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**Return of Organization Exempt From Income Tax** 

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

OMB No. 1545-0047

Open to Public

▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasury ► Go to www.irs.gov/Form990 for instructions and the latest information. Inspection and ending A For the 2021 calendar year, or tax year beginning Check if applicable: C Name of organization D Employer identification number Address change KOREAN K9 RESCUE INC Name change 81-4950261 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Final return/ 347-466-0333 PO BOX 1092 termin-ated 862,637. G Gross receipts \$ City or town, state or province, country, and ZIP or foreign postal code LONG ISLAND CITY, NY Amended return 11101 H(a) Is this a group return Applica-F Name and address of principal officer: GINA BOEHLER Yes X No for subordinates? pending SAME AS C ABOVE H(b) Are all subordinates included? Yes No Tax-exempt status: X = 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) or If "No," attach a list. See instructions J Website: ► WWW.KOREANK9RESCUE.ORG **H(c)** Group exemption number ▶ K Form of organization: X Corporation Association Other > L Year of formation: 2017 M State of legal domicile: NY Part I Summary Briefly describe the organization's mission or most significant activities: WE ARE A NON-PROFIT, NO-KILL Activities & Governance 501(C)(3) DOG RESCUE ORGANIZATION THAT SAVES DOGS FROM THE MEAT Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 8 Number of voting members of the governing body (Part VI, line 1a) 5 Number of independent voting members of the governing body (Part VI, line 1b) 23 5 Total number of individuals employed in calendar year 2021 (Part V, line 2a) 100 6 Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, Part I, line 11 **Prior Year Current Year** 325,317. 442,798. Contributions and grants (Part VIII, line 1h) Revenue 359,219. 389,661. Program service revenue (Part VIII, line 2g) 0. -1,467.Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 0. 0. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 684,536. 830,992. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) ........ 18,935. 36,148. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. Benefits paid to or for members (Part IX, column (A), line 4) 205,685. 320,264. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 426,027. 427,565. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 650,647. 783,977. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 33,889. 47,015. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 229,868. 163,967. 20 Total assets (Part X, line 16) 1,619. 20,505. 21 Total liabilities (Part X, line 26) 162,348. 209,363. Net assets or fund balances. Subtract line 21 from line 20 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. Signature of officer Date Sign GINA BOEHLER, PRESIDENT Here Type or print name and title PTIN Print/Type preparer's name Preparer's signature Lawrence Spirio 11 06/16/22 if self-employed LAWRENCE P00011262 Paid SPIRIO Firm's name KWM CPA'S LLP Firm's EIN ► 11-2674705 Preparer Firm's address 100 JERICHO QUADRANGLE -Use Only STE 220

JERICHO, NY 11753

May the IRS discuss this return with the preparer shown above? See instructions

X Yes No

Phone no. 516 - 333 - 6881

## SAVES DOGS PROM THE MEAT TRADE, PUPPY MILLS, AND HIGH-RILL SHELTERS IN SOUTH KOREA.    Did the organization undertake any significant program services during the year which were not listed on the prior from 1980 or 1980-E2?	ı a	Check if Schoolule O contains a response or note to any line in this Part III	X
WE ARE A NON-PROFIT, NO-KILL 501(C) (3) DOG RESCUE ORGANIZATION THAT SAVES DOGS FROM THE MEAT TRADE, PUPPY MILLS, AND HIGH-KILL SHELTERS IN SOUTH KOREA.  2 Did the organization undertake any significant program services during the year which were not listed on the prof rom 990 or 990-52?  If Yes, Saves or Sended on the proform service organization cases conducting, or make significant changes in how it conducts, any program services?  If Yes, Saves or Schedule O.  3 Did the organization cases conducting, or make significant changes in how it conducts, any program services, as measured by expenses. Section 901(6), 90 and 901(d) 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.  4 (code () (loseress 5 591, 499 - neutring grants of 3 36,148 - ) (tenerus 5 388,194 - )  PROGRAM IS ESTABLISHED FOR THE REHABILITATION AND ADOPTION OF RESCUED DOGS  4 (code () (Expenses 5 institute organization and program service and program serv	_		
SAVES DOGS FROM THE MEAT TRADE, PUPPY MILLS, AND HIGH-KILL SHELTERS IN SOUTH KOREA.  Did the organization undertake any significant program services during the year which were not listed on the prior Form 950 or 930 E2?  If "Yes," describe these new services on Schedule 0.  Dot the organization cease conducting, or make significant changes in how it conducts, any program services?	•		ON THAT
SOUTH KOREA.  2 Did the organization undertake any significant program services during the year which were not listed on the prior form 990 or 990 €2?  If Yes, South organization cases conducting, or make significant changes in how it conducts, any program services?  If Yes South organization cases conducting, or make significant changes in how it conducts, any program services?  If Yes South organization cases conducting, or make significant changes in how it conducts, any program services?  If Yes South organization is program service accomplishments for each of its three largest program services, as measured by expenses. Seaches of Dicklopated and allocations to others, the total expenses, and revenue, if any, for each program service reported.  40 (Case South organization is program service reported.  41 (Case South organization is program service reported.  42 (Case South organization is program service reported.  43 (Case South organization is program service reported.  44 (Case South organization is program service reported.  45 (Case South organization is program service reported.  46 (Case South organization is program service reported.  47 (Case South organization is program service reported.  48 (Case South organization is program service reported.  49 (Case South organization is program service reported.  40 (Case South organization is program service reported.  40 (Case South organization is program service reported.  41 (Case South organization is program service south organization is program service.  42 (Case South organization is program service.  43 (Case South organization is program service.  44 (Case South organization is program service.  45 (Case South organization is program service.  46 (Case South organization is program service.  47 (Case South organization is program service.  48 (Case South organization is program service.  49 (Case South organization is program service.  49 (Case South organization is program service.  40 (Case South organization is program service.  49 (Case Sout			
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prior Form 990 or 990 E2?	2	Did the organization undertake any significant program services during the year which were not listed on the	
B if "Yes," describe these new services on Schedule O. B Old the organization case conducting, or make significant changes in how it conducts, any program services?			Yes X No
3 Did the organization cases conducting, or make significant changes in how it conducts, any program services?			
H "Yes," describe the searchanges on Schedule O.  Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.  Section 50 (c)(s) 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 (Cooks) (expenses	3		Yes X No
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	4e	601 400	
			Form <b>990</b> (2021)

#### Part IV Checklist of Required Schedules

			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	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	4		х
_	during the tax year? If "Yes," complete Schedule C, Part II  Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	-		
5	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
Ū	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?  If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
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	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i>	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	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	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
00	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
	domestic government on Fart IX, column (A), line 1: ii 100, complete ochedule i, i atto i and ii	<u> </u>		

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Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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			٠,,
	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	١		
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	040		
٨	any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24u		
25a	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	254		
	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		х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		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			7.7
	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		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			x
22	Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		22
34	Part V, line 1	34		х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
-	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
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 on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	X	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			Ш
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 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	990	(0004)

132004 12-09-21 Form **990** (2021)

#### Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

					Yes	No				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		0.3							
	filed for the calendar year ending with or within the year covered by this return	2a	23		37					
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					Х				
				3a		Α.				
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule			3b						
48	At any time during the calendar year, did the organization have an interest in, or a signature or other financial account in a foreign country (such as a bank account, securities account, or other financial account.)		•	4a		X				
h	If "Yes," enter the name of the foreign country	accoun	ij:	40						
b	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccount	s (FRAR)							
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?									
	c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?									
	6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit									
	any contributions that were not tax deductible as charitable contributions?			6a		Х				
b	If "Yes," did the organization include with every solicitation an express statement that such contribut									
	were not tax deductible?			6b						
7	Organizations that may receive deductible contributions under section 170(c).									
а	$Did the organization \ receive \ a \ payment \ in \ excess \ of \$75 \ made \ partly \ as \ a \ contribution \ and \ partly \ for \ goods \ and \ sense \ sense$	vices pr	ovided to the payor?	7a		Х				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b						
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as requ	ired							
	to file Form 8282?			7с		X				
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d								
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of			7e						
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr			7f						
g	If the organization received a contribution of qualified intellectual property, did the organization file Formula (1997).			7g						
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, airplanes, or other vehicles, did the organization of cars, airplanes, airpl			7h						
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained			8						
9	sponsoring organization have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.			0						
а	Did the agree of a constitution and a great scale distribution and a continue 40000			9a						
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b						
10	Section 501(c)(7) organizations. Enter:									
а	Initiation fees and capital contributions included on Part VIII, line 12	10a								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b								
11	Section 501(c)(12) organizations. Enter:									
а	Gross income from members or shareholders	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								
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form			12a						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			40-						
а	Is the organization licensed to issue qualified health plans in more than one state?			13a						
h	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the									
	organization is licensed to issue qualified health plans	13b								
С	Enter the amount of reserves on hand	-								
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		Х				
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu			14b						
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune									
	excess parachute payment(s) during the year?			15		Х				
	If "Yes," see the instructions and file Form 4720, Schedule N.									
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	nt incom	ne?	16		Х				
	If "Yes," complete Form 4720, Schedule O.									
17	$\textbf{Section 501(c)(21) organizations.} \ Did the trust, any disqualified person, or mine operator engage in the trust of the trust of$	any								
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17						
	If "Yes," complete Form 6069.									

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 on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X						
Sec	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									
	If there are material differences in voting rights among members of the governing body, or if the governing									
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.									
b	Enter the number of voting members included on line 1a, above, who are independent									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other									
	officer, director, trustee, or key employee?	2		X						
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision									
	of officers, directors, 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 990 was filed?	4		X						
5	5 Did the organization become aware during the year of a significant diversion of the organization's assets?									
6	Did the organization have members or stockholders?	6	Х							
7a	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	Х							
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or									
	persons other than the governing body?	7b		Х						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:									
а	The governing body?	8a	Х							
b	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 reached at the									
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X						
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)									
			Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?	10a		X						
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 filing the form?	11a	Х							
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х							
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe									
	on Schedule O how this was done	12c	X							
13	Did the organization have a written whistleblower policy?	13	X							
14	Did the organization have a written document retention and destruction policy?	14		Х						
15	Did the process for determining compensation of the following persons include a review and approval by independent									
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		37							
a	The organization's CEO, Executive Director, or top management official	15a	X							
b	Other officers or key employees of the organization	15b	Х							
40	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.									
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			v						
_	taxable entity during the year?	16a		Х						
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	401								
800	exempt status with respect to such arrangements?	16b								
	tion C. Disclosure									
17 10	List the states with which a copy of this Form 990 is required to be filed NY  Section 6104 requires an examination to make its Forms 1022 (1024 or 1024 A. if applicable), 900, and 900 T (section 501(a)(2))	0.051.	) over:	able						
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)	s only	, avalla	auie						
	for public inspection. Indicate how you made these available. Check all that apply.  Own website  Another's website  W Upon request  Other (explain on Schedule O)									
10	·······································	d fine:	ooic!							
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	u iinal	icial							
20	statements available to the public during the tax year.									
20	State the name, address, and telephone number of the person who possesses the organization's books and records ► KOREAN K9 RESCUE INC - 347-466-0333									
	24-07 31ST STREET, ASTORIA, NY 11102									

Form **990** (2021)

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

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

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

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

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

(A) Name and title	(B) Average hours per week	box	not c	Pos heck ss pe	more rson	than is bot or/trus	h an	( <b>D)</b> Reportable compensation from	<b>(E)</b> Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) GINA BOEHLER	40.00	Ī.,		ι,				44 500	0	•
PRESIDENT	5.00	Х		Х				44,500.	0.	0
(2) TINA CASTELINO	3.00	X		x				0.	0.	0
SECRETARY (3) JUNG KIM	5.00	╀≏		^				0.	0.	0
TREASURER	3.00	$ \mathbf{x} $		x				0.	0.	0
(4) ANDREW GLANCY	0.00	1							•	
BOARD MEMBER	3733	$ \mathbf{x} $						0.	0.	0
(5) SUSAN LAW	0.00	╁							<u> </u>	
BOARD MEMBER		X						0.	0.	0
(6) LILY ESTABROOK	0.00	1								
BOARD MEMBER		X						0.	0.	0
(7) MICHAEL WRAY	0.00									
BOARD MEMBER		X						0.	0.	0
(8) RHONDA RAMPARAS	0.00	_							_	_
BOARD MEMBER		Х						0.	0.	0
		-								
		$\vdash$								
		$\vdash$								
		-								
		╁								
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		-								
		$\top$								
		$\vdash$								
		1								

Form **990** (2021)

Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, and	d Hi	ighe	st C	Compensated Employe	es (continued)			
(A) Name and title	(B) Average hours per week	box	Position do not check more than one ox, unless person is both an officer and a director/trustee)				h an	(D) Reportable compensation from	(E) Reportable compensation from related	aı	(F) stimated mount of other	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	f org an	npensatio rom the ganization Id related anizations	n I
		드	드	Of	Ke	宝品	임					
1b Subtotal								44,500.	0	•		0.
c Total from continuation sheets to Part V d Total (add lines 1b and 1c)	II, Section A						<b>&gt;</b>	0. 44,500.	0	•	(	0.
2 Total number of individuals (including but n compensation from the organization ▶							no re	eceived more than \$100	0,000 of reportable	•		0
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s										3		No X
4 For any individual listed on line 1a, is the su and related organizations greater than \$15	um of reportab	le co	omp	ensa	atior	n and	d oth		the organization	4		X
5 Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com	accrue compe	nsat	ion f	rom	any	/ unr				5	2	X
Complete this table for your five highest contractors      the organization. Report compensation for		-							· · · · · · · · · · · · · · · · · · ·	nsation	from	
(A) Name and business	,		ONI		VILII	OI W		(B)  Description of s			C) ensation	
							$\frac{1}{1}$					
2 Total number of independent contractors (i \$100,000 of compensation from the organi	ŭ	ot lii	mite	d to		se li:	sted	d above) who received m	nore than			
	2411011									Form	990 (20)	21)

Form 990 (2021) KOREAN :
Part VIII Statement of Revenue

		Check if Schedule O contains a res	nonse	or note to any lin	e in this Part VIII			
		Check is conteduce a contains a rec	ропос	or riote to arry iii	(A)	(B)	(C)	(D)
					Total revenue	Related or exempt		Revenuè excluded
						function revenue	business revenue	from tax under sections 512 - 514
(0 (0		<del></del>	1					Sections 512 - 514
nts l		a Federated campaigns1	1					
<u> </u>		b Membership dues1t	<u> </u>					
A,	(	c Fundraising events1	>					
Contributions, Gifts, Grants and Other Similar Amounts	(	d Related organizations 10	i l					
i,s	•	e Government grants (contributions)	•					
rior	f	f All other contributions, gifts, grants, and						
를		similar amounts not included above 11	:	442,798.				
<u> </u>			\$	31,645.				
ang	•	h Total. Add lines 1a-1f			442,798.			
<del>- 1</del>		1 Total / Ga in Go Ta Ti		Business Code				
		a ADOPTION FEES		453910	389,661.	389,661.		
je				<del>1</del> 333110	303,001.	303,001.		_
ue	ľ	b						
m S	•	<u> </u>						
gra Re	•	d						
Program Service Revenue	•	e						
<u>-</u>	f	f All other program service revenue						
	9	g Total. Add lines 2a-2f		<b></b>	389,661.			
	3	Investment income (including dividend	s, intere	st, and				
		other similar amounts)		▶				
	4	Income from investment of tax-exempt	bond p	roceeds <b>&gt;</b>				
	5	Royalties						
		(i) R		(ii) Personal				
	6 a	a Gross rents 6a						
		b Less: rental expenses 6b						
		c Rental income or (loss) 6c						
		d Not rental income or (less)						
		a Gross amount from sales of (i) Secu	ırities	(ii) Other				
	, ,			(ii) Other				
		, <del>                                    </del>	170.					
a	t	b Less: cost or other basis	C 1 E					
ğ		and sales expenses 7b 31, 0	167					
Revenue		. ,			1 467	1 467		
Ř.		d Net gain or (loss)		<b></b>	-1,467.	-1,467.		
ther	8 8	a Gross income from fundraising events (not						
ō		including \$ of	•					
		contributions reported on line 1c). See						
		Part IV, line 18	8a					
	ŀ	b Less: direct expenses	8b					
	(	c Net income or (loss) from fundraising e	vents					
		a Gross income from gaming activities. S						
		Part IV, line 19	9a					
	ŀ	<b>b</b> Less: direct expenses						
		c Net income or (loss) from gaming activi						
		a Gross sales of inventory, less returns						
	10 6	and allowances	100					
		b Less: cost of goods sold						
$\rightarrow$		c Net income or (loss) from sales of inver	itory					
sn		_		Business Code				
Miscellaneous Revenue	11 6							
llar /en	ŀ	b						
Re P		c						
Ξ Į		d All other revenue						
	•	e Total. Add lines 11a-11d			020 000	200 404		
	12	Total revenue. See instructions			830,992.	388,194.	0.	0.

#### Part IX | Statement of Functional Expenses

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

	Check if Schedule O contains a respon	<del></del>			
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations	4 4 4 4 4			
	and domestic governments. See Part IV, line 21	1,100.	1,100.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	25 040	25 040		
	individuals. See Part IV, lines 15 and 16	35,048.	35,048.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	44,500.	22 250	22,250.	
•	trustees, and key employees	44,500.	22,250.	22,230.	
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	229,848.	199,337.	30,511.	
7	Other salaries and wages	449,040.	199,331 <b>•</b>	30,311.	
8					
0	section 401(k) and 403(b) employer contributions)	20,469.	20,469.		
9	Other employee benefits	25,447.	20,403.	5,276.	
10	Payroll taxes  Fees for services (nonemployees):	45,447•	20,11.	3,210.	
11	. ` ' ' '				
a					
b	Legal	5,075.	5,075.		
۲ C	<u> </u>	3,073.	3,073.		
d e	D ( ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '				
f	Investment management fees				
g					
9	column (A), amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion	21,476.			21,476
13	Office expenses	32,650.	29,386.	3,264.	, -
14	Information technology	15,487.	13,938.	1,549.	
15	Royalties	· · · · · · · · · · · · · · · · · · ·	,	•	
16	Occupancy				
17	Travel	13,214.	11,892.	1,322.	
18	Payments of travel or entertainment expenses			•	
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,060.	1,060.		
23	Insurance	12,683.	12,683.		
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),				
	amount, list line 24e expenses on Schedule 0.)				
а	TRANSPORTATION AND CARG	197,824.	197,824.		
b	PET SUPPLIES	39,018.	39,018.		
С	VETERINARY EXPENSE	35,490.	35,490.		
d	BUILDING LEASE	26,450.	25,127.	1,323.	
е	All other expenses	27,138.	21,631.		5,507
25	Total functional expenses. Add lines 1 through 24e	783,977.	691,499.	65,495.	26,983
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)				

12300616 757066 41020.0

Form 990 (2021)
Part X Balance Sheet

Pai	rt X	Balance Sheet					
		Check if Schedule O contains a response or r	ote to a	y line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			127,647.	1	225,210.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			30,602.	4	
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sub	ostantial	contributor, or 35%			
		controlled entity or family member of any of th	ese pers	ons		5	
	6	Loans and other receivables from other disqu	alified pe	rsons (as defined			
		under section 4958(f)(1)), and persons describ	ction 4958(c)(3)(B)		6		
ţ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ä	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment: cost or other		Ī			
		basis. Complete Part VI of Schedule D	10a	5,300.			
	b	Less: accumulated depreciation		2,650.	3,710.	10c	2,650.
	11	Investments - publicly traded securities			11		
	12	Investments - other securities. See Part IV, line			12		
	13	Investments - program-related. See Part IV, lin		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		2,008.	15	2,008.	
	16	Total assets. Add lines 1 through 15 (must ed			163,967.	16	229,868.
	17	Accounts payable and accrued expenses			17	20,505.	
	18	Grants payable			18		
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complet				21	
ű	22	Loans and other payables to any current or fo					
Liabilities		trustee, key employee, creator or founder, sub					
abil		controlled entity or family member of any of the				22	
Ë	23	Secured mortgages and notes payable to unr	•			23	
	24	Unsecured notes and loans payable to unrela				24	
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on lin	•				
		of Schedule D		·	1,619.	25	0.
	26	Total liabilities. Add lines 17 through 25			1,619.	26	20,505.
		Organizations that follow FASB ASC 958, c			·		
Ses		and complete lines 27, 28, 32, and 33.					
auc	27	Net assets without donor restrictions				27	
Bal	28	Net assets with donor restrictions				28	
pu		Organizations that do not follow FASB ASC					
Ŀ		and complete lines 29 through 33.					
ŏ	29	Capital stock or trust principal, or current fund	ds		0.	29	0.
set	30	Paid-in or capital surplus, or land, building, or			0.	30	0.
As	31	Retained earnings, endowment, accumulated		Г	162,348.	31	209,363.
Net Assets or Fund Balances	32	Total net assets or fund balances			162,348.	32	209,363.
~	33	Total liabilities and net assets/fund balances			163,967.	33	229,868.

Form **990** (2021)

Pa	rt XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>					
1	Total revenue (must equal Part VIII, column (A), line 12)	1			0,9			
2								
3	Revenue less expenses. Subtract line 2 from line 1	3		47,015 162,348				
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))							
5	Net unrealized gains (losses) on investments	5						
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,							
	column (B))	10		20	9,3	<u>63.</u>		
Pa	rt XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII							
			_		Yes	No		
1	Accounting method used to prepare the Form 990:  Cash X Accrual Other							
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a	Х			
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a						
	separate basis, consolidated basis, or both:							
	X Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?		L	2b		Х		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis	s,					
	consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audit	t,					
	review, or compilation of its financial statements and selection of an independent accountant?		L	2c		X		
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	nedule	Ο.					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	udit					
	Act and OMB Circular A-133?		L	За		X		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired au	ıdit					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b				

Form **990** (2021)

#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

### **Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** Name of the organization KOREAN K9 RESCUE INC 81-4950261 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 X An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other ì your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
_	etion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 4	(a) 2017	(b) 2010	(6) 2019	(u) 2020	(6) 2021	(i) iotai
8	Gross income from interest,						
o	dividends, payments received on						
	· • •						
	securities loans, rents, royalties,						
0	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
10	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
	<b>Total support.</b> Add lines 7 through 10					40	
12	Gross receipts from related activities,	•	,	fatla a fiftle ta		[ 12 ]	
13	First 5 years. If the Form 990 is for the						▶□
500	organization, check this box and stop ction C. Computation of Publ	ic Support De	rcentage				<u> </u>
				oolumn (f))		14	%
	Public support percentage for 2021 (I Public support percentage from 2020					15	
	33 1/3% support test - 2021. If the contract of the contract o						
10a		-					
h	<b>stop here.</b> The organization qualifies <b>33 1/3% support test - 2020.</b> If the o						
L.							
47~	and <b>stop here.</b> The organization qual <b>10%</b> -facts-and-circumstances tes						
17 a							
	and if the organization meets the fact					_	
	meets the facts-and-circumstances to	•	•		•		
b	10% -facts-and-circumstances tes	-					10% or
	more, and if the organization meets the				-		<b>.</b> —
	organization meets the facts-and-circle		-	•			
<u>18</u>	Private foundation. If the organization	n did not check a	box on line 13, 16	6a, 16b, 17a, or 17	b, check this box	and see instruction	ıs ▶∟

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

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

	qualify under the tests listed b	elow, please comp	olete Part II.)				
Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	6,933.	80,488.	227,773.	325,317.	441,232.	1,081,743.
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	94,100.	302,700.	301,868.	359,219.	389,661.	1,447,548.
3	Gross receipts from activities that	-	-	-	-	-	
-	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5	101,033.	383,188.	529,641.	684,536.	830,893.	2,529,291.
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						0.
k	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						0
	amount on line 13 for the year						0.
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						2,529,291.
			" > 00 / 0	( ) 22/2	( 0 0000	( ) 0004	(n = 1 )
	endar year (or fiscal year beginning in)	(a) 2017 101, 033.	(b) 2018 383, 188.	(c) 2019 529,641.	(d) 2020 684,536.	(e) 2021 830, 893.	(f) Total
10a	Amounts from line 6	101,033.	303,100.	329,041.	004,550.	030,033.	2,529,291.
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b  Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	101 022	202 100	F20 641	694 536	020 002	. 500 001
	Total support. (Add lines 9, 10c, 11, and 12.)	-	-	-	684,536.	-	2,529,291.
14	First 5 years. If the Form 990 is for the	•		•	•	. , . , .	on,
<u></u>							<b>P</b>
	ction C. Computation of Publ					l l	100 00
	Public support percentage for 2021 (			column (f))			100.00 %
	Public support percentage from 2020					16	100.00 %
Se	ction D. Computation of Inve						0.0
17	Investment income percentage for 20			ne 13, column (f))		17	•00 %
18	Investment income percentage from					18	.00 %
19a	33 1/3% support tests - 2021. If the						
k	more than 33 1/3%, check this box a 33 1/3% support tests - 2020. If the						<b>X</b>
	line 10 is not many them 00 1/00/	ack this hov andet	on here. The organ	nization qualifies a	as a publicly suppo	orted organization	
	line 18 is not more than 33 1/3%, che	ch tills box and st	op nord. The orga	inzation qualifico d	to a pablicly cappe		

#### Part IV | Supporting Organizations

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

#### **Section A. All Supporting Organizations**

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
За		
3b		
3с		
40		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
Ja		
9b		
9с		
10a		
10h		
10b		

Schedule A (Form 990) 2021

Par	t IV   Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			110
•	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sect	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	structio	ns).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

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Sche	edule A (Form 990) 2021 KOREAN K9 RESCUE INC			81-4950261 Page 6
	rt V Type III Non-Functionally Integrated 509(a)(3) Suppo	rting Organ	izations	<u> </u>
1	Check here if the organization satisfied the Integral Part Test as a qual	ifying trust on N	Nov. 20, 1970 (explain	in Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations r	nust complete	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		

6

Schedule A (Form 990) 2021

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

instructions).

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions).

Schedule A (Form 990) 2021

a Excess from 2017 **b** Excess from 2018 c Excess from 2019 d Excess from 2020 e Excess from 2021

Schedule A (Form 990) 2021

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

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

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

OMB No. 1545-0047

Inspection

Name of the organization

KOREAN K9 RESCUE INC

**Employer identification number** 81-4950261

Par			r Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lir	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(a) zenor adviced ianiae	(a) i and and only accounts
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in		funds
3	are the organization's property, subject to the organization's	_	
6	Did the organization inform all grantees, donors, and donor a		
Ü	for charitable purposes and not for the benefit of the donor		
Par		ganization answered "Yes" on Form 990. Part	
1	Purpose(s) of conservation easements held by the organizat	-	,
·	Preservation of land for public use (for example, recreations)		istorically important land area
	Protection of natural habitat		ertified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qual	ified conservation contribution in the form of a	a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
	Total acreage restricted by conservation easements		
	Number of conservation easements on a certified historic st		
	Number of conservation easements included in (c) acquired		
	listed in the National Register		
3	Number of conservation easements modified, transferred, re		
	year ►		
4	Number of states where property subject to conservation ea	asement is located >	
5	Does the organization have a written policy regarding the pe	eriodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting	, handling of violations, and enforcing conserv	vation easements during the year
	<b>&gt;</b>		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservatior	n easements during the year
	<b>▶</b> \$		
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the requirements of section 170(h)(	4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservat	ion easements in its revenue and expense sta	atement and
	balance sheet, and include, if applicable, the text of the foot	note to the organization's financial statement	s that describes the
	organization's accounting for conservation easements.		
Par			er Similar Assets.
	Complete if the organization answered "Yes" on Forn		
1a	If the organization elected, as permitted under FASB ASC 99		
	of art, historical treasures, or other similar assets held for pu		erance of public
	service, provide in Part XIII the text of the footnote to its fina		
b	If the organization elected, as permitted under FASB ASC 99		
	art, historical treasures, or other similar assets held for public	c exhibition, education, or research in furthera	ance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on 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	- · · · · · · · · · · · · · · · · · · ·	ain, provide
	the following amounts required to be reported under FASB A		
	Revenue included on Form 990, Part VIII, line 1		· · · · · · · · · · · · · · · · · · ·
	Assets included in Form 990, Part X		
LHA	For Paperwork Reduction Act Notice, see the Instruction	is for Form 990.	Schedule D (Form 990) 2021

Sche		K9 RESCUE						-4950			age <b>2</b>
Pa	rt III   Organizations Maintaining (	Collections of Ar	rt, Histo	rical Tr	easures, (	or Othe	er Similar A	<b>Assets</b> (c	ontin	ued)	
3	Using the organization's acquisition, access	ion, and other record	ls, check a	any of the	following tha	at make s	significant use	of its			
	collection items (check all that apply):										
а	Public exhibition	d		an or exc	hange progra	am					
b	Scholarly research	е	O1	her							
С	Preservation for future generations										
4	Provide a description of the organization's c	collections and explain	n how the	y further tl	he organizati	ion's exe	mpt purpose i	n Part XIII			
5	During the year, did the organization solicit	or receive donations of	of art, hist	orical trea	sures, or oth	er similaı	rassets				_
	to be sold to raise funds rather than to be m							Ye			No
Pa	rt IV Escrow and Custodial Arrar	<b>igements.</b> Comple	ete if the o	rganizatio	n answered	"Yes" on	Form 990, Pa	rt IV, line	9, or		
	reported an amount on Form 990, Pa	art X, line 21.									
1a	Is the organization an agent, trustee, custoo	dian or other intermed	diary for co	ontribution	s or other as	ssets not	included				
	on Form 990, Part X?							🔲 Ye	es		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing tal	ole:							
								Am	ount		
С	Beginning balance						1c				
d	Additions during the year						1d				
	Distributions during the year										
	Ending balance										
	Did the organization include an amount on F							🔲 Ye	es		No
b	If "Yes," explain the arrangement in Part XIII	. Check here if the ex	kplanation	has been	provided on	Part XIII					]
Pa	rt V Endowment Funds. Complete	if the organization an	swered "\	es" on Fo	rm 990, Par	t IV, line	10.				
		(a) Current year	(b) Prid	or year	(c) Two yea	rs back	(d) Three years	back (e)	Four	years	back
1a	Beginning of year balance										
b	Contributions										
	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
	End of year balance										
2	Provide the estimated percentage of the cui		e (line 1g,	column (a	a)) held as:	_					
а	Board designated or quasi-endowment		%								
b	Permanent endowment	%									
С	Term endowment	%									
	The percentages on lines 2a, 2b, and 2c sho	- ould equal 100%.									
За	Are there endowment funds not in the posse	ession of the organiza	ation that	are held a	nd administe	ered for t	he organizatio	n			
	by:	_							Γ	Yes	No
	(i) Unrelated organizations							3	a(i)		
	(ii) Related organizations								a(ii)		
b	If "Yes" on line 3a(ii), are the related organization								3b		
4	Describe in Part XIII the intended uses of the										
	rt VI Land, Buildings, and Equipm										
	Complete if the organization answere		), Part IV,	line 11a. S	See Form 990	D, Part X,	line 10.				
	Description of property	(a) Cost or of			or other		ccumulated	(d)	Book	value	 e

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value			
1a Land							
<b>b</b> Buildings							
c Leasehold improvements							
d Equipment							
e Other		5,300.	2,650.	2,650.			
Total Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (R), line 10c.)							

Schedule D (Form 990) 2021

Schedule D (Form 990) 2021 KOREAN K9 R	RESCUE INC	81	-4950261 <sub>Page</sub>
Part VII Investments - Other Securities.			<del></del>
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	I-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.	<u>, I</u>		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	I-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.	,L		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lim	ne 15.)	<b>•</b>	
Part X Other Liabilities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25	
1. (a) Description of liability	, ,	, ,	(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... X

Schedule D (Form 990) 2021

(6) (7) (8)

Par	t XI Reco	nciliation of Revenue per Audited Financial Statemer	nts With Revenue per R	eturn.			
	Comple	ete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total revenue,	gains, and other support per audited financial statements		1			
2	Amounts inclu	ided on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized	I gains (losses) on investments	2a				
b		ces and use of facilities	2b				
С		prior year grants	2c				
		pe in Part XIII.)	2d				
	Add lines 2a t	-		2e			
3		2e from line 1		3			
4		ided on Form 990, Part VIII, line 12, but not on line 1:	1 . 1				
_		penses not included on Form 990, Part VIII, line 7b	4a				
b		pe in Part XIII.)	4b				
_	Add lines <b>4a</b> a			4c			
5 Pai		Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)nciliation of Expenses per Audited Financial Stateme		5   Return			
ı aı		ete if the organization answered "Yes" on Form 990, Part IV, line 12a.	iits with Expenses per	netum.			
1		s and losses per audited financial statements		1			
2		ided on line 1 but not on Form 990, Part IX, line 25:		1			
a		ces and use of facilities	<sub>2a</sub>				
b		ustments	2b				
C		Surene	2c				
		pe in Part XIII.)					
		hrough <b>2d</b>		2e			
3		⊋e from line 1		3			
4		ided on Form 990, Part IX, line 25, but not on line 1:					
		penses not included on Form 990, Part VIII, line 7b	4a				
		pe in Part XIII.)	4b				
	Add lines <b>4a</b> a			4c			
5	Total expense	s. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 18.)		5			
Pai	t XIII Supp	lemental Information.					
	•	ions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I\ I Part XII, lines 2d and 4b. Also complete this part to provide any additi		4; Part X, line 2; Part XI,			
PAF	RT X, LI	NE 2:					
ΑТ	DECEMBE	R 31, 2021, MANAGEMENT HAS CONCLUDE	D THAT THERE AR	E NO UNCERTAIN			
TΑΣ	K POSITI	ONS THAT WOULD REQUIRE RECOGNITION	IN THE FINANCIA	L STATEMENTS.			
IF	THE COM	PANY WAS TO INCUR AN INCOME TAX LIA	BILITY FROM AN	UNCERTAIN TAX			
POS	SITION I	N THE FUTURE, INTEREST ON ANY INCOM	E TAX LIABILITY	WOULD BE			
REI	PORTED A	S INTEREST EXPENSE AND PENALTIES RE	LATING TO ANY I	NCOME TAX			
LIABILITY WOULD BE REPORTED AS INCOME TAX EXPENSE.							
	101111	WOODD DE REFORMED IN INCOME IIM EM					

#### SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

#### **Statement of Activities Outside the United States**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990.

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

2021
Open to Public Inspection

Name of the organization

Employer identification number

	9									
KOI	REAN K9 RESCU	E INC				81-49502	61			
			ctivities Ou	tside the United States. Comple	te if the organ					
	Form 990, Part IV			·						
1	For grantmakers. Does	the organization	n maintain recor	ds to substantiate the amount of its gra	ants and other		_			
	the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?X Yes No									
_	For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the									
2		ribe in Part V the	e organization's	procedures for monitoring the use of its	s grants and o	ther assistance ou	tside the			
2		ted States. ivities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)								
3	(a) Region	(b) Number of		(d) Activities conducted in the region		vity listed in (d)	(f) Total			
	(a) Hogion	offices	employees,	(by type) (such as, fundraising, pro-		gram service,	expenditures			
		in the region	employees, agents, and independent	gram services, investments, grants to		specific type	for and investments			
			contractors in the region	recipients located in the region)	of service	(s) in the region	in the region			
			in the region				+			
							+			
2 -	Subtotal	0	0				0.			
	Subtotal	<u> </u>					1			
D	sheets to Part I						0.			
^	Totals (add lines 3a	<u> </u>					1 .			
C	notals (add lines 3a		,				0			

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

Schedule F (Form 990) 2021

Part II	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any
	recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
					ELECTRONIC			
		SOUTH KOREA	GENERAL SUPPORT	35,048.	TRANSFER	0.		
2 Enter total number of	recipient organizatio	ns listed above that are	recognized as charities by the	foreign country	, recognized as a tax			1
			or counsel has provided a sec	ction 501(c)(3) ed	quivalency letter	<b>&gt;</b>		1
3 Enter total number of	other organizations	or entities						

Part III Grants and Other Assistance Part III can be duplicated if a			ates. Complete i	f the organization answered "Yes" of	on Form 990, Part	IV, line 16.	
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Page 4

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

Schedule F (Form 990) 2021

#### **SCHEDULE M** (Form 990)

**Noncash Contributions** 

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Name of the organization

KOREAN K9 RESCUE INC

Employer identification number 81-4950261

Par	rt I Types of Property						
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of det noncash contribut	•	ts
1	Art - Works of art						
2	Art - Historical treasures						
3	Art - Fractional interests						
4	Books and publications						
5	Clothing and household goods						
6	Cars and other vehicles						
7	Boats and planes						
8	Intellectual property						
9	Securities - Publicly traded	X	3	31,645.	FAIR MARKET	VALUE	}
10	Securities - Closely held stock						
11	Securities - Partnership, LLC, or trust interests						
12	Securities - Miscellaneous						
13	Qualified conservation contribution - Historic structures						
14	Qualified conservation contribution - Other						
15	Real estate - Residential						
16	Real estate - Commercial						
17	Real estate - Other						
18	Collectibles						
19	Food inventory						
20	Drugs and medical supplies						
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other ()						
26	Other (						
27	Other (						
28	Other (						
29	Number of Forms 8283 received by the organize	ation during	g the tax year for c	contributions			
	for which the organization completed Form 828	33, Part V, E	Donee Acknowledg	jement 29			
						Yes	No
30a	During the year, did the organization receive by	contribution	on any property rep	oorted in Part I, lines 1 throu	gh 28, that it		
	must hold for at least three years from the date	of the initia	al contribution, and	d which isn't required to be u	sed for		
	exempt purposes for the entire holding period?					30a	Х
b	If "Yes," describe the arrangement in Part II.						
31							
32a	Does the organization hire or use third parties of						
	contributions?		-			32a	Х
b	If "Yes," describe in Part II.						
33	If the organization didn't report an amount in co	olumn (c) fo	r a type of propert	y for which column (a) is che	cked,		
	describe in Part II.						

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Schedule M (Form 990) 2021

Schedule N	1 (Form 990) 2021	KOREAN K9	RESCUE	INC		}	31-495026	⊥ Paç	ge <b>2</b>
Part II	Supplementa is reporting in Pa	<b>al Information.</b> Propert I, column (b), the nuadditional information.	ımber of contr	mation required ibutions, the nun	by Part I, lines 30b, 3 nber of items receive	2b, and 33, and, or a combina	d whether the orgation of both. Also	ganization	

132142 11-17-21 Schedule M (Form 990) 2021

#### SCHEDULE O (Form 990)

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 Form 990-EZ.

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

2021
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

KOREAN K9 RESCUE INC

Employer identification number 81-4950261

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

TRADE, PUPPY MILLS, AND HIGH-KILL SHELTERS IN SOUTH KOREA.

DUE TO THE STIGMA ASSOCIATED WITH MIXED BREED AND "DOG MEAT FARM" DOGS,
MOST DOGS HAVE A LOW CHANCE OF BEING ADOPTED IN SOUTH KOREA.

WE TRANSPORT THESE DOGS TO THE UNITED STATES AND FIND LOVING FOREVER
HOMES FOR THEM. IN THE PROCESS, WE ARE ABLE TO SPREAD AWARENESS ABOUT
THE BRUTAL DOG MEAT TRADE AND BE A VOICE FOR THE VOICELESS DOGS THAT
ARE STILL SUFFERING IN THE MEAT TRADE.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

DUE TO THE STIGMA ASSOCIATED WITH MIXED BREED AND "DOG MEAT FARM" DOGS,

MOST DOGS HAVE A LOW CHANCE OF BEING ADOPTED IN SOUTH KOREA.

WE TRANSPORT THESE DOGS TO THE UNITED STATES AND FIND LOVING FOREVER
HOMES FOR THEM. IN THE PROCESS, WE ARE ABLE TO SPREAD AWARENESS ABOUT
THE BRUTAL DOG MEAT TRADE AND BE A VOICE FOR THE VOICELESS DOGS THAT
ARE STILL SUFFERING IN THE MEAT TRADE.

FORM 990, PART VI, SECTION A, LINE 6:

GINA BOEHLER, TINA CASTELINO AND JUNG KIM ARE THE MEMBERS OF THE COMPANY.

FORM 990, PART VI, SECTION A, LINE 7A:

THE PRESIDENT HAS THE POWER TO ELECT OR APPOINT ONE OR MORE MEMBERS OF THE

GOVERNING BODY

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

Schedule O (Form 990) 2021

132211 11-11-21

Schedule O (Form 990) 2021 Page 2 Name of the organization **Employer identification number** 81-4950261 KOREAN K9 RESCUE INC FORM 990, PART VI, SECTION A, LINE 8B: THERE ARE NO COMMITTEES FORM 990, PART VI, SECTION B, LINE 11B: THE ORGANIZATION'S GOVERNING BODY WILL REVIEW THE RETURN WITH THE ASSISTANCE OF THE TAX PREPARER. FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION REQUIRES ANNUAL UPDATES OF ANY CONFLICT OF INTEREST DISCLOSURES FORM 990, PART VI, SECTION B, LINE 15: SALARY OF THE CEO AND OTHER OFFICERS MUST BE APPROVED BY THE INDEPENDENT MEMBERS OF THE GOVERNING PARTY. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL INFORMATION AVAILABLE TO THE PUBLIC UPON REQUEST.