

Office of Commissioner of the Revenue Karen I. Rose 409 South Main Street Harrisonburg, Virginia 22801 ctycomm@harrisonburgva.gov Phone 540-432-7704 Fax 540-432-7781

February 2, 2016

The Honorable Chris Jones, Mayor City of Harrisonburg 409 South Main Street Harrisonburg, VA 22801

RE: Additional Personal Property Tax Exemption for Anicira Veterinary Center

Dear Mayor Jones:

The committee has reviewed the Application for Tax Exemption and all the supporting documentation (tax returns, financial statements, bylaws, personal property forms etc.) for Anicira Veterinary Center. The business vehicle for which they are requesting exemption at the current tax rate would generate \$603.75 of revenue in 2016. The committee recommends that City Council approve the request for exemption.

Thank you for your consideration of this matter.

Respectfully yours.

Karen I. Rose

Commissioner of the Revenue

Jeffrey L. Shafer

Treasurer

Larry Propst
Director of Finance



Office of Commissioner of the Revenue Karen I. Rose 409 South Main Street, Harrisonburg, Virginia 22801-3610 ctycomm@harrisonburgva.gov Phone 540-432-7704 Fax 540-432-7781

February 2, 2016

To:

Jeff Shafer Larry Propst

From: Karen Rose

Re: Anicira Veterinary Center application for exemption of personal property taxes

Anicira Veterinary Center (formerly Shenandoah Valley Spay and Neuter) has requested exemption of personal property taxes on a van that was purchased by the Center in 2013 and was not owned by them when they obtained personal property exemption from City Council in March 2008. This van is used for transporting their patients for spay/neuter procedures and preventive care services. They paid \$713.13 of personal property taxes on the vehicle in 2014 and \$674.63 in 2015. They currently were exempted \$1641 for business equipment and \$615 for other vehicles in 2015. They disposed of 2 of their vehicles near the end of 2015. I have enclosed their application for your review. Please initial on the front page of the application as well as sign the enclosed letter if you are in agreement with recommending to City Council to grant the additional exemption on this vehicle and return all paperwork to me.



City of Harrisonburg APPLICATION FOR TAX EXEMPTION

FOR OFFICE USE ONLY:

PAYMENT AMOUNT: 50,000

RECEIVED ON: 12 18 15

CHECK NUMBER: 6765

The information requested on this application must be filled out completely and returned to the City Manager's office on or before January 30. <u>Include a \$50 application fee made payable to City of Harrisonburg</u>.

financial statement (audited, if available); (5)	most recently filed IRS Form 990 or 990EZ.	, ,
ORGANIZATION NAME:	Anicira Veterinary Center COR	Kel
MAILING ADDRESS:	910 N. Liberty Street Trasver	0
,	Harrisonburg, VA 22802	Vi.
CONTACT PERSON AND PHONE:	<u>Laura Mansfield – 540-437-1980</u>	
Type of property for which request is mad	e (circle applicable) PERSONAL PROPERTY REAL ESTATE	
If requesting a personal property exemption exemption is sought.	, please attach a detailed itemized listing of the specific item(s) for which	the
If requesting a real estate exemption, comp	plete the following on each parcel for which exemption is sought:	
Name in which property is held	anicira Veterinary Center	
Property address	· · · · · · · · · · · · · · · · · · ·	
Map identification number	NA	
Taxes paid for the preceding three (3) years		
Name in which property is held		
Property address		
Map identification number		
Taxes paid for the preceding three (3) years		
Name in which property is held		
Property address		
Map identification number		
Taxes paid for the preceding three (3) years		

If requestin	g a personal property exemp	tion, complete the	e following for each account for	which exempti	ion is sought				
Name assess	sed	Shenandoah	Valley Spay Neuter Clinic		and a second plant of the part of the second				
Account nun	nber	9000011146	9000011146/9000008672						
Asset type a	nd location address 2015		0 N Liberty Street Harrisonburg	VA 22802	<u>adio</u> 2013				
Taxes paid f	or the preceding three (3) year	W 17116.7	s 713,13	Purchas <u>\$ Was r</u>	esmus los				
Name assess	sed								
Account nur	nber	a manada in alla (alla America)		_					
Asset type a	nd location address								
Taxes paid f	for the preceding three (3) year	S							
Please comp § 58.1-3651.	, , ,		City Ordinance 4-2-17 (copy endinance is already tax-exempt?						
1,	\underline{X} Yes		is unough tax exemper	0	ulso PP				
	If yes, what is the property M		040 B 1, 040 B 2, 040 B 3 at	nd 040 B 45	Acct 900 and por				
	On what date was the exemp	tion granted?	<u>03/25/08 - 040 B 45; 04/14/</u>	09 – 040 B I 2 3	9000				
	How/By whom was the exem	ption granted?	City Council						
2.	religious conviction, race, co Does the organization hold a Control Board for serving alo	lor, sex, or nationa	n, policy, or practice that unlawful origin? Yes Yes Icoholic beverage license from the property? If yes, please at	X No he Virginia Alco					
4.	What compensation is paid to President / Bowd of	CGO: 8		zation?					
5.	What services does each dire Policy di Providity vi		employee render? - Stategic d goals.	fundi	an .				

6.	No.
7.	What percentage of the services provided by this organization is generated by funds received from donations, contributions, or local, state, or federal grants or funds? For purposes of this question, donation may include the providing of personal services or the contribution of in-kind or other material services.
8.	What specific services does the organization provide for the common good of the public? Affordable veterinary Medical Services Pet Food Partry Humane education and Outreach.
9.	What percentage of the activities of the organization involves carrying on propaganda or otherwise attempting to influence legislation? Less than one purcent.
10	Does the organization participate or intervene in any political campaign on behalf of any candidate for public office? Yes X No
attached to knowingly acknowled	(printed name), do hereby certify that the information provided and/or this Application for Tax Exemption, is true and accurate, to the best of my knowledge. I acknowledge that providing false information will result in criminal charges pursuant to <i>Code of Virginia</i> § 58.1-11. It ge that the organization I represent may be subjected to audit by the Commissioner of the Revenue, or an employee of the Commissioner of the Revenue, to ensure that all information provided is true and correct.
Signature	Martiell 12-16-2015 Date
Title	JENNIFER MARIE BROWN NOTARY PUBLIC REGISTRATION # 7587004 COMMONWEALTH OF VIRGINIA OF COMMONWEALTH OF VIRGINIA

Form **990**

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

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

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

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

Inspection

A +	or the	2014 calendar year, or tax year beginning									
B CI	neck if plicable	C Name of organization		D Employer identific	eation number						
	Addres	s ANICIRA VETERINARY CENTER	M	20-8	358468						
X	Name change	Doing business as		20-8358468							
	Initial Jreturn	Number and street (or tiot box in that to not domested to	Room/suite	E Telephone number							
]Final return/	910 N LIBERTY ST			437-1980						
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$ 1,920,578.							
	Amenc return	ed HARRISONBURG. VA 22802		H(a) Is this a group re	eturn						
	Application	F Name and address of principal officer: CATE MANSFIELD	F Name and address of principal officer:CATE MANSFIELD								
	pendin	cluded? Yes No									
T	27.07	9 SAME AS C ABOVE smpt status: X 501(c)(3)	or 527	If "No," attach a	list. (see instructions)						
	labait	e: ▶ WWW.ANICIRA.ORG		H(c) Group exemption	n number 🕨						
J V	repsit	organization: X Corporation Trust Association Other	L Year		State of legal domicile: VA						
	p+ 1	Cummary			<u> </u>						
		Briefly describe the organization's mission or most significant activities: ANIC	TRA TS	COMMITTED '	TO SERVING						
မွ	1	ANIMALS AND OUR COMMUNITY THROUGH VETERI	MARY S	ERVICES EDI	UCATION.						
Governance		ANIMALS AND OUR COMMONITY THROUGH VEIGHT	and of more	then 25% of its not as	rote						
E.		Check this box if the organization discontinued its operations or dispo		_	5						
õ	3	runiber of rolling members of the governing) the second of the government			5						
8		Number of independent voting members of the governing body (Part VI, line 1b)		···	24						
es		Total number of individuals employed in calendar year 2014 (Part V, line 2a)			5						
vit		Total number of volunteers (estimate if necessary)									
Activities		· · · · · · · · · · · · · · · · ·			0.						
_	b	Net unrelated business taxable income from Form 990-T, line 34									
				Prior Year	Current Year						
<i>a</i>)	8	Contributions and grants (Part VIII, line 1h)		48,930.	131,917.						
Ē	9	Program service revenue (Part VIII, line 2g)		1,751,315.	1,785,646.						
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		39.	3,015.						
Œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.						
		Total revenue add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,800,284.	1,920,578.						
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.						
		Benefits paid to or for members (Part IX, column (A), line 4)	Į	0.	0.						
υn		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5:10)		959,503.	909,809.						
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.						
á		Total fundraising expenses (Part IX, column (D), line 25)	04.								
ŭ		Other expenses (Part IX, column (A), lines 11a-11c, 11f-24e)		706,559.	782,394.						
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,666,062.	1,692,203.						
		Revenue less expenses. Subtract line 18 from line 12		134,222.	228,375.						
<u>_ (y)</u>	19	Revenue less expenses, Subtract line to from line 12.	B.	eginning of Current Year	End of Year						
Net Assets or Fund Balances		***	1	1,078,937.	2,197,874.						
SSE		Total assets (Part X, line 16)	······ }	312,847.	1,211,345.						
age a		Total liabilities (Part X, line 26)	·····	766,090.	986,529.						
		Net assets or fund balances. Subtract line 21 from line 20		700,050	200,343.						
		Signature Block	a and atatan	ante and to the heat of m	u knowledge and heliaf it is						
		Ities of perjury, I declare that I have examined this return, including accompanying schedule			y knowledge and belief, it is						
true,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of w	nich preparei								
		Manufell	<u> </u>	2013							
Sig	1	olymatore of officer									
Her	e	CATE MANSFIELD, PRESIDENT/CEO									
		Type of print name and and		Date Check	TI PTIN						
		Print/Type preparer's name Preparer's signature	l l	ones _							
Paic	l	JAMES R. FRIES		14 / 29 / 15 self-employe							
Prep	arer	Firm's name BROWN, EDWARDS & COMPANY, LLP	_,	Firm's ElN ▶	54-0504608						
Use	Only	Firm's address 124 NEWMAN AVENUE		, _	401 404 6006						
		HARRISONBURG, VA 22801		Phone no. (5							
May	the I	RS discuss this return with the preparer shown above? (see instructions)			X Yes No						

432002 11-07-14

(Expenses \$

Form 990 (2014)

4e Total program service expenses ▶

Other program services (Describe in Schedule O.)

including grants of \$

1,618,791.

Form	990 (2014) ANICIRA VETERINARY CENTER 20-8358	468	Pa	age 3
Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	!	X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			ĺ
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			ĺ
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
•	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
40	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
10	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, IX, or X			
11				
	as applicable.	1000		15.71
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	11a	х	
	Part VI	1114		\vdash
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	446		х
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			х
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		 ^
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	ļ.,,		Х
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 257 If "Yes," complete Schedule D, Part X	11e		<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	l		х
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		3,7	
	Schedule D, Parts XI and XII	12a	X	<u> </u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			٠,,
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	ļ <u>.</u>	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	1		
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	<u> </u>	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
11	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	L	Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			T
10	1c and 8a? If "Yes," complete Schedule G, Part II	18	1	Х
40	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			Ī
19	complete Schedule G, Part III	19	1	Х
00-	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	1	X
zua	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	ļ	1
<u> </u>	II 165 to illio 204, did the digalization attach a copy of its dadiced in a local statements to this team.		990	(2014)

Page 4 Form 990 (2014) Part IV Checklist of Required Schedules (continued) Yes No 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or Х domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on X 22 Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Х 23 Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Х 24a Schedule K. If "No", go to line 25a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit Х transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Х 25b Schedule L, Part I 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," Х 26 complete Schedule L, Part II 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member Х of any of these persons? If "Yes," complete Schedule L, Part III 27 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, 28c director, trustee, or direct or indirect owner? If "Yes," complete Schedule L., Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation Х 30 contributions? If "Yes," complete Schedule M 31 Did the organization liquidate, terminate, or dissolve and cease operations? Х 31 If "Yes," complete Schedule N, Part I 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Х 32 Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?

If "Yes," complete Schedule R, Part V, line 2

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Х Form 990 (2014)

Х

X

Х

Х

33

34

35a

35b

36

37

37

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

Par	Statements Regarding Other IRS Filings and Tax Compilative								
	Check if Schedule O contains a response or note to any line in this Part V			Yes	No				
	A CONTRACTOR OF LAND STANDS AND AND STANDS	1 a 9	100000	103	NO				
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1b C							
b	Enter the number of Forms W-2G included in line 1a. Enter -0· if not applicable								
¢	(gambling) winnings to prize winners?	oportable garring	1c	Х	.*** . * .				
_	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			11.54					
za	filed for the calendar year ending with or within the year covered by this return								
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns		2b	Х	İ				
D	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)							
0-			3a		Х				
Ja L	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule		3b						
40	At any time during the calendar year, did the organization have an interest in, or a signature or other	authority over, a							
48	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		Х				
h	If "Yes," enter the name of the foreign country:	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	11.74.1	PN A					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccounts (FBAR).							
5a	and the state of t		5a		X				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transactions.	action?	5b		X				
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c						
Ra.	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the								
Va			6a		X				
h	If "Yes," did the organization include with every solicitation an express statement that such contribution	tions or gifts							
~	were not tax deductible?		6b						
7	Organizations that may receive deductible contributions under section 170(c).		THE R		155				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices provided to the payor?	7a		X				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b						
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required							
	to file Form 8282?		7c	4	X				
đ	If "Yes," indicate the number of Forms 8282 filed during the year	7d		dining!					
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	contract?	7e	ļ	X				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont	ract?	7f		X				
g	If the organization received a contribution of qualified intellectual property, did the organization file F	orm 8899 as required?	7g		<u> </u>				
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation file a Form 1098-C?	7h						
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	d by the			4.74.2				
	Sporsoning organization have exceed beauties the angle at any		8		1000				
9	Sponsoring organizations maintaining donor advised funds.				2000				
а	Did the sponsoning organization make any tansaction		9a	-					
b	• • • •		9b		To the same				
10	Section 501(c)(7) organizations. Enter:	100		195					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a 10b	1						
b	Gross receipts, included on Form 990, Part Vill, line 12, for public use of club facilities	100	1						
11	Section 501(c)(12) organizations. Enter:	11a			100 mm				
a	Gross income from members or shareholders	110	1						
b	Gross income from other sources (Do not net amounts due or paid to other sources against	11b							
	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a						
12a	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	100						
	Section 501(c)(29) qualified nonprofit health insurance issuers.								
13	the state of the s		13a						
а	Note. See the instructions for additional information the organization must report on Schedule O.								
t.				130					
b	organization is licensed to issue qualified health plans	13b							
_	E								
14a			14a		Х				
h	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu		14b						
	11 1007 1100 11100 4 10110 100 100 100 100 100		Fort	n 990	(2014)				

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

	Check if Schedule O contains a response or note to any line in this Part VI			X					
Sec	tion A. Governing Body and Management								
			Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year]							
	If there are material differences in voting rights among members of the governing body, or if the governing								
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	111111							
L	th 5								
_	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other								
2	officer, director, trustee, or key employee?	2		Х					
_	Did the organization delegate control over management duties customarily performed by or under the direct supervision								
3	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х					
	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X					
4	Did the organization hake any significant changes to its governing december to the properties of the organization become aware during the year of a significant diversion of the organization's assets?	5		X					
5	Did the organization have members or stockholders?	6		Х					
6	Did the organization have members of stockholders, or other persons who had the power to elect or appoint one or								
7a	more members of the governing body?	7a		Х					
	Are any governance decisions of the organization reserved to (cr subject to approval by) members, stockholders, or								
ь		7b		Х					
_	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	1200		10.7					
8		8a	х						
a	The governing body? Each committee with authority to act on behalf of the governing body?	8b	Х						
þ	Each committee with authority to act on behalf of the governing body:		-						
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 in Schedule O	9		Х					
	organization's mailing address? If "Yes, provide the names and addresses in ochedule organization of the Internal Revenue Code.)	1	1						
Sec	tion B. Policies (This Section B requests information about policies not required by the internal revenue codes)	VIII-	Yes	No					
	the state of the s	10a	100	X					
10a	Did the organization have local chapters, branches, or affiliates?	155		†					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	10b							
	and branches to ensure their operations are consistent with the organization's exempt purposes?	11a	X	1					
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?			12.71, 4					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	12a	х						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12b	 	X					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	120	1	 -					
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	12c	1	X					
	in Schedule O how this was done		Х	 					
13	Did the organization have a written whistleblower policy?		X	<u> </u>					
14	Did the organization have a written document retention and destruction policy?	1.7	1.00						
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?	15a		Х					
	The organization's CEO, Executive Director, or top management official	15b	\vdash	X					
b	Other officers or key employees of the organization	100	123						
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	1 2 1 1 1 1							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	160		Х					
	taxable entity during the year?	16a		1					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	3.50							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	466							
	exempt status with respect to such arrangements?	16b	<u></u>	<u>.l</u>					
Sec	ction C. Disclosure List the attates with which a copy of this Form 990 is required to be filed NONE								
17	LIST THE STATES WITH WHICH A CODY OF BIRST OFFICE OF TOGETHOUS TO BE MOST	مانمین د	blo						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only	, availa	VIC.						
	for public inspection. Indicate how you made these available. Check all that apply.								
	Own website Another's website X Upon request Other (explain in Schedule O)	nd II	امامه						
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, a	nu fina	icial						
	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:								
	THE ORGANIZATION - 540-437-1980								
	910 N LIBERTY ST, HARRISONBURG, VA 22802								

SHENA071

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 instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Name and little Average hours per week (list any hours for related organizations below line) Delow line	Check this box if neither the organiza (A)	(B)	(C)					_	(D)	(E)	(F)
(flist any hours for related organizations below line) (1) SUZANNE AUCKERMAN PRESIDENT (2) RAMONA MESSENGER SECRETARY (3) DENISE DAWSON DIRECTOR (4) PATRICIA HARDESTY DIRECTOR (5) TARA LANGSTON DIRECTOR (6) CATHERINE MANSFIELD (Isist any hours for related organizations which properly a part of the organization (W-2/1099-MISC) (W-2/1099-MISC) From the organizations (W-2/1099-MISC) From the organization (W-2/1099-MISC) From the organization (W-2/1099-MISC) From the organization (W-2/1099-MISC) O. O. O. O. O. O. O. O. O. O.	Name and Title	hours per	(do box offic	not c unle er an	Posi heck i ss per d a di	tion more son i recto	than dis both	one n an tee)	compensation	compensation	
X X 0 0 0		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization		compensation from the organization and related organizations
(2) RAMONA MESSENGER (2) RAMONA MESSENGER (3) DENISE DAWSON DIRECTOR (4) PATRICIA HARDESTY DIRECTOR (5) TARA LANGSTON DIRECTOR (6) CATHERINE MANSFIELD O.50 X X O. O. O. O. O. O. O. O.	(1) SUZANNE AUCKERMAN	0.50	x		x				0.	0.	0
(3) DENISE DAWSON DIRECTOR (4) PATRICIA HARDESTY DIRECTOR (5) TARA LANGSTON DIRECTOR (6) CATHERINE MANSFIELD (7) A A A A A A A A A A A A A A A A A A A		0.50								0	C
X			X	ļ	Х	ļ	_		U •	0.	
(4) PATRICIA HARDESTY DIRECTOR (5) TARA LANGSTON DIRECTOR (6) CATHERINE MANSFIELD 0.50 X 0. 0. 0. 7.87		0.50	x						0.	0.	
(5) TARA LANGSTON	(4) PATRICIA HARDESTY	0.50	1						0	0.	(
DIRECTOR X 0. 0. (6) CATHERINE MANSFIELD 45.00 Y 0. 7.87		0 50	╇	-		-	-	<u> </u>	0.	•	
(6) CATHERINE MANSFIELD 45.00	• •	0.50	v						0.	0.	
		45.00	- 22	╁╌	H	┢╌	\vdash	┝			
		43.00	1		х				85,774.	0.	7,87
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432007 11-07-14

Form 990 (2014)

Section A. Officers, Directors, Irus	tees, key Em	pioy	ees	, and	u ni	gne	31 U	omproye	ea (continued)				
(A)	(B)			(0				(D)	(E)			(F)	
Name and title	Average	/rio	Position (do not check more than one					Reportable	Reportable		Esti	mate	d
	hours per	box.	, unle	ss per	rson	is bot	h an	compensation	compensation	- 1		ount o	of
	week	offic	cer an	dad	recto	or/trus	tee)	from	from related			ther	
	(list any	ector						the	organizations				
	hours for	ar dir	es.			ated		organization	(W-2/1099-MISC	"		m the	
	related	stee (ruste		_	Sens		(W-2/1099-MISC)			-	nizati	
	organizations	al tru	anal t		loya	E 2				ļ	orgar	relate	
	below line)	Individual trustee or director	Institutional trustee	Officer	Кву етрюуче	Highest compensated employee	Битпег				orgai	IIZGEN	פווכ
	m10)	Η̈́	-E	ŭ	ā.	2 =	굡						
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And a state of the		1	┡	├-	├—	+-	1			\dashv			
					L		<u> </u>	05 774		$\overline{}$		<i>i</i> 0	72
1b Sub-total								85,774.		<u>0 </u>	- 1	, 0	73.
c Total from continuation sheets to Part V	II, Section A							0.		0.			0.
d Total (add lines 1b and 1c)					· · · · · ·	,		85,774.		0.		, 8	73.
2 Total number of individuals (including but r	not limited to t	nose	liste	ed a	bov	e) w	ho r	eceived more than \$100	0,000 of reportable				_
compensation from the organization													0
										-		Yes	No
3 Did the organization list any former officer,	, director, or tr	uste	e, ke	ey er	mpl	oyee	, or	highest compensated e	mployee on		1.1.	4.54	
line 1a? If "Yes," complete Schedule J for s										L	3		X
4 For any individual listed on line 1a, is the st			omp	ensa	atio	n an	d ot	her compensation from	the organization		3 30		100
and related organizations greater than \$15	0,000? If "Yes	, " cc	mpl	ete :	Sch	edul	e Ji	for such individual		L	4		X
5 Did any person listed on line 1a receive or	accrue compe	nsai	tion	from	n an	y un	relat	ted organization or indiv	idual for services				:: 15.
rendered to the organization? If "Yes," con	nplete Schedu	le J	for s	uch	per	son	. 		*********		5		X
Section B. Independent Contractors													
Complete this table for your five highest co	ompensated in	den	ende	ent o	cont	tract	ors t	that received more than	\$100,000 of com	oense	tion fi	om	
the organization. Report compensation for													
	the obtained	, ca	Cilc		*****			(B)	1		(C	}	
(A) Name and business	address	N	ON:	F!				Description of	services	Cc	mper		ıπ
							_						
							-					•	
							~						
										·		/	.,
2 Total number of independent contractors		not l	imite	ed to			iste	d above) who received r	nore than			설탕	
\$100,000 of compensation from the organ	ization 🕨					0					11.11	and in	griker H
								·		F	Form 9	3 90 ((2014)

		Check if Schedule O conta	па а георинов	o, note to diry iii	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from fax under sections 512 - 514
1 a	a	Federated campaigns	1a					
j t	b	Membership dues	1b					
ا ا		Fundraising events						
i c		Related organizations						
		Government grants (contribution						
2 f		All other contributions, gifts, grants						
2		similar amounts not included above	e 1f	131,917.				
2 .	a	Noncash contributions included in lines 1	1a-1f: \$					
Ö 1	h	Total. Add lines 1a-1f		>	131,917.			
				Business Code			i kanjan si nik depaken K	
2 2	а	SPAY/NEUTER SER	VICES	541900	1,785,646.	1,785,6 4 6.		
1	b							
	C							
2 2	d							
ز ا	e							
1		All other program service rever	nue					
		Total. Add lines 2a-2f			1,785,646.			
3		Investment income (including of						
		other similar amounts)			3,015.			3,015
4		Income from investment of tax	exempt bond	proceeds >				
5		Royalties						
"		110yanus	(i) Real	(ii) Personal				
	_	Gross rents	(7	1				
		Less: rental expenses						
1		Rental income or (loss)						
		Net rental income or (loss)			1		,	
1		Gross amount from sales of	(i) Securities	(ii) Other				
' '	a	assets other than inventory	(I) Occornace	(11) Galisi				
	D	Less: cost or other basis						
	_	and sales expenses						
		Gain or (loss)				•		
		Net gain or (loss)						
8	а	Gross income from fundraising						
8		including \$						
:		contributions reported on line						
		Part IV, line 18		1				
5		Less: direct expenses		'	1 1 1			
		Net income or (loss) from fund						
9	а	Gross income from gaming ac						
		Part IV, line 19		5				
1		Less: direct expenses				A REPORT OF THE		1
		Net income or (loss) from gam						
10	а	Gross sales of inventory, less						
		and allowances		a	1.84.4.4.4.4		figh from the	
		Less: cost of goods sold			make Alexandra			
	С	Net income or (loss) from sale						
\vdash		Miscellaneous Revenu	<u>le</u>	Business Cod	٦	ng pagkarang melilih di diberaha Melilih di		
11	а						<u> </u>	
	b							
1	C							
	d	***********				Virgini (Cignic Artist (Cris		I de Maria Digadent
	е			_	1 020 570	1,785,646	0	3,015
12		Total revenue. See instructions.		.	11,740,310.	严,100,040 。	1	Form 990 (20

Part IX Statement of Functional Expenses

	Check if Schedule O contains a response amounts reported on lines 6b,	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	other assistance to domestic organizations		одреносе		
	ic governments. See Part IV, line 21				
	d other assistance to domestic				
	. See Part IV, line 22				
	d other assistance to foreign				
	ons, foreign governments, and foreign				
•	. See Part IV, lines 15 and 16				
	aid to or for members				
•	ation of current officers, directors,				
	ind key employees	88,765.	62,865.	23,169.	2,731
	on not included above, to disqualified				
•	defined under section 4958(f)(1)) and				
persons des	scribed in section 4958(c)(3)(B)				
7 Other sala	ries and wages	706,298.	706,298.		
	n accruals and contributions (include				
	(k) and 403(b) employer contributions)	5,762.	5,762.		
9 Other emp	ployee benefits	64,510.	64,510.		
	es	44,474.	42,546.	1,721.	207
•	ervices (non-employees):				
	ent				
-		12,911.		12,911.	
•	g	13,188.		13,188.	
, ,	Il fundraising services. See Part IV, line 17				
	it management fees				
	ine 11g amount exceeds 10% of line 25,				
•	amount, list line 11g expenses on Sch O.)	74,338.	73,268.	1,070.	
	g and premotion	12,955.	9,105.		
	enses	48,179.	45,176.	3,003.	
	n technology				
-	sy	134,782.	133,113.	1,669.	
		38,373.	37,523.	850.	
	of travel or entertainment expenses				
•	deral, state, or local public officials				
•	ces, conventions, and meetings	7,392.	7,225.	150.	17
20 Interest					
	to affiliates				
	ion, depletion, and amortization	63,401.	60,902.	2,499.	<u>.</u>
23 Insurance	Į.	17,650.	13,018.	2,983.	1,649
24 Other expe	nses. Itemize expenses not covered				
	t miscellaneous expenses in line 24e. If line t exceeds 10% of line 25, column (A)				
	t line 24e expenses on Schedule 0.)				
	AL SUPPLIES	307,633.	307,633.		
b LAB A	ND OTHER PROGRAM F	21,285.	21,285.		
	CARD FEES	15,644.	13,899.	1,745.	
d EQUIP	MENT REPAIRS AND M	7,368.	7,368.		
e All other e	expenses	7,295.	7,295.		<u>, , , , , , , , , , , , , , , , , , , </u>
	ional expenses. Add lines 1 through 24e	1,692,203.	1,618,791.	68,808.	4,604
	. Complete this line only if the organization				
	column (B) joint costs from a combined				
	I campaign and fundraising solicitation.				
Check here					Form 990 (2014

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (B) (A) Beginning of year End of year 276,505. 210,142. 1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 3 26,474. 24,512. 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary 6 employees' beneficiary organizations (see instr). Complete Part II of Sch L Assets 7 Notes and loans receivable, net 84,343. 90,351. 8 Inventories for sale or use 8,270. 10,936. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 1,905,334. 10a basis. Complete Part VI of Schedule D 746,198. 1,673,825. 10c b Less: accumulated depreciation 10b 96,023. 11 Investments - publicly traded securities 11 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 13 25,722. 3,510. 14 14 Intangible assets 15 15 Other assets. See Part IV, line 11 2,197,874. 1,078,937. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 94,404. 56,823. 17 Accounts payable and accrued expenses 17 18 Grants payable 18 112,306 83,000. 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, Liabilities key employees, highest compensated employees, and disqualified persons. 22 Complete Part II of Schedule L 1,004,635. 173,024. 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of 25 312,847. 1,211,345. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ ЦХ and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 986,529. 766,090 27 Unrestricted net assets 28 Temporarily restricted net assets 28 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund

> 2,197,874. Form **990** (2014)

986,529.

32

33

766,090.

1,078,937.

31

33

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization ANTCIRA VETERINARY CENTER Employer identification number 20-8358468

Pai	11	Reason for Public C	harity Status (A	l organizations must co	mplete this	s part.) See	e instructions.						
he o	organi	zation is not a private founda	ation because it is: (F	or lines 1 through 11, cl	neck only (one box.)							
1		A church, convention of chu	rches, or association	n of churches described	in section	170(b)(1)	(A)(i).						
2		A school described in section						•					
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).											
4	ī	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,											
7		city, and state:											
5		An organization operated to	r the benefit of a coll	ege or university owned	or operate	ed by a go	vernmental unit describ	ed in					
J		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)											
_		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).											
6		An organization that normal	errinesir or governin	tial nort of its support fr	om a dove	mmental :	init or from the general i	public described in					
7				itiai part of its support if	oni a gove	on in thorse on t	and or none are german						
		section 170(b)(1)(A)(vi). (Co		U(A)(vi) (Complete Bort	ш								
8	37	A community trust describe	d in section 170(b)(I)(A)(VI). (Complete Fait	11.) navt frams		ne momhorchin face at	nd arnes receints from					
9	X	An organization that normal	ly receives: (1) more	tnan 33 1/3% of its sup	port from t	onunuuuo. maadtavaaan	115, Hembership rees, a	from groce investment					
		activities related to its exem	pt functions - subjec	t to certain exceptions,	ano (2) no	more mar	1 33 1/3% of its support	offer tune 20, 1075					
		income and unrelated busin		less section 511 tax) fro	m busines	sses acqui	red by the organization	aster surie so, 1975.					
		See section 509(a)(2). (Con	nolete Part III.)			50	0/- W4N						
10	\sqsubseteq	An organization organized a	nd operated exclusive	vely to test for public sa	tety. See s	ection 50	9(a)(4).	numbers of one or					
11		An organization organized a	nd operated exclusive	vely for the benefit of, to	perform t	he function	ns or, or to carry out the	purposes of one of					
		more publicly supported org	ganizations describe	d in section 509(a)(1) or	section 5	09(a)(2). S	see section 509(a)(3). O	neck the box in					
		lines 11a through 11d that o	describes the type of	supporting organization	n and com	plete lines	11e, 11f, and 11g.						
а	L.	Type I. A supporting orga	nization operated, su	pervised, or controlled	by its supp	ported org	anization(s), typically by	giving					
		the supported organization			majority o	of the direc	tors or trustees of the s	upporting					
		organization. You must c	ompiete Part IV, Se	ctions A and B.									
b		Type II. A supporting orga	anization supervised	or controlled in connect	tion with it	s supporte	ed organization(s), by ha	ving					
		control or management of	f the supporting orga	inization vested in the s	ame perso	ns that co	ntrol or manage the sup	ported					
		organization(s). You must	t complete Part IV,	Sections A and C.									
С		Type III functionally inte	grated. A supporting	organization operated	in connect	tion with, a	nd functionally integrate	ed with,					
		its supported organization	n(s) (see instructions)	. You must complete F	Part IV, Se	ctions A,	D, and E.						
d		Type III non-functionally	integrated. A supp	orting organization oper	ated in co	nnection w	rith its supported organi	zation(s)					
		that is not functionally int	egrated. The organiz	ation generally must sat	isfy a distr	ibution red	quirement and an attent	iveness					
		requirement (see instructi	ons). You must com	plete Part IV, Sections	A and D,	and Part	V.						
е		Check this box if the orga	nization received a v	vritten determination fro	m the IRS	that it is a	Type I, Type II, Type III						
•		functionally integrated, or	Type III non-function	nally integrated support	ing organiz	zation.							
f	Enti	er the number of supported of		, -									
		vide the following information		d organization(s).									
0		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the or		(v) Amount of monetary	(vi) Amount of					
		organization		(described on lines 1-9 above or IRC section	listed i governing o	document?	support (see	other support (see					
				(see instructions))	Yes	No	Instructions)	Instructions)					
				1-11-									
					43.2								
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LHA For Paperwork Reduction Act Notice, see the Instructions for

Form 990 or 990-EZ. 432021 09-17-14

Schedule A (Form 990 or 990-EZ) 2014

| 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, pleas	se complete Part I	II.)			
Sec	tion A. Public Support						
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.		garaya sa Kar				
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) ⊳	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on					1 1	
	securities loans, rents, royalties						
	and income from similar sources						
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.)					THE CONTRACTOR	
	Total support. Add lines 7 through 10				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	40	
12	Gross receipts from related activities	, etc. (see instructi	ons)			12	
13	First five years. If the Form 990 is fo						. [
	organization, check this box and sto	p here					
						14	%
	Public support percentage for 2014					15	%
15	Public support percentage from 2013 33 1/3% support test - 2014. If the	3 Schedule A, Part	II, line 14	n line 12 and line	14 ic 22 1/204 or r		
16	33 1/3% support test - 2014. If the	organization did no	or check the box o	n ine ro, and ine	14 15 33 17370 01 1	nore, oncor and box	▶ □
	stop here. The organization qualifies	as a publicly supp	orted organization	lina 19 or 16a and	f line 15 is 33 1/30	6 or more check thi	s hox
ì	33 1/3% support test - 2013. If the						
	and stop here. The organization qua	titles as a publicly	supported organiz	auon		and line 14 is 10% (or more
178	10% -facts-and-circumstances tes	st - 2014. If the org	janization did not (bie bev end sten !	e 13, 10a, 01 10b, aoro Evolain in Da	and line 14 is 1070 (zation
	and if the organization meets the "fa	cts-and-circumstar	ices" test, check t	nis pox and stop i	d organization	iit viitow the organi	zation .
	meets the "facts-and-circumstances	test. The organiza	mon qualifies as a	publicity supporte	u organizadon	17a and line 15 is 1	
ı	10% -facts-and-circumstances tes	st - 2013. If the org	anization did not	check a box on in	e io, iud, iuu, ur eten hero Evolei	n in Dart Vi how the	070 OI
	more, and if the organization meets t	ine "tacts-and-circu	ımstances" test, c	neck this box and	stop nere, explai	anization	.
	organization meets the "facts and cir	rcumstances" test.	ine organization	qualifies as a publ	h, chock this box	and see instructions	
18	Private foundation. If the organization	on ala not check a	oox on line 13, 16	ia, 100, 178, 01 17	One Critical DOX	edule A (Form 990	or 990-F7) 2014
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Schedule A (Form 990 or 990-EZ) 2014 ANICIRA VETERINARY CENTER Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to

Calestary var (or fixed lyear beginning in) Calestary var (or fi	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	
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Ro. Divint foundation lifthe experience did not check a box on line 14, 19a, or 19b, check this box and see instructions	20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions	<u>▶</u>

Yes No

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

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Pai	t IV Supporting Organizations (continued)			
		r	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	Pith	1000	
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in part yi.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	A STANS		
	tax year? If "No," describe in part yi how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,	1945		
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			arii ka
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	ļ.,	<u> </u>
2	Did the organization operate for the benefit of any supported organization other than the supported	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	7.4		
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		11.00	
	supervised, or controlled the supporting organization.	2		<u> </u>
Sec	tion 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		5505	
	or trustees of each of the organization's supported organization(s)? If "No," describe in part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	-11717		
	the supported organization(s).	1 1	<u> </u>	<u> </u>
Sec	ction D. 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, (1) a written notice describing the type and amount of support provided during the prior tax	1500000		
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the		A Graph	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	1 1 1 1 1 1	1
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	332.70		
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	1 234	
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		<u> </u>
Sec	ction 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):		
а				
b	The organization is the parent of each of its supported organizations. Complete line 3 below.	otruotion	al	
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	Struction		No
2	Activities Test. Answer (a) and (b) below.	11,1	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	20		
	that these activities constituted substantially all of its activities.	2a		785
Ŀ	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	O.L.	1	1
	activities but for the organization's involvement.	2b	+	10,00
3	Parent of Supported Organizations. Answer (a) and (b) below.			
2			1	
	trustees of each of the supported organizations? Provide details in Part VI.	3a	1	1
k	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	25		
	of its supported organizations? If "Yes," describe in Part VI, the role played by the organization in this regard.	3b		—

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Par	tV Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orga	anizations				
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All						
	other Type III non-functionally integrated supporting organizations must col	nplete S	Sections A through E.				
Secti	on 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					
	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)			
1	Aggregate fair market value of all non-exempt-use assets (see						
	instructions for short tax year or assets held for part of year):	11.64		경영화 : : 1200 원리 - 1200 원인			
a	Average monthly value of securities	1a					
	Average monthly cash balances	1b					
	Fair market value of other non-exempt-use assets	1c					
	Total (add lines 1a, 1b, and 1c)	1d					
	Discount claimed for blockage or other	- Contract					
	factors (explain in detail in Part VI):	A Section					
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 1-1/2% 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 .035	6					
7	Recoveries of prior-year distributions	7					
8	Minimum Asset Amount (add line 7 to line 6)	8					
Sect	ion C - Distributable Amount			Current Year			
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1					
<u>·</u>	Enter 85% of line 1	2					
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3					
4	Enter greater of line 2 or line 3	4					
5	Income tax imposed in prior year	5					
6	Distributable Amount. Subtract line 5 from line 4, unless subject to						
-	emergency temporary reduction (see instructions)	6					
7	Check here if the current year is the organization's first as a non-functional	ly-integ	rated Type III supporting orga	nization (see			
-	instructions).						

Schedule A (Form 990 or 990-EZ) 2014

Par	t V Type III Non-Functionally Integrated 509((a)(3) Supporting Orga	inizations (continued)	
	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	S		
	Amounts paid to acquire exempt-use assets			
	Qualified set-aside amounts (prior IRS approval required)			
	Other distributions (describe in Part VI). See instructions.	***		iner-
7	Total annual distributions. Add lines 1 through 6.		-W-17	
8	Distributions to attentive supported organizations to which the	ne organization is responsive)	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
		(i)	(ií)	(iii)
<u>.</u>	P. Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable
Secti	on E - Distribution Allocations (see instructions)		Pre-2014	Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
а				
b				
C			ANNAMA EHVENINE	
d				
e	From 2013			
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2014 distributable amount			
	Carryover from 2009 not applied (see instructions)			
<u>-</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section D,			
•	line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2014 distributable amount			
	Remainder, Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if			
·	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h			
Ŭ	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2015. Add lines 3j			
•	and 4c.			
8	Breakdown of line 7:			
a				
<u>b</u>				
	Excess from 2013			
	Excess from 2014			
•	LANGAA HUHLAUTT	.t	The same of the sa	

Schedule A (Form 990 or 990-EZ) 2014

Schedule A	(Form 990 or 990-EZ) 2014 ANICIRA VETERINARY CENTER	20-8358468 Page 8
Dart VI	(Form 990 or 990-EZ) 2014 ANICIRA VETERINARY CENTER Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or	
i dir Ai	Supplemental information. Provide the explanations required by facility into 10,7 actin, in	or mo, and race m, meeting
	Also complete this part for any additional information. (See instructions).	

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Name of the organization

Employer identification number

A	NICIRA VETERINARY CENTER	20-8358468						
Organization type (check	one);							
Filers of:	Section:							
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization							
	4947(a)(1) nonexempt charitable trust not treated as a private foundation							
	527 political organization							
Form 990-PF	501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation							
Check if your organization Note. Only a section 501(is covered by the General Rule or a Special Rule. c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ule. See instructions.						
General Rule								
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling ny one contributor. Complete Parts I and II. See instructions for determining a contributor							
Special Rules								
sections 509(a)(* any one contribu	ion described in section 501(c)(3) filing Form 990 or 990 EZ that met the 33 1/3% supports and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990 EZ), Part II, line 13, 16a stor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amout EZ, line 1. Complete Parts I and II.	, or 16b, and that received from						
year, total contri	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, 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. Do not 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								
but it must answer "No"	In that is not covered by the General Rule and/or the Special Rules does not file Schedule on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Feet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	B (Form 990, 990·EZ, or 990·PF), Form 990·PF, Part I, line 2, to						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Employer identification number

ANICIRA VETERINARY CENTER

20 - 8358468

Part I	Contributors (see instructions). Use duplicate copies of Part I if ac	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MERCK FOUNDATION 300 BRICKSTONE SQUARE ANDOVER, MA 01810	<u> </u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	SUZANNE AUCKERMAN 222 WEST BANK STREET BRIDGEWATER, VA 22812	<u> </u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	MERCK SHARPE AND DOHME CORO ONE MERCK DRIVE WHITEHOUSE STATION, NJ 08889	\$ 7,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
423452 11-0	5-14	\$Schedule B (Form	Person Payrotl Noncash (Complete Part II for noncash contributions.) 990, 990-EZ, or 990-PF) (2014

Employer identification number

ANICIRA VETERINARY CENTER

20-8358468

Part II	Noncash Property (see instructions). Use duplicate copies of Part I	I 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
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
423453 11-0	15-14	Schedule B (Form	990, 990-EZ, or 990-PF) (201

Employer identification number

III – Ę	VETERINARY CENTER xclusively religious, charitable, etc., contact the pay one contributor Complete.	ributions to organizations described in second and the following to	ction 501(c)(7), (8), or (10) that total more than \$1,00 ine entry. For organizations				
CC	empleting Part III, enter the total of exclusively religiou	s, charitable, etc., contributions of \$1,000 or less fo	or the year. (Enter this info. once.)				
	se duplicate copies of Part III if addition	al space is needed.					
). 	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	All Control						
	ALABAMAN V	(e) Transfer of gift					
	Transferee's name, address, a	nd Zi P + 4	Relationship of transferor to transferee				
).	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	(e) Transfer of gift						
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
							
). 	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
- -							
		(e) Transfer of gift					
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee				
	44						
).).							
I .	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
_							
	(e) Transfer of gift						
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee				

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

Open to Public

OMB No. 1545-0047

Employer identification number Name of the organization 20-8358468 ANICIRA VETERINARY CENTER Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year _____ 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) 4 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of a historically important land area Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Protection of natural habitat Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a a Total number of conservation easements b Total acreage restricted by conservation easements 2c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 📂 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included in Form 990, Part VIII, line 1

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 432051 10-01-14

Schedule D (Form 990) 2014

b Assets included in Form 990, Part X

Schedule D (Form 990) 2014

1,673,825.

e Other

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

Part VII Investments - Other Securities. Complete if the organization answered "Yes"	to Form 990, Part IV. lir	ne 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)				water
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes"	to Form 990, Part IV, lir	ne 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, col. (B) line 13.)		Laboration (1979)		tatura di Paranti di Paranti di Paranti di Paranti di Paranti di Paranti di Paranti di Paranti di Paranti di P
Part IX Other Assets.				
Complete if the organization answered "Yes'		ne 11d. See Form 990), Part X, line 15.	(b) Book value
(a)	Description			(D) BOOK Value
(1)				
(2)				
(3)				
(4)		<u> </u>		
(5)				· · · · · · · · · · · · · · · · · · ·
(6)				
(7)				
(8)				
(9)			<u> </u>	<u>,</u>
Total. (Column (b) must equal Form 990, Part X, col. (B) lir	ne 15.)		>	
Part X Other Liabilities.		aaaar O E.	000 Dad V line 05	
Complete if the organization answered "Yes	to Form 990, Part IV, II	ne 11e or 11f. See Fo	rm 990, Part X, line 25.	
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) li	ne 25.) ▶			

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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

Schedule D (Form 990) 2014

432054

Schedule D (Form 990) 2014

SCHEDULE O (Form 990 or 990-EZ)

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.

Department of the Treasury Internal Revenue Service Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

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

2014
Open to Public Inspection

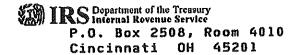
Name of the organization

ANICIRA VETERINARY CENTER

Employer identification number 20-8358468

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 432211 08-27-14

Schedule O (Form 990 or 990-EZ) (2014)



In reply refer to: 4077556534 Feb. 02, 2015 LTR 4168C 0 20-8358468 000000 00

00026998

BODC: TE

ANICIRA VETERINARY CENTER
% CATE MANSFIELD
910 N LIBERTY ST
HARRISONBURG VA 22802-4504



014895

Employer Identification Number: 20-8358468
Person to Contact: S LENARD
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your Dec. 05, 2014, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in november 2007.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section 509(a)(2).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Please refer to our website www.irs.gov/eo for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.

4077556534 Feb. 02, 2015 LTR 4168C 0 20-8358468 000000 00 00026999

ANICIRA VETERINARY CENTER % CATE MANSFIELD 910 N LIBERTY ST HARRISONBURG VA 22802-4504

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely yours,

Tamera Ripperda

Director, Exempt Organizations

Date: DEC 03 2007.

SHEMANDOAH VALLEY SPAY MEUTER CLINIC C/O RICHARD A BAUGH 342 8 MAIN ST HARRISONBURG, VA 22801-0000

Employer Identification Number: 20-8358468 DLN: 17053298005007 Contact Person: TERRY L MILLER ID# 31222 Contact Telephone Number: (877) 829-5500 Accounting Period Ending: December 31 Public Charity Status: 509 (a) (2) Form 990 Required: Yes Effective Date of Exemption: January 4, 2007 Contribution Deductibility: Yes Addendum Applies: No

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section S01(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

Letter 947 (DO/CG)

SHEMANDOAH VALLEY SPAY NEUTER

We have sent a copy of this letter to your representative as indicated in your power of attorney.

Sincerely,

Robert Choi

Director, Exempt Organizations Rulings and Agreements

Enclosures: Publication 4221-PC

Letter 947 (DO/CG)

AMENDED AND RESTATED BYLAWS OF ANICIRA VETERINARY CENTER

ARTICLE I Name, Principal Office, and General Purposes

Section 1. Name

The name of the corporation is Anicira Veterinary Center. The corporation was formerly known as Shenandoah Valley Spay/Neuter Clinic.

Section 2. Principal Office

The principal office and the mailing address of the Corporation shall be 910 North Liberty Street Harrisonburg, VA 22802.

Section 3. Purposes

The purposes for which this corporation is organized are stated in its corporate charter, and in particular, its purposes and objectives shall be as follows:

- (a) To receive and maintain a fund or funds or real or personal property or both and, subject to the restrictions and limitations hereinafter set forth, to use and apply the whole or any part of the income therefrom and the principal thereof exclusively for charitable, religious, scientific, literary, or educational purposes, either directly or by contributions to organizations duly authorized to carry on such activities, including, but not limited to, making distributions for charitable purposes and serving animals and the community through veterinary services, education, outreach, shelter, care and protection programs to help animals live healthy lives in a safe environment; provided, however, that no part of such income or such principal shall be contributed any organization whose net earnings, or any part thereof, inure to the benefit of any private shareholder or individual or any substantial part of the activities of which is carrying on propaganda, or otherwise attempting to influence legislation;
- (b) To distribute its income for each taxable year at such time and undistributed income imposed by Section 4942 of the Internal rulings and regulations applicable thereto (collectively the "Code");
- (c) To carry on any lawful activities calculated, directly or indirectly, to promote the interest of the Corporation, or to enhance the value of its properties under such powers and rights which are now or which may hereafter be conferred upon corporations organized under the laws of the State of Virginia applicable thereto; provided, however, that all such activities shall be carried out in furtherance of exempt purposes within the meaning of Section 501 (c) (3) of the Code.

ARTICLE II Directors

Section L. Number

The number of Directors of the Corporation shall be no less than five and no more than nine. Directors shall have one vote each.

Section 2. Election

The business and property of the Corporation shall be managed and controlled by a self-perpetuating Board of Directors. The Directors shall be chosen by a ballot at a regular meeting by a plurality vote of the Directors present.

Section 3. Vacancies

Any vacancy in the Board of Directors, including a vacancy created by an increase in the number of Directors, shall be filled for the unexpired portion of the term by a majority vote of the Board of Directors. Any Director so elected shall hold office until the next succeeding regular meeting of the Board of Directors or until the election and qualification of his/her successor.

Section 4, Tenure of Office

Each Director shall be elected to a three year term. At the termination of each Director's term of office, he or she shall be eligible for re-election. There shall be no limit on the number of consecutive terms that any Director may serve. Any Director may be removed by the Board of Directors at any time, with or without cause, and any vacancy created pursuant to this Section shall be filled by the Board of Directors. This must done by a majority vote of the Board of Directors.

Any of the Officers of the Corporation may be dismissed at any time during his or her term by a majority vote of the Directors, and an Officer so dismissed shall have no power or authority under or by virtue of his or her former office.

Section 5. Meetings and Notices

There shall be a minimum of two meetings annually. Immediately after each annual election, the Directors shall meet for the purpose of installation of Offices and for the transaction of such other business as may come before this meeting; no prior notice need be given of such meeting.

Special meetings: special meetings of the Board of Directors may be called by the President or Vice President and must be called by either of them on the written request of any two Directors.

Section 6. Quorum

Except as may be otherwise specifically provided by statute, at any meeting of Directors, the presence of the majority of Directors shall constitute a quorum. The majority of votes of the Directors present at any meeting of which there is a quorum shall be the act of the full Board of Directors. At any meeting at which a quorum has been established, the entire meeting shall be considered to have a quorum until adjourned.

Section 7. Compensation and Expenses

Directors shall not receive any stated salary for their services as such, but the Board of Directors shall have the power in its discretion to pay to Directors rendering unusual or special service to the Corporation special compensation appropriate to the value of such services.

ARTICLE III Officers

Section 1. Officers

The officers of the Corporation shall be: President, Vice-President, Secretary, and Treasurer.

Section 2. Election

All Officers of the Corporation shall be elected by the Board of Directors at their meeting held immediately after the meeting of the Directors or at Special Meetings called for that purpose. All Officers shall hold office for the term of two years (or if applicable for an unexpired term of two years) and until their successors are duly elected and qualified.

Section 3. Combination of Offices: Any of the offices other than the President and the Secretary may be combined.

Section 4. Duties of Officers

President

The President shall:

- (a) Preside at all meetings of the Board of Directors;
- (b) Enforce these Bylaws and see that all orders and resolutions of the Board of Directors are carried out;
- (c) Perform all the duties incidental to his or her office, and which are required by law, and generally to see that the Officers and agents of the Corporation perform their duties;
- (d) Present at the first regular meeting of the Directors each calendar year a report of the condition of the business of the Corporation;
- (c) Cause to be called regular and special meetings of the Directors in accordance with these Bylaws;
- (f) Execute conveyances, contracts and agreements as authorized by the Board of Directors;
- (g) Perform and attend to such other duties and functions as may be directed by the Board of Directors.

Vice President

The Vice President shall:

Perform the duties of the President during the absence or inability of the President to perform those duties. When so acting, he or she shall have all the powers and be subject to all of the responsibilities hereby given or imposed upon the President.

Secretary

The Secretary shall:

- (a) Keep the minutes of the meetings of the Board of Directors;
- (b) Keep a record of the names and addresses of the Directors;
- (e) Give and serve all notices of the Corporation:
- (d) Be the custodian of the common seal of the Corporation, and shall attest the same when affixed by the order of the Board of Directors;
- (e) Present to the Board of Directors all communications received by the Corporation;
- (f) Attend to all correspondence and perform all the duties incidental to the office of Secretary;
- (g) Perform and attend to such other duties and functions as may be directed by the President and/or the Board of Directors.

Treasurer

The Treasurer shall:

- (a) Review all corporate books, accounts, tax returns and similar financial records on a semiannual basis;
- (b) Render a full financial statement at the first regular meeting of the calendar year of the Directors;
- (c) Review the yearly audit produced by the Corporation's accountant;
- (d) Perform and attend to such other duties and functions as may be directed by the President or the Board of Directors.

ARTICLE IV Contracts

The Board of Directors may authorize any Officer or agent to enter into any contract or execute and deliver any instrument in the name of and on behalf of the Corporation, and such authority may be general or confined to a specific instance. Unless so authorized by the Board of Directors, no Officer, agent, or employee shall have any contract or engagement, or pledge its credit, or render it liable pecuniarily for any purpose or in any amount.

ARTICLE V Advisory Committees

The Board of Directors may appoint from their number, or from among such other persons as the Board may see fit, one or more advisory committees, and at any time may appoint additional Directors thereto. The Directors of any such committee shall serve at the pleasure of the Board of Directors. Each such committee may, subject to the approval of the Board of Directors, prescribe rules and regulations for the conduct of meetings of the committee and other matters relating to its procedure. The Directors of any advisory committee shall not receive any stated salary for their services as such, but by resolution of the Board of Directors a fixed sum for expenses of attendance, if any, may be allowed for attendance at each regular or special meeting of such committee. The Board of Directors shall have power in its discretion to contract for and to pay to any member of an advisory committee rendering unusual or exceptional services to the Corporation special compensation appropriate to the value of such services.

ARTICLE VI Voting Upon Stock of Other Corporations

Unless otherwise ordered by the Board of Directors, the President shall have full power and authority on behalf of the Corporation to vote either in person or by proxy at any meeting of stockholders of any corporation in which this Corporation may hold stock, and at any such meeting may possess and exercise all of the rights and powers incident to the ownership of such stock which, as the owner thereof, this Corporation might have possessed and exercised if present. The Board of Directors may confer such powers upon any other Director, agent, or employee.

ARTICLE VII

Restriction on Contracts and Services and Prohibition Against Sharing in Corporation Earnings or Assets

Section 1. Contracts and Services

Directors and Officers may be interested directly or indirectly in any contract relating to or incidental to the operations conducted by the Corporation, and may freely make contract, enter into transactions, or otherwise act for and on behalf of the Corporation, notwithstanding that they may also be acting as individuals, or as trustees of trusts, or as agents for other persons or corporations, or may be interested in the same matters as stockholders, directors, or otherwise; provided, however, that any contract, transaction, or act on behalf of the Corporation in a matter

in which the Directors or Officers have a personal interest, shall be at arm's length and shall not be in violation of (I) Section 4941(a) of the Code, (2) any of the provisions of the Articles of Incorporation, or (3) any provision of Section 2 of this Article IX. In no event, however, shall any person dealing with the Directors or Officers be obligated to inquire into the authority of the Directors and Officers to enter into and consummate any contract, transaction, or other action for or on behalf of the Corporation.

Section 2. Prohibition Against Sharing in Corporate Earnings or Assets

No Director, Officer, employee, or any other private individual shall receive at any time any of the net earnings or pecuniary profit from the operations of the Corporation, provided that this shall not prevent the payment of such reasonable compensation to any such person for services rendered to or for the Corporation in effecting any of its purposes provided in these Bylaws, No loans may be made by the Corporation to any Officer or Director. No such person shall be entitled to share in the distribution of any of the corporate assets upon the dissolution of the Corporation, All Directors and Officers of the Corporation shall be deemed to have expressly consented and agreed that upon dissolution or winding up of the affairs of the Corporation. whether voluntary or involuntary, the assets of the Corporation then remaining on hand shall be transferred, delivered, and paid over only to charitable, non-profit, tax-exempt institutions upon such terms and conditions and in such amounts and proportions as the Board of Directors may determine, to be used by such institutions for substantially the same purposes as are set forth in the Articles of Incorporation; provided, however, that upon the dissolution or winding up of corporate affairs, the transfer, delivery, and payment of the remaining assets, as hereinabove provided, shall be such that the assets so transferred, delivered, and paid over shall be dedicated thereby for exempt purpose within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986, or as hereafter amended, and all rulings and regulations applicable thereto.

ARTICLE VIII Investments

The Corporation shall have the right to retain all or any part of any securities or property received by or contributed to the Corporation, and to invest and reinvest the same even though such retention, investment or reinvestment would be prohibited except for this provision.

ARTICLE IX Limited Liability and Indemnification

Section 1, Limited Liability

The Directors and Officers of this Corporation shall be protected by the immunity for civil liability granted and provided under the provisions of the Virginia Code all of which shall be incorporated herein by reference.

Section 2. Indemnification

The Corporation shall have the power to exempt or indemnify any Director, Officer, employee or agent of the Corporation with respect to any liability, settlement, or litigation expenses arising

out of his activities as a Director, Officer, employee, or agent, in full compliance with the provisions of the Virginia Code of which shall be incorporated herein by reference.

ARTICLE X **Amendments**

The Board of Directors shall have power to make, alter, amend, and repeal the Bylaws of the Corporation by affirmative majority vote of the Directors at any regular or special meeting of the Directors.

The foregoing Bylaws are a complete, true, and correct copy of the Bylaws adopted by the Board of Directors of Anicira Veterinary Center.

10/30/14 Date:

Ramona Messenger, Score ary

ARTICLES OF RESTATEMENT

<u>OF</u>

SHENANDOAH VALLEY SPAY/NEUTER CLINIC

The undersigned, on behalf of the nonstock corporation set forth below, pursuant to Title 13.1, Chapter 10, Article 10 of the Code of Virginia, states as follows:

- The name of the corporation immediately prior to restatement is Shenandoah Valley Spay/Neuter Clinic.
- The restatement contains an amendment to the articles of incorporation.
- The text of the amended and restated articles of incorporation is attached hereto.
- 4. The restatement was adopted by the corporation on OCTOBER 30, 2014.
- The restatement was adopted at a meeting of the board of directors by a vote of at least two-thirds of the directors in office. Member approval of the restatement was not required because the corporation has no members.

Date: Othber 30, 2014

Executed in the name of the corporation

By: Lawa Catherine Menstidl

Name: Laura Catherine Mansfield

Title: President and CEO

Corporation's SCC ID no.: 06702112

Return filed document to: Terrence M. Kerwin, Esq. Fox Rothschild LLP 747 Constitution Drive Exton, Pennsylvania 19341

AMENDED AND RESTATED

ARTICLES OF INCORPORATION

OF

ANICIRA VETERINARY CENTER

- ARTICLE 1. The name of the Corporation is Anicira Veterinary Center (the "Corporation").
- ARTICLE 2. The location and post office address of the registered office of the Corporation in the Commonwealth of Virginia is 910 North Liberty Street, Harrisonburg, Virginia 22802.
- ARTICLE 3. The Corporation is incorporated under the Nonprofit Corporation Law of 1988 of the Commonwealth of Virginia to engage in exclusively charitable, educational, religious, literary, or scientific activities within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986, as amended (or the corresponding provision of any successor United States Internal Revenue Law) (the "Code"), including but not limited to, making distributions for charitable purposes and serving animals and the community through veterinary services, education, outreach, shelter, care and protection programs to help animals live healthy lives in a safe environment.
- ARTICLE 4. All activities of the Corporation shall be subject to the following restrictions:
- A. No substantial part of the activities of the Corporation shall be the carrying on of propaganda or attempting to influence legislation.
- B. The Corporation shall not participate in, or intervene in (including the publishing or distributing of statements), any political campaign on behalf of (or in opposition to) any candidate for public office.
- C. The Corporation shall neither have nor exercise any power, nor shall it engage directly or indirectly in any activity that would invalidate its status (1) as a corporation that is exempt from federal income tax and described in Code Section 501(c)(3), or (2) as a corporation, contributions to which are deductible under Code Section 170(c)(2).
- D. The Corporation does not contemplate pecuniary gain or profit, incidental or otherwise, to its directors, officers or other private persons, and no part of the net earnings of the Corporation shall inure to the benefit of, or be distributed to, any such person, except that the Corporation shall be authorized and empowered to pay reasonable compensation for services rendered and make payments and distributions in furtherance of the purposes set forth in Article 3 hereof.

Return filed document to: Terrence M. Kerwin, Esq. Fox Rothschild LLP 747 Constitution Drive Exton, Pennsylvania 19341

E. It is intended that this Corporation shall have and continue to have the status of an organization which is exempt from federal income tax under Code Section 501(a) and described in Code Section 501(c)(3). All terms and provisions of these Articles of Incorporation and the Bylaws of the Corporation, and all operations of the Corporation, shall be construed, applied and carried out in accordance with this intent. If the Corporation is subject, or ever becomes subject, to the private foundation rules of the Code, the Corporation shall: (1) distribute its income for each tax year at such time and in such manner so that it will not become subject to the tax on undistributed income imposed by Code Section 4942; (2) not engage in any act of self-dealing as defined in Code Section 4941(d); (3) not retain any excess business holdings as defined in Code Section 4943(c); (4) not make any investments in a manner that would subject it to tax under Code Section 4944; and (5) not make any taxable expenditures as defined in Code Section 4945(d).

ARTICLE 5. The term for which the Corporation is to exist is perpetual.

ARTICLE 6. The Corporation is organized upon a nonstock basis.

ARTICLE 7. The Corporation shall have no members.

ARTICLE 8. The affiars of the Corporation shall be governed and directored by a board of directors, which board of directors shall be a self-perpetuating body, and the number therof may be increased or decreased by a change in the bylaws of the Corporation.

ARTICLE 9. Upon the dissolution of the Corporation, the Corporation's board of directors, after paying or making provisions for the payment of all of the liabilities and obligations of the Corporation, shall distribute all of the assets of the Corporation to such organization or organizations organized and operated exclusively for charitable, educational, religious, literary or scientific purposes as shall at the time qualify as an organization or organizations exempt from federal income tax under Code Section 501(a) and described in Code Section 501(c)(3), as the Corporation's board of directors shall determine, or to the federal government or a state or local government for a public purpose. No portion of the assets shall inure to the benefit of any director or officer of the Corporation, any other private person, or any enterprise organized for profit.

IN WITNESS WHEREOF, the undersigned has signed these Amended and Restated Articles of Incorporation this 30 day of October, 2014.

ANICIRA VETERINARY CENTER

By: Laura Catherine Mansfield,

President and Chief Executive Officer

ANICIRA VETERINARY CENTER FINANCIAL REPORT

December 31, 2014

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INDEPENDENT AUDITOR'S REPORT

To the Board of Directors Anicira Veterinary Center Harrisonburg, Virginia

We have audited the accompanying financial statements of the Anicira Veterinary Center (a nonprofit organization) which comprise the statements of financial position as of December 31, 2014 and 2013, and the related statements of activities, functional expenses and cash flows for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

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

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

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

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the Anicira Veterinary Center as of December 31, 2014 and 2013, and the results of its operations and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Brown, Edwards & Company, J. L. P. CERTIFIED PUBLIC ACCOUNTANTS

Harrisonburg, Virginia April 15, 2015

STATEMENTS OF FINANCIAL POSITION December 31, 2014 and 2013

	2014	2013
ASSETS		
CURRENT ASSETS		
Cash and cash equivalents	\$ 276,507	\$ 210,142
Investments	96,020	-
Accounts receivable	24,512	26,474
Inventory	90,351	84,343
Prepaid expenses	10,936	 8,270
Total current assets	498,326	329,229
Property and equipment, net (Note 3)	1,699,548	 749,708
Total assets	\$ 2,197,874	\$ 1,078,937
LIABILITIES AND NET ASSETS		
CURRENT LIABILITIES		
Current maturities of long-term debt (Note 4)	\$ 48,176	\$ 23,089
Accounts payable	54,063	14,123
Accrued expenses	40,341	42,700
Deferred grant revenue	112,306	83,000
Total current liabilities	254,886	162,912
Long-term debt (Note 4)	956,459	 149,935
Total liabilities	1,211,345	312,847
NET ASSETS		
Unrestricted	986,529	 766,090
Total liabilities and net assets	\$ 2,197,874	\$ 1,078,937

STATEMENTS OF ACTIVITIES Years Ended December 31, 2014 and 2013

	2014	2013
Unrestricted Revenue and Other Support	\$ 1,785,645	\$ 1,751,354
Client services Grants and contributions	131,917	48,930
Investment return	(4,920)	
Total unrestricted revenue and other support	1,912,642	1,800,284
Expenses		1 500 010
Program services	1,618,791	1,609,818
Support services Administrative	68,808	54,078
Fund raising	4,604	2,166
Total expenses	1,692,203	1,666,062
Change in unrestricted net assets	220,439	134,222
Net assets, beginning	766,090	631,868
Net assets, ending	\$ 986,529	\$ 766,090

STATEMENTS OF FUNCTIONAL EXPENSES Year Ended December 31, 2014

2014

				20	14			
				Support	Service	es		
	Program				Fund		Total	
		Services	Adm	<u>inistrative</u>	Raising		Expenses	
Salaries and wages	\$	758,935	\$	22,500	\$	2,700	\$	784,135
Payroll taxes		42,546		1,721		207		44,474
Benefits		27,566		819		48		28,433
Medical supplies		307,633		-		-		307,633
Contract hire		73,268		-		-		73,268
Advertising		9,105		3,850		-		12,955
Insurance		85,084		2,983		1,649		89,716
Interest		22,419		920		-		23,339
Professional fees		-		27,169		-		27,169
Repairs and maintenance		58,590		-		-		58,590
Office		22,316		1,800		-		24,116
Occupancy		18,252		749		-		19,001
Telecommunications		22,860		1,203				24,063
Vehicle		28,073		-		-		28,073
Lab and other program fees		21,285		-		-		21,285
Travel and meals		9,450		850		-		10,300
Depreciation		60,902		2,499		-		63,401
Rent		21,891		-		-		21,891
Miscellaneous		28,616		1,745		-		30,361
Total expenses	\$	1,618,791	\$	68,808	\$	4,604	_\$_	1,692,203

STATEMENTS OF FUNCTIONAL EXPENSES (Continued) Year Ended December 31, 2013

2013

	2013							
	Support Services							
	Ī	rogram				Fund		Total
		Services	Administrative		Raising		Expenses	
Salaries and wages	\$	825,632	\$	16,750	\$	1,930	\$	844,312
Payroll taxes	Ψ	45,632	•	1,281	-	148		47,061
Benefits		14,711		300		88		15,099
		317,019		-		_		317,019
Medical supplies		,		-				31,928
Contract hire		31,928		2.050		-		10,694
Advertising		6,844		3,850		-		
Insurance		78,842		2,117		-		80,959
Interest		9,013		370		-		9,383
Professional fees		-		20,779		-		20,779
Repairs and maintenance		33,878		1,390		-		35,268
Office		27,223		1,800		-		29,023
Occupancy		17,731		606		-		18,337
Telecommunications		10,549		555		-		11,104
Vehicle		26,527		-		-		26,527
Lab and other program fees		24,611		-		-		24,611
Travel and meals		6,047		850		-		6,897
Depreciation		41,073		1,685		-		42,758
Rent		68,040		-		-		68,040
Bad debts		563		-				563
Miscellaneous		23,955		1,745		-		25,700
Total expenses	\$	1,609,818	\$	54,078	\$	2,166	\$	1,666,062

STATEMENTS OF CASH FLOWS Years Ended December 31, 2014 and 2013

	2014		2013		
OPERATING ACTIVITIES					
Change in net assets	\$	220,439	\$	134,222	
Adjustments to reconcile change in net assets to net					
cash provided by operating activities:					
Unrealized losses on investments		7,879		-	
Reinvested interest and dividends		(2,959)		-	
Depreciation expense		63,401		42,758	
Change in assets and liabilities:					
Decrease (increase) in:					
Accounts receivable		1,962		(9,413)	
Inventory		(6,008)		(32,908)	
Prepaid expenses		(2,666)		(2,691)	
Increase (decrease) in:					
Accounts payable and accrued expenses		37,581		(12,715)	
Deferred grant revenue		29,306		36,000	
Net cash provided by operating activities		348,935		155,253	
INVESTING ACTIVITIES					
Net purchase of investments		(100,940)		-	
Purchase of property and equipment		(113,241)		(64,281)	
Net cash used in investing activities		(214,181)		(64,281)	
FINANCING ACTIVITIES					
Payments of long-term debt		(68,389)		(22,436)	
Net cash used in financing activities		(68,389)		(22,436)	
Increase in cash and cash equivalents		66,365		68,536	
CASH AND CASH EQUIVALENTS					
Beginning		210,142		141,606	
Ending	\$	276,507	\$	210,142	
CALIBRATION AND AND AND AND AND AND AND AND AND AN					
SUPPLEMENTAL DISCLOSURE OF CASH FLOW INFORMATION	\$	23,339	\$	9,383	
Cash paid for interest				7,303	
Closing cost capitalized from refinancing	\$	20,143	<u>\$</u>		
NONCASH INVESTING AND FINANCING ACTIVITIES					
Fixed assets purchased through debt financing	\$	900,000	\$		

The accompanying notes are an integral part of these statements.

NOTES TO FINANCIAL STATEMENTS December 31, 2014

Note 1. Nature of Organization and Significant Accounting Policies

Nature of organization:

The Anicira Veterinary Center (the Center), formally known as Shenandoah Valley Spay & Neuter Clinic, is a non-profit veterinary clinic located in Harrisonburg, Virginia with a second location in Manassas, Virginia. It is committed to ending companion animal overpopulation by providing low cost, high quality spay and neuter services. It employs the highest standards to ensure the safety and comfort of cats and dogs, and also offers low cost vaccinations at the time of surgery. The Center is open to everyone regardless of income or place of residence. The Center operates a transport service for shelters and other veterinary clinics within a 120 mile radius.

A summary of significant accounting policies follows:

Basis of accounting:

The financial statements of the Center have been prepared in accordance with accounting principles generally accepted in the United States of America. Accordingly, revenues are recognized when earned and expenses are recognized when incurred.

The accompanying financial statements present information regarding the Center's financial position and activities according to three classes of net assets: unrestricted, temporarily restricted, and permanently restricted. The three classes are differentiated based on the existence or absence of donor-imposed restrictions, as described below:

Unrestricted net assets are free of donor-imposed restrictions. Unrestricted net assets may be designated for specific purposes by action of the Board of Directors or may otherwise be limited by contractual agreements with outside parties. Revenues, gains, and losses that are not temporarily or permanently restricted by donors are included in this classification. Expenses are reported as decreases in this classification.

Temporarily restricted net assets are limited in use by donor-imposed stipulations that expire either by the passage of time or that can be fulfilled by action of the Center pursuant to those stipulations. The Center has no temporarily restricted net assets.

Permanently restricted net assets are amounts required by donors to be held in perpetuity; however, generally, the income on these assets is available to meet various restricted and other operating needs. The Center has no permanently restricted net assets.

Estimates and assumptions:

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and reported amounts of revenue and expenses during the reporting period. Actual results may differ from those estimates.

NOTES TO FINANCIAL STATEMENTS December 31, 2014

Note 1. Nature of Organization and Significant Accounting Policies (Continued)

Revenue recognition:

Contributions are considered to be unrestricted unless specifically indicated as temporarily or permanently restricted by the donor. When a donor-stipulated time restriction ends or a purpose restriction is satisfied, temporarily restricted net assets are reclassified to unrestricted net assets and are reported in the statement of activities as net assets released from restriction. Contributions with restrictions that become satisfied within the same fiscal period are reported as unrestricted contributions in the statement of activities. There were no restricted contributions received in 2014 or 2013.

Service revenue is recognized when earned. Amounts received in advance of performing services (including grants received to provide services) are recorded as deferred revenue on the statement of financial position.

Cash and cash equivalents:

The Center considers all liquid investments with maturities of three months or less to be cash equivalents. Accounts in the bank are insured by the Federal Deposit Insurance Corporation (FDIC) generally up to \$250,000 per financial institution. At times, the Center's balances exceeded amounts insured by the FDIC.

Investments:

Investments in marketable securities with readily determinable fair values and all investments in debt securities are reported at their fair values, as determined by quoted market prices, in the statements of financial position. Net unrealized and realized gains or losses are reflected in the statements of activities. Investments consist entirely of mutual funds.

Accounts receivable:

The Center extends credit to its transport customers, substantially all of whom are shelters or other humane organizations. Accounts receivable from these customers are reported at the gross amount due the Center less an allowance for uncollectible accounts, if necessary. The allowance for doubtful accounts is recorded based on management's judgment, and was not considered necessary as of December 31, 2014 and 2013. The Center does not charge interest on past due balances, which are generally considered to be balances over 30 days old. Uncollectible balances are charged off when management determines the likelihood of collection is remote. Total receivables greater than 90 days past due are immaterial to the financial statements.

Inventory:

Inventory consists of medicine, vaccines, and other items used in surgeries. It is stated at the lower of cost or market on a first-in first-out basis.

NOTES TO FINANCIAL STATEMENTS December 31, 2014

Note 1. Nature of Organization and Significant Accounting Policies (Continued)

Property and equipment:

The Company capitalizes property and equipment over \$1,000 with expected useful lives greater than one year. Property and equipment is stated at cost less accumulated depreciation and amortization, which are provided by the straight-line method over the following estimated useful lives:

Buildings and improvements Furniture, equipment, and vehicles 15 - 39 years 5 - 15 years

Loan issuance costs:

Loan issuance costs are capitalized related to issuance of debt to purchase the Manassas location. The costs will be amortized over the life of the debt. As of December 31, 2014, the Clinic paid loan issuance costs of \$20,143 and recognized amortization of \$1,199.

Deferred Grant Revenue:

The Center has received grants to be used to provide reduced cost services to low income individuals.

Income taxes:

The Internal Revenue Service has determined that the Center is exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code; therefore, no provision has been made for income tax expense. Donors may deduct contributions as provided in Section 170 of the Internal Revenue Code.

The federal income tax returns of the Company for 2011 through 2014 are subject to examination by the Internal Revenue Service.

Advertising:

The Center follows the policy of charging the costs of advertising to expense as incurred.

Functional allocation of expenses:

The costs of providing the various programs and other activities have been summarized on a functional basis in the statement of functional expenses. Accordingly, certain costs have been allocated among the program and supporting services.

Subsequent events:

Subsequent events have been evaluated through April 15, 2015, the date the financial statements were available to be issued.

NOTES TO FINANCIAL STATEMENTS December 31, 2014

Note 2. Investments and Fair Value Measurements

Generally accepted accounting principles establish a three-level fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. These inputs can be readily observable, market corroborated, or generally unobservable inputs. Financial assets and liabilities carried at fair value are classified and disclosed in one of the following three categories based on the inputs used in valuation:

Level 1: Quoted prices in active markets for identical assets or liabilities.

Level 2: Observable inputs other than prices included in Level 1, such as quoted prices for similar assets and liabilities in active markets; quoted prices for identical or similar assets and liabilities in markets that are not active; or other inputs that are observable or can be corroborated with observable market data.

Level 3: Unobservable inputs that are supported by little or no market activity and that are significant to the fair value of the assets and liabilities.

The summary of inputs used to value the Center's investments is as follows:

	 2014 Level 1	2013 Level 1
Mutual fund – primarily equities	\$ 96,020	\$ -
Investment return is comprised of the following:		
Interest and dividends Capital Gains Unrealized losses	\$	751 2,208 (7,879)
	\$	(4,920)

NOTES TO FINANCIAL STATEMENTS December 31, 2014

Note 3. Property and Equipment

Property and equipment consist of the following:

	_	2014	_	2013
Land	\$	217,163	\$	217,163
Land improvements		11,360		474,896
Buildings and improvements		1,395,039 244,121		167,678
Medical equipment Vehicles		51,683		51,684
Office equipment, software, furniture and fixtures		24,164		18,868
		1,943,530		930,289
Less accumulated depreciation		(243,982)		(180,581)
	\$	1,699,548	\$	749,708

Note 4. Long-Term Debt

Long-term debt consists of the following:

	2014	 2013
Note payable to United Bank dated July 27, 2012; due in monthly installments of \$2,601, including interest at 4.99%; maturing in a balloon payment on July 27, 2017, collateralized by real estate.	\$ 122,048	\$ 173,024
Note payable to United Bank dated July 24, 2014; due in monthly installments of \$4,780, including interest at 4.00%; maturing in a balloon payment on July 24, 2021, collateralized by real estate.	882,587	-
Less current portion	 (48,176)	 (23,089)
	\$ 956,459	\$ 149,935
Principal payments on the above are due as follows:		
2015 2016 2017 2018 2019 Thereafter		\$ 48,176 50,404 93,646 25,325 26,356 760,728
		\$ 1,004,635

NOTES TO FINANCIAL STATEMENTS December 31, 2014

Note 5. Retirement Plan

The Center has a SIMPLE IRA plan under which all employees who earn more than \$5,000 are eligible to make salary deferrals up to the maximum allowed by law. In addition, the Center matches deferrals up to 3% of eligible salary. Contributions to this plan were \$8,817 and \$7,498 during 2014 and 2013, respectively.



COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION

Office of the Clerk

November 17, 2014

CLAUDIA B REIF PO BOX 673 EXTON, PA 19341

RECEIPT

RE:

Anicira Veterinary Center

ID:

0670211 - 2

DCN:

14-11-14-1217

Dear Customer:

This is your receipt for \$25.00 to cover the fee(s) for filing articles of amendment for a corporation with this office.

The effective date of the amendment is November 17, 2014.

Note: Prior to the effective date of this filling, the name of the above-referenced corporation was SHENANDOAH VALLEY SPAY/NEUTER CLINIC.

This is also your receipt for \$100.00 to cover the fee(s) for expedited service(s).

Thank you for contacting our office. If you have any questions, please call (804) 371-9733 or toll-free in Virginia, (866) 722-2551.

Sincerely,

Joel H. Peck

Clerk of the Commission

AMENACPT CISJMA

COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION

AT RICHMOND, NOVEMBER 17, 2014

The State Corporation Commission has found the accompanying articles submitted on behalf of

Anicira Veterinary Center (formerly SHENANDOAH VALLEY SPAY/NEUTER CLINIC)

to comply with the requirements of law, and confirms payment of all required fees. Therefore, it is ORDERED that this

CERTIFICATE OF AMENDMENT

be issued and admitted to record with the articles of amendment in the Office of the Clerk of the Commission, effective November 17, 2014.

The corporation is granted the authority conferred on it by law in accordance with the articles, subject to the conditions and restrictions imposed by law.

STATE CORPORATION COMMISSION

R_V

Judith Williams Jagdmann Commissioner