Form **990**

Department of the Treasury
Internal Revenue Service(77)

Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047

2007

Open to Public Inspection

A For the 2007 calendar year, or tax year beginning , 2007, and ending ,

B Check if applicable: [ ] Address change [ ] Name change [ ] Initial return [ ] Termination [ ] Amended return [ ] Application pending

Please use IRS label or print or type. See specific Instructions.

C Name of organization: CENTRAL NEW YORK CAT COALITION

Number and street (or P.O. box if mail is not delivered to street addr) Room/suite: PO BOX 6182

City, town or country: SYRACUSE State: NY ZIP code + 4: 13217

D Employer Identification Number: 06-1688749

E Telephone number: (315) 289-2287

F Accounting method: [X] Cash [ ] Accrual [ ] Other (specify) ►

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and I are not applicable to section 527 organizations.

H (a) Is this a group return for affiliates? [ ] Yes [X] No

H (b) If 'Yes,' enter number of affiliates ►

H (c) Are all affiliates included? [ ] Yes [ ] No
(If 'No,' attach a list. See instructions.)

H (d) Is this a separate return filed by an organization covered by a group ruling? [ ] Yes [X] No

G Web site: ► WWW.CNYCATCOALITION.ORG

J Organization type (check only one) ► [X] 501(c) 3 ◄ (insert no.) [ ] 4947(a)(1) or [ ] 527

K Check here ► [ ] if the organization is not a 509(a)(3) supporting organization **and** its gross receipts are normally **not** more than $25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

I Group Exemption Number ... ►

M Check ► [X] if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ► 81,571.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances *(See the instructions.)*

REVENUE

1	Contributions, gifts, grants, and similar amounts received:				
a	Contributions to donor advised funds	1a			
b	Direct public support (not included on line 1a)	1b	18,088.		
c	Indirect public support (not included on line 1a)	1c	19,894.		
d	Government contributions (grants) (not included on line 1a)	1d			
e	Total (add lines 1a through 1d) (cash $ 37,287. noncash $ 695.)			1e	37,982.
2	Program service revenue including government fees and contracts (from Part VII, line 93)			2	39,634.
3	Membership dues and assessments			3	
4	Interest on savings and temporary cash investments			4	60.
5	Dividends and interest from securities			5	
6a	Gross rents	6a			
b	Less: rental expenses	6b			
c	Net rental income or (loss). Subtract line 6b from line 6a			6c	
7	Other investment income (describe ►)			7	

		(A) Securities		(B) Other		
8a	Gross amount from sales of assets other than inventory		8a			
b	Less: cost or other basis and sales expenses		8b			
c	Gain or (loss) (attach schedule)		8c			
d	Net gain or (loss). Combine line 8c, columns (A) and (B)				8d	

9	Special events and activities (attach schedule). If any amount is from **gaming**, check here ► [X]				
a	Gross revenue (not including $ 0. of contributions reported on line 1b)	9a	3,895.		
b	Less: direct expenses other than fundraising expenses	9b	197.		
c	Net income or (loss) from special events. Subtract line 9b from line 9a See L-9 Stmt			9c	3,698.
10a	Gross sales of inventory, less returns and allowances	10a			
b	Less: cost of goods sold	10b			
c	Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a			10c	
11	Other revenue (from Part VII, line 103)			11	
12	**Total revenue.** Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11			12	81,374.

EXPENSES

13	Program services (from line 44, column (B))	13	73,197.
14	Management and general (from line 44, column (C))	14	7,023.
15	Fundraising (from line 44, column (D))	15	0.
16	Payments to affiliates (attach schedule)	16	
17	**Total expenses.** Add lines 16 and 44, column (A)	17	80,220.

NET ASSETS

18	Excess or (deficit) for the year. Subtract line 17 from line 12	18	1,154.
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	24,898.
20	Other changes in net assets or fund balances (attach explanation)	20	
21	Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21	26,052.

Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (*See instruct.*)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds (attach sch) (cash $ ____ non-cash $ ____) If this amount includes foreign grants, check here ☐	22a	0.	0.		
22b Other grants and allocations (att sch) (cash $ ____ non-cash $ ____) If this amount includes foreign grants, check here ☐	22b	0.	0.		
23 Specific assistance to individuals (attach schedule)	23	0.	0.		
24 Benefits paid to or for members (attach schedule)	24	0.	0.		
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A	25a	0.	0.	0.	0.
b Compensation of former officers, directors, key employees, etc. listed in Part V-B	25b	0.	0.	0.	0.
c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	25c	0.	0.	0.	0.
26 Salaries and wages of employees not included on lines 25a, b, and c	26	0.	0.	0.	0.
27 Pension plan contributions not included on lines 25a, b, and c	27	0.	0.	0.	0.
28 Employee benefits not included on lines 25a - 27	28	0.	0.	0.	0.
29 Payroll taxes	29	0.	0.	0.	0.
30 Professional fundraising fees	30	0.	0.	0.	0.
31 Accounting fees	31	1,200.	0.	1,200.	0.
32 Legal fees	32	0.	0.	0.	0.
33 Supplies	33	16,174.	16,051.	123.	0.
34 Telephone	34	1,262.	0.	1,262.	0.
35 Postage and shipping	35	1,325.	0.	1,325.	0.
36 Occupancy	36				
37 Equipment rental and maintenance	37				
38 Printing and publications	38	2,301.	0.	2,301.	0.
39 Travel	39	1,808.	1,808.	0.	0.
40 Conferences, conventions, and meetings	40	0.	0.	0.	0.
41 Interest	41				
42 Depreciation, depletion, etc (attach schedule)	42				
43 Other expenses not covered above (itemize):					
a ADOPTION FEE REIMBURSEMENT	43a	865.	865.	0.	0.
b BANK SERVICE FEES	43b	170.	0.	170.	0.
c EMPLOYER PROVIDED MEALS	43c	562.	0.	562.	0.
d MEDICAL - OTHER	43d	9,428.	9,428.	0.	0.
e MEDICAL - SPAY/NEUTER	43e	45,045.	45,045.	0.	0.
f STATE CHARITIES FEE	43f	80.	0.	80.	0.
g	43g				
44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B) - (D), carry these totals to lines 13 - 15)	44	80,220.	73,197.	7,023.	0.

Joint Costs. Check ☐ if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in **(B)** Program services? ☐ Yes ☒ No

If 'Yes,' enter **(i)** the aggregate amount of these joint costs $ ____; **(ii)** the amount allocated to Program services $ ____; **(iii)** the amount allocated to Management and general $ ____; and **(iv)** the amount allocated to Fundraising $

Part III Statement of Program Service Accomplishments *(See the instructions.)*

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► CAT POPULATION CARE/CONTROL All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; but optional for others.)
a SURGICAL FEES PAID IN FUNDING OF A LOW OR NO COST SPAY/NEUTER AND VACCINATE PROGRAM TO STABILIZE CAT OVERPOPULATION AND PROMOTE ADOPTION. 338 MALE & 484 FEMALES WERE SURGICALLY ALTERED IN 2007. **SEE PROGRAM ACCOMPLISHMENTS A FOR FURTHER DETAILS (Grants and allocations $ 0.) If this amount includes foreign grants, check here ► ☐	45,045.
b FOOD & MEDICAL SUPPORT, TO SOCIALIZE AND IMPROVE THE HEALTH OF HOMELESS CATS IN FOSTER CARE TO PROMOTE ADOPTION & MAINTAINING HEALTHY FERAL COLONIES. 373 HOMELESS CATS WERE ADOPTED INTO PERMANANT HOMES IN 2007. **SEE PROGRAM ACCOMPLISHMENTS B FOR FURTHER DETAILS (Grants and allocations $ 0.) If this amount includes foreign grants, check here ► ☐	26,344.
c VAN RENTAL FOR TRANSPORTATION TO NSAL NO KILL ADOPTION CENTER IN PORT WASHINGTON. **SEE PROGRAM ACCOMPLISHMENTS C FOR FURTHER DETAILS (Grants and allocations $ 0.) If this amount includes foreign grants, check here ► ☐	1,808.
d (Grants and allocations $) If this amount includes foreign grants, check here ► ☐	
e Other program services (Grants and allocations $) If this amount includes foreign grants, check here ► ☐	
f Total of Program Service Expenses (should equal line 44, column (B), Program services) ►	73,197.

BAA

TEEA0103 12/27/07

Central New York Cat Coalition
EIN 06-1688749
2007 FORM 990, PART III PAGE 3
Statement of Program Service Accomplishments

Program A – Spay/Neuter and Vaccination Program

CNYCC funds a weekly low or no cost Spay Neuter Assistance Program that is extended to pet, feral, stray and free roaming cats, working with a number of County Agencies, other humane organizations and the public, cats throughout the region have used our program. CNYCC has no paid staff; volunteers spent countless hours on the telephone, year round, addressing various stray cat situations and scheduling clinic appointments

Spay/Neuter Transport
CNYCC does not own a vehicle; volunteers use their personal vehicles and absorb most travel related expenses. During 2007, 338 male and 484 female cats were transported to and from various veterinary clinics in Upstate NY. Each cat examined, spayed or neutered and vaccinated for rabies and distemper was also treated for fleas, ear mites and other minor medical treatment when necessary. All cats were recovered indoors by volunteer foster care providers according to recommended post operative instructions.

118 of the female cats were in heat at the time of surgery so the conception of numerous litters of kittens was prevented. The program's continued progress moves CNYCC closer to the distant goals of zero stray cat population growth and NO MORE HOMELESS CATS.

Program B1 – Foster Care and Adoption Program

CNYCC has no shelter facility; volunteers open their hearts and their homes to nurture and care for abandoned, neglected and homeless cats. With more than 600 felines in foster care at any given day, the number of locations in the number of foster homes changes constantly. Most cats come with a story; many are pregnant females or already have litters of kittens. Rescued cats and kittens are checked and treated for fleas, ticks, ear mites, worms and other parasites. All cats are eventually spayed or neutered so that none will breed in the future. All foster cats are provided the nutrition, love safety and all the healing time needed to become adoptable.

We perform routine medical care ourselves; a veterinarian acts as our consultant and performs non-routine care. We try to find safe barn type homes for our unadoptable rescued friends. Several special-needs cats remain in permanent foster car situations.

As an Adoption Partner of PetSmart Charities, the CNYCC is provided with in-store adoption space and funding from three PetSmart Stores. This gives our friendly homeless cats accessibility to the pet-loving public and the opportunity to find a loving home. All cats are spayed/neutered, vaccinated and tested before entering the PetSmart Adoption Center. More than 100 volunteers combine to maintain the cats and the adoption centers on a daily basis accumulating over 8,000 hours. Volunteers and foster care providers host several Adopt-A-Thon weekends at the adoption centers, additional cats can be temporarily brought into the store during that time.

Foster car providers take great care to find loving, responsible and permanent homes for every cat. Potential adopters are asked to complete an adoption application, pre adoption interviews are conducted and personal references are checked. CNYCC volunteers placed 373 cats into loving homes in 2007.

Central New York Cat Coalition
EIN 06-1688749
2007 FORM 990, PART III PAGE 3
Statement of Program Service Accomplishments

Program B2 – Feral and Stray Feline Outreach.

Cats born and raised on the streets without human contact are undomesticated. These cats form colonies where there is shelter and a source for food, usually behind restaurants or apartment buildings that host a dumpster. These cats are evasive, fear all humans and would continue to breed, causing further overpopulation.

Volunteers work with individuals in the community to help manage feral colonies by providing some coalition built shelters, low or no cost food, instructions and safe traps to implement a trap and neuter and release program. Some cats in a colony are found to be friendly and adoptable while others remain feral. Kittens trapped young enough can be tamed and socialized in foster care and ultimately placed for adoption. The ear of a feral cat is notched during surgery to clearly identify the fixed cats within the colony.

Volunteer caretakers provide scheduled feeding and help stabilize the population to maintain a healthy colony. At present, volunteers maintain 18 colonies of feral non-adoptable cats. 30,520 pounds of dry food were distributed during 2007.

Program C – NSAL Adoption and Foster Care Alternative

Due to the volume of cats in foster homes awaiting placement in Adoption Center, caregivers find some relief from overcrowding through an alliance with North Shore Animal League.

CNY Cat Coalition does not own a van nor have access to use of one. CNYCC must rent a suitable van and dedicated volunteers take time off from work to make the 550 mile round trip. Kittens meeting the criteria set by NSAL, are gathered at a central location in preparation for the all night drive. Safe travel carriers as well as food, fresh water and litter boxes are provided for each kitten.

As a result of the progress of our Spay/Neuter Program, fewer cats meeting the young age criteria were in foster care in 2007. Volunteers made 7 trips transporting 145 cats to the North Shore Animal League's Port Washington Shelter for placement in their NO KILL adoption center.

Part IV Balance Sheets *(See the instructions.)*

Note: *Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.*		(A) Beginning of year		(B) End of year
ASSETS				
45 Cash — non-interest-bearing		8,138.	45	2,978.
46 Savings and temporary cash investments		15,855.	46	23,374.
47a Accounts receivable	47a			
b Less: allowance for doubtful accounts	47b		47c	
48a Pledges receivable	48a			
b Less: allowance for doubtful accounts	48b	475.	48c	
49 Grants receivable			49	
50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)			50a	
b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)			50b	
51a Other notes and loans receivable (attach schedule)	51a			
b Less: allowance for doubtful accounts	51b		51c	
52 Inventories for sale or use			52	
53 Prepaid expenses and deferred charges			53	
54a Investments — publicly-traded securities ► ☐ Cost ☐ FMV			54a	
b Investments — other securities (attach sch) ► ☐ Cost ☐ FMV			54b	
55a Investments — land, buildings, & equipment: basis	55a			
b Less: accumulated depreciation (attach schedule)	55b		55c	
56 Investments — other (attach schedule)			56	
57a Land, buildings, and equipment: basis	57a			
b Less: accumulated depreciation (attach schedule)	57b		57c	
58 Other assets, including program-related investments (describe ► See Line 58 Stmt)		430.	58	184.
59 **Total assets** (must equal line 74). Add lines 45 through 58		24,898.	59	26,536.
LIABILITIES				
60 Accounts payable and accrued expenses		0.	60	0.
61 Grants payable			61	
62 Deferred revenue			62	
63 Loans from officers, directors, trustees, and key employees (attach schedule)			63	
64a Tax-exempt bond liabilities (attach schedule)			64a	
b Mortgages and other notes payable (attach schedule)			64b	
65 Other liabilities (describe ► See Line 65 Stmt)		0.	65	484.
66 **Total liabilities.** Add lines 60 through 65		0.	66	484.
NET ASSETS OR FUND BALANCES				
Organizations that follow SFAS 117, check here ► ☒ and complete lines 67 through 69 and lines 73 and 74.				
67 Unrestricted		24,898.	67	17,230.
68 Temporarily restricted			68	8,822.
69 Permanently restricted			69	
Organizations that do not follow SFAS 117, check here ► ☐ and complete lines 70 through 74.				
70 Capital stock, trust principal, or current funds			70	
71 Paid-in or capital surplus, or land, building, and equipment fund			71	
72 Retained earnings, endowment, accumulated income, or other funds			72	
73 **Total net assets or fund balances.** Add lines 67 through 69 **or** lines 70 through 72. (Column (A) **must** equal line 19 and column (B) **must** equal line 21)		24,898.	73	26,052.
74 **Total liabilities and net assets/fund balances.** Add lines 66 and 73		24,898.	74	26,536.

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return *(See the instructions.)*

					N/A
a	Total revenue, gains, and other support per audited financial statements			a	
b	Amounts included on line a but not on Part I, line 12:				
	1 Net unrealized gains on investments	b1			
	2 Donated services and use of facilities	b2			
	3 Recoveries of prior year grants	b3			
	4 Other (specify):	b4			
	Add lines b1 through b4			b	
c	Subtract line b from line a			c	
d	Amounts included on Part I, line 12, but not on line a:				
	1 Investment expenses not included on Part I, line 6b	d1			
	2 Other (specify):	d2			
	Add lines d1 and d2			d	
e	**Total revenue** (Part I, line 12). Add lines c and d			e	

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

					N/A
a	Total expenses and losses per audited financial statements			a	
b	Amounts included on line a but not on Part I, line 17:				
	1 Donated services and use of facilities	b1			
	2 Prior year adjustments reported on Part I, line 20	b2			
	3 Losses reported on Part I, line 20	b3			
	4 Other (specify):	b4			
	Add lines b1 through b4			b	
c	Subtract line b from line a			c	
d	Amounts included on Part I, line 17, but not on line a:				
	1 Investment expenses not included on Part I, line 6b	d1			
	2 Other (specify):	d2			
	Add lines d1 and d2			d	
e	**Total expenses** (Part I, line 17). Add lines c and d			e	

Part V-A Current Officers, Directors, Trustees, and Key Employees

(List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) *(See the instructions.)*

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Expense account and other allowances
MICHELLE POWERS 1206 S GLENCOVE AVENUE SYRACUSE NY 13206	PRESIDENT 40.00	0.	0.	0.
MARIETTA ROWE 363 WAINWRIGHT AVE. SYRACUSE NY 13208	VICE PRESIDENT 30.00	0.	0.	0.
OLIVER BROWN PO BOX 157 APULIA STATION NY 13020	TREASURER 10.00	0.	0.	0.
CAROLYN B. DEGROFF 4197 MAKYES ROAD SYRACUSE NY 13215	SECRETARY 10.00	0.	0.	0.

Part V-A Current Officers, Directors, Trustees, and Key Employees *(continued)*

		Yes	No
75 a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings . . ► 10			
b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If 'Yes,' attach a statement that identifies the individuals and explains the relationship(s)	75 b		X
c Do any officers, directors, trustees, or key employees listed in form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of 'related organization'. ►	75 c		X
If 'Yes,' attach a statement that includes the information described in the instructions.			
d Does the organization have a written conflict of interest policy?	75 d		X

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits

(If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Expense account and other allowances

Part VI Other Information *(See the instructions.)*

		Yes	No
76 Did the organization make a change in its activities or methods of conducting activities? If 'Yes,' attach a detailed statement of each change	76		X
77 Were any changes made in the organizing or governing documents but not reported to the IRS?	77		X
If 'Yes,' attach a conformed copy of the changes.			
78 a Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	78 a		X
b If 'Yes,' has it filed a tax return on **Form 990-T** for this year?	78 b		
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' attach a statement	79		X
80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc, to any other exempt or nonexempt organization?	80 a		X
b If 'Yes,' enter the name of the organization ► and check whether it is ☐ exempt **or** ☐ nonexempt.			
81 a Enter direct and indirect political expenditures. (See line 81 instructions.) 81 a			
b Did the organization file **Form 1120-POL** for this year?	81 b		X

Part VI Other Information *(continued)*

			Yes	No
82 a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		82a	X	
b If 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b 25,412.			
83 a Did the organization comply with the public inspection requirements for returns and exemption applications?		83a	X	
b Did the organization comply with the disclosure requirements relating to *quid pro quo* contributions?		83b	X	
84 a Did the organization solicit any contributions or gifts that were not tax deductible?		84a	N/A	
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		84b		
85 a *501(c)(4), (5), or (6).* Were substantially all dues nondeductible by members?		85a	N/A	
b Did the organization make only in-house lobbying expenditures of $2,000 or less?		85b	N/A	
If 'Yes' was answered to either 85a or 85b, **do not** complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.				
c Dues, assessments, and similar amounts from members	85c N/A			
d Section 162(e) lobbying and political expenditures	85d N/A			
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e N/A			
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f N/A			
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		85g	N/A	
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		85h	N/A	
86 *501(c)(7) organizations.* Enter: a Initiation fees and capital contributions included on line 12	86a N/A			
b Gross receipts, included on line 12, for public use of club facilities	86b N/A			
87 *501(c)(12) organizations.* Enter: a Gross income from members or shareholders	87a N/A			
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b N/A			
88 a At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX		88a		X
b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Part XI ►		88b		X
89 a *501(c)(3) organizations.* Enter: Amount of tax imposed on the organization during the year under: section 4911 ► 0. ; section 4912 ► 0. ; section 4955 ► 0.				
b *501(c)(3) and 501(c)(4) organizations.* Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach a statement explaining each transaction		89b		X
c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ►	0.			
d Enter: Amount of tax on line 89c, above, reimbursed by the organization ►				
e *All organizations.* At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?		89e		X
f *All organizations.* Did the organization acquire a direct or indirect interest in any applicable insurance contract?		89f		X
g *For supporting organizations and sponsoring organizations maintaining donor advised funds.* Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		89g		X

90 a List the states with which a copy of this return is filed ► See States Filed In

b Number of employees employed in the pay period that includes March 12, 2007 (See instructions.) 90b 0

91 a The books are in care of ► MARIA POULSEN Telephone number ► (315) 478-3131

Located at ► 526 OAK STREET SYRACUSE NY ZIP + 4 ► 13208

		Yes	No
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	91b		X
If 'Yes,' enter the name of the foreign country ►			

See the instructions for exceptions and filing requirements for **Form TD F 90-22.1**, Report of Foreign Bank and Financial Accounts.

Part VI Other Information *(continued)*

		Yes	No
c At any time during the calendar year, did the organization maintain an office outside of the United States?	91c		

If 'Yes,' enter the name of the foreign country ►

92 *Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041* – Check here ► ☐

and enter the amount of tax-exempt interest received or accrued during the tax year ► 92

Part VII Analysis of Income-Producing Activities *(See the instructions.)*

Note: *Enter gross amounts unless otherwise indicated.*	Unrelated business income (A) Business code	Unrelated business income (B) Amount	Excluded by section 512, 513, or 514 (C) Exclusion code	Excluded by section 512, 513, or 514 (D) Amount	(E) Related or exempt function income
93 Program service revenue:					
a SPAY/NEUTER					22,057.
b ADOPTION FEES					13,065.
c FOOD - AT COST					4,512.
d					
e					
f Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings & temporary cash invmnts					60.
96 Dividends & interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from pers prop					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events			2	3,698.	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				3,698.	39,694.

105 **Total** (add line 104, columns (B), (D), and (E)) ► 43,392.

Note: *Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.*

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes *(See the instructions.)*

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93A	SPAY & NEUTER OF FREE ROAMING CATS HELPS CONTROL OVERPOPULATION
93B	ADOPTION FEES COLLECTED RECOUP S/N FEE, ALLOWING MORE S/N
93C	DRY CAT FOOD SOLD AT OR NEAR COST; FEEDING FOSTER AND COLONY CATS
	See Relationship of Activities to the Accomplishment of Exempt Purposes Statement

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities *(See the instructions.)* N/A

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts *(See the instructions.)*

a Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

b Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note: *If 'Yes' to (b), file Form 8870 and Form 4720 (see instructions).*

Part XI **Information Regarding Transfers To and From Controlled Entities.** *Complete only if the organization is a controlling organization as defined in section 512(b)(13).*

N/A

		Yes	No
106	Did the reporting organization **make** any transfers **to** a controlled entity as defined in section 512(b)(13) of the Code? If 'Yes,' complete the schedule below for each controlled entity		

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
	Totals			

		Yes	No
107	Did the reporting organization **receive** any transfers **from** a controlled entity as defined in section 512(b)(13) of the Code? If 'Yes,' complete the schedule below for each controlled entity		

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
	Totals			

		Yes	No
108	Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?		

Please Sign Here

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

► Type or print name and title

Paid Preparer's Use Only

Preparer's signature ►	Date 08/12/08	Check if self-employed ► ☐	Preparer's SSN or PTIN (See General Instruction X) P00087863
Firm's name (or yours if self-employed), address, and ZIP + 4 ►	ALBERT STEARNS DALEY & LACOMBE 404 E GENESEE ST FAYETTEVILLE NY 13066-1552	EIN ► 16-1184209	Phone no. ►

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information — (See separate instructions.)

► **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ.**

OMB No. 1545-0047

2007

Name of the organization: CENTRAL NEW YORK CAT COALITION

Employer identification number: 06-1688749

Part I — Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See instructions. List each one. If there are none, enter 'None.')

(a) Name and address of each employee paid more than $50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over $50,000 ►	NONE			

Part II – A — Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See instructions. List each one (whether individuals or firms). If there are none, enter 'None.')

(a) Name and address of each independent contractor paid more than $50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over $50,000 for professional services ► NONE		

Part II – B — Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter 'None.' See instructions.)

(a) Name and address of each independent contractor paid more than $50,000	(b) Type of service	(c) Compensation
NONE		
Total number of other contractors receiving over $50,000 for other services ► NONE		

Part III Statements About Activities (See instructions.)

			Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid or incurred in connection with the lobbying activities ► $ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)	1		X
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking 'Yes' must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? *(If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions.)*			
a	Sale, exchange, or leasing of property?	2a		X
b	Lending of money or other extension of credit?	2b		X
c	Furnishing of goods, services, or facilities?	2c		X
d	Payment of compensation (or payment or reimbursement of expenses if more than $1,000)?	2d		X
e	Transfer of any part of its income or assets?	2e		X
3a	Did the organization make grants for scholarships, fellowships, student loans, etc? (If 'Yes,' attach an explanation of how the organization determines that recipients qualify to receive payments.)	3a		X
b	Did the organization have a section 403(b) annuity plan for its employees?	3b		X
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' attach a detailed statement	3c		X
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		X
4a	Did the organization maintain any donor advised funds? If 'Yes,' complete lines 4b through 4g. If 'No,' complete lines 4f and 4g	4a		X
b	Did the organization make any taxable distributions under section 4966?	4b		
c	Did the organization make a distribution to a donor, donor advisor, or related person?	4c		

d Enter the total number of donor advised funds owned at the end of the tax year ►

e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ►

f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ► 0

g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ► 0.

Part IV Reason for Non-Private Foundation Status (See instructions.)

I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

5 [ ] A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).

6 [ ] A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)

7 [ ] A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).

8 [ ] A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).

9 [ ] A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). **Enter the hospital's name, city, and state** ► ______

10 [ ] An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)

11a [ ] An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)

11b [ ] A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)

12 [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 charitable, etc, 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). (Also complete the **Support Schedule** in Part IV-A.)

13 [ ] An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization: ►

[ ] Type I [ ] Type II [ ] Type III-Functionally Integrated [ ] Type III-Other

Provide the following information about the supported organizations. (See instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents? Yes	No	(e) Amount of support
Total ►					

14 [ ] An organization organized and operated to test for public safety. Section 509(a)(4). (See instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) *Use cash method of accounting.*

Note: *You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.*

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	36,097.	37,915.	32,315.	14,696.	121,023.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc, purpose	63,243.	30,020.	6,235.	7,123.	106,621.
18 Gross income from interest, dividends, amts rec'd from payments on securities loans (sec. 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less sec. 511 taxes) from businesses acquired by the organization after June 30, 1975	71.	2.	13.		86.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	99,411.	67,937.	38,563.	21,819.	227,730.
24 Line 23 minus line 17	36,168.	37,917.	32,328.	14,696.	121,109.
25 Enter 1% of line 23	994.	679.	386.	218.	

26 **Organizations described on lines 10 or 11:** a Enter 2% of amount in column (e), line 24 ► 26a

b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a. **Do not file this list with your return.** Enter the total of all these excess amounts ► 26b

c Total support for section 509(a)(1) test: Enter line 24, column (e) ► 26c

d Add: Amounts from column (e) for lines: 18 ______ 19 ______ 22 ______ 26b ______ ► 26d

e Public support (line 26c minus line 26d total) ► 26e

f **Public support percentage (line 26e (numerator) divided by line 26c (denominator))** ► 26f %

27 **Organizations described on line 12:**

a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person.' **Do not file this list with your return.** Enter the sum of such amounts for each year:

(2006) ______ (2005) ______ (2004) ______ (2003) ______

b For any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the **larger** of **(1)** the amount on line 25 for the year or **(2)** $5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) **Do not file this list with your return.** After computing the difference between the amount received and the larger amount described in **(1)** or **(2)**, enter the sum of these differences (the excess amounts) for each year:

(2006) ______ (2005) ______ (2004) ______ (2003) ______

c Add: Amounts from column (e) for lines: 15 121,023. 16 ______ 17 106,621. 20 ______ 21 ______ ► 27c 227,644.

d Add: Line 27a total ______ and line 27b total ______ ► 27d

e Public support (line 27c total minus line 27d total) ► 27e 227,644.

f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) ► 27f 227,730.

g **Public support percentage (line 27e (numerator) divided by line 27f (denominator))** ► 27g 99.96 %

h **Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))** ► 27h 0.04 %

28 **Unusual Grants:** For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. **Do not file this list with your return.** Do not include these grants in line 15.

Part V **Private School Questionnaire** (See instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV) N/A

			Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If 'Yes,' please describe; if 'No,' please explain. (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following:			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered 'No' to any of the above, please explain. (If you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to:			
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered 'Yes' to any of the above, please explain. (If you need more space, attach a separate statement.)			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
	If you answered 'Yes' to either 34a or b, please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If 'No,' attach an explanation.	35		

Part VI-A Lobbying Expenditures by Electing Public Charities (See instructions.)

(To be completed ONLY by an eligible organization that filed Form 5768)

N/A

Check ► a [ ] if the organization belongs to an affiliated group. Check ► b [ ] if you checked 'a' and 'limited control' provisions apply.

Limits on Lobbying Expenditures (The term 'expenditures' means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for all electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount. Enter the amount from the following table –			
If the amount on line 40 is – / **The lobbying nontaxable amount is –**			
Not over $500,000 — 20% of the amount on line 40			
Over $500,000 but not over $1,000,000 — $100,000 plus 15% of the excess over $500,000			
Over $1,000,000 but not over $1,500,000 — $175,000 plus 10% of the excess over $1,000,000	41		
Over $1,500,000 but not over $17,000,000 — $225,000 plus 5% of the excess over $1,500,000			
Over $17,000,000 — $1,000,000			
42 Grassroots nontaxable amount (enter 25% of line 41)	42		
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44		
Caution: *If there is an amount on either line 43 or line 44, you must file Form 4720.*			

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50.)

	Lobbying Expenditures During 4-Year Averaging Period				
Calendar year (or fiscal year beginning in) ►	**(a)** 2007	**(b)** 2006	**(c)** 2005	**(d)** 2004	**(e)** Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers		X	
b Paid staff or management (Include compensation in expenses reported on lines c through h.)		X	
c Media advertisements		X	
d Mailings to members, legislators, or the public		X	
e Publications, or published or broadcast statements		X	
f Grants to other organizations for lobbying purposes		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		X	
i Total lobbying expenditures (add lines c through h.)			

If 'Yes' to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See instructions)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

		Yes	No
a Transfers from the reporting organization to a noncharitable exempt organization of:			
(i) Cash	51 a (i)		X
(ii) Other assets	a (ii)		X
b Other transactions:			
(i) Sales or exchanges of assets with a noncharitable exempt organization	b (i)		X
(ii) Purchases of assets from a noncharitable exempt organization	b (ii)		X
(iii) Rental of facilities, equipment, or other assets	b (iii)		X
(iv) Reimbursement arrangements	b (iv)		X
(v) Loans or loan guarantees	b (v)		X
(vi) Performance of services or membership or fundraising solicitations	b (vi)		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	c		X

d If the answer to any of the above is 'Yes,' complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

52 a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ► ☐ Yes ☒ No

b If 'Yes,' complete the following schedule:

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Form **8868** (Rev April 2007)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No. 1545-1709

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box ► [X]
- If you are filing for an **Additional (not automatic) 3-Month Extension, complete only Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

Section 501(c) corporations required to file Form 990-T and requesting an automatic 6-month extension – check this box and complete Part I only ► [ ]

All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing *(e-file)*. Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for section 501(c) corporations required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit *www.irs.gov/efile* and click on *e-file for Charities & Nonprofits.*

Type or print	Name of Exempt Organization	Employer identification number
	CENTRAL NEW YORK CAT COALITION	06-1688749
File by the due date for filing your return. See instructions.	Number, street, and room or suite number. If a P.O. box, see instructions. PO BOX 6182	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. SYRACUSE NY 13217	

Check type of return to be filed (file a separate application for each return):

[X] Form 990	[ ] Form 990-T (corporation)	[ ] Form 4720
[ ] Form 990-BL	[ ] Form 990-T (section 401(a) or 408(a) trust)	[ ] Form 5227
[ ] Form 990-EZ	[ ] Form 990-T (trust other than above)	[ ] Form 6069
[ ] Form 990-PF	[ ] Form 1041-A	[ ] Form 8870

- The books are in the care of ► CAREN SNYDER

Telephone No. ► (315) 475-5723 FAX No. ►

- If the organization does not have an office or place of business in the United States, check this box ► [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ____. If this is for the whole group, check this box ► [ ]. If it is for part of the group, check this box ► [ ] and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6 months for a section 501(c) corporation required to file Form 990-T) extension of time until Aug 15, 20 08, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

► [X] calendar year 20 07 or

► [ ] tax year beginning ________, 20 ___, and ending ________, 20 ___.

2 If this tax year is for less than 12 months, check reason: [ ] Initial return [ ] Final return [ ] Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a	$ 0.
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b	$ 0.
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c	$ 0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Form 990, Part VI, Page 7, Line 90a
States Filed In

New York

Form 990, Page 8, Part VIII
Relationship of Activities to the Accomplishment of Exempt Purposes Statement

Line Number ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
101	EXPOSURE TO INDIVIDUALS THAT MAY BE FEEDING STRAYS OR ARE WILLING TO FOSTER HOMELESS CATS

Form 990, Page 1, Part I, Line 9
Special Events and Activities Statement

List of Three Largest Events and Type and Number of Others	Gross Receipts	Less Contributions	Gross Revenue	Less Direct Expenses	Net Income (Loss)
GARAGE/RUMMAGE SALES	1,708.	0.	1,708.	0.	1,708.
RAFFLE	30.	0.	30.	0.	30.
SU VOLUNTEERS	1,943.	0.	1,943.	197.	1,746.
PRODUCT SALES	214.	0.	214.	0.	214.
Total	3,895.	0.	3,895.	197.	3,698.

Form 990, Page 4, Part IV, Line 58
Other Assets Statement

Line 58 - Other Assets:	Beginning of Year	End of Year
PREPAID GIFT CARDS	430.	184.
Total	430.	184.

Form 990, Page 4, Part IV, Line 65
Other Liabilities Statement

Line 65 - Other Liabilities:	Beginning of Year	End of Year
CREDIT CARD BALANCES	0.	484.
Total	0.	484.

Supporting Statement of:

Form 990 p 1/Line 1b

Description	Amount
KITTY IN MEETING	149.
RAFFLES QUID PRO QUO	4.
PRINTER CARTRIDGE PROCEEDS	22.
HOSTING EVENTS	1,234.
CHANGEBOXES	697.
BOTTLE & CAN DEPOSIT	99.
NEWSLETTER SUPPORT	15,883.
Total	18,088.

Supporting Statement of:

Form 990 p 1/Line 1c

Description	Amount
PET PICTURES	1,115.
CORPORATE DONATIONS - GIFT CARDS	695.
CORPORATE DONATIONS - FROM NPO	370.
CORPORATE DONATIONS - NSAL TRANSPORTATION	675.
CORPORATE DONATIONS - HILLS SD SHELTER REBATE	467.
CORPORATE DONATIONS - PET SMART ADOPTION	1,965.
CORPORATE DONATIONS - FUNDRAISERS SPONS. CN	1,818.
AUTO AUCTION CONTRIBUTIONS	1,325.
PAYROLL DEDUCTION DONATIONS	1,114.
COMPANY MATCHING GIFTS	350.
PET SMART CHARITIES	10,000.
Total	19,894.

Supporting Statement of:

Form 990 p 2/Line 33 column (B)

Description	Amount
ADOPTION CENTER:	
MAINTENANCE SUPPLIES	776.
RELATED TO FOSTER CARE:	
FOSTER SITE SUPPLIES	2,023.
MEDICINE CHEST	6,550.
FOOD PANTRY SUPPLIES	6,702.
Total	16,051.

Supporting Statement of:

Form 990 p 2/Line 43 Column (B)-5

Description	Amount
SANS CLININC	4,985.
DR CORONADO	2,985.
PREPAID SPAY & NEUTER	262.
UPSTATE SPAY/NEUTER	321.
SOS SPAY/NEUTER	36,492.
Total	45,045.

Form **CHAR500** This form used for Article 7-A, EPTL and dual filers (replaces forms CHAR 497, CHAR 010 and CHAR 006)	**Annual Filing for Charitable Organizations** New York State Department of Law (Office of the Attorney General) Charities Bureau - Registration Section 120 Broadway New York, NY 10271 www.oag.state.ny.us/charities/charities.html	**2007** **Open to Public Inspection**

1. General Information

a. For the fiscal year beginning (mm/dd/yyyy) ______ / 2007 and ending (mm/dd/yyyy) ______

b. Check if applicable for NYS:
- [ ] Address change
- [ ] Name change
- [ ] Initial filing
- [ ] Final filing
- [ ] Amended filing
- [ ] NY registration pending

c. Name of organization: CENTRAL NEW YORK CAT COALITION

Number and street (or P.O. box if mail not delivered to street address): P.O. BOX 6182

Room/suite:

City or town, state or country and zip + 4: SYRACUSE, NY 13217

d. Fed. employer ID no. (EIN) (##-#######): 06-1688749

e. NY State registration no. (##-##-##): 40-18-21

f. Telephone number: 315-289-2287

g. Email:

2. Certification - Two Signatures Required

We certify under penalties of perjury that we reviewed this report, including all attachments, and to the best of our knowledge and belief, they are true, correct and complete in accordance with the laws of the State of New York applicable to this report.

	Signature	Printed Name	Title	Date
a. President or Authorized Officer		MICHELLE POWERS	PRESIDENT	
b. Chief Financial Officer or Treasurer		MARIETTA ROWE	V.PRESIDENT	

3. Annual Report Exemption Information

a. **Article 7-A** annual report exemption (Article 7-A registrants and dual registrants)

Check ▶ [ ] if total contributions from NY State (including residents, foundations, corporations, government agencies, etc.) did not exceed $25,000 **and** the organization did not use the services of a professional fund raiser (PFR) or fund raising counsel (FRC) to solicit contributions during this fiscal year.

NOTE: An organization may also check the box to claim this exemption if no PFR or FRC was used **and** either: 1) the organization received an allocation from a federated fund, United Way or incorporated community appeal **and** contributions from all other sources did not exceed $25,000 **or** 2) it received all or substantially all of its contributions from a single government agency to which it submitted an annual financial report similar to that required by Article 7-A).

b. **EPTL** annual report exemption (EPTL registrants and dual registrants)

Check ▶ [ ] if total gross receipts for this fiscal year did not exceed $25,000 **and** the assets (market value) of the organization did not exceed $25,000 at any time during this fiscal year.

For EPTL or Article-7A registrants claiming the annual report exemption under the one law under which they are registered and for dual registrants claiming the annual report exemptions under both laws, simply complete part 1 (General Information), part 2 (Certification) and part 3 (Annual Report Exemption Information) above.

__Do not__ submit a fee, __do not__ complete the following schedules and __do not__ submit any attachments to this form.

4. Article 7-A Schedules

If you did **not** check the Article 7-A annual report exemption above, complete the following for this fiscal year:

a. Did the organization use a professional fund raiser, fund raising counsel or commercial co-venturer for fund raising activity in NY State? . . . [ ] Yes* [X] No

*** If "Yes", complete Schedule 4a.**

b. Did the organization receive government contributions (grants)? . . . [ ] Yes* [X] No

*** If "Yes", complete Schedule 4b.**

5. Fee Submitted: See last page for summary of fee requirements.

Indicate the filing fee(s) you are submitting along with this form:

a. Article 7-A filing fee	$ 10.00	*Submit only one check or money order for the total fee, payable to "NYS Department of Law"*
b. EPTL filing fee	$ 25.00	
c. **Total fee**	$ 35.00	

6. Attachments: For organizations that are not claiming annual report exemptions under both laws, see last page for **required attachments.**

*- Mail completed form with **required schedules, fee and attachments** to the address at the top of this page -*

Schedule 4a: Professional Fund Raisers (PFR), Fund Raising Counsels (FRC), Commercial Co-Venturers (CCV)

If you checked the box in question **4.a.** on page 1, complete the following schedule for **each** PFR, FRC or CCV that the organization engaged for fund raising activity in NY State:

1. Type of fund raising professional (FRP):
- Professional fund raiser . . . . ☐
- Fund raising counsel . . . . ☐
- Commercial co-venturer . . . . ☐

2. Name of FRP:

____

Number and street (or P.O. box if mail is not delivered to street address):

____

City or town, state or country and zip + 4:

____

3. FRP telephone number:

4. Services provided by FRP (provide description):

5. Compensation arrangement with FRP (provide description):

6. Dates of contract . . . . __________ (mm/dd/yyyy) through __________ (mm/dd/yyyy)

7. Amount paid to FRP . . . . $ __________

Schedule 4b: Government Contributions (Grants)

If you checked the box in question **4.b.** on page 1, complete the following schedule for **each** government contribution (grant). Use additional copies of this page if necessary to list each government contribution (grant) separately.

Government Agency Name	Grant Amount
	$
	$
	$
	$
	$
	$
	$
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	$
	$
	$
	$
	$
	$
	$
	$
	$
Total Government Contributions (Grants)	$

5. Fee Instructions

The filing fee depends on the organization's Registration Type. For details on Registration Type and filing fees, see the Instructions for Form CHAR500.

Organization's Registration Type	Fee Instructions
• **Article 7-A**	Calculate the Article 7-A filing fee using the table in **part a** below. The EPTL filing fee is $0.
• **EPTL**	Calculate the EPTL filing fee using the table in **part b** below. The Article 7-A filing fee is $0.
• **Dual**	Calculate both the Article 7-A and EPTL filing fees using the tables in **parts a and b** below. Add the Article 7-A and EPTL filing fees together to calculate the total fee. Submit a **single** check or money order for the total fee.

a) Article 7-A filing fee

Total Support & Revenue	Article 7-A Fee
more than $250,000	$25
up to $250,000 *	$10

* *Any organization that contracted with or used the services of a professional fund raiser (PFR) or fund raising counsel (FRC) during the reporting period must pay an Article 7-A filing fee of $25, regardless of total support and revenue.*

b) EPTL filing fee

Net Worth at End of Year	EPTL Fee
Less than $50,000	$25
$50,000 or more, but less than $250,000	$50
$250,000 or more, but less than $1,000,000	$100
$1,000,000 or more, but less than $10,000,000	$250
$10,000,000 or more, but less than $50,000,000	$750
$50,000,000 or more	$1500

6. Attachments - Document Attachment Check-List

Check the boxes for the documents you are attaching.

For All Filers

Filing Fee

[X] Single check or money order payable to "NYS Department of Law"

Copies of Internal Revenue Service Forms

[X] **IRS Form 990**	[ ] **IRS Form 990-EZ**	[ ] **IRS Form 990-PF**
[X] Schedule A to IRS Form 990	[ ] Schedule A to IRS Form 990-EZ	
[ ] Schedule B to IRS Form 990	[ ] Schedule B to IRS Form 990-EZ	[ ] Schedule B to IRS Form 990-PF
[ ] IRS Form 990-T	[ ] IRS Form 990-T	[ ] IRS Form 990-T

Additional Article 7-A Document Attachment Requirement

Independent Accountant's Report

[ ] Audit Report *(total support & revenue more than $250,000)*
[ ] Review Report *(total support & revenue $100,001 to $250,000)*
[X] No Accountant's Report Required *(total support & revenue not more than $100,000)*

Steven A. Stanek, CPA

From: Nancy Anelli [nanelli@asdlcpa.com]

Sent: Tuesday, May 13, 2008 11:17 AM

To: NY Charities Bureau

Cc: Steve Stanek

Subject: Re: Central New York Cat Coalition, NYS Reg No. 40-18-21, EIN 06-1688749

Central New York Cat Coalition, A Nonprofit Organization, requests an automatic 3-month extension of time until August 15, 2008, to file CHAR500, Annual Filing for Charitable Organizations. The extension is for the calendar year 2007. A delay in accumulating data necessitates an extension in order to prepare an accurate return.

Nancy A. Anelli
Alpert, Stearns, Daley & LaCombe PC
404 East Genesee Street
Fayetteville, NY 13066
Telephone (315) 637-9808
Fax (315) 637 5894
www.asdlcpa.com

Steven A. Stanek, CPA

From: Nancy Anelli [nanelli@asdlcpa.com]
Sent: Tuesday, May 13, 2008 1:23 PM
To: Steve Stanek
Subject: Fw: Central New York Cat Coalition, NYS Reg No. 40-18-21, EIN06-1688749

----- Original Message -----
From: "CharExt" <Charities.Extensions@oag.state.ny.us>
To: "Nancy Anelli" <nanelli@asdlcpa.com>
Sent: Tuesday, May 13, 2008 12:15 PM
Subject: Re: Central New York Cat Coalition, NYS Reg No. 40-18-21, EIN06-1688749

We have received your request for an extension. You may receive notification under separate cover if your request is denied.

Thank you for using e-mail to request an extension.

Sincerely,

Charities Bureau

>>> "Nancy Anelli" <nanelli@asdlcpa.com> 5/13/2008 11:17 AM >>>

Central New York Cat Coalition, A Nonprofit Organization, requests an automatic 3-month extension of time until August 15, 2008, to file CHAR500, Annual Filing for Charitable Organizations. The extension is for the calendar year 2007. A delay in accumulating data necessitates an extension in order to prepare an accurate return.

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www.asdlcpa.com

CENTRAL NEW YORK CAT COALITION

(A NONPROFIT ORGANIZATION)

FINANCIAL STATEMENTS

Years Ended December 31, 2007 and 2006

TABLE OF CONTENTS

ALPERT, STEARNS, DALEY & LACOMBE, P.C.
CERTIFIED PUBLIC ACCOUNTANTS
404 EAST GENESEE STREET
FAYETTEVILLE, NEW YORK 13066
315 637-9808
FAX 315 637-5894

LYNN P. STEARNS, C.P.A.
JOHN M. DALEY, C.P.A.
MARJORIE LACOMBE, C.P.A.
JACQUELINE CHARETTE, C.P.A.

HERBERT ALPERT, C.P.A.

MEMBERS OF:
AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS
NEW YORK STATE SOCIETY OF CERTIFIED PUBLIC ACCOUNTANTS

To the Board of Directors of
Central New York Cat Coalition
Syracuse, New York

We have compiled the accompanying statement of financial position of Central New York Cat Coalition (a nonprofit organization) as of December 31, 2007, and the related statements of activities, functional expenses and cash flows for the year then ended, in accordance with Statements on Standards for Accounting and Review Services issued by the American Institute of Certified Public Accountants.

A compilation is limited to presenting in the form of financial statements information that is the representation of management. We have not audited or reviewed the accompanying 2007 financial statements and, accordingly, do not express an opinion or any other form of assurance on them.

The accompanying 2006 financial statements of Central New York Cat Coalition (a nonprofit organization) were previously reviewed by us, and our report dated October 4, 2007, stated that we were not aware of any material modifications that should be made to those financial statements in order for them to be in conformity with generally accepted accounting principles. We have not performed any procedures in connection with that review engagement after the date of our report on the 2006 financial statements.

Alpert, Stearns, Daley + LaCombe

Fayetteville, New York

July 24, 2008

CENTRAL NEW YORK CAT COALITION
STATEMENTS OF FINANCIAL POSITION
December 31, 2007 and 2006

ASSETS

	December 31, 2007 (Compiled)	December 31, 2006 (Reviewed)
Current Assets		
Cash on Hand and In Bank	$ 2,978	$ 8,613
Savings and Temporary Cash Investments	14,552	15,855
Cash Restricted for Foster Care Costs	8,822	0
Total Current Assets	26,352	24,468
Other Assets		
Prepaid Gift Cards	184	430
TOTAL ASSETS	$ 26,536	$ 24,898

LIABILITIES AND NET ASSETS

	December 31, 2007 (Compiled)	December 31, 2006 (Reviewed)
Current Liabilities		
Accounts Payable	$ 484	$ 0
Net Assets		
Unrestricted Net Assets	17,230	24,898
Temporarily Restricted Net Assets	8,822	0
Total Net Assets	26,052	24,898
TOTAL LIABILITIES AND NET ASSETS	$ 26,536	$ 24,898

See Accountants' Compilation Report and Notes to the Financial Statements.

CENTRAL NEW YORK CAT COALITION
STATEMENTS OF ACTIVITIES
Years Ended December 31, 2007 and 2006

	December 31, 2007 (Compiled)	December 31, 2006 (Reviewed)
UNRESTRICTED NET ASSETS		
Unrestricted Revenues, Gains and Other Support		
Direct Public Support	$ 18,088	$ 20,818
Indirect Public Support	9,894	15,279
Donated Supplies	25,412	25,356
Program Service Revenue	39,634	50,331
Special Events	3,698	12,912
Gain on Sale of Donated Vehicle	0	500
Interest Income	60	71
Total Unrestricted Revenues and Gains	96,786	125,267
Net Assets Released From Restrictions		
Restrictions Satisfied by Payments	1,178	0
Total Unrestricted Revenues, Gains, and Other Support	97,964	125,267
Expenses		
Program Services		
Clinic Spay/Neuter Program	45,045	56,235
Food Pantry	6,702	5,887
Foster Care, Adoption Assistance & Relocation Program	46,862	47,646
Supporting Services		
Management and General	7,023	3,923
Total Expenses	105,632	113,691
INCREASE (DECREASE) IN UNRESTRICTED NET ASSETS	(7,668)	11,576
TEMPORARILY RESTRICTED NET ASSETS		
Contributions - Pet Smart Charities	10,000	0
Net Assets Released From Restrictions		
Restrictions Satisfied by Payments	(1,178)	0
INCREASE IN TEMPORARILY RESTRICTED NET ASSETS	8,822	0
INCREASE IN NET ASSETS	1,154	11,576
NET ASSETS AT BEGINNING OF YEAR	24,898	13,322
NET ASSETS AT END OF YEAR	$ 26,052	$ 24,898

See Accountants' Compilation Report and Notes to the Financial Statements.

CENTRAL NEW YORK CAT COALITION
STATEMENTS OF FUNCTIONAL EXPENSES
Year Ended December 31, 2007, with Comparative Totals for 2006

	Program Services			**Supporting Services**	**Totals**	
	Clinic Spay/ Neuter	Food Pantry	Foster Care, Adoption & Relocation	Management and General	December 31, 2007 (Compiled)	December 31, 2006 (Reviewed)
Supplies	$ 0	$ 6,702	$ 20,213	$ 0	$ 26,915	$ 26,268
Accounting	0	0	0	1,200	1,200	0
Telephone	0	0	0	1,262	1,262	1,149
Travel	0	0	1,942	562	2,504	1,514
Bank Service Fees	0	0	0	262	262	73
Advertising	0	0	51	0	51	58
Memberships	0	0	0	80	80	119
Postage and Shipping	0	0	0	1,325	1,325	927
Printing and Publications	0	0	0	2,302	2,302	255
Medical						
Spay/Neuter	45,045	0	0	0	45,045	56,235
Other	0	0	23,578	0	23,578	23,430
Adoption Reimbursements	0	0	865	0	865	2,620
SU Volunteer Insurance	0	0	197	0	197	766
Miscellaneous	0	0	16	30	46	277
Total Expense, December 31, 2007	$ 45,045	$ 6,702	$ 46,862	$ 7,023	$ 105,632	
Total Expense, December 31, 2006	$ 56,235	$ 5,887	$ 47,646	$ 3,923		$ 113,691

See Accountants' Compilation Report and Notes to the Financial Statements.

CENTRAL NEW YORK CAT COALITION
STATEMENTS OF CASH FLOWS
Year Ended December 31, 2007 and 2006

	December 31, 2007 (Compiled)	December 31, 2006 (Reviewed)
Cash Flows From Operating Activities:		
Increase (Decrease) in Unrestricted Net Assets	$ (7,668)	$ 11,576
Adjustments to Reconcile Increase (Decrease) In		
Net Assets to Net Cash Provided by Operating Activities:		
(Gain) on Sale of Vehicle	0	(500)
(Increase) Decrease in:		
Prepaid Gift Cards	246	(430)
Increase (Decrease) in:		
Accounts Payable	484	0
Contributions Restricted for Foster Care	8,822	0
Net Cash Provided by Operating Activities	1,884	10,646
Cash Flows Provided by Investing Activities:		
Proceeds from the Sale of Donated Vehicle	0	2,000
Net Increase in Cash	1,884	12,646
Cash At Beginning of Year	24,468	11,822
Cash At End of Year	$ 26,352	$ 24,468

Supplemental Disclosure of Cash Flow Information:

Cash Paid During the Year for:		
Interest Expense		$ 0

See Accountants' Compilation Report and Notes to the Financial Statements.

NOTES TO THE FINANCIAL STATEMENTS

NOTE A - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Nature of Activities

Central New York Cat Coalition (the Organization) is a New York nonprofit corporation that provides support services for homeless cats. The Organization teams with other businesses and local veterinary hospitals to offer programs that provide assistance for spaying/neutering, as well as foster care and adoption. The Organization also supports a feral and stray feline outreach program. Programs developed by the Organization are funded primarily through outside public support and are run exclusively by volunteers.

Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Cash and Cash Equivalents

For the purpose of the statements of cash flows, the Organization considers all highly liquid debt instruments purchased with a maturity of three months or less to be cash equivalents.

Basis of Accounting

The financial statements of Central New York Cat Coalition have been prepared on the accrual basis of accounting and accordingly reflect all significant receivables, payables, and other liabilities.

Basis of Presentation

Financial statement presentation follows the recommendations of the Financial Accounting Standards Board in its Statements of Financial Accounting Standards (SFAS) No. 117, *Financial Statements of Not-for-Profit Organizations.* Under SFAS No. 117, the Organization is required to report information regarding its financial position and activities according to three classes of net assets; unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets.

Comparative Financial Information

The financial statements include certain prior-year summarized comparative information in total but not at net asset class. Such information does not include sufficient detail to constitute a presentation in conformity with generally accepted accounting principles. Accordingly, such information should be read in conjunction with the Organization's financial statements for the year ended December 31, 2006, from which the summarized information was derived.

CENTRAL NEW YORK CAT COALITION

NOTES TO THE FINANCIAL STATEMENTS

NOTE A - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES – CONT.

Income Tax Status

The Organization is a not-for-profit entity that is exempt from income taxes under Section 501(c) (3) of the Internal Revenue Code.

In addition, the Organization qualifies for the charitable contribution deduction under Section 170(b) (1) (A).

Restricted and Unrestricted Revenue

Contributions received are recorded as increases in unrestricted, temporarily restricted, or permanently restricted net assets, depending on the existence and /or nature of any donor restrictions.

Contributions that are restricted by the donor are reported as increases in unrestricted net assets if the restrictions expire (that is, when a stipulated time restriction ends or purpose restriction is accomplished) in the reporting period in which the revenue is recognized. All other donor-restricted contributions are reported as increases in temporarily or permanently restricted net assets, depending on the nature of restrictions. When a restriction expires, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the Statement of Activities as net assets released from restrictions.

Expense Allocation

The costs of providing various programs and other activities have been summarized on a functional basis in the Statement of Activities and in the Statement of Functional Expenses. Accordingly, certain costs have been allocated among the programs and supporting services benefited.

NOTE B - DESCRIPTION OF PROGRAM AND SUPPORTING SERVICES

The following program and supporting services are included in the accompanying financial statements:

Clinic Spay/Neuter Program

The Organization funds a weekly low or no cost Spay/Neuter Assistance Program that is extended to pet, feral, stray and free roaming cats, working with a number of County Agencies, other humane organizations and the public. The program has no paid staff.

Food Pantry Program

The Organization provides low cost/no cost cat food to individuals and those providing foster care. The Organization will also pick up unwanted or donated cat food and help get those supplies to areas of need.

NOTE B - DESCRIPTION OF PROGRAM AND SUPPORTING SERVICES - CONT.

Foster Care, Adoption Assistance & Relocation Program

The Organization collaborates with local PetSmart stores to provide in-store adoption space. This gives homeless cats accessibility to the public and the opportunity to find a home. The Organization also actively seeks and interviews foster care candidates to help with the volume of cats needing assistance, and works with individuals willing to provide sanctuary for unwanted or un-adoptable cats.

Management and General

Includes the functions necessary to maintain an equitable employment program; ensure an adequate working environment; provide coordination of the Organization's programs; secure proper administrative functioning of the Board of Directors; and manage the financial and budgetary responsibilities of the Organization.

NOTE C – PREPAID GIFT CARDS

The Organization maintains gift cards that have been donated to them on the statement of financial position as an asset. At December 31, 2007, the total value of unused donated gift cards was $184.

NOTE D – DONATED SUPPLIES

The Organization receives donated supplies from officers and volunteers who assist with program events. Donated supplies are recognized as contributions in accordance with SFAS No. 116. At December 31, 2007 and 2006, the Organization recorded $25,412 and $25,356, respectively, in donated supplies that have been included in both revenues and expenses.

NOTE E – DONATED SERVICES

No amounts have been reflected in the financial statements for donated services. The Organization generally pays for services requiring specific expertise. However, many individuals volunteer their time and perform a variety of tasks that assist the Organization with various program services.