it displays a valid OMB contro	ol number. The valid OMB cor rage 2 hours per response, inc	ntrol number for this informatic	sor, and a person is not required to on collection is 0579-0036. The ti instructions, searching existing da	me required to c	complete this information	OMB APPROVED 0579-0036 Exp.: 10/31/2018	
This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can resul and to be subject to penalties as provided for in Section 2150.			ons can result in an order to cease	e and desist	Interagency Report Control No. 0180-DOA-AN	Fiscal Year 2016	
UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE				1. REGISTRATION NUMBER 23-R-0061			
			registered with	2. HEADQUARTERS RESEARCH FACILITY (Name, address, and telephone number as registered with USDA, include ZIP Code)			
ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)			LIII I 1765 WEN P.O. BOX 1	MILLENNIUM BIORESEARCH INC 1765 WENTZ ROAD P.O. BOX 178 SPINNERSTOWN, PA 18967			
3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets, if necessary.)							
FACILITY LOCATIONS (Sites)							
REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets, if necessary, or use APHIS FORM 7023A.)							
A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	experime conducte distress t appropria tranquiliz affected interpreta experime of the pro these an	of animals upon which teaching, ents, research, surgery, or tests were ed involving accompanying pain or to the animals and for which the use ate anesthetic, analgesic, or ing drugs would have adversely the procedures, results, or ation of the teaching, research, ents, surgery, or tests. (An explanat occedures producing pain or distress imals and the reasons such drugs used must be attached to this report	TOTAL NUMBER OF ANIMALS (Cols. C + D + E)	
4. Dogs	0	0	0		0	0	
5. Cats	0	0	0		0	0	
6. Guinea Pigs	44	339	0		65	404	
7. Hamsters	0	0	0		0	0	
8. Rabbits	52	214	32		20	266	
9. Non-human Primates	0	0	0		0	0	
10. Sheep	0	0	0		0	0	
11. Pigs	0	0	0		0	0	
12. Other Farm Animals							
13. Other Animals							

ASSURANCE STATEMENTS

1.) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

2.) Each principal investigator has considered alternatives to painful procedures.

3.) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

4.) The attending veterinarian for this research facility has appropriate authority to ensure the provisions of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL					
(Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.))					
I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).					

DATE SIGNED 24-MAY-2017