

Form **990**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

A For the 2015 calendar year, or tax year beginning **07/01/15**, and ending **06/30/16**

B Check if applicable:

- Address change
- Name change
- Initial return
- Final return/terminated
- Amended return
- Application pending

C Name of organization
CHEYENNE ANIMAL SHELTER

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
800 SOUTHWEST DRIVE

City or town, state or province, country, and ZIP or foreign postal code
CHEYENNE WY 82007

D Employer identification number
83-0217643

E Telephone number
307-632-6655

G Gross receipts \$ **1,522,445**

F Name and address of principal officer:
ROBERT FECHT
800 SOUTHWEST DRIVE
CHEYENNE WY 82007

H(a) Is this a group return for subordinates? Yes No

H(b) Are all subordinates included? Yes No
If "No," attach a list. (see instructions)

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: **WWW.CHEYENNEANIMALSHELTER.ORG**

H(c) Group exemption number ▶

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: **1974**

M State of legal domicile: **WY**

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE MISSION OF THE CHEYENNE ANIMAL SHELTER IS TO ENHANCE THE QUALITY OF LIFE FOR ANIMALS AND PEOPLE THROUGH COMPASSION, RESPECT AND EDUCATION.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	16
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	16
	5 Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	71
	6 Total number of volunteers (estimate if necessary)	6	232
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
7b Net unrelated business taxable income from Form 990-T, line 34	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 824,243	Current Year 397,225
	9 Program service revenue (Part VIII, line 2g)	975,650	1,028,128
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	72,732	70,388
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,872,625	1,495,741
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,251,841	1,349,106
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 204,459		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	766,669	769,689
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,018,510	2,118,795	
19 Revenue less expenses. Subtract line 18 from line 12	-145,885	-623,054	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 3,029,943	End of Year 2,862,566
	21 Total liabilities (Part X, line 26)	366,795	822,472
	22 Net assets or fund balances. Subtract line 21 from line 20	2,663,148	2,040,094

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer LYNN BOAK	CLIENTS COPY	Date
	Type or print name and title PRESIDENT		
Paid Preparer Use Only	Print/Type preparer's name ROBERT B. DICKERSON	Preparer's signature 	Date 12/07/16
	Firm's name ▶ RLR, LLP	Firm's EIN ▶ 84-1483675	Check <input type="checkbox"/> if self-employed PTIN P00432362
	Firm's address ▶ 1620 CENTRAL AVE STE 304 CHEYENNE, WY 82001	Phone no. 307-631-5598	

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2015)

DAA

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

THE MISSION OF THE CHEYENNE ANIMAL SHELTER IS TO ENHANCE THE QUALITY OF LIFE FOR ANIMALS AND PEOPLE THROUGH COMPASSION, RESPECT AND EDUCATION.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes No

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?

Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 1,327,546 including grants of\$) (Revenue \$)

THE ANIMAL SHELTER SERVES AS AN ADVOCATE FOR THE SAFETY AND WELFARE OF ANIMALS IN THE COMMUNITY, PROVIDING HUMANE SHELTER TO HOLD AND ADOPT ANIMALS, PROMOTE HUMANE EDUCATION, AND REUNITE LOST ANIMALS AND THEIR OWNERS.

4b (Code:) (Expenses \$ 292,480 including grants of\$) (Revenue \$)

THE ANIMAL SHELTER PROVIDES ANIMAL CONTROL SERVICES TO THE CITY OF CHEYENNE AND LARAMIE COUNTY. ANIMAL CONTROL OFFICERS PATROL THE CITY AND COUNTY, INVESTIGATE REPORTED CASES OF NEGLECT AND ABUSE, AND ISSUE CITATIONS WHEN CONDITIONS WARRANT AND WHEN OTHER INTERVENTIONS HAVE FAILED TO IMPROVE THE SITUATION. OFFICERS EDUCATE AND ADVISE OWNERS ON LEASH AND LICENSE LAWS, AND ENFORCE WASTE MANAGEMENT ORDINANCES. THEY ALSO PROVIDE EDUCATION TO CITIZENS AND OWNERS ON THE HUMANE AND RESPONSIBLE CARE AND TREATMENT OF ANIMALS, PROMOTING KINDNESS AND COMPASSION TOWARD ALL ANIMALS, AND OFFER HELP AND SUGGESTIONS TO OWNERS WITH ANIMAL ISSUES SUCH AS BARKING DOGS, ESCAPING DOGS, ROAMING CATS, AND UNWANTED WILDLIFE. WHEN NECESSARY, OFFICERS ALSO WORK CLOSELY WITH THE GAME AND FISH DEPARTMENT AND THE

4c (Code:) (Expenses \$ including grants of\$) (Revenue \$)

4d Other program services (Describe in Schedule O.)

(Expenses \$ including grants of\$) (Revenue \$)

4e Total program service expenses ▶ 1,620,026