

### City of Harrisonburg APPLICATION FOR TAX EXEMPTION

FOR OFFICE USE ONLY:
PAYMENT AMOUNT:
RECEIVED ON:
CHECK NUMBER:

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

on or before bandary so. Include a \$50 a	ppincation fee made payable to City of Harrisonburg.	
	501(c)(3) certificate; (2) By-Laws; (3) Articles of Incorposition of the second of the	oration; (4) most recent Reviewed by
ORGANIZATION NAME:	Anicira Veterinary Center	COR KUR
MAILING ADDRESS:	1992 Medical Avenue Harrisonburg, VA 22801	Treasurer L
CONTACT PERSON AND PHONE:	Cate Lemmond Tel: 540-437-1980	Finance (con
Type of property for which request is ma	de (circle applicable)  PERSONAL PROPERTY	REAL ESTATE
If requesting a personal property exemptio exemption is sought.	n, please attach a detailed itemized listing of the specif	ic item(s) for which the
If requesting a real estate exemption, com	plete the following on each parcel for which exemption	n is sought:
Name in which property is held		
Property address	2	
Map identification number		
Taxes paid for the preceding three (3) years		<del></del>
Name in which property is held		
Property address		
Map identification number		
Taxes paid for the preceding three (3) years		- T
Name in which property is held		
Property address		
Map identification number		
Taxes paid for the preceding three (3) years		<del></del>
If requesting a personal property exempt	ion, complete the following for each account for which	exemption is sought:
Name assessed	Anicira Veterinary Center	

Account nun	nber	40031 and 33245	<del>!</del>	
Asset type ar	nd location address	2013 Honda Min	ivan, 91 <u>0 North</u> 1	Liberty Street Harrisonburg, VA 22802 Liberty Street Harrisonburg, VA 22802 Iedical Avenue Harrisonburg, VA 22801
Taxes paid f	or the preceding three (3) years	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>
Name assess	ed			
Account num	nber			
Asset type a	nd location address			
Taxes paid f	or the preceding three (3) years			
Please comp § 58.1-3651.		s referenced in C	ity Ordinance 4	-2-17 (copy enclosed) and Code of Virginia
1.	Do you currently own property	in the City that is	s already tax-exe	mpt?
	X Yes No	TD 110	040 70 2	
	If yes, what is the property Ma On what date was the exemption		040 B 2 2008 and 2016	
	How/By whom was the exemp	_	Harrisonburg C	ity Council
2.	Does the organization have an religious conviction, race, cold			ce that unlawfully discriminates on the basis o  Yes X No
3.	Does the organization hold a  Control Board for serving alco  Yes X No			license from the Virginia Alcoholic Beverage if yes, please attach a copy.
4.	What compensation is paid to			
				of the Board of Directors are not. The annua
	salary for the President/CEO is	s \$102,500. Emp	loyees receive mo	onetary compensation for their work.
5.	What services does each direct	tor, officer, and er	mployee render?	
	protect assets and provide proj	oer financial overs t and evaluate the	sight, ensure effective a chief executive a	he organization. Additionally, Directors ctive planning, monitor and strengthen and ensure legal and ethical integrity.
4	Door any part of the net carnir	ure of the organize	ation benefit any	individual? If so nlease explain

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?
	Anicira is committed to serving animals and our community through veterinary services, education, outreach,
	shelter, care and protection programs. This goal is reflected in the type of programs we offer, the collaborations
	we develop and our willingness to help animals live healthy lives in a safe environment.
9.	What percentage of the activities of the organization involves carrying on propaganda or otherwise attempting to
	influence legislation?
	Less than one percent.
10.	Does the organization participate or intervene in any political campaign on behalf of any candidate for public
	office?
	Yes X No
this Application providing for the organization	e Mansfield Lemmond (printed name), do hereby certify that the information provided and/or attached to ation for Tax Exemption, is true and accurate, to the best of my knowledge. I acknowledge that knowingly alse information will result in criminal charges pursuant to Code of Virginia § 58.1-11. I acknowledge that ation I represent may be subjected to audit by the Commissioner of the Revenue, or an appointed employee missioner of the Revenue, to ensure that all information provided is true and correct.
Cathe	nire Martiel lemal 1-19-2018
Signature	Date
Proid	ent/CEO
Avou	$\frac{1}{\sqrt{2}} \qquad \qquad My commission expires: 9 - 30 - 3019$
NO IVI	ARACELY TORRES NOTARY PUBLIC EGISTRATION # 7627305 MONWEALTH OF VIRGINIA COMMISSION EXPIRES



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

DEPARTMENT OF THE TREASURY

INTERNAL REVENUE SERVICE P. O. BOX 2508 CINCINDATI, OH 45201

Date: DEC 03 2007.

SHEMANDOAH VALLEY SPAY MEOTER CLINIC C/O RICHARD A BAUGH 342 S MAIN ST HARRISCHBURG, 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 Interpal 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 501(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 organisation.

Letter 947 (DO/OG)

### SHEMANDOAH VALLEY SPAY NEUTER

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

Sincerely,

obert Choi

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 1. 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 selfperpetuating 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;
- (e) 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;
- (c) 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:

Cate Mansfield, President

10/30/14 Date:

RU Mensons or Ramona Messenger, Secretary

#### SHENANDOAH VALLEY SPAY/NEUTER CLINIC

# OF THE BOARD OF DIRECTORS PURSUANT TO THE PROVISIONS OF THE VIRGINIA NON-STOCK CORPORATION ACT

The undersigned, constituting all of the members of the Board of Directors (the "Board") of Shenandoah Valley Spay/Neuter Clinic, a Virginia nonprofit corporation (the "Corporation"), do hereby consent, pursuant to the provisions of the Virginia Nonstock Corporation Act, as amended, to the adoption of the following Preambles and Resolutions to the same extent as though such actions had been authorized at a special meeting of the Board pursuant to notice:

WHEREAS, the undersigned deem it to be desirable and in the best interests of the Corporation to change the name of the Corporation to "Anicira Veterinary Center";

WHEREAS, the undersigned deem it to be desirable and in the best interests of the Corporation to expand and change the mission of the Corporation to the following:

"Anicira is committed to serving animals and our community through veterinary services, education, outreach, shelter, care and protection programs to help animals live healthy lives in a safe environment."

WHEREAS, the undersigned desire to amend the Articles of Incorporation of the Corporation to change the name of the Corporation to "Anicira Veterinary Center" and to reflect the change in mission of Corporation as set forth above, and such other changes as the Board deems desirable and in the best interests of the Corporation, all as set forth in the Amended and Restated Articles of Incorporation of the Corporation attached hereto as <a href="Exhibit A">Exhibit A</a> (the "Amended and Restated Articles of Incorporation"); and

WHEREAS, the undersigned desire to amend the Bylaws of the Corporation in order to reflect the name change and mission change of the Corporation as set forth above, and such other changes as the Board deems desirable and in the best interests of the Corporation, all as set forth in the Amended and Restated

Bylaws of the Corporation attached hereto as Exhibit B (the "Amended and Restated Bylaws").

NOW, THEREFORE, BE IT RESOLVED, that the undersigned hereby approve the change in the name of the Corporation to "Anicira Veterinary Center"; and be it further

**RESOLVED**, that the undersigned hereby approve the expansion and change in the mission of the Corporation to the following:

"Anicira is committed to serving animals and our community through veterinary services, education, outreach, shelter, care and protection programs to help animals live healthy lives in a safe environment."

RESOLVED, that the undersigned hereby approve and adopt the Amended and Restated Articles of Incorporation in order to change the name of the Corporation to "Anicira Veterinary Center" and to reflect the change in mission of the Corporation as set forth above, and such other changes as the Board deems desirable and in the best interests of the Corporation, and that the President of the Corporation is hereby authorized and directed to file the Amended and Restated Articles of Incorporation with the State Corporation Commission of the Commonwealth of Virginia; and be it further

RESOLVED, that the undersigned hereby approve and adopt the Amended and Restated Bylaws to reflect the name change and mission change of the Corporation as set forth above, and such other changes as the Board deems desirable and in the best interests of the Corporation; and be it further

RESOLVED, that the President and/or legal counsel of the Corporation are hereby authorized and directed to notify the Internal Revenue Service, the Virginia Department of Labor and Industry, the Virginia Department of Taxation, the Virginia Office of Charitable and Regulatory Programs, and such other offices or agencies as necessary or appropriate, regarding the change in name and/or mission of the Corporation; and be it further

RESOLVED, that the President of the Corporation is hereby authorized and directed to a file a fictitious name on behalf of the Corporation with the State Corporation Commission of the Commonwealth of Virginia for the name "Shenandoah Valley Spay/Neuter Clinic"; and be it further

RESOLVED, that the President of the Corporation is hereby authorized to engage all such counsel, accountants or others as

may be desirable under the circumstances for the purposes of assisting in effectuating the foregoing resolutions; and be it further

RESOLVED, that the President of the Corporation be and is hereby authorized to execute and deliver any and all such other or further agreements, instruments, certificates and other documents, and to take, do and perform any and all such other or further acts and things as she may deem to be necessary or advisable to carry out the terms, provisions and intent and accomplish the purposes of the foregoing resolutions, the execution or delivery of such documents or the taking of such other actions to constitute conclusive evidence of the Corporation's approval thereof; and be it further

**RESOLVED**, that to the extent that the Executive Officer or any other representatives of the Corporation have already done any actions or things to effectuate the purposes of the foregoing resolutions, the doing of such actions or things are hereby ratified, approved, confirmed and adopted.

This Action by Unanimous Written Consent is executed pursuant to the current Bylaws of the Corporation and the Virginia Nonstock Corporation Act.

This Action by Unanimous Written Consent may be executed in one or more counterparts, all of which together shall be one and the same document.

For purposes of this Action by Unanimous Written Consent, a facsimile copy containing a signature shall be deemed to contain an original signature.

[signature page follows]

IN WITNESS WHEREOF, the undersigned, being all of the members of the Board of Directors of Shenandoah Valley Spay/Neuter Clinic, do hereby consent to the foregoing actions as of October \_\_\_\_, 2014.

Suzanic Auckerman

Conne Daucker

Denise Dawson

Patricia Hardesty

Patricia Hardesty

Tara Langston

4

Ramona Messenger

### EXHIBIT A

### Amended and Restated Articles of Incorporation

[see attached]

### EXHIBIT B

### Amended and Restated Bylaws

[see attached]

### 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:

- 1. The name of the corporation immediately prior to restatement is Shenandoah Valley Spay/Neuter Clinic.
- 2. The restatement contains an amendment to the articles of incorporation.
- 3. 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.
- 5. 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: Catherine Manst.

Name: Laura Catherine Mansfield

Title: President and CEO

Corporation's SCC ID no.: 06702112

ACTIVE 27815111v1 10/28/2014

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

### AMENDED AND RESTATED

### ARTICLES OF INCORPORATION

### <u>OF</u>

#### 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

Laura Catherine Mansfield

President and Chief Executive Officer

Department of the Treasury Internal Revenue Service

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

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.

<u> </u>	or the	2016 calendar year, or tax year beginning and	ending		
B	Check if opplicable		<del></del>	D Employer identifi	cation number
X	Addres Change	ANICIRA VETERINARY CENTER			
느	Name Change		20-8	358468	
	]initial return ]Final return/	Number and street (or P.O. box if mail is not delivered to street address) 1992 MEDICAL AVENUE	E Telephone number 540-437-1980		
	return/ termin- ated			G Gross receipts \$	2,560,250.
	Amend return	HARRISONBURG, VA 22801		H(a) is this a group re	
	Applica Jilon	F Name and address of principal officer: CATE LEMMOND		for subordinates	? Yes X No
	pendin	SAME AS C ABOVE			rcluded? Yes No
		mpt status: X 501(c)(3)	or 527	If "No," attach a	list. (see instructions)
		x: ► WWW.ANICIRA.ORG		H(c) Group exemptio	n number 🕨
ΚF	orm of	organization: X Corporation Trust Association Other	L Year	of formation; 2005 N	A State of legal domicile: VA
Le e		Summary			
e	1 (	Briefly describe the organization's mission or most significant activities: ANIC	IRA IS	COMMITTED	TO SERVING
Activities & Governance	1	ANIMALS AND OUR COMMUNITY THROUGH VETERI	NARY S	ERVICES, ED	UCATION,
rus	2	Check this box 🕨 📖 if the organization discontinued its operations or dispo-	sed of more	than 25% of its net as	sets.
ove	3 1	Rumber of voting members of the governing body (Part VI, line 1a)		3	6
S S	4 1	lumber of independent voting members of the governing body (Part VI, line 1b)	•••••	4	6
S	5 1	otal number of individuals employed in calendar year 2016 (Part V, line 2a)			51
Ę	6 1	otal number of volunteers (estimate if necessary)		6	55
ĘĘ.	7a 1	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
•	bl	let unrelated business taxable income from Form 990-T, line 34		7ь	0.
-				Prior Year	Current Year
9	8 (	Contributions and grants (Part VIII, line 1h)	31,324.	79,240.	
Ĕ	9 1	Program service revenue (Part Vill, Ilne 2g)		1,857,680.	2,465,018.
Revenue	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		4,693.	4,422.
Œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	-11,936.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,893,697.	2,536,744.
_		Brants 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)		0.	0.
Ø	i	the section of the first IV and the first State (Dark IV)		1,071,220.	1,398,347.
Expenses	16a i	Professional fundraising fees (Part IX, column (A), line 11e)  Fotal fundraising expenses (Part IX, column (D), line 25)		0.	0.
9	b	Fotal fundraising expenses (Part IX, column (D), line 25)	77.		
ŵ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		824,973.	
	18	Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,896,193.	
	19	Revenue less expenses. Subtract line 18 from line 12	,.,	-2,496.	
580			Be	ginning of Current Year	End of Year
윓텵	20	Total assets (Part X, line 16)		2,026,582.	2,574,480.
See See	21	Total liabilities (Part X, line 26)		1,045,778.	1,431,401.
Net Assets Fund Balanc	22	Net assets or fund balances, Subtract line 21 from line 20		980,804.	1,143,079.
I P.	a fallilla	Signature Block			
Und	ler pena	ities of perjury, I declare that I have examined this return, including accompanying schedule	es and statem	ients, and to the dest of m	ly knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of w	hich preparei		
		1 the lynnad		Date Date	01-17
Sig	ın	Signature of officer		Date	
He	re	CATE LEMMOND, PRESIDENT/CEO Type or print name and title			
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Pal	d	JAMES R. FRIES	l	)4/14/17 self-emplo	yed P01320612
	parer	Firm's name BROWN, EDWARDS & COMPANY, LLP		Firm's EIN	54-0504608
	Only	Firm's address 124 NEWMAN AVENUE			
		HARRISONBURG, VA 22801	_	Phone no. ( 5	40) 434-6736
Me	v the II	RS discuss this return with the preparer shown above? (see instructions) ,			X Yes No
1111	., "	The state of the s			

Form 990 (2016)

Total program service expenses

### Form 990 (2016) ANICIRA VETE Part IV Checklist of Required Schedules

				1
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		Yes	No
n	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Δ.	<u> </u>
	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part i	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-197 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			٠,,
•••	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		х
n	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II  Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
8	Schedule D, Part III	8_		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?	_		х
40	If "Yes," complete Schedule D, Part IV  Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	9		
10	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, IX, or X			646
• •	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	<b></b>	Α.
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	44-4		Х
	Part X, line 16? If "Yes," complete Schedule D, Part IX  Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d 11e		X
	Did the organization report at amount for other habitudes in Fart X, line 25? if Fast, complete scribble 8, Fart X.  Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			<del> </del> -
f	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	111		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
1000	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	<u> </u>	X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>^</u>
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	14b		X
4	or more? If "Yes," complete Schedule F, Parts I and IV	740	-	
15	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
,,,	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	<u></u>	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	<u> </u>	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		٧,	
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	<del> </del>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40		X
	complete Schedule G, Part III	19 Forn	990	

#### Part IV | Checklist of Required Schedules (continued) Yes No X 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 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 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III 22 Х 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 X 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 24¢ 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 X 25a transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 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 X 25b Schedule L, Pert I 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 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial 27 contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member Х 27 of any of these persons? If \*Yes," complete Schedule L, Part III 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): X a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a $\overline{\mathbf{x}}$ 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 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation Х contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? X 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 X 33 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

If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

Part V, line 1

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?

Form 990 (2016)

Х

Х

Х

34

35a

35b

36

37

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

	990 (2016) ANICIRA VETERINARY CENTER		20-8358	468	Pa	age 5
Par						
	Check if Schedule O contains a response or note to any line in this Part V				*****	
			3		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	6			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eporta	able gaming			
	(gambling) winnings to prize winners?			10	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				Albert 1	
	filed for the calendar year ending with or within the year covered by this return	2a	51			
	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	rns?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction					
	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0		3b		
48	At any time during the calendar year, did the organization have an interest in, or a signature or other	autho	rity over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial			4a		Х
	If "Yes," enter the name of the foreign country: ►			500		
<b>,</b>	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	\ccou	nts (FBAR).			
E.	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		,	5a		X
QUI L	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans-	ection'	?	5b		X
				5c		
C	If "Yes," to line 5a or 5b, did the organization file Form 8886 T?  Does the organization have annual gross receipts that are normally greater than \$100,000, and did t					
<del>6a</del>	Does the organization have annual gross receipts that are normally greater than who loss, and so contributions that were not tax deductible as charitable contributions?			6a		X
ġ	If "Yes," did the organization include with every solicitation an express statement that such contribu	110113	or gires	6b		
	were not tax deductible?				Vie e	
7	Organizations that may receive deductible contributions under section 170(c).	ndens	Stoved at the payora	7a	e de la companya de La companya de la co	X
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and so	441000	prostato to the payor.	7b		·
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		outina			
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v	vas re	quieu	7c		х
	to file Form 8282?	7d	1	3 1000		
d	If "Yes," indicate the number of Forms 8282 filed during the year			7e		X
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	contra	ict? ,	71		X
f	not the arganization, during the year, pay premiums, directly or indirectly, on a personal benefit con	tract?	Y	-		
g	If the examination received a contribution of qualified intellectual property, did the organization file t	orm t	1899 as required r	7g	<del></del>	-
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organi-	nonus	the a Form 1090-01	7h	4256	Contraction of
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	G Dy t	116	1	right (E	And the second
	sponsoring organization have excess business holdings at any time during the year?		******************	8	alesa.	
9	Sponsoring organizations maintaining donor advised funds.				9920	
я	Dirt the sponsoring organization make any taxable distributions under section 4966?			9a	<del> </del>	
h	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		********	9b	16.37.00±2	7,594,553
10	Section 501(c)(7) organizations. Enter:	,	ì			5.00
a	Initiation fees and capital contributions included on Part VIII, line 12	108		4		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	101	<u> </u>	4	120	
11	Section 501(c)(12) organizations. Enter:		1			
	Gross income from members or shareholders	11:	a			. ignote
	a service and the service of the not amounts due or paid to other sources against				95.75	
b	amounts due or received from them.)	111	<u> </u>			
10~	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of For	m 104	1?	12a	and the second	Co sucusion
128	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12	p	1		
	Section 501(c)(29) qualified nonprofit health insurance issuers.					231
13	Is the organization licensed to issue qualified health plans in more than one state?			13a	<u> </u>	
а	Note. See the instructions for additional information the organization must report on Schedule O.					
	Enter the amount of reserves the organization is required to maintain by the states in which the					
t	organization is licensed to issue qualified health plans	13	b			5.50
	Enter the amount of reserves on hand	13	С	150		100
٥	Enter the amount of reserves of manu  Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
148	Did the organization receive any payments for indoor talking services during the terminal of the left	lule O		14b		
<u>t</u>	H "Yes," has it liked a rollil 720 to report these payments; " 110, promote to the			For	m 990	0 (201

632005 11-11-16

Form **990** (2016)

Page 6

Form 990 (2016) ANICIRA VETERINARY CENTER 20 - 8358468 Page 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	renataapea	anta.	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.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b6			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		<u>X</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			7.7
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			v
	more members of the governing body?	7a		<u>X</u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	<b>.</b>		v
	persons other than the governing body?	7b	2 550 100	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		v	
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			**
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		Γ.,	T
			Yes	No X
10a	Did the organization have local chapters, branches, or affiliates?	10a		Α
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		
b			x	199
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b	<u>^</u>	X
ti	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	120		<del>                                     </del>
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	12c		Х
	in Schedule O how this was done	13	X	
13	Did the organization have a written whistleblower policy?	14	X	
14	Did the organization have a written document retention and destruction policy?	14		
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	15a		Х
a	The organization's CEO, Executive Director, or top management official	15b	-	X
b	Other officers or key employees of the organization	100		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	16a	( Variations	Х
	taxable entity during the year?	100	10000000	
b	If "Yes." did the organization follow a written policy or procedure requiring the organization to evaluate its participation		1	16 (c)
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	16b	120251030	100121982018
~	exempt status with respect to such arrangements?	1 100		<del></del>
	ction C. Disclosure  List the states with which a copy of this Form 990 is required to be filed ► NONE		· · · · · · · · · · · · · · · · · · ·	
17	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	ble	
18	for public inspection. Indicate how you made these available. Check all that apply.			
	[ ] Joseph Constitution of Constitution (Constitution of Constitution (Constitution of Constitution of Constit			
40	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, as	nd final	ncial	
19	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:			
20	THE ORGANIZATION - 540-437-1980			
	1992 MEDICAL AVENUE, HARRISONBURG, VA 22801			

632006 11-11-16

07163751

### Part VIII 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

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.

(A) Name and Title	(B) Average	(C) Position (do not check more than one						(D) Reportable	(E) Reportable	(F) Estimated
·	hours per week	box, unless person is both an officer and a director/trustee)					an	compensation from	compensation from related	amount of other
	(list any hours for related organizations below ilne)	individual trustee or pirector	institutional frustee	Officer	Key emplayee	Highast compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) SUZANNE AUCKERMAN	0.50								_	_
PRESIDENT		X		X				0.	0.	0
(2) RAMONA MESSENGER	0.50		İ	ا ا				_	0	^
SECRETARY		X	<u> </u>	X				0.	0.	0
(3) DENISE DAWSON	0.50	١.,						0.	0.	0
DIRECTOR	0 50	X	├					U •	U •	
(4) PATRICIA HARDESTY	0.50	х	l					0.	0.	0
DIRECTOR (5) TARA LANGSTON	0.50	₽		├—	┢	_	<u> </u>	<u> </u>		
DIRECTOR	0.30	X						0.	0.	0
(6) CATHERINE MANSFIELD	45.00	1	<del>                                     </del>	-	<del> </del>	<del> </del>				
PRESIDENT/CEO	10,00	1		x				91,531.	0.	15,772
		ļ								
			_							
			_				_			
							_			
			T							

Form 990 (2016)

Part VIII Section A. Officers, Directors, T		рюу	ees			gne	sı C				, yes
(A)	(B)			)) Posi				(D)	(E)		(F)
Name and title	Average Position (do not check more than one box, unless person is both an							Reportable	Reportable		Estimated
	nours per week					is bot x/îrus		compensation from	compensation from related	1	amount of other
	(list any	ţĠţ						the	organizations	J	compensation
	hours for	Siec				ъ		organization	(W-2/1099-MIS	) (c	from the
	related	Se 0.	Sign			ns:		(W-2/1099-MISC)	•	<b>'</b>	organization
	organizations	trast	15 T		aa X	9		'			and related
	below	adividual trastae or director	institutional trustee	)A	emplo	550	謹				organizations
	line)	indi	150	Officer	\$	Highest compensated employee	ā	<u> </u>			
		1		:							
		ļ	<u> </u>		<u> </u>	_	ļ				
			1								
		<u> </u>	<u> </u>								
					1					ļ	
		_	<u> </u>		ļ	↓					
		-									
		<u> </u>	<u> </u>	<u> </u>	<u> </u>	╄	<u> </u>				
		4									
		<b>↓</b>	<b> </b>	<u> </u>	<b>!</b>	-	<del> </del>				
		4			l						
		<del> </del>	<u> </u>	<del> </del>	$\vdash$	<del> </del>	<del> </del>				
		-							1		
		╄	┡	├	<del> </del>	╄	├		<u> </u>		
		┨									
		╂	╄	<del> </del>	├	┨	-				
		-									
		1	1	<u> </u>	1	1	<u> </u>	91,531.		0.	15,772
1b Sub-total				*****				0.		Ö.	0
c Total from continuation sheets to Par								91,531.		Ö.	15,772
d Total (add lines 1b and 1c)									000 of reportable		22,77,2
2 Total number of individuals (including b		nose	e list	ed a	vodi	re) w	no r	eceived more than \$ 10	n'nnn ot tehotrani	3	
compensation from the organization	<u> </u>										Yes No
3 Did the organization list any former offi	and allegated as to	uote	a k	av a	mal	OVIDE	. ar	highest commencated a	emniovee on		
3 Did the organization list any former offi line 1a? If "Yes," complete Schedule J.											3 X
	or such individual	r Na n	ame		atin	ก ฮก	d of	her compensation from	the organization		
4 For any individual listed on line 1a, is the and related organizations greater than a	e sum of reporta- tako nong il "Yes	ole c	ការក្រ	lete.	Sch	edu	le J	for such individual	,		4 X
	or accrus comps	nea mea	tion	fron	າລາ	w i in	rela	ted organization or indiv	idual for services		
5 Did any person listed on line 1a receive rendered to the organization? If "Yes,"	romplete Schedu	ile d	tor s	uch	nei	rson	. 010	too organization or man			5 X
Section B. Independent Contractors	50,,,р,0,000				J. W.		* 1154				
Complete this table for your five highes	t compensated in	nder	end	ent o	con	tract	ors	that received more than	1\$100,000 of com	pens	ation from
the organization. Report compensation	for the calendar	vear	end	lina '	with	or v	vithi	n the organization's tax	year.	•	
(A)	101 110 00,07,22	,						(B)			(C)
Name and busir	ess address	N	ON	E				Description of	services	C	Compensation
	·										
	<u> </u>										
	**************************************										
								Annual Control of the			
2 Total number of independent contractor		not	limit	ed t	o th	ose	liste	d above) who received	more than		
\$100,000 of compensation from the or	ganization 🕨					U					Form <b>990</b> (201

	rt VI		<b>of Revenue</b> Iule O contains a re	senonee :	ar nata ta anu lia	a in this Part VIII			
		eria Mengasi Deniente eria	uie O contains a re	saponse (	n note to any III	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 5 12 - 514
# # E	1 a	Federated campaig	ns	1a				and the same of	1.04
S In	b	Membership dues	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1b					
Contributions, Gifts, Grants and Other Similar Amounts	C	Fundralsing events		1e	4,350.				
	d	Related organization	ons	1d	,		new comment		and the second
	6	•		1e					
i i	f				m4 000	A Company of the Company			M15, 8 (4 8 9 1 1 2 1
들		similar amounts not i		1f	74,890.				
달	-	Noncash contributions in	•			79,240.			1000 6 1000
0 8	h	Total, Add lines 1a	<u> </u>			and the first production and the second of t			
		ים איאיד מיים חימוני	v eppyrer		Business Code	2 465 018	2,465,018.		
Program Service Revenue	2 a				341300	2,403,010.	2,405,010.		
E e	b		C. C. Ludy-y-A.				<u></u>		
E S	C								
E a	C						<u></u>		
Pro	e	W	antica rougaus						
-	f	All other program s  Total. Add lines 2a				2,465,018.			
	3	Investment income					200 TEL CO.	A change of a contract to the contract of the	
	3	other similar amou				4,422.			4,422.
	4	Income from inves							
	5	Royalties				·			
	_	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Real	(ii) Personal				
	6 a	Gross rents				Callingaria		70.56	
	Ŀ	and the second second second	I '				100000000000000000000000000000000000000		
		Rental income or (							
		f Net rental income							
		Gross amount from	-	curities	(ii) Other				
		assets other than	inventory			1.0		1754 Etc. 45.75	
	Ł	Less: cost or other	r basis				44.00	440-460-46	and the second
		and sales expense	es				2000年2月2日 - 100 2000年2月2日	6.3.4.2.6.5	100000000000000000000000000000000000000
		Gain or (loss)			<u> </u>				
	‹	d Net gain or (loss)			<u> </u>				
venue	8 8	Gross income from including \$	4,350.	of					
		contributions repo	rted on line 1c). Se	ee				STREET, STREET	102 SERVE 190
ig L									46.000
Other Re	1	Less: direct exper			23,506.	11 036	24.5/5/3/3/46	atopografia (n. 1921)	-11,936.
•		<ul> <li>Net income or (los</li> </ul>			<u></u>	-11,936.			-II,930.
	9 8	a Gross income from				The second second	- 6 m g g i s e e		
			************************			100		3. 1. 15. E. M. 10.	
		Less: direct exper			L				Application of the second
	1	Net income or (los			<u> </u>				
	10 1	a Gross sales of inv	*				100	100	250.6
	١.	and allowances b Less: cost of good	te entr					1,400,000	
		<ul> <li>Less: cost of good</li> <li>Net income or (los</li> </ul>			L				0.7238637.000000000000000000000000000000000000
	<del>  '</del>		ous Revenue	oritory 3.	Business Code				
	11 1			<del></del>					A richidian contrar profit and state of the profit of the profit of the profit of
	Ι.	a							
		· ·							
	;	d All other revenue							
		e Total. Add lines 1							
	12	Total revenue, See	***************************************		<u></u>	2,536,744.	2,465,018.	0.	
-									Form 990 (2016

Form 990 (2016) ANICIRA VETER:
Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must comp			omplete column (A).	
	Check if Schedule O contains a responsor include amounts reported on lines 6b, lb, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations			100	
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic			Action Control	
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
	Benefits paid to or for members				AND
5	Compensation of current officers, directors,	100,078.	75,888.	23,260.	930.
	trustees, and key employees	100,010.	73,000.	23,2001	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		•		
7	•	1,072,406.	1,072,406.		
7 8	Other salaries and wages Pension plan accruals and contributions (include		-,-,-,- <u>-,-</u>		
0	section 401(k) and 403(b) employer contributions)	3,729.	3,655.	71.	3.
9	Other employee benefits	158,373.	155,926.	2,352.	95.
10	Payroll taxes	63,761.	62,485.	1,227.	49.
11	Fees for services (non-employees):				
	Management				
	Legal	9,574.		9,574.	
	Accounting	15,439.		15,439.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,		MAKET		
J	column (A) amount, list line 11g expenses on Sch O.)	129,500.	122,876.	6,624.	
12	Advertising and promotion	13,160.		13,160.	
13	Office expenses	58,657.	55,455.	3,202.	
14	Information technology				
15	Royalties				
16	Occupancy	83,524.	83,524.	2 (03	· · · · · · · · · · · · · · · · · · ·
17	Travel	20,637.	18,034.	2,603.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	50,172.	50,172.		
20	Interest	JU, 1/4.	JU, 114.		
21	Payments to affiliates	82,279.	82,279.		
22	Depreciation, depletion, and amortization	11,820.	11,820.		
23	Other expenses, Itemize expenses not covered	11,000			The state of the s
24	above. (List miscellaneous expenses in line 24e. If line				
	24e amount exceeds 10% of line 25, column (A)				Preparation 2
а	amount, list line 24e expenses on Schedulc (0.) MEDICAL SUPPLIES	369,733.	369,733.	A Property of the second secon	The second of th
a b	LAB AND OTHER PROGRAM F	48,413.	48,413.		
C	RENT	38,025.	38,025.		
d	BANK/CARD FEES	27,293.	27,293.		
e	All other expenses	20,840.	20,840.		
25	Total functional expenses. Add lines 1 through 24e	2,377,413.	2,298,824.	77,512.	1,077
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)		<u> </u>	<u> L</u>	Form <b>990</b> (2016

Form 990 (2016)

art X	Balance Sheet					
	Check if Schedule O contains a response or not	e to any	line in this Part X			
				(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	.,	**********************	157,041.	1	143,549
2	Savings and temporary cash investments				2	
3	Pledges and grants receivable, net				3	
4	Accounts receivable, net			34,415.	4	82,935
5	Loans and other receivables from current and for	rmer of	icers, directors			
"	trustees, key employees, and highest compensated employees. Complete				0.00	
	Part II of Schedule L			i i i i i i i i i i i i i i i i i i i	5	
6						
"	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				201	
	employers and sponsoring organizations of sec					
.				KALABUTANAN PERIODA	6	
7	employees' beneficiary organizations (see instr)			<u></u>	7	
7	Notes and loans receivable, net			80,022.	8	99 460
8	Inventories for sale or use			6,610.	9	99,469 5,432
9		· · · · · · · · · · · · · · · · · · ·	,	0,010.	9	3,33
10a	Land, buildings, and equipment; cost or other		2 405 215			
	basis. Complete Part VI of Schedule D	10a	2,495,215. 362,529.	1 607 105		0 130 600
b		10b		1,627,195.	10c	2,132,686
11	Investments - publicly traded securities			97,292.	11	104,61
12	Investments - other securities, See Part IV, line				12	
13	Investments - program-related, See Part IV, line	*		04 000	13	F 70
14	Intangible assets			24,007.	<del>1</del>	5,79
15	Other assets. See Part IV, line 11				15	0 584 40
16	Total assets. Add lines 1 through 15 (must equ	ai line 3	1) <u></u>	2,026,582.	16	2,574,48
17	Accounts payable and accrued expenses		*******************************	66,508.	17	164,29
18	Grants payable		***********		18	
19	Deferred revenue			37,175.	19	
20	Tax-exempt bond liabilities		30004410104305121101401401401401401		20	
21	Escrow or custodial account liability. Complete	Part IV o	f Schedule D		21	
22	Loans and other payables to current and forme	r officers	, directors, trustees,			and the second of the
22	key employees, highest compensated employees, and disqualified persons.					
	Complete Part If of Schedule L				22	
23	Secured mortgages and notes payable to unrel			942,095.	23	1,267,11
24	Unsecured notes and loans payable to unrelate	d third p	arties		24	
25	Other liabilities (including federal income tax, pa	o related third				
	parties, and other liabilities not included on line	***				
	Schedule D				25	
26				1,045,778.	26	1,431,40
	Organizations that follow SFAS 117 (ASC 958	3), cirecl	chere ▶ 🛣 and			
	complete lines 27 through 29, and lines 33 ar					
27	Unrestricted net assets			980,804.	27	1,143,07
28	Temporarily restricted net assets				28	
29	Permanently restricted net assets				29	
	Organizations that do not follow SFAS 117 (A				100	to the second second
	and complete lines 30 through 34.				44	
30	Capital stock or trust principal, or current funds				30	
31	Paid-in or capital surplus, or land, building, or equipment fund				31	
32	Retained earnings, endowment, accumulated in	<del> </del>	32			
27 28 29 30 31 32 33	Total net assets or fund balances			980,804.		1,143,07
34				2,026,582.	34	2,574,48
	1 2500 PRODUCTION AND THE GOOD STATE DAIGHTON .		***************************************		* ***	Form 990 (2)

	1990 (2016) ANICIRA VETERINARY CENTER	20-8	358468	Page	<sub>3</sub> 12
Pa	Reconciliation of Net Assets			_	
	Check if Schedule O contains a response or note to any line in this Part XI	*******		[	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,536	,74	.4.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,377	,41	.3.
3	Revenue less expenses, Subtract line 2 from line 1	3		, 33	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		80,80	
5	Net unrealized gains (losses) on investments	5	7	2,94	.4.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	1,143	,07	9.
Pa	Tive Financial Statements and Reporting			,	1
	Check if Schedule O contains a response or note to any line in this Part XII			L. L	
	Accounted transmission formation			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
·	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule			3.00 d	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	***********	2a		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis		2b	х	
b	Were the organization's financial statements audited by an independent accountant?				620 HON 204
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis			2	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?		2c	circue/Select lone	X
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		3a		<u>X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form 9	<b>390</b> (2	.016)

#### **SCHEDULE A**

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

### 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.lrs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection -

Name of the organization

MICIDA VETERINARY CENTER

Employer identification number 20-8358468

					MARI CENTER				3 0330400		
Pa	rt l		Reason for Public C	Charity Status (A	Il organizations must co	mplete this	s part.) Se	e instructions.	·		
The	org	ani	zation is not a private founda	ation because it is: (F	or lines 1 through 12, cl	heck only (	one box.)				
1				church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).							
2			school described in section 170(b)(1)(A)(ii), (Attach Schedule E (Form 990 or 990-EZ).)								
3			A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).								
4		ี้	A nospital of a cooperative hospital service organization described in section 170(b)(1)(A)(iii). Enter the hospital's name,								
	_	_	city, and state:	and the partition of the same	Amit and an arrangement of the control				•		
_	$\overline{}$	٦	An organization operated fo	r the henefit of a coll	lone or university numeri	or operate	ed hy a go	vernmental unit describ	ed in		
5	L	!	•		logo of armyolotty office	o, operar	, g.				
_		7	section 170(b)(1)(A)(iv). (C		n ni bodivoqob danı latası	ontion 17	DINITAY	vd.			
6	-	=	A federal, state, or local gov	government or governmental unit described in section 170(b)(1)(A)(v).							
7	L		An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in								
	<u></u>	7	section 170(b)(1)(A)(vi). (Co		41/41(-1) /Danielaka Dani	11.5					
8	<u>_</u>		A community trust describe					- uttou cultica land acoust	antina a		
9	L	٦	An agricultural research org	anization described	in section 17U(b)(1)(A)(I	x) operate	a in conju	nction with a land-grant	collede		
			or university or a non-land-g	rant college of agricu	ulture (see instructions).	Enter the	name, city	, and state of the college	e or		
	_	_	university:					<u> </u>			
10	LX	J	An organization that normal	lly receives: (1) more	than 33 1/3% of its sup	port from (	contributio	ns, membership fees, a	nd gross receipts from		
			activities related to its exem	npt functions · subjec	ct to certain exceptions,	and (2) no	more thai	n 33 1/3% of its support	from gross investment		
			Income and unrelated busin	ness taxable income	(less section 511 tax) fro	om busine:	sses acqu	ired by the organization	after June 30, 1975.		
		_	See section 509(a)(2). (Cor								
11			An organization organized a	and operated exclusi	vely to test for public sa	fety. See s	ection 50	9(a)(4).			
12			An organization organized a	and operated exclusi	vely for the benefit of, to	perform t	he functio	ns of, or to carry out the	purposes of one or		
			more publicly supported or	ganizations describe	d in section 509(a)(1) o	r section {	509(a)(2). \$	See <b>section 509(a)(3).</b> C	heck the box in		
			lines 12a through 12d that	describes the type o	f supporting organization	n and com	plete lines	12e, 12f, and 12g.			
a	. [		Type I. A supporting orga	inization operated, si	upervised, or controlled	by its sup	ported org	anization(s), typically by	giving		
	Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting								upporting		
			organization. You must c								
Ŀ	, (		Type II. A supporting org	anization supervised	or controlled in connec	tion with it	s supporte	ed organization(s), by ha	ving		
_	•		control or management o	f the supporting ora	anization vested in the s	ame perso	ns that co	introl or manage the sup	ported		
			organization(s). You mus			•					
c	. [		Type III functionally inte			in connect	tion with, a	and functionally integrate	ed with,		
•	•		its supported organization								
	. 1		Type III non-functionally	vintenrated A supp	orting organization oper	ated in co	nnection v	vith its supported organi	zation(s)		
C			that is not functionally int								
			requirement (see instruct								
_	. 1		Check this box if the orga								
€	, 1		functionally integrated, or								
			er the number of supported of								
			ride the following information					******************************			
}	<u> </u>	101	i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) is the orga in your govern	nization listed	(v) Amount of monetary	(vi) Amount of other		
		•	organization		(described on lines 1-10	Yes	No.	support (see instructions)	support (see instructions)		
					above (see instructions))	-					
						<u> </u>					
						1					
						1					
							<u></u>				
Tot	al			SEASON SEE SEE SEE SEE SEE SEE	Contraction of the Contraction	et reserve or					

## Schedule A (Form 990 or 990 EZ) 2016 ANICIRA VETERINARY CENTER 20-83584 | Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(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						
	The portion of total contributions	Ē.					
•	by each person (other than a						
	governmental unit or publicly		17				
	supported organization) included						
	on line 1 that exceeds 2% of the	Grage School St.			100 200 200		
	amount shown on line 11,			1000			
	column (f)		100000000000000000000000000000000000000				
6	Public support, Subtract line 5 from line 4.				Later Control		
	ction B. Total Support	I					
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 4						
	Gross Income from interest,						
_	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
q	Net income from unrelated business						
v	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.)						
11	Total support, Add lines 7 through 10		200 St. 17 (1919)		distribution of the		
	Gross receipts from related activities			I		12	
	First five years. If the Form 990 is fo					L	
•	organization, check this box and sto				*******************		<b>&gt;</b>
Se	ction C. Computation of Pub	lic Support Pe	rcentage				
14	Public support percentage for 2016	(line 6, column (f) d	livided by line 11,	column (f))		14	%
15	Public support percentage from 2015	5 Schedule A, Part	II, line 14	,		15	%
168	33 1/3% support test - 2016. If the	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or r	nore, check this bo	and
	stop here. The organization qualifies						
Ŀ	33 1/3% support test - 2015. If the	organization did no	ot check a box on	line 13 or 16a, and	l line 15 is 33 1/3%	6 or more, check thi	s box
	and stop here. The organization qua						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"	' test. The organiza	ation qualifies as a	publicly supporte	d organization	·************************	▶□
Ł	10% -facts-and-circumstances tes	•	•				
	more, and if the organization meets t						
	organization meets the "facts-and-cir	cumstances" test.	The organization	qualifies as a publ	icly supported org	anization	▶□
18	Private foundation. If the organization						<u>,</u>
						edule A (Form 990	

## Schedule A (Form 990 or 990-EZ) 2016 ANICIRA VETERINARY CENTER Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to

	qualify under the tests listed be	elow, please comp	lete Part II.)				
	Section A. Public Support						
Cale	ndar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not	400 700	40 000	121 01 F	100 746	170,809.	605,191.
	include any "unusual grants.")	129,789.	48,930.	131,91/.	123,746.	170,809.	003,131.
	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	1364889.	1751316.	1785646.	1765258.	2384987.	9052096.
3	Gross receipts from activities that						
	are not an unrelated trade or bus-				1		
	iness under section 513						
4	Tax revenues levied for the organ- ization'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				4 00000	0555506	0.550000
	Total. Add lines 1 through 5	1494678.	1800246.	1917563.	1889004.	2555796.	9657287.
7 <i>a</i>	Amounts included on lines 1, 2, and						0.
	3 received from disqualified persons						V.
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
ď	Add lines 7a and 7b	-					0.
	Public support. (Subtract line 7c from line 6.)						9657287.
	otion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6	1494678.	1800246.	1917563.	1889004.	2555796.	9657287.
10a	Gross income from interest,					**************************************	
	dividends, payments received on securities loans, rents, royalties and income from similar sources	358.	39.	3,015.	4,543.	4,423.	12,378.
ŧ	Unrelated business taxable income	and the state of t					
	(less section 511 taxes) from businesses acquired after June 30, 1975			2 63 17	4 5 4 3	4.65	10 200
	Add lines 10a and 10b	358.	39.	3,015.	4,543.	4,423.	12,378.
11	Net Income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
13	assets (Explain in Part VI.)	1495036.	1800285.	1920578.	1893547.	2560219.	9669665.
14	First five years. If the Form 990 is fo	r the organization'	s first, second, thi	rd, fourth, or fifth t	tax year as a section	on 501(c)(3) organi:	zation,
	check this box and stop here			***************************************			<u></u> ▶∐
Se	ction C. Computation of Pub	lic Support Pe	rcentage				
15	Public support percentage for 2016 (	line 8, column (f) d	livided by line 13,	column (f))		15	99.87 %
16						16	99.90 %
Se	ction D. Computation of Inve					T in I	13 ~
17	, ,	,				17	.13 % .10 %
	Investment income percentage from					18	
19	33 1/3% support tests - 2016. If the						<u> </u>
٠.	more than 33 1/3%, check this box a	organization did :	a organization qua not check a box o	nilico ao a publiciy n lìne 14 or lina 19	aupponed digant a, and line 16 is m	ation ore than 33 1/3%.	
	b 33 1/3% support tests - 2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization						
20	Private foundation. If the organization						<b>&gt;</b>
	32023 09-21-16 Schedule A (Form 990 or 990-EZ) 2016						

#### Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A. D. and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(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")? // "Yes," and if you checked 12a or 12b 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)
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document),
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
  - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
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632024 09-21-16

Schedule A (Form 990 or 990-EZ) 2016

2016.03030 ANICIRA VETERINARY CENTER

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

Schedule A (Form 990 or 990-EZ) 2016

4

5

Enter greater of line 2 or line 3

instructions).

Income tax imposed in prior year

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions)

Schedule A (Form 990 or 990-EZ) 2016

c Excess from 2014d Excess from 2015e Excess from 2016

Schedule A	(Form 990 or 990-EZ) 2016 ANICIRA VETERINARY CENTER	20-8358468	Page 8
Part VII	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a of Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additing (See instructions.)	or 17b; Part III, line 12; 1 and 2; Part IV, Sectior V, Section B, line 1e; Pa onal information.	n C, art V,
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#### 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

**2016** 

Name of the organization

Employer identification number

	NICIRA VETERINARY CENTER	20-8358468				
Organization type (check	cone):					
Filers of:	Section:					
Form 990 or 990-EZ	So1(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					
	n is covered by the <b>General Rul</b> e or a <b>Special Rule.</b> (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Specia	Il Rule. See instructions.				
General Rute						
	ion filling Form 990, 990-EZ, or 990-PF that received, during the year, contributions tot ny one contributor. Complete Parts I and II. See instructions for determining a contrib					
Special Rules						
sections 509(a)( any one contrib	ion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% sup 1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, utor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the ar EZ, line 1. Complete Parts I and II.	16a, or 16b, and that received from				
year, total contri	For an organization described in section 501(c)(7), (8), or (10) filling 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.					
year, contributio is checked, ente purpose. Don't c	For an organization described in section 501(c)(7), (8), or (10) filling Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rute 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"	that isn't covered by the General Rule and/or the Special Rules doesn't 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 at the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	B (Form 990, 990-EZ, or 990-PF), lts 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) (2016)

Name of organization

Employer identification number

#### ANICIRA VETERINARY CENTER

20-8358468

Partil	Contributors (See instructions). Use duplicate copies of Part I if additional space is needed.				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1	SUZANNE AUCKERMAN  224 W BANK STREET  BRIDGEWATER, VA 22812	\$15,000.	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		
2	MERCK FOUNDATION  300 BRICKSTONE SQ 601  ANDOVER, MA 01810	\$	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 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		
623452 10-1		\$Schedule B (Form	Person Payroll Oncash Occupiete Part II for noncash contributions.)		

Employer identification number

#### ANICIRA VETERINARY CENTER

20-8358468

Partill	Noncash Property (See instructions). Use duplicate copies of Part II if	additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	when the second
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	Name of the last o
(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
C22 IE2 10 1		\$ Schedule B (Form	990, 990-EZ, or 990-PF) (2016

Name of organ	zation	·····	Employer identification number			
ANICIRA	VETERINARY CENTER		20-8358468			
Pad III	completing Part III, enter the total of exclusively religious	i, charitable, etc., contributions of \$1,000 or les	section 501(c)(/), (8), or (10) that total more than \$1,000 for gline entry. For organizations \$5 for the year. (Enterthis info. once.)			
(a) No.	Use duplicate copies of Part III if additional	ii space is needed.				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gift				
-	Transferee's name, address, ar	d ZIP + 4	Relationship of transferor to transferee			
(a) No						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(e) Transfer of gift					
	Transferee's name, address, as	nd ZIP + 4	Relationship of transferor to transferee			
-						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(e) Transfer of gift					
	Transferce's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
-						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(e) Transfer of gift					
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
623454 10-18-16	3		Schedule B (Form 990, 990-EZ, or 990-PF) (201			

#### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

ANICIRA VETERINARY CENTER

Employer identification number 20-8358468

Pai	Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts. Complete if the
***************************************	organization answered "Yes" on Form 990, Part IV, lin		
		(a) Donor advised funds	(b) Funds and other accounts
1	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		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advise	d funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be u	sed only
	for charitable purposes and not for the benefit of the donor of	r donor advisor, or for any other purpose c	onferring
	impermissible private benefit?	***************************************	Yes No
Pa	Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990, Pa	art IV, line 7.
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (e.g., recreation or e	education) Preservation of a histor	rically important land area
	Protection of natural habitat	Preservation of a certif	ied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form o	f a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
a	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structu	re
-	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	organization during the tax
	vear		
4	Number of states where property subject to conservation ea	sement is located 🟲	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	r—
	violations, and enforcement of the conservation easements	it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting	, handling of violations, and enforcing cons	ervation easements during the year
	<b>&gt;</b>		
7	Amount of expenses incurred in monitoring, inspecting, han	dling of violations, and enforcing conservat	ion easements during the year
	<b>\$</b>		
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the requirements of section 170(	h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conserval	tion easements in its revenue and expense	statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	ition's financial statements that describes t	the organization's accounting for
	conservation easements.		May Cimilar Apanta
Pa	Conservation easements.  TILL Organizations Maintaining Collections of	of Art, Historical Treasures, or O	mer Similar Assets.
	Complete if the organization answered "Yes" on Forr	n 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (A	SC 958), not to report in its revenue statem	nent and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	chibition, education, or research in furtherar	ace of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that desc	ribes these items.	
b	If the organization elected, as permitted under SFAS 116 (A	SC 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 put	olic service, provide the following amounts
	relating to these items:		<b>.</b> .
	(i) Revenue included on Form 990, Part VIII, line 1		
	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$
2	If the organization received or held works of art, historical tr	easures, or other similar assets for financia	I gain, provide
	the following amounts required to be reported under SFAS		<b>.</b>
æ	Revenue included on Form 990, Part VIII, line 1		
t	Assets included in Form 990, Part X		Schedule D (Form 990) 2016

Schedule D (Form 990) 2016 ANICIRA VETE	RINARY CENT	ER	20	-8358468 Page 3
Part VII Investments - Other Securities.				
Complete if the organization answered "Yes" or	n Form 990, Part IV, Iir	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	i-of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		A CONTRACTOR		Control of the second of the s
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes" of	n Form 990, Part IV, lit	ne 11c. See Form 990	, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of	valuation: Cost or end	l·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.) ▶		age ending on to		
Part X Other Assets.				
Complete if the organization answered *Yes" of	on Form 990, Part IV, li	ne 11d. See Form 990	), Part X, line 15.	
	Description		· · · · · · · · · · · · · · · · · · ·	(b) Book value
(1)				
(2)		· · · · · · · · · · · · · · · · · · ·		
(3)			······································	
(4)				
(5)				
(6)		<u></u>		
(7)			The second secon	
(8)				
(9) Total, (Column (b) must equal Form 990, Part X, col. (B) line	151		- · · · · · · · · · · · · · · · · · · ·	
Part X Other Liabilities.			200 D. 14 H 21	
Complete if the organization answered "Yes" (	on Form 990, Part IV, I	ine 11e or 11f. See Fo	rm 990, Part X, line 25	0.
1. (a) Description of liability		(b) Book value	4	
(1) Federal income taxes				rollings of the second
(2)				. Company of the second
(3)				
(4)				
(5)				
(6)				
(7)	1			

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

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

Schedule D (Form 990) 2016

(8)

632054 08-29-16

Schedule D (Form 990) 2016

#### SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

#### Supplemental Information Regarding Fundralsing or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

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

Name of the organization Employer identification number ANICIRA VETERINARY CENTER 20-8358468 Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990 EZ filers are not Part I required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply, ... Mail solicitations ∃ Solicitation of non-government grants internet and email solicitations Solicitation of government grants Special fundraising events Phone solicitations In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or .... No Yes key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the 10 highest paid individuals or entitles (fundralsers) pursuant to agreements under which the fundralser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody (v) Amount paid (vi) Amount paid (iv) Gross receipts (I) Name and address of individual tò (or retained by) to (or retained by) (ii) Activity from activity fundraiser or entity (fundraiser) or control of organization listed in col. (i) contributions Yes 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule G (Form 990 or 990-EZ) 2016 Schedule G (Form 990 or 990 EZ) 2016 ANICIRA VETERINARY CENTER 20-8358468 Page 2 Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events WALK FOR THE NONE (add col. (a) through ANIMALS EVE col. (c)) (event type) (event type) (total number) 15,920. 15,920. 1 Gross receipts 4,350. 4,350. 2 Less: Contributions 11,570. 11,570. 3 Gross Income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes 6 Rent/facility costs 7 Food and beverages 8 Entertainment 23,506. 23,506. 9 Other direct expenses \_\_\_\_\_ 23,506. 10 Direct expense summary. Add lines 4 through 9 in column (d) Net income summary. Subtract line 10 from line 3, column (d) Partill Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (c) Other gaming (a) Bingo Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes Yes Yes 6 Volunteer labor 7 Direct expense summary, Add lines 2 through 5 in column (d) Net gaming income summary. Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities: a is the organization licensed to conduct gaming activities in each of these states? b If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?

Schedule G (Form 990 or 990-EZ) 2016

b If "Yes," explain:

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Sch	nedule G (Form 990 or 990-EZ) 2016 ANICIRA VETERINARY CENTER 20	-8358468	Page 3
	Does the organization conduct gaming activities with nonmembers?	Yes	□ No
	is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	☐ No
13	Indicate the percentage of gaming activity conducted in:		
	The organization's facility	13a	%
	An outside facility		%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
••	Name >		
	Address ►		
158	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
	of "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount of gaming revenue retained by the third party > \$ are the rame and address of the third party:		
•	Name		
	Address ►		
16	Gaming manager information:		
	Name ►		
	Gaming manager compensation > \$		
	Description of services provided		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		······································	
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
1	a Is the organization required under state law to make charitable distributions from the gaming proceeds to	<del></del> 1	<del></del> 1
	retain the state gaming license?	Yes	No
	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in t	he	
	organization's own exempt activities during the tax year > \$		
P	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part	III, lines 9, 9b,	10b, 15b,
	15c, 16, and 17b, as applicable. Also provide any additional information. See Instructions		
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		<u></u>	<del></del>
	C to a de Co	Form COC as Of	00.E71.00+0
632	063 09-12-16 Schedule G	(Form 990 or 99	7U-E4) 2016

Schedule G (Form 990 or 990-EZ) ANICIRA VETERINARY CENTER	20-8358468 Page 4
Schedule G (Form 990 or 990-EZ) ANICIRA VETERINARY CENTER  Part IV Supplemental Information (continued)	
	**************************************
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#### **SCHEDULE 0**

(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.

Attach to Form 990 or 990-EZ.

OMB No. 1545-0047 Open to Public

Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization ANTOTRA VETERTNARY CENTER Employer identification number 20-8358468

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
OUTREACH, SHELTER, CARE AND PROTECTION PROGRAMS TO HELP ANIMALS LIVE
HEALTHY LIVES IN A SAFE ENVIRONMENT. THIS GOAL IS REFLECTED IN THE
TYPE OF PROGRAMS WE OFFER, THE COLLABORATIONS WE DEVELOP, AND OUR
WILLINGNESS TO HELP ANIMALS IN NEED. WE HAVE CONSISTENTLY SHOWN THAT
PROACTIVE AND PROGRESSIVE PROGRAMS MAKE GOOD ECONOMIC SENSE. OUR TEAM
HELPS FAMILIES CARE FOR THEIR PETS BY MAKING VETERINARY CARE
AFFORDABLE.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
COLLABORATIONS WE DEVELOP, AND OUR WILLINGNESS TO HELP ANIMALS IN NEED.
WE HAVE CONSISTENTLY SHOWN THAT PROACTIVE AND PROGRESSIVE PROGRAMS MAKE
GOOD ECONOMIC SENSE. OUR TEAM HELPS FAMILIES CARE FOR THEIR PETS BY
MAKING VETERINARY CARE AFFORDABLE.
FORM 990, PART VI, SECTION B, LINE 11B:
COPIES OF THE 990 PROVIDED TO THE MEMBERS OF THE BOARD FOR THEIR APPROVAL
BEFORE FILING.
FORM 990, PART VI, SECTION C, LINE 19:
THE DOCUMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

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

Schedule O (Form 990 or 990-EZ) (2016)

# ANICIRA VETERINARY CENTER FINANCIAL REPORT

**December 31, 2016** 

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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, 2016 and 2015, 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, 2016 and 2015, 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.

CERTIFIED PUBLIC ACCOUNTANTS

Brown, Edwards Kompany, S. L. P.

Harrisonburg, Virginia April 6, 2016

### STATEMENTS OF FINANCIAL POSITION December 31, 2016 and 2015

	2016	2015
ASSETS		
CURRENT ASSETS		
Cash and cash equivalents	\$ 143,550	\$ 157,041
Investments (Note 2)	104,612	97,292
Accounts receivable	82,935	34,415
Inventory	99,469	80,022
Prepaid expenses	5,432	6,610
Total current assets	435,998	375,380
Property and equipment, net (Note 3)	2,138,483	1,635,136
Total assets	\$ 2,574,481	\$ 2,010,516
LIABILITIES AND NET ASSETS		
CURRENT LIABILITIES		
Current maturities of long-term debt (Note 4)	\$ 84,317	\$ 50,404
Accounts payable	85,774	17,146
Accrued expenses	78,516	49,362
Deferred grant revenue	<del></del>	37,175
Total current liabilities	248,607	154,087
Long-term debt (Note 4)	1,182,794	875,625
Total liabilities	1,431,401	1,029,712
NET ASSETS		
Unrestricted	1,143,080	980,804
Total liabilities and net assets	\$ 2,574,481	\$ 2,010,516

## STATEMENTS OF ACTIVITIES Years Ended December 31, 2016 and 2015

	2016	2015
Unrestricted Revenue and Other Support		
Client services	\$ 2,384,991	\$ 1,727,216
Grants and contributions	170,809	161,788
Investment return (Note 2)	7,367	1,314
Other income	30	-
Gain on sale of assets		150
Total unrestricted revenue and other support	2,563,197	1,890,468
Expenses		
Program services	2,322,330	1,809,501
Support services		
Administrative	77,514	85,635
Fund raising	1,077	1,057
Total expenses	2,400,921	1,896,193
Change in unrestricted net assets	162,276	(5,725)
Net assets, beginning	980,804	986,529
Net assets, ending	\$ 1,143,080	\$ 980,804

### STATEMENTS OF FUNCTIONAL EXPENSES Year Ended December 31, 2016

2016

	 		20	16		
			Support	Service	es	
	Program			I	Fund	Total
	Services	Adm	inistrative	R	aising	 Expenses
Salaries and wages	\$ 1,145,813	\$	22,500	\$	900	\$ 1,169,213
Payroll taxes	62,485		1,227		49	63,761
Benefits	36,602		719		29	37,350
Medical supplies	369,733		-		-	369,733
Contract hire	122,876		-		-	122,876
Advertising	-		13,160		-	13,160
Insurance	137,280		2,464		99	139,843
Interest	50,172		-		-	50,172
Professional fees	-		31,639		-	31,639
Repairs and maintenance	65,812		-		-	65,812
Office	27,443		2,336		-	29,779
Occupancy	23,799		-		-	23,799
Telecommunications	28,012		866		-	28,878
Vehicle	9,547		-		•	9,547
Lab and other program fees	71,919		-		-	71,919
Travel and meals	8,487		2,603		-	11,090
Depreciation	82,279		-		-	82,279
Rent	38,025		-		-	38,025
Miscellaneous	 42,046					 42,046
Total expenses	\$ 2,322,330	\$	77,514	\$	1,077	\$ 2,400,921

#### STATEMENTS OF FUNCTIONAL EXPENSES (Continued) Year Ended December 31, 2015

2015

				20	15			
				Support	Service	S		
	).	rogram			F	'und		Total
		Services	Adm	inistrative	Ra	ising	]	Expenses
Salaries and wages	\$	888,644	\$	22,500	\$	900	\$	912,044
Payroll taxes		49,563		1,255		50		50,868
Benefits		25,292		640		26		25,958
Medical supplies		328,334		-		_		328,334
Contract hire		86,816		•		-		86,816
Advertising		-		22,617		-		22,617
Insurance		90,434		2,032		81		92,547
Interest		43,417		-		-		43,417
Professional fees		-		32,545		-		32,545
Repairs and maintenance		71,508		-		-		71,508
Office		25,539		1,800		-		27,339
Occupancy		17,873		-		-		17,873
Telecommunications		18,042		558		-		18,600
Vehicle		12,617		-		-		12,617
Lab and other program fees		21,125		-		-		21,125
Travel and meals		7,151		850		-		8,001
Depreciation		80,334		-		-		80,334
Miscellaneous		42,812		838		-		43,650
Total expenses	\$	1,809,501	\$	85,635	\$	1,057	\$	1,896,193

#### STATEMENTS OF CASH FLOWS Years Ended December 31, 2016 and 2015

	2016		2015	
OPERATING ACTIVITIES				/
Change in net assets	\$	162,276	\$	(5,725)
Adjustments to reconcile change in net assets to net				
cash provided by (used in) operating activities:				
Gain on sale of property and equipment		-		(150)
Unrealized (gains) losses on investments		(2,944)		3,229
Depreciation expense		82,279		80,334
Amortization of loan issuance costs		3,864		2,878
Change in assets and liabilities:				
Decrease (increase) in:				
Accounts receivable		(48,520)		(9,903)
Inventory		(19,447)		10,329
Prepaid expenses		1,178		4,326
Increase (decrease) in:				
Accounts payable and accrued expenses		66,957		(27,896)
Deferred grant revenue		(37,175)		(75,131)
Net cash provided by (used in) operating activities		208,468		(17,709)
INVESTING ACTIVITIES				
Net purchase of investments		(4,376)		(4,501)
Proceeds from disposal of property and equipment		-		3,950
Purchase of property and equipment	_	(260,801)		(38,666)
Net cash used in investing activities		(265,177)		(39,217)
FINANCING ACTIVITIES				
Proceeds from long-term debt		142,926		-
Payments of long-term debt		(99,708)		(62,540)
Net cash provided by (used in) financing activities		43,218		(62,540)
Decrease in cash and cash equivalents		(13,491)		(119,466)
CASH AND CASH EQUIVALENTS				
Beginning		157,041		276,507
Ending	\$	143,550	\$	157,041
SUPPLEMENTAL DISCLOSURE OF CASH FLOW INFORMATION				
Cash paid for interest	\$	50,172	\$	40,539
Closing cost netted against debt proceeds from refinancing	\$	5,074	\$	
NONCASH INVESTING AND FINANCING ACTIVITIES				
Fixed assets purchased through debt financing	\$	294,000	\$	
Fixed asset purchases in accounts payable	\$	30,825	\$	

#### NOTES TO FINANCIAL STATEMENTS December 31, 2016

#### 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 part-time 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, 2016

#### 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 2016 or 2015.

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, 2016 and 2015. 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.

9

(Continued)

#### NOTES TO FINANCIAL STATEMENTS December 31, 2016

#### 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 represent the cost of debt issuance to purchase the Manassas and new Harrisonburg locations. During 2016, the Center adopted FASB Accounting Standards Update (ASU) No. 2015-03, Interest — Imputation of Interest (Subtopic 835-30): Simplifying the Presentation of Debt Issuance Costs which requires loan issuance costs to be recorded with long-term debt on the balance sheet. Loan issuance costs are amortized over the life of the debt. The Center recognized amortization of \$3,684 and \$2,878 during 2016 and 2015, respectively.

#### 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.

#### 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 6, 2017, the date the financial statements were available to be issued.

(Continued) 10

#### NOTES TO FINANCIAL STATEMENTS December 31, 2016

#### 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:

	2016		2015			
	Level 1			Level 1		
Mutual fund - primarily equities	\$	104,612		97,292		
Investment return is comprised of the following:						
•		2016		2015		
Interest and dividends Capital gain distributions Unrealized gains (losses)	\$	1,061 3,362 2,944	\$	726 3,817 (3,229)		
	\$	7,367	\$	1,314		

#### NOTES TO FINANCIAL STATEMENTS December 31, 2016

#### **Property and Equipment** Note 3.

Property and equipment consist of the following:		
	 2016	 2015
Construction in progress Land Land improvements Buildings and improvements Medical equipment Vehicles Office equipment, software, furniture and fixtures	\$ 60,149 675,342 11,360 1,417,385 301,690 23,178 30,069	\$ 217,163 11,360 1,374,896 278,757 23,178 28,194
Less accumulated depreciation	\$ 2,519,173 (380,690) 2,138,483	\$ 1,933,548 (298,412) 1,635,136
Long-Term Debt		
Long-term debt consists of the following:  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.	\$ <b>2016</b> 37,737	\$ <b>2015</b> 87,624
Nets were life to United Donly dated July 24, 2014; due		

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.	\$ 37,737	\$ 87,624
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.	821,313	854,471
Note payable to United Bank dated May 9, 2016; due in monthly installments of \$1,080, including interest at 3.75%; maturing in a balloon payment on May 9, 2019, collateralized by real estate.	141,682	-

Note payable to United Bank dated June 21, 2016; due in monthly installments of \$2,146, including interest at 3.75%; maturing in a balloon payment on June 21, 2019, collateralized by real estate.

Less: Unamortized debt issuance costs
Long-term debt, net of unamortized debt issuance costs
Less: Current portion

Note 4.

#### NOTES TO FINANCIAL STATEMENTS December 31, 2016

#### Note 4. Long-Term Debt (Continued)

Principal payments on the above are due as follows:

2017	\$ 84,817
2018	48,952
2019	405,318
2020	27,430
2021	 717,870
	\$ 1,284,387

#### 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 \$7,001 and \$9,720 during 2016 and 2015, respectively.

#### Note 6. Leases

On July 25, 2016, the Center entered into a two year building lease agreement, with a two year renewal term. The term of this lease began on August 1, 2016 and ends on August 1, 2018. The Center also entered into another building lease agreement on October 31, 2016. The term of this lease is five years, beginning on October 31, 2016, and ending on October 31, 2021. Total rent expense was \$33,504 for the year ended December 31, 2016. The future minimum lease payments for the next five years are as follows:

2017	\$ 114,01	6
2018	101,51	6
2019	84,01	6
2020	84,01	6
2021	70,01	3

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(Continued)

# ANICIRA VETERINARY CENTER FINANCIAL REPORT

**December 31, 2016** 

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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, 2016 and 2015, 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, 2016 and 2015, 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.

CERTIFIED PUBLIC ACCOUNTANTS

Brown, Edwards & Company, S. L. P.

Harrisonburg, Virginia April 6, 2016

## STATEMENTS OF FINANCIAL POSITION December 31, 2016 and 2015

	2016	2015
ASSETS		
CURRENT ASSETS		
Cash and cash equivalents	\$ 143,550	\$ 157,041
Investments (Note 2)	104,612	97,292
Accounts receivable	82,935	34,415
Inventory	99,469	80,022
Prepaid expenses	5,432	6,610
Total current assets	435,998	375,380
Property and equipment, net (Note 3)	2,138,483	1,635,136
Total assets	\$ 2,574,481	\$ 2,010,516
LIABILITIES AND NET ASSETS		
CURRENT LIABILITIES		
Current maturities of long-term debt (Note 4)	\$ 84,317	\$ 50,404
Accounts payable	85,774	17,146
Accrued expenses	78,516	49,362
Deferred grant revenue	_	37,175
Total current liabilities	248,607	154,087
Long-term debt (Note 4)	1,182,794	875,625
Total liabilities	1,431,401	1,029,712
NET ASSETS		
Unrestricted	1,143,080	980,804
Total liabilities and net assets	\$ 2,574,481	\$ 2,010,516

# STATEMENTS OF ACTIVITIES Years Ended December 31, 2016 and 2015

	2016	2015
Unrestricted Revenue and Other Support		
Client services	\$ 2,384,991	\$ 1,727,216
Grants and contributions	170,809	161,788
Investment return (Note 2)	7,367	1,314
Other income	30	
Gain on sale of assets		150
Total unrestricted revenue and other support	2,563,197	1,890,468
Expenses		
Program services	2,322,330	1,809,501
Support services		
Administrative	77,514	85,635
Fund raising	1,077	1,057
Total expenses	2,400,921	1,896,193
Change in unrestricted net assets	162,276	(5,725)
Net assets, beginning	980,804	986,529
Net assets, ending	\$ 1,143,080	\$ 980,804

## STATEMENTS OF FUNCTIONAL EXPENSES Year Ended December 31, 2016

2016

	2016							
				Support	Service	S		
		Program			F	und	Total	
		Services	Administrative		R	aising	Expenses	
Salaries and wages	\$	1,145,813	\$	22,500	\$	900	\$	1,169,213
Payroll taxes		62,485		1,227		49		63,761
Benefits		36,602		719		29		37,350
Medical supplies		369,733		-		-		369,733
Contract hire		122,876				-		122,876
Advertising		_		13,160		-		13,160
Insurance		137,280		2,464		99		139,843
Interest		50,172		-		-		50,172
Professional fees		_		31,639		-		31,639
Repairs and maintenance		65,812		-		-		65,812
Office		27,443		2,336		-		29,779
Occupancy		23,799		-		-		23,799
Telecommunications		28,012		866		-		28,878
Vehicle		9,547		-		-		9,547
Lab and other program fees		71,919		-		-		71,919
Travel and meals		8,487		2,603		-		11,090
Depreciation		82,279		-		-		82,279
Rent		38,025		-		-		38,025
Miscellaneous		42,046		-		-		42,046
Total expenses	\$	2,322,330	\$	77,514	\$	1,077	\$	2,400,921

## STATEMENTS OF FUNCTIONAL EXPENSES (Continued) Year Ended December 31, 2015

2015

	2015							
				Support	Service	s		
	Program				1	<b>Fund</b>	Total	
		Services	Adm	Administrative		Raising		Expenses
Salaries and wages	\$	888,644	\$	22,500	\$	900	\$	912,044
Payroll taxes		49,563		1,255		50		50,868
Benefits		25,292		640		26		25,958
Medical supplies		328,334		-		-		328,334
Contract hire		86,816				-		86,816
Advertising		<b>-</b>		22,617		-		22,617
Insurance		90,434		2,032		81		92,547
Interest		43,417				-		43,417
Professional fees		· <u>-</u>		32,545		-		32,545
Repairs and maintenance		71,508		-		-		71,508
Office	25,539			1,800		-		27,339
Occupancy		17,873		-		-		17,873
Telecommunications		18,042		558		-		18,600
Vehicle		12,617		-		-		12,617
Lab and other program fees		21,125		-		-		21,125
Travel and meals		7,151		850		-		8,001
Depreciation		80,334		-		-		80,334
Miscellaneous		42,812		838			<u></u>	43,650
Total expenses	\$	1,809,501	\$	85,635	\$	1,057	\$	1,896,193

## STATEMENTS OF CASH FLOWS Years Ended December 31, 2016 and 2015

	2016		2015		
OPERATING ACTIVITIES					
Change in net assets	\$	162,276	\$	(5,725)	
Adjustments to reconcile change in net assets to net					
cash provided by (used in) operating activities:					
Gain on sale of property and equipment		+		(150)	
Unrealized (gains) losses on investments		(2,944)		3,229	
Depreciation expense		82,279		80,334	
Amortization of loan issuance costs		3,864		2,878	
Change in assets and liabilities:					
Decrease (increase) in:					
Accounts receivable		(48,520)		(9,903)	
Inventory		(19,447)		10,329	
Prepaid expenses		1,178		4,326	
Increase (decrease) in:					
Accounts payable and accrued expenses		66,957		(27,896)	
Deferred grant revenue		(37,175)		(75,131)	
Net cash provided by (used in) operating activities		208,468		(17,709)	
INVESTING ACTIVITIES					
Net purchase of investments		(4,376)		(4,501)	
Proceeds from disposal of property and equipment		-		3,950	
Purchase of property and equipment		(260,801)		(38,666)	
Net cash used in investing activities		(265,177)		(39,217)	
FINANCING ACTIVITIES					
Proceeds from long-term debt		142,926		-	
Payments of long-term debt		(99,708)	,	(62,540)	
Net cash provided by (used in) financing activities		43,218		(62,540)	
Decrease in cash and cash equivalents		(13,491)		(119,466)	
CASH AND CASH EQUIVALENTS					
Beginning		157,041		276,507	
Ending	\$	143,550	\$	157,041	
SUPPLEMENTAL DISCLOSURE OF CASH FLOW INFORMATION					
Cash paid for interest	\$	50,172	\$	40,539	
Closing cost netted against debt proceeds from refinancing	\$	5,074	\$	-	
NONCASH INVESTING AND FINANCING ACTIVITIES					
Fixed assets purchased through debt financing	\$	294,000	\$	-	
Fixed asset purchases in accounts payable	\$	30,825	\$		

The accompanying notes are an integral part of these statements.

## NOTES TO FINANCIAL STATEMENTS December 31, 2016

#### 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 part-time 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, 2016

#### 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 2016 or 2015.

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, 2016 and 2015. 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, 2016

#### 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 represent the cost of debt issuance to purchase the Manassas and new Harrisonburg locations. During 2016, the Center adopted FASB Accounting Standards Update (ASU) No. 2015-03, Interest – Imputation of Interest (Subtopic 835-30): Simplifying the Presentation of Debt Issuance Costs which requires loan issuance costs to be recorded with long-term debt on the balance sheet. Loan issuance costs are amortized over the life of the debt. The Center recognized amortization of \$3,684 and \$2,878 during 2016 and 2015, respectively.

#### 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.

#### 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 6, 2017, the date the financial statements were available to be issued.

#### NOTES TO FINANCIAL STATEMENTS December 31, 2016

#### 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:

	2016		 2015
	I	Level 1	 Level 1
Mutual fund - primarily equities	\$	104,612	\$ 97,292
Investment return is comprised of the following:			
		2016	 2015
Interest and dividends Capital gain distributions Unrealized gains (losses)	\$	1,061 3,362 2,944	\$ 726 3,817 (3,229)
	\$	7,367	\$ 1,314

#### NOTES TO FINANCIAL STATEMENTS December 31, 2016

#### Note 3. **Property and Equipment**

Property and equipment consist of the following:			
		2016	 2015
Construction in progress Land Land improvements Buildings and improvements Medical equipment Vehicles Office equipment, software, furniture and fixtures	\$	60,149 675,342 11,360 1,417,385 301,690 23,178 30,069 2,519,173	\$  217,163 11,360 1,374,896 278,757 23,178 28,194
Less accumulated depreciation	<u>\$</u>	(380,690) 2,138,483	\$ (298,412) 1,635,136
Long-Term Debt			
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		2016	2015
July 27, 2017, collateralized by real estate.	\$	37,737	\$ 87,624

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.
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.

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Less: Unamortized debt issuance costs
Long-term debt, net of unamortized debt issuance costs
Less: Current portion

141,682		-
283,655		_
1,284,387	-	942,095
(17,276)		(16,066)
1,267,111		926,029
 (84,317)		(50,404)
\$ 1,182,794	\$	875,625

854,471

821,313

Note 4.

#### NOTES TO FINANCIAL STATEMENTS December 31, 2016

## Note 4. Long-Term Debt (Continued)

Principal payments on the above are due as follows:

2017	\$ 84,817
2018	48,952
2019	405,318
2020	27,430
2021	717,870
	\$ 1,284,387

#### 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 \$7,001 and \$9,720 during 2016 and 2015, respectively.

#### Note 6. Leases

On July 25, 2016, the Center entered into a two year building lease agreement, with a two year renewal term. The term of this lease began on August 1, 2016 and ends on August 1, 2018. The Center also entered into another building lease agreement on October 31, 2016. The term of this lease is five years, beginning on October 31, 2016, and ending on October 31, 2021. Total rent expense was \$33,504 for the year ended December 31, 2016. The future minimum lease payments for the next five years are as follows:

2017	\$	114,016
2018		101,516
2019		84,016
2020		84,016
2021	·	70,013