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Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490





Part II

Balance Sheets

Check if the organization used Schedule O to respond to any question in this Part II ☒

(See the instructions for Part II )		(A) Beginning of year	(B) End of year	
22	Cash, savings, and investments . . . . .	4,105	22	8,771
23	Land and buildings . . . . .	0	23	0
24	Other assets (describe in Schedule O) . . . . .	13,569	24	50,894
25	<b>Total assets</b> . . . . .	17,674	25	59,665
26	<b>Total liabilities</b> (describe in Schedule O) . . . . .	2,549	26	1,732
27	<b>Net assets or fund balances</b> (line 27 of column (B) <b>must</b> agree with line 21) . . . . .	15,125	27	57,933

Part III

Statement of Program Service Accomplishments

Check if the organization used Schedule O to respond to any question in this Part III ☐

What is the organization's primary exempt purpose?  
Our mission is to collect donated, either new or used, veterinary/medical equipment, veterinary based technology and veterinary/medical supplies and distribute them to veterinarians working under the umbrella of nonprofit/non-governmental organizations whose missions are to improve the health and welfare of animals Our goal is to distribute donated supplies to as many animal related, nonprofit/non-governmental organizations worldwide as possible, thereby helping the veterinarians working in those organizations improve the health and welfare of animals

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

28 See Additional Data Table			
(Grants \$ )	If this amount includes foreign grants, check here <input type="checkbox"/>	28a	
29			
(Grants \$ )	If this amount includes foreign grants, check here <input type="checkbox"/>	29a	
30			
(Grants \$ )	If this amount includes foreign grants, check here <input type="checkbox"/>	30a	
31 Other program services (describe in Schedule O) . . . . .			
(Grants \$ )	If this amount includes foreign grants, check here <input type="checkbox"/>	31a	
32 Total program service expenses (add lines 28a through 31a) . . . . .		32	5,062

Part IV

List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated (See the instructions for Part IV )

Check if the organization used Schedule O to respond to any question in this Part IV ☐

(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	(e) Expense account and other allowances
See Additional Data Table				

Part V

Other Information (Note the statement requirements in the instructions for Part V.)

Check if the organization used Schedule O to respond to any question in this Part V

☐

		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O . . . . .	33	No
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions) . . . . .	34	No
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but <b>not</b> reported on Form 990-T, explain in Schedule O why the organization did not report the income on Form 990-T . . . . .		
a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a	No
b	If "Yes" to line 35a, has the organization filed a <b>Form 990-T</b> for the year? If "No," provide an explanation in Schedule O . . . . .	35b	
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III . . . . .	35c	No
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N . . . . .	36	No
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions <input type="checkbox"/> 37a <input type="text" value="0"/>		
b	Did the organization file <b>Form 1120-POL</b> for this year? . . . . .	37b	No
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee <b>or</b> were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a	No
b	If "Yes," complete Schedule L, Part II and enter the total amount involved . . . . .	38b	
39	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on line 9 . . . . .	39a	
b	Gross receipts, included on line 9, for public use of club facilities . . . . .	39b	
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 <input type="checkbox"/> 0, section 4912 <input type="checkbox"/> 0, section 4955 <input type="checkbox"/> 0		
b	Section 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 engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I . . . . .	40b	No
c	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . .		
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c 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? If "Yes," complete Form 8886-T . . . . .	40e	No
41	List the states with which a copy of this return is filed <input type="checkbox"/> CO		
42a	The organization's books are in care of <input type="checkbox"/> Candace E Sayles Brad Telephone no <input type="checkbox"/> (303) 819-2501 51 Pine View Lane Located at <input type="checkbox"/> Boulder, CO ZIP + 4 <input type="checkbox"/> 80302		
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 <input type="checkbox"/> See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts</b> .	42b	No
c	At any time during the calendar year, did the organization maintain an office outside of the U S ? If "Yes," enter the name of the foreign country <input type="checkbox"/>	42c	No
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041</b> —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year . . . . .	43	
44a	Did the organization maintain any donor advised funds? If "Yes", Form 990 must be completed instead of Form 990-EZ.	44a	No
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b	No
c	Did the organization receive any payments for indoor tanning services during the year?	44c	No
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d	
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	No
45b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b	No

		Yes	No
46	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		No

Part VI

Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.

All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 47-49b and 52.

Check if the organization used Schedule O to respond to any question in this Part VI

		Yes	No
47	Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		No
48	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
49a	Did the organization make any transfers to an exempt non-charitable related organization?		No
49b	If "Yes," was the related organization a section 527 organization?		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None "

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None "

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? **NOTE:** All Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A

☒ Yes ☐ No

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	<div></div>	2012-04-27		
	Signature of officer	Date		
Paid Preparer's Use Only	Candace Brad President			
	Type or print name and title			
	Preparer's signature	Date	Check if self-employed	Preparer's taxpayer identification number (See instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4	EIN		Phone no

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

☒ Yes ☐ No

SCHEDULE A  
(Form 990 or 990EZ)

Department of the Treasury  
Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public  
Inspection

Name of the organization PROJECT V E T S	Employer identification number 26-3938168
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Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box )

1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**

2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E )

3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II )

6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7

☐

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II )

8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )

9

☒

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III )

10

☐

An organization organized and operated exclusively to test for public safety See**section 509(a)(4).**

11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h  

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)  
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						

Section B. Total Support							
Calendar year (or fiscal year beginning in)		(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income (Explain in Part IV ) Do not include gain or loss from the sale of capital assets						
11	Total support (Add lines 7 through 10)						
12	Gross receipts from related activities, etc (See instructions )					12	
13	First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage			
14	Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))	14	
15	Public Support Percentage for 2010 Schedule A, Part II, line 14	15	
16a	<b>33 1/3% support test—2011.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization		
b	<b>33 1/3% support test—2010.</b> If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization		
17a	<b>10%-facts-and-circumstances test—2011.</b> If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization		
b	<b>10%-facts-and-circumstances test—2010.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization		
18	<b>Private Foundation</b> If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions		

Part IIIPart III

Support Schedule for Organizations Described in IRC 509(a)(2)  
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")			23,729	36,049	89,414	149,192
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose			0	0	0	0
3 Gross receipts from activities that are not an unrelated trade or business under section 513			0	0	0	0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf			0	0	0	0
5 The value of services or facilities furnished by a governmental unit to the organization without charge			0	0	0	0
6 Total. Add lines 1 through 5	0	0	23,729	36,049	89,414	149,192
7a Amounts included on lines 1, 2, and 3 received from disqualified persons			0	0	0	0
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year			0	0	0	0
c Add lines 7a and 7b	0	0	0	0	0	0
8 Public Support (Subtract line 7c from line 6.)						149,192

Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6	0	0	23,729	36,049	89,414	149,192
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11 and 12.)	0	0	23,729	36,049	89,414	149,192
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here	<input checked="" type="checkbox"/>					

Section C. Computation of Public Support Percentage		
15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
b 33 1/3% support tests—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions	<input checked="" type="checkbox"/>	



**Part IV** **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

Additional Data

Software ID: 11000129

Software Version: v1.00

EIN: 26-3938168

Name: PROJECT V E T S

Form 990-EZ, Special Condition Description:

Special Condition Description
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Form 990EZ, Part III - Statement of Program Service Accomplishments

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.	Expenses (Required for 501(c)(3) and 501(c)(4) organizations and 4947(a)(1) trusts; optional for others.)	
<b>28</b> Provide Veterinary Equipment, Technology and Supplies to Visakha Society for Protection and Care of Animals to help treat hundreds of animals either through treatment of injuries, sterilization, vaccination, etc This improves the health of the entire community Program Service Expenses-Shipping (Grants \$ 2,273) If this amount includes foreign grants, check here . . . <input checked="" type="checkbox"/>	<b>28a</b>	725
<b>29</b> Provide Veterinary Equipment, Technology and Supplies to Dharamsala Animal Rescue to help treat hundreds of animals either through treatment of injuries, sterilization, vaccination, etc This improves the health of the entire community Program Service Expenses-Shipping (Grants \$ 2,331) If this amount includes foreign grants, check here . . . <input checked="" type="checkbox"/>	<b>29a</b>	719
<b>30</b> Provide Veterinary Equipment, Technology and Supplies to People for Animals-Faridabad to help treat hundreds of animals either through treatment of injuries, sterilization, vaccination, etc This improves the health of the entire community Program Service Expenses-Shipping (Grants \$ 2,431) If this amount includes foreign grants, check here . . . <input checked="" type="checkbox"/>	<b>30a</b>	683
Provide Veterinary Equipment, Technology and Supplies to Tanzania Animal Welfare Society to help treat hundreds of animals either through treatment of injuries, sterilization, vaccination, etc This improves the health of the entire community Program Service Expenses-Shipping (Grants \$ 102) If this amount includes foreign grants, check here . . . <input checked="" type="checkbox"/>		330
Provide Veterinary Equipment, Technology and Supplies to Dharamsala Animal Rescue to help treat hundreds of animals either through treatment of injuries, sterilization, vaccination, etc This improves the health of the entire community No Expenses (Grants \$ 3,000) If this amount includes foreign grants, check here . . . <input checked="" type="checkbox"/>		0
Provide Veterinary Equipment, Technology and Supplies to Tanzania Animal Welfare Society to help treat hundreds of animals either through treatment of injuries, sterilization, vaccination, etc This improves the health of the entire community Program Service Expenses-Shipping (Grants \$ 1,305) If this amount includes foreign grants, check here . . . <input checked="" type="checkbox"/>		377
Provide Veterinary Equipment, Technology and Supplies to the Pan African Sanctuary Alliance to help treat resident chimpanzees at 21 Sanctuaries across Africa Program Service Expenses-Shipping (Grants \$ 1,574) If this amount includes foreign grants, check here . . . <input checked="" type="checkbox"/>		84
Provide Veterinary Equipment, Technology and Supplies to Soi Dog Foundation to help treat hundreds of animals either through treatment of injuries, sterilization, vaccination, etc This improves the health of the entire community Program Service Expenses-None (hand delivered) (Grants \$ 405) If this amount includes foreign grants, check here . . . <input checked="" type="checkbox"/>		0
Provide Veterinary Equipment, Technology and Supplies to AWARE Trust to help treat hundreds of animals either through treatment of injuries, sterilization, vaccination, etc This improves the health of the entire community Program Service Expenses-Shipping (Grants \$ 2,659) If this amount includes foreign grants, check here . . . <input checked="" type="checkbox"/>		624
Provide Veterinary Equipment, Technology and Supplies to the Tanzania Animal Welfare Society to help treat hundreds of animals either through treatment of injuries, sterilization, vaccination, etc This improves the health of the entire community Program Service Expenses-Shipping (Grants \$ 253) If this amount includes foreign grants, check here . . . <input checked="" type="checkbox"/>		57
Provide Veterinary Equipment, Technology and Supplies to VIDAS to help treat hundreds of animals either through treatment of injuries, sterilization, vaccination, etc This improves the health of the entire community Program Service Expenses-None (hand delivered) (Grants \$ 1,300) If this amount includes foreign grants, check here . . . <input checked="" type="checkbox"/>		0
Provide Veterinary Equipment, Technology and Supplies to the Tsunami Animal-People Alliance to help treat hundreds of animals either through treatment of injuries, sterilization, vaccination, etc This improves the health of the entire community Program Service Expenses-Shipping (Grants \$ 271) If this amount includes foreign grants, check here . . . <input checked="" type="checkbox"/>		13
Provide Veterinary Equipment, Technology and Supplies to the Arkansas Native Plant and Animal Trust to help treat hundreds of animals either through treatment of injuries, sterilization, vaccination, etc This improves the health of the entire community Program Service Expenses-Shipping (Grants \$ 837) If this amount includes foreign grants, check here . . . <input type="checkbox"/>		56
Provide Veterinary Equipment, Technology and Supplies to Veterinarians Without Borders-US to help treat hundreds of animals either through treatment of injuries, sterilization, vaccination, etc This improves the health of the entire community Program Service Expenses-Shipping (Grants \$ 153) If this amount includes foreign grants, check here . . . <input type="checkbox"/>		24
Provide Veterinary Equipment, Technology and Supplies to Mountain Gorilla Veterinary Project to help treat and save endangered Mountain Gorillas Program Service Expenses-Shipping (Grants \$ 28) If this amount includes foreign grants, check here . . . <input checked="" type="checkbox"/>		13
Provide Veterinary Equipment, Technology and Supplies to Mazie's Mission to help treat hundreds of animals either through treatment of injuries, sterilization, vaccination, etc This improves the health of the entire community Program Service Expenses-Shipping (Grants \$ 100) If this amount includes foreign grants, check here . . . <input type="checkbox"/>		17
Provide Veterinary Equipment, Technology and Supplies to Humane Society of Concord to help treat hundreds of animals either through treatment of injuries, sterilization, vaccination, etc This improves the health of the entire community Program Service Expenses-Shipping (Grants \$ 100) If this amount includes foreign grants, check here . . . <input type="checkbox"/>		22
Provide Veterinary Equipment, Technology and Supplies to Romania Animal rescue to help treat hundreds of animals either through treatment of injuries, sterilization, vaccination, etc This improves the health of the entire community Program Service Expenses-Shipping (Grants \$ 742) If this amount includes foreign grants, check here . . . <input checked="" type="checkbox"/>		23
Provide Veterinary Equipment, Technology and Supplies to Dr Jerry Busselman through CAMA to help treat hundreds of animals either through treatment of injuries, sterilization, vaccination, etc This improves the health of the entire community Program Service Expenses-Shipping (Grants \$ 375) If this amount includes foreign grants, check here . . . <input checked="" type="checkbox"/>		13
Provide Veterinary Equipment, Technology and Supplies to Mazie's Mission to help treat hundreds of animals either through treatment of injuries, sterilization, vaccination, etc This improves the health of the entire community Program Service Expenses-Shipping (Grants \$ 2,267) If this amount includes foreign grants, check here . . . <input type="checkbox"/>		99
Provide Veterinary Equipment, Technology and Supplies to Mdzananda Animal Clinic to help treat hundreds of animals either through treatment of injuries, sterilization, vaccination, etc This improves the health of the entire community Program Service Expenses-Shipping (Grants \$ 2,126) If this amount includes foreign grants, check here . . . <input checked="" type="checkbox"/>		293
Provide Veterinary Equipment, Technology and Supplies to Humane Society of Concord to help treat hundreds of animals either through treatment of injuries, sterilization, vaccination, etc This improves the health of the entire community Program Service Expenses-Shipping (Grants \$ 76) If this amount includes foreign grants, check here . . . <input type="checkbox"/>		58
Provide Veterinary Equipment, Technology and Supplies to Wild Horizons Wildlife Trust to help treat hundreds of animals either through treatment of injuries, sterilization, vaccination, etc This improves the health of the entire community Program Service Expenses-Shipping (Grants \$ 2,614) If this amount includes foreign grants, check here . . . <input checked="" type="checkbox"/>		600
Provide Veterinary Equipment, Technology and Supplies to Soi Dog Foundation to help treat hundreds of animals either through treatment of injuries, sterilization, vaccination, etc This improves the health of the entire community Program Service Expenses-Shipping (Grants \$ 472) If this amount includes foreign grants, check here . . . <input checked="" type="checkbox"/>		56
Provide Veterinary Equipment, Technology and Supplies to Tanzania Animal Welfare Society to help treat hundreds of animals either through treatment of injuries, sterilization, vaccination, etc This improves the health of the entire community Program Service Expenses-Shipping and purchase of replacement cord for computer (Grants \$ 73) If this amount includes foreign grants, check here . . . <input checked="" type="checkbox"/>		83
Provide Veterinary Equipment, Technology and Supplies to Soi Dog Foundation to help treat hundreds of animals either through treatment of injuries, sterilization, vaccination, etc This improves the health of the entire community Program Service Expenses-None (hand delivered) (Grants \$ 1,792) If this amount includes foreign grants, check here . . . <input checked="" type="checkbox"/>		0
Provide Veterinary Equipment, Technology and Supplies to Humane Society of Concord to help treat hundreds of animals either through treatment of injuries, sterilization, vaccination, etc This improves the health of the entire community Program Service Expenses-Shipping (Grants \$ 1,353) If this amount includes foreign grants, check here . . . <input type="checkbox"/>		74
Provide Veterinary Equipment, Technology and Supplies to Hope 4 Fuzie Faniez to help treat hundreds of animals either through treatment of injuries, sterilization, vaccination, etc This improves the health of the entire community Program Service Expenses-None (hand delivered) (Grants \$ 2,081) If this amount includes foreign grants, check here . . . <input type="checkbox"/>		0
Provide Veterinary Equipment, Technology and Supplies to Mountain Gorilla Veterinary Project to help treat and save endangered Mountain Gorillas This improves the health of the entire community Program Service Expenses-None (hand delivered) (Grants \$ 220) If this amount includes foreign grants, check here . . . <input checked="" type="checkbox"/>		0
Provide Veterinary Equipment, Technology and Supplies to Wild Horizons Wildlife Trust to help treat hundreds of animals either through treatment of injuries, sterilization, vaccination, etc This improves the health of the entire community Program Service Expenses-None (hand delivered) (Grants \$ 872) If this amount includes foreign grants, check here . . . <input checked="" type="checkbox"/>		0
Provide Veterinary Equipment, Technology and Supplies to the Karanambu Trust to help treat hundreds of animals either through treatment of injuries, sterilization, vaccination, etc This improves the health of the entire community Program Service Expenses-Shipping (Grants \$ 142) If this amount includes foreign grants, check here . . . <input checked="" type="checkbox"/>		19
Provide Veterinary Equipment, Technology and Supplies to Hope 4 Fuzie Faniez to help treat hundreds of animals either through treatment of injuries, sterilization, vaccination, etc This improves the health of the entire community Program Service Expenses-None (hand delivered) (Grants \$ 2,631) If this amount includes foreign grants, check here . . . <input type="checkbox"/>		0
Provide Veterinary Equipment, Technology and Supplies to the Colorado Animal Welfare League to help treat hundreds of animals either through treatment of injuries, sterilization, vaccination, etc This improves the health of the entire community Program Service Expenses-None (hand delivered) (Grants \$ 1,475) If this amount includes foreign grants, check here . . . <input type="checkbox"/>		0
Provide Veterinary Equipment, Technology and Supplies to Animal Balance to help treat hundreds of animals either through treatment of injuries, sterilization, vaccination, etc This improves the health of the entire community Program Service Expenses-None (hand delivered) (Grants \$ 2,008) If this amount includes foreign grants, check here . . . <input checked="" type="checkbox"/>		0

**Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees**

<b>(A) Name and address</b>	<b>(B) Title and average hours per week devoted to position</b>	<b>(C) Compensation (If not paid, enter -0-.)</b>	<b>(D) Contributions to employee benefit plans &amp; deferred compensation</b>	<b>(E) Expense account and other allowances</b>
Candace E Sayles Brad 51 Pine View Lane Boulder, CO 80302	President, Secretary 15	0	0	0
Claire L Campbell 228 Arapahoe Ave Boulder, CO 80302	Vice President, Treasurer 5	0	0	0
Karen A McCormick Perry 2949 Breakwater Dr Longmont, CO 80503	Director 0 1	0	0	0
Jillian Weems 1670 Lost Angel Rd Boulder, CO 80302	Director 0 5	0	0	0
Diane Brinkmann 512 Valley View Drive Boulder, CO 80304	Director 0 1	0	0	0

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on  
Form 990 or to provide any additional information.  
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2011

Open to Public  
Inspection

Name of the organization PROJECT V E T S	Employer identification number 26-3938168
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Identifier	Return Reference	Explanation
F99Z_P01_S00_L10	Form 990-EZ, Part I, Line 10	1) DONEE'S NAME Tanzania Animal Welfare Society, DESCRIPTION OF PROPERTY Veterinary Equipment, Technology and Supplies, DATES OF GIFTS 1/8/11, 4/2/11, 5/31/11, 12/8/11, FMV \$1733 2) DONEE'S NAME Soi Dog Foundation, DESCRIPTION OF PROPERTY Veterinary Equip, Tech and Supplies, DATES OF GIFTS 1/13/11, 8/2/11, 12/5/11, FMV \$2669 3) DONEE'S NAME Mountain Gorilla Veterinary Project, DESCRIPTION OF PROPERTY Veterinary Equip, Tech and Supplies, DATES OF GIFTS 6/30/11, 10/13/11, FMV \$248 4)DONEE'S NAME Veterinarians Without Borders-US, DESCRIPTION OF PROPERTY Veterinary Equip, Tech and Supplies, DATES OF GIFTS 7/13/11, FMV \$153 5)DONEE'S NAME Karanambu Trust, DESCRIPTION OF PROPERTY Veterinary Equip, Tech and Supplies, DATES OF GIFTS 7/8/11, FMV \$142 6)DONEE'S NAME Tsunami Animal-People Alliance DESCRIPTION OF PROPERTY Veterinary Equip, Tech and Supplies, DATES OF GIFTS 7/10/11 FMV \$271 7)DONEE'S NAME VIDAS, DESCRIPTION OF PROPERTY Veterinary Equip, Tech and Supplies, DATES OF GIFTS 7/10/11 FMV \$1300 8)DONEE'S NAME Mazie's Mission, DESCRIPTION OF PROPERTY Veterinary Equip, Tech and Supplies, DATES OF GIFTS 8/2/11, 10/7/11 FMV \$2367 9)DONEE'S NAME Romania Animal Rescue, DESCRIPTION OF PROPERTY Veterinary Equip, Tech and Supplies, DATES OF GIFTS 8/9/11, FMV \$742 10)DONEE'S NAME Humane Society of Concord, DESCRIPTION OF PROPERTY Veterinary Equip, Tech and Supplies, DATES OF GIFTS 8/18/11, 10/9/11, 12/8/11, FMV \$1529 11)DONEE'S NAME Jerry Busselman, DESCRIPTION OF PROPERTY Veterinary Equip, Tech and Supplies, DATES OF GIFTS 8/31/11 FMV \$375 12)DONEE'S NAME Mzananda Animal Clinic DESCRIPTION OF PROPERTY Veterinary Equip, Tech and Supplies, DATES OF GIFTS 9/2/11, FMV \$2126 13)DONEE'S NAME Pan African Sanctuary Alliance, DESCRIPTION OF PROPERTY Veterinary Equip, Tech and Supplies, DATES OF GIFTS 10/7/11, FMV \$1574 14)DONEE'S NAME Animal Balance, DESCRIPTION OF PROPERTY Veterinary Equip, Tech and Supplies, DATES OF GIFTS 10/14/11, FMV \$2008 15)DONEE'S NAME Colorado Animal Welfare League, DESCRIPTION OF PROPERTY Veterinary Equip, Tech and Supplies, DATES OF GIFTS 10/14/11, FMV \$1475 16)DONEE'S NAME Dharamsala Animal Rescue, DESCRIPTION OF PROPERTY Veterinary Equip, Tech and Supplies, DATES OF GIFTS 11/15/11, 12/15/11, FMV \$5331 17)DONEE'S NAME People For Animals-Faridabad, DESCRIPTION OF PROPERTY Veterinary Equip, Tech and Supplies, DATES OF GIFTS 11/18/11, FMV \$2431 18)DONEE'S NAME Visakha Society for Protection and Care of Animals, DESCRIPTION OF PROPERTY Veterinary Equip, Tech and Supplies, DATES OF GIFTS 11/18/11, FMV \$2273 19)DONEE'S NAME AWARE Trust, DESCRIPTION OF PROPERTY Veterinary Equip, Tech and Supplies, DATES OF GIFTS 11/27/11, FMV \$2659 20)DONEE'S NAME Wild Horizons Wildlife Trust, DESCRIPTION OF PROPERTY Veterinary Equip, Tech and Supplies, DATES OF GIFTS 12/6/11, 12/31/11, FMV \$3486 21)DONEE'S NAME Arkansas Native Plant and Animal Trust, DESCRIPTION OF PROPERTY Veterinary Equip, Tech and Supplies, DATES OF GIFTS 11/26/11, FMV \$837 22)DONEE'S NAME Hope 4 Fuzie Faniez DESCRIPTION OF PROPERTY Veterinary Equip, Tech and Supplies, DATES OF GIFTS 12/27/11, 12/31/11, FMV \$4713
F99Z_P01_S00_L16	Form 990-EZ, Part I, Line 16	Description,Amount^Advertising,400 Business Registration Fees,10 Credit Card Handling Fees,46 Office Expenses,203 Equipment Purchase for donation to Recipient Org,27 State of Colorado Periodic Report,25 Accounting software purchase,25^Total,736^
F99Z_P02_S00_L24	Form 990-EZ, Part II, Line 24	Description,Eoy Amount^Inventory of Veterinary Equipment and Supplies,50894^Total,50894^
F99Z_P02_S00_L26	Form 990-EZ, Part II, Line 26	Description,Eoy Amount^Accounts Payable and Accrued Expenses,1732^Total,1732^