DLN: 93493113002033 OMB No. 1545-0047 Return of Organization Exempt From Income Tax

Department of the

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

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

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

☑ Yes ☐ No

Cat. No. 11282Y

Form 990 (2022)

Open to Public Inspection

Treasury For the 2022 calendar year, or tax year beginning 01-01-2022 , and ending 12-31-2022 C Name of organization BIG CAT RESCUE CORP D Employer identification number B Check if applicable: ☐ Address change 59-3330495 ■ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P.O. box if mail is not delivered to street address) Room/suite 12802 EASY STREET ☐ Amended return \square Application pending (813) 920-4130 City or town, state or province, country, and ZIP or foreign postal code TAMPA, FL $\,$ 33625 $\,$ G Gross receipts \$ 2,655,854 Name and address of principal officer: H(a) Is this a group return for CAROLE BASKIN □Yes ☑No subordinates? 12802 EASY STREET H(b) Are all subordinates TAMPA, FL 33625 ☐ Yes ☐No included? Tax-exempt status: 4947(a)(1) or If "No," attach a list. See instructions. Website: ► WWW.BIGCATRESCUE.ORG **H(c)** Group exemption number ▶ L Year of formation: 1995 M State of legal domicile: FL K Form of organization: ✓ Corporation ☐ Trust ☐ Association ☐ Other ▶ 1 Briefly describe the organization's mission or most significant activities: BIG CAT RESCUES MISSION IS TO PROVIDE THE BEST HOME WE CAN FOR THE CATS IN OUR CARE, END ABUSE OF BIG CATS IN CAPTIVITY AND PREVENT EXTINCTION OF BIG CATS IN THE WILD Activities & Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 5 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 12 42 6 Total number of volunteers (estimate if necessary) . . . Total unrelated business revenue from Part VIII, column (C), line 12 7a -4,430 b Net unrelated business taxable income from Form 990-T, Part I, line 11 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . . 2,634,344 2,698,176 Ravenue **9** Program service revenue (Part VIII, line 2g) . . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 400,429 -982,667 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 470,278 638,132 3,505,051 2,353,641 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . 108,001 421,026 Benefits paid to or for members (Part IX, column (A), line 4) . . . 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 690,411 717,583 Expenses 0 **16a** Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶54,660 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 1,540,960 1,428,312 2,339,372 2,566,921 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12 . 1,165,679 -213,280 Net Assets or Fund Balances Beginning of Current Year **End of Year** 15,853,657 20 Total assets (Part X, line 16) . 16,076,545 21 Total liabilities (Part X, line 26) 36,329 26,721 22 Net assets or fund balances. Subtract line 21 from line 20 . 16,040,216 15,826,936 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. 2023-04-21 Signature of officer Sign Here HOWARD BASKIN SECTY / TREAS Type or print name and title Print/Type preparer's name Preparer's signature Date Check | if 2023-04-21 P01474269 Paid self-employed Firm's name ► FRSCPA PLLC Firm's FIN > 59-2482214 **Preparer** Use Only Firm's address ► 1301 66TH ST N Phone no. (727) 347-1120 SAINT PETERSBURG, FL 337105501

May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions.

Forn	n 990 (2022)					Page 2				
Pá	art III Statement	of Program Service	e Accomplis	hments						
	Check if Sche	dule O contains a resp	onse or note to a	any line in this Part III		🗹				
1		organization's mission:		···· ,						
	CAT RESCUES MISSION /ENT EXTINCTION OF E			CAN FOR THE CATS IN	OUR CARE, END ABUSE OF BIG C	ATS IN CAPTIVITY AND				
2	-	, -	ant program ser	vices during the year w	hich were not listed on					
	the prior Form 990 o					☐ Yes 🗹 No				
		ese new services on Sci								
3	•	cease conducting, or n	_	changes in how it cond	ucts, any program	□ Yes ☑ No				
	services?									
4	Describe the organization 501(c)(3) an	ation's program service	e accomplishmer ons are required	to report the amount	largest program services, as meas of grants and allocations to others,					
4a	(Code:) (Expenses \$	1,785,843	including grants of \$) (Revenue \$)				
	See Additional Data					,				
4b	(Code:) (Expenses \$	393,388	including grants of \$) (Revenue \$)				
	See Additional Data									
4c	(Code:) (Expenses \$	110,850	including grants of \$	110,850) (Revenue \$)				
	See Additional Data									
4d	Other program servi	ces (Describe in Sched	ule O.)			_				
	(Expenses \$	inc	uding grants of	\$) (Revenue \$)				
4e	Total program serv	vice expenses >	2,290,0	81						

tiv Checklist of Required Schedules		Vac	No
Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 2	1	Yes	110
Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions.	2	Yes	No
for public office? If "Yes," complete Schedule C, Part I	3		
	4	Yes	
assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		No
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? <i>If "Yes," complete Schedule D,</i> Part I 2	6		No
Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D,</i> Part III 2	8		No
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 2	9		No
Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
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.			
Schedule D, Part VI. 🥦	11a	Yes	
assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 2	11b		No
Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 🕏	11d	Yes	
Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e		No
Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
	12a	Yes	
Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV **	16	Yes	
column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		No
lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
complete Schedule G, Part III	19		No
	20a		No
	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		n (2022)
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A Schedule B, Schedule of Contributors? See instructions. If Is the organization required to complete Schedule B, Schedule of Contributors? See instructions. If Is the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I and Is a section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part I and Is a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 99:1921 ("Yes," complete Schedule C, Part II and Is a seem of the organization as extent on 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 99:1921 ("Yes," complete Schedule C, Part III and Is a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III and Is a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III and Is a security of the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III and Is a security of 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, in a part of the organization, directly or through a related organization, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part V III. Did the organization organization areas an amount for interest organization, death assets in tem	Is the organization described in section \$01(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 2. Is the organization required to complete Schedule B, Schedule of Contributors? See instructions. 2 Dut the organization engage in direct or indirect political rampaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 3. 3 Section 501(c)(3) organizations. Dut the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 3. 4 Is the organization a section 501(c)(4), 501(c)(5), 501(c)(6), partialization that tecsives memberathip dues, assessments, or similar amounts as defined in Rev. Proc. 39:197 If "Yes," complete Schedule C, Part II 3. Dut the organization maintain any denor advised funds or any similar funds or accounts for which conors have the right to provide advice on the distribution or investment of amounts in such funds or accounts II "Yes," complete Schedule D, Part II 3. Dut the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures If "Yes," complete Schedule D, Part II 3. Dut the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodial for amounts not itself in Part X, or envolve credit crusteling, deter management, credit repair, or debt regolation services? If "Yes," complete Schedule D, Part IV 3. Dut the organization report an amount for land, buildings, and equipment in Part X, line 121 If Yes, tomplete Schedule D, Part IV 3. 10 the organization report an amount for land, buildings, and equipment in Part X, line 122 If Yes, complete Schedule D, Part X 3. 11 Dut the organization report an amount for land, buildings, and equipment in Part X, line 12 If hat is 5% or more of its total assets reported in Part X, line 167 If Yes, complete Schedule D, Pa	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A

Form	990 (2022)			Page 4
Pai	t IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III"</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	Yes	
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🐒	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
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? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that			

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

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

Statements Regarding Other IRS Filings and Tax Compliance

1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable .

Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable .

38

Part V

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

Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

Νo

No

No Porm **990** (2022)

37

38

1c

19

0

1a

1b

Yes

Yes

orm	990 (2022)			Page 5
Pai	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3a 3b		No
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	4a		No ——
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
•	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization	6a		No
	solicit any contributions that were not tax deductible as charitable contributions?	Ua		
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
	Organizations that may receive deductible contributions under section 170(c).	_		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7 b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		No
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		No
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
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			
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		No
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	17		

1 61	lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI		orise to	~			
Se	ction A. Governing Body and Management	•	• •				
			Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 8						
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.						
b	Enter the number of voting members included in line 1a, above, who are independent 1b 5						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes				
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No			
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No			
6	6 Did the organization have members or stockholders?						
7a	a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		No			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:						
а	The governing body?	8a	Yes				
b	Each committee with authority to act on behalf of the governing body?	8 b	Yes				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No			
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	e.)				
			Yes	No			
	Did the organization have local chapters, branches, or affiliates?	10a		No			
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b					
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes				
	Describe on Schedule O the process, if any, used by the organization to review this Form 990						
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes				
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c	Yes				
13	Did the organization have a written whistleblower policy?	13	Yes				
14	Did the organization have a written document retention and destruction policy?	14	Yes				
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
а	The organization's CEO, Executive Director, or top management official	15a	Yes				
b	Other officers or key employees of the organization	15b	Yes				
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.						
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b					
Se	ction C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed AL , AK , AR , CT , FL , GA , IL , KS , KY , I NH , NJ , NM , NY , NC , OH , OK , OR , PA VA , WA , WV , WI						
18	Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.						
	Own website Another's website Upon request Other (explain in Schedule O)						
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.						
20	State the name, address, and telephone number of the person who possesses the organization's books and records: •GALE INGHAM 12802 EASY STREET TAMPA, FL 33625 (813) 920-4130	-	orm oo	0 (2022)			
				ロ・ロフロフノト			

(F)

Part VII

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII . Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

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

- 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.

(D)

- List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the
- organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

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

Name and title	Average hours per week (list any hours for related organizations below dotted line)		ne bo	ox, ι n of tor/t	inles ficer rust	s pers	son	Reportable compensation from the organization (W-2/1099- MISC/1099- NEC)	Reportable compensation from related organizations (W-2/1099- MISC/1099- NEC)	Estimated amount of other compensation from the organization and related organizations
	60.00		(i) (i)			ated				
(1) HOWARD BASKIN SECTY / TREA		×		х				83,123	0	0
(2) JAMIE VERONICA MURDOCK PRESIDENT /	60.00	х		х				78,280	0	2,454
(3) CAROLE BASKIN CEO / FOUNDE	60.00	х		х				69,472	0	0
(4) MARY LOU GEIS DIRECTOR	1.00	Х						0	0	0
(5) DARREN KIPNIS DIRECTOR	1.00	х						0	0	0
(6) KEITH LAWLESS DIRECTOR	1.00	х						0	0	0
(7) LYNDA LICHT DIRECTOR	1.00	х						0	0	0
(8) KIM MAHONEY VP / DIRECTO	1.00	х		х				0	0	0
										Form 990 (2022)

Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) **(F)** Estimated

Page 8

	(A) Name and title	(B) Average hours per week (list any hours	(C) Position (do not check more chan one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099-		(E) Reportable compensation from related organizations (W-2/1099-		(F) Estimated amount of other compensation from the organization and		
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		1099- 099-NEC)	(W-2/1099-NE		relat organiza	ed
41-1	Sub-Total													
c ·	Total from continuation sheets to P	art VII, Section	Α.			'	▶ [
	Total (add lines 1b and 1c)						>			30,875				2,454
2	Total number of individuals (including of reportable compensation from the	ı but not limited organization ►	to thos	e list	ed a	bov	e) who	rec	eived mor	e than \$1	00,000			
													Yes	No
3	Did the organization list any former line 1a? <i>If "Yes," complete Schedule</i> 2											3		No
4	For any individual listed on line 1a, is	the sum of rep	ortable (comp	ensa	ation	n and d	other	compens	sation from		3		No_
	organization and related organization individual	s greater than \$	• •	0 <i>? If</i>	"Yes	· ·	omplet	te Sc	chedule J	for such		4		No
5	Did any person listed on line 1a receiservices rendered to the organization											5		No
S	ection B. Independent Contract	ors												_
1	Complete this table for your five high from the organization. Report compe											mpen	sation	
	Name a	(A) and business addre	ess							Desci	(B) ription of services		(C Comper	

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

compensation from the organization \blacktriangleright

		(2022)								Page 9
Part	VIII				respo	nse or note to any	line in this Part VIII			🗆
		Check II Sched	uie	O contains a	тезро	inse of flote to any	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1a	Federated campaig	gns	1	.a	33,231		revenue		512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	b Membership dues 1b			.b						
G G		Fundraising events		<u> </u>	lc	3,464				
Sifts lar /		Related organization Government grants (c			.d					
ns. (Simi		All other contributions		<u> </u>	.e					
ation er S	-	and similar amounts r above		scluded	Lf	2,661,481				
tributi Other	g	Noncash contributions lines 1a - 1f:\$	s incl		.g	53,069				
Contand	h	Total. Add lines 1a	a-1f			▶	2,698,176			
						Business Code	2,050,270			
	2a									
enue										
Program Service Revenue	b									
vice	С									
Set	d									
gran	_									
ď	е									
	f	All other program	serv	ice revenue.						
		Total. Add lines 2 Investment income				nterest and other	1			
	S	imilar amounts) .				•	-982,667	7		-982,667
		Income from invest Royalties			npt bo					
				(i) Real	•	(ii) Personal				
	6a	Gross rents	6a	26	58,500					
		Less: rental								
	c	expenses Rental income	6b	19	92,692					
		or (loss)	6с		75,808	l .	75.000			
	d	Net rental income	or ((loss) (i) Securit		(ii) Other	75,808	3		75,808
	7a	Gross amount	_	(I) Securit	.103	(II) Other				
		from sales of assets other than inventory	7a							
	b	Less: cost or	_							
		other basis and sales expenses	7b							
	С	Gain or (loss)	7c							
	d	Net gain or (loss)	•			· · · •				
<u>e</u>	8a	Gross income from fu (not including \$	ındra	ising events 3,464 of						
€ F		contributions reported See Part IV, line 18			8a	46,104				
Other Revenue	b	Less: direct expen	ses		8b	1,362				
her	c	Net income or (los	s) fr	om fundraisir	ng eve	ents	44,742	2		44,742
õ	9a	Gross income from	gami	ing activities.						
		See Part IV, line 19			9a					
		Less: direct expen Net income or (los			9b ctiviti	es •				
	10a	Gross sales of inve returns and allowa	nto	ry, less	10a	103,743				
	b	Less: cost of good:	s sol	ld	10b	108,159				
	c	Net income or (los			nvent		-4,416	5	-4,430	14
	11	Miscellaneou aOTHER INCOME	us R	evenue		Business Code 519130	472,090			472,090
		5 THER INCOME								, -
	b	WEBSITE REVENU	ΙΕ			532000	38,120	38,120		
	c	PROPERTY MANAG	EME	ENT FEE		900099	12,000			12,000
		All address						212		
		All other revenue Total. Add lines 1:		 L1d		>	-212			
		Total revenue. Se					521,998			
			11		•	• • • •	2,353,641	37,908	-4,430	-378,013 Form 990 (2022)

Form 990 (2022)				Page 10
Part IX Statement of Functional Expenses				
Section 501(c)(3) and 501(c)(4) organizations must co	omplete all columns.	All other organizatio	ns must complete co	lumn (A).
Check if Schedule O contains a response or note to an	y line in this Part IX			🗆
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	331,326	331,326		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	89,700	89,700		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	230,875	183,179	27,869	19,827
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	362,075	250,534	104,001	7,540
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	15,381	11,250	3,421	710
9 Other employee benefits	63,412	46,382	14,103	2,927
10 Payroll taxes	45,840	33,529	10,195	2,116
11 Fees for services (non-employees):				
a Management				
b Legal	125,047	125,047		
c Accounting	11,749		11,749	
d Lobbying	38,000	38,000		
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	81,904	52,200	29,704	
12 Advertising and promotion	15,347	10,289		5,058
13 Office expenses	89,449	57,127	21,099	11,223
14 Information technology	179,764	179,764		
15 Royalties				
16 Occupancy				
17 Travel	6,148	6,148		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings	44,971	44,971		
20 Interest				
21 Payments to affiliates				
 				

362,075	250,534	104,001	7,540
15,381	11,250	3,421	710
63,412	46,382	14,103	2,927
45,840	33,529	10,195	2,116
125,047	125,047		
11,749		11,749	
38,000	38,000		
81,904	52,200	29,704	
15,347	10,289		5,058
89,449	57,127	21,099	11,223
179,764	179,764		
6,148	6,148		
44,971	44,971		
192,728	192,728		
6,355	6,355		
412,439	412,439		
187,428	187,428		
36,983	31,685	39	5,259
2,566,921	2,290,081	222,180	54,660
	15,381 63,412 45,840 125,047 11,749 38,000 81,904 15,347 89,449 179,764 6,148 44,971 192,728 6,355	15,381 11,250 63,412 46,382 45,840 33,529 125,047 125,047 11,749 38,000 38,000 81,904 52,200 15,347 10,289 89,449 57,127 179,764 179,764 6,148 6,148 44,971 44,971 44,971 44,971 192,728 192,728 6,355 6,355 412,439 412,439 187,428 36,983 31,685	15,381 11,250 3,421 63,412 46,382 14,103 45,840 33,529 10,195 1125,047 125,047 11,749 11,749 38,000 38,000 81,904 52,200 29,704 15,347 10,289 89,449 57,127 21,099 179,764 179,764 6,148 6,148 6,148 6,148 6,148 6,355 6,355 6,355 6,355 6,355 187,428 187,428 36,983 31,685 39

11,827

11,117

26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

Check here ▶ ☑ if following SOP 98-2 (ASC 958-720).

Form **990** (2022)

710

Page **11**

73,217

12,601

4.035,356 1,298,378 228,417

2,212,061 15,853,657 26,721

15,853,657

Form 990 (2022)

23

24

16,076,545

33

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

	Beginning of year		End of year
1 Cash-non-interest-bearing		1	
2 Savings and temporary cash investments	7,623,292	2	7,993,62
3 Pledges and grants receivable, net		3	

Ste
Assets

	3
	4
	5
	6
s	7
šet	8
Assets	9
	10a
	b
	11
	12

	- ا	rieuges and grants receivable, net		•		J	
	4	Accounts receivable, net		[118,137	4	
	5	Loans and other receivables from any current or trustee, key employee, creator or founder, subs controlled entity or family member of any of the	contributor, or 35%		5		
	6	Loans and other receivables from other disqualit section $4958(f)(1)$), and persons described in se	fied pe	rsons (as defined under		6	
S	7	Notes and loans receivable, net		[7	
ssets	8	Inventories for sale or use		[64,339	8	
As	9	Prepaid expenses and deferred charges				9	
,	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	5,776,031			
	ь	Less: accumulated depreciation	10b	1,740,675	4,146,763	10 c	
	11	Investments—publicly traded securities .	1,767,567	11			
	12	Investments—other securities. See Part IV, line 11			135,923	12	
	13	Investments—program-related. See Part IV, line	11 .			13	
	14	Intangible assets		[14	
	15	Other assets. See Part IV, line 11			2,220,524	15	
	16	Total assets. Add lines 1 through 15 (must equ	ual line	33)	16,076,545	16	
	17	Accounts payable and accrued expenses			36,329	17	
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
S	21	Escrow or custodial account liability. Complete F	Part IV	of Schedule D		21	
abilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons				22	

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Total liabilities and net assets/fund balances

	c	•
	9	į

23

24

33

25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 . . 36,329 26 26.721 Fund Balances Organizations that follow FASB ASC 958, check here ▶ complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions 14,950,711 27 14.906,662 28 Net assets with donor restrictions 1,089,505 28 920,274 Organizations that do not follow FASB ASC 958, check here ▶ complete lines 29 through 33. ō 29 29 Capital stock or trust principal, or current funds Assets 30 Paid-in or capital surplus, or land, building or equipment fund . . . 30 31 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 16,040,216 32 15,826,936

Pa	Part XII Financial Statements and Reporting					
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	15,826,936			
9	Other changes in net assets or fund balances (explain in Schedule O)	9				
8	Prior period adjustments	8				
7	Investment expenses	7				
_	bollated services and ase of facilities 1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	•				

	· · · · · · · · · · · · · · · · · · ·			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	15	,826,936
Pa	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII		 	
			 Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other			

☐ Both consolidated and separate basis

☐ Both consolidated and separate basis

2a

2b

2c

3a

3h

Yes

Yes

No

No

Form 990 (2022)

If the organization changed its method of accounting from a prior year or checked "Other," explain on

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

Consolidated basis

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

Schedule O.

separate basis, consolidated basis, or both:

Separate basis

consolidated basis, or both: ✓ Separate basis

Audit Act and OMB Circular A-133?

Additional Data

Software ID:

Software Version: **EIN:** 59-3330495

Name: BIG CAT RESCUE CORP

Form 990 (2022)

Form 990, Part III, Line 4a:

CARE FOR BIG CATS - PROVIDED A PERMANENT HOME FOR APPROXIMATELY 41 BIG CATS, MANY OF WHOM HAVE BEEN ABUSED, ABANDONED, ORPHANED OR RETIRED FROM PERFORMING ACTS. CARE INCLUDED FOOD, SHELTER, VETERINARY CARE THROUGH A STATE OF THE ART CAT HOSPITAL, OPERANT CONDITIONING AND CONSISTENT FREQUENT ENRICHMENT ACTIVITIES. SUCCESSFULLY REHABILITIATED 5 ORPHANED OR INJURED FLORIDA BOBCATS AND RELEASED THEM BACK INTO THE WILD.

Form 990, Part III, Line 4b:

THROUGH GUIDED TOURS OF THE SANCTUARY TO APPROXIMATELY 30,000 VISITORS DURING THE YEAR. DUE TO COVID THE SANCTUARY WAS CLOSED TO VISITORS OTHER THAN A LIMITED NUMBER OF SMALL TOURS FOR DONORS. THE SANCTUARY CONTINUED TO EDUCATE ABOUT THESE ISSUES AND ADVOCATE FOR LEGISLATION THROUGH ITS WEBSITE THAT RECEIVED APPROXIMATELY 1 MILLION VISITORS DURING THE YEAR, THROUGH EMAILS NO LESS THAN MONTHLY THAT GO TO OVER 90,000

ADVOCACY - NORMALLY, THE SANCTUARY PERFORMED ITS ADVOCACY MISSION BY TEACHING ABOUT THE PLIGHT OF THE BIG CATS IN CAPTIVITY AND IN THE WILD

NOT USDA LICENSED EXHIBITORS. WE BELIEVE THIS WILL END 90% OF THE ABUSE OF BIG CATS HELD IN CAPTIVITY IN THIS COUNTRY.

RECIPIENTS AND THROUGH ITS PRINT NEWSLETTER THAT GOES TO OVER 3.400 RECIPIENTS. OUR YOUTUBE CHANNEL BIGCATTV.COM HAS 1.3 MILLION SUBSCRIBERS AND OUR VIDEOS THERE HAVE RECEIVED OVER 638 MILLION CUMULATIVE VIEWS. WE HAD OVER 3.6 MILLION FACEBOOK FOLLOWERS AT YEAR END, OVER 300,000 FOLLOWERS ON TWITTER, AND OVER 175,000 ON INSTAGRAM. WE CONTINUED TO SUCCESSFULLY URGE OWNERS OR OPERATORS OF VENUES NOT TO ALLOW CUB

PETTING OR OTHER BIG CAT EXHIBITS ON SITE AND TO URGE ADVERTISERS NOT TO USE BIG CATS IN THEIR TELEVISION. ONLINE AND PRINT ADS. OUR MOST

SIGNIFICANT ADVOCACY ACCOMPLISHMENT WAS THE PASSAGE OF THE FEDERAL BIG CAT PUBLIC SAFETY ACT INTO LAW ON DECEMBER 20, 2022 AFTER OVER A DECADE

OF OUR LEADING THE EFFORT TO GET IT PASSED. THE BILL ENDS THE ABUSIVE CUB PETTING AND PAHSES OUT PRIVATE OWNERSHIP OF BIG CATS BY THOSE WHO ARE

Form 990, Part III, Line 4c: IN-SITU GRANTS - WE PROVIDE GRANTS TO NONPROFIT ORGANZIATIONS AND INDIVIDUALS TO SUPPORT IN-SITU CONSERVATION WORK DIRECTLY RELATED TO PRESERVING BIG CATS IN THE WILD. GRANTS RANGING FROM 1,000 TO 9,500 WERE MADE TO 23 IN-SITU CONSERVATION PROJECTS SPANNING 13 SPECIES IN 19

COUNTRIES.

efile	GR/	APHIC prir	t - DO NOT PROCESS	As Filed Data -			DLN: 9	3493113002033
SCH	IFD	ULE A	Dublia	Charity Statu	e and Dul	hlic Supp		OMB No. 1545-0047
	n 990			Charity Statu organization is a sect				2022
		,	complete il tile (4947(a)(1) nonexe	mpt charitable	trust.	d Scotion	
		the Treasury ue Service	▶ Go to www.ir	Attach to Form 990 or Form 990-EZ. **ww.irs.gov/Form990 for instructions and the latest information.** Open				
								Inspection
		n e organiza CUE CORP	tion				Employer identific	ation number
					<u>.</u>		59-3330495	
Par he o			for Public Charity State private foundation becaus				see instructions.	
1			onvention of churches, or a	`	•		(A)(i).	
2		,	scribed in section 170(b)					
3			or a cooperative hospital se		,	, ,	iii)	
4		·	•	-			-	ntor the beenitel's
4	Ш	name, city,	esearch organization opera and state:	ted in conjunction with	a nospital descri	ned in section .	170(B)(1)(A)(III). E	nter the nospital s
5	П	An organiza	ition operated for the bene	fit of a college or univer	rsity owned or op	perated by a gov	ernmental unit descri	bed in section 170
6	_		(iv). (Complete Part II.)			470(1)(4)(4)		
6	Ш		tate, or local government o	_				
7			ition that normally receives $\mathbf{0(b)(1)(A)(vi)}.$ (Complet		s support from a	ı governmental u	nit or from the gener	al public described in
8		A communi	ty trust described in sectio	n 170(b)(1)(A)(vi).	(Complete Part I	I.)		
9			ural research organization or ant college of agriculture. !					ege or university or a
10	✓		tion that normally receives					
		from activit investment	ies related to its exempt fu income and unrelated busi	nctions—subject to cert ness taxable income (le	tain exceptions, ess section 511 t	and (2) no more ax) from busines	than 33 1/3% of its s ses acquired by the c	upport from gross Irganization after June
		30, 1975. 9	see section 509(a)(2). (C	omplete Part III.)				
11		An organiza	ition organized and operate	ed exclusively to test for	r public safety. S	See section 509	(a)(4).	
12		more public	ition organized and operate ly supported organizations a through 12d that describe	described in section 5	09(a)(1) or se	ction 509(a)(2). See <mark>section 509(</mark> a	
а		organizatio	upporting organization open(s) the power to regularly Part IV, Sections A and E	appoint or elect a major				
b		Type II. A manageme	supporting organization sunt of the supporting organiz	pervised or controlled in zation vested in the san				
С	П		olete Part IV, Sections A Inctionally integrated. A		n operated in co	nnection with ar	nd functionally integra	ted with its
-	ш	supported o	organization(s) (see instruc	tions). You must com	plete Part IV, S	Sections A, D, a	nd E.	
d		functionally	on-functionally integrate integrated. The organization). You must complete Pa	on generally must satis	fy a distribution	requirement and		
e		Check this	pox if the organization rece or Type III non-functionall	ived a written determin	ation from the I		pe I, Type II, Type II	I functionally
f	Enter		of supported organizations					
g	Provid	de the follow	ing information about the s	supported organization(s).			_
	(i) Name of supported organization (ii) EIN		(iii) Type of organization (described on lines 1- 10 above (see instructions))		anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	
					Yes	No		
Total								

line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5

Section B. Total Support

Net income from unrelated business activities, whether or not the

business is regularly carried on. .

from line 4.

10

11

13,743,320

14,041,146

1,449,688

926,800

82,988

16,500,622

3,169,916

83.290 %

82.020 %

(f) Total

(e) 2022

12

14

15

2,698,176

-714,167

387,360

58.290

Schedule A (Form 990) 2022

Page 2

If the organization failed to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar vear

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

	(or fiscal year beginning in) ▶	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.")	2,676,667	3,120,980	2,910,979	2,634,344	2,698,176	14,041,146
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	2,676,667	3,120,980	2,910,979	2,634,344	2,698,176	14,041,146
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on						297,826

	Calendar year (or fiscal year beginning in) ▶	(a) 2018	(b) :
7	Amounts from line 4	2,676,667	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	250,283	

Section C. Computation of Public Support Percentage

Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). . Total support. Add lines 7 through

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Public support percentage for 2022 (line 6, column (f) divided by line 11, column (f))

Public support percentage for 2020 Schedule A, Part II, line 14

12,751

13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check

16a 33 1/3% support test-2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box h 33 1/3% support test-2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this 17a 10%-facts-and-circumstances test-2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization h 10%-facts-and-circumstances test-2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization

2019

3,120,980

505,712

135,606

(c) 2020

2,910,979

660,645

340,656

(d) 2021

2,634,344

747,215

50,427

24,698

17,407,992

17,407,992

1,449,688

1,449,688

926,800

24,698

19,809,178

87.880 %

86.000 %

7.000 %

12.000 %

(f) Total

(d) 2021

2,707,142

747,215

747,215

50,427

24,698

3,336,615

660,645

660,645

340,656

(e) 2022

2,794,374

-714,167

-714,167

387,360

Schedule A (Form 990) 2022

15

16

17

18

qualify under Part II. If

	<u>'</u>							
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							
	the organization fails t	o qualify under	the tests listed	below, please of	omplete Part II.	.)		
Section A.	Section A. Public Support							
	alendar year year beginning in) 🕨	(a) 2018	(b) 2019	(c) 2020	(d) 2021			
1 Gifts, gran	nts, contributions, and							

(e) 2022 (f) Total membership fees received. (Do not 2,676,667 3,120,980 2,910,979 2,634,344 2,698,176 14,041,146 include any "unusual grants.") . Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in 1,357,388 1,306,641 395.181 72,798 37,908 3,169,916 any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or 40,291 67,894 30,455 58,290 196,930 business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 4,074,346 4,495,515 3,336,615 2,707,142 2,794,374 17,407,992 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 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

4,495,515

505,712

505,712

135,606

19a 33 1/3% support tests-2022. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization \blacktriangleright lacksquare33 1/3% support tests—2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization \blacktriangleright \sqcup

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

13 for the year. c Add lines 7a and 7b. . Public support. (Subtract line 7c from line 6.) Section B. Total Support (c) 2020 (a) 2018 (b) 2019

ng in) 🏲 rest. ceived on rovalties

	Calendar year
	(or fiscal year beginning in) ▶
9	Amounts from line 6
L0a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources
b	Unrelated business taxable incom (less section 511 taxes) from businesses acquired after June 30

С

11

12

14

15

16

17

18

20

Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.		
Add lines 10a and 10b.	250,283	
Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on.	12,751	
Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)		

4,074,346

250,283

Se	Section C. Computation of Public Support Percentage								
	this box and stop here						▶ 🗆		
14	First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check								
13	Total support. (Add lines 9, 10c, 11, and 12.).	4,337,380	5,136,833	4,337,916	3,529,482	2,467,567	19,809,178		
	assets (Explain in Part VI.)				,		,		

Public support percentage for 2022 (line 8, column (f) divided by line 13, column (f))

Investment income percentage for 2022 (line 10c, column (f) divided by line 13, column (f))

Public support percentage from 2021 Schedule A, Part III, line 15

Investment income percentage from 2021 Schedule A, Part III, line 17

Section D. Computation of Investment Income Percentage

5a

6

7

8

10a

Part IV Supporting Organizations

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b Schedule A (Form 990) 2022

Page 4

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

Section A. All Supporting Organizations Yes No

1	Ill of the organization's supported organizations listed by name in the organization's governing documents? o," describe in Part VI how the supported organizations are designated. If designated by class or purpose, ribe the designation. If historic and continuing relationship, explain.		
	describe the designation. If historic and continuing relationship, explain.	1	
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) .	2	

	describe the designation. If historic and continuing relationship, explain.	1	
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).	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.	3a	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied		

	(m, continue 500(c)(d) (m) (2)		
	in section 509(a)(1) or (2).	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.	3a	
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.	3b	
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?		

	2 / /		
	3c below.	3a	
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.	3b	
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.	3с	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you		

	, and the second se		
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.	3b	
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.	3с	
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.	4a	

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

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

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

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

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

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes,"

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,"

Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.

Substitutions only. Was the substitution the result of an event beyond the organization's control?

in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

supervised by or in connection with its supported organizations.

organization's supported organizations? If "Yes," provide detail in Part VI.

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).

organization had an interest? If "Yes," provide detail in Part VI.

amendment to the organizing document).

complete Part I of Schedule L (Form 990).

the organization had excess business holdings).

provide detail in Part VI.

answer line 10b below.

organization's organizing document?

SCH	ledule A (Form 990) 2022			age 5
Pa	Supporting Organizations (continued)			
			Yes	No
	. Has the organization accepted a gift or contribution from any of the following persons?			<u> </u>
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on 11a above?	11b		
c	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to 11a, 11b, or 11c, provide detail in Part	11c		
-	<i>VI.</i> Section B. Type I Supporting Organizations			
	ection b. Type I supporting organizations		Yes	No
1	Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	100	
2	Did the organization energic for the handlit of any supported organization other than the supported organization (s) that			
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
S	Section C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? 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		
S	Section D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing	!		
	documents in effect on the date of notification, to the extent not previously provided?			
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).			
_		2		
3	By reason of the relationship described in line 2 above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
S	Section E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions):		
	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.			
	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described on line 2a, above constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.	20		
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of	3a		
	the supported organizations? If "Yes" or "No", provide details in Part VI . b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI , the role played by the organization in this regard.			

instructions)

Page **6**

1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
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 (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-in	tegrate	ed Type III supporting or	ganization (see

Section D - Distributions

Page 7

1 Amounts paid to supported organizations to accomplish exempt purposes 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in 2 excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations 3 4 Amounts paid to acquire exempt-use assets 5

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

5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) Other distributions (describe in Part VI). See instructions 6 7 7 Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide 8 details in Part VI). See instructions

Distributable amount for 2022 from Section C, line 6 9 10 10 Line 8 amount divided by Line 9 amount (ii) (iii) Section E - Distribution Allocations (i) Underdistributions Distributable **Excess Distributions** (see instructions) Pre-2022 Amount for 2022 1 Distributable amount for 2022 from Section C, line 6 2 Underdistributions, if any, for years prior to 2022 (reasonable cause required-- explain in **Part VI**).

See instructions. 3 Excess distributions carryover, if any, to 2022: a From 2017. **b** From 2018. **c** From 2019.

e From 2021. f Total of lines 3a through e q Applied to underdistributions of prior years h Applied to 2022 distributable amount i Carryover from 2017 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. \$ a Applied to underdistributions of prior years b Applied to 2022 distributable amount c Remainder. Subtract lines 4a and 4b from line 4.

4 Distributions for 2022 from Section D, line 7: 5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI. See instructions. 6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. If the amount is greater

than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2023. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2018.

Schedule A	(Form 990) 2022	Page 8
Part VI	Section A, lines 1, Part IV, Section D	Iformation. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See
		Facts And Circumstances Test
990 S che	dule A, Supplem	nental Information
Ret	turn Reference	Explanation
PART III, L	INE 12	OTHER INCOME 24,698

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE C**

• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

Political Campaign and Lobbying Activities

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

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

Open to Public Inspection

OMB No. 1545-0047

DLN: 93493113002033

Department of the Treasury ▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. Internal Revenue Service ▶Go to www.irs.gov/Form990 for instructions and the latest information.

(Form 990)

		601(c)(3)) organizations: Complete Parts	I-A and C below.	Do not complete Part I-B.	
	Section 527 organizations: Complet	e Part I-A only. n Form 990, Part IV, Line 4, or Form 9	90-F7 Part VI lis	ne 47 (Lobbying Activities	:) then
		t have filed Form 5768 (election under s			
• :	Section 501(c)(3) organizations that	have NOT filed Form 5768 (election ur	nder section 501(h	i)): Complete Part II-B. Do r	not complete Part II-A.
		n Form 990, Part IV, Line 5 (Proxy Tax	८) (see separate i	nstructions) or Form 990	-EZ, Part V, line 35c
	xy Tax) (see separate instruction Section 501(c)(4), (5), or (6) organiz				
	me of the organization	addens. Complete Fait III.		Employer iden	tification number
BIG	CAT RESCUE CORP				
Dav	t I-A Complete if the orga	nization is exempt under sectio	- F01(a) av ia	59-3330495	
	<u> </u>	•			
1	"political campaign activities."	ization's direct and indirect political can			
2		itures. See instructions			\$
3		aign activities. See instructions			
Par	t I-B Complete if the orga	nization is exempt under sectio	n 501(c)(3).		
1	Enter the amount of any excise ta	ax incurred by the organization under se	ection 4955	>	\$
2	Enter the amount of any excise ta	ax incurred by organization managers u	nder section 4955	>	\$
3	If the organization incurred a sect	tion 4955 tax, did it file Form 4720 for t	his year?		☐ Yes ☐ No
4a	Was a correction made?				☐ Yes ☐ No
b	If "Yes," describe in Part IV.				
Par	t I-C Complete if the organ	nization is exempt under sectio	n 501(c), exc	ept section 501(c)(3)	•
1	Enter the amount directly expend	ed by the filing organization for section	527 exempt funct	tion activities 🕨	\$
2		anization's funds contributed to other o			\$
3	Total exempt function expenditure	es. Add lines 1 and 2. Enter here and or	n Form 1120-POL,	line 17b ▶	\$
4	Did the filing organization file For	m 1120-POL for this year?			☐ Yes ☐ No
5	organization made payments. For of political contributions received	employer identification number (EIN) of each organization listed, enter the amo that were promptly and directly deliver ee (PAC). If additional space is needed,	ount paid from the ed to a separate p	e filing organization's funds. political organization, such a	Also enter the amount
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds. If none, enter -0	contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
1					
2					
3					
4					
5					
6					
For P	Paperwork Reduction Act Notice, see	the instructions for Form 990.	Cat	. No. 50084S Sc	hedule C (Form 990) 2022

(d) 2022

274,381

91,608

68,595

47,786

Schedule C (Form 990) 2022

(e) Total

1,130,627

1,695,941

279,714

282,657

423,986

173,519

Page 2

expenses, and share of excess lobbying expenditures). Check if the filing organization checked box A and "limited control" provisions apply. (a) Filing (b) Affiliated group **Limits on Lobbying Expenditures** organization's totals totals (The term "expenditures" means amounts paid or incurred.) Total lobbying expenditures to influence public opinion (grass roots lobbying) 47,786 43,822 Total lobbying expenditures to influence a legislative body (direct lobbying)

Total lobbying expenditures (add lines 1a and 1b) 91,608 2,396,011 Other exempt purpose expenditures 2,487,619 Total exempt purpose expenditures (add lines 1c and 1d) 274,381 columns. If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 20% of the amount on line 1e. \$100,000 plus 15% of the excess over \$500,000. Over \$500,000 but not over \$1,000,000

f Lobbying nontaxable amount. Enter the amount from the following table in both Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000. Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000. Over \$17,000,000 \$1,000,000. Grassroots nontaxable amount (enter 25% of line 1f) 68,595 Subtract line 1g from line 1a. If zero or less, enter -0-. Subtract line 1f from line 1c. If zero or less, enter -0-. j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

☐ Yes ☐ No section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five

columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

(a) 2019

310,649

78,037

77,662

56.513

(b) 2020

283,279

46,051

70,820

37,608

(c) 2021

262,318

64.018

65,580

31.612

Calendar year (or fiscal year

beginning in)

Lobbying nontaxable amount

(150% of line 2a, column(e))

Total lobbying expenditures

Grassroots ceiling amount

Grassroots nontaxable amount

(150% of line 2d, column (e))

Grassroots lobbying expenditures

Lobbying ceiling amount

Return Reference

activi	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a)	(b)	
JCLIVI	, , , , , , , , , , , , , , , , , , , ,	Yes	No	Amou	ınt
1	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:				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
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 be not 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?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	(5), 0	r sectio	on	
	301(c)(0).			Yes	N
1	Were substantially all (90% or more) dues received nondeductible by members?			1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		🗀	3	
Par	Complete if the organization is exempt under section 501(c)(4), section 501(c)	(5), 0	r section	on 501(c)(6
	and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."				,
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
а	Current year	2a			
b	Carryover from last year	2b			
С	Total	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	3			
	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				
4	expenditure next vear?	1 4			
4 5	expenditure next year?	5			
5	expenditure next year?				

Explanation

efile GRAPHIC print - DO NOT PROCESS **SCHEDULE D**

As Filed Data -

DLN: 93493113002033

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990)

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.

Open to Public Inspection

	me of the organization CAT RESCUE CORP				Emp	oloyer identification number
	G.1. 102552 GS.4				59-3	3330495
Pa	rt I Organizations Maintaining Donor Adv				or Acc	counts.
	Complete if the organization answered "Y					(1) 5
	T. I	(a) Dor	nor advis	ed funds		(b) Funds and other accounts
•	Total number at end of year				-	
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
ļ	Aggregate value at end of year					
	Did the organization inform all donors and donor advis organization's property, subject to the organization's e	exclusive legal cont	rol?			☐ Yes ☐ No
•	Did the organization inform all grantees, donors, and or charitable purposes and not for the benefit of the dono private benefit?	or or donor advisor	, or for a	ny other purpos		
Pa	rt II Conservation Easements.					
	Complete if the organization answered "Y					
•	Purpose(s) of conservation easements held by the organization	•	I that ap	ply).		
	Preservation of land for public use (e.g., recreation	on or education)	Ш	Preservation of	an histor	ically important land area
	Protection of natural habitat			Preservation of	a certifie	d historic structure
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year.	a qualified conserv	ation cor	tribution in the	form of a	a conservation Held at the End of the Year
а	Total number of conservation easements				2a	
b	Total acreage restricted by conservation easements .				2b	
С	Number of conservation easements on a certified histo	ric structure includ	ed in (a)		2c	
d	Number of conservation easements included in (c) acquiristoric structure listed in the National Register				2d	
1	Number of conservation easements modified, transferred tax year ▶	red, released, extir	nguished,	or terminated l	by the or	ganization during the
ļ	Number of states where property subject to conservati	ion easement is lo	cated >			
5	Does the organization have a written policy regarding and enforcement of the conservation easements it hold				ng of viola	_ ations, ☐ Yes ☐ No
j	Staff and volunteer hours devoted to monitoring, inspe	ecting, handling of	violation	s, and enforcing	conserv	
,	Amount of expenses incurred in monitoring, inspecting \$ \\$, handling of viola	tions, an	d enforcing cons	servation	easements during the year
3	Does each conservation easement reported on line 2(c and section 170(h)(4)(B)(ii)?				170(h)(4)(B)(i) ☐ Yes ☐ No
)	In Part XIII, describe how the organization reports cor balance sheet, and include, if applicable, the text of th the organization's accounting for conservation easeme	e footnote to the c				
ar	t III Organizations Maintaining Collections Complete if the organization answered "Y				ther Si	milar Assets.
.a	If the organization elected, as permitted under FASB A historical treasures, or other similar assets held for pu Part XIII, the text of the footnote to its financial stater	blic exhibition, edu	ication, c	r research in fu		
b	If the organization elected, as permitted under FASB A historical treasures, or other similar assets held for pu following amounts relating to these items:					
(i) Revenue included on Form 990, Part VIII, line 1					▶ \$
	i)Assets included in Form 990, Part X					
2	If the organization received or held works of art, historical following amounts required to be reported under FASB	rical treasures, or o	other sim	ilar assets for fi		
а	Revenue included on Form 990, Part VIII, line 1					. ▶\$
b	Assets included in Form 990, Part X					
-	, assess meladed in Form 550, Fall A					• • • •

t III	Organizations Ma	aintaining Coll	ections of Art	, Histori	ical T	reası	ures, oi	r Other	Similar A	ssets (cont	inued)	
			, and other recor	ds, check	any of	the fo	ollowing t	hat are a	significant	use of its col	lection	
	Public exhibition			d		Loan	or exch	ange prog	ırams			
	Scholarly research			e		Othe	er					
	Preservation for future	e generations										
		organization's coll	ections and expla	in how th	ey furt	her th	e organiz	zation's e>	empt purpo	ose in		
										☐ Yes	□ N	0
rt IV	Complete if the or			orm 990), Part	IV, li	ine 9, o	r reporte	ed an amou	unt on Forr	n 990,	Part
										☐ Yes	□ N	o
If "Ye	s." explain the arrange	ement in Part XIII	and complete the	following	ı table:				Δ	mount		_
			•	_				1c				_
_	=							1d				_
								1e				_
	= -							1f				_
								ecount li-	hility2			_
	-									_	□ N	O
			Check here if the	e explanat	ion nas	s been	provide	d in Part 2	(111			
ILV			ered "Yes" on F	orm 990), Part	IV. li	ine 10.					
	· · · · · · · · · · · · · · · · · · ·		(a) Current year					ears back	(d) Three ye	ars back (e)	Four yea	rs back
Beginni	ng of year balance .		1,089,50)5	98	5,890		930,684		537,606		607,061
Contrib	utions									300,000		25
Net inv	estment earnings, gair	ns, and losses	-112,41	L7	156	5,901		105,627		125,115		-38,193
Grants	or scholarships	•	49,59	99	4.	5,458		43,872		24,472		25,882
		es										
Adminis	strative expenses .		7,21	L5	-	7,827		6,549		7,565		5,405
End of	year balance		920,27	74	1,089	9,506		985,890		930,684		537,606
Provid	e the estimated perce	ntage of the curre	nt year end balan	ice (line 1	.g, colu	mn (a	i)) held a	s:				
Board	designated or quasi-e	ndowment ►										
Perma	nent endowment ►	100.000 %										
Term												
The pe	ercentages on lines 2a	, 2b, and 2c shoul	ld equal 100%.									
		not in the possess	sion of the organi	zation tha	it are h	eld ar	nd admin	istered fo	r the		Yes	No
-	•									3a(i)	Yes	
(ii) Re	elated organizations									3a(ii)		No
If "Yes	s" on 3a(ii), are the re	lated organization	s listed as require	ed on Sche	edule R	. ?				3b		
Descri				dowment	funds.							
rt VI						T) (000 -			
Descrir												e
Descrip	odon of property			ost or other	i nasis (ouiei)	(C) ACC	umulated C	iepi eciation	(u) E	ook valu	C
Land .					2,3	47,548					2	2,347,548
Building	gs				2,4	67,514			896,332		1	,571,182
Leaseho	old improvements											
Equipm	ent				9	60,969			844,343			116,626
	Using items Using items Provide Part X During assets TIV Is the including Did the Including Did the Incurrence of Incurrence	Using the organization's acq items (check all that apply): Public exhibition Scholarly research Preservation for future Provide a description of the Part XIII. During the year, did the orgassets to be sold to raise fur Complete if the on X, line 21. Is the organization an agent included on Form 990, Part included in Form 990, Part included included in Form 990, Part included in Form 990, Par	Using the organization's acquisition, accession items (check all that apply): Public exhibition Scholarly research Preservation for future generations Provide a description of the organization solicit or assets to be sold to raise funds rather than to assets to be sold to raise funds rather than to the organization answ X, line 21. Is the organization an agent, trustee, custodial included on Form 990, Part X? If "Yes," explain the arrangement in Part XIII Beginning balance . Additions during the year . Distributions during the year . Ending balance . Did the organization include an amount on Fo If "Yes," explain the arrangement in Part XIII. **T** **Endowment Funds**. Complete if the organization answ Beginning of year balance . Contributions . Net investment earnings, gains, and losses Grants or scholarships . Other expenditures for facilities and programs . Administrative expenses . End of year balance . Provide the estimated percentage of the curre Board designated or quasi-endowment Permanent endowment Permanent endowment programs . Administrative expenses . End of year balance . Provide the estimated percentage of the curre Board designated or quasi-endowment Permanent endowment programs . Administrative expenses . End of year balance . Provide the estimated percentage of the curre Board designated or quasi-endowment Permanent endowment programs in the possess organization by: (i) Unrelated organizations . (ii) Related organizations . (ii) Related organizations . (iii) Related organizations . If "Yes" on 3a(ii), are the related organization Describe in Part XIII the intended uses of the town programs and programs of the program of the pr	Using the organization's acquisition, accession, and other reconitems (check all that apply): Public exhibition Scholarly research Preservation for future generations Provide a description of the organization's collections and explanate XIII. During the year, did the organization solicit or receive donation assets to be sold to raise funds rather than to be maintained as X, line 21. Is the organization an agent, trustee, custodian or other intermincluded on Form 990, Part X? If "Yes," explain the arrangement in Part XIII and complete the Beginning balance	Using the organization's acquisition, accession, and other records, check items (check all that apply):	Using the organization's acquisition, accession, and other records, check any of items (check all that apply): Public exhibition	Using the organization's acquisition, accession, and other records, check any of the fitters (check all that apply): Public exhibition	Using the organization's acquisition, accession, and other records, check any of the following titems (check all that apply): Public exhibition	Using the organization's acquisition, accession, and other records, check any of the following that are a terms (check all that apply): Public exhibition	Using the organization's acquisition, accession, and other records, check any of the following that are a significant items (check all that apply): Public exhibition	Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collemens (check all that apply): Public exhibition	Using the arganization's acquisition, accession, and other records, check any of the following that are a significant use of its collection hemse (check all that apoly):

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

4,035,356

Part VII	Investments - Other Securities.					
	Complete if the organization answered "Yes" on Form 990 (a) Description of security or category), Part IV (b)		orm 990, Par (c) Method o		
	(including name of security)	Book	< Cos	st or end-of-ye		
	l derivatives					
	held equity interests					
(A)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
(H)						
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 12.)	•				
Part VIII	Investments - Program Related. Complete if the organization answered 'Yes' on Form 990) Part I\/	line 11c See F	orm 990 Pa	rt X line	13
	(a) Description of investment	, Pait IV	(b) Book value	(c) N	1ethod of v	aluation:
(1)				Cost or e	nd-of-year	market value
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
Total. (Colum Part IX	n (b) must equal Form 990, Part X, col.(B) line 13.) Other Assets.	<u> </u>				
	Complete if the organization answered 'Yes' on Form 990	, Part IV,	line 11d. See Fo	rm 990, Part >		taale valua
	(a) Description				(D) E	3ook value 1,898,151
(2)MORTGA (3)	GES RECEIVABLE					313,910
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
	mn (b) must equal Form 990, Part X, col.(B) line 15.)			•		2,212,061
Part X	Other Liabilities.			•		
1.	Complete if the organization answered 'Yes' on Form 990 (a) Description of liabi		line 11e or 11f.	See Form 99	00, Part X	(b) Book value
(1) Federal	income taxes					
(2)						-
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	n (b) must equal Form 990, Part X, col.(B) line 25.)					<u> </u>
•	or uncertain tax positions. In Part XIII, provide the text of the footi		=			. —

1

2

а

b

c

b

C 5

1

2

b

C

d

е 3

b

Part XIII

See Additional Data Table

4

5

Part XII

Schedule D (Form 990) 2022

Page 4

234,692

2,353,641

2,353,641

2,801,613

234,692

2,566,921

2.566.921

Schedule D (Form 990) 2022

Add lines **4a** and **4b**

Donated services and use of facilities . . .

Prior year adjustments

Subtract line 2e from line 1

Other (Describe in Part XIII.) . .

Add lines 2a through 2d .

Return Reference

Amounts included on line 1 but not on Form 990, Part VIII, line 12:

Net unrealized gains (losses) on investments

Investment expenses not included on Form 990, Part VIII, line 7b .

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)

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

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part

Total expenses and losses per audited financial statements

Amounts included on line 1 but not on Form 990, Part IX, line 25:

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . .

Add lines **4a** and **4b**

Supplemental Information

Donated services and use of facilities

2c 2d

2a

2b

4a

4b

2a

2b

2c

2d

4a 4b

Explanation

192,692

42,000

42,000

192,692

2e

3

4c

5

2e 3 4c 5 Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

chedule D (Form 990) 2022		Page 5		
Part XIII Supplemental Info	ormation (continued)			
Return Reference	Explanation			

Schedule D (Form 990) 2022

Additional Data

Software ID: Software Version:

EIN: 59-3330495

Name: BIG CAT RESCUE CORP

LINE 4

Return Reference

Supplemental Information

Explanation SCHEDULE D, PAGE 2, PART V, ENDOWMENT FUNDS ARE INTENDED TO PROVIDE INVESTMENT INCOME FOR LONG TERM CARE OF THE CATS

upplemental Information				
Return Reference	Explanation			
SCHEDULE D, PAGE 4, PART XI, LINE 2D	RENTAL EXPENSES NETTED WITH REVENUE 192,692			

Sι

upplemental Information					
Return Reference	Explanation				
SCHEDULE D, PAGE 4, PART XII, LINE 2D	RENTAL EXPENSES NETTED WITH REVENUE 192,692				

Sι

	HEDULE F State	Statement of Activities Outside the United States				OMB No. 1545-0047	
(Form 990)		omplete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.				2022	
		► Go to www ire a		to Form 990. nstructions and the latest in	oformation.	Open to Public	
	ment of the Treasury al Revenue Service	e do to www.iis.g	100/101111990 101 1	normation.	Inspection		
	e of the organization CAT RESCUE CORP				Employer ide	entification number	
DIG (LAT RESCUE CORP				59-3330495		
Pa	General Information Form 990, Part IV, line		Outside the U	Jnited States. Comple	te if the organization	answered "Yes" on	
1	For grantmakers. Does the o	rganization mai	ntain records to	substantiate the amount	of its grants and		
	other assistance, the grantees'	,	-	•			
	to award the grants or assistar	nce?				🗹 Yes 🗌 No	
2	For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.						
3	Activites per Region. (The followi	ng Part I, line 3 t	able can be dupli	cated if additional space is	needed.)		
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is program service, describe specific type of service(s) in the region		
(1)	See Add'l Data			,			
(2)							
(3)							
(4)							
(5)							
	Sub-total					89,700	
	Total from continuation sheets to Part I						

(1)	TIGER PRESERVATION	9,500		
(2)	TIGER RESCUE	10,000		
(3)	COMBAT WILDLIEF	8 600		

Schedule F (Form 990) 2022

(3) COMBA! WILDLIFE 8,600 CRIM (4)

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

Schedule F (Form 990) 2022

Page 2

(17) (18)

Part IIII Grants and Othe	ier Assistance	to Individuals /	Outside the Unit	ed States. Complete if	the organization ar	nswered "Yes" on Form 9	90, Part IV, line 16.
Part III can be du				·	-		•
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) See Add'l Data				1			
(2)		+ +		+			
(3)		+					
(4)		+					
(5)							
(6)							
(7)				1			
(8)							
(9)		1					[
(10)		+					[
(11)							
(12)							[
(13)							
(14)		+ +		†			

(= -,			
(11)			
(12)			
(13)			
(14)			
(15)			
(16)			

Sched	lule F (Form 990) 2022		Page 4
Par	TIV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	✓ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621).	Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).	Yes	✓ No

	Schedule F (Form 99	00) 2022 Page 5	
Part V Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting manual amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to part any additional information. See instructions. Pature Paterness Figure Paterness			
	Return Reference	Explanation	
PAGE 1, PART I,		OUR GRANTS ARE MADE TO SUPPORT SPECIFIC FUNDRAISING NEEDS OF CHARITABLE ORGANIZATIONS SUPPORTING ANIMALS OR TO SUPPORT THE OVERALL MISSION OF THOSE ORGANIZATIONS. FOR GRANTS OVER 1,000, WE RESEARCH THE ORGANIZATION BEFORE MAKING THE DONATION TO ENSURE THAT THE ORGANIZATION'S PURPOSE OVERLAPS WITH OUR	

CHARITABLE MISSION.

Return Reference	Explanation
SCHEDULE F, PAGE 1, PART I, LINE	SOUTH ASIA 18,500 0 CENTRAL AMERICA 5,000 0 SOUTH AMERICA 28,100 0 SOUTHEAST ASIA 23,600 0 AFRICA
3	14,500 0

Additional Data

CENTRAL AMERICA

Software ID: Software Version:

EIN: 59-3330495

Name: BIG CAT RESCUE CORP

MARGAY PRESERVATION

5,000

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SOUTH ASIA			GRANTS TO RECIPIENTS	MARBLED CAT, TIGER	18,500

GRANTS TO RECIPIENTS

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) GRANTS TO RECIPIENTS PAMPAS CATS 28,100 SOUTH AMERICA SOUTHEAST ASIA GRANTS TO RECIPIENTS TIGER PRESERVATION 23,600

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of reaion agents in fundraising, program service(s) in region services, grants to reaion recipients located in the reaion) AFRICA GRANTS TO RECIPIENTS GOLDEN CAT PRES 14,500

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (a) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) GRANTS TO 28,100 ISOUTH INDIVIDUALS AMERICA GRANTS TO 5,000 CENTRAL INDIVIDUALS IAMERICA

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (d) Amount of (e) Manner of cash (f) Amount of (a) Description of (h) Method of (c)Number assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) GRANTS TO 13,500 IAFRICA INDIVIDUALS GRANTS TO 5.000 ISOUTHEAST INDIVIDUALS IASIA

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (c)Number (d) Amount of (e) Manner of cash (f) Amount of (h) Method of (a) Type of grant or (b) Region (a) Description of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) GRANTS TO 9,000 ISOUTH ASIA INDIVIDUALS

Open to Public Department of the Treasury Attach to Form 990 or Form 990-EZ. Inspection Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization **Employer identification number** BIG CAT RESCUE CORP 59-3330495 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations e Solicitation of non-government grants Internet and email solicitations ☐ Solicitation of government grants Phone solicitations ☐ Special fundraising events ☐ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (i) Name and address of individual (ii) Activity (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to or entity (fundraiser) fundraiser have from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col. (i) contributions? Yes No 1 8 10

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or

Supplemental Information Regarding

Fundraising or Gaming Activities

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

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

SCHEDULE G

licensing.

(Form 990)

DLN: 93493113002033 OMB No. 1545-0047

	dule G (Form 990) 2022 rt III Fundraising Events. Comple	ete if the organization a	answered "Yes" on Fori	m 990. Part IV. line 18	Page 2 3. or reported more
	than \$15,000 of fundraising e gross receipts greater than \$	event contributions and			
	gross receipts greater than \$	(a)Event #1	(b) Event #2	(c)Other events	(d) Total events (add col. (a) through
		(event type)	(event type)	(total number)	col. (c))
Revenue		(croite dype)	(crailed, per	(cca named)	
	1 Gross receipts	49,568			49,568
	·	·			
	2 Less: Contributions	3,464 46,104			3,464 46,104
	4 Cash prizes				
	5 Noncash prizes				
Ses	6 Rent/facility costs				
Direct Expenses	7 Food and beverages				
р Ш	8 Entertainment				
Dire	9 Other direct expenses	1,362			1,362
	10 Direct expense summary. Add lines 4	through 9 in column (d)		>	1,362
	11 Net income summary. Subtract line 10	from line 3, column (d)			44,742
Par	Gaming. Complete if the org on Form 990-EZ, line 6a.	anization answered "Ye	s" on Form 990, Part I	V, line 19, or reported	more than \$15,000
Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
2	1 Gross revenue				
nses	2 Cash prizes				
<u>~</u>	3 Noncash prizes				
Direct Expense	4 Rent/facility costs				
al					
	5 Other direct expenses				
	5 Other direct expenses	☐ Yes %	☐ Yes %	☐ Yes %	
	5 Other direct expenses	☐ Yes%	☐ Yes % No	☐ Yes % ☐ No	
		□ No		l <u> </u>	
	6 Volunteer labor	No	□ No	□ No ►	
9	 6 Volunteer labor 7 Direct expense summary. Add lines 2 8 Net gaming income summary. Subtract Enter the state(s) in which the organization. 	through 5 in column (d) It line 7 from line 1, colum It conducts gaming activition	No	□ No ▶ ▶	□ Vac □ Na
9 a b	6 Volunteer labor	through 5 in column (d) It line 7 from line 1, column It conducts gaming activities in each of	No n (d)	No	☐ Yes ☐ No
9 a	6 Volunteer labor	through 5 in column (d) t line 7 from line 1, colum ion conducts gaming activi aming activities in each of	No n (d)	No	
9 a b	6 Volunteer labor	through 5 in column (d) It line 7 from line 1, column It line 3 from line 1, column It line 4 from line 1, column It line 5 from line 1, column It line 6 from line 1, column It line 7 from line 1, column It line 7 from line 1, column It line 8 from line 1, column It line 8 from line 1, column It line 9 from line 1, column It lin	No n (d)	No	

Sche	dule G (Form 990) 2022							Page 3
11	Does the organization conduct gaming	activities with nonmemb	pers?			☐ Yes	Пио	
12	Is the organization a grantor, beneficial formed to administer charitable gamine		or a member of a partnership or other	entity 		□Yes		
13	Indicate the percentage of gaming acti	vity conducted in:						
а	The organization's facility				13a			%
b	An outside facility				13b			%
14	Enter the name and address of the per	son who prepares the or	rganization's gaming/special events bo	oks and r	ecords:			
	Name ►							
45-	Address >							
15a	Does the organization have a contract revenue?		whom the organization receives gaming			□ v	Пы	
b	If "Yes," enter the amount of gaming r	evenue received by the	organization 🕨 \$	and tl	he	⊔ Yes	□ NO	
	amount of gaming revenue retained by							
С	If "Yes," enter name and address of the	e third party:						
	Name ►							
	Address >							
16	Gaming manager information:							
	Name ▶							
	Gaming manager compensation ► \$							
	Description of services provided ►							
	☐ Director/officer	☐ Employee	☐ Independent contrac	tor				
17	Mandatory distributions:							
а	Is the organization required under state retain the state gaming license? .		- - ·	ds to 		☐Yes	Пис	
b	Enter the amount of distributions requi	red under state law dist	ributed to other exempt organizations	or spent		L les		
	in the organization's own exempt activ							
Pai			nations required by Part I, line 2b pplicable. Also provide any addition					s.
	Return Reference		Explanation					

efile GRAPHIC print - DO	NOT PROCESS	As Filed Data -					DLI	N: 93493113002033
Note: To capture the full c	ontent of this do	ocument, please se	lect landscape mode	e (11" x 8.5") whe	en printing.			MR No. 1545 0047
Schedule I		Grants and C	ther Assistanc	e to Organiz	ations.			MB No. 1545-0047
(Form 990)	(and Individuals		•			2022
			tion answered "Yes," o	on Form 990, Part IV				Open to Public
Department of the Treasury		Inspection						
Internal Revenue Service Name of the organization							Employer identific	ation number
BIG CAT RESCUE CORP							59-3330495	acion number
Part I General Inform	ation on Grants	and Assistance					39-3330493	
1 Does the organization main			he grants or assistance t	the grantees' eligibility	for the grants or assistant	ce and		
the selection criteria used t						cc, and		☑ Yes ☐ No
2 Describe in Part IV the orga	anization's procedur	es for monitoring the us	e of grant funds in the Un	ited States.				
		estic Organizations ar can be duplicated if add		nts. Complete if the o	rganization answered "Yes	" on Forn	n 990, Part IV, line	21, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)		Description of cash assistance	(h) Purpose of grant or assistance
(1) SHELDRICK WILDLIFE TRUST USA 25283 CABOT RD SUITE 101 LAGUNA HILLS, CA 92653	30-0224549	501C3	8,600					PROTECT HABITAT
(2) KARNER BLUE CENTER FOR HUMANE ECONOMY PO BOX 30845 BETHESDA, MD 20824	83-2620507	501C3	300,000					ECONOMIC ORDER
2 Enter total number of section	on 501(c)(3) and go	vernment organizations	listed in the line 1 table .				▶	15
3 Enter total number of other	organizations listed	d in the line 1 table . .	<u> </u>	<u> </u>	<u> </u>	<u>.</u>	>	
For Paperwork Reduction Act Notic	e. see the Instruction	ns for Form 990		Cat No. 50055	5P		Sch	edule I (Form 990) 2022

Page **2**

Schedule I (Form 990) 2022

(2) (3)

(4)

(5) (6)

(7)

RECEIVE REPORTS FROM THE ORGANIZATION ON THE PROGRESS OF THE PROJECTS WE FUND.

Schedule I (Form 990) 2022

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

Part IV Explanation

Return Reference SCHEDULE I, PAGE 1, PART I, LINE OUR GRANTS ARE MADE TO SUPPORT IN SITU CONSERVATION WORK DIRECTLY RELATED TO PRESERVING BIG CATS IN THE WILD. WE RESEARCH THE

ORGANIZATION BEFORE MAKING THE DONATION TO ENSURE THAT THE ORGANIZATION'S WORK IS CONSISTENT WITH OUR PHILOSOPHY AND MISSION AND WE

efile GRAPHIC	print	- DO NO	T PROCES	S As I	Filed Data -					DL	.N: 93	4931	130	02033
Schedule L (Form 990)	,	• Complet				terested Persons on Form 990, Part IV, lines 25a, 25b, 26,						MB No.		
,	'	Complet		28b, or 2	28c, or Form 99	0-EZ, Part V	, line 38a or 4		.Ja, 2	250, 20	,	20	Z	L
Department of the Trea Internal Revenue Servi	* 1	►G	io to <u>www.ii</u>		ach to Form 996 <u>rm990</u> for inst			forma	tion.		(Open (Insp		
Name of the orga		ı						Er	mplo	yer ide	entifica	ation n		
										0495				
					1(c)(3), section ! Form 990, Part				_					
			fied person		Relationship be					Descript		_) Cor	rected?
• (-)	,		,			organization				ansacti			es	No
								_						
								+						
2 Enter the an	nount of	tax incurr	ed by the ord	ganization	managers or dis	qualified pers	ons during the	year ı	under	section	n	I		
										•	\$			
3 Enter the an	nount of	tax, if any	y, on line 2, a	above, rein	nbursed by the c	organization .		•	•		\$			
Com	nplete if	the organi	From Inter zation answe n Form 990, l	red "Yes"	on Form 990-EZ	, Part V, line 3	38a, or Form 99	90, Pa	rt IV,	line 26	; or if	the org	aniza	tion
(a) Name of					to or from the	(e) Original	(f) Balance	(g)) In	(h)	(i) Wri	tten
interested person					anization?	principal	due		ult?	Appro	ved by		agreement?	
						amount				1	rd or nittee?			
				То	From	1		Yes	No	Yes	No	Yes		No
Total .					<u>.</u>	<u> </u>			<u> </u>		<u> </u>			
	nts or	Assistan	ce Benefit	ing Inte	rested Perso									
Com	plete if	f the orga	nization an	swered "	Yes" on Form 9	990, Part IV,	, line 27.							
(a) Name of inter	ested pe) Relationship erested perso		(c) Amount	of assistance	(d) Type	of assi	istano	e	(e) Pu	rpose o	f ass	stance
			organizat											
							+							
					+		1			\dashv				
For Paperwork Red	uction A	ct Notice, s	ee the Instru	ctions for F	orm 990 or 990-l	EZ. C	at. No. 50056A				Schedu	ile L (Fo	orm 9	90) 2022

	organization		reve	nues?
			Yes	No
(1) CAROLE BASKIN	CEO	EMPLOYEE		No
(2) JAMIE MURDOCK	DAUGHTER OF CEO	EMPLOYEE		No
(3) HOWARD BASKIN	HUSBAND OF CEO	EMPL OYEE		No

(2) JAMIE MURDOCK	DAUGHTER OF CEO	EMPLOYEE	No
(3) HOWARD BASKIN	HUSBAND OF CEO	EMPLOYEE	No
(4) KATIE NIKIC	NIECE OF CEO	EMPLOYEE	No

Explanation

Schedule I (Form 990) 2022

Provide additional information for responses to questions on Schedule L (see instructions).

Part V Supplemental Information

Return Reference

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493113002033 SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) 2022 ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** BIG CAT RESCUE CORP 59-3330495 Part I **Types of Property** (d) (a) (b) (c) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art—Works of art . . 2 Art—Historical treasures 3 Art—Fractional interests 4 Books and publications 5 Clothing and household aoods Cars and other vehicles 7 Boats and planes . . 8 Intellectual property . . . Securities—Publicly traded . 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests . . . 53,069 CRYPTO, QUOTED VALUE 12 Securities—Miscellaneous . . Χ 4 13 Qualified conservation contribution—Historic structures **14** Qualified conservation contribution—Other . Real estate—Residential . 16 Real estate—Commercial . 17 Real estate—Other . . Collectibles . . . 18 19 Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts . 23 Scientific specimens . 24 Archeological artifacts . . 25 Other ▶ (______) Other ▶ (______) 26 Other ► (______) 27 Other ▶ (______) 28 29 Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? . No 30a **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Νo 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a No **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) (2022) Cat. No. 51227J

Schedule M (Form 990) (2022)	Page 2
	tion. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization
is reporting in Part I, colu complete this part for any	ımn (b), the number of contributions, the number of items received, or a combination of both. Also y additional information.
Return Reference	Explanation
	Schedule M (Form 990) (2022)

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 934931130020					93493113002033	
SCHEDULE O (Form 990) Department of the Treasury Internal Revenue Service		Complete to pro Form 990 o	vide information fo r 990-EZ or to prov ▶ Attach to Forn	on to Form 990 or 9 r responses to specific quest ide any additional information n 990 or 990-EZ. 90 for the latest information	ions on on.	OMB No. 1545-0047 202 Open to Public Inspection
Name of the org BIG CAT RESCUE					Employer identi	fication number
990 Schedul	e O, Supp	lemental Informatio	n			
Return Reference				Explanation		
FORM 990, PAGE 2, PART III, LINE 4B	IGHT OF APPROXI ISITORS EDUCATI APPROXI GO TO O IPIENTS. HAVE RE RS AT YE NUED TO BIG CAT ONLINE A FEDERAL LEADING PRIVATE	THE BIG CATS IN CAPTIV MATELY 30,000 VISITOR OTHER THAN A LIMITED E ABOUT THESE ISSUES MATELY 1 MILLION VISIT VER 90,000 RECIPIENTS OUR YOUTUBE CHANNE CEIVED OVER 638 MILLI FAR END, OVER 300,000 OSUCCESSFULLY URGE EXHIBITS ON SITE AND IND PRINT ADS. OUR MO IND PRINT ADS. OUR MO IND BIG CAT PUBLIC SAFET THE EFFORT TO GET IT OWNERSHIP OF BIG CA	VITY AND IN THE WIS DURING THE YEAN NUMBER OF SMALL AND ADVOCATE FOR DURING THE YEAR DURING THE YEAR DURING THE YEAR DURING THE YEAR DURING AND COMPETED OF THE STAND LAW OF PASSED. THE BILL TS BY THOSE WHO	MED ITS ADVOCACY MISSION LD THROUGH GUIDED TOUR: R. DUE TO COVID THE SANC L TOURS FOR DONORS. THE DR LEGISLATION THROUGH I' YEAR, THROUGH EMAILS NO PRINT NEWSLETTER THAT G HAS 1.3 MILLION SUBSCRIBER EWS. WE HAD OVER 3.6 MILL VITTER, AND OVER 175,000 OF ATORS OF VENUES NOT TO A SERS NOT TO USE BIG CATS I DVOCACY ACCOMPLISHMENT N DECEMBER 20, 2022 AFTER ENDS THE ABUSIVE CUB PET ARE NOT USDA LICENSED E: D IN CAPTIVITY IN THIS COUN	S OF THE SANCTU TUARY WAS CLOS SANCTUARY CON TS WEBSITE THAT LESS THAN MON' GOES TO OVER 3, RS AND OUR VIDE ION FACEBOOK F N INSTAGRAM. W ALLOW CUB PETT N THEIR TELEVIS T WAS THE PASS R OVER A DECADE ITING AND PAHSI XHIBITORS. WE B	JARY TO SED TO V ITINUED TO I RECEIVED THLY THAT 400 REC OS THERE FOLLOWE E CONTI TING OR OTHER ION, AGE OF THE E OF OUR ES OUT

990 Schedule O, Supplemental Information

Return Explanation

Deference

Reference	
FORM 990,	JAMIE MURDOCK CAROLE BASKIN PRESIDENT CEO DAUGHTER HOWARD BASKIN CAROLE BASKIN SECTY/TREAS CEO
PAGE 6,	SPOUSE
PART VI,	
LINE 2	

Return Explanation

FORM 990, PAGE 6, PART VI, LINE 11B

Return Explanation

FORM 990,	THE TREASURER REVIEWS THE DETAIL TRIAL BALANCE SHOWING PAYMENTS TO ALL VENDORS AND AT THE
PAGE 6,	BOARD MEETING WHERE THE 990 IS REVIEWED ASKS THE CEO AND DIRECTORS IF THEY HAVE ENGAGED IN
PART VI,	ANY CONTRACTS, TRANSACTIONS OR RELATIONSHIPS THAT COULD GIVE RISE TO A CONFLICT OF INTERE
LINE 12C	ST OR THE APPEARANCE OF A CONFLICT OF INTEREST.

Return Explanation

FORM 990, PAGE 6, GATHERED AT LEAST EVERY THREE YEARS AND REVIEWED BY THE BOARD OF DIRECTORS.

PART VI.

990 Schedule O, Supplemental Information

LINE 15A

Return Explanation

LINE 15B

FORM 990,	EXECUTIVE SALARIES OF OTHER WELL REGARDED SANCTUARIES AS REPORTED IN THEIR FORM 990'S ARE
PAGE 6,	GATHERED AT LEAST EVERY THREE YEARS AND REVIEWED BY THE BOARD OF DIRECTORS.
PART VI.	

Return Explanation
Reference

FORM 990, PAGE 6, PART VI, LINE 17

Return Explanation
Reference

FORM 990,	THE AUDITED FINANCIAL STATEMENTS, FORM 990 AND CONFLICT OF INTEREST POLICY ARE ALL PUBLISH
PAGE 6,	ED ON THE WEBSITE WWW.BIGCATRESCUE.ORG. THE ARTICLES OF INCORPORATION AND BY-LAWS ARE AVAI
PART VI,	LABLE UPON REQUEST. THE FORM 990 IS ALSO AVAILABLE ON THE WEBSITES, GUIDESTAR.ORG AND CHAR
LINE 19	ITYNAVIGATOR.ORG.

Return Explanation
Reference

FORM 990, PART XI, LINE 9