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Form 990-EZ

Short Form

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)

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions) All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form

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

OMB No 1545-1150

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

A For the 2011 calendar year, or tax year beginning 01-01-2011, and ending 12-31-2011

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

C Name of organization: PROJECT V E T S. Number and street (or P O box, if mail is not delivered to street address): 51 Pine View Lane. Room/suite: . City or town, state or country, and ZIP + 4: Boulder, CO 80302

D Employer identification number: 26-3938168. E Telephone number: (303) 819-2501. F Group Exemption Number: .

G Accounting method: [X] Cash [] Accrual [] Other (specify) .

H Check [] if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: www.projectvets.org

J Tax-Exempt status (check only one): [X] 501(c)(3) [] 501(c) () (insert no) [] 4947(a)(1) or [] 527

K Check [] if the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000 A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions) But if the organization chooses to file a return, be sure to file a complete return

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ \$ 89,414

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

Check if the organization used Schedule O to respond to any question in this Part I [X]

Table with 3 main sections: Revenue (lines 1-9), Expenses (lines 10-17), and Net Assets (lines 18-21). Includes sub-rows for detailed revenue and expense categories.

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 Total assets	17,674	25 59,665
26 Total liabilities (describe in Schedule O)	2,549	26 1,732
27 Net assets or fund balances (line 27 of column (B) must 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

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)

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

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
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
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, explain in Schedule O why the organization did not report the income on Form 990-T
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year?
37a Enter amount of political expenditures, direct or indirect, as described in the instructions
37b Did the organization file Form 1120-POL for this year?
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?
38b If "Yes," complete Schedule L, Part II and enter the total amount involved
39 Section 501(c)(7) organizations. Enter
39a Initiation fees and capital contributions included on line 9
39b Gross receipts, included on line 9, for public use of club facilities
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911, section 4912, section 4955
40b 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?
40c 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
40d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization
40e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?
41 List the states with which a copy of this return is filed
42a The organization's books are in care of
42b 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?
42c At any time during the calendar year, did the organization maintain an office outside of the U S?
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041
44a Did the organization maintain any donor advised funds?
44b Did the organization operate one or more hospital facilities during the year?
44c Did the organization receive any payments for indoor tanning services during the year?
44d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments?
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
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)?

	Yes	No
46		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

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		No
48		No
49a		No
49b		

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

48 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

49a Did the organization make any transfers to an exempt non-charitable related organization?

b 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	Signature of officer		2012-04-27	
	Candace Brad President		Date	
Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	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)

Public Charity Status and Public Support

OMB No 1545-0047

2011

Open to Public Inspection

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.

Department of the Treasury
Internal Revenue Service

Name of the organization
PROJECT V E T S

Employer identification number

26-3938168

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 33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 33 1/3% support test—2010. 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 stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2011. 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 stop here. Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2010. 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 stop here. Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions <input type="checkbox"/>		

Part 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
- 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
- 20 Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

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

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.)
28 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"/>	725
29 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"/>	719
30 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"/>	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

(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
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

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^