

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)

OMB No 1545-0047

2005

Open to Public Inspection

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

A For the 2005 calendar year, or tax year beginning _____ **and ending** _____

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return
 Amended return
 Application pending

C Name of organization
Doris Day Animal League
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
227 Massachusetts Avenue, NE 100
 City or town, state or country, and ZIP + 4
Washington, DC 20002

D Employer identification number
95-4117651

E Telephone number
(202) 546-1761

F Accounting method 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).

G Website: ▶ **www.ddal.org**

J Organization type (check only one) ▶ 501(c) (**4**) ◀ (insert no) 4947(a)(1) or 527

K Check here ▶ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization chooses to file a return, be sure to file a complete return. **Some states require a complete return.**

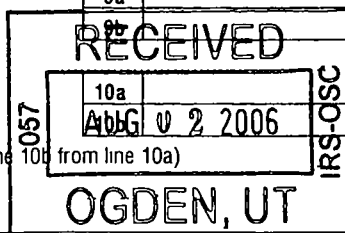
L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **3,564,879.**

H and I are not applicable to section 527 organizations
H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates ▶ **N/A**
H(c) Are all affiliates included? **N/A** Yes No (If "No," attach a list.)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No
I Group Exemption Number ▶ **N/A**
M Check ▶ if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

SCANNED AUG 22 2006 Revenue

1	Contributions, gifts, grants, and similar amounts received:					
	a Direct public support	1a	3,382,030.			
	b Indirect public support	1b				
	c Government contributions (grants)	1c				
	d Total (add lines 1a through 1c) (cash \$ <u>3,382,030.</u> noncash \$ _____)	1d			3,382,030.	
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2				
	3 Membership dues and assessments	3				
	4 Interest on savings and temporary cash investments	4			7,329.	
	5 Dividends and interest from securities	5			9,650.	
	6 a 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					
8 a Gross amount from sales of assets other than inventory	(A) Securities		(B) Other			
	94,278.	8a				
	90,000.	8b				
	4,278.	8c				
d Net gain or (loss) (combine line 8c, columns (A) and (B))	8d		Stmt 1	4,278.		
9 Special events and activities (attach schedule). If any amount is from gaming, check here ▶ <input type="checkbox"/>						
a Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a					
b Less: direct expenses other than fundraising expenses	9b					
c Net income or (loss) from special events (subtract line 9b from line 9a)	9c					
10 a Gross sales of inventory, less returns and allowances	10a					
	b Less: cost of goods sold					
	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			71,592.		
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12			3,474,879.		
13 Program services (from line 44, column (B))	13			2,087,227.		
	14 Management and general (from line 44, column (C))	14		273,829.		
	15 Fundraising (from line 44, column (D))	15		404,861.		
	16 Payments to affiliates (attach schedule)	16				
	17 Total expenses (add lines 16 and 44, column (A))	17			2,765,917.	
18 Excess or (deficit) for the year (subtract line 17 from line 12)	18			708,962.		
19 Net assets or fund balances at beginning of year (from line 73, column (A))	19			505,917.		
20 Other changes in net assets or fund balances (attach explanation)	20		See Statement 2	<133.>		
21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21			1,214,746.		



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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.

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
22 Grants and allocations (attach schedule) (cash \$ <u>79,750.</u> noncash \$ <u>0.</u>) If this amount includes foreign grants, check here <input type="checkbox"/>	22 79,750.	79,750.	Statement 5	
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25 Compensation of officers, directors, etc **	25 100,771.	80,617.	15,116.	5,038.
26 Other salaries and wages	26 481,764.	346,399.	130,582.	4,783.
27 Pension plan contributions	27			
28 Other employee benefits	28			
29 Payroll taxes	29 42,423.	29,696.	10,606.	2,121.
30 Professional fundraising fees	30			
31 Accounting fees	31 15,474.	1,566.	13,908.	
32 Legal fees	32 20,506.	4,944.	15,562.	
33 Supplies	33 23,587.	18,498.	4,775.	314.
34 Telephone	34 17,657.	15,939.	1,342.	376.
35 Postage and shipping	35 493,662.	370,399.	9,431.	113,832.
36 Occupancy	36 92,615.	65,739.	21,906.	4,970.
37 Equipment rental and maintenance	37 11,464.	4,081.	7,022.	361.
38 Printing and publications	38 707,387.	546,228.	6,496.	154,663.
39 Travel	39 61,516.	61,016.	500.	
40 Conferences, conventions, and meetings	40 25,598.	22,227.	3,371.	
41 Interest	41 384.	192.	192.	
42 Depreciation, depletion, etc (attach schedule)	42 5,921.		5,921.	
43 Other expenses not covered above (itemize)				
a _____	43a			
b _____	43b			
c _____	43c			
d _____	43d			
e _____	43e			
f _____	43f			
g See Statement 3	43g 585,438.	439,936.	27,099.	118,403.
44 Total functional expenses. Add lines 22 through 43. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44 2,765,917.	2,087,227.	273,829.	404,861.

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 \$ 2,181,766. ; (ii) the amount allocated to Program services \$ 1,641,313. ; (iii) the amount allocated to Management and general \$ 178,203. ; and (iv) the amount allocated to Fundraising \$ 281,898.

** See Statement 4

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? ▶ Promote the protection of animal rights.	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
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.)	
a Public Advocacy - Seek federal, state and local legislation to promote humane care and treatment of animals.	
(Grants and allocations \$) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	443,010.
b Public Education - Educating the public regarding medical research and testing projects that use animals and the benefits to the local communities that result from proper care, medical treatment and promotion of animals.	
(Grants and allocations \$ 79,750.) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	1,644,217.
c	
(Grants and allocations \$) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
d	
(Grants and allocations \$) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
e Other program services (attach schedule)	
(Grants and allocations \$) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶	2,087,227.

Form 990 (2005)

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	48,787.	45	66,171.
	46 Savings and temporary cash investments	112,291.	46	729,707.
	47 a Accounts receivable	47a		
	b Less: allowance for doubtful accounts	47b	47c	
	48 a Pledges receivable	48a		
	b Less: allowance for doubtful accounts	48b	48c	
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees		50	
	51 a Other notes and loans receivable	51a		
	b Less: allowance for doubtful accounts	51b	51c	
	52 Inventories for sale or use	2,758.	52	2,758.
	53 Prepaid expenses and deferred charges		53	
	54 Investments - securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54	
	55 a Investments - land, buildings, and equipment basis	55a		
	b Less: accumulated depreciation	55b	55c	
56 Investments - other	See Statement 6	402,545.	56	483,663.
57 a Land, buildings, and equipment: basis	57a 114,668.			
b Less: accumulated depreciation Stmt 7	57b 106,604.	14,556.	57c	8,064.
58 Other assets (describe <input type="checkbox"/> See Statement 8)		48,406.	58	41,957.
59 Total assets (must equal line 74) Add lines 45 through 58		629,343.	59	1,332,320.
Liabilities	60 Accounts payable and accrued expenses	115,370.	60	113,983.
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax-exempt bond liabilities		64a	
	b Mortgages and other notes payable		64b	
	65 Other liabilities (describe <input type="checkbox"/> Capital Lease Payable)		8,056.	65
66 Total liabilities. Add lines 60 through 65)		123,426.	66	117,574.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	458,709.	67	1,200,483.
	68 Temporarily restricted	47,208.	68	14,263.
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> 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; column (B) must equal line 21)		505,917.	73	1,214,746.
74 Total liabilities and net assets/fund balances. Add lines 66 and 73		629,343.	74	1,332,320.

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

a	Total revenue, gains, and other support per audited financial statements		a	3,478,393.
b	Amounts included on line a but not on Part I, line 12:			
1	Net unrealized gains on investments	b1	3,514.	
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	3,514.
c	Subtract line b from line a		c	3,474,879.
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	0.
e	Total revenue (Part I, line 12). Add lines c and d		e	3,474,879.

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

a	Total expenses and losses per audited financial statements		a	2,769,564.
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): Book Tax Depreciation Difference	b4	3,647.	
	Add lines b1 through b4		b	3,647.
c	Subtract line b from line a		c	2,765,917.
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	0.
e	Total expenses (Part I, line 17). Add lines c and d		e	2,765,917.

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 & deferred compensation plans	(E) Expense account and other allowances
Doris Day P.O. Box 5427 Carmel, CA 93921	President	0.00	0.	0.
Holly Hazard 227 Mass. Ave NE, Suite 100 Washington, DC 20002	Executive Director	40.00	95,247.	5,524.
Edgar Haber (Deceased 9/05) PO Box 5427 Carmel, CA 93921-5427	Director	0.00	0.	0.
Jim Loeb PO Box 5427 Carmel, CA 93921-5427	Director	0.00	0.	0.
Terese Melcher P.O. Box 5427 Carmel, CA 93921-5427	Director	0.00	0.	0.

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

Table with 4 rows (75a-75d) and 3 columns (Yes, No, and a central column for descriptions). 75a: 4 meetings. 75b: X. 75c: X. 75d: X.

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

Table with 5 columns: (A) Name and address, (B) Loans and Advances, (C) Compensation, (D) Contributions to employee benefit plans, (E) Expense account and other allowances. All entries are blank.

Part VI Other Information (See the instructions)

Table with 3 columns (Yes, No, and a central column for descriptions). 76: X. 77: X. 78a: X. 78b: N/A. 79: X. 80a: X. 81a: 0. 81b: 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?		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 N/A		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	X	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	X	
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	X	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? 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		X
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 line 85f 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	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		X
89 a	501(c)(3) organizations Enter: Amount of tax imposed on the organization during the year under section 4911 N/A; section 4912 N/A; section 4955 N/A		
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		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		0.
90 a	List the states with which a copy of this return is filed See Attached		
b	Number of employees employed in the pay period that includes March 12, 2005	90b	10
91 a	The books are in care of Doris Day Animal League Telephone no. (202) 546-1761 Located at 227 Mass Ave., NE, Suite 100 Washington DC ZIP + 4 20002		
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)? If "Yes," enter the name of the foreign country N/A See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts	91b	X
c	At any time during the calendar year, did the organization maintain an office outside of the United States? If "Yes," enter the name of the foreign country N/A	91c	X
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	N/A

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

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	7,329.	
96 Dividends and interest from securities			14	9,650.	
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 personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					4,278.
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a <u>List rental revenues</u>			15	52,129.	
b <u>Credit card affinity</u>			15	19,463.	
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0.		88,571.	4,278.
105 Total (add line 104, columns (B), (D), and (E))					92,849.

Note: Line 105 plus line 1d, 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).
▼	

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(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
N/A	%			
	%			
	%			
	%			

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 8879 and Form 4720 (see instructions).

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. My declaration is based on all information of which preparer has any knowledge.

Signature of officer: [Signature] Date: 9/1/06 Type or print name and title: Holly Hazard - Executive Director

Paid Preparer's Use Only Preparer's signature: [Signature] Date: 7/25/06 Check if self-employed: Preparer's SSN or PTIN: _____

Firm's name (or yours if self-employed), address, and ZIP + 4: Robertson, Woodford & Summers, LLP
140 Litton Drive, Ste 210
Grass Valley, CA 95945

EIN: _____ Phone no.: (530) 477-6468

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Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
	Furniture & Fixtures											
7	1988 Office Furniture	060188SL		7.00	16	2,823.			2,823.	2,823.		0.
8	1989 Office Furniture	080189SL		7.00	16	683.			683.	683.		0.
9	1993 Office Furniture	040193SL		7.00	16	2,829.			2,829.	2,829.		0.
10	1994 Office Furniture	090194SL		7.00	16	490.			490.	490.		0.
14	Furniture	090195SL		7.00	16	450.			450.	443.		0.
15	1996 Office Furniture	080196SL		7.00	16	2,363.			2,363.	2,336.		0.
	* 990 Page 2 Total											
	Furniture & Fixtures					9,638.		0.	9,638.	9,604.	0.	0.
	Machinery & Equipment											
11	1987 Copier	110187SL		5.00	16	690.			690.	690.		0.
2	1988 Computer/Fax	060188SL		5.00	16	5,646.			5,646.	5,646.		0.
3	1989 Computer Equipment	110189SL		5.00	16	2,371.			2,371.	2,371.		0.
4	1991 Fax	110191SL		5.00	16	905.			905.	905.		0.
5	1993 Computer	010193SL		5.00	16	4,123.			4,123.	4,123.		0.
6	1994 Computer/Fax	090194SL		5.00	16	12,628.			12,628.	12,628.		0.
11	Computers	010195SL		5.00	16	9,500.			9,500.	9,500.		0.
12	Computer	080195SL		5.00	16	1,750.			1,750.	1,750.		0.
13	Computer	020195SL		5.00	16	1,945.			1,945.	1,945.		0.

528102 01-08-06 (D) - Asset disposed * ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
16	Computers/Equipment	080196	SL	5.00	16	4,822.			4,822.	4,737.		0.
17	1998 Computer	071598	SL	5.00	16	2,198.			2,198.	2,198.		0.
18	1998 Printer	102698	SL	5.00	16	669.			669.	669.		0.
19	Power Mac G3 MT	042799	SL	5.00	16	3,393.			3,393.	3,393.		0.
20	Power Mac G3 DT	042799	SL	5.00	16	2,440.			2,440.	2,440.		0.
21	Used CPQ 1275 notebook	042799	SL	5.00	16	821.			821.	821.		0.
22	computer	082199	SL	5.00	16	1,748.			1,748.	1,748.		0.
23	Phone system	072000	SL	5.00	16	7,690.			7,690.	6,793.		897.
24	Computer	011500	SL	5.00	16	940.			940.	940.		0.
25	Powerbook	090700	SL	5.00	16	1,625.			1,625.	1,408.		217.
26	G3 Powerbook	081500	SL	5.00	16	2,055.			2,055.	1,815.		240.
27	HP printer	032000	SL	5.00	16	1,992.			1,992.	1,891.		101.
28	Mac equipment	030700	SL	5.00	16	13,443.			13,443.	12,997.		446.
	* 990 Page 2 Total Machinery & Equipment					83,394.		0.	83,394.	81,408.	0.	1,901.
	Other											
29	Postage Meter	080801	SL	5.00	16	1,184.			1,184.	810.		237.
30	10 Dell Workstations/1 Server	070303	SL	5.00	16	17,375.			17,375.	5,213.		3,475.
31	HP dv 1000 Note Book	063005	SL	5.00	16	3,077.			3,077.			308.

528102 01-08-06 (D) - Asset disposed (I) - Section 179, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2005 DEPRECIATION AND AMORTIZATION REPORT
Form 990 Page 2

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
	* 990 Page 2 Total					21,636.		0.	21,636.	6,023.	0.	4,020.
	Other											
	* Grand Total 990 Page 2 Depr					114,668.		0.	114,668.	97,035.	0.	5,921.

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

(D) - Asset disposed

Form 990 Gain (Loss) From Publicly Traded Securities Statement 1

Description	Gross Sales Price	Cost or Other Basis	Expense of Sale	Net Gain or (Loss)
ABX Air Inc.	3,808.	3,045.	0.	763.
Cintas Corp.	8,382.	8,810.	0.	<428.>
Cisco Systems	1,782.	1,856.	0.	<74.>
Fifth Third Bancorp	4,139.	5,573.	0.	<1,434.>
Fifth Third Bancorp	4,139.	4,796.	0.	<657.>
Friedman Billings GP New	2,829.	5,214.	0.	<2,385.>
Friedman Billings GP New	2,829.	3,563.	0.	<734.>
Friedman Billings GP New	2,828.	2,893.	0.	<65.>
Innovative Solutions & Support	9,635.	5,734.	0.	3,901.
Innovative Solutions & Support	6,423.	3,925.	0.	2,498.
Liberty Median New Ser A	8,312.	9,804.	0.	<1,492.>
North Fork Bancorp Inc.	4,269.	3,728.	0.	541.
North Fork Bancorp Inc.	4,269.	3,859.	0.	410.
Overnight Corp	12,776.	8,925.	0.	3,851.
Telecom Holdrs Trust	6,537.	6,825.	0.	<288.>
Zebra Technologies Cl A	6,793.	7,184.	0.	<391.>
Zebra Technologies Cl A	4,528.	4,266.	0.	262.
To Form 990, Part I, line 8	94,278.	90,000.	0.	4,278.

Form 990 Other Changes in Net Assets or Fund Balances Statement 2

Description	Amount
Unrealized Gains on Investment Accounts	3,515.
Book Tax Depreciation Difference	<3,648.>
Total to Form 990, Part I, line 20	<133.>

Form 990	Other Expenses			Statement 3
Description	(A) Total	(B) Program Services	(C) Management and General	(D) Fundraising
Agency Fees	205,700.	154,070.		51,630.
Caging	91,126.	67,433.		23,693.
Data Processing	47,104.	30,330.	3,789.	12,985.
Public Affairs	59,215.	59,215.		
List Rental	35,746.	25,486.		10,260.
Miscellaneous	5,550.	4,973.	577.	
Production	37,278.	32,208.	644.	4,426.
Program				
Administration	37,050.	20,468.	10,923.	5,659.
Housefile Exchange				
Costs	8,843.	6,544.		2,299.
Office Temps	2,020.		50.	1,970.
Bank Charges	26,008.	14,889.	6,131.	4,988.
Insurance	6,155.	3,206.	2,720.	229.
Educational				
Merchandise	2,812.	2,812.		
Website Expense	8,553.	8,553.		
Small Equipment & Furniture	12,278.	9,749.	2,265.	264.
Total to Fm 990, ln 43	585,438.	439,936.	27,099.	118,403.

Form 990	Other Investments	Statement	6
Description	Valuation Method	Amount	
Securities	Market Value	483,663.	
Total to Form 990, Part IV, line 56, Column B		483,663.	

Form 990	Depreciation of Assets Not Held for Investment	Statement	7
Description	Cost or Other Basis	Accumulated Depreciation	Book Value
1987 Copier	690.	690.	0.
1988 Computer/Fax	5,646.	5,646.	0.
1989 Computer Equipment	2,371.	2,371.	0.
1991 Fax	905.	905.	0.
1993 Computer	4,123.	4,123.	0.
1994 Computer/Fax	12,628.	12,628.	0.
1988 Office Furniture	2,823.	2,823.	0.
1989 Office Furniture	683.	683.	0.
1993 Office Furniture	2,829.	2,829.	0.
1994 Office Furniture	490.	490.	0.
Computers	9,500.	9,500.	0.
Computer	1,750.	1,750.	0.
Computer	1,945.	1,945.	0.
Furniture	450.	443.	7.
1996 Office Furniture	2,363.	2,336.	27.
1996 Computers/Equipment	4,822.	4,737.	85.
1998 Computer	2,198.	2,198.	0.
1998 Printer	669.	669.	0.
Power Mac G3 MT	3,393.	3,393.	0.
Power Mac G3 DT	2,440.	2,440.	0.
Power Mac 7100 DT - Used	821.	821.	0.
CPQ 1275 notebook computer	1,748.	1,748.	0.
Phone system	7,690.	7,690.	0.
Computer	940.	940.	0.
Powerbook	1,625.	1,625.	0.
G3 Powerbook	2,055.	2,055.	0.
HP printer	1,992.	1,992.	0.
Mac equipment	13,443.	13,443.	0.
Postage Meter	1,184.	1,047.	137.
10 Dell Workstations/1 Server	17,375.	8,688.	8,687.
HP dv 1000 Note Book Computer	3,077.	308.	2,769.
Total to Form 990, Part IV, ln 57	114,668.	102,956.	11,712.

Form 990	Other Assets	Statement 8
Description		
		Amount
Deposits		4,900.
Prepaid Costs		37,057.
Total to Form 990, Part IV, line 58, Column B		41,957.

Doris Day Animal League

States, Counties, and Cities Where Registered

<p>Alaska 907-269-5100 Alaska Department Of Law 1031 W. 4th Ave., Suite 200 Anchorage, AK 99501-1994</p>	<p>Alabama 334-242-7334 Consumer Protection Section 11 South Union Street Montgomery, AL 36130</p>	<p>Arkansas 501-682-2341 Consumer Protection Division 323 Center Street, 200 Tower Bldg Little Rock, AR 72201</p>
<p>Arizona 602-542-4285 Charitable Organization Registration 1700 W Washington St., 7th Floor Phoenix, AZ 85007-2808</p>	<p>California 916-323-5076 Registry Of Charitable Trusts 1300 I Street, Suite 101 Sacramento, CA 95814</p>	<p>Colorado 303-894-2680 Office Of The Secretary Of State 1560 Broadway, Suite 200 Denver, CO 80202</p>
<p>Connecticut 860-808-5030 Public Charities Unit 55 Elm Street Hartford, CT 06106</p>	<p>Florida (Pinellas County) 727-464-7988 Department Of Consumer Protection 15251 Roosevelt Blvd., Suite 209 Clearwater, FL 33760</p>	<p>Florida 850-410-3707 Division Of Consumer Services 407 S. Calhoun Street, #218 Tallahassee, FL 32399</p>
<p>Georgia 404-656-4911 Office Of The Secretary Of State 2 Martin Luther King Jr. Dr. SE, #802 Atlanta, GA 30334</p>	<p>Illinois 312-814-2595 Charitable Trusts & Solicitations Div. 100 W. Randolph St., 12th Fl. Chicago, IL 60601</p>	<p>Indiana 317-232-2240 Consumer Protection Division 100 N. Senate Ave., Room 201 Indianapolis, IN 46204</p>
<p>Kentucky (Jefferson County) 502-574-6607 Department Of Public Protection 810 Barret Ave., Suite 128 Louisville, KY 40204</p>	<p>Kansas 785-296-4565 Secretary Of State's Office 120 S.W. 10th Ave., 1st Fl. Mem. Hall Topeka, KS 66612-1594</p>	<p>Kentucky 502-696-5389 Consumer Protection Division 1024 Capital Center Drive Frankfort, KY 40601</p>
<p>Louisiana 225-342-7900 Consumer Protection Section 1885 N. 3rd Street Baton Rouge, LA 70801</p>	<p>Massachusetts 617-727-2235 Division Of Public Charities 1 Ashburton Place Boston, MA 02108</p>	<p>Maryland 410-974-5534 Charitable Division State House Annapolis, MD 21401</p>
<p>Maine 207-624-8624 Licensing & Enforcement Division State House Station 35 Augusta, ME 04333-0035</p>	<p>Michigan 517-373-1152 Consumer Protection & Charitable Trust 680 Law Bldg, 525 W. Ottawa Street Lansing, MI 48913</p>	<p>Minnesota 651-286-6172 Charities Division 445 Minnesota Street, Suite 1200 St Paul, MN 55101-2130</p>
<p>Missouri 673-751-1197 Public Protection Unit P O Box 899 Jefferson City, MO 65102</p>	<p>Mississippi 601-359-1371 Office Of The Secretary Of State P O Box 136 Jackson, MS 39205</p>	<p>North Carolina 919-807-2214 Dept. Of The Secretary Of State 2 South Salisbury Street Raleigh, NC 27601</p>
<p>North Dakota 701-328-2900 Secretary Of State 600 East Boulevard Bismarck, ND 58505</p>	<p>New Hampshire 603-271-3591 Division Of Charitable Trusts 33 Capitol Street Concord, NH 03301-6397</p>	<p>New Jersey 973-504-6262 Division Of Consumer Affairs 153 Halsey Street, 7th Floor Newark, NJ 07101</p>
<p>New Mexico 505-222-9000 111 Lomas Blvd., NW, Suite 300 Albuquerque, NM 87102</p>	<p>New York 518-486-9797 Department Of Law 41 State Street, 12th Floor Albany, NY 12207</p>	<p>Ohio (Columbus) 614-645-8366 240 Greenlawn Avenue Columbus, OH 43223-2609</p>
<p>Ohio 614-466-3180 Charitable Foundation Section 150 East Gay Street Columbus, OH 43215-5148</p>	<p>Oklahoma 405-521-3911 Oklahoma Secretary Of State 2300 N. Lincoln Blvd., Room 101 Oklahoma City, OK 73105</p>	<p>Oregon 503-229-5725 Department Of Justice 1515 SW 5th Avenue, Suite 410 Portland, OR 97201</p>
<p>Pennsylvania 717-783-1720 Bureau Of Charitable Organizations 207 North Office Building Harrisburg, PA 17120</p>	<p>Rhode Island 401-222-5413 Charitable Organization Section 233 Richmond Street, Suite 232 Providence, RI 02903</p>	<p>South Carolina 803-734-1790 Office Of The Attorney General P.O. Box 11350 Columbia, SC 29211</p>
<p>Tennessee 615-741-2555 Division Of Charitable Solicitations 312 Eighth Avenue North, 8th Floor Nashville, TN 37243-0308</p>	<p>Utah 801-630-6601 Division Of Consumer Protection 160 East 300 South Salt Lake City, UT 45804</p>	<p>Virginia 804-786-1343 Office Of The Attorney General 1100 Bank Street Richmond, VA 23219</p>
<p>Washington 360-753-0863 Charitable Solicitation Division 801 Capitol Way South Olympia, WA 98504-0234</p>	<p>Wisconsin 608-266-5511 Dept Of Regulation & Licensing 1400 E. Washington Avenue Madison, WI 53702</p>	<p>West Virginia 304-558-6000 Office Of The Secretary Of State 1900 Kanawha Blvd., East Charleston, WV 25305</p>

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only Part I and check this box ▶
 - 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)

Form 990-T corporations requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs, and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

Electronic Filing (e-file). Form 8868 can be filed electronically if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for corporate Form 990-T filers). However, you cannot file it electronically if you want the additional (not automatic) 3-month extension, instead you must submit the fully completed signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile.

Type or print	Name of Exempt Organization Doris Day Animal League	Employer identification number 95-4117651
File by the due date for filing your return See instructions	Number, street, and room or suite no. If a P.O. box, see instructions. 227 Massachusetts Avenue, NE, No. 100	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions Washington, DC 20002	

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

- | | | |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

- The books are in the care of ▶ Doris Day Animal League
 Telephone No. ▶ (202) 546-1761 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 **Form 990-T corporation**) extension of time until August 15, 2006 to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 - ▶ calendar year 2005 or
 - ▶ tax year beginning _____, and ending _____.
- 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 \$ _____
- 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 \$ _____
- 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 \$ N/A

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.

Cert 1004-2890-0000-9826-3022
523831 05-01-05