

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047
2014
Open to Public Inspection

A For the 2014 calendar year, or tax year beginning **07/01/14**, and ending **06/30/15**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization CHEYENNE ANIMAL SHELTER		D Employer identification number 83-0217643
	Doing business as		E Telephone number 307-632-6655
	Number and street (or P.O. box if mail is not delivered to street address) 800 SOUTHWEST DRIVE		Room/suite
	City or town, state or province, country, and ZIP or foreign postal code CHEYENNE WY 82007		G Gross receipts\$ 1,897,218
F Name and address of principal officer: ROBERT D. FECHT 800 SOUTHWEST DRIVE CHEYENNE WY 82007		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶	
J Website: ▶ WWW.CHEYENNEANIMALSHELTER.ORG		L Year of formation: 1974 M State of legal domicile: WY	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			

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	17
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	17
	5 Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	76
	6 Total number of volunteers (estimate if necessary)	6	350
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, line 34	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	307,448	824,243
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	965,871	975,650
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	77,546	72,732
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,350,865	1,872,625
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)	1,271,303	1,251,841
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 119,532		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	695,818	766,669	
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,967,121	2,018,510	
19 Revenue less expenses. Subtract line 18 from line 12	-616,256	-145,885	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	2,923,506	3,029,943
	22 Net assets or fund balances. Subtract line 21 from line 20	114,473	366,795
		2,809,033	2,663,148

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 <i>Lynn Boak</i>	Date	
	Type or print name and title PRESIDENT		
Paid Preparer Use Only	Print/Type preparer's name ROBERT B. DICKERSON	Preparer's signature <i>RD</i>	Date 12/08/15
	Firm's name ▶ RLR, LLP	Check <input type="checkbox"/> if self-employed	PTIN P00432362
	Firm's address ▶ 1620 CENTRAL AVE STE 304 CHEYENNE, WY 82001	Firm's EIN ▶ 84-1483675	Phone no. 307-631-5598