

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2012

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

Open to Public Inspection

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

A For the 2012 calendar year, or tax year beginning , and ending

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

C Name of organization
COMMONWEALTH CAT RESCUE INC
 Doing Business As
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
4122 LEONARD DRIVE 300
 City, town or post office, state, and ZIP code
FAIRFAX VA 22030

D Employer identification number
76-0826022

E Telephone number
703-568-3600

G Gross receipts \$ **115,528**

F Name and address of principal officer:
CHRISTOPHER C HASLAM
11837 WAPLES MILL ROAD
OAKTON VA 22124-2113

H(a) Is this a group return for affiliates? Yes No
H(b) Are all affiliates included? Yes No
 If "No," attach a list. (see instructions)

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

J Website: **N/A**

H(c) Group exemption number ▶

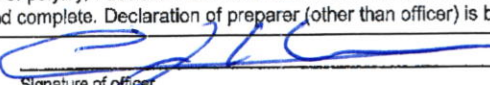
K Form of organization: Corporation Trust Association Other ▶

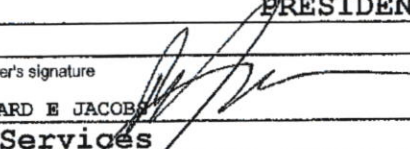
L Year of formation: **2007** **M State of legal domicile:** **VA**

| Part I Summary | | Prior Year | Current Year |
|--|--|------------|--------------|
| Activities & Governance | 1 Briefly describe the organization's mission or most significant activities: RESCUE CATS AND OTHER DOMESTIC PET ANIMALS. AFTER RESCUE ANIMALS ARE HOUSED, CARED FOR, FED, AND PROVIDED MEDICAL ATTENTION UNTIL HOMES CAN BE FOUND FOR THEM. | | |
| | 2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. | | |
| | 3 Number of voting members of the governing body (Part VI, line 1a) | 3 | 3 |
| | 4 Number of independent voting members of the governing body (Part VI, line 1b) | 4 | 3 |
| | 5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) | 5 | 0 |
| | 6 Total number of volunteers (estimate if necessary) | 6 | 120 |
| | 7a Total unrelated business revenue from Part VIII, column (C), line 12 | 7a | 0 |
| b Net unrelated business taxable income from Form 990-T, line 34 | 7b | 0 | |
| Revenue | 8 Contributions and grants (Part VIII, line 1h) | 46,711 | 55,613 |
| | 9 Program service revenue (Part VIII, line 2g) | 0 | 0 |
| | 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) | 0 | 0 |
| | 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | -34 | 3,829 |
| | 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 46,677 | 59,442 |
| Expenses | 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) | 0 | 0 |
| | 14 Benefits paid to or for members (Part IX, column (A), line 4) | 0 | 0 |
| | 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | 0 | 0 |
| | 16a Professional fundraising fees (Part IX, column (A), line 11e) | 0 | 0 |
| | b Total fundraising expenses (Part IX, column (D), line 25) ▶ | 0 | 0 |
| | 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | 52,991 | 51,093 |
| | 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | 52,991 | 51,093 |
| 19 Revenue less expenses. Subtract line 18 from line 12 | -6,314 | 8,349 | |
| Net Assets or Fund Balances | 20 Total assets (Part X, line 16) | 11,794 | 18,979 |
| | 21 Total liabilities (Part X, line 26) | 1,164 | 0 |
| | 22 Net assets or fund balances. Subtract line 21 from line 20 | 10,630 | 18,979 |

Part II Signature Block

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

Sign Here
 Signature of officer:  Date: **10/21/2013**
CHRISTOPHER C HASLAM **PRESIDENT**
 Type or print name and title

Paid Preparer Use Only
 Print/Type preparer's name: **RICHARD E JACOBS** Preparer's signature:  Date: **07/01/13** Check if self-employed PTIN: **P01004503**
 Firm's name: **Padgett Business Services** Firm's EIN: **27-1149253**
 Firm's address: **809 N. Loudoun St Winchester, VA 22601-4947** Phone no.: **540-667-4188**