		
a	From 2018		
b	From 2019		
c	From 2020		
d	From 2021		
e	From 2022		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2023 distributable amount		
i	Carryover from 2018 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2023 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2023 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.		
6	Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.		
7	Excess distributions carryover to 2024. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2019		
b	Excess from 2020		
c	Excess from 2021		
d	Excess from 2022		
e	Excess from 2023		

Schedule A (Form 990) 2023

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Horizontal lines for supplemental information.

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2023

Name of the organization

AMERICAN HUMANE ASSOCIATION

Employer identification number

84-0432950

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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), 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 \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), 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).

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

Schedule B (Form 990) (2023)

Name of organization AMERICAN HUMANE ASSOCIATION	Employer identification number 84-0432950
--	---

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ <u>5,187,681.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ <u>3,045,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ <u>744,188.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	<hr/> <hr/> <hr/>	\$ <u>705,377.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	<hr/> <hr/> <hr/>	\$ <u>505,900.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	<hr/> <hr/> <hr/>	\$ <u>492,860.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization AMERICAN HUMANE ASSOCIATION	Employer identification number 84-0432950
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	<hr/> <hr/> <hr/>	\$ <u>442,444.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	<hr/> <hr/> <hr/>	\$ <u>400,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization AMERICAN HUMANE ASSOCIATION	Employer identification number 84-0432950
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____

Name of organization AMERICAN HUMANE ASSOCIATION	Employer identification number 84-0432950
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE C
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2023

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527
Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes" on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then:

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then:

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization AMERICAN HUMANE ASSOCIATION	Employer identification number 84-0432950
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political campaign activity expenditures \$ _____
- 3 Volunteer hours for political campaign activities _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b \$ _____
- 4 Did the filing organization file Form 1120-POL for this year? Yes No
- 5 Enter the names, addresses, and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)														
b Total lobbying expenditures to influence a legislative body (direct lobbying)	165,000.													
c Total lobbying expenditures (add lines 1a and 1b)	165,000.													
d Other exempt purpose expenditures	21,632,449.													
e Total exempt purpose expenditures (add lines 1c and 1d)	21,797,449.													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000.													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>not over \$500,000,</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>over \$500,000 but not over \$1,000,000,</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>over \$1,000,000 but not over \$1,500,000,</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>over \$1,500,000 but not over \$17,000,000,</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>over \$17,000,000,</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	not over \$500,000,	20% of the amount on line 1e.	over \$500,000 but not over \$1,000,000,	\$100,000 plus 15% of the excess over \$500,000.	over \$1,000,000 but not over \$1,500,000,	\$175,000 plus 10% of the excess over \$1,000,000.	over \$1,500,000 but not over \$17,000,000,	\$225,000 plus 5% of the excess over \$1,500,000.	over \$17,000,000,	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
not over \$500,000,	20% of the amount on line 1e.													
over \$500,000 but not over \$1,000,000,	\$100,000 plus 15% of the excess over \$500,000.													
over \$1,000,000 but not over \$1,500,000,	\$175,000 plus 10% of the excess over \$1,000,000.													
over \$1,500,000 but not over \$17,000,000,	\$225,000 plus 5% of the excess over \$1,500,000.													
over \$17,000,000,	\$1,000,000.													
g Grassroots nontaxable amount (enter 25% of line 1f)	250,000.													
h Subtract line 1g from line 1a. If zero or less, enter -0-	0.													
i Subtract line 1f from line 1c. If zero or less, enter -0-	0.													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
 See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
2a Lobbying nontaxable amount	825,352.	979,990.	1,000,000.	1,000,000.	3,805,342.
b Lobbying ceiling amount (150% of line 2a, column(e))					5,708,013.
c Total lobbying expenditures				165,000.	165,000.
d Grassroots nontaxable amount	206,338.	244,998.	250,000.	250,000.	951,336.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,427,004.
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

Table with 3 main columns: (a) Yes, (a) No, (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation...; 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?; 2b If "Yes," enter the amount of any tax incurred under section 4912; 2c If "Yes," enter the amount of any tax incurred by organization managers under section 4912; 2d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

Table with 3 columns: Question, Yes, No. Rows include: 1 Were substantially all (90% or more) dues received nondeductible by members?; 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?; 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

Table with 2 main columns: Question, Amount. Rows include: 1 Dues, assessments and similar amounts from members; 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid); 2a Current year; 2b Carryover from last year; 2c Total; 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues; 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?; 5 Taxable amount of lobbying and political expenditures. See instructions.

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Blank lines for providing supplemental information as required by the instructions.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization AMERICAN HUMANE ASSOCIATION Employer identification number 84-0432950

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose(s) of conservation easements, a table for lines 2a-2d (Total number, acreage, certified historic structures, and others), and several yes/no questions about monitoring, expenses, and reporting.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include questions about reporting art and historical treasures, and a table for revenue and assets included in Form 990.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2023

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	738,457.	769,260.	1,712,355.	1,480,941.	1,473,320.
b Contributions					
c Net investment earnings, gains, and losses				238,391.	22,897.
d Grants or scholarships					
e Other expenditures for facilities and programs		30,803.	943,095.	6,977.	15,276.
f Administrative expenses					
g End of year balance	738,457.	738,457.	769,260.	1,712,355.	1,480,941.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____%
 - b Permanent endowment 68.4400 %
 - c Term endowment 31.5600 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|-----|----|
| (i) Unrelated organizations? | | X |
| (ii) Related organizations? | | X |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,857,224.		1,857,224.
b Buildings		4,562,342.	356,698.	4,205,644.
c Leasehold improvements		879,334.	407,202.	472,132.
d Equipment		3,419,994.	2,451,198.	968,796.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				7,503,796.

Part VII Investments - Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-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, line 12, col. (B))		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))		

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) BENEFICIAL INTERESTS IN CHARITABLE TRUSTS	6,067,282.
(2) OPERATING RIGHT-OF-USE ASSET	2,422,956.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	8,490,238.

Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) OBLIGATIONS UNDER SPLIT-INTEREST	
(3) AGREEMENTS	1,435,013.
(4) OPERATING LEASE LIABILITY	3,523,787.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	4,958,800.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to 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 ...

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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	68,463,181.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	a Net unrealized gains (losses) on investments	2a	1,272,301.	
	b Donated services and use of facilities	2b	38,668,401.	
	c Recoveries of prior year grants	2c		
	d Other (Describe in Part XIII.)	2d	519,201.	
	e Add lines 2a through 2d	2e		40,459,903.
3	Subtract line 2e from line 1		3	28,003,278.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a	80,089.	
	b Other (Describe in Part XIII.)	4b		
	c Add lines 4a and 4b	4c		80,089.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	28,083,367.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	65,227,851.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	a Donated services and use of facilities	2a	38,668,401.	
	b Prior year adjustments	2b		
	c Other losses	2c		
	d Other (Describe in Part XIII.)	2d	143,289.	
	e Add lines 2a through 2d	2e		38,811,690.
3	Subtract line 2e from line 1		3	26,416,161.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a	80,089.	
	b Other (Describe in Part XIII.)	4b		
	c Add lines 4a and 4b	4c		80,089.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	26,496,250.

Part XIII Supplemental Information

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 V, LINE 4:

EARNINGS ON THE ASSOCIATION'S ENDOWMENT FUND NET ASSETS ARE GENERALLY RESTRICTED BY DONORS FOR SUPPORT OF SPECIFIC ASSOCIATION PROGRAMS. THE ASSOCIATION'S GOVERNING BOARD DETERMINES ANNUAL APPROPRIATIONS FOR EXPENDITURE IN SUPPORT OF ITS PROGRAMS IN ACCORDANCE WITH DONOR RESTRICTIONS.

PART X, LINE 2:

AMERICAN HUMANE IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (IRC), QUALIFIES FOR THE CHARITABLE CONTRIBUTION DEDUCTION UNDER 170(B)(1)(A)(VI), AND HAS BEEN CLASSIFIED AS AN ORGANIZATION OTHER THAN A PRIVATE FOUNDATION UNDER SECTION 509(A) OF

Part XIII Supplemental Information (continued)

THE IRC. HOWEVER, INCOME NOT DIRECTLY RELATED TO AMERICAN HUMANE'S TAX-EXEMPT PURPOSE IS SUBJECT TO TAXATION AS UNRELATED BUSINESS INCOME. AMERICAN HUMANE HAD NO SIGNIFICANT TAXABLE INCOME OR INCOME TAX EXPENSE DURING THE CURRENT FISCAL YEAR.

AMERICAN HUMANE BELIEVES IT HAS CONDUCTED ITS OPERATIONS IN ACCORDANCE WITH, AND HAS PROPERLY MAINTAINED, ITS TAX EXEMPT STATUS. AMERICAN HUMANE'S TAX RETURNS FOR FISCAL YEARS 2020 THROUGH 2022 ARE SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE, GENERALLY FOR THREE YEARS AFTER THEY WERE FILED.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

Table with 2 columns: Description and Amount. Rows include: CHANGE IN VALUE OF BENEFICIAL INTEREST IN PERPETUAL TRUSTS (434,832), CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS (-137,464), DIRECT COSTS OF SPECIAL EVENTS (133,315), REVENUE OF CONSOLIDATED ENTITY (88,518), TOTAL TO SCHEDULE D, PART XI, LINE 2D (519,201).

PART XII, LINE 2D - OTHER ADJUSTMENTS:

Table with 2 columns: Description and Amount. Rows include: DIRECT COSTS OF SPECIAL EVENTS (133,315), EXPENSES OF CONSOLIDATED ENTITY (9,974), TOTAL TO SCHEDULE D, PART XII, LINE 2D (143,289).

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization AMERICAN HUMANE ASSOCIATION	Employer identification number 84-0432950
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Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
SUB-SAHARAN AFRICA	1	0	PROGRAM SERVICES	RESCUE, CARE AND PROTECT ANIMALS	312,688.
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	RESCUE, CARE AND PROTECT ANIMALS	897.
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	RESCUE, CARE AND PROTECT ANIMALS	66,881.
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	RESCUE, CARE AND PROTECT ANIMALS	32,731.
EUROPE (INCLUDING ICELAND & GREENLAND)	1	0	PROGRAM SERVICES	RESCUE, CARE AND PROTECT ANIMALS	455,741.
NORTH AMERICA	0	0	PROGRAM SERVICES	RESCUE, CARE AND PROTECT ANIMALS	208,982.
SUB-SAHARAN AFRICA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		32,596.
CENTRAL AMERICA AND THE CARIBBEAN	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		10,000.
3 a Subtotal	2	0			1,120,516.
b Total from continuation sheets to Part I	0	0			80,000.
c Totals (add lines 3a and 3b)	2	0			1,200,516.

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

Schedule F (Form 990) 2023

Part I Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EUROPE (INCLUDING ICELAND & GREENLAND)	1	0	GRANTS TO RECIPIENTS LOCATED IN REGION		80,000.
Totals					80,000.

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			CENTRAL AMERICA AND THE CARIBBEAN	SLOTH PRESERVATION	10,000.	WIRE	0.		
			SUB-SAHARAN AFRICA	WATERING HOLE FOR ANIMAL SURVIVAL	7,500.	WIRE	0.		
			SUB-SAHARAN AFRICA	CHEETAH SURGERY	5,096.	WIRE	0.		
			SUB-SAHARAN AFRICA	WATERING HOLE FOR ANIMAL SURVIVAL	10,000.	WIRE	0.		
			SUB-SAHARAN AFRICA	PENGUIN PRESERVATION	10,000.	WIRE	0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	ANIMAL PRESERVATION	80,000.	WIRE	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **6**

3 Enter total number of other organizations or entities **0**

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)* Yes No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see the Instructions for Form 5471)* Yes No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see the Instructions for Form 8621)* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see the Instructions for Form 8865)* Yes No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)* Yes No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

Lined area for supplemental information.

**SCHEDULE G
(Form 990)**

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

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

2023

Department of the Treasury
Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization **AMERICAN HUMANE ASSOCIATION** Employer identification number **84-0432950**

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a Mail solicitations
 - b Internet and email solicitations
 - c Phone solicitations
 - d In-person solicitations
 - e Solicitation of non-government grants
 - f Solicitation of government grants
 - g Special fundraising events
- 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
RKD GROUP, LLC - 2701 NORTH DALLAS PARKWAY, SUITE 650, FUSE FUNDRAISING, LLC - 12355 SUNRISE VALLEY DRIVE SUITE	FUNDRAISING COUNSEL		X	456,406.	159,000.	297,406.
	FUNDRAISING COUNSEL		X	61,017.	21,000.	40,017.
Total				517,423.	180,000.	337,423.

- 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.
- AL, AK, AZ, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI, DE, DC, IN, IA, MO, MT, NE, NV, SD, TX, VT, WY, ID

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.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))	
		PUPS4PATRIOT S DINNER (event type)	PUPS4PATRIOT S GOLF INVIT (event type)	1 (total number)		
Revenue	1	Gross receipts	79,094.	94,842.	7,988.	181,924.
	2	Less: Contributions	4,704.	5,786.	1,376.	11,866.
	3	Gross income (line 1 minus line 2)	74,390.	89,056.	6,612.	170,058.
Direct Expenses	4	Cash prizes		2,415.		2,415.
	5	Noncash prizes		300.		300.
	6	Rent/facility costs	6,850.	4,925.	3,058.	14,833.
	7	Food and beverages	58,969.	653.	19,049.	78,671.
	8	Entertainment	5,500.		4,500.	10,000.
	9	Other direct expenses	5,147.	19,099.	2,850.	27,096.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				133,315.
11	Net income summary. Subtract line 10 from line 3, column (d)				36,743.	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1	Gross revenue			
	2	Cash prizes			
Direct Expenses	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7	Direct expense summary. Add lines 2 through 5 in column (d)				
8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name _____

Address _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization \$ _____ and the amount of gaming revenue retained by the third party \$ _____

c 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

- 17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: RKD GROUP, LLC

(I) ADDRESS OF FUNDRAISER:

2701 NORTH DALLAS PARKWAY, SUITE 650, PLANO, TX 75093

(I) NAME OF FUNDRAISER: FUSE FUNDRAISING, LLC

(I) ADDRESS OF FUNDRAISER:

12355 SUNRISE VALLEY DRIVE SUITE 240, RESTON, VA 20191

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

AMERICAN HUMANE ASSOCIATION

Part I General Information on Grants and Assistance

Employer identification number
84-0432950

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
PALM BEACH FREEDOM INSTITUTE 249 ROYAL PALM WAY PALM BEACH, FL 33480	86-3757978	501(C)(3)	25,000.	0.			ETHIOPIAN OUTREACH
MAUI HUMANE SOCIETY PO BOX 1047 PUUNENE, HI 96784	99-6000953	501(C)(3)	10,000.	0.			POST FIRE ANIMAL CARE

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **2.**
- 3** Enter total number of other organizations listed in the line 1 table **0.**

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

Schedule I (Form 990) 2023

Part III

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

THE ASSOCIATION'S GRANT APPLICATION PROCESS INCLUDES ELIGIBILITY REQUIREMENTS, EVALUATION AS TO NEED, RELEVANCY AND/OR OTHER FACTORS, AND COMPLIANCE WITH THE ASSOCIATION'S REPORTING REQUIREMENTS, WHICH MAY REQUIRE GRANT RECIPIENTS TO DOCUMENT TO THE ASSOCIATION HOW AND WHEN THE FUNDS WERE USED, ALONG WITH OTHER SUPPORTING INFORMATION.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

AMERICAN HUMANE ASSOCIATION

Employer identification number

84-0432950

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input checked="" type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

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?

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 organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation 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:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- 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:

- a** The organization?
- b** Any related organization?
- 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 compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- 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 payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b	X	
2	X	
4a		X
4b	X	
4c		X
5a		X
5b		X
6a		X
6b		X
7	X	
8		X
9		

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

Schedule J (Form 990) 2023

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.

PART I, LINE 1A:

THE ORGANIZATION'S CHIEF EXECUTIVE OFFICER AND BOARD MEMBERS ARE PERMITTED TO TRAVEL FIRST CLASS ON AIRPLANE FLIGHTS.

PART I, LINE 4B:

ROBIN GANZERT - \$85,000

PART I, LINE 7:

AMERICAN HUMANE'S COMPENSATION POLICIES INCLUDE A PERFORMANCE-BASED COMPONENT. THE ORGANIZATION'S COMPENSATION COMMITTEE REVIEWS AND MAKES RECOMMENDATIONS TO THE BOARD OF DIRECTORS WHO MUST APPROVE THE COMPENSATION OF THE PRESIDENT/CEO. THE PRESIDENT/CEO REVIEWS AND APPROVES THE COMPENSATION FOR ALL OTHER EMPLOYEES SUBJECT TO THE POLICY.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2023

Open to Public Inspection

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization **AMERICAN HUMANE ASSOCIATION** Employer identification number **84-0432950**

Part I	Types of Property	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles	X	1	86,910.	FMV - APPRAISAL
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded	X	12	249,614.	FMV
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other (PROGRAMMATIC SU)	X	2	2,415.	ESTIMATED FAIR VALUE
26	Other ()				
27	Other ()				
28	Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement 29 1

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for 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?	X	
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.		

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2023

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, PART I, COLUMN (B):

THE NUMBERS REPORTED ON SCHEDULE M, PART I, COLUMN (B), REPRESENTS THE NUMBER OF CONTRIBUTIONS MADE.

Multiple horizontal lines for supplemental information.

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

AMERICAN HUMANE ASSOCIATION

Employer identification number

84-0432950

FORM 990, ITEM C, DOING BUSINESS AS:

AMERICAN HUMANE - FIRST TO SERVE

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

FOUNDED IN 1877, AMERICAN HUMANE ASSOCIATION, DBA AMERICAN HUMANE -
FIRST TO SERVE (AMERICAN HUMANE) IS COMMITTED TO ENSURING THE SAFETY,
WELFARE AND WELL-BEING OF ANIMALS. OUR LEADERSHIP PROGRAMS ARE FIRST
TO SERVE IN PROMOTING AND NURTURING THE BONDS BETWEEN ANIMALS AND
HUMANS.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

FOUNDED IN 1877, AMERICAN HUMANE ASSOCIATION, DBA AMERICAN HUMANE -
FIRST TO SERVE (AMERICAN HUMANE) IS COMMITTED TO ENSURING THE SAFETY,
WELFARE AND WELL-BEING OF ANIMALS. OUR LEADERSHIP PROGRAMS ARE FIRST
TO SERVE IN PROMOTING AND NURTURING THE BONDS BETWEEN ANIMALS AND
HUMANS.

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:

IN NOVEMBER 2023, GLOBAL HUMANE CONSERVATION FUND OF AFRICA (GH-CFA), A
SOUTH AFRICAN NONPROFIT COMPANY, WAS ESTABLISHED TO FOCUS ON
CONSERVING, REWILDING, AND SAFEGUARDING AFRICA'S ECOSYSTEMS AND
WILDLIFE. THROUGH STRATEGIC INITIATIVES - SPACE FOR SPECIES, WILDLIFE
& BIODIVERSITY, AND CONSERVATION FOR COMMUNITIES, GH-CFA STRIVES TO
CREATE SAFE HABITATS, ENHANCE GENETIC DIVERSITY, AND PROMOTE THE
INTERCONNECTEDNESS OF ALL SPECIES.

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

THE PURPOSE OF THE NO ANIMALS WERE HARMED CERTIFICATION PROGRAM IS TO HELP ENSURE THAT FILM PRODUCTIONS MEET THE REQUIREMENTS OF OUR "NO ANIMALS WERE HARMED" KEEPING ANIMALS SAFE ON SETS, WHICH ALSO RESULTS IN GREATER SAFETY FOR HUMAN ACTORS. THE PROGRAM FUNDAMENTALLY:

WORKS TO PROTECT ANIMALS USED IN FILM, TELEVISION AND COMMERCIAL PRODUCTION, NO MATTER WHERE FILMING OCCURS, DURING THE PRODUCTION AND ON SET.

EDUCATES AND INFORMS FILM INDUSTRY PROFESSIONALS AND THE PUBLIC REGARDING THE HUMANE TREATMENT OF ANIMAL ACTORS IN THE GLOBAL MEDIA COMMUNITY.

VERIFIES AMERICAN HUMANE'S GUIDELINES FOR THE SAFE USE OF ANIMALS IN FILMED MEDIA WITH SPECIALLY TRAINED CERTIFIED ANIMAL SAFETY REPRESENTATIVES, MANY OF WHOM ARE VETERINARIANS.

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

INVOLVED IN THE FOOD SUPPLY CHAIN ABOUT THE SIGNIFICANCE AND BENEFITS OF THE HUMANE TREATMENT OF FARM ANIMALS.

THIS PROGRAM CERTIFIES THE HUMANE TREATMENT OF MORE ANIMALS IN FOOD PRODUCTION THAN ANY OTHER AND HAS EXPANDED INTO SOUTH AMERICA.

FARM ANIMAL WELFARE STANDARDS ARE FREQUENTLY REVIEWED BY THE PROGRAM'S SCIENTIFIC ADVISORY COMMITTEE, AN INTERNATIONAL GROUP OF ANIMAL SCIENCE EXPERTS, VETERINARIANS, AND ETHICISTS. THIRD-PARTY AUDITS ARE CONDUCTED

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ANNUALLY BY INDEPENDENT AUDITORS, AND ARE BASED ON THE SCIENCE AND EVIDENCE-BASED AMERICAN HUMANE CERTIFIED STANDARDS.

THE PROGRAM COVERS THOUSANDS OF FARMS AND RANCHES THROUGHOUT THE UNITED STATES AND ABROAD. THE AMERICAN HUMANE CERTIFIED SEAL IS NOW FOUND ON MANY PRODUCTS IN GROCERY STORES, INCLUDING DAIRY, CHICKEN, TURKEY, PORK, DUCKS, AND EGGS.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS: EXPERTS, VETERINARIANS, AND ETHICISTS.

FEWER THAN THREE PERCENT OF ZOOLOGICAL INSTITUTIONS WORLDWIDE ARE ACCREDITED OR CERTIFIED. WHILE INDUSTRY-AFFILIATED ASSOCIATIONS OFFER PROGRAMS FOR BROAD ACCREDITATION OF BUSINESS PRACTICES, AMERICAN HUMANE CERTIFIED IS THE ONLY INDEPENDENT, THIRD-PARTY CERTIFICATION EFFORT SOLELY DEVOTED TO THE HUMANE TREATMENT OF ANIMALS IN ZOOS, AQUARIUMS, AND OTHER CONSERVATION ORGANIZATIONS.

THE AMERICAN HUMANE CERTIFIED PROGRAM OFFERS THREE LEVELS OF TRANSPARENT AND CREDIBLE ASSURANCE:

UNIQUELY QUALIFIED, TRUSTED HUMANE ORGANIZATION: AMERICAN HUMANE IS THE WORLD'S LARGEST CERTIFIER OF ANIMAL WELFARE, PROTECTING MORE THAN 1 BILLION ANIMALS AROUND THE GLOBE WITH THE MOST RECOGNIZED, CREDIBLE, AND RESPECTED HUMANE PROGRAMS. THESE INCLUDE THE WORLD'S LARGEST FARM ANIMAL WELFARE CERTIFICATION PROGRAM AND THE HISTORIC "NO ANIMALS WERE HARMED" FILM CERTIFICATION.

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COMPREHENSIVE WELFARE CRITERIA DEVELOPED BY TOP EXPERTS: THE PROGRAM IS BUILT ON COMPREHENSIVE WELFARE CRITERIA INFORMED BY AN UNMATCHED, INDEPENDENT SCIENTIFIC ADVISORY COMMITTEE MADE UP OF HIGHLY RESPECTED EXPERTS IN ANIMAL WELFARE, ANIMAL SCIENCE, BEHAVIOR, AND ANIMAL ETHICS.

INDEPENDENT VERIFICATION: IMPLEMENTATION OF THESE RIGOROUS WELFARE MEASURES ARE VERIFIED BY INDEPENDENT AUDITORS WITH EXTENSIVE ZOOLOGICAL EXPERTISE IN ANIMAL SCIENCE AND WELFARE.

WE ARE PROUD TO ANNOUNCE THE FOLLOWING ACCOMPLISHMENTS ON BEHALF OF THE REMARKABLE AND ENDANGERED ANIMALS WITH WHOM WE SHARE THE EARTH.

HELPING PROTECT SPECIES IN ZOOLOGICAL SETTINGS WORLDWIDE: AMERICAN HUMANE ADVANCES THE WELFARE AND HUMANE TREATMENT OF NEARLY 500,000 ANIMALS AT 79 LEADING ZOOLOGICAL FACILITIES AROUND THE WORLD. FEWER THAN ONE PERCENT OF ZOOS AND AQUARIUMS HAVE EARNED OUR PRESTIGIOUS HUMANE CERTIFIED SEAL OF APPROVAL.

GLOBAL EXPANSION: MAJOR INSTITUTIONS AROUND THE WORLD ARE LINING UP TO BECOME AMERICAN HUMANE CERTIFIED AND WE NOW CERTIFY MAJOR ZOOLOGICAL FACILITIES IN DOZENS OF COUNTRIES IN NORTH AMERICA, THE CARIBBEAN, EUROPE, ASIA AND NOW EXPANDING INTO THE MIDDLE EAST.

AWARD-WINNING CONSERVATION FILM LAUNCHED: TO COUNTER THE "SIXTH MASS EXTINCTION" NOW TAKING PLACE AND RALLY A NEW GENERATION OF ADVOCATES FOR THE PRESERVATION OF EARTH'S PRECIOUS ANIMALS, AMERICAN HUMANE CREATED ITS FIRST DOCUMENTARY FILM, "ESCAPE FROM EXTINCTION," NARRATED BY OSCAR-WINNING ACTRESS DAME HELEN MIRREN. THE FILM IS GALVANIZING

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ANIMAL LOVERS AROUND THE WORLD AND WAS NAMED THE "BEST ENVIRONMENTAL DOCUMENTARY" OF 2020 AT DOC LA AND IS PLAYED IN THEATERS AROUND THE WORLD.

THE SEQUEL TO AMERICAN HUMANE'S AWARD-WINNING DOCUMENTARY, ESCAPE FROM EXTINCTION REWILDING, NARRATED BY ACADEMY AWARD WINNER MERYL STREEP, WILL BE RELEASED SEPTEMBER 27, 2024. REWILDING IS A TRANSFORMATIVE CONSERVATION STRATEGY THAT PRIORITIZES THE RESTORATION OF NATURAL ECOSYSTEMS BY REINTRODUCING NATIVE SPECIES. THIS INNOVATIVE APPROACH RESTORES ECOLOGICAL BALANCE AND ENHANCES BIODIVERSITY, WHILE GENERATING FARTHER-REACHING IMPACTS, SUCH AS STRENGTHENING OUR LOCAL AND GLOBAL FOOD SYSTEMS, MITIGATING CLIMATE CHANGE, AND OFFERING SIGNIFICANT SOCIO-ECONOMIC BENEFITS TO COMMUNITIES. THIS DOCUMENTARY SHOWCASES THE TANGIBLE SUCCESSES AND ONGOING CHALLENGES IN THE FIELD OF REWILDING BY SOME OF THE WORLD'S LEADING ORGANIZATIONS.

*** THE FILM HAS ALREADY BEEN AWARDED "BEST DOCUMENTARY" BY THE ATLANTIS AWARDS 2024 AND "OFFICIAL SELECTION" OF THE BRECKENRIDGE FILM FESTIVAL 2024.**

RAISED PUBLIC AWARENESS FOR HUMANE CONSERVATION: MILLIONS OF PEOPLE HAVE BEEN REACHED THROUGH OUR EDUCATIONAL VIDEOS AND NATIONAL TV AND RADIO PUBLIC SERVICE ANNOUNCEMENTS (PSA) ABOUT THE VITAL ROLE OF ZOOS AND AQUARIUMS IN CONSERVATION.

HONORING THE HEROES OF GLOBAL ANIMAL CONSERVATION

WOLFGANG KIESSLING INTERNATIONAL PRIZE FOR SPECIES CONSERVATION

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AT AMERICAN HUMANE, WE RECOGNIZE THAT THE WORK TO PRESERVE EARTH'S SPECIES IS MORE CRITICAL THAN EVER. EQUALLY IMPORTANT ARE THE SCIENTISTS, RESEARCHERS, AND ADVOCATES DEDICATING THEIR LIVES TO CONSERVATION.

TO HONOR THOSE MAKING SIGNIFICANT CONTRIBUTIONS IN CONSERVATION THEORY, PRACTICE, AND RESEARCH, AMERICAN HUMANE LAUNCHED THE WOLFGANG KIESSLING INTERNATIONAL PRIZE FOR SPECIES CONSERVATION.

THIS PRESTIGIOUS ANNUAL AWARD CELEBRATES CONSERVATIONISTS WHO HAVE MADE MEASURABLE IMPACTS ON SPECIES CONSERVATION. IT IS NAMED AFTER WOLFGANG F. KIESSLING, FOUNDER OF LORO PARQUE AND A GLOBALLY RENOWNED LEADER IN CONSERVATION. FOLLOWING A RIGOROUS APPLICATION AND REVIEW PROCESS LED BY GLOBAL CONSERVATION EXPERTS, THE PRIZE IS AWARDED TO ONE OUTSTANDING CONSERVATIONIST.

THE INAUGURAL 2022 RECIPIENT WAS PROF. JON PAUL RODRIGUEZ, CHAIR OF THE SPECIES SURVIVAL COMMISSION OF THE INTERNATIONAL UNION FOR CONSERVATION OF NATURE. IN 2023, PROF. THEO PAGEL OF COLOGNE ZOO, GERMANY, RECEIVED THE PRIZE FOR HIS WORK ON SUSTAINABILITY STRATEGIES AND GUIDELINES FOR CONSERVATION EDUCATION AS PRESIDENT OF THE WORLD ASSOCIATION OF ZOOS AND AQUARIUMS. HE ALSO CO-CHAIRLED THE INTERNATIONAL REVERSE THE RED (RTR) INITIATIVE.

WE ARE PROUD TO ANNOUNCE THAT THE 2024 PRIZE WILL BE AWARDED TO DR. ARNAUD DESBIEZ IN WASHINGTON, D.C., ON SEPTEMBER 26, 2024. THROUGH HIS NGO, ICAS (INSTITUTO DE CONSERVAO DE ANIMAIS SILVESTRES), DR. DESBIEZ HAS WORKED COLLABORATIVELY TO FIND SOCIALLY INCLUSIVE SOLUTIONS TO

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BIODIVERSITY THREATS IN FOUR BRAZILIAN BIOMES: PANTANAL, CERRADO, ATLANTIC FOREST, AND THE AMAZON. HIS FLAGSHIP SPECIES, THE GIANT ARMADILLOS AND GIANT ANTEATERS, SYMBOLIZE HIS MISSION TO PROMOTE HARMONIOUS COEXISTENCE BETWEEN PEOPLE AND BIODIVERSITY.

HUMANE TOURISM AS MILLIONS OF PEOPLE WORLDWIDE SEEK TO CONNECT WITH EARTH'S WILDLIFE, GLOBAL HUMANE, THE INTERNATIONAL ARM OF AMERICAN HUMANE, HAS IDENTIFIED A VITAL OPPORTUNITY TO LEVERAGE OUR ANIMAL WELFARE EXPERTISE BY CREATING A HUMANE TOURISM CERTIFICATION PROGRAM. THIS PROGRAM ASSESSES AND CERTIFIES WILDLIFE RESERVES, LODGES, AND TOUR OPERATORS FOR THEIR HUMANE TREATMENT OF ANIMALS THEY MAY ENCOUNTER OR IMPACT, BUILT ON THE SAME FOUNDATION OF SCIENCE AND EVIDENCE-BASED PRACTICES FOR WHICH WE ARE RENOWNED.

LIKE OUR CONSERVATION PROGRAM, THE HUMANE TOURISM INITIATIVE IS GUIDED BY A SCIENTIFIC ADVISORY COMMITTEE OF ANIMAL WELFARE EXPERTS WHO SPECIALIZE IN THE COMPLEX RELATIONSHIP BETWEEN TOURISM AND WILDLIFE. THEIR INPUT HAS SHAPED COMPREHENSIVE WELFARE CRITERIA AND RIGOROUS STANDARDS, WHICH ARE VERIFIED THROUGH INDEPENDENT, ON-SITE AUDITS FOR ANY OPERATION SEEKING HUMANE TOURISM CERTIFICATION. SINCE ITS LAUNCH IN LATE 2023, WE HAVE CERTIFIED SIX LEADING ENTITIES IN AFRICA AND WILL CONTINUE TO DRIVE THIS INNOVATIVE PROGRAM FORWARD.

**FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
AMERICAN HUMANE RESCUE**

FOR MORE THAN 100 YEARS, AMERICAN HUMANE RESCUE TEAMS HAVE BEEN FIRST TO SERVE IN THE PROTECTION OF ANIMALS SUFFERING IN NATURAL DISASTERS AS

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WELL AS HUMAN-MADE CASES OF CRUELTY, NEGLECT, OR HOARDING. AMERICAN HUMANE RESCUE TEAMS SAVE, FEED, AND SHELTER ANIMALS IN CRISIS, AND PROVIDE LIFESAVING TIPS AND DISASTER PREPARATION TRAINING BEFORE, DURING, AND AFTER DISASTERS. FIRST RESPONDERS TRAVEL THE NATION WITH A FLEET OF SPECIALLY EQUIPPED RESCUE VEHICLES.

AMERICAN HUMANE RESCUE SERVES THE ANIMAL VICTIMS OF UNIMAGINABLE CRUELTY AND ABUSE. OUR EMERGENCY RESCUE TEAM COLLABORATES WITH LOCAL LAW ENFORCEMENT AGENCIES ON LARGE-SCALE ANIMAL CRUELTY INVESTIGATIONS, INVOLVING EVERYTHING FROM HOARDING CASES TO PUPPY MILLS AND DOGFIGHTING OPERATIONS.

WHENEVER AND WHEREVER TRAGEDY STRIKES, WHETHER A NATURAL DISASTER OR AN INCIDENT OF DEPLORABLE ABUSE, AMERICAN HUMANE RESCUE IS THERE FOR ANIMALS. THE PROGRAM'S PURPOSE IS TO PROVIDE INTERVENTION FOR COMMUNITIES IN CRISIS AND TO BUILD MORE HUMANE COMMUNITIES NATIONWIDE THROUGH TRAINING, GRANTS, SHELTER SUPPORT, AND HUMANE EDUCATION.

AMERICAN HUMANE RESCUE DEPLOYMENTS IN 2024 INCLUDED:

TEAM HEADED TO GUAM TO HELP AFTER TYPHOON MAWAR: AMERICAN HUMANE RESCUE WAS CALLED INTO ACTION TO ASSIST WITH CRITICAL RELIEF EFFORTS IN GUAM IN THE WAKE OF TYPHOON MAWAR. OUR TEAM ASSISTED WITH AND WERE FOCUSED ON THE SAFETY AND WELL-BEING OF DISPLACED ANIMALS IN SEVERAL COMMUNITIES ON THE ISLAND. AMERICAN HUMANE HELPED WITH ANIMAL RESCUES, REUNIFICATIONS, AND ANIMAL CONTROL ISSUES. THEY ALSO TRAINED LOCAL ANIMAL CONTROL STAFF IN ADVANCED TECHNIQUES TO ENHANCE THEIR EFFECTIVENESS AND SAFETY IN THE FIELD. AN ISLAND ENDEMIC SPECIES THAT'S

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FACED THE BRINK OF EXTINCTION WAS ALSO AFFECTED BY THE TYPHOON'S AFTERMATH. THE ISLAND'S CRITICALLY ENDANGERED KO'KO' BIRD (ALSO KNOWN AS GUAM RAIL) WAS ANOTHER FOCUS OF AMERICAN HUMANE'S EFFORTS INCLUDING WORKING ON PERMANENT MEASURES TO HELP THE SPECIES INCREASE POPULATIONS. AMERICAN HUMANE CANNOT LET THIS SPECIES DISAPPEAR FROM EARTH!

HELPED ANIMALS DISPLACED BY WILDFIRES IN SPOKANE, WASHINGTON: AMERICAN HUMANE DEPLOYED A RESCUE TEAM TO SPOKANE, WASHINGTON AMID ONGOING WILDFIRES. THE FIRES BURNED MORE THAN 20,000 ACRES. AMERICAN HUMANE WORKED WITH LOCAL AUTHORITIES AND GROUPS TO HELP SHELTER AND CARE FOR HUNDREDS OF ANIMALS INCLUDING FAMILY PETS, HORSES, GOATS, SHEEP, CHICKENS, AND MORE THAT WERE IMPACTED BY THE FLAMES. IN TOTAL, IT'S ESTIMATED THAT MORE THAN ONE THOUSAND ANIMALS WERE IMPACTED AND NEEDED CARE.

DEPLOYED A TEAM TO TERREBONNE PARISH, LA: AMERICAN HUMANE RESCUE PROVIDED A WELLNESS VACCINE AND PREPAREDNESS CLINIC TO RESIDENTS IMPACTED BY HURRICANE IDA. WORKING WITH LOCAL ANIMAL CONTROL, SHELTER STAFF, VETERINARIANS, AND VOLUNTEER FIREFIGHTERS WE WERE ABLE TO PROVIDE CARE, VACCINATION, AND EMERGENCY PREPAREDNESS STARTER KITS TO OVER 200 CATS AND DOGS. NOT ONLY DOES THIS HELP THE PETS, AND FAMILIES BUT IT ALSO HELPS THE LOCAL AUTHORITIES GET TO KNOW THEIR COMMUNITY BETTER, BUILD TRUST, SUPPORT, AND HAVE A MORE RESILIENT COMMUNITY FOR ANIMAL HEALTH, DISASTER PREPAREDNESS, AND RECOVERY.

TEAM RESPONDED TO ANIMAL CRUELTY AND NEGLECT CASE IN EAST TEXAS: AMERICAN HUMANE RESCUE DEPLOYED A TEAM TO ASSIST LOCAL AGENCIES AND RESCUES CARE FOR OVER 55 ANIMALS INCLUDING DOGS AND CATS THAT WERE IN

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DEPLORABLE CONDITIONS AS THE CARETAKER HAD BECOME OVERWHELMED WITH HEALTH ISSUES. WE WERE ABLE TO PROVIDE CARE, TREATMENT, AND HELPED ARRANGE TRANSPORT OUT OF THE STATE TO TRANSFER THE ANIMALS TO AGENCIES THAT COULD CONTINUE CARE AND ADOPT THEM TO FOREVER HOMES.

TEAM RESPONDED TO ANIMAL CRUELTY AND NEGLECT CASE IN CENTRAL LOUISIANA: AMERICAN HUMANE RESCUE DEPLOYED A TEAM TO ASSIST LOCAL AGENCIES AND RESCUES CARE FOR OVER 35 DOGS. WE WERE ABLE TO PROVIDE CARE, TREATMENT, AND TRANSPORT WITHIN THE STATE TO GET THEM TO AGENCIES THAT COULD CONTINUE CARE AND ADOPT THEM TO FOREVER HOMES.

TRAINED MORE RESCUERS: AMERICAN HUMANE WAS ABLE TO PROVIDE A SERIES OF FIRST RESPONDER RESCUE TRAININGS THROUGHOUT THE YEAR. CLASS PARTICIPANTS RECEIVED HANDS-ON EDUCATION ABOUT DOG AND CAT BEHAVIOR AND PROPER HANDLING TECHNIQUES, HOW TO PREPARE THEIR PETS AND COMMUNITY FOR A DISASTER, AND ESSENTIAL COMPONENTS OF DEPLOYING AS AN AMERICAN HUMANE RESCUE FIRST RESPONDER.

GUAM: IN ADDITION TO AMERICAN HUMANE'S RESPONSE TO GUAM THEY WERE ALSO ABLE TO PROVIDE A SERIES OF TRAININGS TO HELP ANIMAL CONTROL AND THE DEPARTMENT OF AGRICULTURE WITH BEHAVIOR, CAPTURE, AND HANDLING AS WELL AS CPR AND AED.

HAWAII: AMERICAN HUMANE RESCUE PROVIDE A SERIES OF TRAININGS TO HONOLULU AND THE ISLAND OF OAHU PARTNERING WITH EMERGENCY MANAGEMENT, AND LOCAL ANIMAL AGENCIES TO WORK ON OUTREACH AND BUILD PARTNERS TO ASSIST DURING DISASTERS. AMERICAN HUMANE WAS ALSO ABLE TO INCLUDE REPRESENTATIVES FROM KUIAI AND MAUI ISLANDS AS WELL.

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CONFERENCES: AMERICAN HUMANE RESCUE PROVIDED SEVERAL PRESENTATIONS TO VETERINARIANS AND VET TECHS AT VITICUS WESTERN STATES VET CONFERENCE, AND EMERGENCY MANAGERS AND FIRST RESPONDERS AT THE NATIONAL HURRICANE CONFERENCE AND PSEMA VISION QUEST.

RED CROSS: AMERICAN HUMANE RESCUE TRAINED RED CROSS PERSONNEL THAT WILL BE ASSISTING WITH MANAGING CO-LOCATED ANIMALS IN THEIR DISASTER SHELTERS. AMERICAN HUMANE PROVIDED A SERIES OF TRAININGS VIRTUALLY AND IN PERSON ACROSS THE COUNTRY HELPING TO IDENTIFY SAFETY CONCERNS FOR PEOPLE AND ANIMALS AND BRING IN ADDITIONAL RESOURCES TO MINIMIZE ISSUES ARISING IN THE EMERGENCY SHELTERS.

EXPENSES \$ 1,368,192. INCLUDING GRANTS OF \$ 25,500. REVENUE \$ 1,152,447.

OTHER

AMERICAN HUMANE'S LOIS POPE LIFE CENTER FOR MILITARY AFFAIRS

AMERICAN HUMANE IS COMMITTED TO HELPING AMERICA'S VETERANS AND RECOGNIZING THEIR HEROIC CONTRIBUTIONS TO THE UNITED STATES BOTH ON AND OFF THE BATTLEFIELD. AMERICAN HUMANE HAS BEEN FIRST TO SERVE WITH THE U.S. MILITARY FOR OVER A CENTURY: THE ANIMAL RESCUE PROGRAM WAS BORN ON THE BATTLEFIELDS OF WORLD WAR I EUROPE, WHERE, AT THE REQUEST OF THE U.S. SECRETARY OF WAR, VOLUNTEERS WITH AMERICAN HUMANE DEPLOYED TO RESCUE AND CARE FOR 68,000 WOUNDED WAR HORSES EACH MONTH.

WE CONTINUE TO PROUDLY HONOR THIS LEGACY TODAY THROUGH AMERICAN HUMANE'S LOIS POPE LIFE CENTER FOR MILITARY AFFAIRS. THE PROGRAM,

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FOUNDED THROUGH THE GENEROSITY OF PHILANTHROPIST AND PASSIONATE VETERANS ADVOCATE, LOIS POPE, OFFERS MEANINGFUL SUPPORT TO OUR VETERANS WITH TWO KEY AREAS OF FOCUS: FIRST, PROVIDING LIFESAVING SERVICE DOGS (PUPS4PATRIOTS) TO VETERANS AND FIRST RESPONDERS SUFFERING FROM POST-TRAUMATIC STRESS (PTS) AND/OR TRAUMATIC BRAIN INJURY (TBI); SECOND, REUNITING RETIRED MILITARY WORKING DOGS WITH THEIR FORMER HANDLERS.

AMERICAN HUMANE HERO DOG AWARDS

THE AMERICAN HUMANE HERO DOG AWARDS IS AN ANNUAL, NATIONWIDE COMPETITION THAT SEARCHES OUT AND RECOGNIZES AMERICA'S HERO DOGS OFTEN ORDINARY DOGS WHO DO EXTRAORDINARY THINGS, WHETHER IT'S SAVING LIVES ON THE BATTLEFIELD, LENDING SIGHT OR HEARING TO A HUMAN COMPANION, OR HELPING PEOPLE ACHIEVE THEIR GOALS. DOGS ARE HONORED IN MULTIPLE CATEGORIES FOR THE HERO DOG AWARDS:

LAW ENFORCEMENT AND FIRST RESPONDER DOGS THIS CATEGORY BROADLY INCLUDES DOGS THAT ARE CRITICAL TO FIRST RESPONDERS, THAT SAFEGUARD THE PUBLIC, AND THAT FIND THE MISSING AND VICTIMS OF DISASTERS. LAW ENFORCEMENT DOGS' ABILITY TO HELP PROTECT THEIR HUMAN HANDLERS, THWART LAWBREAKERS, AND FIND EVIDENCE MAKES THEM TRUE PARTNERS TO FIRST RESPONDERS. SCENT DETECTIONS DOGS CAN ACCURATELY DETECT A VARIETY OF TARGETS, INCLUDING CORRECTLY IDENTIFYING A MULTITUDE OF DISEASES AND FLORA AND FAUNA, AND ARE USED TO DETECT ILLICIT SUBSTANCES, DRUGS, FIRE ACCELERANTS, FIREARMS, OR EXPLOSIVES. SEARCH AND RESCUE DOGS ARE TRAINED TO FIND THE MISSING, FROM THOSE LOST IN THE WILDERNESS OR CITY TO VICTIMS OF ACCIDENTS AND NATURAL DISASTERS.

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SERVICE AND GUIDE/HEARING DOGS SERVICE DOGS ARE TRAINED TO PERFORM SPECIFIC TASKS FOR PEOPLE WITH DISABILITIES AS DEFINED BY THE AMERICANS WITH DISABILITIES ACT (ADA). THEY CAN BE TRAINED TO WORK WITH PEOPLE WITH PHYSICAL MOBILITY NEEDS OR LIMITATIONS, OR PEOPLE WHO NEED ALERTS TO MEDICAL CONDITIONS. THEY CAN ALSO SERVE AS THE "EYES AND EARS" FOR THE BLIND AND/OR DEAF OR PERFORM TASKS FOR THOSE WITH PSYCHIATRIC DISABILITIES SUCH AS POST TRAUMATIC STRESS OR TRAUMATIC BRAIN INJURY. THESE SPECIALLY TRAINED DOGS CAN EVEN HELP BY RETRIEVING OR MANIPULATING OBJECTS THAT ARE OUT OF THEIR PERSON'S REACH, ALERTING BYSTANDERS AND RETRIEVING HELP FOR THEIR HANDLER, LEADING WHILE AVOIDING DISTRACTIONS AND OBSTACLES, AND MANY OTHER INDIVIDUAL TASKS AS NEEDED BY A PERSON WITH A DISABILITY. THESE HEROES NOT ONLY IMPROVE THE LIVES OF THE PEOPLE WITH WHOM THEY WORK, BUT ALSO KEEP THEM SAFE EVERY DAY.

THERAPY DOGS CREDENTIALLED ANIMAL-ASSISTED THERAPY (AAT) DOGS ARE PART OF A THERAPEUTIC PLAN TO AID WITH PHYSICAL, SOCIAL, EMOTIONAL, AND COGNITIVE CHALLENGES FOR PERSONS OTHER THAN THE DOG'S OWNER/HANDLER. AAT HAS BEEN SHOWN TO HELP ENHANCE THE LIVES OF PEOPLE IN NEED SUCH AS CHILDREN WHO HAVE EXPERIENCED ABUSE OR NEGLECT, PATIENTS UNDERGOING CHEMOTHERAPY OR OTHER DIFFICULT MEDICAL TREATMENTS, AND MILITARY VETERANS AND THEIR FAMILIES WHO ARE STRUGGLING TO COPE WITH THE EFFECTS OF WARTIME MILITARY SERVICE. STUDIES HAVE FOUND THAT AAT LOWERS BLOOD PRESSURE, REDUCES STRESS AND ENHANCES A PATIENT'S ABILITY TO ACHIEVE PHYSICAL AND PSYCHOLOGICAL WELLNESS.

MILITARY DOGS MILITARY WORKING DOGS FIRST ENTERED THE SERVICE IN 1942

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TO SERVE IN THE ARMY'S K-9 CORPS. TODAY, THESE DOGS ARE STILL PLAYING AN ACTIVE ROLE IN SEARCHING FOR EXPLOSIVES AND SEIZING ENEMIES. MILITARY WORKING DOGS HAVE BEEN USED BY THE U.S. ARMED FORCES SINCE WORLD WAR I. IN WORLD WAR II, 436 SCOUT DOGS WALKED COMBAT PATROLS OVERSEAS, OFTEN DETECTING THE ENEMY AT 1,000 YARDS, LONG BEFORE THE ENEMY BECAME AWARE OF THEM. DOGS CONTINUED TO SERVE WITH DISTINCTION IN OTHER CONFLICTS, SUCH AS KOREA, WHERE THE ARMY USED ABOUT 1,500 DOGS, PRIMARILY FOR GUARD DUTY. DURING THE VIETNAM WAR, NEARLY 4,000 DOGS WERE EMPLOYED AND, OFFICIALLY, 281 WERE KILLED IN ACTION. TODAY'S CONFLICTS INCLUDE DOGS AT EVERY LEVEL, STILL SERVING OUR COUNTRY, HELPING TO PROTECT OUR TROOPS.

EMERGING HERO AND SHELTER DOGS JUST AS OUR UNDERSTANDING OF ANIMAL BEHAVIOR AND SCIENCE IS EVER EXPANDING, SO TOO DO THE AMAZING STORIES OF THE HUMAN ANIMAL BOND IN ACTION. DOGS IN THIS CATEGORY CAN BE NOMINATED FOR DOING HEROIC DEEDS, LARGE OR SMALL; FOR OVERCOMING DIFFICULT ODDS; OR BY HAVING A REMARKABLE RESCUE STORY LIKE THE MILLIONS OF HOMELESS DOGS IN SHELTERS, ON THE STREETS, OR NEEDING HELP FROM UNFAVORABLE SITUATIONS. WHETHER IT WAS A SECOND CHANCE AND A NEW "LEASH" ON LIFE OR JUST A PERFECT FIT THAT WAS MEANT TO BE, THESE DOGS HIGHLIGHT WHAT IT MEANS TO BE MAN'S BEST FRIEND.

AFTER VOTING BY THE AMERICAN PUBLIC, WINNERS IN EACH CATEGORY ARE HONORED AT THE STAR-STUDED AMERICAN HUMANE HERO DOG AWARDS GALA IN PALM BEACH, FLORIDA.

THIS POPULAR, YEARLY NATIONAL CAMPAIGN DRAWS HUNDREDS OF COURAGEOUS CANINES FROM ACROSS THE COUNTRY, MORE THAN A MILLION VOTES BY THE

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AMERICAN PUBLIC, AND FOUR BILLION MEDIA IMPRESSIONS, INCLUDING FEATURES BY NBC NIGHTLY NEWS WITH LESTER HOLT KID'S EDITION, TODAY SHOW AND PEOPLE MAGAZINE ALL CULMINATING IN A CELEBRITY-STUDED, NATIONAL TELEVISION BROADCAST.

AMERICAN HUMANE SANCTUARY

DURING FISCAL YEAR 2024, AMERICAN HUMANE PURCHASED A 14.2-ACRE PROPERTY IN PALM CITY, FLORIDA, AS THE NEW HOME OF THE AMERICAN HUMANE SANCTUARY. FOLLOWING THE SALE OF THE ORIGINAL WEST PALM BEACH PROPERTY, ALL OPERATIONS TRANSITIONED TO THE NEW LOCATION.

STRATEGICALLY LOCATED IN PALM CITY, THE SANCTUARY IS HOME TO SEVERAL KEY PROGRAMS:

PUPS4PATRIOTS: THE NEW FACILITY WILL HOST AMERICAN HUMANE'S FIRST RESIDENTIAL TRAINING PROGRAM, HELPING VETERANS RECEIVE SERVICE DOGS FASTER. GRADUATES WILL ALSO HAVE OPPORTUNITIES FOR ADVANCED TRAINING IN THIS THERAPEUTIC ENVIRONMENT.

ANIMAL RESCUE: THE SANCTUARY WILL TRAIN AMERICAN HUMANE (AH) FIRST RESPONDERS TO DEPLOY TO NATURAL DISASTERS WORLDWIDE. RESCUE VEHICLES WILL BE STATIONED ON-SITE FOR TOURS AND EDUCATIONAL PURPOSES.

CHILDREN'S HUMANE EDUCATION: EDUCATIONAL PROGRAMS, POTENTIALLY FEATURING ANIMAL INTERACTIONS, WILL INCLUDE THE AWARD-WINNING BE KIND TO ANIMALS CURRICULUM AND CHICKEN SOUP FOR THE SOUL TEACHING MATERIALS.

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IN ADDITION, THE SANCTUARY FEATURES STATE-OF-THE-ART FACILITIES CURRENTLY UNDER RENOVATION, INCLUDING:

MULTI-SPECIES BARN AND FARM PADDOCKS: RESCUE ANIMALS, INCLUDING DOGS, CATS, RABBITS, COWS, DUCKS, AND MORE, WILL BE CARED FOR IN A MULTI-SPECIES FARM SETTING.

VETERINARY TRIAGE CENTER: LOCATED IN THE 9,000 SQ. FT. MULTI-SPECIES BARN, THE CENTER WILL PROVIDE FIRST AID AND CRITICAL CARE FOR ANIMALS.

BETTY WHITE HEALING GARDEN: A LIFE-SIZED BRONZE SCULPTURE OF BETTY WHITE WILL WELCOME VISITORS, HONORING HER LEGACY AS A SUPPORTER OF AMERICAN HUMANE.

THE SANCTUARY SERVES AS A RETREAT FOR WOUNDED VETERANS, WHERE THEY WILL BE PAIRED WITH SERVICE DOGS, AND A RESCUE CENTER OFFERING HOPE, HEALING, AND TRANSFORMATIVE EXPERIENCES. THIS INNOVATIVE HUMANE HOME WILL BENEFIT ANIMALS, VETERANS, AND ADVOCATES FOR GENERATIONS, SHOWCASING AMERICAN HUMANE'S COMMITMENT TO LIFESAVING SERVICES AND EDUCATION.

EXPENSES \$ 6,757,617. INCLUDING GRANTS OF \$ 22,790. REVENUE \$ 0.

AMERICAN HUMANE PET PROVIDER PROGRAM

PETS HAVE ALWAYS HELD A SPECIAL PLACE IN OUR LIVES, AND IT'S IMPORTANT TO CONSIDER NOT ONLY WHERE THEY COME FROM BUT ALSO WHO CARES FOR THEM BEFORE THEY JOIN OUR FAMILIES. PET PROVIDERS WHO MEET AMERICAN HUMANE'S RIGOROUS CERTIFICATION STANDARDS SET THEMSELVES APART, GIVING PET

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OWNERS CONFIDENCE THAT THEIR PETS WERE TREATED HUMANELY THROUGHOUT THE PROCESS.

AMERICAN HUMANE'S PET PROVIDER PROGRAM ASSESSES THE CONDITION, WELL-BEING AND WELFARE OF SMALL MAMMALS, BIRDS, REPTILES, AMPHIBIANS, INVERTEBRATES AND AQUATIC LIFE AT PET PROVIDER LOCATIONS AND ANIMAL SUPPLIERS. AMERICAN HUMANE CERTIFIED BRANDS PRIORITIZE ANIMAL WELFARE, FOLLOWING SCIENCE-BASED PRACTICES VERIFIED THROUGH INDEPENDENT AUDITS.

THE HUMANE TREATMENT OF ALL ANIMALS IS A CORE PRINCIPLE AT AMERICAN HUMANE. WHEN CONSUMERS SEE THE AMERICAN HUMANE CERTIFIED SEAL, THEY CAN TRUST THEIR PETS HAVE RECEIVED HIGH LEVELS OF CARE AND ATTENTION. FOLLOWING RIGOROUS AUDITS ADMINISTERED BY AMERICAN HUMANE AUDITORS, CERTIFIED PET PROVIDERS ARE AWARDED THE COVETED AMERICAN HUMANE CERTIFIED SEAL OF APPROVAL. ANIMAL WELFARE STANDARDS ARE REGULARLY REVIEWED BY THE PROGRAM'S SCIENTIFIC ADVISORY COMMITTEE, AN INTERNATIONAL GROUP OF ANIMAL SCIENCE EXPERTS, VETERINARIANS, AND ETHICISTS. CERTIFIED PROVIDERS SHOULD BE COMMENDED FOR PROACTIVELY TAKING THE NEXT STEP TO ENSURE ANIMALS IN THEIR CARE ARE TREATED HUMANELY AND ETHICALLY.

AMERICAN HUMANE WORKING ANIMALS PROGRAM

THE AMERICAN HUMANE WORKING ANIMALS PROGRAM HELPS VERIFY THE WELFARE AND HUMANE TREATMENT OF ANIMALS WHEREVER THEY LIVE AND WORK. AMERICAN HUMANE'S WORKING ANIMALS CERTIFICATION PROGRAM AUDIT ASSESSES THE CONDITION, WELL-BEING, AND WELFARE OF DOMESTICATED ANIMALS TRAINED TO PERFORM CERTAIN SPECIALIZED TASKS, WHICH MAY APPEAR AT PUBLIC

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DEMONSTRATIONS, PERFORMANCES AND/OR APPEARANCES.

THE PROGRAM ENFORCES RIGOROUS, SCIENCE-BASED, AND COMPREHENSIVE CRITERIA FOR ANIMAL WELFARE, REVIEWED BY AN INDEPENDENT SCIENTIFIC ADVISORY COMMITTEE COMPOSED OF WORLD-RENOWNED LEADERS IN THE FIELDS OF ANIMAL SCIENCE, VETERINARY MEDICINE, AND ANIMAL BEHAVIOR.

AREAS OF CERTIFICATION EVALUATION INCLUDE BUT ARE NOT LIMITED TO HOUSING AND ENVIRONMENT, ANIMAL HEALTH, APPEARANCE AND BEHAVIOR, NUTRITION, VETERINARY CARE, AND CLEANLINESS/SANITATION. IN ADDITION TO PERMANENT HOUSING FACILITIES, AMERICAN HUMANE ASSESSES TRANSPORT, PUBLIC PERFORMANCES, SOCIAL INTERACTIONS WITH THE PUBLIC, SAFE AND STIMULATING TEMPORARY ENVIRONMENTS, AND EVIDENCE OF THOROUGH PREPARATION AND PROTOCOLS ESTABLISHED TO HANDLE MEDICAL CARE.

AMERICAN HUMANE IN ACTION

AMERICAN HUMANE IN ACTION IS A TV SERIES THAT PROVIDES VIEWERS WITH A FIRSTHAND LOOK AT HOW THEIR GROUNDBREAKING PROGRAMS AFFECT CHANGE IN THE REAL WORLD, FROM ANIMALS RESCUED FROM PERILOUS DISASTERS TO ENDANGERED SPECIES ON THE BRINK OF EXTINCTION. HOSTED BY AMERICAN HUMANE CEO AND PRESIDENT DR. ROBIN GANZERT, THE SERIES FEATURES HOLLYWOOD STARS FOUR-LEGGED AND TWO-LEGGED LEADING CONSERVATIONISTS, FRONTLINE RESCUE WORKERS, THOSE BATTLING TO KEEP OUR COUNTRY SAFE AND THOSE WHO ENSURE A HUMANE FOOD SUPPLY.

EACH EPISODE SHINES A SPOTLIGHT ON A DIFFERENT PROGRAM AREA: RESCUE, MILITARY, CONSERVATION, HOLLYWOOD, AND FARM, WITH AN OVERARCHING THEME

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EMPHASIZING HOW WE CONTINUE TO STRENGTHEN THE HUMAN-ANIMAL BOND.

WATCH AMERICAN HUMANE IN ACTION ON OUR YOUTUBE CHANNEL.

PUBLIC EDUCATION, PREVENTION, AND OUTREACH

AS THE LEADER ON ANIMAL WELFARE ISSUES SINCE 1877, NEWS ORGANIZATIONS ARE CONSTANTLY SEEKING AMERICA HUMANE'S EXPERTISE AND COMMENTARY. THEY WORK WITH THOUSANDS OF LOCAL, REGIONAL, AND NATIONAL NEWS GROUPS TO GET OUT LIFESAVING INFORMATION AND SPREAD OUR MESSAGE OF COMPASSION, CARING AND HOPE. HIGHLIGHTS OF OUR EDUCATIONAL OUTREACH INCLUDE:

REACHING THE WORLD WITH OUR HUMANE MESSAGES, REACHING MILLIONS OF PEOPLE, ENCOURAGING THEM TO BE KIND TO ANIMALS AND PROVIDING THEM WITH TOOLS TO CREATE A MORE COMPASSIONATE WORLD.

GENERATING MAJOR NEWS STORIES ON HELPING ANIMALS CARRIED BY PROMINENT NATIONAL PUBLICATIONS, NEWSPAPERS, MAGAZINES, AND NEWS STATIONS.

TOUCHING MILLIONS THROUGH A NATIONAL TELEVISION BROADCAST OF THE 13TH ANNUAL AMERICAN HUMANE HERO DOG AWARDS ON A&E AND FYI NETWORKS IN 2023, AND IN PREVIOUS YEARS ON HALLMARK CHANNEL WITH ITS 80 MILLION+ SUBSCRIBERS. THIS ANNUAL CAMPAIGN HIGHLIGHTS THE LIFE-CHANGING, LIFE-SAVING POWER OF THE BOND BETWEEN ANIMALS AND PEOPLE.

OUR AWARD-WINNING NATIONAL TELEVISION AND RADIO PSAS AND BILLBOARD CAMPAIGNS ARE REACHING MILLIONS OF PEOPLE EACH YEAR WITH LIFESAVING INFORMATION, MESSAGES OF COMPASSION, AND PRACTICAL WAYS THE PUBLIC CAN

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SUPPORT HUMANE FARMING, HUMANE CONSERVATION OF THE WORLD'S REMARKABLE AND ENDANGERED CREATURES, VETERANS NEEDING SERVICE DOGS, AND ANIMALS CAUGHT IN DISASTERS AND CRUELTY CASES. TO ENCOURAGE PEOPLE TO RESCUE, ADOPT AND SAVE ANIMALS IN NEED, AMERICAN HUMANE RAN BILLBOARDS ACROSS THE COUNTRY REMINDING PEOPLE TO "BE A HERO."

DELVING INTO VARIOUS ANIMAL WELFARE TOPICS, ROBIN'S NEST IS A PODCAST HOSTED BY DR. ROBIN GANZERT. THE SHOW FEATURES CONVERSATIONS WITH CELEBRITIES, VETERINARIANS, CONSERVATIONISTS, AND OTHER EXPERTS. EACH EPISODE FOCUSES ON DIFFERENT FACETS OF ANIMAL PROTECTION, CONSERVATION EFFORTS, AND HEARTWARMING ANIMAL STORIES, ALL WITHIN ABOUT 25 MINUTES PER EPISODE. IN ITS DEBUT SEASON IT WAS RANKED AS ONE OF THE TOP 25 PODCASTS IN THE CULTURE AND SOCIETY GENRE AND IT IS SLATED FOR A SEASON 2 THAT WILL BE ACCESSIBLE ON ALL PODCAST STREAMING PLATFORMS.

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

THE FORM 990 IS DISTRIBUTED TO THE BOARD BUDGET AND FINANCE COMMITTEE FOR REVIEW AND APPROVAL AND TO THE BOARD OF DIRECTORS FOR THEIR REVIEW AND COMMENT PRIOR TO FILING.

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

THE CONFLICT OF INTEREST POLICY IS TO PROTECT THE INTERESTS OF THE ASSOCIATION WHEN IT IS CONTEMPLATING TAKING AN ACTION OR MAKING A DECISION THAT MAY BENEFIT THE PRIVATE INTERESTS OF A "RESPONSIBLE PERSON" OR RELATED PARTY. A "RESPONSIBLE PERSON" IS ANY DIRECTOR, CORPORATE OFFICER OF VICE PRESIDENT OR HIGHER, OR MEMBER OF A COMMITTEE WITH BOARD-DELEGATED POWERS OF THE ASSOCIATION. EACH "RESPONSIBLE PERSON" SHALL, UPON ELECTION OR APPOINTMENT AND ANNUALLY THEREAFTER, SIGN A STATEMENT THAT AFFIRMS SUCH

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PERSON 1) HAS RECEIVED A COPY OF THE POLICY 2) HAS READ AND UNDERSTANDS THE POLICY AND 3) HAS AGREED TO COMPLY WITH THE POLICY. IN ADDITION, EACH "RESPONSIBLE PERSON" SHALL, UPON ELECTION OR APPOINTMENT AND ANNUALLY THEREAFTER, COMPLETE A DISCLOSURE FORM IDENTIFYING ANY INTERESTS, POSITIONS OR RELATIONSHIPS THAT HE OR SHE BELIEVES COULD CONTRIBUTE TO A CONFLICT OF INTEREST. DISCLOSURE FORMS SHALL BE SUBMITTED TO THE BOARD OF DIRECTORS FOR REVIEW AND EVALUATION. IF A CONFLICT OF INTEREST ARISES WITH RESPECT TO A PARTICULAR MATTER TO BE ACTED UPON BY THE ASSOCIATION, 1) THE "RESPONSIBLE PERSON" MUST DISCLOSE TO THOSE CHARGED WITH MAKING THE DECISION ON BEHALF OF THE ASSOCIATION ALL FACTS MATERIAL TO THE CONFLICT OF INTEREST AND ANY MATERIAL FACTS THAT BEAR ON THE DECISION FROM THE STANDPOINT OF THE ASSOCIATION, PRIOR TO THE ASSOCIATION TAKING ACTION AND 2) ALTHOUGH THE "RESPONSIBLE PERSON" MAY MAKE A PRESENTATION AT THE MEETING, AND RESPOND TO QUESTIONS, HE OR SHE MUST EXCUSE HIMSELF OR HERSELF FROM DELIBERATION AND DEBATE ON THE MATTER, AND MUST NOT ATTEMPT TO EXERT HIS OR HER PERSONAL INFLUENCE WITH RESPECT TO THE MATTER, EITHER AT OR OUTSIDE THE MEETING. THE ASSOCIATION MAY APPROVE THE MATTER IF 1) THE MATERIAL FACTS AS TO THE "RESPONSIBLE PERSON'S" OR RELATED PARTY'S INTEREST, POSITION OR RELATIONSHIP GIVING RISE TO THE CONFLICT OF INTEREST, AND AS TO THE MATTER, ARE DISCLOSED OR ARE KNOWN TO THE BOARD OF DIRECTORS OR ANY BOARD COMMITTEE DELEGATED AUTHORITY OVER THE MATTER AND 2) THE BOARD OR BOARD COMMITTEE IN GOOD FAITH AUTHORIZES, APPROVES OR RATIFIES THE MATTER BY THE AFFIRMATIVE VOTE OF A MAJORITY OF ALL OF THE DISINTERESTED DIRECTORS OR COMMITTEE MEMBERS AT A MEETING AT WHICH A QUORUM IS PRESENT, EVEN THOUGH THE DISINTERESTED DIRECTORS OR COMMITTEE MEMBERS ARE LESS THAN A QUORUM.

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

Name of the organization

AMERICAN HUMANE ASSOCIATION

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THE BOARD OF DIRECTORS DELEGATES COMPENSATION DETERMINATION FOR THE PRESIDENT AND CHIEF EXECUTIVE OFFICER TO THE BOARD COMPENSATION COMMITTEE. THE BOARD COMPENSATION COMMITTEE USES SALARY SURVEYS GATHERED FROM AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES, CHRONICLE OF PHILANTHROPY, ASSOCIATION OF FUNDRAISING PROFESSIONALS, AND ECONOMIC RESEARCH INSTITUTE AS WELL AS COMPENSATION INFORMATION FOR SIMILAR POSITIONS OF SIMILAR ORGANIZATIONS FOR THE DETERMINATION OF COMPENSATION. THE COMMITTEE ALSO FACTORS IN GEOGRAPHIC PAY DIFFERENTIAL, EXPERIENCE, EDUCATION, PERFORMANCE, SCOPE OF DUTIES, INTERNAL EQUITY, AND SALARY HISTORY OF INDIVIDUALS IN THE COMPENSATION PROCESS. THIS PROCESS IS DONE ON AN ANNUAL BASIS. THE PRESIDENT AND CHEIF EXECUTIVE OFFICER USE A SIMILAR COMPENSATION FOR OFFICERS AND KEY EMPLOYEES. MARKET DATA FOR SIMILAR SIZED NON-PROFIT ORGANIZATIONS IS REVIEWED AND GEOGRAPHIC PAY DIFFERENTIAL, EXPERIENCE, EDUCATION, PERFORMANCE, SCOPE OF DUTIES, INTERNAL EQUITY AND SALARY HISTORY ARE CONSIDERED. THE PRESIDENT AND CEO SHALL ANNUALLY REPORT TO THE BOARD OF DIRECTORS REGARDING COMPLETION OF THIS RESPONSIBILITY.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, AK, AZ, CA, CO, CT, FL, GA, HI, IL, KS, KY, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND, OH, OK
OR, PA, RI, SC, TN, UT, VA, WA, WV, WI, ME, MO, NV, SD

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

THE ASSOCIATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND AUDITED FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

CONSULTANTS:

PROGRAM SERVICE EXPENSES

76,785.

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MANAGEMENT AND GENERAL EXPENSES	8,023.
FUNDRAISING EXPENSES	21,302.
TOTAL EXPENSES	106,110.

SUBCONTRACTORS:

PROGRAM SERVICE EXPENSES	1,830,556.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	1,830,556.

CONSULTANT TRAVEL:

PROGRAM SERVICE EXPENSES	82,889.
MANAGEMENT AND GENERAL EXPENSES	8,661.
FUNDRAISING EXPENSES	22,995.
TOTAL EXPENSES	114,545.

OTHER CONSULTING SERVICES:

PROGRAM SERVICE EXPENSES	2,973,718.
MANAGEMENT AND GENERAL EXPENSES	266,340.
FUNDRAISING EXPENSES	646,628.
TOTAL EXPENSES	3,886,686.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	5,937,897.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN VALUE OF BENEFICIAL INTEREST IN PERPETUAL TRUSTS	434,832.
CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS	-137,464.
TOTAL TO FORM 990, PART XI, LINE 9	297,368.

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

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?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

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)				
(2)				
(3)				
(4)				
(5)				
(6)				

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) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners sec. 501(c)(3) orgs.?		(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropor- tionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS:

NAME OF RELATED ORGANIZATION:

GLOBAL HUMANE CONSERVATION FUND OF AFRICA

PRIMARY ACTIVITY: CONSERVING, REWILDING, AND SAFEGUARDING AFRICA'S
DIVERSE, ECOSYSTEMS AND WIL