## **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service A For the 2023 calendar year, or tax year beginning and ending Check if C Name of organization D Employer identification number Address change UNITED ANIMAL NATIONS DBA REDROVER Name change Doing business as 68-0124097 Initial return Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite Final return/ 1419 21ST STREET 916-429-2457 termin-ated City or town, state or province, country, and ZIP or foreign postal code 7,721,331. G Gross receipts \$ Amended return SACRAMENTO, CA 95811 H(a) Is this a group return Applica-tion pending F Name and address of principal officer: KATIE CAMPBELL for subordinates? Yes X No SAME AS C ABOVE H(b) Are all subordinates included? Yes No Tax-exempt status: X 501(c)(3) 501(c) ( (insert no.) 4947(a)(1) or 527 If "No," attach a list. See instructions WWW.REDROVER.ORG J Website: H(c) Group exemption number K Form of organization: X Corporation Association Other L Year of formation: 1987 M State of legal domicile: CA Summary Briefly describe the organization's mission or most significant activities: TO BRING ANIMALS OUT OF CRISIS Governance AND STRENGTHEN THE BOND BETWEEN PEOPLE AND ANIMALS. if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 9 Number of independent voting members of the governing body (Part VI, line 1b) 9 Activities & Total number of individuals employed in calendar year 2023 (Part V, line 2a) 27 5 Total number of volunteers (estimate if necessary) 4837 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. b Net unrelated business taxable income from Form 990-T, Part I, line 11 0. Prior Year **Current Year** Contributions and grants (Part VIII, line 1h) 5,205,794. Revenue 5,951,587. Program service revenue (Part VIII, line 2g) 15,180. 12,733. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 -13.052.188,059. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) -27,790. -36,327. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 5,180,132. 6,116,052. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 1,496,815. 1,895,717. Benefits paid to or for members (Part IX, column (A), line 4) 14 0. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,944,392. 1,961,469. Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) 15,900. 17,200. b Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 2,164,654 2,285,731. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 5,621,761. 6,160,117. Revenue less expenses. Subtract line 18 from line 12 -441,629. -44,065. 0 **Beginning of Current Year End of Year** Assets (Balanc 20 Total assets (Part X, line 16) 7,263,746. 7,930,189. 21 Total liabilities (Part X, line 26) 316,501. Net A 583,904. 22 Net assets or fund balances. Subtract line 21 from line 20 6,947,245. 7,346,285. Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign SUSAN ROBERT Here VICE PRESIDENT OF PROGRAMS Type or print name and title Print/Type preparer's name Date Preparer's signature Check Paid KEITH R. GLEN KEITH R. GLEN 09/30/24 P01317613 self-employed Preparer GILBERT CPAS Firm's name Firm's EIN 68-0037990 Use Only Firm's address 2880 GATEWAY OAKS DR, SACRAMENTO, CA 95833 Phone no. 916-646-6464

X Yes

	990 (2023) UNITED ANIMAL NATIONS DBA REDROVER 68-0124	4097	Page 2
Par	1 1 Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
	TO BRING ANIMALS OUT OF CRISIS AND STRENGTHEN THE BOND BETWEEN	PEOPL	E
	AND ANIMALS THROUGH EMERGENCY SHELTERING, DISASTER RELIEF SERV	ICES,	\BT
	FINANCIAL ASSISTANCE AND EDUCATION. REDROVER ACCOMPLISHES ITS	NT SOTO	774
	BY ENGAGING VOLUNTEERS AND SUPPORTERS, COLLABORATING WITH OTHER	VO VIAT	
	Did the organization undertake any significant program services during the year which were not listed on the	Vas	X No
	prior Form 990 or 990-EZ?	100	
2	If "Yes," describe these new services on Schedule O.  Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
3	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total en	xpenses, a	nd
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 2,871,254 · including grants of \$ 1,895,717 · ) (Revenue \$	-57,6	29.
	REDROVER RELIEF - IN 2023, REDROVER RELIEF PROVIDED GUIDANCE,	COOD	
	REFERRALS, CASE MANAGEMENT, AND FINANCIAL ASSISTANCE TO 5,358 SAMARITANS, ANIMAL RESCUERS AND PET OWNERS, HELPING THEM OBTAIN	N	
	EMERGENCY VETERINARY CARE FOR ANIMALS IN LIFE-THREATENING SITU.	ATIONS	3.
	REDROVER RELIEF CASE MANAGERS AWARDED 539 REDROVER RELIEF GRAN	TS,	
	TOTALING \$188,517 FOR THESE ANIMALS IN CRISIS. REDROVER RELIEF	CASE	
	MANAGERS ALSO WORKED WITH DOMESTIC VIOLENCE ADVOCATES TO HELP	FLEEIN	1G
	VICTIMS GET THEIR PETS TO SAFETY. REDROVER'S SAFE ESCAPE GRANT	PROGF	RAM,
	WHICH PROVIDES FUNDING FOR URGENT BOARDING AND VETERINARY CARE	FOR	
	DOMESTIC VIOLENCE VICTIMS' PETS, PROVIDED 13,681 SAFE NIGHTS O	F	
	BOARDING TO 336 PETS, GIVING 298 GRANTS, TOTALING \$312,695. IN		71
	ADDITION, REDROVER RELIEF AWARDED 25 SAFE HOUSING GRANTS TO DO	MESIIC	
4b	(Code: ) (Expenses \$ 711,307. including grants of \$ ) (Revenue \$ EDROVER RESPONDERS - IN 2023, REDROVER RESPONDERS DEPLOYED 15	TIMES	
	WE HAD 2,861 VOLUNTEER HOURS AND HELPED A TOTAL OF 2,076 ANIMA	LS. IN	V
	JANUARY, WE SENT A TEAM OF VOLUNTEERS TO MISSISSIPPI TO ASSIST	THE	
	HUMANE SOCIETY OF THE UNITED STATES WITH THE SHELTERING AND CA	RE OF	170
	CATS RESCUED FROM AN ALLEGED CRUELTY SITUATION. IN JUNE, THE R	EDROVE	ER
	RESPONDERS TEAM WAS ON THE GROUND IN MISSOURI HELPING NATIONAL	MILLL	DOG
	RESCUE CARE FOR 127 DOGS TRANSPORTED FROM A COMMERCIAL BREEDIN	EDDOM	TD
	FACILITY IN ANOTHER STATE. IN 2023, WE CONTINUED OUR TWO NEW R	DROVI	CIR
	RESPONDERS INITIATIVES: COMMUNITY PROGRAMS AND COASTAL CATS. F COMMUNITY PROGRAMS, OUR VOLUNTEERS PROVIDE HANDS-ON SUPPORT WI	TH	
	PROJECTS DESIGNED TO MEET THE SPECIFIC NEEDS OF A COMMUNITY, W	HICH A	ARE
	OFTEN ISOLATED, AT-RISK, OR UNDER-RESOURCED COMMUNITIES. IN 20	23, W	판
4c	(Code: \(\(\)\((\)\((\)\((\)\)\((\)\((\)\)\((\)\((\)\)\((\)\(\)\((\)\)\((\)\((\)\)\((\)\((\)\)\((\)\((\)\)\((\)\)\((\)\((\)\)\((\)\)\((\)\((\)	12,	733.)
	REDROVER READERS - IN 2023, REDROVER READERS TRAINED 92 PEOPLE	ON HO	WC
	TO IMPLEMENT THE READERS CURRICULUM IN 10 WORKSHOPS. THE UNIQU	Æ,	
	ANIMAL-THEMED, LITERATURE-BASED SOCIAL AND EMOTIONAL LEARNING	PROGRA	AM
	IS ALIGNED WITH ACADEMIC CONTENT STANDARDS AND HELPS CHILDREN	CCITCC	TON
	UNDERSTAND ANIMALS AND PRACTICE EMPATHY THROUGH STORIES AND DI	ACHIM	G AN
	THIS YEAR, 16 READINGS TOOK PLACE ONLINE AND IN CLASSROOMS, REESTIMATED 2,054 NEW CHILDREN AND ADDING TO THE ESTIMATED TOTAL	REAC	H OF
	123,361 CHILDREN. KIND NEWS MAGAZINE REACHED 275,913 CHILDREN	IN 20	23
	THROUGH PRINT SUBSCRIPTIONS AND DIGITAL DOWNLOADS, AND NEARLY	1.5	
	MILLION CHILDREN SINCE WE ADOPTED THE PUBLICATION IN 2017. OUR	REDRO	OVER
	READERS PROGRAM ESTABLISHED A NEW COMMUNITY PARTNERSHIP WITH F	OREST	
	SCHOOL IN SOUTH TEXAS AND ADDED SEVEN NEW DIVERSE AND NATURE-E	SASED	
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ 812,212. including grants of \$ ) (Revenue \$ 21,302	• • )	

4e Total program service expenses

If Yes, *complete Schedule A complete Schedule of Contributore? See Instructions   1				Yes	s No
3 Did the organization engage in direct or indirect political campaign activities on behalf or or in opposition to candicitates for public office? If "Fee," complete Schedule C, Part II  Section 50 (16)(3) organizations. Did the organization engage in lobbying activities, or have a section 50 (10) election in effect during the tax year? If "Yes," complete Schedule C, Part II  Is the organization a section 50 (16)(4), 50 (16)(5), 50 (16)(5), 50 (16)(6), 50 (1	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
3 Did the organization engage in direct or indirect political campaign activities on behalf or or in opposition to candicitates for public office? If "Fee," complete Schedule C, Part II  Section 50 (16)(3) organizations. Did the organization engage in lobbying activities, or have a section 50 (10) election in effect during the tax year? If "Yes," complete Schedule C, Part II  Is the organization a section 50 (16)(4), 50 (16)(5), 50 (16)(5), 50 (16)(6), 50 (1	2	Is the organization required to complete School of B. Out, J. J. Co. at II.	1		
public office? If "Yes," complete Schedule C, Part II  Section 501(6)(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 III  Is the organization a section 501(e)(4), 501(e)(6),		and organization required to complete ochedule b, schedule of contributors, see instructions	2	X	
during the tax year? If "Yes," complete Schedule C, Part II  Is the organization a section 501(e)(6), 501(e)(6), or 501(e)(6) or 501(e)	3	bid the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
during the tax year? If "Yes," complete Schedule C, Part II  Is the organization a section 501(e)(6), 501(e)(6), or 501(e)(6) or 501(e)		Seation Fold VO	3		X
similar granutta as deficial on Rev. Proc. 98-197 II "Yes," complete Schedule C, Part III    5   X    5   X    5   X    5   X    5   X    6   X    7   X    7   X    8   X    8   X    8   X    8   X    8   X    8   X    8   X    8   X    9   X    10   X    11   X    12   X    13   X    14   X    15   X    16   X    16   X    17   X    18   X    18   X    19   X    10   X    10   X    10   X    10   X    11   X    12   X    13   X    14   X    15   X    16   X    16   X    17   X    18   X    18   X    19   X    10   X    10   X    10   X    10   X    11   X    11   X    12   X    12   X    13   X    14   X    15   X    16   X    16   X    17   X    18   X    19   X    10   X    10   X    10   X    10   X    11   X    11   X    12   X    13   X    14   X    15   X    16   X    17   X    18   X    19   X    10   X    10   X    10   X    11   X    11   X    12   X    13   X    14   X    15   X    16   X    17   X    18   X    19   X    10   X    10   X    11   X    11   X    12   X    13   X    14   X    15   X    16   X    17   X    18   X    19   X    10   X    11   X    11   X    11   X    12   X    12   X    13   X    14   X    15   X    16   X    17   X    18   X    19   X    10   X    11   X    11   X    11   X    12   X    13   X    14   X    15   X    16   X    17   X    18   X    18   X    19   X    10   X    11   X    11   X    11   X    12   X    13   X    14   X    15   X    16   X    17   X    18   X    18   X    19   X    10   X    11   X    11   X    11   X    12   X    12   X    13   X    14   X    15   X    16   X    17   X    18   X    18   X    19   X    10   X    11   X    11   X    11   X    11   X    12   X    13   X    14   X    15   X    16   X    17   X    18   X    18   X    19   X    19   X    10   X    11   X    11   X    11   X    11   X    12   X    13   X    14	4	Section 30 I(C)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in office	+	x	
smiller amounts as defined in Rev. Proc. 98-197 If 'Yes, 'complete Schedule C, Part III  Did the organization maintain any donor advised funds or any similar funds or accounts for Which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes, 'complete Schedule D, Part II  Did the organization report on fold a conservation essament, including assements to preserve open space.  To Did the organization report an amount in Part X, line 21, for escrow or custodial account fability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negatiation services?  If 'Yes,' complete Schedule D, Part III  Did the organization report an amount for Part X, line 21, for escrow or custodial account fability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negatiation services?  If 'Yes,' complete Schedule D, Part IV  10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? II' Yes, 'complete Schedule D, Part V  11 If the organization report an amount for investments program related in Part X, line 10? II' Yes, 'complete Schedule D, Part VI  12 Did the organization report an amount for investments or other securities in Part X, line 10? II' Yes, 'complete Schedule D, Part VI  12 Did the organization report an amount for investments program related in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 18? If 'Yes, 'complete Schedule D, Part VI  Did the organization report an amount for other liabilities in Part X, line 18? If 'Yes, 'complete Schedule D, Part VI  Did the organization report an amount for other liabilities in Part X, line 18. Sended D, Part X III  Did the organization report an amount for other liabilities in Part X, line 18. Sended D, Part X III  Did the organization report an amount for other liabilities in Part X, line 18. Sended D, Pa	5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	1	1 22	+
provide advice on the distribution or investment of amounts in such funds or accounte? If "Yes," complete Schedule D, Part I   Did the organization resport an amount for investment in childing assemble to preserve a custodial account flability; serve as a custodian for amounts not listed in Part X, in provide ordinal counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part III Did the organization report an amount for investments or in quasi-endowments? If "Yes," complete Schedule D, Part IV If the organization in service or the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IVI, IV, IV, IV, IV, IV,	6	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic and areas, or historic structures if "Ves," complete Schedule D, Part III.  8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.  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 courseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V.  10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If "Yes," complete Schedule D, Part V.  11 If the organization is answer to any of the following questions is "Yes," then complete Schedule D, Part V.  12 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V.  13 Did the organization report an amount for westments - porgan related 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 VIII.  14 Did the organization report an amount for rewestments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  15 Did the organization report an amount for other assets in Part X, line 15% If "Yes," complete Schedule D, Part X III.  16 Did the organization report an amount for other assets in Part X, line 15% If "Yes," complete Schedule D, Part X III.  17 Did the organization report an amount for other assets in Part X, line 15% If "Yes," complete Schedule D, Part X III.  18 Did the organization report an amount for other liabilities in Part X, line 15% If "Yes," complete Schedule D, Part X III.  19 Did the organization report an amount for other liabilities in Part	•	provide advice on the distribution or investment of arrounds in and for accounts for which donors have the right to			
the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III.  Did the organization mentiant collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.  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 counselling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.  Did the organization servicity or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If "Yes," complete Schedule D, Part V.  If the organization report any of the following questions is "Yes," then complete Schedule D, Parts V, VII, VIII, IX, or X, as applicable.  a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VIII.  b Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII.  c Did the organization report an amount for investments. Program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  Did the organization report an amount for torker assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X VIII.  Did the organization separate or amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X VIII.  Did the organization's separate or consolidated financial statements for the tax year include a forthorte that addresses the organization's leability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X VIII.  Did the organization organization asserted in section 170(b)(1)(N)(R) If "Yes," compl	7	Did the organization receive or held a consequence of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	_	X
b Ut the organization report an amount for investments of the report of the organization report an amount for land, buildings, and equipment in Part X, line 121, for escrow or crustodial account liability; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?  If "Yes," complete Schedule D, Part IV  10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasiendowments? "Yes," complete Schedule D, Part V    11 If the organization report an amount for land, buildings, and equipment in Part X, line 107 If "Yes," complete Schedule D, Part V    12 Did the organization report an amount for investments of the recurrities in Part X, line 107 If "Yes," complete Schedule D, Part V    13 Did the organization report an amount for investments - other securities in Part X, line 107 If "Yes," complete Schedule D, Part V II  14 Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part V II  15 Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part V II  16 Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part X II  17 Did the organization report an amount for other assets in Part X, line 125 If "Yes," complete Schedule D, Part X II  18 Dat the organization report an amount for other assets in Part X, line 125 If "Yes," complete Schedule D, Part X II  19 Dat the organization obtain separate or consolidated financial statements for the tax year II "Yes," complete Schedule D, Part X II  19 Dat the organization obtain separate or consolidated financial statements for the tax year? If "Yes," comple	•	the environment, historic land ereas as historic day of a 10 March 110 March			
Schedule D, Part III  Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?  If 'Yes,' complete Schedule D, Part IV.  Did the organization service to any of the following questions is "Yes," then complete Schedule D, Parts VI, IV, IVIII, IX, or X, as applicable.  Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI  Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII  Did the organization report an amount for investments - other securities in Part X, line 12? If "Yes," complete Schedule D, Part VII  Did the organization report an amount for investments - other securities in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  Did the organization report an amount for investments - organizar related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  Did the organization report an amount for other assets in Part X, line 15; that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X  110	8	Did the organization maintain collections of walks of all the organizations are supported by the organization maintain collections of walks of all the organizations are supported by the organization maintain collections of walks or all the organizations are supported by the organization maintain collections of walks or all the organizations are supported by the organization maintain collections of walks or all the organizations are supported by the organization maintain collections of walks or all the organizations are supported by the organization of the or	7		<u> </u>
amounts not listed in Part X, or provide oredit counseling, debt management, credit repair, or debt negotiation services?  If "Yes," complete Schedule D, Part IV  10 Did the organization incustory or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If "Yes," complete Schedule D, Part V  11 If the organization incustory or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If "Yes," complete Schedule D, Part V  11 If the organization is answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.  2		Schedule D, Part III	8		x
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or in quasi-endowments? If "Yes," complete Schedule D, Part V  11 If the organization is answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X, as applicable.  a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII  b Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII  c Did the organization report an amount for investments - program related 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 VIII  d Did the organization report an amount for other assets in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  d Did the organization report an amount for other liabilities in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X III  Did the organization is separate or consolidated financial statements for the tax year include a footnote that addresses the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization by a separate or consolidated financial statements for the tax year III "Yes," complete Schedule D, Part X IIII X  Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," and If the organization answered "No" to line 12a, then completing Schedule D, Part X IIII X  14a Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV  15b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of gagness or other ass		amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
or in quasi-endowments? If "Yes," complete Schedule D, Part V   11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.  a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI   11a X   11b X   1	10	Did the organization, directly or through a related expenization, held exects in the	9	-	X
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or more? If "Yes," complete Schedule F, Parts I and IV  15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV  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  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. See instructions  18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III  19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  20 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  20 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule I, Parts I and II  21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II  21 X	D	bid the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
foreign organization? If "Yes," complete Schedule F, Parts II and IV  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  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. See instructions  18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III  20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  20a If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II  21 X		investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
foreign organization? If "Yes," complete Schedule F, Parts II and IV  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  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. See instructions  18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III  20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  20a If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II  21 X	45	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV  16 X  17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions  18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III  19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  20a X  20b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II  21 X	15	bid the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
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20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 X	20a	bid the organization operate one or more nospital facilities? If "Yes," complete Schedule H	_		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	D	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?			
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 any domestic organization or			_
		domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	x	
EAPH WILL PARTY	332003	12-21-23			50537

P: <b>23</b> D aı S <b>24a</b> D	bid the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III  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	22	Yes	No
P: <b>23</b> D aı S <b>24a</b> D	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23 D ar S 24a D	old the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
ar S <b>24a</b> D Ia	nd former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	1 1		
S <b>24a</b> D Ia	na familie difficels, directors, trasteos, toy striptey and	1 1		
<b>24a</b> D la	Schedule J	23		X
la	hid the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	ast day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No." go to line 25a	24a		X
h D	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
сГ	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
а	nny tax-exempt bonds?	24c		
d D	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a S	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			7.7
ti	ransaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
h le	s the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
t	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			1,,
S	Schedule L. Part I	25b		X
<b>26</b> D	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26	_	X
27 F	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			.,
-	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28 V	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			1000
i	instructions for applicable filing thresholds, conditions, and exceptions):	A STAN	000	15.11
a /	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			7.7
1	"Yes." complete Schedule L. Part IV	28a	_	X
b A	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	_	X
G /	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?/f			
	"Yes." complete Schedule L, Part IV	28c	-	X
20 1	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	_	X
30 I	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes." complete Schedule M	30	_	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	_	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32	-	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes." complete Schedule R, Part I	33	-	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	1		١
	Part V line 1	34	-	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	-	X
h	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	1	1	
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	-	+-
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			1,,,
	If "Yes " complete Schedule R. Part V, line 2	36	+	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			\ <sub>V</sub>
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	+-	X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	_ 38	X	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			ᆂ
			Ye	s No
12	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	4	1	123
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b	0	917	
h	The state of the s		I had	100
h	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1000	X	

Form 990 (2023) UNITED ANIMAL NATIONS DBA REDROVER
Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

2	Entoy the provide and south	T.	1		Yes	No			
2	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			1912					
	filed for the calendar year ending with or within the year covered by this return	2a	2	-	100	18			
3:	Did the organization have unrelated business grass in some (the organization have unrelated business grass g			2b	X				
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedul			3a		X			
4:	At any time during the calendar year, did the organization have an interest in, or a signature or othe	e U		3b					
	financial account in a foreign country (such as a bank account, securities account, or other financial	rautno	enty over, a			v			
ŀ	If "Yes," enter the name of the foreign country	accou	int)?	4a		X			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial	Λοοοιι	nto (EDAD)						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	Accou	nis (FBAR).	E-10	Term.	v			
k	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans	action		5a		X			
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	action	·	5b 5c					
<b>6</b> a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did	the oro	anization colloit	50	-				
	any contributions that were not tax deductible as charitable contributions?	are org	ai iization solicit	6a		X			
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	itions o	or aifts	- Oa					
	were not tax deductible?			6b					
7	organizations that may receive deductible contributions under section 170(c).			OD	mil d	LIV.			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	ervices i	provided to the payor?	7a		X			
b	It "Yes," did the organization notify the donor of the value of the goods or services provided?			7b					
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v	vas rec	uired						
	to file Form 8282?			7c		X			
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			3 2 1	310			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	contrac	ct?	7e		X			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont	ract?		7f		X			
_	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?								
n	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?								
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the	9						
0	sponsoring organization have excess business holdings at any time during the year?			8					
9	Sponsoring organizations maintaining donor advised funds.					11			
a	Did the sponsoring organization make any taxable distributions under section 4966?	• • • • • • • • • • • • • • • • • • • •		9a					
10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b					
	Section 501(c)(7) organizations. Enter:				95.				
h	Initiation fees and capital contributions included on Part VIII, line 12	10a			711				
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  Section 501(c)(12) organizations. Enter:	10b		100	793				
		1		18					
b	Gross income from members or shareholders  Gross income from other sources. (Do not net amounts due or paid to other sources against	11a							
_	amounts due or received from them.)			4117					
I2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	11b			944				
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	10417	-	12a					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120		177					
а	Is the organization licensed to issue qualified health plans in more than one state?		ŀ	40-					
	Note: See the instructions for additional information the organization must report on Schedule O.	**********		13a					
b	Enter the amount of reserves the organization is required to maintain by the states in which the								
	organization is licensed to issue qualified health plans	13b							
C	Enter the amount of reserves on hand	13c		600					
4a	DIU LIE OTOROTZATION (ACEIVE ANY DAYMENTS FOR INDOOR FORGING CONTINUE ALIVER A LIVER A			14a	_	X			
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul	e O		14b					
5	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune	ration (	or F		$\dashv$				
	excess parachute payment(s) during the year?			15		X			
_	res, see the instructions and file Form 4720, Schedule N.			VIB. TE		(A) EX			
6	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t incom	ne?	16		X			
	If "Yes," complete Form 4720, Schedule O.			5711	901	7 3			
7	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any act	tivities							
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17					
_	If "Yes," complete Form 6069.			VOS. V					

UNITED ANIMAL NATIONS DBA REDROVER 68-0124097 Page 6

Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response

Parl	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sect	ion A. Governing Body and Management		1	
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a			
	If there are material differences in voting rights among members of the governing body, or if the governing		130	
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.	1	184	
h	Enter the number of voting members included on line 1a, above, who are independent 1b	E EN	E-Y	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	075.25	1423E	V
	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			v
	of officers, directors, 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		
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	37	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		77	
	more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		W.DE	
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
3	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
-			Yes	No
102	Did the organization have local chapters, branches, or affiliates?	10a		X
h	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
D	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
1 Ia	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	5		
120	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
12a	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
0	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
C	on Schedule O how this was done	12c	X	
42	Did the organization have a written whistleblower policy?	13	X	
13 14	Did the organization have a written document retention and destruction policy?	14	X	
	Did the process for determining compensation of the following persons include a review and approval by independent	187	10-12	
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	150		
	The organization's CEO, Executive Director, or top management official	15a	X	
a	Other officers or key employees of the organization	15b	X	
D	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	1	100	188
46-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	100		6 27
108	taxable entity during the year?	16a		X
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	10	-100	1
D	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's		150	
	exempt status with respect to such arrangements?	16b		
800	II. O Displacement			
	List the states with which a copy of this Form 990 is required to be filed AK, AL, AR, CA, CO, CT, DC, FL, G.	A,H	[,I	1,K
17	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(	3)s on	y) ava	ilable
18	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website Upon request Other (explain on Schedule O)  Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, a	nd fin	ancial	
19	Describe on Schedule O whether (and it so, now) the organization made to governing assuments,			
	statements available to the public during the tax year.  State the name, address, and telephone number of the person who possesses the organization's books and records			
20	CASEY SLAGERMAN - 916-429-2457			
	1419 21ST STREET, SACRAMENTO, CA 95811			
	TILL OINT OINTEL DISCRETE OF THE PROPERTY OF		00	0 1000

# 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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

   List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

  Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Average hours per week (list any hours for related	bo. off	x, unie	Pos check ess pe	more			(D)	(E)	(F)	
hours for related	director	1	Position (do not check more than on box, unless person is both a officer and a director/trustee				Reportable compensation from	Reportable compensation from related	Estimated amount of other	
organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations	
40.00										
10.00	_		X				101,984.	0.	15,564	
40.00										
40.00	_		X				97,637.	0.	15,195	
40.00			X				94,660.	0.	13,875	
2.00										
	X		X				0.	0.	0	
1.00										
	X		X				0.	0.	0	
1.00						$\neg$				
	X		X				0.	0.	0	
1.00										
	X						0.	0.	0	
1.00										
	X						0.	0.	0	
1.00										
	X						0.	0.	0	
1.00										
	X						0.	0.	0 .	
1.00										
1 00	X	_	_				0.	0.	0 .	
1.00	x						0.	0.	0.	
								0.		
		_	4	1		_				
	$\dashv$	+	+	4	+	+				
	+	+	+	+	+	+				
	1.00	1.00 X 1.00 X 1.00 X 1.00	1.00 X 1.00 X 1.00 X	1.00 X 1.00 X 1.00 X 1.00	1.00 X 1.00 X 1.00 X 1.00	1.00 x 1.00 x 1.00 x 1.00	1.00 X 1.00 X 1.00 X	1.00 X 0.  1.00 X 0.  1.00 X 0.  1.00 X 0.	1.00 X 0. 0. 1.00 X 0. 0. 1.00 X 0. 0. 1.00 X 0. 0.	

Art VII Section A. Officers, Directors,  (A)  Name and title	(B) Average hours per week (list any	(do box, offic	not ch unles	C) Posineck r as per	tion nore son i		ne an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	ar	(F) stimate nount other npensa	of
	hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC/ 1099-NEC)	(W-2/1099-MISC/ 1099-NEC)	org an	rom th ganizat Id relat anizati	ie tion ted
										_		
				_	-	-						
b Subtotal		1_		.,			L	294,281.	0		44,6	53 <u>4</u> 0
c Total from continuation sheets to F d Total (add lines 1b and 1c)	art VII, Section A							294,281.	0		44,6	
2 Total number of individuals (including compensation from the organization	but not limited to t	hose	e list	ed a	bov	/e) w	ho r	received more than \$10	0,000 of reportable		1	1
3 Did the organization list any former of	officer, director, trus	tee,	key	emp	oloy	ee, o	r hi	ghest compensated em	ployee on		Yes	14
line 1a? If "Yes," complete Schedule For any individual listed on line 1a, is	J for such individua	I								3	des.	X
and related organizations greater tha	n \$150,000? If "Yes	s, " C	omp	lete	Scl	hedu	le J	for such individual		4		X
5 Did any person listed on line 1a receirendered to the organization? If "Yes	ve or accrue comp ," complete Schedu	ensa ile J	tion for:	fror such	n ar pe	ny ur Irson	rela	ted organization or indi	vidual for services	5		X
Section B. Independent Contractors										nsatio	n from	
<ol> <li>Complete this table for your five high the organization. Report compensation.</li> </ol>	on for the calendar	yea	reno	ding	witl	h or	with	in the organization's tax	year.			
	A) siness address	N	ION	ΙE				Description of	services	Comp	(C) pensat	ion
												_
											1 1	Varia
2 Total number of independent contra	ctors (including but	not	limi	ted :	to ti	hose	liste	ed above) who received	more than			

Part VIII Statement of Revenue

-			Check if Schedule O contains a	respon	se or note to any lir			***************************************	
-10						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants	3	1 a	Federated campaigns	1a			territorio del		
Gra	3	b	Membership dues	1b	292,735.				
ts,	[	C	Fundraising events	1c					
<u> </u>		d	Related organizations	1d					
ns,		е	Government grants (contributions)	1e					
i i	<u> </u>	f	All other contributions, gifts, grants, and				The state of the sales.		
ĘĘ			similar amounts not included above	1f	5,658,852.				Maria Line
onti		g	Noncash contributions included in lines 1a-1f	1g \$	20,921.				
<u>0</u> #	1	h	Total. Add lines 1a-1f			5,951,587.			
					Business Code			GHARMAN AND ST	STALL DISTRICT
ice	2	2 a	WORKSHOP FEES		541900	12,733.	12,733.		
Program Service Revenue		b							
n S		C							
Rev		d							
5		e							
Δ.	1	f	All other program service revenue						
_	_	g	Total. Add lines 2a-2f			12,733.			
	3	}	Investment income (including divide						
			other similar amounts)			115,853.			115,853.
	4		Income from investment of tax-exem	pt bond	proceeds				
	5	,	Royalties						
				Real	(ii) Personal			DI-Service Control	WARKS IN
	6	а	Gross rents 6a					3 7 4 4 4 4	
			Less: rental expenses 6b				10年4、公司主任		
			Rental income or (loss) 6c		1.				
	7	а		curities				True III I Few	H NETHER L
				50,966	5.				
Ф		b	Less: cost or other basis						
Ž.				78,760				As nike intilli	
eve				72,206					
Other Revenue	_	ď	Net gain or (loss)			72,206.			72,206.
ŧ	8	а	Gross income from fundraising events (n	ot					5 4 mod - 41 m
O				of				-7/19 (A) -5/10 (A)	
			contributions reported on line 1c). Se					<b>加米斯普及</b>	
		L	Part IV, line 18					New York Company	
			Less: direct expenses			4   Size   91 Diri	F1 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		<b>一种工作</b>
			Net income or (loss) from fundraising				ELF WENT WHAT		
	9		Gross income from gaming activities.				124 1100		
			Part IV, line 19						
			Less: direct expenses						
			Net income or (loss) from gaming act Gross sales of inventory, less returns						
	10				69 900				
		h	and allowances	10					
						ER COO			SERVE OF
$\exists$			Net income or (loss) from sales of inv	entory .		-57,629.	-57,629.		
SNC	11	2	OTHER INCOME		900099	01 200			10 3 11 1 3 19 17
ne		a b			200033	21,302.	21,302.		
is ella		C .							
Miscellaneous Revenue			All other revenue						
Σ		e '	All other revenue  Total. Add lines 11a-11d			21 202			
	12		Total revenue. See instructions			6,116,052.	03 504		400.000
-		_				0,110,034.	-23,594.	0.1	188 059

Form 990 (2023) UNITED ANIMAL NATIONS DBA REDROVER 6.8

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a respons		nis Part IX	(C) I	(D)
Do r 7b, 8	ot include amounts reported on lines 6b, 3b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations	1,394,505.	1,394,505.		
	and domestic governments. See Part IV, line 21	1,394,505.	1,394,303.		
2	Grants and other assistance to domestic	E01 212	501,212.		
	individuals. See Part IV, line 22	501,212.	301,212.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	338,914.	288,079.	40,539.	10,296.
	trustees, and key employees	330,314.	200,075	10/0001	
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	1,244,676.	1,057,982.	148,882.	37,812.
7	Other salaries and wages	1,244,070	1,037,3020		
8	Pension plan accruals and contributions (include	75,300.	64,005.	9,007.	2,288.
	section 401(k) and 403(b) employer contributions)	174,501.	148,327.	20,873.	2,288. 5,301.
9	Other employee benefits	128,078.	108,867.	15,320.	3,891.
10	Payroll taxes	120,0700	20070071		
11	Fees for services (nonemployees):				
	Management				
	Legal	33,268.	25,418.	5,403.	2,447.
	Accounting	33,2001			
	Lobbying Son Part IV line 17	17,200.		The second	17,200.
	Professional fundraising services. See Part IV, line 17	44,306.		44,306.	
f	Other. (If line 11g amount exceeds 10% of line 25,	11/0001			
g	column (A), amount, list line 11g expenses on Sch 0.)	457,512.	362,702.	77,100.	17,710.
		20770221			
12	Advertising and promotion	1,208,870.	489,732.	2,495.	716,643.
13	Office expenses	81,664.	72,690.	5,857.	3,117.
14	Information technology	02/002			
15	Royalties	17,776.	15,100.	2,226.	450
16	Occupancy	153,223.	149,997.	2,862.	364
17	Travel Payments of travel or entertainment expenses				
18	for any federal, state, or local public officials				
40	Conferences, conventions, and meetings	15,641.	13,241.	2,169.	231
19					
20	Interest Payments to affiliates				
21	Depreciation, depletion, and amortization	40,589.	34,755.	5,200.	634
22		17,473.	15,002.	2,165.	306
23 24	Insurance Other expenses, Itemize expenses not covered				WILLIAM BURNER
24	above. (List miscellaneous expenses on line 24e. If			recommendado	
	line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)			and the same of the same	
	TAXES & FEES	87,985.	60,557.	27,411.	17
i	DISASTER RELIEF	60,215.	60,215.		
	DUES & SUBSCRIPTIONS	35,192.	2,151.	863.	32,178
	MEDIA & COMMUNICATIONS	32,017.	29,528.	120.	2,369
	All other expenses				0=0
25	Total functional expenses. Add lines 1 through 24e	6,160,117.	4,894,065.	412,798.	853,254
26	Joint costs. Complete this line only if the organization				
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.			0.	543,587
		746,345.	202,758.		

Form 990 (2023)
Part X | Balance Sheet

ı u	ILX		to to	cline in this Deat V			
		Check if Schedule O contains a response or no	te to an	y line in this Part X		T T	
					(A) Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			1,500,620.	1	996,964
	2	Savings and temporary cash investments			911,343.		540,883
	3	Pledges and grants receivable, net			100,384.		1,209,659
	4	Accounts receivable, net		-	10,295.		11,566
	5	Loans and other receivables from any current of	r former	officer, director.			11,500
		trustee, key employee, creator or founder, subs					
		controlled entity or family member of any of the	se perso	ons		5	
	6	Loans and other receivables from other disqual	PRECION NOTE OF		Technical State of the		
		under section 4958(f)(1)), and persons describe	tion 4958(c)(3)(B)		6		
Sig	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
۲	9	Prepaid expenses and deferred charges			138,270.	9	135,392
	10a	Land, buildings, and equipment: cost or other				200	
		basis. Complete Part VI of Schedule D	10a	1,778,590.			
	b	Less: accumulated depreciation	10b	338,568.	1,474,433.	10c	1,440,022
	11	Investments - publicly traded securities			3,128,401.	11	3,595,703
	12	Investments - other securities. See Part IV, line	11			12	
- 1	13	Investments - program-related. See Part IV, line			13		
- 1	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11				15	
4	16	Total assets. Add lines 1 through 15 (must equ	al line 33	3)	7,263,746.	16	7,930,189
- 1	17	Accounts payable and accrued expenses			279,258.	17	551,768
	18	Grants payable			18		
	19	Deferred revenue		37,243.	19	32,136	
- 1	20	Tax-exempt bond liabilities				20	
- 1	21	Escrow or custodial account liability. Complete I	Part IV of	f Schedule D		21	
3	22	Loans and other payables to any current or form			Oxford Mary Bar	E TIE	The state of the
		trustee, key employee, creator or founder, subst	antial co	entributor, or 35%	THE RESERVE AND ADDRESS OF THE PARTY.		
		controlled entity or family member of any of thes				22	
- 1	23	Secured mortgages and notes payable to unrela	ted third	parties		23	
- 1	24	Unsecured notes and loans payable to unrelated	third pa	arties		24	
-	25	Other liabilities (including federal income tax, page	/ables to	related third			
		parties, and other liabilities not included on lines					
		of Schedule D				25	
+	26	Total liabilities. Add lines 17 through 25			316,501.	26	583,904.
		Organizations that follow FASB ASC 958, che	ck here	X		18-11	
1		and complete lines 27, 28, 32, and 33.		_/			
	27	Net assets without donor restrictions			5,563,587.	27	5,144,995.
1	28	Net assets with donor restrictions			1,383,658.	28	2,201,290.
		Organizations that do not follow FASB ASC 95	58, chec	k here			
		and complete lines 29 through 33.		-3		7-1	
	29 20	Capital stock or trust principal, or current funds		L		29	
	30	Paid-in or capital surplus, or land, building, or equ	fund		30		
	31	Retained earnings, endowment, accumulated inc	other funds	6.045	31		
- 1	32	Total lie like like and an analysis and a lie like like like like like like like			6,947,245.	32	7,346,285.
13	33	Total liabilities and net assets/fund balances			7,263,746.	33	7,930,189.

Form 990 (2023)

#### **SCHEDULE A**

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

## **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.

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

OMB No. 1545-0047

**Open to Public** Inspection

Employer identification number UNITED ANIMAL NATIONS DBA REDROVER 68-0124097 Reason for Public Charity Status. (All organizations must complete this part.) See instructions

The organization is not a private four	ndation because it is	(For lines 1 through 40	-b	, tillo part,	, oee instructions.	
1 A church, convention of o	churches or associa	stion of churches describ	, cneck or	ily one bo	K.)	
2 A school described in se	ction 170/b)/1\/A\/iii	Attack School La E (E-	ea in <b>sec</b> i	ion 1/0(b	)(1)(A)(I).	
	ve bospital sonvice o	raprization described in	rm 990).)			
The state of the s	ve riospital service o	rganization described in	section 1	70(b)(1)(A	)(iii).	
4 A medical research organ city, and state:	iization operated in	conjunction with a nospi	tai describ	ed in <b>sect</b>	ion 170(b)(1)(A)(iii). Ente	er the hospital's name,
5 An organization operated section 170(b)(1)(A)(iv).	for the benefit of a	college or university own	ed or ope	rated by a	governmental unit desc	ribed in
6 A federal, state, or local g		nmental unit described in		470(1-)/4)/	A 1/ 1	
7 X An organization that norm	nally receives a subs	tantial part of its support	Section	170(0)(1)(	A)(V).	
7 X An organization that norm section 170(b)(1)(A)(vi). (	Complete Part II )	rantial part of its suppor	i irom a go	overnment	al unit or from the gener	al public described in
8 A community trust descri		hV1VAVvi\ (Complete Br	sub II \			
9 An agricultural research o	rganization describe	od in section 170/b)(1)	art II.) Vivl on ove	سمم سائله مد		
9 An agricultural research o	l-grant college of ag	coulture (see instructions	)(IX) opera	itea in cor	junction with a land-grar	nt college
or university or a non-land university:	rgrant college or agi	iculture (see instructions	s). Enter th	e name, c	ity, and state of the colle	ege or
10 An organization that norm	nally receives (1) mor	e than 33 1/3% of its su	pport from	contribut	ions membership fees	and gross requires from
activities related to its exe	empt functions, subj	ect to certain exceptions	: and (2) n	o more th	an 33 1/3% of its sunno	t from cross invoctment
income and unrelated bus	siness taxable incom	ne (less section 511 tax) i	from busin	esses acc	uired by the organization	n after lune 20 1075
See section 509(a)(2). (Co	omplete Part III.)	,			ian od by the organization	raiter June 30, 1975.
11 An organization organized	and operated exclu	sively to test for public s	afetv. See	section 5	509(a)(4).	
12 An organization organized	and operated exclu	sively for the benefit of.	to perform	the funct	ions of orto carry out th	e nurneres of one or
more publicly supported of	organizations describ	ed in section 509(a)(1)	or section	509(a)(2)	See section 500/a)(3)	Chack the box on
lines 12a through 12d that	t describes the type	of supporting organization	on and co	mplete line	es 12e 12f and 12g	Officer the box off
a Type I. A supporting org	anization operated,	supervised, or controlled	d by its su	pported o	rganization(s) typically b	v giving
the supported organizat	ion(s) the power to r	egularly appoint or elect	a maiority	of the dir	actors or trustees of the	y giving
organization. You must	complete Part IV. S	Sections A and R	amajomy	or the dir	ectors or trustees of the	supporting
b Type II. A supporting org			ction with	ite eunnor	tod organization(s) but	
control or management	of the supporting or	nanization vested in the	cama nare	one that a	ced organization(s), by n	aving
organization(s). You mus	st complete Part IV	Sections A and C	same pers	ons mai c	ontrol or manage the su	pported
c Type III functionally into			l in conne	ation with	and from attached to the tree.	. 1. 101
its supported organization	on(s) (see instruction	s) Vou must complete	Dort IV C	octions A	and functionally integral	ed with,
d Type III non-functional	v integrated A sun	norting organization one	rated in a	ecuons A	, D, and E.	
that is not functionally in	tegrated The organ	ization generally must se	tion o die	nnection	with its supported organ	ization(s)
requirement (see instruction	tions) You must co	molete Part IV Section	o A and D	indution re	equirement and an atten	tiveness
e Check this box if the org	anization received a	written determination fr	s A and D	, and Pari	· V.	
functionally integrated, o	r Type III non-function	writterr determination m	om the inc	tnat it is	a Type I, Type II, Type III	
f Enter the number of supported	organizations	onally integrated support	ung organi	zation.		
g Provide the following information	n about the support	ed organization(e)				
(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	anization listed	(v) Amount of monetary	(st) Amount of other
organization		(described oil lines 1-10		and an extended	support (see instructions)	support (see instructions)
		above (see instructions))	Yes	No		Tapper (and moderatorily)
Total				77174		

(Form 990) 2023 UNITED ANIMAL NATIONS DBA REDROVER 68-01240.97 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II

(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						40 T 1 1
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not include any "unusual grants.")	2,631,640.	4,744,981.	5,167,294.	5,205,794.	5,951,587.	23,701,296.
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				- 1		
	the organization without charge				- 005 504	F 051 507	23,701,296.
4	Total. Add lines 1 through 3	2,631,640.	4,744,981.	5,167,294.	5,205,794.	5,951,587.	23,701,230.
5	The portion of total contributions	LARGE PER GROUP		Linguista			
	by each person (other than a		R THE PERSON				
	governmental unit or publicly				ALTERNATION	THE PROPERTY	
	supported organization) included	14 18 19		THE PERSON NAMED IN		DATE OF THE REAL PROPERTY.	
	on line 1 that exceeds 2% of the	the state of the last		THE RESERVE			
	amount shown on line 11,	califor your or	notification				2 902 560
	column (f)						3,802,560.
6	Public support. Subtract line 5 from line 4.						19,090,750.
Se	ction B. Total Support					4 ) 0000	(f) Total
Cale	endar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023 5,951,587.	23,701,296.
7	Amounts from line 4	2,631,640.	4,744,981.	5,167,294.	5,205,794.	5,331,307.	20,702,200.
8	Gross income from interest,						
	dividends, payments received on		1				
	securities loans, rents, royalties,			75 014	77 217	115,853.	459,224.
	and income from similar sources	110,642.	79,698.	75,814.	77,217.	113,633.	437,224.
9	Net income from unrelated business			1			
	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.)						24,160,520.
11	Total support. Add lines 7 through 10	Laurence Committee				Additional conditions	336,293.
12	Gross receipts from related activities	, etc. (see instructi	ons)			12	330,2331
13	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax y	year as a section	501(c)(3)	
_	organization, check this box and sto	p here					
Se	ection C. Computation of Pub	lic Support Pe	rcentage			44	82.36 %
14	Public support percentage for 2023	(line 6, column (f), c	divided by line 11,	column (f))		14	82.30 %
15	Public support percentage from 2022	2 Schedule A, Part	II, line 14		4.4 :- 00.4 /00/	15	
16	a 33 1/3% support test - 2023. If the	organization did no	ot check the box o	n line 13, and line	14 IS 33 1/3% OF I	more, check this b	X
	stop here. The organization qualifies	as a publicly supp	ported organization		Una 45 ia 22 4 /20	4 or more check t	
	b 33 1/3% support test - 2022. If the	organization did n	ot check a box on	ine 13 or 16a, and	line 15 is 33 1/37	o or more, crieck t	
	and stop here. The organization qua	lifies as a publicly	supported organiz	ation	40 40- or 16b	and line 1/1 is 100/	or more
17	and stop here. The organization qua- a 10% -facts-and-circumstances tes	st - 2023. If the org	ganization did not o	check a box on line	9 13, 16a, or 16b,	and line 14 is 10%	zation
	and if the organization meets the fac	ts-and-circumstan	ces test, check this	s box and stop ne	re. Explain in Pari	. VI now the organi	Zation
	meets the facts-and-circumstances t	est. The organizat	ion qualifies as a p	ublicly supported	organization	170 and line 15 is	
	b 10% -facts-and-circumstances te	st - 2022. If the or	ganization did not	cneck a box on line	e is, ioa, iod, or	in Dort VI how the	, 1070 OI
	more, and if the organization meets	the facts-and-circu	mstances test, che	eck this box and st	top nere. Explain	ni ran vi now the	
	organization meets the facts-and-circ	cumstances test. T	he organization qu	uanties as a publici	y supported orga	and see instruction	ns
_18	Private foundation. If the organization	on did not check a	box on line 13, 16	oa, 160, 1/a, or 1/	D, CHECK THIS DOX	Schedule A	(Form 990) 2023

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

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

Section A. Public Support		picte rait ii.)				
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(6) Tatal
1 Gifts, grants, contributions, and			(0) 2021	(u) 2022	(e) 2023	(f) Total
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions,				<del>                                     </del>		
merchandise sold or services per-						
formed, or facilities furnished in						
any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
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						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received						
from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support				part ske jiha a		
alendar year (or fiscal year beginning in)	/ \ 0040 T					
	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6  0a Gross income from interest,						
dividends, payments received on						
securities loans, rents, royalties						
and income from similar sources						
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						
Net income from unrelated business						
activities not included on line 10b.						
whether or not the business is regularly carried on						
2 Other income. Do not include gain						
or loss from the sale of capital						
assets (Explain in Part VI.)						
Total support. (Add lines 9, 10c, 11, and 12.)						
First 5 years. If the Form 990 is for the	organization's firs	t, second, third, fo	ourth, or fifth tax y	ear as a section	501(c)(3) organizatio	n.
check this box and stop here						.,
ection C. Computation of Public	Support Per	centage				
Public support percentage for 2023 (lin	e 8, column (f), div	ided by line 13, co	olumn (fl)		15	
Public support percentage from 2022 S	Schedule A. Part II	I. line 15			16	
ection D. Computation of Invest	ment Income	Percentage			101	
Investment income percentage for 2023	3 (line 10c. column	(f) divided by line	13 column (f)		47	
Investment income percentage from 20	22 Schedule A D				17	1
a 33 1/3% support tests - 2023 If the or	manization did ==	t chack the best	line 4.4 and the s		18	
a 33 1/3% support tests - 2023. If the or	eten here The	CHECK THE DOX OF	line 14, and line 1	15 is more than 3	33 1/3%, and line 17	is not
more than 33 1/3%, check this box and	stop nere. The or	ganization qualifie	s as a publicly su	oported organiza	tion	
b 33 1/3% support tests - 2022. If the or	ganization did not	cneck a box on li	ne 14 or line 19a,	and line 16 is mo	ore than 33 1/3%, ar	nd
line 18 is not more than 33 1/3%, check	tnis box and stop	here. The organiz	ation qualifies as	a publicly suppo	rted organization	
Private foundation. If the organization	did not check a bo	ox on line 14, 19a,	or 19b, check this	box and see ins	structions	

#### Part IV | Supporting Organizations

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

#### Section A. All Supporting Organizations

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

	Yes	No
Sel 1		
1	1 SV	
2		13
		Tree
3a		
3b		H
3c		Ī
	in a	X
4a	30/6	1
4b	100	la i
4c	e Paur	
	a Silver	
5a		
5b 5c	+	+
	13	
6		
7		+
8		
9a	a lank	
9b		-
90		
		370
10a	9	
10k		

1	hedule A (Form 990) 2023 UNITED ANIMAL NATIONS DBA REDROVER 68-0	1240	97 <sub>F</sub>	'age
P	art IV   Supporting Organizations (continued)			u.g.
44			Yes	N
11	and organization decopted a gift of contribution from any of the following persons?	9012		
	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and	1245	NA.	
	11c below, the governing body of a supported organization?	11a		
	b A family member of a person described on line 11a above?	11b		
,	c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.	15-19-1		18.
Se	ction B. Type I Supporting Organizations	11c		
_	- 1 Type I supporting organizations			_
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or		Yes	No
·	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers			
	directors, or trustees at all times during the tax year? It "No." describe in Part VI how the supported organization(s)		1	
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	P. VIII		
2	Did the organization operate for the benefit of any supported organization other than the supported	1	-	
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	144	6 3	
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		J. 154	
	supervised, or controlled the supporting organization.		Britis.	
Se	ction C. Type II Supporting Organizations	2		
*/;==			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		163	140
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
_	the supported organization(s).	1		
Sec	ction D. All Type III Supporting Organizations	<u> </u>		
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	J-KBC	113	
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	1.53	1000	
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		6.5	
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported		MIL	1
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
•	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's		3 4=	
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's		85	
Sec	supported organizations played in this regard.  Stion E. Type III Functionally Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yeatsee instructions			
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in			
2	Activities Test. Answer lines 2a and 2b below.		T	
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		Yes	No
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	1150		
	those supported organizations and explain how these activities directly furthered their exempt purposes,	I FIR	THE R	
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	20		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,	2a		2, 1
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in	177		
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.	EU.	lo E	11
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	143	130	
	Amountained and the second of			

trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.

**b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each

За

Schedule A (Form 990) 2023 UNITED ANIMAL NATIONS	DBA REI	DROVER	68-0124097 Page 6
Part V Type III Non-Functionally Integrated 509(a)(3) Suppo	rting Organ	izations	
Check here if the organization satisfied the Integral Part Test as a quality	lifying trust on I	Nov. 20, 1970 (explain i	n Part VI). See instructions.
All other Type III non-functionally integrated supporting organizations	must complete	Sections A through E.	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	.3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):	G 31 -		
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors			A STATE OF THE PARTY OF THE PARTY.
(explain in detail in Part VI):			Lay Auto Sylvator Automobile,
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amour	nt,		
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		114
2 Enter 0.85 of line 1.	2	say Mediffers been	
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3	State of the second	
4 Enter greater of line 2 or line 3.	4		

emergency temporary reduction (see instructions).

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

5

Schedule A (Form 990) 2023

5 Income tax imposed in prior year

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

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1	nedule A (Form 990) 2023 UNITED ANIMAI art V Type III Non-Functionally Integrated 509	NATIONS DBA E	REDROVER	68	8-0124097 Page 7
Sec	ction D - Distributions	1,71,7	COTIUI	iuea) T	Current Year
1	Amounts paid to supported organizations to accomplish ex-	empt purposes		1	Current Year
2	Amounts paid to perform activity that directly furthers exem	ipt purposes of supported		+ • +	
	organizations, in excess of income from activity	p- parposoo or capported		2	
3	Administrative expenses paid to accomplish exempt purpos	ses of supported organization	ns	3	
4	Amounts paid to acquire exempt-use assets	or or oupported organization	110	4	
5	Qualified set-aside amounts (prior IRS approval required - pr	ovide details in Part VII		5	
6	Other distributions (describe in Part VI). See instructions.	and the same of th		6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which t	the organization is responsiv	Δ	+ + +	
	(provide details in Part VI). See instructions.	and organization is responsiv	6		
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			<del>                                     </del>	
	and an	(i)	(::)	10	(11)
Sec	tion E - Distribution Allocations (see instructions)	Excess Distributions	(ii) Underdistributio Pre-2023	ns	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6			11.00	
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.			8	
3	Excess distributions carryover, if any, to 2023		44.4	F 8 7 1	
а	From 2018				
b	From 2019				
С	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e			-	
	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.			-	
6	Remaining underdistributions for 2023. Subtract lines 3h			all of	
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.			110	
7	Excess distributions carryover to 2024. Add lines 3j				
-	and 4c.				
8	Breakdown of line 7:				
	Excess from 2019				
	Excess from 2020			-	
	Excess from 2021			-	
	Excess from 2022				
	Excess from 2023				
				11 100	

Schedule A (Form 990) 2023

Constant (Constant of Constant	Schadula ^	(Form 990) 2023	UNITED	ANIMAL	NATIONS	DBA	REDROVER	68-0124097	Page 8
	Part VI	Supplemental Infor Part IV, Section A, lines 1 line 1; Part IV, Section D, Section D, lines 5, 6, and	mation. Prov , 2, 3b, 3c, 4b,	ide the explai	nations required 9b, 9c, 11a, 11b	by Part I	II, line 10; Part II, line 17a oc; Part IV, Section B, lines	V. Section B. line 1e: Pa	n C, art V,
	:								
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### Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

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

OMB No. 1545-0047

2023

Name of the organization **Employer identification number** UNITED ANIMAL NATIONS DBA REDROVER 68-0124097 Organization type (check one): Filers of: Section: X 501(c)( 3 ) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \_\_\_\_\_\_\_\$\_\_ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify

that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization

Employer identification number

## UNITED ANIMAL NATIONS DBA REDROVER

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Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	7	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ <u>887,973.</u>	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		* 750,000.	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
3		- - \$\$000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5			Person  Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
.40.		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

## UNITED ANIMAL NATIONS DBA REDROVER

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Noncash Property (see instructions). Use duplicate copies of Part I	I if additional space is needed.	
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
BROCHURES, DOG LEASHES, CAT COLLARS	 	10/31/23
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	- - - - - - - - - - -	-
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
	(b)  Description of noncash property given  BROCHURES, DOG LEASHES, CAT COLLARS  (b)  Description of noncash property given  (b)  Description of noncash property given	Description of noncash property given  EROCHURES, DOG LEASHES, CAT COLLARS    S

Employer identification number

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TED AN	IMAL NATIONS DBA RE	DROVER	68-0124097
from a	sively religious, charitable, etc., contribution one contributor. Complete columns (a)	ons to organizations described in a through (e) and the following line er	section 501(c)(7), (8), or (10) that total more than \$1,000 for the y
complet	ing Part III, enter the total of exclusively religious, ch	naritable, etc., contributions of \$1,000 or	itry, For organizations less for the year. (Enter this info. once.) \$
Use d	uplicate copies of Part III if additional s	space is needed.	
No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
rti	(a)pee		
		1	
_		-	
		(e) Transfer of g	ift
		(0)	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
	Handre of thame, and		
-			
No. om	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
art I	(b) 1 di poco et g		
		-	
		-	
		-	
-		(e) Transfer of g	gift
		(-)	
	Transferee's name, address, a	ind ZIP + 4	Relationship of transferor to transferee
	,		
-			
) No. rom	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
) No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
rom	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
rom	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
rom	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
rom	(b) Purpose of gift	(c) Use of gift  (e) Transfer of	
rom		(e) Transfer of	gift
rom	(b) Purpose of gift  Transferee's name, address, a	(e) Transfer of	
rom		(e) Transfer of	gift
rom		(e) Transfer of	gift
rom		(e) Transfer of	gift
rom Part I		(e) Transfer of and ZIP + 4	gift  Relationship of transferor to transferee
art I		(e) Transfer of	gift
rom	Transferee's name, address, a	(e) Transfer of and ZIP + 4	gift  Relationship of transferor to transferee
a) No.	Transferee's name, address, a	(e) Transfer of and ZIP + 4	gift  Relationship of transferor to transferee
a) No.	Transferee's name, address, a	(e) Transfer of and ZIP + 4	gift  Relationship of transferor to transferee
a) No.	Transferee's name, address, a	(e) Transfer of sand ZIP + 4  (c) Use of gift	gift  Relationship of transferor to transferee  (d) Description of how gift is held
a) No.	Transferee's name, address, a	(e) Transfer of and ZIP + 4	gift  Relationship of transferor to transferee  (d) Description of how gift is held
art I	Transferee's name, address, a	(e) Transfer of sand ZIP + 4  (c) Use of gift	gift  Relationship of transferor to transferee  (d) Description of how gift is held
art I	Transferee's name, address, a	(e) Transfer of and ZIP + 4  (c) Use of gift  (e) Transfer of	gift  Relationship of transferor to transferee  (d) Description of how gift is held

#### SCHEDULE C (Form 990)

Department of the Treasury

Internal Revenue Service

**Political Campaign and Lobbying Activities** 

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

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

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

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

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

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

•	Section :	501(c)(4), (5), or (6) organiz	ations: Complete Part III.			
	me of org	anization			E	mployer identification number
		UNITED	ANIMAL NATIONS	DBA REDROVE	R	60 0124007
P	art I-A	Complete if the or	ganization is exempt ur	nder section 501(c	) or is a section 52	7 organization.
2	Political	a description of the organ campaign activity expend	ization's direct and indirect poli itures aign activities	tical campaign activities	s in Part IV.	¢
Pa	art I-B	Complete if the or	ganization is exempt un	dor coction 501/a	1/01	
			incurred by the ergenization of	ider section 501(c	;)(3).	
2	Enter th	e amount of any excise tax	c incurred by the organization un	nder section 4955		\$
3	If the or	anization incurred a section	c incurred by organization mana on 4955 tax, did it file Form 472	gers under section 495	55	\$
48	a Was a c	orrection made?	on 4000 tax, did it file Form 472	o for this year?		Yes No
Ŀ	o If "Yes."	describe in Part IV.				Yes No
	art I-C	Complete if the or	ganization is exempt un	der section 501/c	Avcent section 50	11(0)(2)
1	Enter the	amount directly expende	d by the filing organization for s	ection 527 exempt fun	stien activities	, r(c)(3).
2	Litter trie	amount of the filing orgal	nization's funds contributed to c	other organizations for s	section 527	
3	Total exe	empt function expenditure	s. Add lines 1 and 2. Enter here	and on Form 1120 DOI		\$
	line 17b					Φ.
4	Did the f	iling organization file Form	1120-POL for this year?			<b>*</b>
5	Enter the	names, addresses, and e	mployer identification number (	FIM) of all section 527 r	solition or animation at	Yes No
	contribut	ions received that were praction committee (PAC). If	ntion listed, enter the amount pa omptly and directly delivered to additional space is needed, pro	aid from the filing organi a separate political org	ization's funds. Also ente	the amount of political
		(a) Name	(b) Address	(c) EIN	(d) Amount paid fron filing organization's funds. If none, enter -0	contributions received and

b Lobbying ceiling amount 2,429,970. (150% of line 2a, column(e)) 527. 291. 100. 72. 64 c Total lobbying expenditures 404,996. 114,502 107,772. 94,684. 88,038. d Grassroots nontaxable amount e Grassroots ceiling amount 607,494. (150% of line 2d, column (e)) f Grassroots lobbying expenditures

Schedule C (Form 990) 2023 UNITED ANIMAL NATIONS DBA REDROVER 68-012409

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

The lobbying activity.  Yes No Amo  During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:  a Volunteers?  b Pald staff or management (include compensation in expenses reported on lines 1c through 1i)?  c Media advertisements?  d Mailings to members, legislators, or the public?  publications, or published or broadcast statements?  f Grants to other organizations for lobbying purposes?  g Direct contact with legislators, their staffs, government officials, or a legislative body?  h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  i Other activities?  j Total, Add lines 1c through 1i  2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?  b If "Yes," enter the amount of any tax incurred under section 4912  c If "Yes," enter the amount of any tax incurred by organization managers under section 4912  d If the filling organization incurred a section 4912 tax, did it file Form 4720 for this year?  2art III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section  1 Were substantially all (90% or more) dues received nondeductible by members?  1 Udithe organization make only in-house lobbying expenditures of \$2,000 or less?
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:  a Volunteers?  b Paid staff or management (include compensation in expenses reported on lines 1c through 1j)?  c Media advertisements?  d Mailings to members, legislators, or the public?  e Publications, or published or broadcast statements?  f Grants to other organizations for lobbying purposes?  g Direct contact with legislators, their staffs, government officials, or a legislative body?  h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  i Other activities?  j Total. Add lines 1c through 1i  2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?  b If "Yes," enter the amount of any tax incurred under section 4912  c If "Yes," enter the amount of any tax incurred by organization managers under section 4912  d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section  1 Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?
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If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?    Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).    Yes
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Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?
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bid the organization make only in-house lobbying expenditures of \$2,000 or less?
. 0
Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?  3  Int III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section
Dues, assessments and similar amounts from members  Section 162(a) panded while labeling the labeling and the labeling the labeling and the labeling
Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political
expenses for which the section 527(f) tax was paid).
a Current year
If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political
expenditures next year?
- the arrival to the boying and political experioritores, See instructions
Supplemental Information
vide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see
ructions); and Part II-B, line 1. Also, complete this part for any additional information.  RT II, LINE C
MARCH 2023 DEDDOVED CENT A LEMBER TO THE
MARCH 2023, REDROVER SENT A LETTER TO FREDDIE RODRIGUEZ, CHAIR OF TH
ERGENCY MANAGEMENT COMMITTEE OF THE CA STATE ASSEMBLY, IN SUPPORT OF
1. THIS BILL WOULD REQUIRE LOCAL GOVERNMENTS TO DESIGNATE EMERGENCY
ELTERS, WARMING CENTERS, AND COOLING CENTERS THAT ARE ABLE TO
COMMODATE PEOPLE WITH PETS, AND REQUIRE PET EMERGENCY PREPAREDNESS

Part IV | Supplemental Information (continued) INFORMATION BE MADE AVAILABLE ON LOCAL GOVERNMENT WEBSITES. IN AUGUST 2023, REDROVER JOINED MORE THAN 50 ANIMAL WELFARE AND ADVOCACY ORGANIZATIONS TO SEND A LETTER TO MEMBERS OF THE SENATE AND HOUSE AGRICULTURE COMMITTEES URGING THEIR SUPPORT FOR THE PROVIDING FOR UNHOUSED PEOPLE WITH PETS (PUPP) ACT (HR 3957). THE PUPP ACT WOULD HELP REMOVE A COMMON BARRIER TO SHELTER AND SERVICES FOR VULNERABLE VETERANS, INDIVIDUALS, AND FAMILIES, WHO GAIN STRENGTH FROM THEIR COMPANION ANIMALS, BY CREATING A GRANT PROGRAM (OPERATED BY THE U.S. DEPARTMENT OF AGRICULTURE IN CONSULTATION WITH HUD) TO PROVIDE FUNDS TO ELIGIBLE ENTITIES. THE FUNDS WOULD ENABLE EMERGENCY SHELTERS TO MAKE THE NECESSARY CHANGES TO ACCOMMODATE UNHOUSED INDIVIDUALS WITH PETS, INCLUDING PROVIDING BASIC VETERINARY SERVICES. FINALLY, REDROVER SENT A LETTER TO CA GOVERNOR GAVIN NEWSOM IN SEPTEMBER 2023 REQUESTING THAT HE SIGN AB 1215, WHICH WOULD RE-ESTABLISH THE PET ASSISTANCE WITH SUPPORT (PAWS) PROGRAM TO SUPPORT PET OWNERS UTILIZING HOMELESS AND DOMESTIC VIOLENCE SHELTERS IN CALIFORNIA. IN 2019 AND 2021, THE NEWSOM ADMINISTRATION APPROPRIATED TEMPORARY, ONE-TIME FUNDING ADMINISTERED AS A COMPETITIVE GRANT BY THE DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT. NEARLY HALF OF APPLICATIONS TO THE ONE-TIME PAWS GRANTS WERE UNFULFILLED DUE TO LACK OF FUNDING, THE MAJORITY OF THEM FROM SHELTERS SERVING MORE RURAL AREAS. AB 1215 WOULD DELIVER CONSISTENCY AND EQUITY IN CODIFYING THE PROGRAM, EXPANDING OPPORTUNITIES FOR MORE SHELTERS ACROSS THE STATE TO ACCESS AND IMPLEMENT PET ASSISTANCE. THE BILL ALSO CLARIFIED THE GRANTS' ELIGIBILITY TO COVER EMERGENCY VETERINARY SERVICES AND SUPPORT FOR ANIMALS OTHER THAN DOGS AND CATS, ADDITIONS DIRECTLY RESULTING FROM CONSTRUCTIVE CONSULTATION WITH SHELTER PROVIDERS AND LOCAL MUNICIPALITIES.

### SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Financial Statements
Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public** Inspection

UNITED ANIMAL NATIONS DBA REDROVER

**Employer identification number** 68-0124097

Pa	organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, Iin	ed Funds or Other Similar Fund	s or Accounts.Complete if the
	gamenta received fee of Form 556, Fart IV, III	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		t y
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 advi	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Ves No
6	bid the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be	used only
	for charitable purposes and not for the benefit of the donor o	or donor advisor, or for any other purpose	conferring
Do	impermissible private benefit?		Vec N
	The org	janization answered "Yes" on Form 990.	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (for example, recreat		a historically important land area
	Protection of natural habitat	Preservation of	a certified historic structure
2	Preservation of open space		
_	Complete lines 2a through 2d if the organization held a qualifi day of the tax year.	ied conservation contribution in the form	of a conservation easement on the last
а	=		Held at the End of the Tax Year
b	The state of the s		2a
C	and the state of t		2b
d	Number of conservation easements on a certified historic stru	acture included on line 2a	2c
-	and the second of the second o	red after July 25, 2006, and not	
3	on a historic structure listed in the National Register		2d
_	Number of conservation easements modified, transferred, relevant	eased, extinguished, or terminated by the	e organization during the tax
4	Number of states where property subject to conservation ease	ement is located	
5	Does the organization have a written policy regarding the period	odic monitoring inspection handling of	
	violations, and enforcement of the conservation easements it		Yes No.
6	Staff and volunteer hours devoted to monitoring, inspecting, h	holds?	Yes No
		and a management of the control of t	servation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handli	ing of violations, and enforcing conservat	tion easements during the year
8	Does each conservation easement reported on line 2d above s	satisfy the requirements of section 170(h	)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Voc Dale
9	in art Am, describe now the organization reports conservation	n easements in its revenue and expense	statement and
	balance sheet, and include, if applicable, the text of the footnot	ote to the organization's financial stateme	ents that describes the
Dar	organization's accounting for conservation easements		
rai	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Ot	her Similar Assets.
4.0	Complete if the organization answered "Yes" on Form 9	990, Part IV, line 8.	
ıa	If the organization elected, as permitted under FASB ASC 958.	, not to report in its revenue statement a	nd balance sheet works
	of art, historical treasures, or other similar assets held for publication provide in Dark VIII to the first form	c exhibition, education, or research in fu	therance of public
h	service, provide in Part XIII the text of the footnote to its finance	cial statements that describes these item	s.
b	If the organization elected, as permitted under FASB ASC 958,	, to report in its revenue statement and b	alance sheet works of
	art, historical treasures, or other similar assets held for public e	exhibition, education, or research in furth	erance of public service,
	provide the following amounts relating to these items.		
	(i) Revenue included on Form 990, Part VIII, line 1		\$
	(ii) Assets included in Form 990, Part X		\$
-	If the organization received or held works of art, historical treas	sures, or other similar assets for financial	gain, provide
а	the following amounts required to be reported under FASB AS(	C 958 relating to these items:	
_h	Revenue included on Form 990, Part VIII, line 1  Assets included in Form 990, Part X		\$
/	- COUNTY OF THE		Φ.

Scher	dule D (Form 990) 2023 UNITED A	NIMAL NAT	ONS D	BA RI	EDROVER			12409		ge <b>2</b>
Par	HIII   Organizations Maintaining Co	ollections of Ar	t, Histor	ical Tre	asures, or C	Other	Similar Ass	ets(contin	ued)	
3	Using the organization's acquisition, accession	n, and other records	s, check ar	y of the f	ollowing that ma	ake sigi	nificant use of i	ts		
	collection items (check all that apply).									
а	d Loan or exchange program									
b	Scholarly research									
	Preservation for future generations									
4	Provide a description of the organization's co	llections and explair	n how they	further th	e organization's	exem	ot purpose in P	art XIII.		
5	During the year, did the organization solicit or	receive donations	of art, histo	rical treas	ures, or other s	imilar a	ssets			1
5	to be sold to raise funds rather than to be ma	intained as part of t	he organiza	ation's co	llection?		L	Yes		No_
-	t IV Escrow and Custodial Arrangereported an amount on Form 990, Par	<b>gements</b> Complet	te if the org	anization	answered "Yes	" on Fo	orm 990, Part IV	, line 9, or		
	Is the organization an agent, trustee, custodi	an or other intermed	diary for co	ntribution	s or other asset	ts not i	ncluded			
1a	Is the organization an agent, trustee, custodi	ari, or other intermed	ulary for oc	1101100000				Yes		No
	on Form 990, Part X?	and complete the fo	llowing tab	 						
b	If "Yes," explain the arrangement in Part XIII	and complete the lo	llowing tab	10.				Amoun	t	
							1c			
C	Beginning balance									
d	Additions during the year									
е	Distributions during the year									
f	Ending balance					tiabilit		Yes		No
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21, tor esc	crow or cu	istodiai accouni	T ANI	у г			٦
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	xplanation	has been	provided in Par	line 10				
Pa	rt V Endowment Funds Complete if				m 990, Part IV,	ack L	) Three years ba	ck (e) Fou	r vears	back
		(a) Current year	(b) Prio	r year	(C) TWO years b	ack (	a) 111100 youro ba	(0)	, ,	
1a	Beginning of year balance					-				
b	Contributions					-				
С	Net investment earnings, gains, and losses					_				
d	Grants or scholarships					-				
е	Out									
·	and programs									
	Administrative expenses									
,	End of year balance									
9	Provide the estimated percentage of the cui	rent vear end balan	ce (line 1g,	column (a	a)) held as:					
2	December of a supplied on the supplied of the		%							
a	Permanent endowment	%								
D	· · · · · · · · · · · · · · · · · · ·	%								
С	Term endowment The percentages on lines 2a, 2b, and 2c sho									
	Are there endowment funds not in the poss	ession of the organi	zation that	are held a	and administere	d for th	ie			
3a		2331011 01 1110 0194111							Yes	No
	organization by:							3a(i)		
	(i) Unrelated organizations?							3a(ii	)	
	(ii) Related organizations?  If "Yes" on line 3a(ii), are the related organiz	ations listed as roat	uired on Sc	hadule R	7			3b		
k	o If "Yes" on line 3a(ii), are the related organiz	ations listed as requ	laumant fi	inde						
4	Describe in Part XIII the intended uses of the	e organization s enc	20Willetti IC	ilius.						
Pa	Land, Buildings, and Equipm Complete if the organization answer	nd "Vos" on Form 90	00 Part IV	line 11a.	See Form 990.	Part X,	line 10.			
					st or other	(c) A	cumulated	(d) Bo	ok val	ue
	Description of property	(a) Cost or basis (inves			s (other)		preciation	(-, -		
		Sevin) sissu	unenty		20,000.			4	20.0	000.
	a Land		-		75,000.	-	L63,352.			648.
- 1	b Buildings				08,374.					374.
(	c Leasehold improvements				75,216.		175,216.		/	0.
	d Equipment				13,410.		13,210.			
	e Other				(D))			1 1	40	022.
Tot	tal. Add lines 1a through 1e. (Column (d) must	equal Form 990, Pa	rt X, line 10	c, colum	ın (B))			dule D (Fo		

#### Part X

	(D) DOOK Value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	
, , , , , , , , , , , , , , , , , , , ,	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

	Complete in the organization anomalous and the state of t			1	6,514,851.
1	Total revenue, gains, and other support per audited financial statements				
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	2a	443,105.		
а	Net unrealized gains (losses) on investments		113/1031		
b	Donated services and use of facilities	-			
С	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)			2e	443,105.
е	Add lines 2a through 2d			3	6,071,746.
3	Subtract line 2e from line 1			3	0,012,120
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 . 1	44,306.	1507	
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a	44,500.		
b	Other (Describe in Part XIII.)			4.	44,306.
c	Add lines 4a and 4b			4c	6,116,052.
_5_	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	nonto Wit	h Evnances ner		
Pa	t XII Reconciliation of Expenses per Audited Financial States	nents wit	II Expenses per	netu	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a		1	6,115,811.
1	Total expenses and losses per audited financial statements			1	0,113,011.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	F F			
а	Donated services and use of facilities				
b	Prior year adjustments				
С	Other losses	2c		S TOP	
d	(D. 11 D. 1701)			200	^
е	Add lines 2a through 2d			2e	0. 6,115,811.
3	Subtract line 2e from line 1			3	0,110,011.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1	44 206		
а	to the second second on Form 200 Part VIII line 7h	4a	44,306.	THE PERSON	
b	Other (Describe in Part XIII.)	4b			44 206
	Add lines 4a and 4b			4c	44,306.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	6,160,117.
Pa	rt XIII Supplemental Information				
Prov	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pa	art IV, lines 1	b and 2b; Part V, line	4; Parl	t X, line 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any ac	dditional info	rmation.		
-					
-					
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#### SCHEDULE G (Form 990)

## **Supplemental Information Regarding Fundraising 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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

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

Name of the organization

UNITED ANIMAL NATIONS DBA REDROVER

Employer identification number 68-0124097

Fundraising Activities required to complete this p	S. Complete if the organization an	swered "	Yes" o	on Form 990, Part IV,	line 17. Form 990-E	Z filers are not
<ul> <li>Indicate whether the organization random a</li></ul>	aised funds through any of the following and solid the solid garden or oral agreement with any individuals or entities (fundraisers) purely aised to the following and solid the solid through through the solid through the solid t	citation of citation of cial fundr lual (inclu	f non-g f gove aising ding c	government grants rnment grants events  officers, directors, tru	istees, or	s X No
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	or cor	Did raiser sustody atrol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
RKD GROUP - 201 SUMMER STREET, HOLLISTON, MA 01746	FUNDRAISING COUNSEL	Yes	No X	0.	17,200.	-17,200.
Total  3 List all states in which the organization or licensing.  AL, AK, AR, CA, CO, CT, DC, ND, OH, OK, OR, PA, RI, SC,	FL.GA.HT.TL.KS KV	ME N				

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

	of fundraising event contributions and gro	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
Revenue					
ě	1 Gross receipts		-		
-	= -				
	2 Less: Contributions				
- 1	3 Gross income (line 1 minus line 2)				
$\neg$	3 Gross income (intermines into 2)				
	4 Cash prizes				
	5 Noncash prizes				
Direct Expenses					
pen	6 Rent/facility costs				
Ψ	1 11				
irec	7 Food and beverages				
Δ	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through	n 9 in column (d)			
	44 Net Income summon. Subtract line 10 from I	ine 3 column (d)			
Pa	rt III Gaming. Complete if the organization	answered "Yes" on Fo	orm 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
<u>o</u>		(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Revenue			- Indiana - C		
Ве					
_	1 Gross revenue				
	2 Cash prizes				
ses	2 0431 51255				
be	3 Noncash prizes				
Direct Expenses					
irec	4 Rent/facility costs				
Ω					
_	5 Other direct expenses	1 1,4	% Yes %	Yes 9	6
			% Yes %	No Yes	
	6 Volunteer labor	LI NO	I NO		
	7 Direct expense summary. Add lines 2 through	sh 5 in column (d)			
	7 Direct expense summary. Add lines 2 through	gr 5 ii			
	8 Net gaming income summary. Subtract line	7 from line 1, column (	d)		
_	Net garning income summary. Sustainer, ins				
9	Enter the state(s) in which the organization cond	ducts gaming activities	:		
Ŭ	a Is the organization licensed to conduct gaming	activities in each of the	ese states?		Yes No
	b If "No," explain:				
					Yes No
10	Were any of the organization's gaming licenses				Yes No
10	Were any of the organization's gaming licenses  b If "Yes," explain:				Yes NC
10					Yes No

Schedule G (Form 990) 2023	UNITED	ANIMAL	NATIONS	DBA	REDROVER	68-	012409	7
11 Does the organization con-	duct gaming activities	with nonmen	nbers?				Yes	1 3 .
- is the organization a granti	or, beneticiary or truste	e of a trust. a	or a member of :	a nartner	ship or other optity	formed		No
to administer charitable ga	ming?					Tomiou	Yes	□ No
i production of	garring activity correct	icted III.						
a The organization's facility     b An outside facility							13a	9
	*******						13b	9
14 Enter the name and addres	ss of the person who p	repares the c	organization's ga	ming/spe	ecial events books	and records:		
Name								
Address								
15a Does the organization have	a contract with a third	l party from v	vhom the organi	zation re	ceives gaming reve	nue?	Yes	□ No
<b>b</b> If "Yes," enter the amount of	of daming revenue room	sixed by the						
of gaming revenue retained	by the third party \$	aved by the c	organization	\$	an	d the amount		
c If "Yes," enter name and ac	Idress of the third part	v:						
Name								
Address								
16 Gaming manager informatio	n:							
Name								
Gaming manager compensa	tion \$							
Description of services provi	الماما							
bescription of services provi								
Director/officer	Employee		Independen	t contrac	tor			
17 Mandatory distributions:								
a Is the organization required to	ınder state law to mak	e charitable o	distributions fror	n the gan	ning proceeds to			
retain the state gaming licens	se?					***************************************	Yes	☐ No
b Enter the amount of distribut organization's own exempt a	ions required under st	ate law to be	distributed to o	ther exen	npt organizations o	r spent in the		
Part IV Supplemental In	of the state of th	year \$	tions were in all to	. D				
15b, 15c, 16, and 17	<b>nformation.</b> Provide b, as applicable. Also	orovide anv s	dditional inform	y Part I, II	ine 2b, columns (iii)	and (v); and Par	t III, lines 9, 9	b, 10b,
	,	storide arry a	additional inform	ation, Se	e instructions.			
-								

0 1 1 1 1 0	/Farm 000\	UNITED ANIMAL	NATIONS	DBA	REDROVER	68-0124097 Page 4
Part IV	(Form 990) Supplemental Info	rmation (continued)				
	ρ					
S						
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SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public

Employer identification number Inspection

ŀ	IIMAL NAT	DBA	REDROVER				Employer identification number
Part I General Information on Grants and Assistance	and Assistance						
1 Does the organization maintain records to substantiate the amount of the grants or assistance, and the selection	to substantiate th	e amount of the grants	or assistance, the	grantees' eligibility	/ for the grants or ass	sistance, and the selec	xtion
2 Describe in Book IV the control of assistance?	stance?						X Yes
art	ocedures for mon	itoring the use of grant	funds in the Unite	d States.			]
recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	\$5,000. Part II car	ilzations and Domesti n be duplicated if addit	c Governments. C ional space is need	omplete if the orga ded.	inization answered "\	res" on Form 990, Parl	t IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
GREATER GOOD CHARITIES 600 UNIVERSITY ST, STE 1000							
SEATTLE, WA 98101	20-4846675	501(C)(3)	289,850.	0.			DV AWARENESS OUTREACH
A SAFE PLACE 2710 17TH ST. STE 100							
തി	36-3032700	501(C)(3)	.000,09	0.			SAFE HOUSING
CHRISTINE ANN DOMESTIC ABUSE SERVICES - 206 ALGOMA BLVD -							
OSHKOSH, WI 54901	39-1441770	501(C)(3)	.000,09	0			SAFE HOUSING
COMMUNITY SERVICES FOUNDATION OF CECIL COUNTY - 200 CHESAPEAKE							
	52-1795422	501(C)(3)	.000,09	0.			SAFE HOUSING
F.A.I.T.H.							
PO BOX 1964 CLAYTON, GA 30525	58-2176046	501(C)(3)	60 000	C			
PEACE AT HOME FAMILY SHELTER							SAFE HOUSING
PO BOX 10946							
FAYETTEVILLE, AR 72704	71-2552563	501(C)(3)	.000,09	0.			SAFE HOUSING
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	id government orç	ganizations listed in the	line 1 table				

Schedule I (Form 990) 2023

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d Other Assis		anditarinaminations	and Domestic Go	overnments (Sche	edule I (Form 990), Pa	(TIII)	
organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PEACE RIVER CENTER FOR PERSONAL DEVELOPMENT - PO BOX 1559 - BARTOW, FL 33831	59-0818924 5	501(C)(3)	60,000.	0.			SAFE HOUSING
HT ASHINGTON ST DNVILLE, NC 28739	56-1469847	501(C)(3)	60,000.	0.			SAFE HOUSING
SCHUYLKILL WOMEN IN CRISIS PO BOX 96 23-23	23-2331195	501(C)(3)	.000,09	0.			SAFE HOUSING
PASCO COUNTY	59-2284119	501(C)(3)	.000,09	0			SAFE HOUSING
S SAFE HOUSE 10 MO 63163	43-1111319	501(C)(3)	000'09	.0			SAFE HOUSING
CTIMS OF IOLENCE - 117 ER FALLS, WI		501(C)(3)	000'09	0			SAFE HOUSING
VALLEY SANCTUARY K 595 A, AZ 86339	86-0741314	501(C)(3)	000'09	0			SAFE HOUSING
OKLAHOMA CITY 39TH ST A CITY, OK 73112	73-0579272	501(C)(3)	000'09	0			SAFE HOUSING
STEPS TO END DOMESTIC VIOLENCE PO BOX 1535 BURLINGTON, VT 05402	03-0283657	501(C)(3)	57,000	•			SAFE HOUSING Schedule I (Form 990)

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AL NATIONS DBA REDROVER	c Organizations and Dome
ANIMAL NATIONS	ice to Domestic
ANIM	Other Assistar
UNITED	n of Grants and
le I (Form 990)	Continuation
Schedu	Part

						1	
(a) Name and address of cashization or government (b) EIN (c) IRC section or government (d) Amount of cash grant or cash grant (e) Amount of cash grant or cash grant (f) Method of fook, FMV.	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV.	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					appraisal, other)		
SPCA CINCINNATI 11900 CONREY RD							
CINCINNATI, OH 45249	31-0543284	501(C)(3)	52 195	C			
HUMANE FORT WAYNE							SAFE HOUSING
4914 HANNA ST							
FORT WAYNE, IN 46806	35-6042135	501(C)(3)	52,000.	0			CATOTION BOAD
YWCA OF KITSAP COUNTY							TALE HOUSING
905 PACIFIC AVE							
BREMERTON, WA 98337	91-0665112	501(C)(3)	40,800,	C			
							SAFE HOUSING
FARTNERS FOR PEACE PO BOX 653							
BANGOR, ME 04402	01-0358090	501(C)(3)	2007	c			
			,	0			SAFE HOUSING
CATNIP FOUNDATION AT BIG SKY RANCH							
FOLSOM, LA 70437	47-4528787	501(0)(0)	(				
	000000	201(C)(3)	20,000.	0		S	SAFE HOUSING
LIBERTY HOUSE OF ALBANY PO BOX 2046							
ALBANY, GA 31702	58-1454465	501(C)(3)	20,000.	0		· ·	ANTOHOU GAR
WOMEN'S ADVOCATES							DATE OF THE PARTY
588 GRAND AVE							
ST. PAUL, MN 55102	23-7310701	501(C)(3)	18,200.	C			
DOMESTIC VIOLENCE RESOURCE CENTER						â	SAFE HOUSING
PO BOX 494							
HILLSBORO, OR 97123	93-0665804	501(C)(3)	16,502.	0		- 0	Cutowou du so
HUMANE SOCIETY OF THE OHIO VALLEY							DATE TOO THE
90 MOUNT TOM RD							
MARIETTA, OH 45750	2100001						

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Schedule   (Form 990) UNITED ANIMAL NATIONS DBA REDROVER	ANIMAL NATIONS	ONS DBA RED	REDROVER	overnments (Sche	dule I (Form 990), Pa		68-0124097 Page 1
Part II Continuation of Grants and Other A  (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WOMEN'S CENTER SASAWIN SAFE HAVEN 1310 S FRONT ST MARQUETTE, MI 49855	38-2340624	501(C)(3)	7,289.	0.			SAFE HOUSING
180 TURNING LIVES AROUND 1 BETHANY RD, BLDG 3 STE 42 HAZLET, NJ 07730	22-2130220	501(C)(3)	.000,9	0			SAFE HOUSING
							-
							Schedule I (Form 990)

Schedule I (Form 990) 2023

Part III

UNITED ANIMAL NATIONS DBA REDROVER

Page 2

68-0124097

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

(f) Description of noncash assistance (e) Method of valuation (book, FMV, appraisal, other) Part IV | Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. (d) Amount of non-cash assistance o. 501,212, (c) Amount of cash grant 837 (b) Number of recipients ASSISTANCE WITH VETERINARY CARE OR OTHER ANIMAL EMERGENCY COSTS, PAID DIRECTLY TO PROVIDER ON BEHALF OF AN INDIVIDUAL (RELIEF URGENT CARE & (a) Type of grant or assistance RELIEF DV SAFE ESCAPE)

2 LINE PART I,

ARE GRANTEES FOR RELIEF URGENT CARE AND RELIEF DV SAFE ESCAPE PROGRAMS,

REQUIRED TO PROVIDE UPDATED INFORMATION ABOUT THE AFFECTED ANIMALS FOR

QUARTERLY MEMBERSHIP MAGAZINE POTENTIAL PUBLICATION IN REDROVER'S

THE P P GRANTEES AGREE COMPANION. FOR RELIEF DV SAFE HOUSING PROGRAM,

EXPECTATION THAT THE PROJECT WILL BE COMPLETE AND WILL HOUSE ITS FIRST

ANIMAL WITHIN ONE YEAR OF RECEIPT OF GRANT FUNDS. GRANTEES ARE ALSO

EXPECTED TO SUBMIT STORIES, PHOTOS AND ANNUAL STATISTICS FOR FOUR YEARS,

INCLUDING NUMBER OF ANIMALS HOUSED AND LENGTH OF STAY. FOR RESPONDERS

332102 11-01-23

Schedule I (Form 990) 2023

## SCHEDULE J (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury Internal Revenue Service

UNITED ANIMAL NATIONS DBA REDROVER

Questions Regarding Compensation

Employer identification number 68-0124097

4.	Obert III		Yes	No
18	a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,	The last		
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.	3	344	
	First-class or charter travel  Housing allowance or residence for personal use	15 AW	19.15	
	Travel for companions  Payments for business use of personal residence			
	Lax indemnification and gross-up payments  Health or social club dues or initiation fees			16. 18
	Discretionary spending account  Personal services (such as maid, chauffeur, chef)			186
	, , , , , , , , , , , , , , , , , , , ,			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,	ID		
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?		- 11	
	, and a second of the least of	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's		3.18	
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to	100	She a	
	establish compensation of the CEO/Executive Director, but explain in Part III.			
			6340	
	Whiter employment contract	32 (2)		
			20	
	Form 990 of other organizations  Approval by the board or compensation committee		E.	
4	During the year did any names listed as 5 coo D. 1971 c			
7	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:		414	
a	Receive a severance payment or change-of-control payment?	4a		X
D	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
C	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		18	
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?  Any related organization?	E.		X
b	Any related organization?	5a	-	X
	If "Yes" on line 5a or 5b, describe in Part III.	5b		
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:	541		
а	The organization?  Any related organization?			37
b	Any related organization?	6a	_	X
	Any related organization?  If "Yes" on line 6a or 6b, describe in Part III.	6b		X
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 62 If "Yes " describe in Part III	HE HALL		**
8	not described on lines 5 and 6? If "Yes," describe in Part III  Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	7	_	<u>X</u>
	initial contract exception described in Regulations section 53 4059 44-100 K TV TV TV TV TV TV TV TV			
9	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
-	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		MSE	

Schedule J (Form 990) 2023

UNITED ANIMAL NATIONS DBA REDROVER

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

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

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

						outer Total of columns	(E) Compensation
	(B) Breakdown of W	-2 and/or 1099-MISC compensation	and/or 1099-NEC	(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC (C) Retirement and compensation	( <b>b)</b> Nontaxable benefits	(E) (I)-(D)	
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			on prior Form 990
3							
	0						
(3)							
(11)							
9							
9							
	1.0						
9							
3							
	(II)						
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i)	(II)						
	6						
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	9						
	(E)						
	€						
	(ii)						
	(1)						
	1						
						Sche	Schedule J (Form 990) 2023

## SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

2023
Open to Public Inspection

Name of the organization

UNITED ANIMAL NATIONS DBA REDROVER

Employer identification number 68-0124097

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

MAXIMIZING THE USE OF ONLINE TECHNOLOGY.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: VIOLENCE SHELTERS AND ANIMAL ORGANIZATIONS, TOTALING \$1,104,655. REDROVER TAKES A LONG-TERM APPROACH TO HELPING DOMESTIC VIOLENCE VICTIMS AND THEIR PETS THROUGH THESE SAFE HOUSING GRANTS BY GIVING SHELTERS THE FUNDS AND GUIDANCE NEEDED TO CREATE PERMANENT PET HOUSING ON-SITE, ADJACENT TO, OR OUTSIDE THE ORGANIZATION'S SHELTER SO THAT FAMILIES MAY BRING THEIR PETS DIRECTLY TO THE SHELTER. ALSO IN 2023, REDROVER CONTINUED ITS COLLABORATION WITH GREATER GOOD CHARITIES ON THE DON'T FORGET THE PETS (DFTP) PROJECT TO PROVIDE IN-DEPTH SUPPORT ON CREATING PET HOUSING PROGRAMS TO COMMUNITIES ACROSS THE COUNTRY (AND INTERNATIONALLY!). THIS PROJECT INCLUDES A COMPREHENSIVE WEBSITE, TRAINING WORKSHOPS AND PRESENTATIONS (IN-PERSON AND VIRTUAL), A DOWNLOADABLE TRAINING HANDBOOK, AND A "COACHING" PROGRAM WHICH PROVIDES ONE-ON-ONE SUPPORT TO ORGANIZATIONS. FUNDING RECEIVED FROM PETSMART CHARITIES IN 2023 CONTINUES TO SUPPORT THE GROWTH AND DEVELOPMENT OF THE DFTP PROJECT.

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

HELPED WITH 6 DIFFERENT PROJECTS, INCLUDING A SPAY/NEUTER AND WELLNESS

CLINIC IN ARIZONA AND BUILDING OUTDOOR ENCLOSURES FOR DOGS LIVING ON

CHAINS IN RURAL SOUTH CAROLINA AND MICHIGAN. FOR COASTAL CATS, REDROVER

WORKS WITH PARTNERS TO PROVIDE PROACTIVE SUPPORT FOR COMMUNITY CATS IN

COASTAL COMMUNITIES THAT ARE AT RISK FOR HURRICANES AND SEVERE

UNITED ANIMAL NATIONS DBA REDROVER

Employer identification number 68-0124097

FLOODING. IN 2023, WE COMPLETED TWO COASTAL CAT PROJECTS IN FLORIDA.

ALSO IN 2023, WE CONTINUED OUR MEMBERSHIP WITH THE NATIONAL ANIMAL

RESCUE AND SHELTERING COALITION (NARSC). REDROVER RESPONDERS STAFF

HELPED AN ADDITIONAL 608 ANIMALS BY PROVIDING REFERRALS, ADVICE,

OUTREACH, AND OTHER SUPPORTIVE SERVICES. REDROVER RESPONDERS STAFF ALSO

PROVIDED 3 SPECIALIZED TRAININGS THAT COVERED TOPICS SUCH AS EMERGENCY

ANIMAL SHELTERING. IN 2023, WE TRAINED 66 VOLUNTEERS THROUGH OUR ONLINE

VERSION OF OUR VOLUNTEER TRAINING WORKSHOP.

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

BOOKS THAT ARE REPRESENTATIVE OF THE REGION. WE WRAPPED UP THE EARLY

AGES GATHERING TO LEARN EMPATHY THROUGH STORIES (EAGLES) PILOT PROGRAM

WITH OUR COMMUNITY PROGRAM PARTNERS, THE SACRAMENTO NATIVE AMERICAN

HEALTH CENTER (SNAHC), AND WERE INVITED BACK TO CO-CREATE CURRICULUM

WITH THEM FOR ANOTHER FIVE BOOKS FOR THE EAGLES PROGRAM. ALSO IN 2023,

WE STARTED WORK ON A MAJOR PROJECT TO ENHANCE THE ONLINE ORDERING

EXPERIENCE FOR KIND NEWS MAGAZINE, WHICH ALLOWS SPONSORS AND CUSTOMERS

TO MORE EASILY ORDER NEW SUBSCRIPTIONS AND RENEW PAST ONES.

ADDITIONALLY, WE CONSULTED WITH A MARKETING PROFESSIONAL AND UPDATED

OUR OUTREACH MATERIALS AND HONED OUR OUTREACH STRATEGIES IN 2023.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

PUBLIC EDUCATION & OUTREACH - USING OUR QUARTERLY MEMBERSHIP COMPANION

MAGAZINE, EMAIL NEWSLETTERS, DIRECT ANIMAL CAUSE MAILINGS, WEBSITE,

SOCIAL MEDIA, SPEAKING AND TABLING ENGAGEMENTS, BROCHURES AND OTHER

MATERIALS, REDROVER EDUCATED MEMBERS AND THE GENERAL PUBLIC ABOUT THE

FOLLOWING: REDROVER'S PROGRAMS, SPOTTING AND REPORTING ANIMAL ABUSE,

THE LINK BETWEEN DOMESTIC VIOLENCE AND ANIMAL ABUSE, THE IMPACT OF

UNITED ANIMAL NATIONS DBA REDROVER

**Employer identification number** 68-0124097

PUPPY MILLS ON ANIMALS, AND THE BENEFITS OF ADOPTING PETS FROM ANIMAL SHELTERS AND ANIMAL ADVOCACY. VOLUNTEERS AND REDROVER STAFF HELPED SPREAD THE WORD ABOUT OUR WORK AT 52 EVENTS AND CONFERENCES. IN MARCH 2023, REDROVER SENT A LETTER TO FREDDIE RODRIGUEZ, CHAIR OF THE EMERGENCY MANAGEMENT COMMITTEE OF THE CA STATE ASSEMBLY, IN SUPPORT OF AB 781. THIS BILL WOULD REQUIRE LOCAL GOVERNMENTS TO DESIGNATE EMERGENCY SHELTERS, WARMING CENTERS, AND COOLING CENTERS THAT ARE ABLE TO ACCOMMODATE PEOPLE WITH PETS, AND REQUIRE PET EMERGENCY PREPAREDNESS INFORMATION BE MADE AVAILABLE ON LOCAL GOVERNMENT WEBSITES. IN AUGUST 2023, REDROVER JOINED MORE THAN 50 ANIMAL WELFARE AND ADVOCACY ORGANIZATIONS TO SEND A LETTER TO MEMBERS OF THE SENATE AND HOUSE AGRICULTURE COMMITTEES URGING THEIR SUPPORT FOR THE PROVIDING FOR UNHOUSED PEOPLE WITH PETS (PUPP) ACT (HR 3957). THE PUPP ACT WOULD HELP REMOVE A COMMON BARRIER TO SHELTER AND SERVICES FOR VULNERABLE VETERANS, INDIVIDUALS, AND FAMILIES, WHO GAIN STRENGTH FROM THEIR COMPANION ANIMALS, BY CREATING A GRANT PROGRAM (OPERATED BY THE U.S. DEPARTMENT OF AGRICULTURE IN CONSULTATION WITH HUD) TO PROVIDE FUNDS TO ELIGIBLE ENTITIES. THE FUNDS WOULD ENABLE EMERGENCY SHELTERS TO MAKE THE NECESSARY CHANGES TO ACCOMMODATE UNHOUSED INDIVIDUALS WITH PETS, INCLUDING PROVIDING BASIC VETERINARY SERVICES. FINALLY, REDROVER SENT A LETTER TO CA GOVERNOR GAVIN NEWSOM IN SEPTEMBER 2023 REQUESTING THAT HE SIGN AB 1215, WHICH WOULD RE-ESTABLISH THE PET ASSISTANCE WITH SUPPORT (PAWS) PROGRAM TO SUPPORT PET OWNERS UTILIZING HOMELESS AND DOMESTIC VIOLENCE SHELTERS IN CALIFORNIA. IN 2019 AND 2021, THE NEWSOM ADMINISTRATION APPROPRIATED TEMPORARY, ONE-TIME FUNDING ADMINISTERED AS A COMPETITIVE GRANT BY THE DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT. NEARLY HALF OF APPLICATIONS TO THE ONE-TIME PAWS GRANTS WERE UNFULFILLED DUE TO LACK OF FUNDING, THE MAJORITY OF THEM FROM

Employer identification number 68-0124097

SHELTERS SERVING MORE RURAL AREAS. AB 1215 WOULD DELIVER CONSISTENCY

AND EQUITY IN CODIFYING THE PROGRAM, EXPANDING OPPORTUNITIES FOR MORE

SHELTERS ACROSS THE STATE TO ACCESS AND IMPLEMENT PET ASSISTANCE. THE

BILL ALSO CLARIFIED THE GRANTS' ELIGIBILITY TO COVER EMERGENCY

VETERINARY SERVICES AND SUPPORT FOR ANIMALS OTHER THAN DOGS AND CATS,

ADDITIONS DIRECTLY RESULTING FROM CONSTRUCTIVE CONSULTATION WITH

EXPENSES \$ 812,212. INCLUDING GRANTS OF \$ 0. REVENUE \$ 21,302.

FORM 990, PART VI, SECTION A, LINE 6:

SHELTER PROVIDERS AND LOCAL MUNICIPALITIES.

THERE IS ONE CLASS OF MEMBERS. THE MEMBERS ARE THOSE PERSONS WHO HAVE PAID
THE APPLICABLE ANNUAL DUES FOR THE CURRENT CALENDAR YEAR.

FORM 990, PART VI, SECTION A, LINE 7A:

MEMBERS HAVE THE RIGHT TO VOTE ON THE ELECTION OF DIRECTORS.

FORM 990, PART VI, SECTION A, LINE 7B:

MEMBERS HAVE THE RIGHT TO VOTE ONLY REGARDING THE FOLLOWING ISSUES: (1) THE ELECTION OF DIRECTORS; (2) THE DISPOSITION OF SUBSTANTIALLY ALL OF THE ORGANIZATION'S ASSETS; (3) THE MERGER OF THE ORGANIZATION; AND (4) THE DISSOLUTION OF THE ORGANIZATION. IN ADDITION, ANY AMENDMENT OR REPEAL OF THE BYLAWS THAT WOULD MATERIALLY AND ADVERSELY AFFECT THE RIGHTS OF THE MEMBERS AS TO VOTING OR TRANSFER MUST BE APPROVED BY THE MEMBERS (INCLUDING A REQUIREMENT OF UNANIMOUS APPROVAL BY THE MEMBERS AS TO CERTAIN PROVISIONS OF THE BYLAWS).

FORM 990, PART VI, SECTION A, LINE 8B:

THE BOARD OF DIRECTORS HAS WORKING COMMITTEES, BUT NONE OF THEM HAVE THE

AUTONOMY TO ACT ON BEHALF OF THE GOVERNING BODY. THE FINANCE COMMITTEE

MANAGES THE ORGANIZATION'S INVESTMENTS AND REPORTS TO THE BOARD QUARTERLY

THROUGH MEETING MINUTES AND APPROVAL REQUESTS FOR NON-ROUTINE INVESTMENT

TRANSACTIONS. INVESTMENT STRATEGIES MUST CONFORM TO THE BOARD OF DIRECTORS'

INVESTMENT POLICY, WHICH IS ANNUALLY REVIEWED AND REVISED AS NECESSARY.

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

BEFORE FILING WITH THE IRS, REDROVER'S DIRECTOR OF FINANCE & ADMINISTRATION (DFA) WILL DISTRIBUTE THE FORM 990 TO THE ORGANIZATION'S OFFICERS AND FINANCE COMMITTEE VIA EMAIL, INCLUDING A SUMMARY REPORT THAT HIGHLIGHTS KEY POINTS FOR THEIR CONSIDERATION. REVIEWERS WILL BE GIVEN THE OPPORTUNITY TO DIRECT QUESTIONS TO REDROVER'S DFA, CONSULTING CPA, OR NONPROFIT TAX MANAGER BEFORE THE FORM 990 IS FINALIZED AND FILED WITH THE IRS.

THE ORGANIZATION'S CONFLICT OF INTEREST POLICY ("POLICY") APPLIES TO ALL
DIRECTORS, OFFICERS, AND MEMBERS OF COMMITTEES WITH GOVERNING-BOARD

DELEGATED POWERS (EACH AN "INTERESTED PERSON"). EACH INTERESTED PERSON IS
PROVIDED WITH A COPY OF THE POLICY ANNUALLY, AND IS REQUIRED TO SIGN A

STATEMENT AFFIRMING THAT HE OR SHE HAS RECEIVED A COPY OF THE POLICY, HAS
READ AND UNDERSTOOD THE POLICY, HAS AGREED TO COMPLY WITH THE POLICY, AND
UNDERSTANDS THAT THE ORGANIZATION IS A CHARITABLE ORGANIZATION AND THAT, TO
MAINTAIN ITS FEDERAL TAX EXEMPTION, IT MUST ENGAGE PRIMARILY IN ACTIVITIES
THAT ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PURPOSES. EACH INTERESTED

PERSON IS REQUIRED TO DISCLOSE TO THE BOARD OF DIRECTORS (THE "BOARD") ANY
DIRECT OR INDIRECT INTEREST IN A TRANSACTION OR ARRANGEMENT WHERE THE

ORGANIZATION IS ALSO INVOLVED, AND THE BOARD (EXCLUDING ANY INTERESTED

PERSON) MUST THEN REVIEW ALL MATERIAL FACTS AND REACH A DETERMINATION OF

UNITED ANIMAL NATIONS DBA REDROVER

Employer identification number 68-0124097

WHETHER A CONFLICT OF INTEREST EXISTS BY VOTE OF A MAJORITY OF THE
DISINTERESTED DIRECTORS. PURSUANT TO THE POLICY, THE BOARD ALSO ANNUALLY
REVIEWS THE COMPENSATION OF THE CEO AND CFO TO DETERMINE WHETHER SUCH
COMPENSATION IS JUST AND REASONABLE.

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

ON AN ANNUAL BASIS, REDROVER PARTICPATES IN THE FAIR PAY FOR NORTHERN
CALIFORNIA NONPROFITS COMPENSATION & BENEFITS SURVEY AND RECIEVES THE FULL
REPORT. WHEN NECESSARY, THE DIRECTOR OF FINANCE & ADMINISTRATION GENERATES
A COMPREHENSIVE INTERNAL SALARY ANALYSIS, THAT INCLUDES EACH MEMBER OF
STAFF, FOR THE PRESIDENT & CEO TO REVIEW AND USE TO DETERMINE IF SALARY
RANGES NEED UPDATING. THE BOARD OF DIRECTORS AND BOARD CHAIR ALSO REVIEW
THE SALARY ANALYSIS WHEN DETERMINING COMPENSATION FOR THE PRESIDENT & CEO
AND SALARY RANGE UPDATES FOR STAFF MEMBERS. THIS PROCESS WAS LAST
UNDERTAKEN IN 2023.

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

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

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

THE IRS FORM 990, CURRENT AUDITED FINANCIAL STATEMENTS AND CURRENT ANNUAL REPORT ARE AVAILABLE TO THE PUBLIC ON THE ORGANIZATION'S WEBSITE.

FORM 990, PART XII, LINE 2C

NEITHER THE PROCESS FOR OVERSEEING THE AUDIT OF THE FINANCIAL

STATEMENTS NOR THE PROCESS FOR THE SELECTION OF AN INDEPENDENT

ACCOUNTANT HAS CHANGED FROM THE PRIOR YEAR.

Schedule O (Form 990) 20:	23					Page
Name of the organization	****	7 7 T 7 7 7	NIAMTONG	ע פורו	SEDBUNEB	Employer identification number 68-0124097
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