# 990 **990**

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

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ 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.

mer	nai Reveni	ue Service	Go to www.irs.go	ov/Form990 for instruction	is and the late	st imormat	ion.		inspection		
Α	For the	2021 calend	dar year, or tax year beginning	01/01/2021	and ending		12/31/ <u>2</u>	021			
В	Check if a	applicable:	C Name of organization VANDER	PUMP DOG FOUNDATION				D Employe	er identification number		
П	Address of	change	Doing business as				i		81-1263828		
$\overline{\Box}$	Name cha	•	Number and street (or P.O. box if	mail is not delivered to street a	ddress)	Room/suite		<b>E</b> Telephor	ne number		
	Initial retu	•	8134 WEST THIRD STREET		,				323-852-3647		
H		n/terminated	City or town, state or province, co	ountry, and ZIP or foreign posta	l code						
H	Amended		LOS ANGELES, CA 90048					<b>G</b> Gross re	eceipts \$ 1,355,130		
H		on pending	F Name and address of principal offi	icer: Ken Todd		H(a)	this a gro				
ш	Applicatio	ni pending	9550 Oak Pass Road, Beverly				Is this a group return for subordinates? Yes N Are all subordinates included? Yes N				
	Tax-exem	nnt etatue:	501(c)(3) 501(c) (		(a)(1) or 527						
_			anderpumpdogs.org	) 1 (1113611110.)	(4)(1) 01 021			ch a list. See instructions. exemption number ▶			
	-			tion Other ►	I Vacuation			•			
	art I			tion Utner >	L Year of for	mation: 20	016	M State of	legal domicile: CA		
		Summa	-	·	- 41 141						
•	l .		cribe the organization's missi								
õ	_		otection of dogs and prevention	n of cruelty towards dogs	The Corporat	ion will und	lertake	the activ	ities of raising		
'na	_	. 2	d on Schedule O, Statement 2)								
Activities & Governance			box ► ☐ if the organization	•	•	ed of more	than 2	1 1	s net assets.		
ဗိ			voting members of the gove					3	6		
φ	4 1	Number of	findependent voting member	rs of the governing body	(Part VI, line	1b)		4	2		
ţį	5	Total numb	oer of individuals employed ir	n calendar year 2021 (Pa	rt V, line 2a)			5	22		
₹	6	Total numb	per of volunteers (estimate if r	necessary)				6	40		
Ac	7a ¯	Total unrel	ated business revenue from F	Part VIII, column (C), line	12			7a	0		
	l d	Net unrelat	ted business taxable income	from Form 990-T, Part I,	line 11			7b	0		
						Pri	ior Year		Current Year		
4	8 (	Contributio	ons and grants (Part VIII, line	1h)			40	68,919	628,357		
ž	l .		ervice revenue (Part VIII, line					36,746	326,828		
Revenue		_	t income (Part VIII, column (A)					0	0		
æ	l .		nue (Part VIII, column (A), line				20	94,791	251,423		
	l .		nue-add lines 8 through 11 (m		-						
			d similar amounts paid (Part I)	· · · · · · · · · · · · · · · · · · ·		_	1,00	00,456	1,206,608		
				0							
	l .	-	aid to or for members (Part IX					0	0		
Expenses	l .		ther compensation, employee b				2	55,005	369,066		
e	l .		al fundraising fees (Part IX, co					0	0		
χ̈			raising expenses (Part IX, colu		0						
ш	l .	-	enses (Part IX, column (A), line	·			6	69,924	826,027		
	l .	-	nses. Add lines 13–17 (must				9:	24,929	1,195,093		
		Revenue le	ess expenses. Subtract line 1	8 from line 12				75,527	11,515		
Net Assets or Fund Balances						Beginning	of Curre	ent Year	End of Year		
sets alar	20	Total asset	ts (Part X, line 16)				4:	28,418	639,765		
t AS	21	Total liabili	ities (Part X, line 26)					22,429	222,261		
울춘	22	Net assets	or fund balances. Subtract li	ine 21 from line 20 .			40	05,989	417,504		
Pá	art II	Signatu	re Block								
			, I declare that I have examined this r						knowledge and belief, it is		
tru	e, correct,	and complet	e. Declaration of preparer (other than	officer) is based on all informat	ion of which prep	arer has any l	knowled	ge.			
		<b>\</b>									
Sig	gn	Signat	ure of officer				Date				
-	ere	John	Sessa, Treasurer								
			or print name and title								
_		<del>'</del>	e preparer's name	Preparer's signature		Date		Chast:	if PTIN		
	id	1	ppa. o. o namo					Check self-emplo	"		
Pr	eparer	• -					F	•	,		
Us	e Only	Firm's nar		Firm's EIN ▶							
		Firm's add					Phone	no.			
Νla	v the IRS	S discuss :	this return with the preparer s	snown above? See instru	ictions				. □Yes □No		

Form 990 (2021) Page **2** 

Part	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
•	The specific purpose of the Corporation shall include protection of dogs and prevention of cruelty towards dogs. The Corporation
	will undertake the activities of raising donations and funds from donors, which will be used to rescue, rehabilitate and rehome dogs,
	both domestically and internationally, as well as to fund their medical care, vaccinations, spay and neuter.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
3	If "Yes," describe these new services on Schedule O.  Did the organization cease conducting, or make significant changes in how it conducts, any program
Ū	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
40	/Code: \/Evpanges \\( \( \) \/Evpanges \\( \) \/
4a	(Code: ) (Expenses \$ 25,141 including grants of \$ ) (Revenue \$ 31,693 )  Adoption Services
4b	(Code:) (Expenses \$ 80,327 including grants of \$) (Revenue \$ 222,607 )
	Grooming Services - Conducted Exams, Hospital Bills and Grooming Services for helping dogs to be healthy and ready for
	adoption. All dogs rescued are provided medical treatment and grooming services prior to adoption. Revenue is derived from adoption fees of rescued dogs and grooming fees from dogs brought in by general public.
	ausprior 1805 of 1855aca augus and groot man augus brought may general passio.
4c	(Code:) (Expenses \$43,054 including grants of \$) (Revenue \$72,528 )
	Product Services - Sold Pet Products to General Public including dog food, toys, treats, clothing, collars, leashes, etc.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)
46	Total program service expenses 148 522

	<u>90 (2021)</u>		F	Page
art	Checklist of Required Schedules		V	N.
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
2	complete Schedule A	2	<b>V</b>	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," complete Schedule C, Part I	3		~
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4	~	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		,
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		,
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		,
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		~
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If</i> "Yes," <i>complete Schedule D, Part IV</i>	9		~
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V </i>	10		,
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	~	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		,
С.	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		,
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i>	11d		~
e f	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> 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)? <i>If "Yes," complete Schedule D, Part X</i>	11e	<i>\</i>	~
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		/
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		,
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 14a	~	~
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV			
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV </i>	14b		<i>\</i>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	15 16		\( \tau \)
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		,
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	~	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		_
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
b 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . 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	20b 21		.,
	as satisfies and are in a constant in a c	41		~

Part	V 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		>
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? If "Yes," complete Schedule J			
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	23		<i>\</i>
	through 24d and complete Schedule K. If "No," go to line 25a	24a		~
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		٧
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? <i>If "Yes," complete Schedule L, Part II</i>	26		\ \ \
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? If "Yes," complete Schedule L, Part III	27		<b>V</b>
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? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28a		~
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		~
С	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	~	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		~
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30		>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		/
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		/
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		>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
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	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," <i>complete Schedule R, Part V, line</i> 2	36		>
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	37		~
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O	38	~	
Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable   1a   0			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
C	reportable gaming (gambling) winnings to prize winners?	1c		~

Part '	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
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 2a 22			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O .	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		~
b	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).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		V
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b 5c		~
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	<u> </u>		
- Ju	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		\ \rac{1}{2}
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			<u> </u>
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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	/	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	~	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c	~	
	If "Yes," indicate the number of Forms 8282 filed during the year	_		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		V
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7f 7g		V
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 <u>9</u> 7h		~
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	711		
	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:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
a b	Gross income from members or shareholders			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b			
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		
	Note: See the instructions for additional information the organization must report on Schedule O.			
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			
	Enter the amount of reserves on hand	44-		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		-
b 15	Is the organization subject to the section 4960 tax on payments? If No, provide an explanation on Schedule O.	140		
	excess parachute payment(s) during the year?	15		1
	If "Yes," see the instructions and file Form 4720, Schedule N.	-10		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		~
•	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

Form 990 (2021) Page **6** 

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

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Section 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 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 on Schedule O. Enter the number of voting members included on line 1a, above, who are independent . 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 V Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, trustees, or key employees to a management company or other person? . 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O . . . . . Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No **10a** Did the organization have local chapters, branches, or affiliates? 10a 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 **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? *If "No," go to line 13* 12a 1 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 Did the organization have a written document retention and destruction policy? 14 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official . . . . . . 15a Other officers or key employees of the organization . . . . . . . . . . . . . . . 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a / 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► CA, NY 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ✓ Own website Other (explain on Schedule O) Another's website ☐ Upon request Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 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 ▶ Ken Todd, (310)871-3515

Part VI

Form 990 (2021) Page **7** 

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

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

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

☐ Check this box if neither the organization no	r any relate	d org	aniz	atio	n c	ompe	nsa	ated any current	officer, director,	or trustee.
(A) Name and title	(B) Average hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D)  Reportable compensation	(E)  Reportable compensation	(F) Estimated amount of other
	per week (list any hours for related organizations below dotted line)	Individual trustee or director	Former Highest compensated employee Key employee Officer Institutional trustee Individual trustee		from the organization (W-2/ 1099-MISC/ 1099-NEC)	from related organizations (W-2/ 1099-MISC/ 1099-NEC)	compensation from the organization and related organizations			
John Sessa	20.00									
Director	0.00	~						26,771	0	0
Lisa Vanderpump	5.00									
Founder	0.00	~						0	0	0
Ken Todd	5.00									
Director	0.00	~						0	0	0
Pandora Vanderpump Sabo	5.00									
Director	0.00	~						0	0	0
Chad Schropp	5.00									
Director	0.00	~						0	0	0
Jennifer Kirk	5.00									
Director	0.00	•						0	0	0
	<u> </u>									

Part	VII Section A. Officers, Directors, 7	Trustees,	Key I	Em	plo	yee	s, an	d F	Highest Compe	nsated Emp	loyees (continued)
					(0	C)					
	(A)	(B)	(da m			ition			(D)	(E)	(F)
	Name and title	Average	١,				e than o i is both		Reportable	Reportable	Estimated amount
		hours per week					or/trus		compensation from the	compensation from related	of other compensation
		(list any	or c	Inst	Officer	Şe Ç	em <sub>l</sub>	For	organization (W-2/	organizations (W-	
		hours for	Individual to	Institutional	cer	Key employee	hest	Former	1099-MISC/	1099-MISC/	organization and
		related organizations	tor la	ona		ploy	8 0		1099-NEC)	1099-NEC)	related organizations
		below	Individual trustee or director	ŧ		/ee	nper				
		dotted line)	H W	trustee			Highest compensated employee				
							ed.				
			-								
			1								
			Ī								
			-								
											+
			-								
											+
			_								
	Cubtatal							Ļ	0/ 774		
1b c	Subtotal	 VII Sectio	 n A	•	•	•			26,771		0 0
d				•	•	•			26,771		0 0
2	Total number of individuals (including but						above	e) w		e than \$100,00	
	reportable compensation from the organi							,	0	. ,	
											Yes No
3	Did the organization list any former of							mp	loyee, or highes	st compensate	ed
	employee on line 1a? If "Yes," complete										3 🗸
4	For any individual listed on line 1a, is the										
	organization and related organizations individual	greater th	an \$	150,	JUUL	)? [	t "Ye	s,"	complete Sche	aule J for su	
5	Did any person listed on line 1a receive of			nco	tion	fro	 m anv		· · · · · · ·	tion or individu	4
5	for services rendered to the organization										5
Secti	on B. Independent Contractors										<u> </u>
1	Complete this table for your five high	nest comp	ensate	ed	inde	epe	ndent	CC	ontractors that i	received more	than \$100,000 of
	compensation from the organization. Rep										
	(A)								(B)		(C)
	Name and business add	ress							Description of ser	vices	Compensation
None											
2	Total number of independent contractor	•	-					th	nose listed abov	re) who	
	received more than \$100,000 of compens	ation from	the or	gan	izat	ion	<b>•</b>		0		

Page 8

# Part VIII Statement of Revenue

		Check if Schedule	Осо	ntains a re	spon	se or note to an	y line in this Pa	ırt VIII		🗌
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
is,	1a	Federated campaig	ns .		1a	0				
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues			1b	0				
ي ق	С	Fundraising events			1c	61,983				
Ł, Ż	d	Related organization			1d	0				
ia g	e	Government grants			1e	0				
s,	f	All other contribution				0				
on S	•	and similar amounts no			4.6	F// 07/				
he he					1f	566,374				
를 하	g	Noncash contribution								
nd nd		lines 1a-1f			1g					
O B	h	Total. Add lines 1a-	–1f .			🕨	628,357			
						Business Code				
<u>S</u>	2a	<b>Adoption Services</b>				812910	31,693	31,693	0	0
Program Service Revenue	b	Grooming Services				812910	222,607	222,607	0	0
gram Ser Revenue	С	Dat Committee				453910	72,528	72,528	0	0
E §	d					100710	1-7	1-70-20		
Re	_									
Š.	f	All other program se	onvioo	rovonuo			0	0	0	0
•						<b>•</b>		0	0	U
	<u>g</u> 3	Total. Add lines 2a- Investment income					326,828			
	J	other similar amoun	•	-		· · · · · · · · · · · · · · · · · · ·	_	_	_	_
	_		•				0	0	0	0
	4	Income from investr			•		0	0	0	0
	5	Royalties	<u></u>			🕨	0	0	0	0
				(i) Real		(ii) Personal				
	6a	Gross rents	6a		0	0				
	b	Less: rental expenses	6b		0	0				
	С	Rental income or (loss)	6c		0	0				
	d	Net rental income o	r (los	s)			0	0	0	0
	7a	Gross amount from	(.55	(i) Securities		(ii) Other				
	1 a	sales of assets		' ' ''		() •				
		other than inventory	7-		0	0				
		•	7a							
Revenue	b	Less: cost or other basis								
Je l		and sales expenses .	7b		0	0				
è	С	Gain or (loss)	7с		0	0				
	d	Net gain or (loss)				🕨	0	0	0	0
Other	8a	Gross income fro	m fu	ndraising						
δ		events (not including		61,983						
		of contributions re		d on line						
		1c). See Part IV, line	-		8a	0				
	b	Less: direct expens			8b	0				
	C	Net income or (loss)					0		0	0
	9a	Gross income			geve		U		U	U
	Ja	activities. See Part			00					
					9a	0				
		Less: direct expens			9b	0				
		Net income or (loss)			tivitie	s <b>&gt;</b>	0	0	0	0
	10a	Gross sales of in		ory, less						
		returns and allowan	ices		10a	399,945				
	b	Less: cost of goods	sold		10b	148,522				
	С	Net income or (loss)			vento		251,423	251,423	0	0
S		· · ·				Business Code				
DO W	11a									
ne Ju	b									
Ver Ver										
scellaneo Revenue	Q C	All other revenue								
Miscellaneous Revenue	d	All other revenue			•	<u> </u>	=			
		Total. Add lines 11a				🕨	0			
	12	Total revenue. See	ınstr	uctions .		🕨	1,206,608	578,251	0	0

## Part IX Statement of Functional Expenses

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

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

	Check if Schedule O contains a response or note to any line in this Part IX										
Do no	t include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)						
8b, 9b	o, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses						
1	Grants and other assistance to domestic organizations										
	and domestic governments. See Part IV, line 21 .	0	0								
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0	0								
3	Grants and other assistance to foreign organizations, foreign governments, and		·								
	foreign individuals. See Part IV, lines 15 and 16	0	0								
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	27,625	0	27.425	0						
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	27,625	0						
7	Other salaries and wages	319,732	71,231	248,501	0						
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)			·							
•	```	0	0	0	0						
9 10	Other employee benefits	4,586	0	4,586	0						
10	Payroll taxes	17,123	0	17,123	0						
11	Fees for services (nonemployees):	22.424	22.245	F. 704							
a	Management	80,626	23,845	56,781	0						
b	Legal	10,244	0	10,244	0						
C	Accounting	1,900	0	1,900	0						
d	Lobbying	0	0	0	0						
e	Professional fundraising services. See Part IV, line 17 Investment management fees	0	0		0						
f g	Other. (If line 11g amount exceeds 10% of line 25, column	0	0	0	0						
	(A), amount, list line 11g expenses on Schedule O.) .	18,616	0	18,616	0						
12	Advertising and promotion	6,134	0	6,134	0						
13	Office expenses	23,129	9,065	14,064	0						
14	Information technology	13,798	0	13,798	0						
15	Royalties	0	0	0	0						
16	Occupancy	189,696	44,381	145,315	0						
17	Travel	71,682	0	71,682	0						
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0						
19	Conferences, conventions, and meetings .	13,637	0	13,637	0						
20	Interest	58,160	0	58,160	0						
21	Payments to affiliates	0	0	0	0						
22	Depreciation, depletion, and amortization .	0	0	0	0						
23	Insurance	68,703	0	68,703	0						
24	Other expenses. Itemize expenses not covered	,		·							
	above. (List miscellaneous expenses on line 24e. If										
	line 24e amount exceeds 10% of line 25, column										
	(A), amount, list line 24e expenses on Schedule O.)										
а	Utilities	28,270	0	28,270	0						
b	Dog Shelter	184,150	0	184,150	0						
С	Professional Charges	57,282	0	57,282	0						
d											
е	All other expenses										
25	Total functional expenses. Add lines 1 through 24e	1,195,093	148,522	1,046,571	0						
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 <b>990</b> (2021)						

Part X Balance Sheet

		Check if Schedule O contains a response or n	iote to any line in this Pa	tX		
				<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash-non-interest-bearing		151,059	1	129,340
	2	Savings and temporary cash investments		0	2	0
	3	Pledges and grants receivable, net		0	3	0
	4	Accounts receivable, net		50,000	4	81,249
	5	Loans and other receivables from any current or trustee, key employee, creator or founder, substar controlled entity or family member of any of these	ntial contributor, or 35%		_	
	6	Loans and other receivables from other disqualif	•	0	5	0
		under section 4958(f)(1)), and persons described in		0	6	0
S	7	Notes and loans receivable, net		0	7	0
Assets	8	Inventories for sale or use	<b>.</b>	140,602	8	427,248
As	9	Prepaid expenses and deferred charges		0	9	0
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D				
	b	Less: accumulated depreciation 1	10b 0	0	10c	1,928
	11				11	0
	12	Investments—other securities. See Part IV, line 11		0		0
	13	Investments-program-related. See Part IV, line 1	0		0	
	14	Intangible assets	0		0	
	15	Other assets. See Part IV, line 11	1	86,757	15	0
	16	Total assets. Add lines 1 through 15 (must equal		428,418		639,765
	17	Accounts payable and accrued expenses		22,429		19,732
	18	Grants payable		0		0
	19	Deferred revenue	0		0	
	20	Tax-exempt bond liabilities	0		0	
	21	Escrow or custodial account liability. Complete Pa		0	_	0
Liabilities	22	Loans and other payables to any current or f trustee, key employee, creator or founder, substar controlled entity or family member of any of these	former officer, director, ntial contributor, or 35%			
iab				0	_	0
_	23	Secured mortgages and notes payable to unrelate	-	0		0
	24 25	Unsecured notes and loans payable to unrelated to Other liabilities (including federal income tax, paparties, and other liabilities not included on lines 1	ayables to related third 17–24). Complete Part X	0	24	0
		of Schedule D		0	25	202,529
	26	<b>Total liabilities.</b> Add lines 17 through 25		22,429	26	222,261
nces		Organizations that follow FASB ASC 958, check and complete lines 27, 28, 32, and 33.	k here ▶ ☑			
<u>aa</u>	27	Net assets without donor restrictions		405,989	27	417,504
Ä	28	Net assets with donor restrictions		0	28	0
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 958 and complete lines 29 through 33.	3, check here ► □			
ō	29	Capital stock or trust principal, or current funds .			29	
ets	30	Paid-in or capital surplus, or land, building, or equ			30	
SSI	31	Retained earnings, endowment, accumulated inco	•		31	
λA	32	Total net assets or fund balances	-	405,989		417,504
Ž	33	Total liabilities and net assets/fund balances		428,418	_	639,765

Form 990 (2021) Page **12** 

Part	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)		1,20	6,608
2	Total expenses (must equal Part IX, column (A), line 25)		1,19	5,093
3	Revenue less expenses. Subtract line 2 from line 1		1	1,515
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4		40!	5,989
5	Net unrealized gains (losses) on investments			0
6	Donated services and use of facilities			0
7	Investment expenses			0
8	Prior period adjustments			0
9	Other changes in net assets or fund balances (explain on Schedule O)			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	32, column (B))		41	7,504
Part	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	_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain of Schedule O.	n		
2a		2a		~
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or	or		
	reviewed on a separate basis, consolidated basis, or both:			
_	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b		~
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a	a		
	separate basis, consolidated basis, or both:			
_	Separate basis Consolidated basis Both consolidated and separate basis			
С	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?			
	·	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain or Schedule O.	on		
2-				
ъa	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	1 1		
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	3a		
b	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.	e   3b		
	required addit of addits, explain why on confedure of and describe any steps taken to undergo such addits.	JD		

Form **990** (2021)

#### SCHEDULE A (Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

OMB No. 1545-0047

2021

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Employer identification number

	DERPUMP DOG FOUNDATION						63828			
Pai			-			<u> </u>	ons.			
The o	organization is not a private founda		,		-	•				
1	A church, convention of church					0(b)(1)(A)(i).				
2	A school described in <b>section</b>		,		•					
3	A hospital or a cooperative hos						(···) =			
4	A medical research organization hospital's name, city, and state	•	onjunction with a nosp	oitai desc	ribea in s	section 170(b)(1)(A)	(III). Enter the			
5	An organization operated for t		college or university	owned o	r operate	ad by a government	al unit described in			
Ū	section 170(b)(1)(A)(iv). (Comp		college of university	owned c	орегате	d by a government	ai dilit described ili			
6	☐ A federal, state, or local govern	•	mental unit described	l in <b>secti</b> o	on 170(b)	(1)(A)(v).				
7	An organization that normally						n the general public			
	described in section 170(b)(1)				J - 1		3			
8	8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)									
9	☐ An agricultural research organi	zation described	d in <b>section 170(b)(1)</b>	( <b>A</b> )(ix) op	erated in	conjunction with a l	and-grant college			
	or university or a non-land-gramuniversity:	nt college of agr	iculture (see instruction	ons). Ente	er the nan	ne, city, and state of	the college or			
10	An organization that normally reported	eceives (1) more	than 33 <sup>1</sup> /3% of its su	pport fro	m contrib	outions, membership	fees, and gross			
	receipts from activities related support from gross investment	income and un	related business taxal	ble incom	eptions, a ne (less se	ection 511 tax) from	businesses			
	acquired by the organization at	fter June 30, 197	75. See <b>section 509(</b> a	<b>a)(2).</b> (Coi	mplete Pa	art III.)				
11	An organization organized and	•	•	-						
12										
	one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.									
а										
u	the supported organization									
	supporting organization. Yo									
b	☐ <b>Type II.</b> A supporting organ	nization supervis	sed or controlled in co	nnection	with its s	supported organizati	on(s), by having			
	control or management of t				persons	that control or man	age the supported			
	organization(s). You must o	-	•							
С							ally integrated with,			
	its supported organization(s	, ,	•		-					
d	Type III non-functionally integrated that is not functionally integrated that it is not functionally in the functional integrated that it is not functional i									
	requirement (see instruction						iu an attentiveness			
е	. ` `	,	•		•		a II. Type III			
·	functionally integrated, or T						e ii, Type iii			
f	Enter the number of supported of	• •								
g	Provide the following information	about the supp	orted organization(s).							
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization		organization	(v) Amount of monetary	(vi) Amount of			
			(described on lines 1–10 above (see instructions))		ur governing ment?	support (see instructions)	other support (see instructions)			
					1	,	,			
				Yes	No					
(A)										
(B)										
<b>(0)</b>										
(C)										
(D)										
<del>\_</del> /										
(E)										
Tota										

	(Complete only if you checked the Part III. If the organization fails to						alify under
Secti	on A. Public Support	, ,		/ 1	'	,	
	dar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						.,
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						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
	on B. Total Support				( ) 2222		
	dar year (or fiscal year beginning in)	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	<b>(e)</b> 2021	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc. First 5 years. If the Form 990 is for the	organization'	s first, second	, third, fourth,	or fifth tax ye	12 ear as a section	n 501(c)(3)
Cooti	organization, check this box and stop her	re					🕨 📙
<b>Secti</b>	on C. Computation of Public Suppor Public support percentage for 2021 (line 6			11 column (f)\		14	<u></u> %
15 16a	Public support percentage from 2020 Sch 33 <sup>1</sup> / <sub>3</sub> % support test—2021. If the organi box and stop here. The organization qual	nedule A, Part zation did not	II, line 14 . check the box		 nd line 14 is 30	15	check this
b	33 <sup>1</sup> / <sub>3</sub> % support test—2020. If the organization this box and stop here. The organization	zation did not	check a box c	n line 13 or 16	Sa, and line 15	is 33 <sup>1</sup> /3% or m	ore, check
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization m Part VI how the organization meets the organization	eets the facts	-and-circumst	ances test, ch	eck this box a	and <b>stop here.</b>	Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizatio in Part VI how the organization meets the organization	n meets the fa e facts-and-cir	acts-and-circu	mstances test, est. The organ	check this bo	x and <b>stop he</b>	re. Explain
18	Private foundation. If the organization of				, 17a, or 17b,	check this bo	x and see

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

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

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

Secti	on A. Public Support			, , ,		,	
Calen	dar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees	` ,	` ,	` ,	` '	` '	.,,
	received. (Do not include any "unusual grants.")	592,727	865,150	637,671	705,665	628,356	3,429,569
2	Gross receipts from admissions, merchandise	,	,		,		
	sold or services performed, or facilities						
	furnished in any activity that is related to the organization's tax-exempt purpose	325,270	667,531	849,335	471,772	619,217	2,933,125
3	Gross receipts from activities that are not an	323,270	007,001	047,000	471,772	017,217	2,700,120
	unrelated trade or business under section 513	0	0	0	0	0	0
4	Tax revenues levied for the					-	
	organization's benefit and either paid to						
	or expended on its behalf	0	0	0	0	0	0
5	The value of services or facilities	0	0	0	- 0	0	
3	furnished by a governmental unit to the						
	organization without charge	0	0	0	0	0	0
6	<b>Total.</b> Add lines 1 through 5	917,997	1,532,681	1,487,006	1,177,437	1,247,573	6,362,694
7a	Amounts included on lines 1, 2, and 3	917,997	1,332,001	1,467,006	1,177,437	1,247,573	0,302,094
74	received from disqualified persons .						
	Amounts included on lines 2 and 3						
b							
	received from other than disqualified persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
•	· · · ·						
С 8	Add lines 7a and 7b						
o	line 6.)						/ 2/2 /04
Secti	on B. Total Support						6,362,694
	dar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6	917,997	1,532,681	1,487,006	1,177,437	1,247,573	6,362,694
10a	Gross income from interest, dividends,	717,777	1,552,061	1,467,000	1,177,437	1,247,373	0,302,074
IVa	payments received on securities loans, rents,						
	royalties, and income from similar sources .	0	0	0	0	0	0
b	Unrelated business taxable income (less	U	0	U	0	U	
Б	section 511 taxes) from businesses						
	acquired after June 30, 1975	0	0	0	0	0	0
С	Add lines 10a and 10b	0	0	0	0	0	0
11	Net income from unrelated business	0	0	- 0	0	U	
••	activities not included on line 10b, whether						
	or not the business is regularly carried on	0	0	0	0	0	0
12	Other income. Do not include gain or	U	0	U	0	U	0
14	loss from the sale of capital assets						
	(Explain in Part VI.)	0	0	0	0	0	0
13	Total support. (Add lines 9, 10c, 11,	0	<u> </u>	- 0	- 0	0	
.0	and 12.)	917,997	1,532,681	1,487,006	1,177,437	1,247,573	6,362,694
14	First 5 years. If the Form 990 is for the						
• •	organization, check this box and <b>stop he</b>	_			-		
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2021 (line 8			13. column (f))		15	100 %
16	Public support percentage from 2020 Sch					16	100 %
	on D. Computation of Investment Inc					- 1	,
17	Investment income percentage for 2021 (			y line 13, colu	mn (f))	17	0 %
18	Investment income percentage from <b>2020</b>			-		18	0 %
19a	331/3% support tests—2021. If the organ					ore than 331/39	
	17 is not more than 33 <sup>1</sup> / <sub>3</sub> %, check this box						
b	331/3% support tests—2020. If the organiz	-	-	•		_	_
	line 18 is not more than 331/3%, check this I						
20	Private foundation. If the organization di	d not check a l	oox on line 14,	19a, or 19b, c	heck this box	and see instru	ctions ► 🗌

## Part IV Supporting Organizations

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

## Section A. All Supporting Organizations

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

Schedule A (Form 990 or 990-EZ) 2021

Part	IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
	provide detail in <b>Part VI.</b>	11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Secti	on 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 <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Secti	on 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		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
Secti	on 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 i	nstru	ctions	s).
a b c	<ul> <li>☐ The organization satisfied the Activities Test. Complete line 2 below.</li> <li>☐ The organization is the parent of each of its supported organizations. Complete line 3 below.</li> <li>☐ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity.</li> </ul>			
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> 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 <b>Part VI</b> 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 a	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i>	3a		
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 <b>Part VI</b> the role played by the organization in this regard.	3h		

Part	Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
Sect	ion 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		
Sect	ion B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):			
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		
Sect	ion C-Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	☐ Check here if the current year is the organization's first as a non-functional		ntegrated Type III suppo	orting organization
,	(see instructions).	any I	megrated Type III suppo	nung organization

Part	V Type III Non-Functionally Integrated 509(a)(3	) Supporting Organi	zations (continue	d)	
Sect	ion D-Distributions				Current Year
1 2	Amounts paid to supported organizations to accomplish a Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity		orted	2	
3	Administrative expenses paid to accomplish exempt purp	3			
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required-	-provide details in <b>Part</b>	VI)	5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to whic (provide details in <b>Part VI</b> ). See instructions.	h the organization is res	sponsive		
				8	
10	Distributable amount for 2021 from Section C, line 6  Line 8 amount divided by line 9 amount			9 10	
	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2021		(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reasonable cause required—explain in <b>Part VI</b> ). See instructions.				
3	Excess distributions carryover, if any, to 2021				
а	From 2016				
b	From 2017				
С	From 2018				
d	From 2019				
е	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
j_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D, line 7: \$				
a	Applied to underdistributions of prior years			_	
b	Applied to 2021 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI.</b> See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j and 4c.				
8	Breakdown of line 7:				
а	Excess from 2017				
b	Excess from 2018				
С	Excess from 2019				
d	Excess from 2020				
6	Excess from 2021				

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

#### SCHEDULE C (Form 990 or 990-EZ)

## **Political Campaign and Lobbying Activities**

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Under section 501(c) and section 527

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

Inspection

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

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

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

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

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

- , (-						
	ection 501(c)(4), (5), or (6) orga	ınizations: Complete Part III.		1=		
Name o	of organization			Employer ider	ntification number	
	ERPUMP DOG FOUNDATIO				81-1263828	
Part	·	e organization is exempt und	<u> </u>	•		
1	Provide a description of definition of "political can	the organization's direct and in-	direct political ca	mpaign activities in Part	IV. See instruction	ons for
2		y expenditures. See instructions .		<b>&gt;</b> \$		
3		cal campaign activities. See instruc				
Part		e organization is exempt und				
1	•	excise tax incurred by the organiza	<u>`</u>	· · ·		
2		excise tax incurred by the organization				
3		ed a section 4955 tax, did it file For				No
4a					Tes	H No
b	If "Yes," describe in Part				163	140
Part		e organization is exempt und	er section 501(c	c) except section 501	(c)(3)	
1		ly expended by the filing organiz			(0)(0):	
•						
2		filing organization's funds contrib				
2		vities	_	_		
3	•	expenditures. Add lines 1 and 2.		-		
3						
4		n file <b>Form 1120-POL</b> for this year?			Yes	No
5		ses and employer identification nur				
5		ents. For each organization listed, (				
		ontributions received that were pro-				
		fund or a political action committee				
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of poli	
	(a) Name	(b) Address	(C) LIN	filing organization's	contributions receive	
				funds. If none, enter -0	promptly and dire	
					delivered to a sepa political organizat	
					If none, enter -0	
(1)						
(0)						
(2)						
(3)						
(9)						
(4)						
(+)						
(5)						
ν,						
(6)						

Page 2

f Grassroots lobbying expenditures

OCI	ledui	e O (1 01111 990 01 990-LZ) 202 1					raye <b>Z</b>
Pá	art	II-A Complete if the organizat section 501(h)).	ion is exempt u	nder section 50	01(c)(3) and filed	d Form 5768 (ele	ection under
Α	Ch	eck ► ☐ if the filing organization bel address, EIN, expenses, ar				liated group memb	er's name,
В	Ch	eck ► ☐ if the filing organization che	ecked box A and "	limited control" pr	ovisions apply.		
		Limits on Lo (The term "expenditures"	bbying Expenditu means amounts		•	(a) Filing organization's totals	<b>(b)</b> Affiliated group totals
	1a	Total lobbying expenditures to influen	ce public opinion	(grassroots lobbyi	ng)	0	
	b	Total lobbying expenditures to influen	ce a legislative bo	dy (direct lobbying	g)	0	
	С	Total lobbying expenditures (add lines	s 1a and 1b) .			0	
	d	Other exempt purpose expenditures				0	
	е	Total exempt purpose expenditures (a				0	
	f	Lobbying nontaxable amount. Ente columns.	r the amount fr	om the following	table in both	0	
		If the amount on line 1e, column (a) or (b)	is: The lobbying	nontaxable amoun	t is:		
	L	Not over \$500,000	20% of the am	ount on line 1e.			
	L	Over \$500,000 but not over \$1,000,000		15% of the excess			
	L	Over \$1,000,000 but not over \$1,500,000		10% of the excess			
	L	Over \$1,500,000 but not over \$17,000,000	-	5% of the excess or	ver \$1,500,000.		
		Over \$17,000,000	\$1,000,000.				
	g	Grassroots nontaxable amount (enter	•			0	
	h :	Subtract line 1g from line 1a. If zero or				0	
	!	Subtract line 1f from line 1c. If zero or	•			file Form 4700	
	J	If there is an amount other than ze reporting section 4911 tax for this year			=		Yes No
		4- (Some organizations that made a s See t	Year Averaging F section 501(h) ele he separate instr	Period Under Sec ection do not have uctions for lines	tion 501(h) e to complete all 2a through 2f.)		ns below.
		Lobbyi	ng Expenditures	During 4-Year Av	eraging Period		
		Calendar year (or fiscal year beginning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	<b>(c)</b> 2020	(d) 2021	(e) Total
:	2a	Lobbying nontaxable amount	0	0	0	0	0
	b	Lobbying ceiling amount (150% of line 2a, column (e))					0
	С	Total lobbying expenditures	0	0	0	0	0
	d	Grassroots nontaxable amount	0	0	0	0	0
	е	Grassroots ceiling amount (150% of line 2d, column (e))					0

Schedule C (Form 990 or 990-EZ) 2021

0

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed (election under section 501(h)).	J F	orm	1 <b>5</b> 70	38	•	
For	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed	(a	)			(b)	
desc	ription of the lobbying activity.	s	No		Am	ount	İ
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?	Т					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	T					
С	Media advertisements?	T					
d	Mailings to members, legislators, or the public?	T					
е	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?	$\dashv$					
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)?	4					
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 .						
Part	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5).	ᅼ		oti o			
rait	501(c)(6).	, U	1 36	Clio	11		
					$\Box$	Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			<u> </u>	-		
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 campaign activity expenditures from the price	_		_	3		
Part	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b					ne 3	s, is
1	Dues, assessments and similar amounts from members	ļ	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).						
a	Current year	-	2a				
b	Carryover from last year	ŀ	2b				
C	Total	ŀ	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	ŀ	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		4				
5	Taxable amount of lobbying and political expenditures. See instructions	ł	5				
Par							
Provi	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group I instructions); and Part II-B, line 1. Also, complete this part for any additional information.	ist	); Par	t II- <i>A</i>	٦, lir	nes 1	and

# SCHEDULE D (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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990.

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

Name C	i tile organization		Employer identification number
VAND	ERPUMP DOG FOUNDATION		81-1263828
Par	t I Organizations Maintaining Donor Advis	sed Funds or Other Similar Fund	ls or Accounts.
	Complete if the organization answered "\	Yes" on Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year) .		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor a	advisors in writing that the assets he	ld in donor advised
	funds are the organization's property, subject to the		
6	Did the organization inform all grantees, donors, an	nd donor advisors in writing that grant	funds can be used
	only for charitable purposes and not for the benefit		
	conferring impermissible private benefit?		· · · · ·
Par	Conservation Easements.		
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the o		
-	☐ Preservation of land for public use (for example, recrea		f a historically important land area
	Protection of natural habitat		f a certified historic structure
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organization hel	d a qualified conservation contribution	n in the form of a conservation
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		. <b>2</b> a
b	Total acreage restricted by conservation easements		
C	Number of conservation easements on a certified hi		
d	Number of conservation easements included in (		
3	Number of conservation easements modified, trans	ferred, released, extinguished, or tern	ninated by the organization during the
	tax year ►	-	
4	Number of states where property subject to conserv	/ation easement is located ►	
5	Does the organization have a written policy rega		
	violations, and enforcement of the conservation eas	ements it holds?	· · · · · Yes 🗌 No
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing	conservation easements during the year
	<b>&gt;</b>		
7	Amount of expenses incurred in monitoring, inspecting	g, handling of violations, and enforcing of	conservation easements during the year
	<b>▶</b> \$		
8	Does each conservation easement reported on line 2		
	and section 170(h)(4)(B)(ii)?		· · · · · Yes 🗌 No
9	In Part XIII, describe how the organization reports co	onservation easements in its revenue a	and expense statement and
	balance sheet, and include, if applicable, the text of	_	incial statements that describes the
	organization's accounting for conservation easemer		
Part			Other Similar Assets.
	Complete if the organization answered "		
1a	If the organization elected, as permitted under FASI		
	of art, historical treasures, or other similar assets	•	•
	service, provide in Part XIII the text of the footnote to		
b	If the organization elected, as permitted under FAS		
	art, historical treasures, or other similar assets held		search in furtherance of public service,
	provide the following amounts relating to these item		
	<ul><li>(i) Revenue included on Form 990, Part VIII, line 1</li><li>(ii) Assets included in Form 990, Part X</li></ul>		• \$
2	If the organization received or held works of art,		assets for financial gain, provide the
	following amounts required to be reported under FA	=	
а	Revenue included on Form 990, Part VIII, line 1 .		• \$
b	Assets included in Form 990, Part X		▶ \$

С	Using the organization's acquisition, a collection items (check all that apply):  Public exhibition Scholarly research Preservation for future generations Provide a description of the organizati XIII.	ccession, and of	ther recor		any of th				
a b c	collection items (check all that apply):  Public exhibition Scholarly research Preservation for future generations Provide a description of the organizati		d		•	e follow	ing that make	significant u	se of its
b	☐ Scholarly research ☐ Preservation for future generations Provide a description of the organizati			Loan o					
С	☐ Preservation for future generations Provide a description of the organizati		е		r exchang	e progr	am		
С	☐ Preservation for future generations Provide a description of the organizati			Other	_				
	Provide a description of the organizati								
		on's collections	and expla	ain how the	ey further	the org	anization's exe	empt purpose	e in Part
5	During the year, did the organization assets to be sold to raise funds rather								☐ No
Part	V Escrow and Custodial Arra	ngements.							
	Complete if the organization 990, Part X, line 21.								orm
1a	Is the organization an agent, trustee,							not	
	included on Form 990, Part X?							· 🗌 Yes	□ No
b	If "Yes," explain the arrangement in Pa	rt XIII and compl	ete the fo	llowing tak	ole:				
		•		Ü				Amount	
С	Beginning balance					1c			
	Additions during the year					1d	+		
e	Distributions during the year					1e			
f	Ending balance					1f	+		
	Did the organization include an amoun							+v2	□ No
	<u> </u>							-	
	If "Yes," explain the arrangement in Pa	IT AIII. Check her	e ii the e	xpianation	nas been	provide	on Part XIII		
Part		anawayad "Vaa	" a.a. Fa.u	000 D		- 10			
	Complete if the organization							. 1	
		(a) Current year	<b>(b)</b> Pri	or year	(c) Two year	's back	(d) Three years ba	ick (e) Four ye	ars back
	Beginning of year balance								
	Contributions								
С	Net investment earnings, gains, and losses								
d	Grants or scholarships								
е	Other expenditures for facilities and								
	programs								
f	Administrative expenses								
	End of year balance								
<b>້</b>	Provide the estimated percentage of the	ne current vear er	nd baland	e (line 1a	column (a	)) held a	as:		
– a	Board designated or quasi-endowmen					,,,			
b	Permanent endowment ►	%	/ 0						
C	Term endowment ▶ %	/0							
C	The percentages on lines 2a, 2b, and 2	o chould oqual 1	000/						
32	Are there endowment funds not in the			zation that	are held	and ad	ministered for	the	
Ja	organization by:							Y	es No
	(i) Unrelated organizations							. 3a(i)	
	• •							<del></del>	
b	If "Yes" on line 3a(ii), are the related or	-	•					. 3b	
4	Describe in Part XIII the intended uses		on's endo	owment fur	nds.				
Part	Land, Buildings, and Equiporal Complete if the organization		" on For	m 990, Pa	art IV, line	e 11a. S	See Form 990	), Part X, lin	e 10.
	Description of property	(a) Cost or o	ther basis	(b) Cost or (oth	other basis	(c) A	Accumulated epreciation	(d) Book v	
1a	Land		0		0				0
	Buildings		0		0		0		0
	Leasehold improvements		0		0		0		0

1,928

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

0

**d** Equipment

0

1,928

0

0

Part VII	Investments – Other Securities.	V line 11h Coo E	Saura 000 Davit V line 10
	Complete if the organization answered "Yes" on Form 990, Part I  (a) Description of security or category  (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial	derivatives		
	eld equity interests		
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G) (H)			
	mn (b) must equal Form 990, Part X, col. (B) line 12.)   .  ▶		
Part VIII	Investments—Program Related.		
- art viii	Complete if the organization answered "Yes" on Form 990, Part I	V. line 11c. See F	orm 990. Part X. line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation:
			Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7) (8)			
(9)			
	mn (b) must equal Form 990, Part X, col. (B) line 13.) . ▶		
Part IX	Other Assets.		
	Complete if the organization answered "Yes" on Form 990, Part I	V, line 11d. See F	orm 990, Part X, line 15.
	(a) Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	mn (b) must equal Form 990, Part X, col. (B) line 15.)		
Part X	Other Liabilities.		
raitA	Complete if the organization answered "Yes" on Form 990, Part I	V line 11e or 11f	See Form 990 Part X
	line 25.	v, IIIIO 110 01 111.	occ romroso, rarrx,
1.	(a) Description of liability		(b) Book value
(1) Federal in			202,529
(2)			
(3)			
(4)			
(5)			
(6)		·	
(7)			
(8)			
(9)			
	mn (b) must equal Form 990, Part X, col. (B) line 25.)		202,529
	runcertain tax positions. In Part XIII, provide the text of the footnote to the orgar s liability for uncertain tax positions under FASB ASC 740. Check here if the text		
organization	s nability for uncertain tax positions under FASD ASC 740. Check here if the text	or the loothole has b	een provided in Fall Alli . 🗀

Schedule D (Form 990) 2021 Page **4** 

Part	•		Return.
	Complete if the organization answered "Yes" on Form 990, I		
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1	
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
С	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	<del></del>	
е	Add lines 2a through 2d		2e
3	Subtract line <b>2e</b> from line <b>1</b>		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)		
	Add lines <b>4a</b> and <b>4b</b>		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5
Part			er Return.
	Complete if the organization answered "Yes" on Form 990, I		
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 - 1	
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
С	Other losses	2c	
d	Other (Describe in Part XIII.)		
	Add lines 2a through 2d		2e
3	Subtract line <b>2e</b> from line <b>1</b>		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		4
b	Other (Describe in Part XIII.)		
	Add lines <b>4a</b> and <b>4b</b>		4c
5	Total expenses. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line	e 18.) .   .   .   .   .   .   .	5
	Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4. Dort IV lines 1h and 0h	or Dort V. line 4. Dort V. line
	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part		
_,	74, into 2a and 15, and 1 are 74, into 2a and 15.7400 complete the part	to provide any additional in	normation.

## SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Name of the organization

Employer identification number

VAND	ERPUMP DOG FOUNDATION					81-	1263828		
	Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17.								
	Form 990-EZ filers are n	<u> </u>				Nearly all the attended			
1	Indicate whether the organizatio  Mail solicitations	n raised funds i	nrougn any <b>e</b>		_				
a	Internet and email solicitation				ion of non-govern	_			
b	=	ns	f		ion of governmen	_			
C	☐ Phone solicitations		g	_ Special 1	fundraising event	S			
d	d In-person solicitations								
2a									
	or key employees listed in Form	· · · · · · · · · · · · · · · · · · ·	=		· ·	=			
b	If "Yes," list the 10 highest paid			draisers) pı	ursuant to agreen	nents under which th	e fundraiser is to be		
	compensated at least \$5,000 by	the organization	n.						
			_						
	(i) Name and address of individual		(iii) Did fun	draiser have	(iv) Cross ressints	(v) Amount paid to	(vi) Amount paid to		
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity		or control of outions?	(iv) Gross receipts from activity	(or retained by) fundraiser listed in	(or retained by) organization		
				Julions:		col. (i)	organization		
			Yes	No					
1									
2									
3									
4									
5									
6									
7									
8									
9									
9									
10									
10									
Total				🕨					
3	List all states in which the orga				colicit contribution	s or has been notifi	ed it is exempt from		
•	registration or licensing.	inzanon lo rogic	7.0.00 01 110			io di rido bodii ridiii	od it io oxompt irom		
	3 3								

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

			(a) Event #1 World Dog Day	<b>(b)</b> Event #2	(c) Other events	(d) Total events (add col. (a) through
			(event type)	(event type)	(total number)	col. <b>(c)</b> )
Revenue	1	Gross receipts	61,983			61,983
Ä	2	Less: Contributions	0			0
	3	Gross income (line 1 minus line 2)	61,983			61,983
	4	Cash prizes	0			0
	5	Noncash prizes	0			0
nses	6	Rent/facility costs	0			0
Direct Expenses	7	Food and beverages	0		0	0
Direc	8	Entertainment	0		0	0
	9	Other direct expenses .	21,018			21,018
	10	Direct expense summary. Ac	ld lines 4 through 9 in c	olumn (d)		21,018
	11	Net income summary. Subtra				40,965
Pa	rt III		e organization answe			or reported more than
		· · /	(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue			(a) billigo	bingo/progressive bingo	(c) Other garming	col. (a) through col. (c))
Re	1	Gross revenue				
	-	Grood revenue				
nses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses .				
	6	Volunteer labor	<ul><li>☐ Yes %</li><li>☐ No</li></ul>	☐ Yes % ☐ No	☐ Yes % ☐ No	
	7	Direct expense summary. Ac	dd lines 2 through 5 in c	olumn (d)		
	8	Net gaming income summar	y. Subtract line 7 from li	ne 1, column (d)		
9	F	Enter the state(s) in which the or	ganization conducts as	ming activities:		
	a l	s the organization licensed to co	onduct gaming activities	s in each of these states	s?	The Yes No
10		Vere any of the organization's g	_	-	ated during the tax year	

Jiledui	ie a (Form 950 of 950-L2) 2021		rage <b>u</b>
11	Does the organization conduct gaming activities with nonmembers?	☐ Yes	☐ No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity		
	formed to administer charitable gaming?	☐ Yes	☐ No
13	Indicate the percentage of gaming activity conducted in:		
а	The organization's facility		<u>%</u>
b	An outside facility		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name ►		
	Address►		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	☐ Yes	☐ No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$ If "Yes," enter name and address of the third party:		
	Name ►		
	Address ►		
16	Gaming manager information:		
	Name ▶		
	Gaming manager compensation ► \$		
	Description of services provided ►		
	□ Director/officer □ Employee □ Independent contractor		
17 a b	Mandatory distributions:  Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$	☐ Yes	□No
Part			

#### **SCHEDULE L** (Form 990 or 990-EZ)

**Transactions With Interested Persons** 

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

**Employer identification number** 

Department of the Treasury Internal Revenue Service Name of the organization

VANDER	rpump dog founi	DATION								81-1	2638	28		
Part I		fit Transaction e organization	s (section 501 answered "Ye	(c)(3), s" on	, section Form 99	501(c)(4), a 0, Part IV, li	nd se ine 25	ction 501(c)(29) a or 25b, or For	organ m 990	izatio D-EZ,	ns or Part \	nly). V, line	40b.	
1 (	1 (a) Name of disqualified person		(b) Relationship between disqualified person and organization				(c) Description of transaction			<u>,                                     </u>	(d) Corrected?			
(1)														
(2)														
(3)														
(4)														
(5)														
(6)														
<b>2</b> E	Inter the amount of the section 4958		by the organ		n manag	-	qualifi 	ed persons du	ring tl	ne ye l	ar ▶ \$	<u> </u>		
<b>3</b> E	Enter the amount o	f tax, if any, on	line 2, above,	reimb	oursed by	the organi	zatior	ı		)	<b>\$</b>	5		
Part II	Loans to and	/or From Inter	acted Parcon											
r art ii	Complete if th		answered "Ye	s" on	Form 99 Part X, line	0-EZ, Part \ e 5, 6, or 22	V, line	38a or Form 99	90, Pa	rt IV,	line 2	6; or i	f the	
(a) Nam	e of interested person	(b) Relationship with organization	(c) Purpose of loan	fre			nal nount	(f) Balance due	(g) In default?		? <b>(h)</b> Approved by board or committee?		(i) Written agreement?	
				То	From				Yes	No	Yes	No	Yes	No
(1)														
(2)														
(3)														
(4)														
(5)														
(6)														
(7)														
(8)														
(9)														
(10)														
Total				٠			. ▶	\$						
Part III	Grants or Ass	sistance Benef ne organization	fiting Interest	ed Pe	ersons.			·.						
<b>(a)</b> Na	me of interested persor		ship between inter and the organization		(c) Amount	of assistance	(	d) Type of assistanc	e	(e)	Purpo	se of a	ssistan	се
(1)														
(2)														
(3)														
(4)														
(5)														
(6)														
(7)														
(8)														
(9)														
(10)														

Schedule L	(Form 990 or 990-EZ) 2021				F	Page 2		
Part IV	Part IV  Business Transactions Involving Interested Persons.  Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.							
	(a) Name of interested person	(b) Relationship between interested person and the organization (c) Amount of transaction				aring o zation's nues?		
					Yes	No		
(1) Va	nderpump Pets LLC	common members	64,460	Supply and Resale of Products		~		
(2)								
(3)								
(4)								
(5)								
(6) (7)								
(8)								
(9)								
(10)								
Part V	Supplemental Information.	<u>'</u>				•		
	Provide additional informatio	n for responses to questions	on Schedule L (see	instructions).				

#### **SCHEDULE 0** (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for the latest information. Open to Public Inspection

Name of the organization	Employer identification number						
VANDERPUMP DOG FOUNDATION	81-1263828						
Form 990, Part VI, Section A, Line 2 - a) Ken Todd, Lisa Vanderpump and Pandora Vanderpump Sabo are family members. (b) Dr. John							
Sessa, Ken Todd and Lisa Vanderpump are co-owners of another entity named Vanderpump Pets, LLC.							
Form 990, Part VI, Section A, Line 8b - No committee is formed. The governing body through its Executive	Director documents the meetings						
held or written actions undertaken during the year.							
Form 990, Part VI, Section B, Line 11b - Form 990 has been placed before the Founder and Board of direct	ors in a meeting.						
Form 990, Part VI, Section B, Line 12c - No benefit of any kind was paid to any of the officers, directors or	key employees of the Foundation						
in any of the transactions where the Foundation was involved.							
Form 000 Dort VI Section D. Line 15. The commonaction of Evacutive Diseases is approved by the Founda	r and other board of directors						
Form 990, Part VI, Section B, Line 15 - The compensation of Executive Director is approved by the Founde The decision on compensation is based on this link -	and other board of directors.						
https://www.payscale.com/research/US/Job=Executive_Director,_Non-Profit_Organization/Salary							
Tittps://www.payseare.com/researe/#05/500-Exceditive_Directortworl-rent_organization/salary							
Form 990, Part VI, Section C, Line 19 - Upon request by general public prior to making contributions, gove	rning documents, conflict of						
interest policy and financial statements were made available to the public during the tax year.							
Form 990, Part IX, Line 24e - Utilities - \$28,269.90; Dog Shelter - \$184,150.38; Professional Charges - \$57,28	31.90						

Schedule O, Statement 1 VANDERPUMP DOG FOUNDATION

Form: Form 990 (2021) EIN: 81-1263828

Page: 1 Header Section

#### Reasonable Cause Explanations

Explanation

As there was a change in the officer managing the day to day accounts, there was a delay in filing the form 990.

Schedule O, Statement 2 VANDERPUMP DOG FOUNDATION

Form: Form 990 (2021) EIN: 81-1263828

Page: 1 Part I, Line 1

#### **Activity Or Mission Description**

## Description

donations and funds from donors, which will be used to rescue, rehabilitate and rehome dogs, both domestically and internationally, as well as to fund their medical care, vaccinations, spay and neuter.