### COMMITTEE ON NATURAL RESOURCES

# 113<sup>th</sup> Congress Disclosure Form As required by and provided for in House Rule XI, clause 2(g) and the Rules of the Committee on Natural Resources

The Department of the Interior's proposal to allow a Categorical Exclusion under the National Environmental Policy Act (NEPA) for adding species to the Lacey Act's list of injurious wildlife Wednesday, July 17, 2013

For Individuals:
1. Name:
2. Address:
3. Email Address:
4. Phone Number:
* * * *
For Witnesses Representing Organizations:
1. Name: Marshall Meyers
2. Name of Organization(s) You are Representing at the Hearing: Pet Industry Joint Advisory Council (PIJAC)
3. Business Address: 1146 19 <sup>th</sup> Street, NW, Washington, DC 20036
4. Business Email Address: [Information redacted for privacy]
5. Business Phone Number: [Information redacted for privacy]

#### For all Witnesses

Mr. Marshall Meyers, Pet Industry Joint Advisory Council
The Department of the Interior's proposal to allow a Categorical Exclusion under the National
Environmental Policy Act (NEPA) for adding species to the Lacey Act's list of injurious wildlife
Wednesday, July 17, 2013

a. Any training or educational certificates, diplomas or degrees or other educational experiences that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

University of Pennsylvania Law School, LL.B, 1964

b. Any professional licenses, certifications, or affiliations held that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

Admitted: District of Columbia, 1965 United States Supreme Court, 1975

c. Any employment, occupation, ownership in a firm or business, or work-related experiences that relate to your qualifications to testify on or knowledge of the subject matter of the hearing.

Partner, Meyers & Alterman (law firm) representing pet industry and other animal-oriented entities since 1970.

PIJAC, Senior Advisor since 2010; previously served as outside counsel, officer and general counsel, 1970-2010

Involved with injurious/invasive species issues since 1970.

d. Any federal grants or contracts (including subgrants or subcontracts) from the Department of Interior that you have received in the current year and previous four years, including the source and the amount of each grant or contract.

#### **NONE**

e. A list of all lawsuits or petitions filed by you against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed.

#### **NONE**

f. A list of all federal lawsuits filed against you by the federal government in the current year and the previous four years, giving the name of the lawsuit, the subject matter of the lawsuit, and the federal statutes under which the lawsuits were filed.

#### **NONE**

g. Any other information you wish to convey that might aid the Members of the Committee to better understand the context of your testimony.

Involvement with Lacey Act injurious wildlife issues dates back to 1973 Fish and Wildlife proposals. Have served on numerous international and Federal task forces and working groups dealing with myriad aspects of

invasive species issues, such as Lionfish, Brown Tree Snake, Asian Carp, water gardens, risk assessment protocols, and ANSTF Intentional Introductions Policy Review that formed basis of report to Congress in 1994 recommending risk screening and ways to handle first time introductions.

Member, Invasive Species Advisory Committee, 2000-2006, 2012 – present.

Co-Chair, PIJAC/USFWS/AFWA Memorandum of Understanding to collaborate on the development of non-regulatory approaches to reduce the risk of introducing/importing potentially invasive species not currently found in the United States.

Chair, *Habitattitude*<sup>tm</sup> Steering Committee, USFWS/PIJAC/NOAA Sea Grant collaborative education/outreach campaign addressing invasive species.

Peer Reviewer, Ecological Rapid Risk Screening Protocol, USFWS, 2013

Peer Reviewer, Invasive Species Bayesian Network Protocol, USFWS, 2013

#### **Witnesses Representing Organizations**

Mr. Marshall Meyers, Pet Industry Joint Advisory Council
The Department of the Interior's proposal to allow a Categorical Exclusion under the National
Environmental Policy Act (NEPA) for adding species to the Lacey Act's list of injurious wildlife
Wednesday, July 17, 2013

h. Any offices, elected positions, or representational capacity held in the organization(s) on whose behalf you are testifying.

Senior Advisor and former CEO of PIJAC; represented pet industry as lawyer since 1970.

i. Any federal grants or contracts (including subgrants or subcontracts) from the Department of Interior that were received in the current year and previous four years by the organization(s) you represent at this hearing, including the source and amount of each grant or contract for each of the organization(s).

#### **NONE**

j. A list of all lawsuits or petitions filed by the organization(s) you represent at the hearing against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed for each of the organization(s).

#### **NONE**

k. A list of all federal lawsuits filed against the organization(s) you represent at the hearing by the federal government in the current year and the previous four years, giving the name of the lawsuit, the subject matter of the lawsuit, and the federal statutes under which the lawsuits were filed.

#### **NONE**

l. For tax-exempt organizations and non-profit organizations, copies of the three most recent public IRS Form 990s (including Form 990-PF, Form 990-N, and Form 990-EZ) for each of the organization(s) you represent at the hearing (not including any contributor names and addresses or any information withheld from public inspection by the Secretary of the Treasury under 26 U.S.C. 6104)).

Attached.

**Return of Organization Exempt From Income Tax** 

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Department of the Treasury Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB N	lo, 1545	5-0047
A	<u> </u>	<b>A</b>
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<u>"</u>	UU	$\mathbf{\omega}$
One	n to P	ublic
	pecti	
	herm	

A	For the	2009 cal	endar year, or tax year beginning and endi	ng		
В	Check if applicable	e: Please	C Name of organization	D Em	ployer identific	cation number
	Addres	ss labelor	PET INDUSTRY JOINT ADVISORY COUNCIL			
	Name change	bino	Doing Business As			400898
	Initial retum	See	Number and street (or P.O. box if mail is not delivered to street address) Roon		ephone number	
	Termin ated		1140 131U SIKEET, M.M.   DOO	<u> </u>	202-	452-1525
	Ameno return		City or town, state or country, and ZIP + 4	G Gros	ss receipts \$	1,627,560.
	Applic	i	WASHINGTON, DC 20036	H(a) Is	s this a group re	
	pendir	F Nan	ne and address of principal officer:MICHAEL CANNING	j,	or affiliates?	Yes X No
			0 19TH STREET, NW SUITE 300, WASHINGTO			luded? LYes LNo
			us: X 501(c) ( 6 ) ◀ (insert no.) 4947(a)(1) or 527			list. (see instructions)
		te: ► N /			roup exemption	
		organizatio		_ Year of format	tion: 1975 N	State of legal domicile: DC
P	art II	Summ	ary	DEGRAN	IGEDIE D	D.M.
ė	1	Briefly des	scribe the organization's mission or most significant activities: PROMOTE	NESPON	SIBLE P	PCHID AND
& Governance			SHIP AND ANIMAL WELFARE, FOSTER ENVIRO			
eru	1		s box   if the organization discontinued its operations or disposed of		4 1	sets.
ő			f voting members of the governing body (Part VI, line 1a)			18
ಷ	1		f independent voting members of the governing body (Part VI, line 1b)			5
ties	I		ber of employees (Part V, line 2a)			0
Activities	1		ber of volunteers (estimate if necessary)			0.
Ac	I	-	s unrelated business revenue from Part VIII, column (C), line 12			0.
_	ь	ivet unreia	ated business taxable income from Form 990-T, line 34		or Year	Current Year
	8	Cantributi	ions and grants (Part VIII, line 1h)		33,563.	355,637.
že	I		service revenue (Part VIII, line 2g)		05,706.	1,267,775.
Revenue			nt income (Part VIII, column (A), lines 3, 4, and 7d)		6,198.	388.
æ			enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		13,473.	3,760.
	1		nue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		558,940.	1,627,560.
			d similar amounts paid (Part IX, column (A), lines 1-3)	-	4,425.	**
			paid to or for members (Part IX, column (A), line 4)		•	
v			other compensation, employee benefits (Part IX, column (A), lines 5-10)	_	262,022.	374,298.
Expenses	16a		nal fundraising fees (Part IX, column (A), line 11e)			
ē	b		traising expenses (Part IX, column (D), line 25)			
ιΩ	17		enses (Part IX, column (A), lines 11a-11d, 11f-24f)	1,4	435,212.	
	18	Total expe	enses. Add lines 13-17 (must equal Part IX, column (A), line 25)		701,659.	1,701,274.
	19	Revenue I	less expenses. Subtract line 18 from line 12	1	142,719.	-73,714.
Net Assets or Find Balances					of Current Year	End of Year
sets	20	Total asse	ets (Part X, line 16)		556,002.	645,895.
t As	21		lities (Part X, line 26)		502,159.	565,766.
25	22		s or fund balances. Subtract line 21 from line 20		153,843.	80,129.
II.	art II	Signa	ture Block			
		Under pena and comple	ifies of perjury, I declare that I have examined this return, including accompanying schedules and stat te. Declaration of preparer (other than officer) is based on all information of which preparer has any kno	ements, and to the owledge.	e best of my knowled	ge and belief, it is true, correct,
					1 11/2/	
Sig		Sign	nature of officer		///5//0	)
He	re	l' •	CHAEL CANNING, PRESIDENT			
			e or print name and title			
		Preparer's	Date	Check if	Prepar	er's identifying number
Pai	d	signature	<b>1</b>	self- employed	_ <u> </u>	structions)
	parer's	Firm's name			EIN 🕨	
Use	Only	yours if self-employ	L 1500 DECEMBER TOTAL STEE #000	ţ		
		address, an ZIP + 4	WASHINGTON, DC 20036		Phone no. 🕨 (	202) 296-3306
Ma	v the fi	<del>`</del>	s this return with the preparer shown above? (see instructions)		*************************	X Yes No
	,			4 1 -4		Eorm 990 (2000)

Υа	Mailia Statement of Program Service Accomplishments
1	Briefly describe the organization's mission: PIJAC PROMOTES RESPONSIBLE PET OWNERSHIP AND ANIMAL WELFARE, FOSTERS
	ENVIRONMENTAL STEWARDSHIP, AND ENSURES THE AVAILABILITY OF PETS. IT IS
	A NONPROFIT, SERVICE-ORIENTED ORGANIZATION COMPRISED OF MEMBERS WHO
	CARE ABOUT PETS AND THE PET INDUSTRY.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )
	GOVERNMENT AFFAIRS (LEGISLATIVE/REGULATORY) - THE COUNCIL MONITORS
	INTERNATIONAL, FEDERAL, STATE, AND LOCAL LEGISLATION AND REGULATIONS
	THAT MAY HAVE AN IMPACT ON THE PET INDUSTRY, AND SUBMITS COMMENTS AND
	TESTIMONY TO LEGISLATORS AND REGULATORS EXPLAINING INDUSTRY POSITION.
4b	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )
70	EDUCATION THROUGH ACCREDITATION/CERTIFICATION - TO INSTRUCT AND CERTIFY
	PET SHOP EMPLOYEES, BREEDERS, AND PET OWNERS ON THE CARE AND HANDLING
	OF PET ANIMALS.
4c	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )
40	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ ) PUBLIC RELATIONS — INFORMATION CLEARING HOUSE FOR MEDIA DATA AND
	STATISTICS INQUIRY.
	DIATIONICO INQUINT:
4d	Other program services. (Describe in Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ►\$

Form 990 (2009) PET INDUSTRY
Part IV Checklist of Required Schedules

		<b></b>	Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	. 1		X
2	is the organization required to complete Schedule B, Schedule of Contributors?		X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II			
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			1
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		1	
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	_ .	X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?  If "Yes," complete Schedule D, Part V	10		x
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X	10	<del>                                     </del>	1
	as applicable	11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI.			
0	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.			
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX.			
9	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
9	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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII.	12	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?  Yes No.			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A X			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	┼	X
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			,
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14t	<u> </u>	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			1
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	+	<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	1		V
	located outside the United States? If "Yes," complete Schedule F, Part III	16	<del> </del>	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			Х
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	-	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			v
10	1c and 8a? If "Yes," complete Schedule G, Part II	. 18	+	<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40		X
20	complete Schedule G, Part III  Did the organization operate one or more hospitals? If "Yes," complete Schedule H		-	X
20	Did the organization operate one or more hospitals: it in test, complete ocheone if			1 21

Form 990 (2009) PET INDUSTRY JOINT
Part IV Checklist of Required Schedules (continued)

E			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
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	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
	Section 501(c)(3) and 501(c)(4) 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		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial		-	
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	2010210411	X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
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		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	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		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O.	38	Х	

#### 009) PET INDUSTRY JOINT ADVISORY COUNCIL Statements Regarding Other IRS Filings and Tax Compliance Part V

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of				
	U.S. Information Returns. Enter •0• if not applicable	1a	12		
Ь		·····	0		
C			8.86		
_	(gambling) winnings to prize winners?		1c	X	500505000
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	<u> </u>	_		
	filed for the calendar year ending with or within the year covered by this return		5		
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax retu		2ь	X	. 8000 8000
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see				
3a	5			<u> </u>	X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		<u>3b</u>	ļ	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other			ĺ	
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a	30000000	X
Ь	If "Yes," enter the name of the foreign country:	****			
	See the instructions for exceptions and filling requirements for Form TD F 90-22.1, Report of Foreign	Bank and			
	Financial Accounts.		. San San		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?				X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans		<u>5</u> b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Reg	_			
	Tax Shelter Transaction?				
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to	he organization soli	cit		
	any contributions that were not tax deductible?		6a		<u> X</u>
Ь	If "Yes," did the organization include with every solicitation an express statement that such contribu				
	were not tax deductible?		6b		<del>anananaa</del>
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				
	provided to the payor?	***************************************	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v to file Form 8282?				
ď	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a benefit contract?	•	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont				
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required				
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-				
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting or				
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have exc				
	at any time during the year?		8	erana yanna ciyar	n masswerses
9	Sponsoring organizations maintaining donor advised funds.	************************			
а	Did the organization make any taxable distributions under section 4966?		9a	0000000000	alvangarsyans
ь	Did the organization make a distribution to a donor, donor advisor, or related person?				
10	Section 501(c)(7) organizations. Enter:	***************************************			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
а	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
_	amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	·	12a	990333953	190000044600f)
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
		· - · · · · · · · · · · · · · · · · · ·	Francisco	ليتنتنتنس	

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

Sec	tion A. Governing Body and Management						
		1	ł	ച വി	************	Yes	No
1a	Enter the number of voting members of the governing body	1a		18			
b	Enter the number of voting members that are independent			18			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any other	8			
	officer, director, trustee, or key employee?				2		X
3	Did the organization delegate control over management duties customarily performed by or under the	e dire	ect supervision				İ
	of officers, directors or trustees, or key employees to a management company or other person?				3		X
4	Did the organization make any significant changes to its organizational documents since the prior Fo	rm 99	90 was filed?		4		X
5	Did the organization become aware during the year of a material diversion of the organization's asset	ts? .		. <i></i> L	5		X
6	Does the organization have members or stockholders?				6	Х	
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	embei	rs of the				
	governing body?				7a	Х	
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other per	rsons	?	Г	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken	durin	g the year			800	
	by the following:		· .				
а	The governing body?				8a	X	remosamasi
	Each committee with authority to act on behalf of the governing body?				8b	Χ	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea				3.2		
_	organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9		X
202	tion B. Policies (This Section B requests information about policies not required by the Internal R				<u></u> -		
<i></i>	tion B. Follotes (This decision B requests information about policies not required by the internal t	CVCIIL	de Code.)			Yes	No
10-	Does the organization have local chapters, branches, or affiliates?			["	10a	103	X
	If "Yes," does the organization have written policies and procedures governing the activities of such				Iva		
U		-		į,	106		
44				г	10b	X	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before fi	iing ti	ne ionn?		11	~	
IIA	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		,	8	22000 40-	v	9000000
	Does the organization have a written conflict of interest policy? If "No," go to line 13			·····	12a	Х	
α	Are officers, directors or trustees, and key employees required to disclose annually interests that cou	_				Х	
	to conflicts?			·····  -	12b	Λ	
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If					v	
40	in Schedule O how this is done			······  -	12c	X	
13	Does the organization have a written whistleblower policy?				13	X	
14	Does the organization have a written document retention and destruction policy?				14	A	
15	Did the process for determining compensation of the following persons include a review and approve	•	independent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			P			
	The organization's CEO, Executive Director, or top management official				15a	Х	
Ь	Other officers or key employees of the organization			إ	15b	800 S 800 S 840	X
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment	with a				
	taxable entity during the year?			· · · · · · · · · · · · · · · ·	16a	55555550	X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate the organization of the policy or procedure requiring the organization to evaluate the organization of the policy of the organization of the policy of the polic	luate	its participation	ı			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org	aniza	tion's	8			
	exempt status with respect to such arrangements?				16b		
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ► NONE						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-1	r (501	(c)(3)s only) ava	ilable f	or		
	public inspection. Indicate how you make these available. Check all that apply.						
	Own website Another's website X Upon request						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, or	onflic	ct of interest pol	icy, and	d fina	ncial	
	statements available to the public.		•				
20	State the name, physical address, and telephone number of the person who possesses the books a	nd re	cords of the org	anizati	on: 🕨		
	PET INDUSTRY JOINT ADVISORY COUNCIL - 202-452-1525		J				
	1140 19TH ST. NW SUITE 300, WASHINGTON, DC 20036						

#### Form 990 (2009) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

Check this box if the organization did not compensate any current officer, director, or trustee.

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

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

(A)	(B)				2)	,		(D)	(E)	(F)
Name and Title	Average hours	/0	Position (check all that apply)		Reportable	Reportable	Estimated			
	per	<del> </del>	lecr		liiai	app	יוע) 	compensation from	compensation from related	amount of other
	week	Individual trustae or director				25		the	organizations	compensation
		255	rustae			eusat		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
		lad for	ional t		na/old	15 mg		(** 22 ********************************		and related
		Individ	Institutional trustee	E G	Кеу етріоуес	Highest compensated employee	Forme			organizations
FRANK L. KOCH										
CHAIRMAN	1.00	X		Х	<u> </u>		_	0.	0.	0.
CEDRIC DAMBY										
DIRECTOR	1.00	X						0.	0.	0.
BILL BRANT					İ					
DIRECTOR	1.00	X				_		0.	0.	0.
RUTH JEFFERS					l					
2ND VICE CHAIR	1.00	X		Х				0.	0.	0.
ROGER E. LAMBERT		l							_	_
DIRECTOR	1.00	X	<u> </u>			ļ		0.	0.	0.
CHUCK LATHAM		l								_
DIRECTOR	1.00	X						0.	0.	0.
MARK PUSTIZZI	1 00									
DIRECTOR	1.00	X			ļ	ļ		0.	0.	0.
JIM SEIDEWAND	1 00									
DIRECTOR	1.00	X	_			-		0.	0.	0.
GERRY P. TOMAS	1 00	ν,							0	
DIRECTOR JEFF SUTHERLAND	1.00	X						0.	0.	0.
1ST VICE CHAIR	1.00	X		Х				0.	0.	0.
JIM HEIM	1.00	^		^			_	U •	0.	<u> </u>
DIRECTOR	1.00	X						0.	0.	0.
BOB MERAR	1.00	1	-					· · · · · · · · · · · · · · · · · · ·		<u> </u>
DIRECTOR	1.00	x						0.	0.	0.
W. PAUL NORTON	1.00	11						<u> </u>	<u> </u>	
SECRETARY/TREASURER	1.00	X		Х				0.	0.	0.
BRUCE COOK			<del> </del>			<del> </del>				
DIRECTOR	1.00	X						0.	0.	0.
JOEL ADAMSON										
ASSOCIATION REPRESENTATI	1.00	X						0.	0.	0.
MARCIE WHICHARD			<del>                                     </del>		l	<b> </b>				
DIRECTOR	1.00	X						0.	0.	0.
JOE O'LEARY	* •									
DIRECTOR	1.00	X	<u></u>					0.	0.	0.
932007 02-04-10										Form <b>990</b> (2009)

Form **990** (2009)

								COUNCIL	23-74		98 Page <b>8</b>
Part VII Section A. Officers, Directors, Tre	ustees, Key E	mple	оуес	es, a	nd l	High	est	Compensated Employ	ees (continued)		
(A)	(B)			(0	C)			(D)	(E)		(F)
Name and title	Average	-		Pos				Reportable	Reportable		Estimated
	hours	(C	hecl	call	that	app	ly)	compensation	compensatio	n	amount of
	per	ğ						from	from related	_	other
	week	l g				Eg G	İ	the organization	organizations (W-2/1099-MIS		compensation from the
		aş.	nuste			Suad		(W·2/1099·MISC)	(** 2 1000 NIC	, ,	organization
		ᄩ	le lo		akold	8 8					and related
		ndivídual trustee or director	nstitutional trustee	) Jagger	Key employee	Highest compensated employee	Former				organizations
CANDY MOODE		Ē	-=	<u>                                     </u>	2	Z 2					
SANDY MOORE	1 00	Ι,,							·		0
DIRECTOR	1.00	X						0.		0.	0.
MARSHALL MEYERS	1 4 00			17							^
CEO AND GENERAL COUNSEL	4.00			X				0.		0.	0.
PAMELA STEGEMAN	10 00			7,				105 000			
PRESIDENT	40.00	<del> </del>		Х	<u> </u>	<u> </u>	L	185,000.		0.	0.
							<u> </u>			<del></del>	
								***		Ì	
				_	<u> </u>		<u> </u>				
d b Tabl	<u> </u>	L	L	L	<u> </u>	<b> </b>	L	185,000.	<u> </u>	0.	0.
Total     Total number of individuals (including but n					301/6		10 r	<del></del>	000 in roportable		<u></u>
compensation from the organization	or minico to ti	.030	11310	, u ai	5040	-) VVI		Cocived more than \$100	,000 iii leportabii	-	1
						- M*					Yes No
3 Did the organization list any former officer,											
line 1a? If "Yes," complete Schedule J for s	uch individual								***************************************		3 X
4 For any individual listed on line 1a, is the su									_		
and related organizations greater than \$150											4 X
5 Did any person listed on line 1a receive or a	·							_			5 X
the organization? If "Yes," complete Sched Section B. Independent Contractors	ule J for such j	bers	on .						*******************		5   X
Complete this table for your five highest co	mpeneated in	done	ndo	nt c	ontr	racto	rc f	that received more than	\$100 000 of som	concat	ion from
the organization.	inpensated in	Jeho	riide	iii C	OHI	aute	1131	that leceived thole thair	\$ 100,000 01 60111	benzar	ion nom
(A)								(B)		-	(C)
Name and business								Description of s	ervices	Col	mpensation
MEYERS & ALTERMAN, 1620 I		Γ,	NV	V S	STI	Ξ					
610, WASHINGTON, DC 20036								LEGAL SERVIC	ES		720,000.
JAMIE REASER, 1207 BULL Y	EARLING	3 I	RD,	,							
STANDARDSVILLE, VA 22973							_	CONSULTING			118,500.
			····								
							į				
2 Total number of independent contractors (i	ncluding but n	ot li	mite	d to	tho	se lis	stec	d above) who received n	nore than		
\$100,000 in compensation from the organization	zation 🕨					2					

P	art VII	Statement of Rever	nue					
	,				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a b c d e f	Related organizations  Government grants (contribut All other contributions, gifts, gran similar amounts not included abor Noncash contributions included in lines	1b 1c 1d ions) 1e ts, and ve 1f 1a-1f:\$	355,637.	355,637.			
Program Service Revenue		WHINDHOUTE BUILD	ROGRAM	Business Code 900099 900099	######################################	1,262,349.		
		Total. Add lines 2a-2f Investment income (including other similar amounts)	dividends, intere	est, and	1,267,775. 388.			388.
	4 5	Income from investment of tax Royalties	k-exempt bond p	proceeds >				
	b c	Gross Rents  Less: rental expenses  Rental income or (loss)  Net rental income or (loss)		<b></b>				
	b	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses		(ii) Other				
Other Revenue	b	Gross income from fundraising including \$	of 1c). See a					
ŧō .	9 a b c	Gross income from gaming ac Part IV, line 19	tivities. See a b ing activities					
	b	Gross sales of inventory, less and allowances	a b of inventory					
Anna Anna Anna Anna Anna Anna Anna Anna	b c	OTHER REVENUE		900099	3,760.	3,760.		
		Total. Add lines 11a-11d Total revenue. See instructions.	***************************************	<b>&gt;</b>	3,760. 1,627,560.	1,271,535.	0.	388.

### 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) but are not required to complete columns (B), (C), and (D)

	All other organizations must comp	lete column (A) but are	e not required to comp	olete columns (B), (C), a	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expen <b>s</b> es	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	185,000.			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	129,942.			
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	777 7770 777			
9	Other employee benefits	36,534.			
10	Payroll taxes	22,822.			
11	Fees for services (non-employees):				
а	Management				
Ь	Legal	720,000.			
c	Accounting	28,410.			
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	·····			
g	Other	166,562.			
12	Advertising and promotion	2,294.			
13	Office expenses	37,422.			
14	Information technology	15,075.			
15	Royalties				
16	Occupancy	94,570.			
17	Travel	45,728.			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	4 70"			
19	Conferences, conventions, and meetings	4,705.			
20	Interest	· · · · · · · · · · · · · · · · · · ·			
21	Payments to affiliates	2 760			
22	Depreciation, depletion, and amortization	2,768. 15,569.			
23	Insurance	13,309.			
24	Other expenses, Itemize expenses not covered above. (Expenses grouped together and labeled				
	miscellaneous may not exceed 5% of total				
	expenses shown on line 25 below.)	125 200			
a	LOCAL REGULATORY COUNSE MISCELLANEOUS	135,390. 17,694.			
þ	COPYING/PRINTING	17,184.			
c	MONITORING SERVICE	12,768.			
d	RENTAL EQUIPMENT	8,469.			
e		2,368.			
	All other expenses	1,701,274.	-		
25	Total functional expenses. Add lines 1 through 24f	1,/01,2/4.		***	
26	Joint costs. Check here if following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation		<u> </u>		5 000 (0000)

Form 990 (2009)
Part X Balance Sheet

Pa	πX	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			227,907.		226,218.
	2	Savings and temporary cash investments	*******	**************************	273,332.	2	278,663.
	3	Pledges and grants receivable, net		***************		3	
	4	Accounts receivable, net		*************	127,786.	4	116,794.
	5	Receivables from current and former officers, di	rectors	, trustees, key			
		employees, and highest compensated employed	es. Co	nplete Part II			
		of Schedule L				5	
	6	Receivables from other disqualified persons (as	define	d under section			
		4958(f)(1)) and persons described in section 495	58(c)(3)	(B). Complete			
		Part II of Schedule L				6	
ŝ	7	Notes and loans receivable, net		***************************************		7	
Assets	8	Inventories for sale or use		***************************************	4,320.	8	4,320. 1,925.
ď	9	Prepaid expenses and deferred charges			2,754.	9	1,925.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	23,637.			
	Ь	Less: accumulated depreciation	10b	6,432.	19,903.	10c	17,205.
	11	Investments - publicly traded securities		********************************		11	
	12	Investments - other securities. See Part IV, line 1	1	***************************************		12	
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets				14	770.
	15	Other assets. See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equa	al line (	34)	656,002.		645,895.
	17	Accounts payable and accrued expenses		*******************************	26,437.	17	10,933.
	18	Grants payable				18	
	19	Deferred revenue	• • • • • • • • •	***********	475,722.	19	554,833.
	20	Tax-exempt bond liabilities				20	
es	21	Escrow or custodial account liability. Complete f				21	
Liabilities	22	Payables to current and former officers, director					
iat		highest compensated employees, and disqualifi-	ed per	sons. Complete Part II			
_		of Schedule L				22	
	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities. Complete Part X of Schedule D			E00 1E0	25	F.C. 7.C.
	26	Total liabilities. Add lines 17 through 25			502,159.	26	565,766.
		Organizations that follow SFAS 117, check he	re 🚩	LA ∫ and complete			
Ses		lines 27 through 29, and lines 33 and 34.			57,391.		21 124
lan	27	Unrestricted net assets			96,452.	27	31,124.
Ва	28	Temporarily restricted net assets			70,432.	28	49,003.
Pun	29	· ·		ere 🕨 🔲 and		29	
ι <u>τ</u>		Organizations that do not follow SFAS 117, cl	теск п	ere 🕨 🔛 and			
Ş	20	complete lines 30 through 34.				30	
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or eq				30	****
ţ Ąš	31 32	Retained earnings, endowment, accumulated in				32	
Š	33	Total net assets or fund balances			153,843.	33	80,129.
	34	Total liabilities and net assets/fund balances			656,002.	34	645,895.
	1 34	TOTAL HADRILLES AND THE LASSELS/TUTIO DATANCES		**********************	050,002.	1 34	1 040,000.

Form 990 (2009)

Pa	rt XI Financial Statements and Reporting			
			Yes	Nο
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
<b>2</b> a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	. 2b	Х	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			
	review, or compilation of its financial statements and selection of an independent accountant?	. 2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			
	consolidated basis, separate basis, or both:			
	X Separate basis Consolidated basis Both consolidated and separate basis			
За	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?	. 3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit	1		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	. 3b	<u></u>	

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

#### **Political Campaign and Lobbying Activities**

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

OMB No. 1545-0047
2009
Open to Public

Schedule C (Form 990 or 990-EZ) 2009

Department of the Treasury Internal Revenue Service Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

- 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," to 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.

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

• 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," to Form 990, Part IV, line 5 (Proxy Tax), then

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

	501(c)(4), (5), or (6) organiza	tions: Complete Part III.			
Name of orga				•	loyer identification number
		USTRY JOINT ADV			23-7400898
Part I-A	Complete if the org	ganization is exempt un	der section 501(c	) or is a section 527 o	rganization.
1 Provide	a description of the organiz	zation's direct and indirect politi	ical campaign activities	s in Part IV.	
2 Political	expenditures			<b>&gt;</b> \$	
3 Volunte	er hours			**********	
Part I-B		ganization is exempt un			, some
		incurred by the organization un			
		incurred by organization manage			
	=	n 4 <b>9</b> 55 tax, did it file Form 4720	-		
4a Was a c	orrection made?		**************************	************************************	Yes No
	describe in Part IV.				
		janization is exempt un			
1 Enter th	e amount directly expende	d by the filing organization for s	ection 527 exempt fund	ction activities 🕨 \$	
		ization's funds contributed to c			
					WR
		. Add lines 1 and 2. Enter here		•	
		1120-POL for this year?			
		nployer identification number (E	•	-	• •
	•	he amount paid from the filing	•	· · · · · · · · · · · · · · · · · · ·	
		ivered to a separate political org I, provide information in Part IV	=	eparate segregated tund or	a political action committee
(FAC). II			1		
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political contributions received and
				filing organization's funds. If none, enter .0.	promptly and directly
			***		delivered to a separate
			į		political organization. If none, enter -0
				<del></del>	ii itolie, enter o.
			:		
~~~~~ <u>~</u>					
			And the second		
<del></del>					
			***		

932041 02-04-10

LHA

Schedule C (Form 990 or 990-EZ) 2009					400898 Page 2
Part II-A Complete if the org		mpi under sectio	n su i (c)(s) and ti	ied Form 5/06	
		W-4	<del></del>		
	ation belongs to an affi	illated group. nd "limited control" pro	visiono opply		
Lim	its on Lobbying Expe			(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infl	uence public opinion (	grass roots lobbying)			
<b>b</b> Total lobbying expenditures to infl		·- · -·	•		
c Total lobbying expenditures (add l	ines 1a and 1b)	*************			
d Other exempt purpose expenditur	es				
e Total exempt purpose expenditure	es (add lines 1c and 1c	±)			
f Lobbying nontaxable amount. Ent	er the amount from the	e following table in bot	h columns.		
if the amount on line 1e, column (a) (	or (b) is: The lob	bying nontaxable am	ount is:		
Not over \$500,000	20% of	the amount on line 1e.			
Over \$500,000 but not over \$1,00	0,000 \$100,00	00 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5		00 plus 10% of the exc			
Over \$1,500,000 but not over \$17	,000,000 \$225,00	00 plus 5% of the exce	ss over \$1,500,000.		
Over \$17,000,000	1,000,	000.			
		<del></del>			
g Grassroots nontaxable amount (er					** · ** · ** · ** · ** · ** · ** · **
h Subtract line 1g from line 1a. If zer					
i Subtract line 1f from line 1c. If zero					
j If there is an amount other than ze				_	¬.,
reporting section 4911 tax for this			······································		Yes No
	ations that made a s	eraging Period Under ection 501(h) election e instructions for line	do not have to com	="	
	Lobbying Expe	nditures During 4-Yea	ır Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	<b>(c)</b> 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))					
(100)00101101201010110101101					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount					
(150% of line 2d, column (e))					
f Graceroote lobbying expenditures					~

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 2009 PET INDUSTRY JOINT ADVISORY COUNCIL 23-740089

[Part II-B] Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 23-7400898 Page 3

## (election under section 501(h)).

		(	a)	(1	)
		Yes	No	Amo	ount
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	0.900			6.0
	or referendum, through the use of:				
	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
	Media advertisements?	<u></u>			
þ	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?	ļ			
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
į	Other activities? If "Yes," describe in Part IV	70000000000000000000000000000000000000		ļ	
j	Total. Add lines 1c through 1i		6.600		
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	Mindon Bassassassassassas	Same distribution		
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	<u> </u>	1	•	
2ar	Complete if the organization is exempt under section 501(c)(4), secti 501(c)(6).	on 501(c)	(5), or se	ection	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		X
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				Х
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?		3		Х
1	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa"Yes."  Dues, assessments and similar amounts from members				2,349.
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				,
_	expenses for which the section 527(f) tax was paid).				
а	Current year			135	3,390.
	Carryover from last year				
	Total			135	5,390.
	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				2,470.
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex		200000000000000000000000000000000000000		
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and				
	expenditure next year?	politica,	4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5	-117	7,080.
******	Supplemental Information		.,,,, +	-	
	olete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; a	nd Part II-B.	line 1i. Als	o, complete	this part
	y additional information.	1101 011 11 15	, 1110 111, 110	o, complete	tino part
), ai	y additional information.				
			<del>-</del> <del></del>		

#### Schedule D

Department of the Treasury Internal Revenue Service

(Form 990)

Supplemental Financial Statements
► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

PET INDUSTRY JOINT ADVISORY COUNCIL

Employer identification number 23-7400898

Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in		sed funds
	are the organization's property, subject to the organization's	_	
6	Did the organization inform all grantees, donors, and donor a	_	
•	for charitable purposes and not for the benefit of the donor of		-
	impermissible private benefit?		
Pa			
1	Purpose(s) of conservation easements held by the organization		
·	Preservation of land for public use (e.g., recreation or publi		storically important land area
	Protection of natural habitat	· —	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali-	fied conservation contribution in the form	of a conservation easement on the last
-	day of the tax year.		of a dolladivation dadding it of the last
	54) 51 t/15 tax your		Held at the End of the Tax Year
а	Total number of conservation easements		
b	Total acreage restricted by conservation easements		
ç	Number of conservation easements on a certified historic str		
ď	Number of conservation easements included in (c) acquired		
3	Number of conservation easements modified, transferred, re		
٠	vear >	isasse, skingdished, or terrimizes by th	o organization during the tax
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements i	-	
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above		***************************************
·	and section 170(h)(4)(B)(ii)?		
9	In Part XIV, describe how the organization reports conservati		
Ū	include, if applicable, the text of the footnote to the organiza	•	
	conservation easements.	tion 3 tindricial statements that describes	The organization a accounting to
Par	till Organizations Maintaining Collections o	f Art. Historical Treasures, or C	Other Similar Assets.
8.082533	Complete if the organization answered "Yes" to Form		
			~
1a	If the organization elected, as permitted under SFAS 116, no	ot to report in its revenue statement and b	palance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e		
	the footnote to its financial statements that describes these		
h	If the organization elected, as permitted under SFAS 116, to		nce sheet works of art, historical treasures
-	or other similar assets held for public exhibition, education, o		
	these items:	in research in familiarance of public solvie	o, provide the fellowing attributing to
	(i) Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tre		
~	the following amounts required to be reported under SFAS 1		3 piorido
а	Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
	Assets included in Form 990, Part X		
~			· · · · · · · · · · · · · · · · · · ·

Sche	edule D (Form 990) 2009 PET IND	<u>USTRY JOIN</u>	T AD	<u>VISORY</u>	COUNC	${ t IL}$	23-74	100898	3 Page <b>2</b>
Pa	rt III Organizations Maintaining C	Collections of A	rt, His	torical T	reasures,	or Othe	r Similar Asse	e <b>ts</b> (conti	nued)
3	Using the organization's acquisition, accessi	ion, and other record	ds, chec	k any of the	following that	at are a sig	nificant use of its	collection	n items
	(check all that apply):								
а	Public exhibition	d	ı 🔲	Loan or exc	change progr	ams			
b	Scholarly research	e	, 🔲	Other					
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explai	in how th	ney further	the organizat	ion's exem	ipt purpose in Pa	rt XIV.	
5	During the year, did the organization solicit of	r receive donations	of art, hi	storical trea	asures, or oth	er similar	assets		
	to be sold to raise funds rather than to be ma	aintained as part of t	the orga	nization's c	ollection?			Yes	No.
Pa	t IV Escrow and Custodial Arran	gements. Compl	ete if org	janization a	inswered "Ye	s" to Form	990, Part IV, line	9, or	
	reported an amount on Form 990, Pa	rt X, line 21.							
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for	contributio	ns or other a	ssets not i	ncluded		
	on Form 990, Part X?			************			<u> </u>	☐ Yes	No
b	If "Yes," explain the arrangement in Part XIV								
								Amount	
С	Beginning balance						1c		
	A 1 15:1								
е	Distributions during the year								
f	Ending balance								
2a	Did the organization include an amount on Fo							Yes	No
	If "Yes," explain the arrangement in Part XIV.							_	
	TV Endowment Funds. Complete i		swered	"Yes" to Fo	orm 990, Part	IV, line 10	١,		
	- · · · · · · · · · · · · · · · · · · ·	(a) Current year	ĺ	rior year	ſ		d) Three years back	(e) Four	years back
1a	Beginning of year balance		1-7.				,	100	
b	Contributions				- <del>                                     </del>			1000000	**************
	Net investment earnings, gains, and losses								
	Grants or scholarships	<u></u>			<del> </del>	******	******************		
	Other expenditures for facilities	<del></del>							
٠	and programs								
f	Administrative expenses								
g	End of year balance						************	······	<del></del>
2	Provide the estimated percentage of the year	r and balance held a						<u>: </u> :::::::::::::::::::::::::::::::::::	
a	Board designated or quasi-endowment								
b	Permanent endowment	%	/U						
c									
	Are there endowment funds not in the posse		ation the	at are held :	and administr	arad for th	a arabalzation		
ua	Are there endowment funds not in the posse	SSION OF THE ORGANIZA	ation the	at are nero a	and administr	sied for th	e organization	Г	Yes No
	(i) unrelated experientings								res Ivo
	(i) unrelated organizations							3a(i)	
h	(ii) related organizations								
	Describe in Part XIV the intended uses of the	•			************			. 3b	
Da.	TVI Investments - Land, Building				) Part Y line	10			<del></del>
<b>.</b>								/d\ Daal	
	Description of investment	(a) Cost or o basis (investr			t or other (other)	,	cumulated reciation	(d) Book	value
<b>-</b>	1		,,,,,,,	Vasis	(Strict)	Gebi	COLLECTION		
	Land								
b	Buildings								
	Leasehold improvements				23,637.	<del> </del>	6,432.	1 -	7,205.
a	Equipment	I		_		l	ひょせひん * 〕		11200.

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

Schedule D (Form 990) 2009

Part VII Investments - Other Securities. Sec	e Form 990, Part X, line	12.		
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valu Cost or end-of-year ma	
Financial derivatives				**************************************
Closely-held equity interests				
Other				
				· Affects
				<del> </del>
	<u> </u>			
Total (Cal /b) must a sud Form 200 Part V and (D) line 10 )				
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ► Part VIII Investments - Program Related. Se		10		
		13.	(c) Method of valu	ation:
(a) Description of investment type	(b) Book value		Cost or end-of-year ma	
	·			
				· · · · · · · · · · · · · · · · · · ·
			<u> </u>	
	**************************************			<del></del>
			····	· · · · · · · · · · · · · · · · · · ·
				······································
			-	
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶				
Part IX Other Assets. See Form 990, Part X, line				1
(a) l	Description			(b) Book value
<u> </u>				
	<del></del>			
	-		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
	·····			
A La PARTA CONTRACTOR AND AND AND AND AND AND AND AND AND AND				
		· · · · · · · · · · · · · · · · · · ·	<del></del>	
Total. (Column (b) must equal Form 990, Part X, col (B) line	15.)		<b>.</b>	
Part X Other Liabilities. See Form 990, Part X, I	ine 25.			~
1. (a) Description of liability		(b) Amount		
Federal income taxes				
			_	
The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s				
The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s			$\dashv$	
Total, (Column (b) must equal Form 990, Part X, col (B) line	25.)		$\dashv$	

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48. 932053 02-01-10

#### **SCHEDULE J** (Form 990)

### **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" to Form 990,

Part IV, line 23.

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990. ► See separate instructions.

Inspection

PET INDUSTRY JOINT ADVISORY COUNCIL

Employer identification number 23-7400898

Pa	rt I Questions Regarding Compensation				
·				Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,				
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.				
	First-class or charter travel Housing allowance or residence for personal use				
	Travel for companions Payments for business use of personal residence	,			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees				
	Discretionary spending account  Personal services (e.g., maid, chauffeur, chef)	30000 10000			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or	X Gabe			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain		1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,				
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?		2		
			8 (S)		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's	8			
	CEO/Executive Director. Check all that apply.				
	Compensation committee X Written employment contract				
	Independent compensation consultant  X Compensation survey or study				
	Form 990 of other organizations Approval by the board or compensation committee	ee l			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing				
-	organization or a related organization:				
а	Receive a severance payment or change-of-control payment?	P	4a	X	00000000000
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	; <del>-</del>	4b		X
	Participate in, or receive payment from, an equity-based compensation arrangement?		4c		X
-	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s				
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.				
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation				
_	contingent on the revenues of:				
а	The organization?	P.	5a	(4)	Negoeorges.
	Any related organization?		5b		
~	If "Yes" to line 5a or 5b, describe in Part III.	····			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation				
•	contingent on the net earnings of:				
а	The organization?	ľ	6a	1997-07934 1997-07934	55500000000000000000000000000000000000
	Any related organization?	·····	6b		
•	If "Yes" to line 6a or 6b, describe in Part III.		Ŭ.		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments		*******	(35)(36)(30)	presses.
•	not described in lines 5 and 6? If "Yes," describe in Part III	-	7		- Hard
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			~~····	<u> </u>
•	initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in				
•	Regulations section 53.4958-6(c)?		9		-
ιHΛ		hedule J (		. 0001	2000

Schedule J (Form 990) 2009 PET INDUSTRY

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	9	Q	(E)	(F)
(A) Name		(i) Base	(ii) Bonus &	(iii) Other	Retirement and other deferred	Nontaxable benefits	Total of columns (B)(i)-(D)	Compensation reported in prior
		compensation	compensation	reportable compensation	compensation	,,		Form 990 or Form 990-EZ
	0	185,000.	0	0	0	0	185,000.	0
PAMELA STEGEMAN	€	0	0	0	0	0	0	0
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Schedule J (Form 990) 2009

#### **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. ► See separate instructions.

OMB No. 1545-0047

2009

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number 23-7400898

Part I Excess Benefit	t Transactio	ns (sect	on 501(c)(3) and section on Form 990, Part IV,	n 501(c)(4) d	organizatio			V, line 40				
1					,				·	(c) Con	rected?	
(a) Name of di	squalified perso	on		(b) D	escription	of transa	ction			Yes No		
											ļ	
					~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~							
2 Enter the amount of tax imp		=	= =	=	<del>-</del>	_						
3 Enter the amount of tax, if a	any, on line 2, a	bove, rein	nbursed by the organiza	ation		• • • • • • • • • • • • • • • • • • • •		. ▶ \$.				
Part II Loans to and/o	r From Into	roctod	Dorcone									
22802201002322000				than 00 and	000 5	7 0-41	/ li 04	3_				
(a) Name of interested	(b) Loan to		" on Form 990, Part IV,	[		1	ine so	(f) App	roved	(a) \	ritten	
person and purpose	the organi		(c) Original principal amount	(d) Balar	ice due		ault?	by box	ard or	1	ment?	
	To	From	-	j		Yes		Yes	No	Yes	No	
	10	110111				103	No	103		163		
	<del>                                     </del>					<del> </del>		1				
	1					<del>                                     </del>						
	1			····								
	1											
otal			<u>▶</u> \$									
Part III Grants or Assi	stance Ben	efiting I	nterested Person	s.								
Complete if the org	anization answ	ered "Yes	on Form 990, Part IV,	line 27.								
(a) Name of interested			(b) Relationship between	een interest	ed person	and				d type o	f	
			the or	ganization					assistan	ce		
								<b></b>				
											····	
				****		····						
			l4									
and the second second		_	Interested Person									
32.70			on Form 990, Part IV,				1			(e) Sha	aring of	
(a) Name of interested	person	(b)	Relationship between in person and the organize		(c) Ame transa		(d)	Descript transacti		organiz	zation's	
			person and the organiz	ation	(Idilbo	CHOH		liansacii	OII		nues?	
ANDOUNT MUSICA	<del></del>	OE	TTC TO		720	000	יממ	NITDE	D LE	Yes	No X	
MARSHALL MEYERS		Of.	FICER		/20	,,000	PK	VIDE	מיד ת			
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LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2009

#### **SCHEDULE 0**

(Form 990)

#### Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

PET INDUSTRY JOINT ADVISORY COUNCIL

Employer identification number 23-7400898

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
ENSURE THE AVAILABILITY OF PETS. IT IS A NONPROFIT, SERVICE-ORIENTED
ORGANIZATION COMPRISED OF A DIVERSE MEMBERSHIP REPRESENTING ALL
SEGMENTS OF THE PET INDUSTRY AND PET OWNERS WHO CARE ABOUT PETS AND THE
PET INDUSTRY.
FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION HAS DUES PAYING
MEMBERS WITH VOTING RIGHTS.
FORM 990, PART VI, SECTION A, LINE 7A: CURRENT MEMBERS OF THE ORGANIZATION
HAVE THE RIGHT TO VOTE FOR MEMBERS OF THE BOARD OF DIRECTORS.
FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS CIRCULATED TO THE
ENTIRE BOARD OF DIRECTORS FOR REVIEW PRIOR TO FILING.
FORM 990, PART VI, SECTION B, LINE 12C: EACH MEMBER OF THE BOARD OF
DIRECTORS, OFFICER, AND KEY EMPLOYEE MUST REVIEW THE CONFLICT OF INTEREST
POLICY AND SUBMIT A STATEMENT ANNUALLY.
FORM 990, PART VI, SECTION B, LINE 15A: THE FINANCE AND AUDIT AND
COMPENSATION COMMITTEES REVIEW ASAE COMPENSATION SURVEYS AND RECOMMEND A
COMPENSATION AMOUNT FOR THE PRESIDENT. THE BOARD THEN REVIEWS AND APPROVES
THE AMOUNT.

#### **SCHEDULE 0**

### Supplemental Information to Form 990

(Form 990)

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009 Open to Public Inspection

Name of the organization

PET INDUSTRY JOINT ADVISORY COUNCIL

Employer identification number 23-7400898

OF IN-PERSON REQUESTS. REQUESTS RECEIVED BY WRITTEN, PHONE, FAX OR E-MAIL
MEANS WILL BE HONORED BY DIRECTING THE REQUESTORS TO OUR WEBSITE. THE
CURRENT FORM 990 AS WELL AS FOR THE PREVIOUS FIVE YEARS (NOT INCLUDING
SCHEDULE B), CONFLICT OF INTEREST POLICY, AND ANNUAL FINANCIAL STATEMENT,
WILL BE POSTED ON THE ORGANIZATION'S WEBSITE. A REASONABLE COPYING FEE
SHALL BE ASSESSED PLUS ACTUAL POSTAGE FOR MULTIPLE COPIES REQUESTED FROM
THE SAME INDIVIDUAL OR RELATED GROUP OF INDIVIDUALS.
PIJAC'S ARTICLES OF INCORPORATION, BY-LAWS, FINANCIAL STATEMENTS, FORM 990,
AND POLICY POSITIONS AND PROCEDURES RELATED TO CONFLICT OF INTEREST,
COMPENSATION, AND OTHER POLICIES RELATED TO GOVERNANCE ARE AVAILABLE FOR
PUBLIC INSPECTION AT THE ORGANIZATION'S HEADQUARTERS IN WASHINGTON, D.C.
PLANS ARE UNDERWAY TO INCLUDE SOME OF THESE DOCUMENTS ON THE ORGANIZATION'S
WEBSITE IN THE SECTION DESCRIBING GOVERNANCE.
THE ORGANIZATION'S OVERSIGHT PROCESS HAS NOT CHANGED SINCE THE PRIOR
YEAR.
SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:
(A) NAME OF PERSON: MARSHALL MEYERS
(D) DESCRIPTION OF TRANSACTION: PROVIDED LEGAL SERVICES THROUGH LAW FIRM
AT WHICH THE INTERESTED PERSON WAS A PARTNER.

Form **8868** (Rev. April 2009)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

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	( Jan	<b>D</b>		\154 <b>5</b> 709
		M'		. 10431109
		11		VIII

ıf y	rou are filing for an Automatic 3-Month Extension, complete only Part I and check this box	s form).		<b>&gt;</b> X
Do no	ot complete Part II unless you have already been granted an automatic 3-month extension ол а previously f	iled For	m 8868.	<del>* '                                     </del>
Par	Automatic 3-Month Extension of Time. Only submit original (no copies needed).			
A cor Part I	poration required to file Form 990-T and requesting an automatic 6-month extension - check this box and cor only	nplete		▶ □
to file	her corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request a income tax retums.			
noted (not a you n	tronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extensi below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electron automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or con nust submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic forms and click on e-file for Charities & Nonprofits.	ically if a	(1) you want ti ted Form 990	ne additional
Type print	l l	Emplo	oyer identific	ation number
	PET INDUSTRY JOINT ADVISORY COUNCIL	2:	3-74008	98
File by due dat filing yo	te for Number, street, and room or suite no. If a P.O. box, see instructions.			
return. instruct	589			
——————————————————————————————————————	Form 990	227 6069 870	C 20036	
•  f 1	the organization does not have an office or place of business in the United States, check this box	nis is for	the whole gro	up, check this
1	I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time un  AUGUST 15, 2010 , to file the exempt organization return for the organization named is for the organization's return for:  X calendar year 2009 or tax year beginning , and ending		The extension	
2	If this tax year is for less than 12 months, check reason: Initial return		Change in acc	ounting period
3a	If this application is for Form 990·BL, 990·PF, 990·T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	За	\$	
b	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated			
	tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	
C	Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c		N/A
Caut	tion. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Forr	n 8879-l	EO for paymer	nt instructions.

HA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 4-2009)

Form 8868 (Rev. 4-2009)	Page 2
• if you are fling for an Additional (Not Automatic) 3-Month Extension, complete only Parl II and check this box	
Note. Only complete Part II If you have already been granted an automatic 3-month extension on a previously filed Form 8	3868.
If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).	
Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies n	eeded).
Type or Name of Exempt Organization Empl	oyer identification number
nulet	
PET INDUSTRI DOINT ADVISORY COUNCIL	3-7400898
File by the extended due date for ling the University of the extended due date for ling the University of the extended due date for ling the University of the extended due date for ling the University of the extended due date for ling the University of the extended due to the extended	RS use only
return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions.  WASHINGTON, DC 20036	
Check type of return to be filed (File a separate application for each return):	
X Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A Fo	rm 5227
Form 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720 Fo	rm 6069
STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously file	d Form 8888.
PET INDUSTRY JOINT ADVISORY COUNCIL	
• The books are in the care of • 1140 19TH ST. NW SUITE 300 - WASHINGTON, DO	~ 20026
Telephone No. ▶ 202-452-1525 FAX No. ▶	20030
If the organization does not have an office or place of business in the United States, check this box	
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for	
box ► . If it is for part of the group, check this box ► and attach a list with the names and EINs of all members.	the whole group, check this
4 I request an additional 3-month extension of time until NOVEMBER 15, 2010	sta tile exterision is tot.
5 For calendar year 2009, or other tax year beginning, and ending	
	Change in accounting period
7 Stata in detail why you need the extension	- mange in easonming police
ADDITIONAL TIME IS NECESSARY TO ACCUMULATE INFORMATION REC	QUIRED IN ORDER
TO FILE A COMPLETE AND ACCURATE RETURN.	
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	
nonrefundable credits. See instructions.	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated	
tax payments made. Include any prior year overpayment allowed as a credit and any amount paid	
previously with Form 8868.	\$
c Balance Duc. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit	•
with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. 8c	\$ N/A
Signature and Verification	
Under penalties of perjury, 100clare that I have examined this form, including accompanying schedules and statements, and to the best of it is true, correct, and complete, and that lam authorized to prepare this form.	•
Signature > Muches Alcolard Title > CHO VP Gout Affairs Date	► Acc. 16, 20/∂ Form 8868 (Rev. 4-2009)
	Form 8868 (Rev. 4-2009)

923832 05-26-09 Client Copy

Department of the Treasury Internal Revenue Service

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

benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047 Open to Public inspection

A	For the	2010 calendar year, or tax year beginning and ending	3	The state of the s
В	Check if	C Name of organization	D Employer identifi	ication number
	applicabl	et.	, , , , , , , , , , , , , , , , , , , ,	
	Addre chang	PET INDUSTRY JOINT ADVISORY COUNCIL		
F	Name chang		23-7	400898
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)  Room/s		
F	Termin	'		452-1525
F	lated Amend return		G Gross receipts \$	1,455,312.
F	Applic		H(a) Is this a group r	
	pendi	F Name and address of principal officer:MICHAEL CANNING	for affiliates?	Yes X No
		1140 19TH STREET, NW SUITE 300, WASHINGTON	T	
<u> </u>	Τον.ον.	empt status:	<del></del>	a list. (see instructions)
		e: $\triangleright N/A$	H(c) Group exemption	· ·
				M State of legal domicile: DC
	art I	Summary	Tear of formation: 13 7 5 1	or otate or regar domicile. De
		Briefly describe the organization's mission or most significant activities: PROMOTE	RESPONSTBLE P	) हाग
Governance	,	OWNERSHIP AND ANIMAL WELFARE, FOSTER ENVIRON	MENTAL STEWAR	DSHIP, AND
nar		Check this box if the organization discontinued its operations or disposed of		
Ve		•	<u> </u>	14
Ĝ				14
ර		Number of independent voting members of the governing body (Part VI, line 1b)		8
<u>ti</u>		Total number of individuals employed in calendar year 2010 (Part V, line 2a)		0
Activities &		Total number of volunteers (estimate if necessary)		
Ą		Total unrelated business revenue from Part VIII, column (C), line 12		
	b	Net unrelated business taxable income from Form 990-T, line 34	T	
	_	0	Prior Year 355,637.	266,002.
ne		Contributions and grants (Part VIII, line 1h)	1,267,775.	
Revenue		Program service revenue (Part VIII, line 2g)	388.	<del></del>
Re		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,760.	
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,627,560.	
_		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,027,300.	
	}	Grants and similar amounts paid (Part IX, column (A), lines 1·3)	0.	
	1	Benefits paid to or for members (Part IX, column (A), line 4)	374,298.	
Expenses	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	
ē		Professional fundraising fees (Part IX, column (A), line 11e)  Total fundraising expenses (Part IX, column (D), line 25)	J	V .
ᄶ			1,326,976.	820,131.
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	1,701,274.	**
		Total expenses. Add lines 13·17 (must equal Part IX, column (A), line 25)	<73,714.	
- 8	19	Revenue less expenses. Subtract line 18 from line 12	<del> </del>	1
Net Assets or Fund Balances		T. I	Beginning of Current Year 645,895.	End of Year 749,027.
SSE	20	Total assets (Part X, line 16)	565,766.	
a te	21	Total liabilities (Part X, line 26)	80,129.	
-a	22 art II	Net assets or fund balances. Subtract line 21 from line 20	00,129.	119,721.
		<u> </u>	totomonto and to the heat of m	ov knowledge and belief it is
		ities of perjury, I declare that I have examined this return, including accompanying schedules and si		ily killowledge and belief, it is
true, corre		t, and complete. Declaration of preparer (other than officer) is based on all information of which pre	10/24	111
٠.		Signature of officer	Date	<i>[-1]</i>
Sig		,	Date	
Her	re	MICHAEL CANNING, PRESIDENT Type or print name and title		
			Date Check	PTIN
De!		Print/Type preparer's name  MCOLLA DE PRENNIAN LLD  Preparer's signature	Chalest II	<del></del>
Paid		MCQUADE BRENNAN, LLP		yeu
	parer	Firm's name MCQUADE BRENNAN, LLP	Firm's EIN ▶	
use	Only	Firm's address 1730 RHODE ISLAND AV, NW, #800	,	2021 206 2206
		WASHINGTON, DC 20036	Phone no. (	202) 296–3306
May	y the IF	S discuss this return with the preparer shown above? (see instructions)		X Yes No

Is the organization described in section 501(a)(3) or 4947(a)(1) (other than a private foundation?	Pa	rt IV Checklist of Required Schedules			age <b>c</b>
It the organization described in section 50 (c)(3) or 4947 (a)(1) (other than a private foundation)?  If "Yes," complete Schedule D. April 10 (a) or 4947 (a)(1) (other than a private foundation)?  If "Yes," complete Schedule D. April 10 (a) or 4947 (a) (a) or 4947 (a) o				Yes	No
# "Yes," complete Schedule A. Schedule B. Schedule of Contributors?    1	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		103	110
2 Is the organization required to complete Schedule 9, Schedule 9 Contributors?  3 Did the organization engulared to complete Schedule 9, Schedule of Contributors?  3 LX  3 LX  3 LX  4 Sections 07(6)(8) organizations. Did the organization engage in lobbying activities, or have a section 501(b) election in effect during the tax year? If "Yes," complete Schedule C, Part II.  5 Is the organization assection 501(c)(6), or			1		х
3 Dit the organization engage in direct or indirect political earnpaign activities on behalf of or in opposition to candidates for public officer if "Yes," complete Schedule C, Part I	2	is the organization required to complete Schedule B. Schedule of Contributors?		Х	
public office? If "Yes," complete Schedule C, Part I  Section 501((S)) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part III.  Is the organization a section 501(e)(l), 501(e)(l), 501(e)(l) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-192 II" Yes," complete Schedule C, Part III.  Is the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts If II" Yes, "complete Schedule D, Part II.  Is the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic and areas, or historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.  Is Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.  If the organization is nawer to any of the following questions is "Yes," then complete Schedule D, Part V V.  If If the organization is answer to any of the following questions is "Yes," then complete Schedule D, Part V V.  It Is 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 VV.  It Did the organization report an amount for investments - other securities in Part X, line 19 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XV.  It Did the organization report an amount for investments - program related in Part X, line 19 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X X.  It Did the organi	3				
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(n) election in effect during the tax year? If "Yes," complete Schedule Q, Part II is the organization assection 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 91-91? If "Yes," complete Schedule Q, Part II is Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II is Did the organization report an amount in Part X, line 21; serve as a custodian for amounts asset? If "Yes," complete Schedule D, Part II Is Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide oradit consessing, debt management, codel the peak, or debt negatives or Press, "complete Schedule D, Part II Is Did the organization, directly or through a related organization, hold assets in term, permanent, or quasiendowments? If "Yes," complete Schedule D, Part IV Is If the organization report an amount for fand, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part IV Is Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI Is Did the organization report an amount for investments - program related in Part X, line 10? If "Yes," complete Schedule D, Part VI Is Did the organization report an amount for investments - program related in Part X, line 10? If "Yes," complete Schedule D, Part X II Is Did the organization report an amount for or investments - program related in Part X, line 10? If "Yes," complete Schedule D, Part X II Is Did the organization report an amount for or investments - program related in Part X, line 10? If "Yes," complete Schedule D, Part X II Is Did the organization report an a			3		X.
during the tax year? If "Yes," complete Schedule C, Part II  Is the organization as section 501(c)(6, 901(c)(6)) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 88-19? If "Yes," complete Schedule C, Part III  Did the organization maintain any doors advised funds or any similar funds or accounts where donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II  Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historical areas, or historical structures? If "Yes," complete Schedule D, Part III  Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide organization specific or through a related organization, hold assets in term, permanent, or quasiendowments? If "Yes," complete Schedule D, Part IV  Did the organization asswer to any of the following questions is "Yes," then complete Schedule D, Part VI, if the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI, a bid 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, a bid the organization report an amount for other liabilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XII  Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X X, III  Did the organization report an	4				
5 is the organization a section 501 (c)(4), 501 (c)(5), organization that receives membership dues, assessments, or similar amounts as diffined in Revenue Procedure 98 119 / "Yes," complete Schedule C, Part III			4		
similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III  Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I    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    Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II    Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II    Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II    Did the organization meport an amount in Part X, line 21; serve as a oustodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV    Did the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V    Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V    Did the organization report an amount for investments - other securities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X    Did the organization report an amount for investments - storgarm related in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X    Did the organization report an amount for investments or the tax year? If "Yes," complete Schedule D, Part X    Did the organization report an amount for oth	5				
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c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  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? If "Yes," complete Schedule D, Part IX.  e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.  11d X  11d X  11d X  11d X  11d X  11d X  11d Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.  11e Y  11f bid the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.  11d X  12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X, IX, II, and XIII Schedule D, Part X, IX, II, and XIII Schedule D, Part X, IX, II, and XIII Schedule D, Part X, IX, II, and XIII Schedule D, Part X, IX, IX, and XIII Schedule D, Part X, IX, IX, and XIII Schedule D, Part X, IX, IX, and XIII Schedule D, Part X, IX, IX, IX, and XIII Schedule D, Part X, IX, IX, and XIII Schedule D, IX, IX, IX, IX, IX, IX, IX, IX, IX, IX			116		y.
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operate one or more hospitals must attach audited financial statements (see instructions)	_		20Ъ		

3.33	One Chast of Nequired Ochedules (contained)	· · · · · · · · · · · · · · · · · · ·	,	,
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			4.7
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
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	23		<u>X</u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		X
b	The state of the s	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
<b>2</b> 5a	Section 501(c)(3) and 501(c)(4) 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		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u>X</u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		_X_
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		<u>X</u>
þ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	X	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		_X_
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		_X_
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		<u>X</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
а	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 Yes X No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		ļ	
	If "Yes," complete Schedule R, Part V, line 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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	

Pa	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			
	and the second s		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	8		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	0		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		,
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 return2a	8		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)		3000	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in 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		Х
b	If "Yes," enter the name of the foreign country: ▶		8 20	
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solic	it		
	any contributions that were not tax deductible?	6a	Х	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b	X	
7	Organizations that may receive deductible contributions under section 170(c).			
а	Oid the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the	payor? <b>7a</b>		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	4		<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as require	1		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 109	8-C? 7h	0 20200000000	00000000000
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	0.000000		
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the ye	ar?   8	5057522	10000000
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?		ļ	ļ
	Did the 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			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders 11a			
D	Gross income from other sources (Do not net amounts due or paid to other sources against			
10.	amounts due or received from them.)  Section 4947(a)(1) non-exempt charitable trusts. is the organization filing Form 990 in lieu of Form 1041?	100	P 379 84.5.18	NASHS
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a		<b></b>
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a	5 P. S. S. S. S. S. S. S. S. S. S. S. S. S.	100000000
a	Note. See the instructions for additional information the organization must report on Schedule O.			
h	Enter the amount of reserves the organization is required to maintain by the states in which the			
U	organization is licensed to issue qualified health plans			
n	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	1 (2010) 570 (550)	X
	the distriction in the state of	1.0	<del></del>	<u> </u>

Form 990 (2010)

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

	Check if Schedule O contains a response to any question in this Part VI	***********			X
<u>Sec</u>	tion A. Governing Body and Management				·
				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	14		
b	Enter the number of voting members included in line 1a, above, who are independent		14		100
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship officer, director, trustee, or key employee?	=	2		X
3	Did the organization delegate control over management duties customarily performed by or under the				
Ū	of officers, directors or trustees, or key employees to a management company or other person?	· ·	3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 9				X
5	Did the organization become aware during the year of a significant diversion of the organization's ass				X
6	Does the organization have members or stockholders?			Х	
7a	Does the organization have members, stockholders, or other persons who may elect one or more me				<u> </u>
	governing body?		. 7a	Χ	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other personal by members are considered as a subject to approval by members are considered as a subject to approval by members are considered as a subject to approval by members are considered as a subject to approval by members are considered as a subject to approval by members are considered as a subject to approval by members are considered as a subject to approval by members are considered as a subject to approval by members are considered as a subject to approval by members are considered as a subject to approval by members are considered as a subject to approval by members are considered as a subject to approval by members are considered as a subject to approval by members are considered as a subject to approval by members are considered as a subject to approval by members are considered as a subject to approval by members are considered as a subject to approval by members are considered as a subject to approval by members are considered as a subject to approval by the subject to approval by members are considered as a subject to approval by members are considered as a subject to approval by members are considered as a subject to approval by the sub				Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken of	during the year	1200		
	by the following:				
а	The governing body?	*******************************	8a	X	
þ	Each committee with authority to act on behalf of the governing body?		8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	ched at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue Code.)			
			(	Yes	No
	Does the organization have local chapters, branches, or affiliates?		10a		X
þ	If "Yes," does the organization have written policies and procedures governing the activities of such				
	and branches to ensure their operations are consistent with those of the organization?			v	
	Has the organization provided a copy of this Form 990 to all members of its governing body before fill	ing the form?	11a	X	940300 GT
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		40-	X	
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13		12a	Λ	<u> </u>
D	Are officers, directors or trustees, and key employees required to disclose annually interests that cou		12b	Х	
c	to conflicts?  Does the organization regularly and consistently monitor and enforce compliance with the policy? If "		120		
·	in Schedule O how this is done		12c	Х	
13	Does the organization have a written whistleblower policy?			X	
14	Does the organization have a written document retention and destruction policy?			X	
15	Did the process for determining compensation of the following persons include a review and approva			200	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	,			
а	The organization's CEO, Executive Director, or top management official		15a	X	
b	Other officers or key employees of the organization	~~************************************	15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen	nent with a			
	taxable entity during the year?		16a	3050005018	X
ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eval				
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the orga			\$30,000	
	exempt status with respect to such arrangements?	<u> </u>	16b		
	tion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filled NONE	/FOX/-3/01- 53 3			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T	(out(c)(3)s only) availa	adie för		
	public inspection. Indicate how you make these available. Check all that apply.				
10	Own website Another's website X Upon request	anflict of intercet nelle	u and fina	neial	
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, constatements available to the public.	ominica or interest polic	y, and ima	Heidl	
20	State the name, physical address, and telephone number of the person who possesses the books ar	nd records of the orga	nization. 🖻		
	PET INDUSTRY JOINT ADVISORY COUNCIL - 202-452-1525	.2 ,500,00 or the orga			
	1140 19TH ST. NW SUITE 300, WASHINGTON, DC 20036				

23-7400898

## Form 990 (2010) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
   Enter -0- in columns (D), (E), and (F) if no compensation was paid.
   List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- · List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization. more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A)	(B)			(0	2)			(D)	(E)	(F)
Name and Title	Average		Pos					Reportable	Reportable	Estimated
	hours per week (describe hours for related organizations in Schedule	rustee or director	nstitutional trustee			Highest compensated O O employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
	O)	ā	Insti	Officer	Key	High	ғоттег			Organizations
FRANK L. KOCH										
1ST VICE CHAIR	1.00	X		X				0.	0.	0
CEDRIC DAMBY										
SECRETARY/TREASURER	1.00	X		Х				0.	0.	0 .
BILL BRANT			ł							
DIRECTOR	1.00	Х						0.	0.	0
RUTH JEFFERS								_	_	
DIRECTOR	1.00	X						0.	0.	0
ROGER E. LAMBERT		ļ						_		
DIRECTOR	1.00	X						0.	0.	0
MICHAEL PETERSON									_	
DIRECTOR	1.00	Х						0.	0.	0
MARK PUSTIZZI								_		
DIRECTOR .	1.00	Х						0.	0.	0
JIM SEIDEWAND									_	_
2ND VICE CHAIR	1.00	X		Х				0.	0.	0
GERRY P. TOMAS										_
DIRECTOR	1.00	X						0.	0.	0
JIM HEIM									_	
CHAIRMAN	1.00	X		Х				0.	0.	0
BOB MERAR									_	_
DIRECTOR	1.00	X						0.	0.	0
BRUCE COOK									_	
DIRECTOR	1.00	X						0.	0.	0 .
MARCIE WHICHARD								_	_	_
DIRECTOR	1.00	Х						0.	0.	0
JOE O'LEARY									_	_
DIRECTOR	1.00	X						0.	0.	0
SANDY MOORE								_	_	_
DIRECTOR	1.00	X						0.	0.	0
MARSHALL MEYERS									_	_
CEO AND GENERAL COUNSEL	4.00			Х				133,333.	0.	0.
MICHAEL CANNING										
PRESIDENT	40.00			Х				53,833.	0.	0

Part VII Section A. Officers, Directors, Tru	ıstees, Key Er	nple	yee	s, a	nd l	Hìgh	est	Compensated Employ	ees (continued)		
(A)	(B)	<u> </u>		(0				(D)	(E)	$\top$	(F)
Name and title	Average	١.		Posi				Reportable	Reportable		Estimated
	hours per week	(C	heck	( all t	that	app	ly)	compensation	compensation		amount of
	(describe	탏						from the	from related organizations		other compensation
	hours for	or oile				pate		organization	(W-2/1099-MIS		from the
	related	trustee or director	institutional trustee		भ्र	Suadu		(W-2/1099-MISC)	·		organizatioh
	organizations in Schedule	gal t	lifona	ا ا	Key employee	st con	75				and related
	O)	Individual t	Instit	Officer	Keyer	Highest compensated employee	<sub>F</sub> оттег				organizations
MICHAEL MADDOX		-									
VICE PRESIDENT OF GOV'T AFFAIRS/GENE	40.00					Х		103,333.		0.	0.
						-					
										Ì	
		ļ				ļ				-	
										-	V=000000000000000000000000000000000000
										,	
									***************************************	$\top$	
											-
						<u> </u>		000 400			
1b Sub-total						_		290,499.		0.	0.
c Total from continuation sheets to Part Vi	•							290,499.		0.	0.
d Total (add lines 1b and 1c)							no r				<u></u>
compensation from the organization		.000	11011			۰, ۰۰۰			,000 iii 12portabio		3
											Yes No
3 Did the organization list any former officer,	director or tru	stee	, ke	y em	plo	yee,	or l	highest compensated er	nployee on	8	
line 1a? If "Yes," complete Schedule J for s								***************************************			3 X
4 For any individual listed on line 1a, is the su	•							·			4 X
and related organizations greater than \$150 5 Did any person listed on line 1a receive or a											4 X
rendered to the organization? If "Yes," com	•				-			-			5 X
Section B. Independent Contractors										· · · · · · · · · · · · · · · · · · ·	
1 Complete this table for your five highest co	mpensated inc	depe	ende	ent c	onti	racto	rs t	that received more than	\$100,000 of comp	ensat	tion from
the organization.											~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
(A) Name and business	address							(B) Description of s	ervices	Co	(C) mpensation
MEYERS & ALTERMAN, 1620 I		r .	NU	V 8	<u>ייף</u>	F:			0.71000		препваден
610, WASHINGTON, DC 20036		_ ,	.,,	•	,	ш		LEGAL SERVIC	ES		240,000.
JAMIE REASER, 1207 BULL		3 I	RD,								
STANDARDSVILLE, VA 22973								CONSULTING			150,000.
MARSHALL MEYERS, 1620 L 8		N	<b>7</b> S	STE	2						
610, WASHINGTON, DC 2003	5							LEGAL SERVIC	ES		133,333.
											· · · · · · · · · · · · · · · · · · ·
									***************************************		
2 Total number of independent contractors (i	ncludina but n	ot li	mite	d to	tho	se lis	stec	d above) who received m	ore than		
\$100,000 in compensation from the organic	-	••				ว ี		,			

			JOINT AD	VISORY COU	NCIL	23-7400898 Page <b>9</b>			
Pa	rt VII	II Statement of Rever	nue						
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions, gifts, grant similar amounts not included above	1b 1c 1d 1d 1s, and	266,002.					
inde	g	Noncash contributions included in lines			266 002				
Program Service C Revenue		CERTIFICATION P	ROGRAM	Business Code	266,002. 1,177,267. 6,856.				
Progra Re			nue ,,,,,,,	<b>&gt;</b>	1,184,123.				
	3	Investment income (including other similar amounts)	dividends, intere	est, and	207.			207.	
	5 6 a b c	Gross Rents	(i) Real	(ii) Personal					
	7 a	Net rental income or (loss) Gross amount from sales of assets other than inventory Less: cost or other basis	(i) Securities	(ii) Other					
	d	and sales expenses  Gain or (loss)  Net gain or (loss)  Gross income from fundraising		<b>&gt;</b>					
Other Revenue	Va	including \$contributions reported on line Part IV, line 18	of 1c). See						
ğ		Less: direct expenses		<b>.</b>					
	9 a	Net income or (loss) from fund Gross income from gaming ac Part IV, line 19 Less: direct expenses	tivities. See a						
	10 a	Net income or (loss) from gam Gross sales of inventory, less and allowances Less: cost of goods sold	returns a	<b>&gt;</b>					
		Net income or (loss) from sales	s of inventory						
	11 a	Miscellaneous Revenue OTHER REVENUE	B	Business Code 900099	4,980.	4,980.			
	c d e	All other revenue		<b>&gt;</b>	4,980.				
	12	Total revenue. See instructions.		<b>&gt;</b>	1,455,312.	1,189,103.	0.	207.	

## 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) but are not required to complete columns (B), (C), and (D).

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	187,166.			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	326,737.			
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)		***************************************		
9	Other employee benefits	48,222.			
10	Payroll taxes	33,464.			
11	Fees for services (non-employees):				
а	Management				
b	Legal	240,000.			
С	Accounting	17,954.			
đ	Lobbying			***************************************	
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	251,004.			
12	Advertising and promotion			<del></del>	
13	Office expenses	50,930.			***************************************
14	Information technology	5,669.			
15	Royalties				
16	Occupancy	82,906.			
17	Travel	46,329.		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	4			
19	Conferences, conventions, and meetings	4,614.			
20	Interest			······································	
21	Payments to affiliates	6 550			
22	Depreciation, depletion, and amortization	6,558.			
23	Insurance	6,773.			
24	Other expenses, Itemize expenses not covered above. (List miscellaneous expenses in line 24f, If line				
	24f amount exceeds 10% of line 25, column (A)				
	amount, list line 24f expenses on Schedule O.)	41,508.			
a	MONITORING SERVICE	28,575.			
Ь	MISCELLANEOUS	12,415.			
С	MOVING EXPENSE	8,977.			
d	RENTAL EQUIPMENT	8,409.			
e		7,510.			
f	All other expenses	1,415,720.			
25	Total functional expenses, Add lines 1 through 24f	T/410/160.			
26	Joint costs. Check here if following SOP				
	98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet (A) (B) Beginning of year End of year 226,218. 363,494. Cash - non-interest-bearing 1 278,663. 220,419. 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 3 116,794. 108,714. Accounts receivable, net 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II 5 of Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Assets 7 7 Notes and loans receivable, net 4,320. 8 8 Inventories for sale or use 1,925. 8,461. Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 31,962. basis. Complete Part VI of Schedule D ....... 10a 10,270. 17,205. 21,692. 10c b Less: accumulated depreciation 10b Investments - publicly traded securities 11 11 6,576. 12 12 Investments - other securities. See Part IV, line 11 Investments · program-related. See Part IV, line 11 13 13 770. 19,671. 14 14 Intangible assets 15 15 Other assets. See Part IV, line 11 645,895. 749,027. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 42,324. 10,933. 17 Accounts payable and accrued expenses \_\_\_\_\_\_ 17 18 18 Grants payable 554,833. 550,652. 19 19 Deferred revenue Tax-exempt bond liabilities 20 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D iabilities. 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties ..... 36,330. 25 Other liabilities. Complete Part X of Schedule D 629,306. 565,766. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 31,124. 110,881. 27 27 Unrestricted net assets 49,005. 8,840. 28 28 Temporarily restricted net assets Permanently restricted net assets 29 29 Organizations that do not follow SFAS 117, check here 🕨 💄 complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds 119,721. 80,129. 33 33 Total net assets or fund balances ..... 645,895 749,027. Total liabilities and net assets/fund balances

Form 990 (2010)

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

3b

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

**Political Campaign and Lobbying Activities** 

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

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

See separate instructions.

If the organization answered "Yes," to 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," to 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," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35a (Proxy Tax), then

	Section 501(c)(4), (5), or (6) organiza	tions: Complete Part III.			
Nan	ne of organization			Empl	oyer identification number
		USTRY JOINT ADVI			23-7400898
Pε	ort I-A Complete if the org	ganization is exempt und	er section 501(c)	or is a section 527 o	rganization.
2	Provide a description of the organize Political expenditures Volunteer hours				
Pε	rt I-B Complete if the ord	ganization is exempt und	er section 501(c)(	3).	
	Enter the amount of any excise tax				
	Enter the amount of any excise tax				
	If the organization incurred a section				
	Was a correction made?				
	o If "Yes," describe in Part IV.			*	
NAME OF TAXABLE PARTY.		ganization is exempt und	er section 501(c),	except section 501(	c)(3).
1	Enter the amount directly expended	d by the filing organization for se	ction 527 exempt funct	ion activities > \$	
	Enter the amount of the filing organ				
	exempt function activities			<b>▶</b> \$	4
3	Total exempt function expenditures	s. Add lines 1 and 2. Enter here a	and on Form 1120-POL,	r	
	line 17b		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<b>&gt;</b> \$	
4	Did the filing organization file Form	1120-POL for this year?		.,,,	Yes No
5	Enter the names, addresses and en	nployer identification number (El	N) of all section 527 po	litical organizations to whic	h the filing organization
	made payments. For each organiza	tion listed, enter the amount pai	d from the filing organiz	ation's funds. Also enter th	e amount of political
	contributions received that were pr	. ,		•	te segregated fund or a
	political action committee (PAC). If	additional space is needed, prov	ride information in Part	IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2010

	edule C (Form 990 or 990-EZ) 2010	PET INDUST	RY JOINT AD	VISORY COUN	ICIL 23-7	400898 Page 2
PE	rt II-A Complete if the or		mpt under sectio	n 501(c)(3) and fi	led Form 5768	
	(election under sec					
	. —	ation belongs to an aff	- •			
B (	Check 🕨 if the filing organization	ation checked box A a	nd "limited control" pro	ovisions apply.	4 ) 500	
		its on Lobbying Expe ditures" means amou		)	(a) Filing organization's totals	(b) Affiliated group totals
1 a	Total lobbying expenditures to inf	luence public opinion (	(grass roots lobbying)			
k	Total lobbying expenditures to inf	luence a legislative bo	dy (direct lobbying)			
(	: Total lobbying expenditures (add	lines 1a and 1b)		***************************************		
c	d Other exempt purpose expenditur	res,	*****************			
	Total exempt purpose expenditure					
1	Lobbying nontaxable amount. Ent	h columns.				
	If the amount on line 1e, column (a)	or (b) is: The lob	bying nontaxable am	ount is:		
	Not over \$500,000					
	Over \$500,000 but not over \$1,00	0,000 \$100,00	00 plus 15% of the exc	ess over \$500,000.		
	Over \$1,000,000 but not over \$1,5	500,000 \$175,00	00 plus 10% of the exc	ess over \$1,000,000.		
	Over \$1,500,000 but not over \$17	,000,000 \$225,00	00 plus 5% of the exce	ss over \$1,500,000.		
	Over \$17,000,000	\$1,000,	000.			
ç	Grassroots nontaxable amount (er	nter 25% of line 1f)	**********************			
ŀ	Subtract line 1g from line 1a. If zei	ro or less, enter -0-	*******************************			
i	Subtract line 1f from line 1c. If zer	o or less, enter -0		•••••••••		
j	If there is an amount other than ze	ero on either line 1h or	line 1i, did the organiz	ation file Form 4720	-	
	reporting section 4911 tax for this					Yes No
		4-Year Ave zations that made a s olumns below. See th		do not have to com		
		Lobbying Expe	nditures During 4-Yea	ar Averaging Period		
***************************************	Calendar year (or fiscal year beginning in)	(a) 2007	(ь) 2008	<b>(c)</b> 2009	(d) 2010	(e) Total
2 a	Lobbying nontaxable amount					
b	Lobbying ceiling amount					
	(150% of line 2a, column(e))					
Ç	Total lobbying expenditures					
,	Consequents and south to second					
	Grassroots nontaxable amount					
е	Grassroots ceiling amount (150% of line 2d, column (e))					
	(1507) of line 2d, column (e))					
f	Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2010

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

			a)	(b)	
		Yes	No	Amou	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or				•
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
а	Volunteers?				
b c	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  Media advertisements?		-		
d	Mailings to members, legislators, or the public?			,	
	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?	I			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities? If "Yes," describe in Part IV				***************************************
i	Total. Add lines 1c through 1i				
2 a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Pai	t III-A Complete if the organization is exempt under section 501(c)(4), secti	on 501(c	)(5), or se	ction	
Laimeine	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1_		Х
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		Х
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?		3		X
1	"Yes."  Dues, assessments and similar amounts from members		1	1,177	,267.
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).	ical			
а	Current year		2a	89.	674.
	Carryover from last year				
	Total			89	674.
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				,860.
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex				·
•	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political	4		
5	expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)		5	<298	. 186
*******	t IV Supplemental Information	**************		1230,	, 1.00
	······································		1: 4: 61-		
	olete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; a	по Рап 🖦 В	, line II. Also	o, complete ti	nis part
for a	ny additional information.				

## **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Financial Statements**

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

2010
Open to Public Inspection

Name of the organization

PET INDUSTRY JOINT ADVISORY COUNCIL

Employer identification number 23-7400898

Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds o	r Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised	funds
Ū	are the organization's property, subject to the organization's	-	
6	Did the organization inform all grantees, donors, and donor a		······································
·	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?		
Pai			
1	Purpose(s) of conservation easements held by the organizat		P-M-M-M-M-M-M-M-M-M-M-M-M-M-M-M-M-M-M-M
•	Preservation of land for public use (e.g., recreation or e		ically important land area
	Protection of natural habitat	Preservation of a certified	
	Preservation of open space		- 1,1-1-1,1-1
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a	conservation easement on the last
_	day of the tax year.		
	ouy of the tax your.		Held at the End of the Tax Year
а	Total number of conservation easements		
b	Total acreage restricted by conservation easements		· · · · · · · · · · · · · · · · · · ·
c	Number of conservation easements on a certified historic str		```
	Number of conservation easements included in (c) acquired		
_	listed in the National Register		1 . 1
3	Number of conservation easements modified, transferred, re	·	··· L
_	year ▶	,	-
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the pe	•	
	violations, and enforcement of the conservation easements i		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h)(	4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservat		
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes the	organization's accounting for
	conservation easements.		
Pai	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or Othe	er Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (As	SC 958), not to report in its revenue statemen	it and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	hibition, education, or research in furtherance	of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that descr	ibes these items.	
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement an	d balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of public	service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		🕨 \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tre		
	the following amounts required to be reported under SFAS 1		
а	Revenues included in Form 990, Part VIII, line 1		🕨 \$
	Assets included in Form 990, Part X		

Sche	dule D (Form 990) 2010 PET IND	USTRY JOIN	IT AD	VISORY	COUNC	IL	23-74	00898	B Pag	je <b>2</b>	
Pai	till Organizations Maintaining C	Collections of A	rt, Hist	torical Tre	easures,	or Other	Similar Asse	ts (conti	nued)		
3	Using the organization's acquisition, access	ion, and other recor	ds, check	any of the	following tha	at are a signi	ficant use of its	collection	items		
	(check all that apply):										
а	Public exhibition	ı		Loan or excl							
Ь	Scholarly research		e 📖 (	Other							
c	Preservation for future generations										
4	Provide a description of the organization's c	ollections and expla	in how th	ey further th	ne organizati	ion's exemp	t purpose in Pa	rt XIV.		•	
5	During the year, did the organization solicit of	or receive donations	of art, his	storical treas	sures, or oth	ner similar as	sets	_			
E	to be sold to raise funds rather than to be m							Yes		No_	
Pai	tiv Escrow and Custodial Arran reported an amount on Form 990, Pa		lete if the	organizatio	n answered	"Yes" to Fo	m 990, Part IV,	line 9, or			
1a	Is the organization an agent, trustee, custod	ian or other interme	diary for	contribution	s or other as	ssets not inc	luded				
	on Form 990, Part X?			**********				Yes		No	
ь	b If "Yes," explain the arrangement in Part XIV and complete the following table:										
								Amount			
c	Beginning balance						1c				
d	Additions during the year			*************			1d	*tvk*			
е	Distributions during the year						1e				
f	Ending balance	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		.,			1f				
2a	Did the organization include an amount on F	orm 990, Part X, line	e 21?	*******				Yes		No	
b	If "Yes," explain the arrangement in Part XIV										
Pat	t V Endowment Funds. Complete	if the organization a	nswered	"Yes" to For	m 990, Part	IV, line 10.					
		(a) Current year	(b) P	rior year	(c) Two yea	irs back (d)	Three years back	(e) Four	years b	ack	
1a	Beginning of year balance					190 000   190 000					
b	Contributions										
c	Net investment earnings, gains, and losses										
d	Grants or scholarships									8.30	
е	Other expenditures for facilities							0.000	1000000		
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the year		as:								
а	Board designated or quasi-endowment		%								
Ь	Permanent endowment	%									
c	Term endowment ▶	%									
3a	Are there endowment funds not in the posse	ession of the organia	zation tha	nt are held ar	nd administe	ered for the	organization	_			
	by:								Yes	No	
	(i) unrelated organizations			*************	*************			3a(i)			
	(ii) related organizations										
ь	If "Yes" to 3a(ii), are the related organizations										
4	Describe in Part XIV the intended uses of the	e organization's end	owment:	funds.							
Par	t VI Land, Buildings, and Equipm	<b>1ent.</b> See Form 99	0, Part X	, line 10.							
	Description of investment	(a) Cost or basis (invest		(b) Cost basis (			mulated ciation	(d) Book	value		
	Land			<u> </u>		·					
b	Buildings										
	Leasehold improvements	1					A			—	
	Equipment			3	1,962.	1	0,270.	2.1	L,69	2.	
	Other	<u> </u>									
	. Add lines 1a through 1e. (Column (d) must e		t X colun	nn (R), line 1	O(c).)	<u> </u>	<b>▶</b>	2	L,69	2.	
TOTAL	. And mies la unough le loudann (d) mast e	-quai i 0,111 000, 1 di	. 71, 001011	(D), III(C )	~1.5/1/	*****************	*********	e D (Form			

<ul><li>(a) Description of security or category (including name of security)</li></ul>	(b) Book value		(c) Method of valuation of end-of-year ma	
- · · · · · · · · · · · · · · · · · · ·		Cost	or end-of-year ma	rket value
Financial derivatives     Closely held equity interests				
Closely-held equity interests    Other	,			
(A)				
(B)				, , , , , , , , , , , , , , , , , , ,
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
(()				
otal. (Col (b) must equal Form 990, Part X, col (B) line 12.)				
Part VIII Investments - Program Related.	See Form 990, Part X, line 13.		(c) Method of value	stion:
(a) Description of investment type	(b) Book value		(c) Method of valua : or end•of•year ma	
/4\				
(1)				
(3)				***************************************
(4)				
(5)	***************************************			
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)				
otal. (Col (b) must equal Form 990, Part X, col (B) line 13.) ► Part IX Other Assets. See Form 990, Part X, lir	ne 15.			(h) Book value
Fotal. (Col (b) must equal Form 990, Part X, col (B) line 13.) ► Part IX Other Assets. See Form 990, Part X, lin	ne 15. a) Description			(b) Book value
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) Part IX Other Assets. See Form 990, Part X, line (1)	ne 15.			(b) Book value
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ► Part IX Other Assets. See Form 990, Part X, line (1) (2)	ne 15.			(b) Book value
otal. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶  Part IX Other Assets. See Form 990, Part X, line (1) (2) (3)	ne 15.			(b) Book value
otal. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶  Part IX Other Assets. See Form 990, Part X, lin  (1)  (2)  (3)  (4)	ne 15.			(b) Book value
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶ Part IX Other Assets. See Form 990, Part X, line (1) (2) (3) (4) (5)	ne 15.			(b) Book value
otal. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶  Part IX Other Assets. See Form 990, Part X, lin  (1)  (2)  (3)  (4)	ne 15.			(b) Book value
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶ Part IX Other Assets. See Form 990, Part X, line (1) (2) (3) (4) (5) (6)	ne 15.			(b) Book value
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶ Part IX Other Assets. See Form 990, Part X, line (1) (1) (2) (3) (4) (5) (6) (7)	ne 15.			(b) Book value
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)         Part IX       Other Assets. See Form 990, Part X, line (a)         (1)       (2)         (3)       (4)         (5)       (6)         (7)       (8)	ne 15.			(b) Book value
Fotal. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶  Part IX Other Assets. See Form 990, Part X, line (1)  (2) (3) (4) (5) (6) (7) (8) (9) (10)  Fotal. (Column (b) must equal Form 990, Part X, col (B) line (B)	ne 15.			(b) Book value
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶  Part IX Other Assets. See Form 990, Part X, line (1)  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  (10)  Total. (Column (b) must equal Form 990, Part X, col (B) line 13.) ▶  Part X Other Liabilities. See Form 990, Part X	ine 15.)  X, line 25.			(b) Book value
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)           Part IX         Other Assets. See Form 990, Part X, line (Column (b) must equal Form 990, Part X)           (1)         (2)           (3)         (4)           (5)         (6)           (7)         (8)           (9)         (10)           Fotal. (Column (b) must equal Form 990, Part X, col (B) line 13.)           Part X         Other Liabilities. See Form 990, Part X.           (a) Description of liability	ine 15.)  X, line 25.	(b) Amount		(b) Book value
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)           Part IX         Other Assets. See Form 990, Part X, line (a)           (1)         (2)           (3)         (4)           (5)         (6)           (7)         (8)           (9)         (10)           Total. (Column (b) must equal Form 990, Part X, col (B) line 13.)         Part X           Other Liabilities. See Form 990, Part X, col (B) line 13.)         (a) Description of liability           (1)         Federal income taxes	ine 15.)  X, line 25.			(b) Book value
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)  Part IX Other Assets. See Form 990, Part X, line (1)  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  (10)  Total. (Column (b) must equal Form 990, Part X, col (B) line 13.)  Part X Other Liabilities. See Form 990, Part X.  (a) Description of liability  (1) Federal income taxes  (2) DEFERRED RENT	ine 15.)  X, line 25.	(b) Amount 36,330.		(b) Book value
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)  Part IX Other Assets. See Form 990, Part X, line (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  (10)  Total. (Column (b) must equal Form 990, Part X, col (B) line 13.)  Part X Other Liabilities. See Form 990, Part X, col (B) line 13.)  (a) Description of liability  (1) Federal income taxes  (2) DEFERRED RENT  (3)	ine 15.)  X, line 25.			(b) Book value
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)           Part IX         Other Assets. See Form 990, Part X, line (Column (b) must equal Form 990, Part X)           (1)         (2)           (3)         (4)           (5)         (6)           (7)         (8)           (9)         (10)           Fotal. (Column (b) must equal Form 990, Part X, col (B) line 13.)           Part X         Other Liabilities. See Form 990, Part X, col (B) line 13.)           (a) Description of liability         (1) Federal income taxes           (2) DEFERRED RENT         (3)           (4)         (4)	ine 15.)  X, line 25.			(b) Book value
Fotal. (Col (b) must equal Form 990, Part X, col (B) line 13.)           Part IX         Other Assets. See Form 990, Part X, line (c)           (1)         (2)           (3)         (4)           (5)         (6)           (7)         (8)           (9)         (10)           Total. (Column (b) must equal Form 990, Part X, col (B) line 13.)           Part X         Other Liabilities. See Form 990, Part X, col (B) line 13.)           (a) Description of liability         (1) Federal income taxes           (2) DEFERRED RENT         (3)           (4)         (5)	ine 15.)  X, line 25.			(b) Book value
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)   Part IX   Other Assets. See Form 990, Part X, line (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)   Total. (Column (b) must equal Form 990, Part X, col (B) line (a) Description of liability (1) Federal income taxes (2) DEFERRED RENT (3) (4) (5) (6)	ine 15.)  X, line 25.			(b) Book value
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)           Part IX         Other Assets. See Form 990, Part X, line (a)           (1)         (2)           (3)         (4)           (5)         (6)           (7)         (8)           (9)         (10)           Fotal. (Column (b) must equal Form 990, Part X, col (B) line 13.)           Part X         Other Liabilities. See Form 990, Part X, col (B) line 13.)           (a) Description of liability         (1) Federal income taxes           (2) DEFERRED RENT         (3)           (4)         (5)           (6)         (7)	ine 15.)  X, line 25.			(b) Book value
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)         Part IX         Other Assets. See Form 990, Part X, line (a)           (1)         (2)         (3)         (4)         (5)         (6)         (7)         (8)         (9)         (10)         (10)         Fotal. (Column (b) must equal Form 990, Part X, col (B) line 13.)         (A)         (B)         (B)         (C)	ine 15.)  X, line 25.			(b) Book value
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)           Part IX         Other Assets. See Form 990, Part X, line (a)           (1)         (2)           (3)         (4)           (5)         (6)           (7)         (8)           (9)         (10)           Total. (Column (b) must equal Form 990, Part X, col (B) line 13.)           Part X         Other Liabilities. See Form 990, Part X, col (B) line 13.)           (a) Description of liability         (1) Federal income taxes           (2) DEFERRED RENT         (3)           (4)         (5)           (6)         (7)           (8)         (9)	ine 15.)  X, line 25.			(b) Book value
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)         Part IX         Other Assets. See Form 990, Part X, line (a)           (1)         (2)         (3)         (4)         (5)         (6)         (7)         (8)         (9)         (10)         (10)         For all (Column (b) must equal Form 990, Part X, col (B) line 13.)         (a) Description of liability         (b) In all (Column (b) For all (b) In all (c) In all (	ine 15.) X, line 25.	36,330.		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)         Part IX         Other Assets. See Form 990, Part X, line (a)           (1)         (2)         (3)         (4)         (5)         (6)         (7)         (8)         (9)         (10)         (10)         (10)         (10)         (10)         (10)         (10)         (10)         (10)         (10)         (10)         (2)         (3)         (4)         (5)         (6)         (7)         (8)         (9)         (10)<	ine 15.) X, line 25.	36,330.		

1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	dule D (Form 990) 2010 PET INDUSTRY JOINT ADVISORY					00898	Page 4
Рa	t XI Reconciliation of Change in Net Assets from Form 990 to			Stateme	ents	···- <u>-</u>	
1	Total revenue (Form 990, Part VIII, column (A), line 12)					1,455,	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2			1,415,	
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3			39,	592 <b>.</b>
4	Net unrealized gains (losses) on investments		4				
5	Donated services and use of facilities						
6	Investment expenses						
7	Prior period adjustments		1	i			
8	Other (Describe in Part XIV.)						
9	Total adjustments (net). Add lines 4 through 8			1		·	0.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and			·		3.9	592.
	t XII Reconciliation of Revenue per Audited Financial Statemen			per Retu	ırn	·	
1	Total revenue, gains, and other support per audited financial statements			1		1,455,	312.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:						
а	Net unrealized gains on investments	2a					
ь	Donated services and use of facilities						
С	Recoveries of prior year grants						
d	Other (Describe in Part XIV.)	1					
	Add lines 2a through 2d			2	200		0 -
3	Subtract line 2e from line 1				_	1,455,	312
		,				111001	<u> </u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1.1		8.8			
	Investment expenses not included on Form 990, Part VIII, line 7b			——			
	Other (Describe in Part XIV.)						^
	Add lines 4a and 4b					1 455	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		· · · · · · · · · · · · · · · · · · ·	5	_	1,455,	312.
Par	t XIII Reconciliation of Expenses per Audited Financial Stateme				<u>eturn</u>		
1	Total expenses and losses per audited financial statements			1	50000	1,415,	720.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	. ,					
а	Donated services and use of facilities	2a					
b	Prior year adjustments	2b					
¢	Other losses	2c					
	Other (Describe in Part XIV.)						
e	Add lines 2a through 2d			2	e		0.
3	Subtract line 2e from line 1			<b>I</b>	3	1,415,	720.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					_ · _ ·	
-	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
	Other (Describe in Part XIV.)	-					
	Add lines 4a and 4b	70		4			0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		• • • • • • • • • • • • • • • • • • • •	5	-	1,415,	
	t XIV Supplemental Information			············ ] i	<u>'</u>	1,410,	720.
Comp	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III	, lines 1:	a and 4; Part IV,	lines 1b a	nd 2b;	Part V, line	4; Part
X. line	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also compl	lete this	part to provide a	any additio	nal inf	formation.	
	T X, LINE 2: THE PET INDUSTRY JOINT ADVISO						
				····			*************
INC	ORPORATED TAX-EXEMPT ORGANIZATION AS DEFIN	IED ]	N SECTIO	N 501	(C)	(6) OF	7
mir	THE MANUAL PROPERTY OF THE PROPERTY PARTY.	י זוא ר	י הששע ה	ר M כולות וי	יילדאי	יות על ע	מדצ
THE	INTERNAL REVENUE CODE. IN ADDITION, PIJAC	. пас	DEEN DE	TEKMI	NEL	DY TE	115
INI	ERNAL REVENUE SERVICE NOT TO BE A PRIVATE	FOUN	DATION V	/ITHIN	TH.	IE MEAN	NING_
ΛE	SECUTION 500/A) OF MUE CODE						
<u>Or</u>	SECTION 509(A) OF THE CODE.						·
*************			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
PIJ	AC HAS ADOPTED THE ACCOUNTING OF UNCERTAIN	ITY ]	N INCOME	TAXE	ES A	AS	
REC	UIRED BY THE INCOME TAXES TOPIC (TOPIC 740	)) OF	THE FAS	B ACC	OUN	TING	

## **SCHEDULE L**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## **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.

OMB No. 1545-0047
2010
Open To Public Inspection

Name of the organization

Employer identification number

					Y COUNCIL			3-74	0089	8	
Part I Excess Benefit	Transacti	ons (secti	оп 501(с)(	3) and section	n 501(c)(4) organizatio	ns only)					
Complete if the orga	nization ansv	vered "Yes	on Form	990, Part IV,	line 25a or 25b, or Fo	rm 990-E	Z, Part	V, line 40	)b.		
1 (a) Name of dis					(b) Description	-6 4	-41			(c) Con	rected?
(a) Name of dis	qualified pers	son				Yes	No				
											ĺ
										ļ	
									M———	<b>_</b>	
2 Enter the amount of tax impo		-	_		-	•				<u> </u>	
3 Enter the amount of tax, if ar	ıy, on line 2, a	above, reim	ibursed by	the organiza	ation			. 🕨 \$			
Part II Loans to and/or	r From Int	erested	Persons								
***************************************					line 26, or Form 990-E	7. Part \	/. line 38	Ba.			
(a) Name of interested (b) Loan to or person and purpose the organization answered			(c) Origi	nal principal nount	(d) Balance due	(e	In ault?	(f) App	oroved ard or nittee?	(g) W agreer	ritten ment?
	То	From				Yes	No	Yes	No	Yes	No
								ļ			
										<u> </u>	
								-	<u> </u>		
			-			-		<del> </del>	<del> </del>		<u> </u>
								+			
			<del> </del>			<u> </u>					
Total				> \$					10 (200)		
Part III Grants or Assis		_					*********	*************			
Complete if the organ		vered "Yes"			iine 27. een interested person			/a\ ^~		id type of	
(a) Name of interested p	Deison		(b) neiati		ganization	ano			assistan		
								····			
			····								
											M-7*-
									-		
		1					1				

Schedule L (Form 990 or 990-EZ) 2010

Schedule L (Form 990 or 990-EZ) 2010 Page 2 Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c. (e) Sharing of (a) Name of interested person (b) Relationship between interested (c) Amount of (d) Description of organization's person and the organization transaction transaction revenues? Yes No MARSHALL MEYERS OFFICER 240,000.PROVIDED LE Х Part V Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions). SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS: (A) NAME OF PERSON: MARSHALL MEYERS (D) DESCRIPTION OF TRANSACTION: PROVIDED LEGAL SERVICES THROUGH LAW FIRM AT WHICH THE INTERESTED PERSON WAS A PARTNER.

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

# Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

PET INDUSTRY JOINT ADVISORY COUNCIL	23-7400898
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MIS	
ENSURE THE AVAILABILITY OF PETS. IT IS A NONPROFIT, SERVI	CE-ORIENTED
ORGANIZATION COMPRISED OF A DIVERSE MEMBERSHIP REPRESENTI	NG ALL
SEGMENTS OF THE PET INDUSTRY AND PET OWNERS WHO CARE ABOU	T PETS AND THE
PET INDUSTRY.	
FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION HA	
MEMBERS WITH VOTING RIGHTS.	
FORM 990, PART VI, SECTION A, LINE 7A: CURRENT MEMBERS OF	THE ORGANIZATION
HAVE THE RIGHT TO VOTE FOR MEMBERS OF THE BOARD OF DIRECT	ORS.
FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS CI	RCULATED TO THE
ENTIRE BOARD OF DIRECTORS FOR REVIEW PRIOR TO FILING.	
FORM 990, PART VI, SECTION B, LINE 12C: EACH MEMBER OF TH	E BOARD OF
DIRECTORS, OFFICER, AND KEY EMPLOYEE MUST REVIEW THE CONF	LICT OF INTEREST
POLICY AND SUBMIT A STATEMENT ANNUALLY.	
FORM 990, PART VI, SECTION B, LINE 15A: THE FINANCE AND A	UDIT AND
COMPENSATION COMMITTEES REVIEW ASAE COMPENSATION SURVEYS	AND RECOMMEND A
COMPENSATION AMOUNT FOR THE PRESIDENT. THE BOARD THEN REV	IEWS AND APPROVES
THE AMOUNT.	

Form 8868 (Rev. 1-2011)										
	Not Automatic) 2 Month Extension	complete only Part II and check this b	A B N N N N N N N	Page 2						
				$\triangleright X$						
If you are filing for an Automatic 3	-Month Extension, complete only E	c 3-month extension on a previously filed	1 Form 8868.							
Part II Additional (Not A	automatic) 3-Month Extension	on of Time. Only file the original (no c	onies needed)							
Name of exempt organiza		or the originar the originar the originar the or	Employer identification	00 011mbor						
Type or			Limptoyer identification	on number						
	JOINT ADVISORY COUN	ICIL	23-7400898	}						
due date for 1140 19TH STRE	n or suite no. if a P.O. box, see instru EET, N.W., NO. 300	ctions.								
city, town or post office, state, and ZIP code. For a foreign address, see instructions.  WASHINGTON, DC 20036										
		Parallel Control of Co		<del></del>						
Enter the Return code for the return the	hat this application is for (file a separa	ate application for each return)		0 1						
Application	Return	Application		Return						
ls For	Code	ls For		Code						
Form 990	01									
Form 990-BL	02	Form 1041-A		08						
Form 990-EZ	03	Form 4720		09						
Form 990-PF	04	Form 5227		10						
Form 990-T (sec. 401(a) or 408(a) trust	t) 05	Form 6069		11						
Form 990-T (trust other than above)	06	Form 8870		12						
STOP! Do not complete Part II if you	were not aiready granted an autor	matic 3-month extension ол a previou	sly filed Form 8868.							
	ET INDUSTRY JOINT		. 50 0000							
		ITE 300 - WASHINGTON	I, DC 20036							
Telephone No. ► 202-452-		FAX No.								
If the organization does not have a	n office or place of business in the U	nited States, check this box	······	· [_]						
		emption Number (GEN)								
box ▶ . If it is for part of the growth of		ach a list with the names and EINs of all BER 15, 2011	members the extension	is for.						
5 For calendar year $2010$ , or o										
	s for less than 12 months, check reas	, and ending , and ending	Fi1	'						
Change in accounting peri		initial return	Final return							
7 State in detail why you need the										
	IS REQUIRED TO COL	LECT THE INFORMATION	NECESSARV T	<u>N</u>						
	COMPLETE AND ACCUR		THE EDDING T							
				· · · · · · · · · · · · · · · · · · ·						
8a If this application is for Form 990	D-BL, 990-PF, 990-T, 4720, or 6069, e	enter the tentative tax, less any								
nonrefundable credits. See instru		, ,	8a \$	0.						
b If this application is for Form 990	)-PF, 990-T, 4720, or 6069, enter any	refundable credits and estimated								
	prior year overpayment allowed as									
previously with Form 8868.										
previously with Form 8868.  8b \$ (  Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using										
EFTPS (Electronic Federal Tax P	ayment System). See instructions.		8c \$	0.						
		nd Verification								
Under penalties of perjury, I declare that I hat it is true, correct, and complete, and that I as	ave examined this form, including accomp	panying schedules and statements, and to the	e best of my knowledge and	belief,						
		D TILLE								
Signature >	Title ▶ PRESI	DENT	Date 🗠							

Form 8868 (Rev. 1-2011)

Form **8868** 

(Rev. January 2011)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

Form 8868 (Rev. 1-2011)

File a separate application for each return.

• If you a	are filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box	****	Þ	X				
If you a	are filing for an Additional (Not Automatic) 3-Month Ex	ctension, e	complete only Part II (on page 2 of this	form)	•					
Do not co	omplete Part II unless you have already been granted :	an automa	atic 3-month extension on a previously fi	led Fo	rm 8868,					
Electroni	c filing (e-file). You can electronically file Form 8868 if	you need	a 3-month automatic extension of time t	o file (	6 months for a corpo	oration				
required t	o file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically file F	orm 8	868 to request an ex	ktension .				
of time to	file any of the forms listed in Part I or Part II with the ex	ception of	Form 8870, Information Return for Tran	sfers	Associated With Cer	tain				
	Benefit Contracts, which must be sent to the IRS in pap									
	irs.gov/efile and click on e-file for Charities & Nonprofits	S.				,				
Part I										
A corpora	tion required to file Form 990-T and requesting an autor	matic 6-mo	onth extension - check this box and con	nplete						
Part I only	***************************************									
All other o to file inco	orporations (including 1120-C filers), partnerships, REM ome tax returns.	IICs, and t	rusts must use Form 7004 to request ar	exter	nsion of time					
Type or Name of exempt organization Employer identification print										
File by the	PET INDUSTRY JOINT ADVISOR			2	3-7400898					
due date for filing your return. See	Number, street, and room or suite no. If a P.O. box, s 1140 19TH STREET, N.W., NO		tions.							
instructions.	City, town or post office, state, and ZIP code. For a for WASHINGTON, DC 20036	oreign add	lress, see instructions.							
		<del></del>								
Enter the I	Return code for the return that this application is for (file	e a senara	te application for each return)			0 1				
		o a copaia	to application for each retently		******************************	<u> </u>				
Application	On	Return	Application			Return				
s For		Code	Is For							
Form 990		01	Form 990-T (corporation)			Code 07				
orm 990-	BL	02	Form 1041-A			08				
orm 990-		03	Form 4720							
orm 990-		04	Form 5227		<del></del>	09				
	T (sec. 401(a) or 408(a) trust)	05	Form 6069			10				
	T (trust other than above)	06	Form 8870		······································	11				
01111 000			ADVISORY COUNCIL		12	12				
The hor	oks are in the care of $\triangleright$ 1140 19TH ST. N			. ח	C 20036					
	one No. ► 202-452-1525	50.	FAX No. ►	, ,	C 20030					
•	ganization does not have an office or place of business	s in the Lin								
	for a Group Return, enter the organization's four digit (									
oox <b>►</b> [	. If it is for part of the group, check this box									
	uest an automatic 3-month (6 months for a corporation				ers the extension is	ior.				
	aa. 1		tion return for the organization named a		The extension					
	the organization's return for:	lorganizai	non return for the organization harned a	bove.	The extension					
	S calendar year 2010 or									
<b>▶</b> [										
	tax year beginning	, and	a enaing		<u> </u>					
2 If the	tax year entered in line 1 is for less than 12 months, cl	hack rance	on: Initial return Fina	Leotus	_					
2 11 11 10	Change in accounting period	HECK TEASO	on inicial recurit Fina	l retur	n					
<u> </u>	orlange in accounting period									
3a If this	s application is for Form 990-BL, 990-PF, 990-T, 4720, c	or 6069. er	nter the tentative tax, less any							
nonrefundable credits. See instructions.  3a \$										
	s application is for Form 990-PF, 990-T, 4720, or 6069,	enter anv	refundable credits and		<del>-</del>	0.				
estimated tax payments made. Include any prior year overpayment allowed as a credit.  3b \$										
	nce due. Subtract line 3b from line 3a. Include your pay				-	0.				
	sing EFTPS (Electronic Federal Tax Payment System). S			3c	\$	0.				
	you are going to make an electronic fund withdrawal w									
	Paperwork Reduction Act Notice, see Instructions.		,		Form <b>8868</b> (Re					

### 21233 11/09/2012 12:13 PM Pg 5

Department of the Treasury Internal Revenue Service

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

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

► The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047 Open to Public Inspection

A	For the 2011 o	alendar year, or tax year beginning , and ending			k
В	Check if applicable:	C Name of organization		D Emplo	yer identification number
X	Address change	PET INDUSTRY JOINT ADVISORY COUNC	IL		
$\overline{\Box}$	Name change	Doing Business As		23-	-7400898
$\equiv$	-	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite		one number
	Initial retum	1146 19TH STREET N.W.	350	202	2-452-1525
	Terminated	City or town, state or country, and ZIP + 4			
	Amended return	WASHINGTON DC 20036		G Gross red	eipts\$ 1,932,530
Ħ	Application pending	F Name and address of principal officer:		<b>O</b> 0,000 700	
ш	Application pending	MICHAEL CANNING, PRESIDENT	H(a) Is this a g	roup return for	affiliates? Yes X No
		1146 19TH STREET N.W. STE 350	H(b) Are all af	filiates include	d? Yes No
		WASHINGTON DC 20036	If "No	," attach a lis	t. (see instructions)
[	Tax-exempt status:	501(c)(3) X 501(c) ( 6 ) ◀ (insert no.) 4947(a)(1) or 527			
		WW.PIJAC.ORG	H(c) Group ex	emption numb	nar 🏲
	Form of organization:	James James	L. Year of formation: 1		M State of legal domicile: DC
2000	000000000000000000000000000000000000000	ımmary	1001 01 1011112(01)		ar diace or regards more.
2000 ACTUAL		scribe the organization's mission or most significant activities:			
o	SEE	SCHEDULE O	***************************************		,,,
anc		•••••••••••••••••••••••••••••••••••••••		······	,
Ĕ	,	***************************************			
Governance	2 Check th	is box ▶ if the organization discontinued its operations or disposed of more tha	n 25% of its net ass		
<u>م</u> 2		of voting members of the governing body (Part VI, line 1a)			14
Ş	4 Number	of independent voting members of the governing body (Part VI, line 1b)		4	14
ij	5 Total pun	nber of individuals employed in calendar year 2011 (Part V, line 2a)		··	7
Activities	6 Total num	abor of volvateers (activate if socosses)		اما	14
⋖		elated business revenue from Part VIII, column (C), line 12			0
	h Net unrel	ated business taxable income from Form 990-T, line 34		7b	0
	D NOT WHICH	ated business taxable mounte from 1 of th 250-1, line 54	Prior Yea		Current Year
Φ	8 Contribut	ions and grants (Part VIII, line 1h)	260	6,002	249,404
Revenue	9 Program	service revenue (Part VIII, line 2g)	1,184	4,123	1,676,897
eve	10 Investme	nt income (Part VIII, column (A), lines 3, 4, and 7d)		207	239
2	11 Other rev	renue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		4,980	5,990
		enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,45	5,312	1,932,530
	13 Grants a	nd similar amounts paid (Part IX, column (A), lines 1–3)		0	0
		paid to or for members (Part IX, column (A), line 4)	0	0	
S		other compensation, employee benefits (Part IX, column (A), lines 5-10)	59!	5,589	822,565
penses	16a Professio	nal fundraising fees (Part IX, column (A), line 11e)		0	0
be	b Total fund	draising expenses (Part IX, column (D), line 25) ▶ 0	1		
EX	i	penses (Part IX, column (A), lines 11a–11d, 11f–24e)	820	0,131	750,744
	18 Total exp	enses. Add lines 13–17 (must equal Part IX, column (A), line 25)		5,720	1,573,309
	10 Payanua	less expenses. Subtract line 18 from line 12	39	7,592	359,221
Sec			Beginning of Cur		End of Year
Net Assets or Fund Balances	20 Total ass	ets (Part X, line 16)		9,027	883,599
A P	21 Total liab	ilities (Part X, line 26)		9,306	404,657
Ž	22 Net asse	ts or fund balances. Subtract line 21 from line 20	.   119	721	478,942
		gnature Block			
Uı	nder penalties of	perjury, I declare that I have examined this return, including accompanying schedules and sta	tements, and to the b	est of my kı	nowledge and belief, it is
tru	re, correct, and co	omplete. Declaration of preparer (other than officer) is based on all information of which preparer	rer has any knowledg	je.	
	-	Thurs Co		1	1/15/12
Sig		ignature of officer		Date	
He	re	Michael F. Conning			
	· · · · · · · · · · · · · · · · · · ·	ype or print name and title			
_ ,		e preparer's name Preparer's signature	Date	Check	if PTfN
Paid	OBEFRE	Y S. GRIFFITH, CPA	211 1491	seif-em	ployed P01081433
	parer Firm's na		F	irm's EIN ▶	20-0274631
Use	Only	200 HARRY S TRUMAN PKWY STE 300			
	Firm's ad		Р	hone no.	410-224-0343
May	the IRS discus	s this return with the preparer shown above? (see instructions)			Yes No

******	Statement of Program Se	INT ADVISORY COUNCIL 23- rvice Accomplishments	- /400898	Page 2
		ins a response to any question in this F	Part III	X
	ribe the organization's mission: EDULE O			
* * * * * * * * * * * * * * * * * * * *				
		int program services during the year which were	not listed on the	
•		······································	•••••	Yes X No
	scribe these new services on Sci	hedule O. nake significant changes in how it conducts, any		
services?		nake significant changes in now it conducts, any	•	Yes X No
•	scribe these changes on Schedu			🛅 100 🛅 100
	= -	accomplishments for each of its three largest p	=	
		organizations and section 4947(a)(1) trusts are re	· ·	
grants and	allocations to others, the total ex	penses, and revenue, if any, for each program s	ervice reported.	
INTERNA MAY HAV	TIONAL, FEDERAL, E AN IMPACT ON T	including grants of \$ GISLATIVE/REGULATORY) - STATE AND LOCAL LEGISL THE PET INDUSTRY, AND SU JLATORS EXPLAINING INDUS	ATION AND REGULAT BMITS COMMENTS AN	IONS THAT
*	***************************************			
• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	•••••••••••••••••••••••••••••••••••••••		
* * * * * * * * * * * * * * * * * * * *	<b>,,,,,</b>			
	PLOYEES, BREEDEF	including grants of \$ DITATION/CERTIFICATION RS, AND PET OWNERS ON TH		
* * * * * * * * * * * * * * * * * * * *				
	***************************************	•••••		
• • • • • • • • • • • • • • • • • • • •				
• • • • • • • • • • • • • • • • • • • •	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
		,		
4c (Code:	) (Expenses \$	including greate of ©	\ /Pavanua ff	•
	RELATIONS- INFOF	including grants of \$  MATION CLEARING HOUSE F	) (Revenue \$ OR MEDIA DATA AND	STATISTICS
• • • • • • • • • • • • • • • • • • • •		•••••••••••••••••••••••••••••••••••••••		
	·····			
,.,,,,,,	***************************************			
4d Other progr	am services. (Describe in Sched	dule O.)	A TOTAL CONTRACTOR OF THE PARTY	
(Expenses			(Revenue \$	)
4a Tatal progr	ram cantica avnancas			•

#### Form 990 (2011) PET INDUSTRY JOINT ADVISORY COUNCIL 23-7400898

**Checklist of Required Schedules** Yes Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes." complete Schedule A 1 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I X 3 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, X 5 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 X Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 X Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III X Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes." complete Schedule D, Part IV X 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted X endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 If the organization's answer to any of the following questions is "Yes," then complete Schedule D. Parts VI. VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI X 11a 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 X 11b c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII X 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? If "Yes," complete Schedule D, Part IX X 11d Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses X the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII X 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, XII, and XIII is optional X 12b Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E X 13 14a Did the organization maintain an office, employees, or agents outside of the United States? 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 X 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance X to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV 16 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) Х 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II X 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 X 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
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	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25	24a		X
þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) 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		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	<u> </u>		
	complete Schodule N. Dort II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- 02		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	- 55		
٠.	DA IMP A	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the	33a		
	magning of continu E42/hV42V2 If "Von " complete Cabadula D. Dat V. III - 2	35b		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	330		
Ų,	entated assertion 0.16 (Was Proposalete Calcadula D. Dat V. Hand	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
J,	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Port VI	,_		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	37		<u>~</u>
30		20	~	
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	

Form 990 (2011) PET INDUSTRY JOINT ADVISORY COUNCIL 23-7400898

Part V Statements Regarding Other IRS Filings and Tax Compliance

Section Section	Check if Schedule O contains a response to any question in this Part V					
		1 1		(000000000	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	12			
þ	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and					
	reportable gaming (gambling) winnings to prize winners?			<u>1c</u>	X	333232
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	7			
Ъ	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b	X	3000000
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	3)				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a	├─	X
þ	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			<u>3b</u> _	<del> </del>	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other		ity			
	over, a financial account in a foreign country (such as a bank account, securities account, or other fin	ancial				
	account)?			4a		X
þ	If "Yes," enter the name of the foreign country:					
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accou	ints.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?				<del> </del>	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact	ction?		5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			<u>5c</u>	├─	-
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne			٠,,	
L	organization solicit any contributions that were not tax deductible?			<u>6a</u>	X	
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions in the contribution of the contributio	ons or		[	v	
7	gifts were not tax deductible?			6b	X	
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 good continuous provided to the payor?	goods		<b>-</b>		
ь	and services provided to the payor?  If "Yes," did the organization notify the donor of the value of the goods or services provided?	• • • • • • •		7a	<del> </del>	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			7b		
U				70		
d	ESV + V - dt- Ab	7d		7c		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or		.7	7e		**************************************
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contri			7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		99 as required?	7g	<del> </del>	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		•			
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		00.0111110000	· · · · · ·		
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring					
	organization, have excess business holdings at any time during the year?			8	600000000	***********
9	Sponsoring organizations maintaining donor advised funds.			·····		
а	Did the organization make any taxable distributions under section 4966?			9a	nonne and	303033
b	Did the organization make a distribution to a donor, donor advisor, or related person?					
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a		-		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources					
	against amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1 1	?	12a	EU Praticionalis de	
b	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				13a		3350,000
	Note. See the instructions for additional information the organization must report on Schedule O.					
þ	Enter the amount of reserves the organization is required to maintain by the states in which	1 . 1				
	the organization is licensed to issue qualified health plans	13b				
C	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?	<u>.</u>		14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule	<u> O :</u>		14b	L	L

Form 990 (2011) PET INDUSTRY JOINT ADVISORY COUNCIL 23-7400898 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI X Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent 14 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? X 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 X 6 Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members. stockholders, or persons other than the governing body? 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? 8a Each committee with authority to act on behalf of the governing body? X 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 in Schedule O ... X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters. affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? 11a b Describe in 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 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," describe in Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 X 13 Did the organization have a written document retention and destruction policy? 14 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 X 15a Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X 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 organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website X Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶ PET INDUSTRY JOINT ADVISORY COUNCIL 1146 19TH STREET NW STE 350

202-452-1516

DC 20036

WASHINGTON

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Page 7

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

Check if Schedule O contains a response to any question in this Part VII.

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the orga	anization nor an	y rela	ated	orga	niza	tions	соп	npensated any current offic	cer, director, or trustee.	
(A) Name and Title	(B) Average hours per week (describe hours for		k, unle icer ar	Pos heck ess pe nd a d	rson i irecto	than or s both r/truste	an e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations in Schedule O}	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	` .	organization and related organizations
(1)BILL BRANT										
DIRECTOR	1.00	X						0	0.	0
(2) BRUCE COOK	1 00									
DIRECTOR	1.00	X						0	0	0
(3) CEDRIC DAMBY	1 00	\ <b>.</b>		v					0	•
SECRETARY/TREASURER (4) JIM HEIM	1.00	X		X				0	0	0
CHAIRMAN	1.00	x		X				o	0	0
(5) RUTH JEFFERS	1.00	<u> </u>								<u> </u>
DIRECTOR	1.00	X						0	0	0
(6) FRANK L. KOCH										
1ST VICE CHAIR	1.00	X		X				0	0	0
(7) ROGER E. LAMBERT									_	_
DIRECTOR	1.00	X						0	0	0
(8) BOB MERAR	1 00							_		
DIRECTOR	1.00	X						0	0	0
(9) SANDY MOORE DIRECTOR	1.00	x						o		^
(10) JOE O'LEARY	1.00	^						U	0	0
DIRECTOR	1.00	x						0	0	0
(11) MICHAEL PETERSON								U.		<u> </u>
DIRECTOR	1.00	x						o	o	0
(12) JIM SEIDEWAND		<del></del>								<u></u>
2ND VICE CHAIR	1.00	X		X				0	0	0
(13)ERNIE VINE										
DIRECTOR	1.00	X						0	0	0
(14)MARCIE WHICHARD										
DIRECTOR	1.00	X						0	0	- 000

Form 990 (2011)

Part VII Section A. Officers	, Directors, Tru	ıste	es, k	(ey I	Emp	loye	es, a	and Highest Compensate	d Employees (continued)	)
(A) Name and title	(B) Average hours per week (describe hours for	bo off	x, unl icer a	Pos check ess pe ind a c	erson directo	than o	an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		organization and related organizations
(15)MICHAEL CANNING PRESIDENT	40.00			x				195,000	0	19,914
(16)MICHAEL MADDOX VP GOVERNMENTAL AFF	40.00			х				166,650	0	
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1b Sub-total							<b>&gt;</b>	361,650		30,734
c Total from continuation she d Total (add lines 1b and 1c)	•						<b>▶</b>	361,650		30,734
Total number of individuals (ir reportable compensation from	cluding but not l	imite	d to				bov	e) who received more than	\$100,000 in	,
3 Did the organization list any for employee on line 1a? If "Yes,"	ormer officer, dir	ecto:	r, or J for	sucl	h inc	lividu	al			Yes No
For any individual listed on lin- organization and related organ individual	nizations greater	thar	\$1	50,00	90?	lf "Ye	s," c	complete Schedule J for su	ch	4 X
5 Did any person listed on line 1 for services rendered to the or	a receive or acc	rue o	comi	pens	ation	n fror	n an	ıy unrelated organization or	· individual	
Section B. Independent Contract	tors									
Complete this table for your five compensation from the organic	zation. Report c	ensa ompe	ted ensa	inder	for t	ient d he ca	ilend	dar year ending with or with	in the organization's tax y	
Name and MEYERS & ALTERMAN	(A) business address				1.60	0 1	_		(B) ion of services	(C) Compensation
WASHINGTON	DC	: 2	00		102	.0 1	l .	TREET N.W. STE ( EGAL SERVICES		200,000
										500000000000000000000000000000000000000
2 Total number of independent received more than \$100,000	· ·	_						se listed above) who	1	

Pa	rt V	III Stater	nent of Reve	nue						
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ants			mpaigns	1a						
Gra			lues	1b						
ts, An			vents	1c						
a Git	d	Related organ	izations	1d						
ns,	е	Government grants	(contributions)	1e						
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributio and similar amounts	ns, gifts, grants, s not included above	1f_		249,404				
dtr	g	Noncash contributio	ons included in lines 1a	-16 S	\$					
Co	h	Total. Add line	es 1a–1f			<b>&gt;</b>	249,404			
Program Service Revenue						Busn. Code		.,		
š	2a	MEMBERS	HIP DUES			900099				
e Re	b	CONFERE	NCE			900099	360,087	360,087		
Ϋ́С	С	CERTIFI	CATION PROGR	AM		900099	210	210		
Ser	d									
am	е									
ogr	f	All other progr	am service reve	nue						
4	g	Total. Add line	es 2a–2f	<u> </u>		<b>&gt;</b>	1,676,897			
	3		come (including							
			ilar amounts) …				239			239
	4	4 Income from investment of tax-exempt bond pro								
	5	5 Royalties				<u></u>				
			(i) Real		(ii) P	ersonal				
	6a	Gross rents								
	b	Less: rental exps.								
	С	Rental inc. or (loss)								
			ome or (loss)			<b>&gt;</b>				
	/a	7a Gross amount from sales of assets (i) Securities (ii) C			Other					
		other than inventory								
	b	Less: cost or other								
		basis & sales exps.								
	С	Gain or (loss)								
	d	Net gain or (Id	ıss)			<u></u>				
ā	8a		om fundraising eve	nts						
eur		(not including \$								
ě			reported on line 1c)							
er			:18							
Other Reven	ı		xpenses							
J	ı		(loss) from func		events .	<u> </u>				
	9a		om gaming activitie							
			19							
	ı		xpenses							
	ı		(loss) from gam	ning act	tivities	<u>.,,,,</u>				
	10a		f inventory, less							
			lowances							
	ı	b Less: cost of goods sold b								
	C	Net income or (loss) from sales of inventory								
	11-		Miscellaneous Revenue Busn. Cod			900099	E 000	E 000		
	11a		NEOUS REVENU			300099	5,990	5,990		
	b									
	C	All other revenue								
	1						5,990			
								<del></del>	0	239
	12	rotal revenu	e. See instructio	IIS	.,, <i></i> ,	<u>P</u>	1,932,530	1,682,887	<u> </u>	239

## 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) but are not required to complete columns (B), (C), and (D).

	Check if Schedule O contains a respons	e to any question in this Pa	art IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				,
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	392,354			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	349,274			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	7,410			
9	Other employee benefits	28,857			
10	Payroll taxes	44,670			
11	Fees for services (non-employees):				
а	Management				
b	Legal	200,000			
С	Accounting	14,796			
d	Lobbying			, . , , , , , , , , , , , , , , , , , ,	
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	237,639			
12	Advertising and promotion				
13	Office expenses	74,124			
14	Information technology	5,695			
15	Royalties				
16	Occupancy	69 <i>,</i> 855			
17	Travel	10,216			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	81,048			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	5,191			*
23	Insurance	8,981			
24	Other expenses, Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	MONITORING SERVICE	21,872			
þ	PROGRAM EXPENSE	11,515			
С	FEES & SUBSCRIPTIONS	9,812			
d					
	All other expenses	1 550 000			
	Total functional expenses. Add lines 1 through 24e	1,573,309	0	0	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)				

Р	art >	Balance Sheet					
					(A) Beginning of year		(B)
		Cook and interest bearing				_	End of year
		Cash—non-interest bearing			363,494 220,419		386,035
	2	Savings and temporary cash investments			220,419		345,492
	3	Pledges and grants receivable, net			100 714	3	FO C41
	4 -	Accounts receivable, net			108,714	4	50,641
	5	Receivables from current and former officers, directors, t					
		employees, and highest compensated employees. Comp					
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined					
		4958(f)(1)), persons described in section 4958(c)(3)(B), a		9			
		employers and sponsoring organizations of section 501(					
Assets	_	employees' beneficiary organizations (see instructions)				6	
Ass	7	Notes and loans receivable, net	• • • • • • • • • • • • • • • • • • • •			7	
	8	Inventories for sale or use			0 461	8	F7 067
	9	Prepaid expenses and deferred charges	r · · · · · · · · · · · · · · · · · · ·		8,461	9	57,967
	Toa	Land, buildings, and equipment: cost or	40-	E1 E00			
		other basis. Complete Part VI of Schedule D	10a	51,599 14,711	21 602		26 000
		Less: accumulated depreciation	[ 100]		21,692		36,888
	11	Investments—publicly traded securities	• • • • • • • • • • • • • • • • • • • •		6 576	11	
	12	Investments—other securities. See Part IV, line 11			6,576		
	13	Investments—program-related. See Part IV, line 11			10 671	13	
	14	Intangible assets			19,671		6 F76
	15 16	Other assets. See Part IV, line 11	· · · · · · · · · · · · · · · · · · ·		749,027	15	6,576 883,599
	17	Total assets. Add lines 1 through 15 (must equal line 34			42,324	16 17	38,308
	18	Accounts payable and accrued expenses			34,323	18	30,300
	19	Grants payable			550,652	19	366,349
	20	Deferred revenue Tax-exempt hand liabilities			330,032	20	300,349
	21	Tax-exempt bond liabilities  Escrow or custodial account liability. Complete Part IV of	Schedulo D			21	
"	22	Payables to current and former officers, directors, trustee					
ffe		employees, highest compensated employees, and disqua	<del>-</del>				
Liabilities		Complete Part II of Schedule L				22	
.2	23	Secured mortgages and notes payable to unrelated third	narties			23	
	24	Unsecured notes and loans payable to unrelated third pa	rties			24	
	25	Other liabilities (including federal income tax, payables to					
		parties, and other liabilities not included on lines 17-24).		X			
		of Schedule D			36,330	25	
	26	Total liabilities. Add lines 17 through 25	· · · · · · · · · · · · · · · · · · ·		629,306		404,657
		Organizations that follow SFAS 117, check here ▶X				<u></u>	
es		lines 27 through 29, and lines 33 and 34.					
and	27	Unrestricted net assets			110,881	27	473,475
Bal	28	Temporarily restricted net assets			8,840	28	5,467
힏	29	Permanently restricted net assets				29	
Ŧ		Organizations that do not follow SFAS 117, check he	ere 🕨 🗎 and				
ō		complete lines 30 through 34.					
ets	30	Observed to the set of the terror of the terror				30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment	All and and			31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or				32	
~	33	Total net assets or fund balances			119,721	33	478,942
	34	Total liabilities and net assets/fund balances			749,027	34	883,599

Form **990** (2011)

orm	990 (2011) PET INDUSTRY JOINT ADVISORY COUNCIL 23-7400898			Pac	je <b>12</b>
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI	• • • • • • • • • • • • • • • • • • •			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,93		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,57		
3	Revenue less expenses. Subtract line 2 from line 1	3			<u> 221</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	11	9,	721
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,				
	column (B))	6	47	8,9	942
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990:				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X</u>
	Were the organization's financial statements audited by an independent accountant?	. <i>.</i>	2b	X	
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	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O.				
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were				
	issued on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
За	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?		3a		X
þ	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2011)

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

## **Political Campaign and Lobbying Activities**

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

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

▶ See separate instructions.

OMB No. 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

• Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Nar	e of organization PET INDUSTRY JOINT A	NOVITEODY CONTRICTE		Employer Identificate 23-74008	
Da	t I-A Complete if the organization is exe				
1	Provide a description of the organization's direct and indi			on 521 organizati	OII.
2		· ·		<b>.</b> .	
3	Political expenditures	•••••••••••			
3	Volunteer hours	***************************************			
DA	t I-B Complete if the organization is exe	mpt under section 501/a	1/(2)		
<u>15.44</u>	Enter the amount of any excise tax incurred by the organ				
2	Enter the amount of any excise tax incurred by the organizat	ion managers under section 4955	· · · · · · · · · · · · · · · · · · ·	P \$	
3	If the organization incurred a section 4955 tax, did it file is	Form 4720 for this year?			Yes No
	If "Yes," describe in Part IV.				Tes No
320000000	t I-C Complete if the organization is exe	mpt under section 501(c	) except sect	tion 501(c)(3)	
1	Enter the amount directly expended by the filing organiza				
-	activities	•		<b>▶ ©</b>	
2	Enter the amount of the filing organization's funds contrib	outed to other organizations for	ection	······	
	527 exempt function activities	•		₽ \$	
3	Total exempt function expenditures. Add lines 1 and 2. E	nter here and on Form 1120-PC	)		***************************************
	line 17b		-	<b>▶</b> \$	
4	Did the filing organization file Form 1120-POL for this ye	ar?	* * * * * * * * * * * * * * * * * * * *	······································	Yes No
5	Enter the names, addresses and employer identification	number (EIN) of all section 527	political organizati	ons to which the filing	
	organization made payments. For each organization liste				
	the amount of political contributions received that were pr				
	as a separate segregated fund or a political action comm				
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
		, ,	,,,	filing organization's	contributions received and
				funds. If none, enter -0	promptly and directly
					delivered to a separate political organization, If
					none, enter -0
(1)					
(2)					
(3)				1	
(4)					
	prompt Allinois III.				
(5)					
(6)					
For Pa	perwork Reduction Act Notice, see the instructions for Form 990 or 990.	F7			

Sched	dule C (Form 990 or 990-EZ) 2011 PET I	NDUSTRY JOINT ADVISORY CO	OUNCIL 23-740089	8 Page 2
Pa	rt II-A Complete if the organ section 501(h)).	ization is exempt under section 501(c)	(3) and filed Form 5768	election under
	name, address, EIN	ion belongs to an affiliated group (and lis , expenses, and share of excess lobbyin ion checked box A and "limited control" p	g expenditures).	group member's
		bbying Expenditures means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence p	oublic opinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a	e legislative body (direct lobbying)		
С	Total lobbying expenditures (add lines 1a	and 1b)		
d	Other exempt purpose expenditures			
е	Total exempt purpose expenditures (add	lines 1c and 1d)		
	Lobbying nontaxable amount. Enter the a columns.			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e.		
Į	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
Į	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.		
g	Grassroots nontaxable amount (enter 259	% of line 1f)		
h	Subtract line 1g from line 1a. If zero or les			

## 4-Year Averaging Period Under Section 501(h)

reporting section 4911 tax for this year?

i Subtract line 1f from line 1c. If zero or less, enter -0j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

L	obbying Expenditu	res During 4-Yea	r Averaging Peri	od	
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying nontaxable amount					
<ul> <li>b Lobbying ceiling amount (150% of line 2a, column(e))</li> </ul>					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					•

Schedule C (Form 990 or 990-EZ) 2011

Yes

No

Part II-B	n 990 or 990-EZ) 2011 PET INDUSTRY JOINT ADVISORY COUNCIL 23  Complete if the organization is exempt under section 501(c)(3) and has N			9
	(election under section 501(h)).			
For each "Y	es" response to lines 1a through 1i below, provide in Part IV a detailed description		a)	(b)
of the lobby	ing activity.	Yes	No	Amount
1 During	the year, did the filing organization attempt to influence foreign, national, state or local			
legislat	ion, including any attempt to influence public opinion on a legislative matter or			
	dum, through the use of:			
a Volunte	ers?		ļ	
b Paid St	arr or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media	advertisements?			
d Mailing	s to members, legislators, or the public?			
e Publica	tions, or published or broadcast statements?			
T Grants	to other organizations for lobbying purposes?			
y Direct (	contact with legislators, their staffs, government officials, or a legislative body?			
	demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Total i	ctivities?			
2a Did the	add lines 1c through 1i activities in line 1 cause the organization to be not described in section 501(c)(3)?			
h 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			
	ing organization incurred a section 4912 tax, did it file Form 4720 for this year?		1000000000	
Part III-A		01(c)(5).	ors	ection
	501(c)(6).	- (-)(-)	,	
				Yes No
1 Were s	ubstantially all (90% or more) dues received nondeductible by members?			1 X
2 Did the	organization make only in-house lobbying expenditures of \$2,000 or less?			2 X
3 Did the	organization agree to carry over lobbying and political expenditures from the prior year?			3 Х
Part III-B				
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes."	o" OR (b	) if P	art III-A, line 3, is
1 Dues, a	ssessments and similar amounts from members		1	1,316,600
	162(e) nondeductible lobbying and political expenditures (do not include amounts of			
politica	al expenses for which the section 527(f) tax was paid).			
a Current	year from leet year		2a	212,583
<b>b</b> Carryov	ver from last year		2b	
c Total			2c	212,583
3 Aggreg	ate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	263,260
	es 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			
	itical expenditure next year?		4	
	amount of lobbying and political expenditures (see instructions)		5	-50,677
Part IV	Supplemental Information			
Complete this	s part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A;	and Part II	-B, lin	e
1. Also, comp	lete this part for any additional information.			
		• • • • • • • • • • • • • • • • • • • •		***************************************

Schedule C (Form 990	0 or 990-EZ) 2011	PET	INDUSTRY	JOINT	ADVISORY	COUNCIL	23-7400898	Page 4
Part IV	Supplemen	ital Infor	INDUSTRY mation (contin	ued)				
				***********				
				• • • • • • • • • • • • • • • • • • • •			***************************************	
,					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		***************************************	
		, ,		************	* * * * * * * * * * * * * * * * * * * *			*********************
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			*	*********			***************************************	***************************************
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, .,							***************************************	***************************************
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	**********				**************		***************************************	***************************************
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					• • • • • • • • • • • • • • • • • • • •		***************************************	
	***************		****************			**************		***************************************
				, , , , , , , , , , , , , , , , , , ,			***************************************	
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					. , , , , , , , , , , , , , , , , , , ,		************************	
	**************					**************	**********	
								• • • • • • • • • • • • • • • • • • • •

## **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

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

Open to Public Inspection

OMB No. 1545-0047

Name	of the organization	· •	Employer identification number
P	ET INDUSTRY JOINT ADVISORY COUNCIL		23-7400898
Pa	Organizations Maintaining Donor Advised Fun organization answered "Yes" to Form 990, Part I	nds or Other Similar Funds or A	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing tha	t the assets held in donor advised	
	funds are the organization's property, subject to the organization's excl	usive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advisors in		
	only for charitable purposes and not for the benefit of the donor or donor	or advisor, or for any other purpose	
			Yes No
Pa	conferring impermissible private benefit?  Conservation Easements. Complete if the orga	nization answered "Yes" to Form 9	90. Part IV. line 7.
1	Purpose(s) of conservation easements held by the organization (check		
	Preservation of land for public use (e.g., recreation or education)	Preservation of an historically impo	ortant land area
	Protection of natural habitat	Preservation of a certified historic s	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified conse	vation contribution in the form of a conseq	vation
	easement on the last day of the tax year.	raderi deriai edaeri irriine ieriir er a deriaeri	
	, ,		Held at the End of the Tax Year
а	Total number of conservation easements		
b	Total acreage restricted by conservation easements		
c	Number of conservation easements on a certified historic structure incl	ided in (a)	2c
	Number of conservation easements included in (c) acquired after 8/17/		20
_	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, released, ex	tinguished or terminated by the organization	<u> </u>
3	tax year	unguished, or terminated by the organization	on during the
4	Number of states where property subject to conservation easement is le	ocated •	
5	Does the organization have a written policy regarding the periodic monitoring	*********	
•			□ Van □ Na
6	violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcement		
U	Stan and volunteer nours devoted to monitoring, inspecting, and emore	ing conservation easements during the year	ar
7	Amount of our pages incurred to manifesting increasing and enforcing		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing o	onservation easements during the year	
	***************************************	h	
0	Does each conservation easement reported on line 2(d) above satisfy t		□ v <sub>22</sub> □ v <sub>2</sub>
9	(i) and section 170(h)(4)(B)(ii)?  In Part XIV, describe how the organization reports conservation easem		Yes   No
9	balance sheet, and include, if applicable, the text of the footnote to the	·	
	organization's accounting for conservation easements.	organization's financial statements that des	scribes trie
Da	urt III Organizations Maintaining Collections of Art,	Historical Transuran or Other Si	imilar Acasta
	Complete if the organization answered "Yes" to F	form 990 Part IV line 8	imilar Assets.
4-			
ıa	If the organization elected, as permitted under SFAS 116 (ASC 958), no works of art, historical tracquires, as other similar constants held for public		
	works of art, historical treasures, or other similar assets held for public		ance or
h	public service, provide, in Part XIV, the text of the footnote to its financial of the properties elected as partitled upder SEAS 116 (ASC 958), to		bt
D	If the organization elected, as permitted under SFAS 116 (ASC 958), to	-	
	works of art, historical treasures, or other similar assets held for public	exhibition, education, of research in further	ance of
	public service, provide the following amounts relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part X		> \$
^	***************************************		
2	If the organization received or held works of art, historical treasures, or	•	ide the
	following amounts required to be reported under SFAS 116 (ASC 958)		
	Revenues included in Form 990, Part VIII, line 1		\$
b	Assets included in Form 990, Part X		<b>▶</b> \$

(a) Cost or other basis

(investment)

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

(b) Cost or other basis

(other)

51,599

(c) Accumulated

depreciation

14,711

Schedule D (Form 990) 2011

(d) Book value

36,888

36.888

Description of property

1a Land b Buildings c Leasehold improvements

d Equipment .....

	UMI 990) ZUTE FEET THOOSTRE DOENE		,III 23-1400090	Page v
Part VII	Investments—Other Securities. See Form  (a) Description of security or category	990, Part X, line 12.  (b) Book value	(c) Method	of valuation:
	(including name of security)	(b) blok value	Cost or end-of-ye	
(1) Financial d	erivatives		,	
(2) Closely-he	ld equity interests			
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)	•••••••••••••••••••••••••••••••••••••••			
(H)	,	• • •		
(l) Total (Column	(b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments—Program Related. See Form	990 Part X line 13		
	(a) Description of investment type	(b) Book value	(c) Method (	of valuation:
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Cost or end-of-ye	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)	111 00 00000000000000000000000000000000			
<u>(9)</u>				
(10)	(b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets. See Form 990, Part X, line 15.			
	(a) Description	•		(b) Book value
(1)				(-,
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10) Total (Column	(b) must equal Form 990, Part X, col. (B) line 15.)			
Part X	Other Liabilities. See Form 990, Part X, line	25	<u> </u>	-
1.	(a) Description of liability	(b) Book value		
	ncome taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)			_	
(10)				
(11)	/h)		_	
ı otal. (Column	(b) must equal Form 990, Part X, col. (B) line 25.)	▶		

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

2000000000	dule D (Form 990) 2011 PET INDUSTRY JOINT ADVISORY			Page <b>4</b>
Pa	irt XI Reconciliation of Change in Net Assets from Form 990			
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	1,932,530
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	1,573,309
3	Excess or (deficit) for the year. Subtract line 2 from line 1	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	3	359,221
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	
6	Investment expenses		6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV.)			
9	Total adjustments (net). Add lines 4 through 8			
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and			359,221
Pa	it XII Reconciliation of Revenue per Audited Financial Staten			
1	Total revenue, gains, and other support per audited financial statements		1	1,932,530
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1		
а	Net unrealized gains on investments	2a		
p	Donated services and use of facilities	2b		
С	Recoveries of prior year grants			
d	Other (Describe in Part XIV.)	2d		
е	Add lines 2a through 2d	•••••••	2e	
3	Subtract line 2e from line 1		3	1,932,530
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 XIV.)	4b		
C	Add lines 4a and 4b			
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	<u>1,932,530</u>
	rt XIII Reconciliation of Expenses per Audited Financial State			1 550 000
1	Total expenses and losses per audited financial statements			1,573,309
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 - 1		
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
C	Other losses	2c		
d	Other (Describe in Part XIV.)	2d		
	Add lines 2a through 2d		2e	1 550 000
3	Subtract line 2e from line 1		3	1,573,309
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	Investment expenses not included on Form 990, Part VIII, line 7b			
	Other (Describe in Part XIV.)	4b		
	Add lines 4a and 4b		4c	1 572 200
* * * * * * * * * * * * * * * * * * * *	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	<u> </u>		1,573,309
	int XIV Supplemental Information	liana da and di Doni Di		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III,			
	V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d additional information.	and 40. Also complete	this part to provide	
-	ART Y - FIN 48 FOOTNOTE	,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-
TI	HE PET INDUSTRY JOINT ADVISORY COUNCIL IS			EMPT
O	RGANIZATION AS DEFINED IN SECTION 501(C)(6	) OF THE IN	TERNAL REVE	NUE CODE.
I	N ADDITION, PIJAC HAS BEEN DETERMINED BY T	HE INTERNAL	REVENUE SE	RVICE NOT
T	D BE A PRIVATE FOUNDATION WITHIN THE MEANI	NG OF SECTI	ON 509(A) O	F THE
C	DDE.			***************************************
·		•••••	•••••	•••••

Supplemental information (continued)
PIJAC ADOPTED FASB ASC 740, WHICH PRESENTED A COMPREHENSIVE MODEL FOR HOW
AN ENTITY SHOULD MEASURE, RECOGNIZE, PRESENT AND DISCLOSE IN ITS FINANCIAL
STATEMENTS UNCERTAIN TAX POSITIONS THAT THE PIJAC HAS TAKEN OR EXPECTS TO
TAKE ON A TAX RETURN AS OF JANUARY 1, 2009. UNDER THIS STANDARD, THE PIJAC
RECOGNIZES THE TAX BENEFITS FROM UNCERTAIN TAX POSITIONS ONLY IF IT IS MORE
LIKELY THAN NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY
THE TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION. THE
TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH POSITION ARE
MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50 PERCENT
LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT. THE PIJAC'S
INFORMATIONAL TAX FILINGS ARE SUBJECT TO AUDIT BY THE IRS. THE PIJAC'S
OPEN AUDIT PERIODS ARE 2008-2011. THERE WAS NO IMPACT TO PIJAC'S FINANCIAL
STATEMENTS AS A RESULT OF THE IMPLEMENTATION OF FASB ASC 740.
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**SCHEDULE J** (Form 990)

Compensation Information
For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Part I

Department of the Treasury

PET INDUSTRY JOINT ADVISORY COUNCIL

**Questions Regarding Compensation** 

Employer identification number 23-7400898

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel  Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  X Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b	X	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers,			
	directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		Х
3	Indicate which, if any, of the following the filing organization uses to establish the compensation of the			
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a			
	related organization to establish compensation of the CEO/Executive Director. Explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations  Approval by the board or compensation committee			
	/ pp. oral by the board of componential committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
•	organization or a related organization:			
а	Pagains a payarance normant or change of control normant?	4a		X
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
Ŭ	If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.			
	The to drift of lines and of list the persons and provide the approache difficulties for each item time are the			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
Ū	compensation contingent on the revenues of:			
9		5000000 En	\$666000	55666666
	Annual to describe the control of th	5a 5b		
٠	If "Yes" to line 5a or 5b, describe in Part III.	an an		
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
Ü	compensation contingent on the net earnings of:			
2	The experimental and the second secon	6-		
	And related and other transfers	6a		
٥	If "Yes" to line 6a or 6b, describe in Part III.	6b		- -
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			
•	normanta not departited in lines 5 and 62 If #Von # departite in Dort III	.,		
g	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject	7		<del>                                     </del>
8				
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe	_		
0	in Part III  If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	8	<u> </u>	
9	Regulations section 53 4958-6(c)?			

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2011

PET INDUSTRY JOINT ADVISORY COUNCIL 23-7400898

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed Schedule J (Form 990) 2011
Part II Offic

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

NOTE. THE SUIL OF COLUMNS (DATE)—(iii) TO EACH INSTEAD HOUSE EQUAL THE TOTAL SECTION SECTION (E) ALIO	eduai iile totai atti	ount of Form 330, Far	r vII, section A, IIIIe	la, applicable column	מווו (ב) שנוח (ב)	וואוחומן ווומר אוחואוחתם	=
(А) Nате	(B) Breakdor (i) Base compensation	iown of W-2 and/or 1039-MISC compensation (ii) Bonus & incentive (iii) Oil compensation reports	compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
MICHAEL CANNING (0)	195,000	0:0	0	5,850	14,064	214,914	0:0
					0	0	
MICHAEL MADDOX	166,650	0	0	5,000	5,820	177,470	0
2 ((1)			0		0	0	
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Schedule J (Form 990) 2011

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Schedule J (Form 990) 2011	Page 3
Complete this part to provide the information explanation or descriptions required for Part Llines 1a 1b 3 4a 4b 4c 5a 5b 6a 6b 7 and 8 and for Dart II	
Also complete this part for any additional information.	
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Schedule J (Form 990) 2011	990) 2011

# **SCHEDULE O**

#### Supplemental Information to Form 990 or 990-EZ (Form 990 or 990-EZ)

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

OMB No. 1545-0047 Open to Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

PET INDUSTRY JOINT ADVISORY COUNCIL

Employer identification number 23-7400898

FORM 990 - ORGANIZATION'S MISSION OR MOST SIGNIFICANT ACTIVITIES
PROMOTE RESPONSIBLE PET OWNERSHIP, AND ANIMAL WELFARE, FOSTER ENVIRONMENTAL
STEWARDSHIP, AND ENSURE THE AVAILABILITY OF PETS. IT IS A NONPROFIT,
SERVICE ORIENTED ORGANIZATION COMPRISED OF A DIVERSE MEMBERSHIP
REPRESENTING ALL SEGMENTS OF THE PET INDUSTRY AND PET OWNERS WHO CARE PETS
AND THE PET INDUSTRY.
FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS OR STOCKHOLDERS
THE ORGANIZATION HAS DUES PAYING MEMBERS WITH VOTING RIGHTS.
FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS
CURRENT MEMBERS OF THE ORGANIZATION HAVE THE RIGHT TO VOTE FOR MEMBERS OF
THE BOARD OF DIRECTORS.
······································
FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
THE FORM 990 IS CIRCULATED TO THE ENTIRE BOARD OF DIRECTORS FOR REVIEW
PRIOR TO FILING.
FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
EACH MEMBER OF THE BOARD OF DIRECTORS, OFFICER, AND KEY EMPLOYEE MUST
REVIEW THE CONFLICT OF INTEREST POLICY AND SUBMIT A STATEMENT ANNUALLY.
FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL
THE FINANCE AND AUDIT AND COMPENSATION COMMITTEES REVIEW ASAE COMPENSATION
SURVEYS AND RECOMMEND A COMPENSATION AMOUNT FOR THE PRESIDENT. THE BOARD

Name of the organization PET INDUSTRY JOINT ADVISORY COUNCIL	Employer identification number 23-7400898
THEN REVIEWS AND APPROVES THE AMOUNT.	
FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOS	URE EXPLANATION
THE IRS FORM 990 WILL BE AVAILABLE TO THE PUBLIC UPON RE	QUEST. COPIES WILL
BE PROVIDED IMMEDIATELY IN THE CASE OF IN-PERSON REQUEST	. REQUEST RECEIVED
BY WRITTEN, PHONE FAX OR E-MAIL MEANS WILL BE HONORED BY	DIRECTING THE
REQUESTORS TO OUR WEBSITE. THE CURRENT FORM 990 AS WELL	AS FOR THE PREVIOUS
FIVE YEARS (NOT INCLUDING SCHEDULE B), CONFLICT OF INTER	EST POLICY, AND
ANNUAL FINANCIAL STATEMENT, WILL BE POSTED ON THE ORGANI	ZATION'S WEBSITE. A
REASONABLE COPYING FEE SHALL BE ASSESSED PLUS ACTUAL POS	TAGE FOR MULTIPLE
COPIES REQUESTED FROM THE SAME INDIVIDUAL OR RELATED GRO	OUP OF INDIVIDUALS.
PIJAC'S ARTICLES OF INCORPORATION, BYLAWS, FINANCIAL STA	TEMENTS, FORM 990
AND POLICY POSITIONS AND PROCEDURES RELATED CONFLICT OF	INTEREST,
COMPENSATION, AND OTHER POLICIES RELATED TO GOVERNANCE A	RE AVAILABLE FOR
PUBLIC INSPECTION AT THE ORGANIZATION'S HEADQUARTERS, IN	WASHINGTON DC
PLANS ARE UNDERWAY TO INCLUDE SOME OF THESE DOCUMENTS ON	THE ORGANIZATION'S
WEBSITE IN THE SECTION DESCRIBING GOVERNANCE.	
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